

# Preparing for TJC Inpatient Diabetes Certification Application

Beverly A. Close, PA-C, MHA & Marlene Schiferle, MSN RN CDCES

D'Youville University/Roswell Park Comprehensive Cancer Center & Catholic Health System

## Background

Comprehensive diabetes management during hospital care improves outcomes and lowers cost. Hospitals with comprehensive programs can earn the Inpatient Diabetes Certification from The Joint Commission (TJC).

## Objective

- To improve inpatient dysglycemia
- To identify performance improvement projects needed to achieve JC certification

## Methods

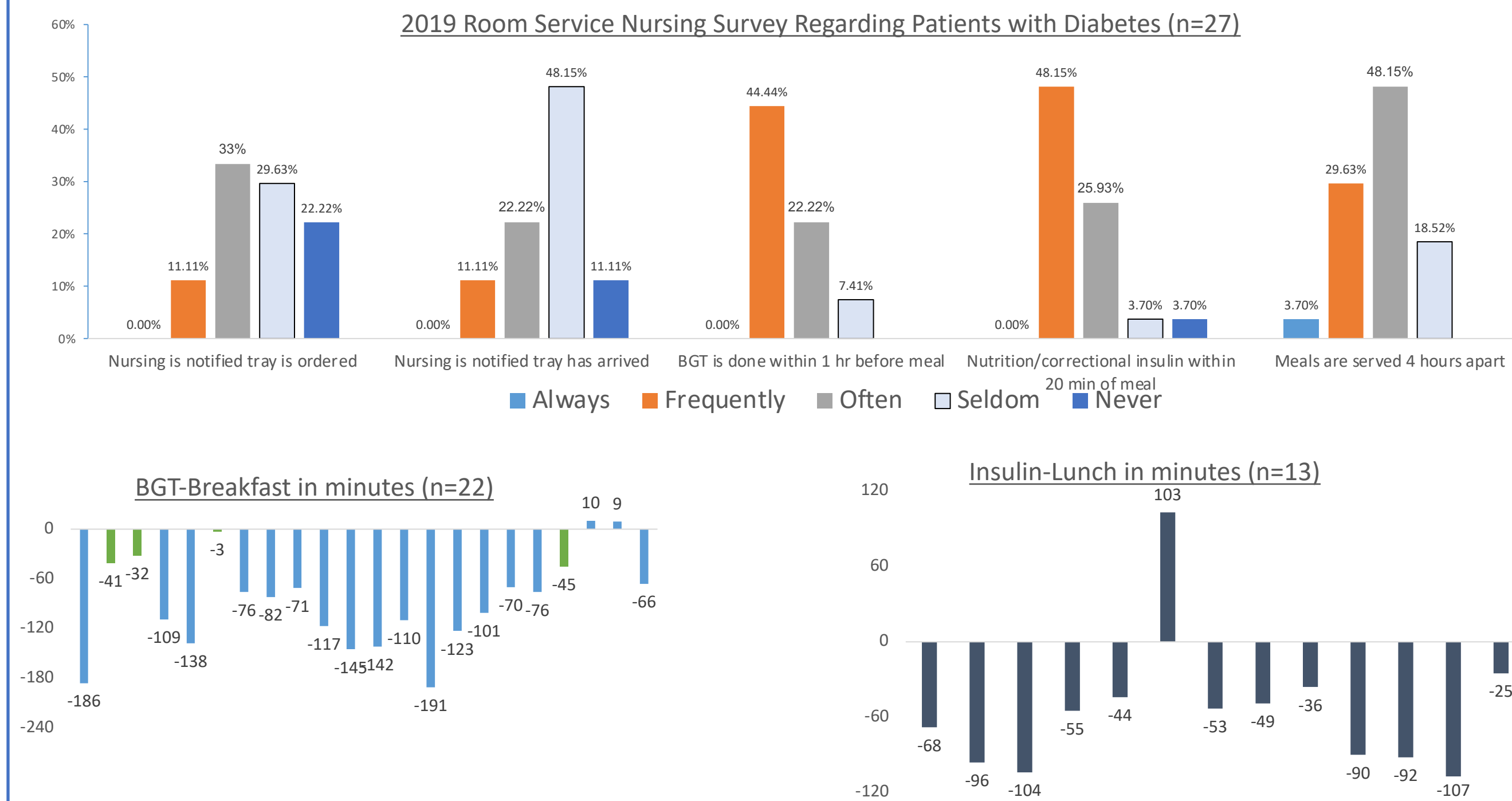
Prospective practicum project that evaluated readiness for TJC certification.

