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The ENHT inpatient diabetes project

ABCD Autumn Meeting 2015

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East and North Herts NHS Trust

DOT
ENHT Diabetes Outreach Team

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Why, How and What….

- Drivers for Change
- Negotiations with the CCG
- Targets… Targets
- Challenges
- Going forward

Drivers for Change

- Small inpatient diabetes team - reactive reviews based on referrals from ward of varying quality and relevance.
- Targeting high risk areas led to some improvements but need too great.
- NaDIA data showed high insulin error rates, low confidence from patients
- Negotiated a 2 year CQUIN payment allowing for team expansion
- Aim for 7-10 Proactive consultant sessions weekdays , 2 sessions per weekend
- 10 sessions per week and 2 weekend DISN sessions

Targets

Outcome (% Baseline)	Quarter 4 (%)
Proportion of inpatients seen (<30%)	60
Proportion of insulin treated patients seen	n/a
Decrease insulin administration errors (22%)	15
Decrease number of patients with inappropriately long VRIII (27%)	14
Implement touch the toes test	Renal ward 90
Increase proportion of patients who take an active part in their care (40%)	70

Other Targets
Monitor length of stay
Carry out a Root Cause Analysis with CCG Diabetes lead for patients with LOS >1SD away from mean
Monitor all ward discharge summaries and if needed send out diabetes specific discharge summaries within a timely manner

Patient Identification

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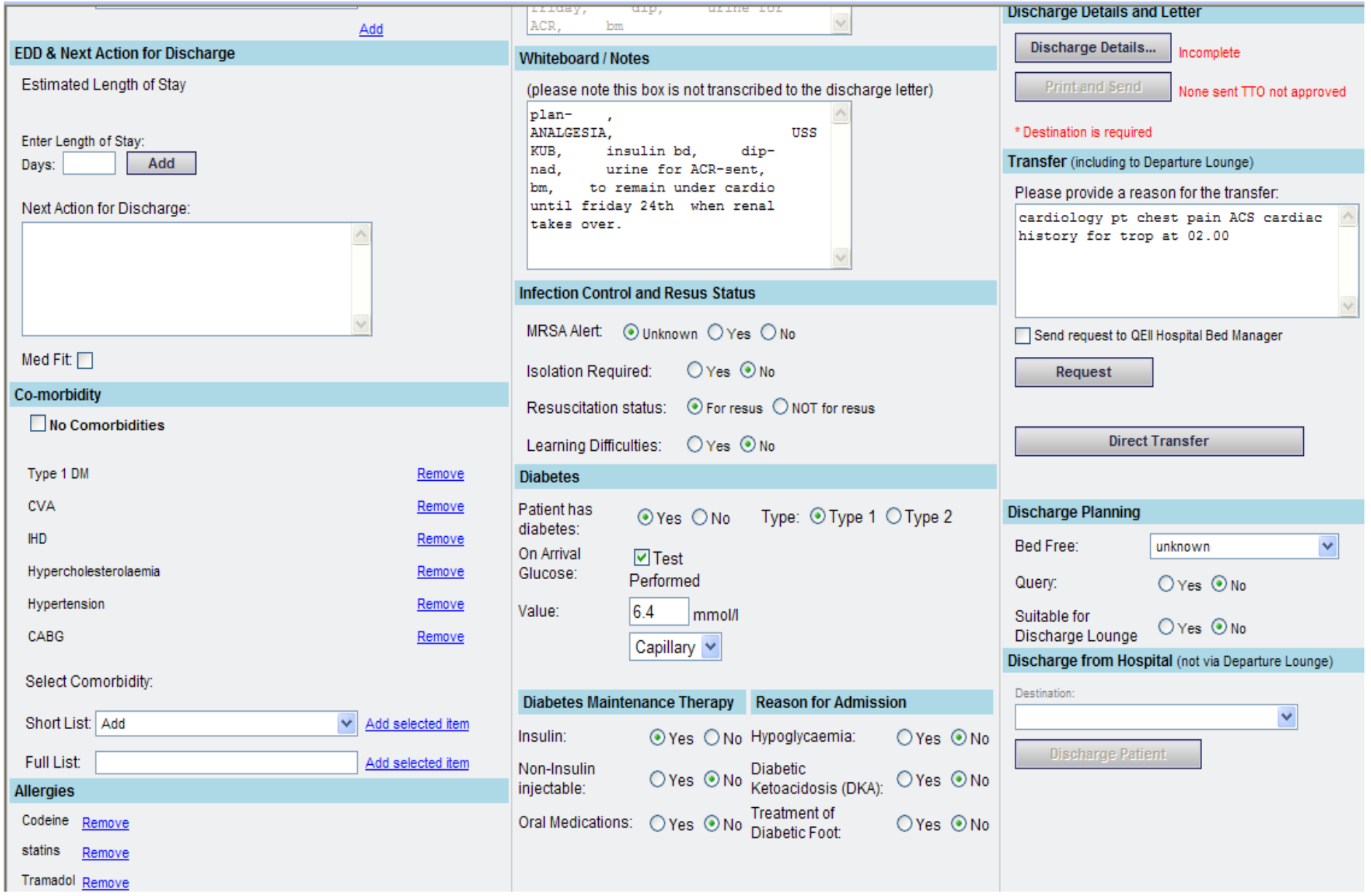

