Disseminating Nursing Best Practices in Diabetes Home Care Utilizing Standardized Language within a Global Context

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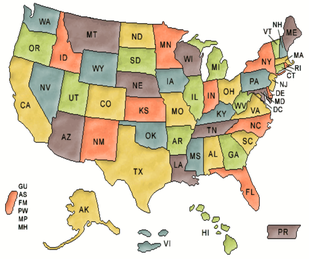
BACKGROUND

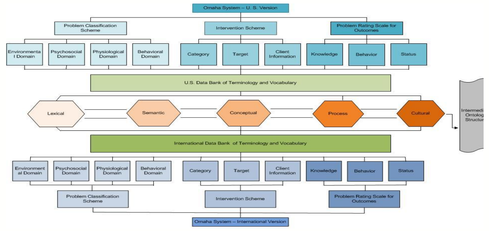
Pressing needs have emerged to promote diabetes care in China along with its strong economic growth. As a major global health issue, diabetes is now becoming the world's biggest epidemic in China. With 92 million people suffering diabetes, China has the most diabetes cases worldwide.[1] Multi-partnership through global efforts has been implemented in the past to improve diabetic care in China based on a Share-Care Community Model.[2] Community-based home care has been given a global focus on the initiation of best nursing practices through the employment of the standardized language, the Omaha System,[3] by the Minnesota Omaha System Users Group. The purpose of this poster is to describe a translational process based on a conceptual model to disseminate the best practices in diabetes prevention and management in home care pathways through the Chinese language care plan.

DIABETES HOME CARE PLAN

Health data and information have become more unified through standardized terminology and language such as the Omaha System. To advance health care promotion and management in a global setting, a process should be considered to engage standardization of the translation process to disseminate best nursing practices in a global environment. The Omaha System care plans have summarized best nursing practices for patient care of various populations in community and home care, including a home care nursing plan for people with diabetes.[4] This presentation particularly describes the translation and application of a practice-based diabetes home care plan in the Chinese language through a standardized approach, vocabulary mapping based on a proposed conceptual translation model. Cultural consideration, in particular, will be applied to the context of a practice-based care plan in this healthcare environment.

TRANSLATION IN STANDARDIZED LANGUAGE





Internationalization Architecture of Omaha System (copyright Grace Gao, 2011)

问题	症状/体征	类别	导向	护理描述
	营养			
营养	☐ 超重：成人体重指数在25或以上；儿童体重指数在第95百分位数或以上	个案管理	连续护理	转介营养师
营养	☐ 过轻：成人体重指数在18.5或以下；儿童体重指数在第5百分位数或以下	个案管理	饮食管理	获得推荐食品的资源
营养	☐ 缺乏每日热量/液体摄取量的既定标准	监测	饮食管理	遵循所推荐的营养计划（如治疗饮食）
营养	☐ 超出每日热量/液体摄取量的既定标准	监测	饮食管理	准备推荐的营养计划的能力
营养	☐ 饮食不均衡	监测	饮食管理	按推荐的营养计划进食的能力
营养	☐ 喂养计划与年龄不符	监测	饮食管理	体重减少/增加
营养	☐ 没有遵循推荐的营养计划	教育、指导和咨询	行为修正	改变饮食习惯
营养	☐ 原因不明的/渐进性的体重减轻	教育、指导和咨询	行为修正	营养修正
营养	☐ 不能得到/准备食物	教育、指导和咨询	饮食管理	根据年龄/病情，饮食治疗而推荐营养计划，健康饮食
营养	☐ 低血糖	教育、指导和咨询	营养师护理	建立糖尿病的营养需求
营养	☐ 高血糖	治疗和程序	饮食管理	通过均衡食物和液体来获取营养以提供特定疾病管理
营养	☐ 其它	治疗和程序	喂食程序	正确的公式，数量，技巧和日程表
Problem	signs_symptoms	Category	Target	Care description
	Nutrition			
Nutrition	☐ overweight: adult BMI 25.0 or more; child BMI 95th percentile or more	Case Management	continuity of care	Referral to nutritionist
Nutrition	☐ underweight: adult BMI ☐5 or less; child BMI 5th percentile or less	Case Management	dietary management	Resources for obtaining recommended foods
Nutrition	☐ lacks established standards for daily caloric/fluid intake	Surveillance	dietary management	Follows recommended nutritional plan (e.g. therapeutic diet)
Nutrition	☐ exceeds established standards for daily caloric/fluid intake	Surveillance	dietary management	Ability to prepare recommended nutritional plan
Nutrition	☐ unbalanced diet	Surveillance	dietary management	Ability to consume recommended nutritional plan
Nutrition	☐ improper feeding schedule for age	Surveillance	dietary management	Weight loss/gain
Nutrition	☐ does not follow recommended nutrition plan	Teaching, Guidance, Counseling	behavior modification	Alter eating habits
Nutrition	☐ unexplained/progressive weight loss	Teaching, Guidance, Counseling	behavior modification	Nutrition modification
Nutrition	☐ unable to obtain/prepare food	Teaching, Guidance, Counseling	dietary management	Recommended nutritional plan, healthy eating for age/condition, therapeutic diet
Nutrition	☐ hypoglycemia	Teaching, Guidance, Counseling	nutritionist care	Establish diabetic nutrition needs
Nutrition	☐ hyperglycemia	Treatments and Procedures	dietary management	Nourishment with balanced food/fluids for specific disease management
Nutrition	☐ other	Treatments and Procedures	feeding procedures	Correct formula, amount, technique, and schedule

TRANSLATION MODEL

When initiating the translation process of electronic tools for diabetes management within the global context of health management exchange in China, a standardized translation model for vocabulary mapping should be taken into consideration to harmonize these two languages and achieve a shared purpose of information representation. A special intermediate tool should be used to convert the vocabularies of these systems and align them in one harmonious context based on multiple constructs of a vocabulary mapping that harmonizes the two languages with standardization. Specific constructs should be put into the context of lexical, semantic, conceptual, process, and cultural considerations. This way, health management tools can become a standardized data and information exchange resource and discourse for health management and outcome measurement in a community health setting within a global context.

SPECIAL CONSIDERATION

The diabetic care plan in both English and Chinese versions is available on-line. Next steps: collaboration with the government's agenda will be sought to involve the government in the improvement process of diabetic care and education together with any efforts to set up nationalized computer networks for diabetic care.

糖尿病
最佳
护理

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