- Analyze current processes using Lean Six Sigma
- Conduct nursing diabetes knowledge survey
- Perform BGT-Insulin-Meal audit

## Limitations

- COVID
- Staffing challenges

## Tables/Figures



## Nursing Survey Results

<b>When do you administer Insulin? Within ___ of meal</b>	<b>N (%)</b>	<b>What time will regular insulin peak if given at 07:45?</b>	<b>N (%)</b>
15 min	123 (52%)	8:15	54 (23%)
30 min	94 (40%)	08:45-09:45	116 (49%)
45 min	7 (3%)	09:45-10:45	46 (19%)
60 min	7 (3%)	11:15-11:45	21 (9%)
> 60 min	6 (3%)		
<b>On average, how close do you administer Humalog insulin to BGT?</b>		<b>What is a sign of hypoglycemia?</b>	
15 min	144 (61%)	Dry skin	6 (3%)
30 min	43 (18%)	Blurred vision	135 (57%)
45 min	18 (8%)	Fruity breath	31 (13%)
60 min	22 (9%)	Flushing of face	65 (27%)
> 60 min	10 (4%)		
<b>Humalog insulin has the most impact on BG in ___?</b>		<b>Which is the fastest acting insulin?</b>	
15 min	62 (26%)	NPH	21 (9%)
30 min	31 (13%)	Regular	163 (69%)
60-90 min	113 (48%)	Aspart	45 (19%)
3 hours	31 (13%)	70/30	

## Nursing Education

**Hypoglycemia Event Reporting Tool (BG <70)**

Date & Time of Event: \_\_\_\_\_ Location: \_\_\_\_\_

MRR: \_\_\_\_\_ BG: \_\_\_\_\_

Which of the following reasons do you think may have led to hypoglycemia?

<input type="checkbox"/> NUTRITION	<input type="checkbox"/> INSULIN
<input type="checkbox"/> Poor nutrition	<input type="checkbox"/> Insulin may need adjustment (contact provider)
<input type="checkbox"/> Interruption in nutrition	
<input type="checkbox"/> NPO for a procedure or test	
<input type="checkbox"/> MEDICAL CONDITIONS	<input type="checkbox"/> OTHER MEDICATIONS
<input type="checkbox"/> Impaired kidney function	<input type="checkbox"/> Oral diabetes medications
<input type="checkbox"/> Impaired liver function	<input type="checkbox"/> Change in steroid dose
<input type="checkbox"/> Inadequate treatment of prior hypoglycemic event	

Other causes: \_\_\_\_\_

What treatment was given? (Check all that apply)

<input type="checkbox"/> D50	<input type="checkbox"/> 30gm carbohydrate (8oz Juice or Soda)
<input type="checkbox"/> Glucagon	
<input type="checkbox"/> 15 gm carbohydrate (4 oz Juice or Soda, 8oz Milk)	

What time was BG rechecked? \_\_\_\_\_ Was provider notified? ☐

Please forward these reports to your nurse manager or diabetes educator. Thank you for helping to keep your patients safe!

**ADA Inpatient Diabetes Goals**

- Target glucose of 140-180mg/dL for majority of patients
- Preventing hypoglycemia and hypoglycemia which are associated with adverse outcomes
- Insulin should be started for persistent hyperglycemia  $\geq 180$ mg/dL
- Basal plus bolus correctional is preferred for noncritically ill patients with poor oral intake or NPO
- Basal, nutritional, and correctional is preferred for patients with good nutritional intake
- In the critical care setting, continuous IV insulin has been shown to be best method to achieve glycemic targets

## Results/Conclusions

- Nursing knowledge deficits
- Poor compliance with BGT-Insulin-Meal timing
- Further process changes are needed to pursue TJC certification and improve dysglycemia

## Next Steps

- Hypoglycemia event monitoring
- Added insulin review to nursing orientation
- 2021 Nursing educational in-service
- New inpatient insulin regimen management annual CBL in-service
- Provider insulin prescribing 2 hr. CME
- Added reminder to MAR to administer insulin within 30 min or recheck BG
- Increased glucometers & improved function
- 2022 Dysglycemia Audit

## Contact Info

Marlene Schiferle  
[mschiferle1@chsbuffalo.org](mailto:mschiferle1@chsbuffalo.org)  
716-862-1338