Add

EDD & Next Action for Discharge

Estimated Length of Stay

Enter Length of Stay:
Days: Add

Next Action for Discharge:

Med Fit:

Co-morbidity

No Comorbidities

Type 1 DM Remove
CVA Remove
IHD Remove
Hypercholesterolaemia Remove
Hypertension Remove
CABG Remove

Select Comorbidity:

Short List: Add — Add selected item
Full List: — Add selected item

Allergies

Codeine Remove
statins Remove
Tramadol Remove

friday, dip, urine for ACR, bm

Whiteboard / Notes

(please note this box is not transcribed to the discharge letter)

plan- ,
ANALGESIA, USS KUB, insulin bd, dip-nad, urine for ACR-sent, bm, to remain under cardio until friday 24th when renal takes over.

Infection Control and Resus Status

MRSA Alert: Unknown Yes No
Isolation Required: Yes No
Resuscitation status: For resus NOT for resus
Learning Difficulties: Yes No

Diabetes

Patient has diabetes: Yes No Type: Type 1 Type 2
On Arrival Glucose: Test Performed
Value: 6.4 mmol/l
Capillary

Diabetes Maintenance Therapy

Insulin: Yes No
Non-Insulin injectable: Yes No
Oral Medications: Yes No

Reason for Admission

Hypoglycaemia: Yes No
Diabetic Ketoacidosis (DKA): Yes No
Treatment of Diabetic Foot: Yes No

Discharge Details and Letter

Discharge Details... Incomplete
Print and Send None sent TTO not approved

* Destination is required

Transfer (including to Departure Lounge)

Please provide a reason for the transfer:

cardiology pt chest pain ACS cardiac history for trop at 02.00

Send request to QEII Hospital Bed Manager

Request

Direct Transfer

Discharge Planning

Bed Free: unknown
Query: Yes No
Suitable for Discharge Lounge Yes No

Discharge from Hospital (not via Departure Lounge)

Destination:

Discharge Patient

What is delivered to the patient?

- Assessment of their:
  - knowledge of diabetes
  - knowledge of their medication
  - need for structured education
  - need for psychological support
  - need for smoking cessation services

  Intervene as appropriate with education and/or referral

  - In addition to general review of glycaemic control, and assessment of need for ongoing diabetes care on discharge

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Diabetes Team Care Bundle

Completed By.....Admitted ☐☐☐☐☐☐

Reviewed ☐☐☐☐☐☐

This patient has Diabetes- Type 1 ☐ Type 2 ☐ Other.....

Admitted with DKA ☐ Hypoglycaemia ☐

Treatment Insulin ☐ GLP1 subcutaneous treatment ☐ Oral agents ☐ Diet alone ☐

Needs Assessment:

Complete Table Below. If any assessment is not done or not applicable please state why

E= Education Carried Out; R- Referred and to whom; D-Declined by patient

	Assessed Y/ N/ N/A	Action Needed Y/ N/ N/A	Action Taken (Insert Date) E / R/D
Understanding of diabetes			
Understanding of medication			
Psychological Input			
Structured Education			
Smoking Cessation			

If part/ all of the care bundle is not carried out at first review then a further review is planned for

☐☐☐☐☐☐ **Reason why not done at first review**.....

Other comments.....

