Rallying the Team to Improve Glycemic Control in the Acute Care Setting: Mission Possible

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Rallying the Team to Improve Glycemic Control in the Acute Care Setting:
Mission Possible
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**Project Purpose**
Improve glycemic control, by engaging all levels of team members in problem identification, action planning, and improved coordination of care.

**Background**
- 29% of total inpatient population with diabetes
- Participation in pay for performance diabetes initiative to reduce hypo/hyperglycemia rates
- Opportunities to improve patient outcomes with diabetes care
- Variances in knowledge/attitudes regarding hospital diabetes care

**Formation of Improvement Team**
- Certified Diabetes Educators (CDE)
- Providers
- Nurses and unlicensed assistive personnel
- Unit Nurse Educators
- Sodexo Nutrition Services staff - call center operators, tray passers and dietitians
- Nurse Administrator
- Pharmacist
- Information Services personnel
- Patients and families

**Root Cause Analysis**
- Perception that glucose control was an outpatient problem
- Gaps in knowledge and compliance with published best practice and hospital diabetes clinical practice guidelines
- Task-oriented focus to point of care blood glucose testing and insulin dosing
- Delays in reporting blood sugar results to the nurse by assistive personnel
- Delays in insulin administration after awareness of blood sugar results
- Personalized meal delivery times due to “At Your Request” dining service
- Inadequate supply of floor stock insulin

**Outcomes**
- Interprofessional collaboration to problem-solve
- Transparency of data via Visibility Walls
- Improved Timing, Trust, and Teamwork at all levels have made this

**Countermeasures**
- Glycemic rounds with CDE, providers, and nurses
- Staff education to all roles – live inservices and electronic modules
- Standard processes regarding “At Your Request” dining service
  - Door magnets for carb counting patients
  - Page notification to assistive personnel when patient orders meal - prompts point of care blood glucose testing
  - Interface between insulin order and food service computer prompts
    - Dietary call center operator to remind patient to tell nurse when they order meal
    - Tent card on meal tray and scripted instructions by tray passer alerting patient to call nurse prior to eating
- Consistent patient teaching using targeted materials
- RD consult for all patients with HgbA1C greater than 7.5
- Improved attention to individual diabetes issues during handover communication (all team members)
- Increased floor stock of correction insulin

**Success Strategies – It’s all About Staff Engagement**
- Interprofessional collaboration to problem-solve
- Transparency of data via Visibility Walls
- Improved Timing, Trust, and Teamwork at all levels have made this