A collaborative approach to managing Diabetes in Long Term Care
Diabetes is a top three disease state in OMNI homes
Lack of standardized diabetes care for residents in LTC
Lack of Evidence Based Guidelines in this population
Individualized needs of LTC community
  - Flexibility, Quality of Life (QOL)
Awareness of increased co-morbidity in the LTC population
Focus on non-palliative residents living with diabetes in LTC
Limited collaboration between disciplines
  - MD, Nursing, Pharmacy, Nutrition, Administration, etc.
The Diabetes Advisory Team (DAT) formed in the fall of 2012

- Multidisciplinary
- Multi-organizational
- Focused on diabetes, co-morbidities and residents living with them

Our Team
A Collaborative Approach

OMNI Diabetes Protocol

Clinical

- Extrapolation from existing guidelines
  - CDA, AACE and others
- Consensus of DAT
- “Evidence Informed and Aware Guidelines”

Key Principles

- Set individual goals for therapy for each resident
- Incorporate Best Practice/Evidence Based Guidelines where appropriate
- Focus on safety and improved QOL for residents
- Measure! Measure! Measure!
A COLLABORATIVE APPROACH

OMNI Diabetes Protocol

The Order Set

1. The Nursing Admission/Annual Assessment
2. Individualized Goals
3. Glucose Control
   - Individualize resident targets based on co-morbidity, life expectancy and risk of hypoglycemia
   - Individualized Glucose Monitoring
   - AHA use similar-to-AACE guidelines
   - Formal Hypoglycemia Protocol
   - Metformin 1\textsuperscript{st} line +/- AHA with low hypoglycemia risk
4. Scheduled Laboratory Testing
5. Blood Pressure Management
   - Individual goals
   - Awareness of orthostatic hypotension and issues in frail elderly
   - Laboratory screening for safety in RAS inhibition
OMNI Diabetes Protocol

The Order Set

6. Cardiovascular Risk Factor Modification
   - Smoking
   - Lipids
   - Exercise, Nutrition, Lifestyle

7. Management of Co-morbid Conditions & Complications of Diabetes
   - Individualized goals
   - Screening where appropriate
   - Medical management
   - Access to specialty referral where appropriate

8. Nutritional Guidelines

9. Insulin Dosing Guidelines for Non-eating and Eating Residents

10. Safety Parameters
A COLLABORATIVE APPROACH

OMNI Diabetes Protocol
The Order Set

Safety Parameters:

- Blood Glucose Monitoring Protocol
  - Frail and elderly residents are at increased risk of severe/harmful reactions to hypoglycemia
  - Focus is on reducing the risk of hypoglycemia
  - Avoid symptomatic hyperglycemia

- Sick Day Medications

- Standardized Protocols
  - Empower front line staff
  - MD supervision

- Regular Review
Diabetes is not about hitting a target

It is about staying on target
## The Diabetes Solution

### Parts of the Problem
- Continued Use of High Risk Therapies
- Resistance to Change In Practice
- Knowledge Gaps
- High Rate of Falls & Wounds
- Constrained Nursing Time
- Unclear Diagnosis & Suboptimal Management of Complications

### Desired Outcomes
- Reduce Hypoglycemic Events
- Standardized Care
- Understanding and Compliance with Protocol
- Reduce ER Transfers
- Reduced Workload
- Consistent Screening & Monitoring Stabilize A1C

### Components of the Intervention
- Order Set
- Home-based Diabetes Champions
- Education & Protocol / Order Set
- Monitoring Protocol
- Order Set
- On-going Health Monitoring

### Outcome Measures
- Medication Utilization Statistics
- Standardized Policies / Procedures
- Pre/Post Quiz Results
- Tracking of ER Visits
- Time-Motion Analysis
- Tracking of Health Monitoring

**OMNI Health Care**
Currently at one of our pilot homes …

- Inconsistent management of hypoglycemia
  - 121 hypoglycemic events identified in one home
  - 8 were considered severe

- High rate of hyperglycemia

- Progressive increase in prescription therapy
Currently at one of our pilot homes ...

**Distribution of Blood Glucose Readings**

- <4mmol/L (hypoglycemia): 3.0%
- 4 - 9.1mmol/L: 58.8%
- 9.2 - 11mmol/L: 12.8%
- >11mmol/L (hyperglycemia): 25.2%
Currently at one of our pilot homes ...
EMPOWERING THE FRONT-LINE

OMNI Diabetes Protocol

Identify Knowledge Gap
Baseline measurement accomplished through pre and post testing of diabetes awareness

Homes select registered staff to CHAMPION diabetes

Comprehensive education platform leading to CDE Certification

10 Modules
Monthly Champion Calls
Exam
100% Supported by OMNI

Home Resource
Supports Staff NP, MD

Front Line Diabetes Knowledge Gain

Resources

3 Modules
OMNI Diabetes Certification
Diabetes Quick Reference Nursing Guide
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FROM PILOT TO PROGRAM

Projected outcomes:

- We will improve the quality of life of our residents living with diabetes
- We will reduce nursing time spent managing diabetes issues

- We have started with two pilot homes
  - We will implement in 17 homes by the end of 2013

- A sincere thank you to our Diabetes Advisory Team – without each and every member none of this would be possible

- A sincere thank you to Boehringer Ingleheim for partnering with OMNI Health Care to bring this project to life