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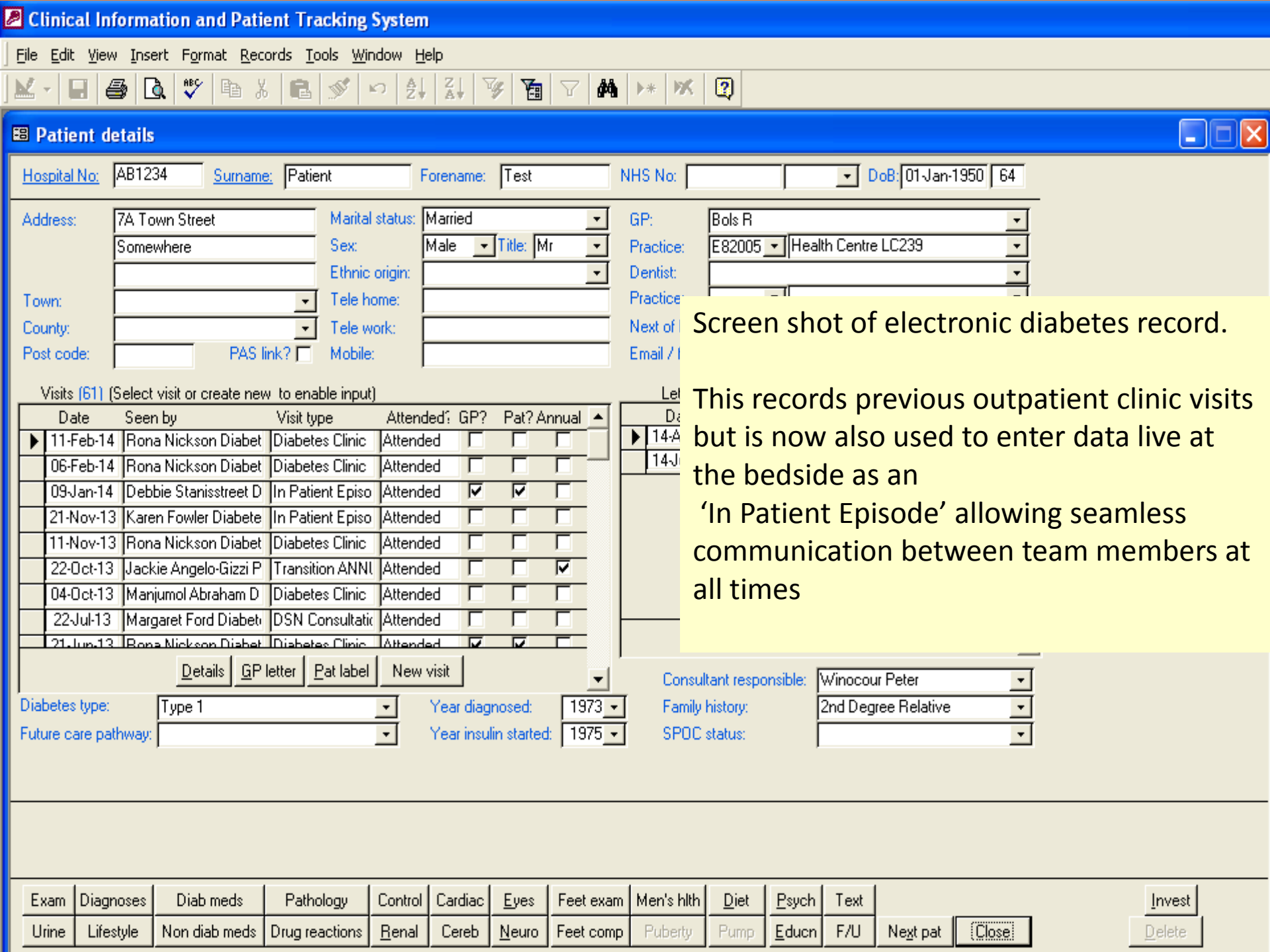

Screen shot of electronic diabetes record.

This records previous outpatient clinic visits but is now also used to enter data live at the bedside as an 'In Patient Episode' allowing seamless communication between team members at all times

Year 2- Achievements and New Negotiations

Outcome (% Baseline)	Target Quarter 4 (%)	Achieved Q4 (%)
Proportion of Inpatients seen (<30%)	60	75
Proportion of patients admitted with insulin	n/a	86
Proportion of patients admitted with DKA/HHS	n/a	100
Proportion of patients admitted with DFD	n/a	97
Decrease insulin administration Errors (22%)	15	9
Decrease number of patients with innappropriately long VRIII (27%)	14	5
Implement touch the toes test	Renal ward 90	96
Increase proportion of patients who take an active part in their care (40%)	70	70

Year 2- Achievements

Outcome (% Baseline)	Target Q4 (%)	Achieved Q4 (%)	Target Q8 (%)
Proportion of Inpatients seen (<30%)	60	75	**75**
Proportion of patients admitted with insulin	n/a	86	**80**
Proportion of patients admitted with DKA/HHS	n/a	100	**95**
Proportion of patients admitted with DFD	n/a	97	**95**
Decrease insulin administration Errors (22%)	15	9	**12**
Decrease number of patients with innappropriately long VRIII (27%)	14	5	**5**
Implement touch the toes test	Renal ward 90	96	**Maintain Renal ward at 90%. Acute and COE wards 50%**
Increase proportion of patients who take an active part in their care (40%)	70	70	**70**

Challenges

- Weekend working… a sea change
- Upskilling DSNs
- Deskilling the rest of the hospital
- Documentation
- Escalating targets vs Quality vs Exhaustion

What next?

