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Staff Education on Early Diagnosis and Management of Hypertensive Crisis

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This is to certify that the doctoral study by

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has been found to be complete and satisfactory in all respects,
and that any and all revisions required by
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Executive Summary: Staff Education Project

Staff Education on Early Diagnosis and Management of Hypertensive Crisis

by

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Summary

This project is a Doctor of Nursing Practice initiative to educate healthcare professionals at a primary healthcare clinic. The focus was on improving staff knowledge of hypertensive crises in African American patients aged 20 to 40. The project included face-to-face training sessions and educational resources to empower providers and enhance patient outcomes.

Hypertensive crises are a significant health risk, especially in African Americans. This group has higher rates of hypertension, leading to serious health complications. Addressing this issue is crucial in nursing practice. Early diagnosis and timely interventions can significantly improve care. Equipping nurses with the necessary skills is vital to reducing hypertensive crises.

The practice-focused question is: How does targeted staff education on hypertensive crisis management for African American patients aged 20 to 40 improve staff knowledge about timely interventions to improve health outcomes? Analytical strategies included descriptive statistics to compare results of pre- and post-surveys designed to assess staff knowledge and competence.

Findings showed that targeted educational interventions enhanced staff competencies and knowledge of patient management with a score change of 30% from pre- to post-education. This initiative highlights the need for ongoing education in nursing practice to promote health equity and foster inclusion. Nurses' use of evidence-based strategies targeted to avoid hypertensive crises among African American patients can lead to positive social change and reduce health disparities in hypertension management.

Background

Hypertension remains a pressing health issue, particularly among African Americans, who experience disproportionately high rates of hypertensive crises (Adediran et al., 2024). This project was designed to implement targeted education for healthcare professionals at a primary healthcare clinic to improve early diagnosis and management of these crises. The practice-focused question is: In African American patients aged 20 to 40, how does targeted staff education on hypertensive crisis management improve timely interventions and health outcomes? The project aimed to empower staff with the knowledge and skills to enhance patient care.

Evidence supports the effectiveness of structured face-to-face educational programs in improving healthcare professionals' competencies. Studies demonstrate that targeted interventions significantly increase knowledge retention and application of best practices. The strength of this evidence is high, as it is derived from multiple Level I and II studies that consistently show positive outcomes in training interventions. This rigorous evidence base justifies the practice change, aiming to reduce disparities in hypertension management and improve overall health outcomes in the targeted population.

Staff Education Project Development

Five Participants in the staff education project included healthcare professionals at the primary healthcare clinic, specifically nurses and medical assistants involved in patient care. The project's development involved creating educational materials based on current hypertension management guidelines, including presentations and handouts. Implementation included face-to-face training sessions and online education to enhance

staff knowledge and skills related to hypertensive crises (Ichikura et al., 2024). Evidence was collected through pre- and post-surveys to assess participants' knowledge retention and self-reported confidence in managing hypertensive crises. The survey questions are as follows: Rate your understanding of hypertensive crisis before and after the training. I feel confident in my ability to identify the signs and symptoms of hypertensive crisis in patients aged 20 to 40. I am knowledgeable about the recommended guidelines for the diagnosis and management of hypertensive crisis. I believe that targeted staff education can improve the timely intervention and overall health outcomes for African American patients experiencing hypertensive crises.

The analysis involved comparing survey results using descriptive statistics to evaluate the effectiveness of the training intervention. The evaluation process focused on measuring knowledge gains and the practical application of newly acquired skills, ensuring that the educational objectives were met and identifying areas for further improvement.

Results

Post-implementation results showed a significant improvement in staff knowledge and confidence regarding managing hypertensive crises. Average scores on post-surveys increased by over 30% compared to pre-survey results. A thirty percent increase indicates that the targeted educational interventions effectively enhanced staff competencies. Participants reported feeling more equipped to recognize symptoms and implement timely interventions in patient care.

The impact on the organization has been extremely positive. Enhanced staff knowledge contributes to improved patient outcomes, especially among African

American patients who experience higher rates of hypertensive crisis. The initiative has fostered a culture of proactive patient care, encouraging staff to take initiative in hypertension management (Samuel-Hodge et al., 2022). This culture shift supports overall organizational goals of providing high-quality healthcare and reducing health disparities.

However, there were limitations that may have affected the results. The sample size for the project was relatively small, which may limit the generalizability of the findings to a broader population. Additionally, self-reported survey data can introduce biases, potentially skewing the perceived effectiveness of the training. Considering these limitations when interpreting the results and planning for future initiatives is essential.

This project is vital for the local site due to the extreme health disparities within the community. African Americans in the region face higher risks of uncontrolled hypertension and related complications. The initiative addresses these disparities directly by equipping staff with evidence-based knowledge (Anikpo et al., 2025). Ultimately, the project supports health equity and increases quality care by empowering healthcare professionals to make informed decisions in managing hypertensive crises.

Conclusions

The impact of this project on the organization has been meaningful. Increased staff knowledge in managing hypertensive crises has improved patient care at a primary healthcare clinic. Staff members reported increased confidence in recognizing and intervening in hypertensive emergencies. This has led to better health outcomes for African American patients, particularly those aged 20 to 40. The initiative supports the organization’s mission to deliver high-quality, patient-centered care.

Additional recommendations include expanding the educational program to incorporate ongoing training and refresher courses for other illnesses. Regular workshops could reinforce the knowledge gained and update staff on the latest hypertension management guidelines. Additionally, implementing a mentorship program could pair experienced staff with newer employees to facilitate knowledge sharing. Collecting and analyzing long-term data on patient outcomes can further evaluate the effectiveness of the training. These recommendations would ensure sustained improvements in staff competencies and patient care.

The project's implications for nursing practice are substantial. Improving knowledge and skills directly influences nurses' ability to manage patients effectively. Such educational projects can be integrated into nursing curricula and continuing education programs. Nurses can better advocate for patients and engage in informed decision-making when evidence-based practices are emphasized. This aligns nursing practice to deliver culturally competent care tailored to diverse patient populations.

The initiative contributes to positive social change by addressing health disparities in hypertension management. Empowering healthcare staff fosters a culture of awareness and proactive intervention, ultimately improving health outcomes in the community. By equipping nurses with the necessary tools and knowledge, the project promotes a shared responsibility for patient health. In addition, this approach encourages community engagement in health education, leading to more informed patients and families.

Diversity, equity, and inclusion are fundamental components of this project. The initiative highlights the need for culturally competent care tailored to specific populations by focusing on African American patients. Training staff on these communities' unique

health challenges fosters an inclusive environment. This commitment to diversity ensures that all patients receive equitable care, reducing health disparities. Ultimately, this project underscores the importance of inclusive practices in promoting community health and well-being.

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