

**Assessment 1: Proposing Evidence-Based Change**

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# NURS FPX 6218 ASSESSMENT 1

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## Change Proposal Executive Summary

The primary aim of this executive summary is to advocate for a revision in the management of peripheral neuropathy among diabetic patients within healthcare organizations across Colorado. An extensive examination of peripheral neuropathy has been conducted, including a comparative analysis of its management in healthcare systems outside the United States. The objective is to identify effective measures and strategies in change proposals to enhance the health outcomes of individuals with diabetes by addressing complications associated with peripheral neuropathy.

### Proposed Change

Peripheral neuropathy poses a significant challenge for individuals with diabetes, resulting in pain, sensory loss, and paraesthesia. Diabetic peripheral neuropathy (DPN) affects 50% of diabetics, leading to a 20% risk of foot ulcers and potential leg amputations. To address these severe consequences, concerted efforts are needed to advocate for aggressive screening and management of diabetes through regular HbA1c monitoring, foot examination, and pain management.

Within the local healthcare systems of Colorado, peripheral neuropathy has emerged as a pressing issue for diabetic patients, resulting in symptoms such as numbness, pain, foot ulcers, and leg amputations. Recognizing the significant impact of diabetic peripheral neuropathy on

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patients' quality of life, it is crucial to focus on transforming this specific area of care. By implementing recommended practices, such as annual foot examinations outlined by the American Diabetes Association, and improving glycemic control through lifestyle modifications and pharmacotherapy, the onset and progression of peripheral neuropathy can be mitigated.

#### Desired Outcomes

The proposed changes in diabetes management, including adequate foot examination, foot care, and patient education, aim to achieve several desired outcomes:

**Prevention of Neuropathy Complications:** Timely management of diabetes and peripheral neuropathy can prevent complications such as infections, delayed healing, foot ulcers, and leg amputations.

**Enhanced Sensation:** Improved glycemic levels can enhance sensation to respond to physical stimuli, preventing injuries associated with peripheral neuropathy.

**Improved Mobility and Preservation of Limb Function:** Lifestyle modifications and glycemic control can promote mobility, balance, and coordination, reducing the risk of falls and allowing individuals with diabetes to stay active.

Achieving these outcomes requires adequate resources, including financial support and inter-professional collaboration, to implement the proposed changes. Stakeholders, including healthcare organizations and external resources like Medicare and Medicaid programs, play a crucial role in supporting and facilitating these changes.

#### Health Care System Comparative Analysis

A comparative analysis of peripheral neuropathy management in the National Health Service (NHS) in the United Kingdom and the Australian healthcare system revealed valuable insights. Both systems emphasize regular foot examinations, patient education, and preventive measures to address diabetic peripheral neuropathy. Implementing similar strategies, such as educational events and digital platforms, can enhance the effectiveness of diabetes management in Colorado.

#### Rationale for the Proposed Change

The proposed changes, guided by the NICE guidelines and DFA recommendations, aim to improve outcomes for diabetic patients with peripheral neuropathy. By preventing and managing peripheral neuropathy effectively, patients with diabetes can experience a longer lifespan with intact mobility, reduced risk of lower limb amputation, and improved overall quality of life.

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### Financial and Health Implications

Implementing the proposed changes can have significant financial and health implications. Timely prevention of peripheral neuropathy can reduce the financial burden on patients and healthcare organizations by avoiding the costs associated with treating advanced neuropathy. The cost-effective screening and management strategies outlined in the proposal can improve glycemic control, reduce hospitalizations, and enhance the overall quality of life for individuals with diabetes.

### Conclusion

This executive summary highlights the emerging issue of peripheral neuropathy in diabetic patients within the local healthcare systems of Colorado. Drawing insights from international healthcare systems, particularly the UK and Australian models, this report proposes changes that can potentially improve financial and health outcomes for diabetic patients with peripheral neuropathy.

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