- More focused working- fewer repeat reviews- connected glucose/ketone meters
- Increasing education
- Upskilling DISN in other areas according to their development needs
- Rotating OP/IP DSNs formally

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With thanks to DOT

- Debbie Stanisstreet
- Anne Currie
- Dawn Hardy
- Carolyn Jones
- Samer Al-Sabbagh
- Andrew Solomon

- Manju Abraham
- Lynn Barker
- Linda Chapman
- Margaret Ford
- Karen Fowler

- Nicola Hogan
- Carol Knowles
- Laura O'Donnell
- Beverley Summerhayes
- Ken Darzy
- Jalini Joharatnam
- Felicity Kaplan
- Ben Zalin
- Sagen Zac Varghese
- Peter Winocour

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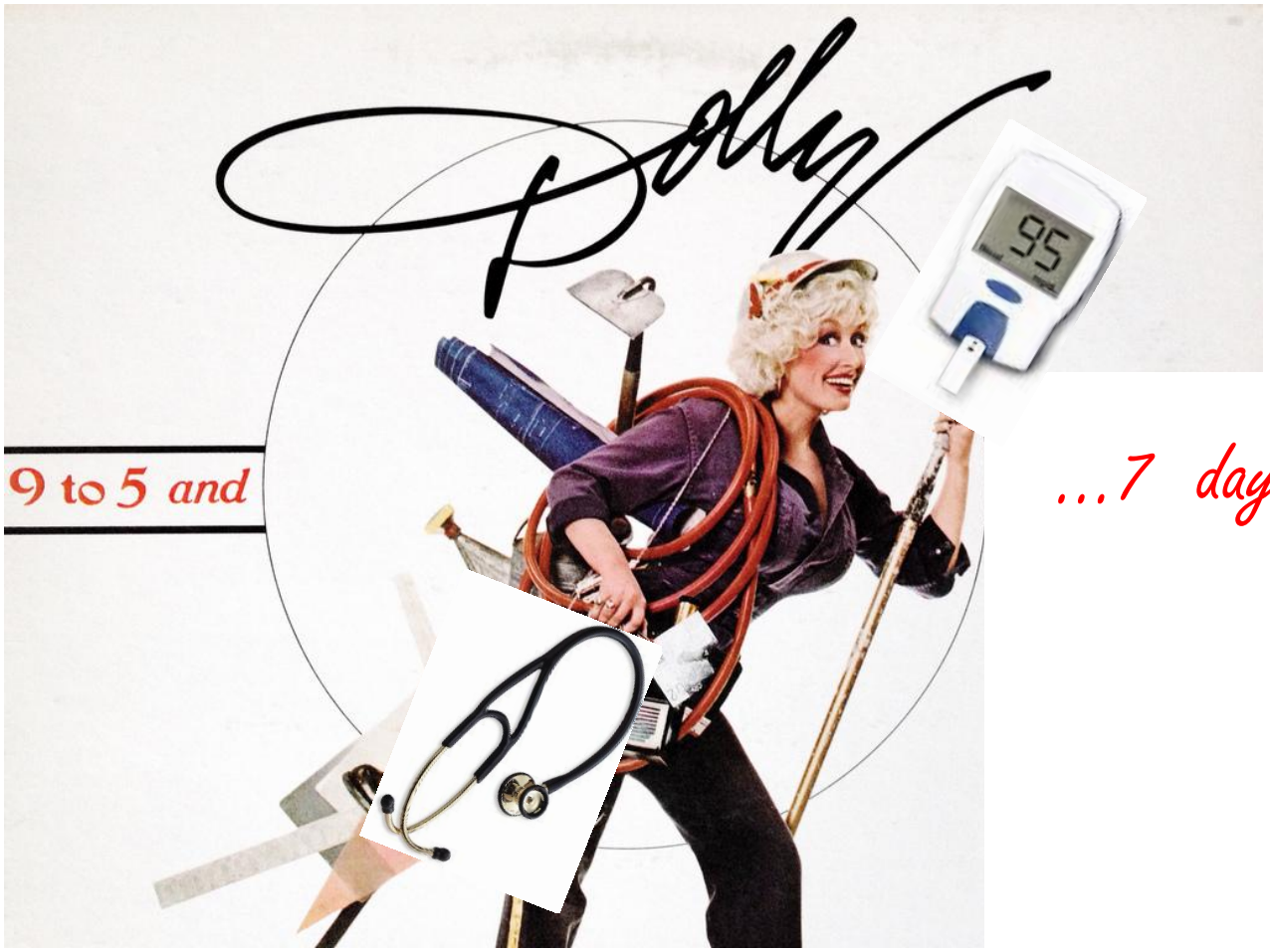

...7 days a week