

ative

in-hospital
blood glucose
target range
5-10 mmol/L



Expected outcomes

- more satisfied patients
- reduced rates of hyperglycemia and hypoglycemia in hospital
- fewer medical complications and infections
- smoother transitions - community to hospital, hospital to community
- shorter length of hospital stay

1/2
bed day saved
per patient could
result in **22,000+** days
returned to the
system per year

king
team
the
ent

Many patients with Type 1 diabetes use insulin pump therapy to manage their diabetes. These pumps use only rapid-acting insulin, so if they are disconnected or turned off, patients require insulin within two hours to prevent hyperglycemia and/or DKA. The guidelines largely focus on supporting patients to continue to use their insulin pump therapy device in hospital when safe and appropriate, as well as ensuring patient safety if the pump is stopped for any reason.

The initiative also included a DKA protocol for emergency room and inpatients (making the carbohydrate content of menu items available to patients), patient-specific dispensing of insulin (a high-alert medication), a simplified insulin formulary and the development of perioperative and diabetes in pregnancy guidelines (with complementary provincial order sets). The initiative has furthermore led to the development of a pediatric glycemic management policy with procedures (that will mirror the existing adult governance documents).

NURSES WERE INVOLVED IN AND CONTRIBUTED TO

every aspect of this improved diabetes management in-hospital QI initiative. Clinical nurse educators (CNE) across the province embraced the change and assisted the DON SCN™ with the development of nursing educational resources. CNEs also played a key role in implementing and educating other nurses about BBIT, the glycemic management policy and procedures, glucose meter alerts and other aspects of this multi-faceted QI initiative. Nurse managers and leaders endorsed and supported the changes.

The diabetes inpatient initiative could not have been possible without the involvement of nurses from across the province. Acute care nurses are now equipped and empowered to support their patients to achieve their recommended BG target while in hospital. RN

For more information about this quality improvement initiative, please visit albertahealthservices.ca/scns/Page10970.aspx or contact DON SCN™ at don.scn@ahs.ca.



LEFT: Glenda Moore, BScN, RN, Senior Consultant, AHS Diabetes Obesity & Nutrition Strategic Clinical Network™

RIGHT: Leta Philp, BScN, RN, CDE, Clinical Practice Lead, AHS Diabetes Obesity & Nutrition Strategic Clinical Network™