Diabetes Patient Concept Map

A patient-centered concept map with a narrative. Consider the physical, psychosocial, and cultural considerations for this health care problem and identify critical resources available in your community that are required for a safe continuum of care.

Integrate and interpret [nurs fpx 6103 teaching about legal and ethical issues assessment 5 kp](#) from 3-5 current scholarly or professional sources in your submission. Apply proper APA formatting to all references and citations.

Assessment 1

The development of a diabetes patient concept map can be a useful tool in nursing care. This technique allows nurses to explore and analyze different nursing diagnoses, which can lead to better treatment planning. It also helps nurses to organize information and connect it to existing knowledge. Moreover, the tool can help nurses to understand and remember complex medical terms.

This study used a client-centered approach to identify barriers to achieving the desired health outcomes for people experiencing homelessness and diabetes. Eight clients who have both experience of homelessness and diabetes participated in the study. They rated a number of statements about barriers to diabetes management. The statements were sorted into clusters [nurs fpx 6216 budget negotiations and communication](#) on their ratings. The clients' clusters included challenges to accessing healthy food; financial limitations; competing priorities; and not having a place of their own. The providers' clusters included Navigating services; relationships with professionals; and lack of stable, private housing.

The concept mapping method is an effective way to identify and prioritize individual comorbidities associated with type 2 diabetes mellitus. It is important to recognize and address these comorbidities in order to improve diabetes treatment through symptom reduction. The comorbidities identified by the participants in this study were related to housing, health and social care, psychosocial well-being, and diabetes education. The clients' top-rated barrier was challenges to accessing healthy food, which may have been influenced by their perceptions of the importance of diabetes education for their self-management.

Assessment 2

Identify and locate resources to help you research and address the health care issue that you are currently investigating. Use the Vila Health Determining Credibility activity to help you determine what makes a resource credible for your investigation.

Using the Assessment Builder screen, you can add content and control settings to an assessment. You can also create a randomized set of questions for the assessment to ensure that each student sees different questions at each attempt. You can choose to display grade statistics, such as the maximum score, highest and lowest scores, average, and standard deviation, for students who complete the assessment.

To add a randomized set of questions, click the Questions area in the Assessment

Builder screen and then select Randomize Items. You can [nurs fpx4060 assessment 2 community resources ps](#) from several question types including multiple choice, true/false, essay, drawing, and drag and drop. You can also enter Author Notes to provide additional instructions or information that will not be displayed to students on the assessment.

Once you have added a randomized set of questions, you can edit the assessment settings from the Options row in the Assessment Builder screen. For example, you can enable or disable Submissions, set the number of times students can submit to the assessment, and specify if and when the assessment will be visible to students. You can also specify whether or not the lowest or highest answer should be used to calculate a final grade.

Assessment 3

The third step involves interpreting the data. The clients were reconvened for an in-person meeting to discuss their ideas and the researchers used these discussions to help frame the interpretation of the results and decide on names for each of the nine barrier clusters. Because the providers were not able to come together for this in-person meeting, their clusters were named by the research team.

The most important cluster for the clients was Challenges to getting healthy food, followed by Inadequate income and Navigating services. These two clusters were highly rated by the clients and are consistent with other qualitative studies that have documented the importance of these barriers to diabetes self-management for this population. The lowest rated cluster was Competing priorities, and this is also consistent with other studies that have found that clients tend to prioritize their own needs over [pad3800 rvc 1198 module 8 case 2 response form ms](#) of the health system and may not see the connection between a lack of stable housing and poor diabetes management.

The next step in this process was to combine the information from these individual mapping activities into one comprehensive map of the patients' biopsychosocial barriers to diabetes care. This concept map was then used to determine the appropriate nursing diagnoses, treatments and intended outcomes. This is a critical component of evidence-based practice, a key skill of master's-prepared nurses.

Assessment 4

Diabetes mellitus is a complex medical disorder that can cause a wide range of complications. Understanding and identifying these complications can help in improving type 2 diabetes management through symptom reduction. Concept mapping is a tool that can be used to organize information on comorbidities and their effects. It helps nurses to determine the most effective nursing [COM FPX 3700 Assessment 2 Institutional Conflict CM](#) for obtaining the best possible care outcomes.

To develop the diabetes patient concept map, 32 clients and 96 providers generated statements by responding to a focus prompt ("To eliminate disparities and achieve health equity in the prevention and treatment of diabetes, research should…"). Statements were then sorted, clustered, and rated using a multidimensional scaling approach. The results were analyzed and compared to identify differences between client and provider ratings for each cluster of statements.

Statistically significant differences in the rating of the cluster containing statements regarding challenges to accessing healthy food were identified. This may indicate that clients have a lower level of awareness about the impact of their current economic situation on their diabetes management than do their providers, and that this lack of awareness is an important barrier to [NR500 Week 7 Cultivating Healthful Environments](#) self-management.

Other differences between the clusters containing statements related to competing priorities and those describing relationships with professionals were also identified. These findings suggest that there are opportunities for interprofessional tactics to be developed to help deliver patient guidance and improve diabetes care.