

ADE Improvement Action Network

CHECK-IN CALL

NOVEMBER 6, 2018



GREAT LAKES
PARTNERS FOR PATIENTS

Illinois | Michigan | Wisconsin
Powered by the MHA Keystone Center

Accelerating Improvement at the Point of Care

Agenda

- ADE IAN Pulse Check
- Aim Statements and Small Tests of Change Review
- ADE Round Robin
- Next Steps

HIIN Programming



Improvement Action Network (IAN) – ADE

Week 1

- 60 minute kick-off **Webinar (September 21)**
- Preview of gap analysis/process evaluation tools

Week 2-4

- Data collection

Week 5

- Submission of gap analysis/process evaluation summary report to IHA

Week 6

- In-person, half-day, regional **workshop** with IAN participants. **(October 12)**
- Facilitated by IHA staff, subject matter experts, and mentor facilities

Week 9

- Check-in call **(November 6)**

Week 12

- Final **Webinar (November 19)**
- Review lessons learned and plan for sustainability

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Quick Review: Aim Statements and Small Tests of Change



Developing an Aim Statement & Change Ideas

AIM	PRIMARY DRIVERS	SECONDARY DRIVERS	CHANGE IDEAS
<p>Reduce Hypoglycemia By 20% by March 31, 2019</p>	<p>Target 140-180mg/dL glucose range, not normoglycemia</p>	<p>Educate staff to standard of care since 2009</p>	
		<p>Standardize insulin correction orders</p>	
		<p>Change all correction scales to not give insulin unless > 180 mg/dL</p>	
	<p>Eliminate sliding scale insulin as the sole means of glycemic control</p>	<p>Educate</p>	
	<p>Disallow SSI orders unless coupled to other glycemic control medications (correction)</p>		
	<p>Adjust the insulin regimen after a single episode of hypoglycemia (glucose <70 mg/dL)</p>	<p>Educate</p>	
		<p>Alerts</p>	
		<p>Scripting</p>	
		<p>Track and Feedback data</p>	
	<p>Coordinate meals and insulin</p>	<p>Implement the +/- 15 minute rule</p>	
<p>Carb counting</p>			

Developing an Aim Statement

- Essential components of an aim statement:
 - **Population**
 - **Goal**
 - **Time Expectation**
 - **Where**
 - **Guidance**



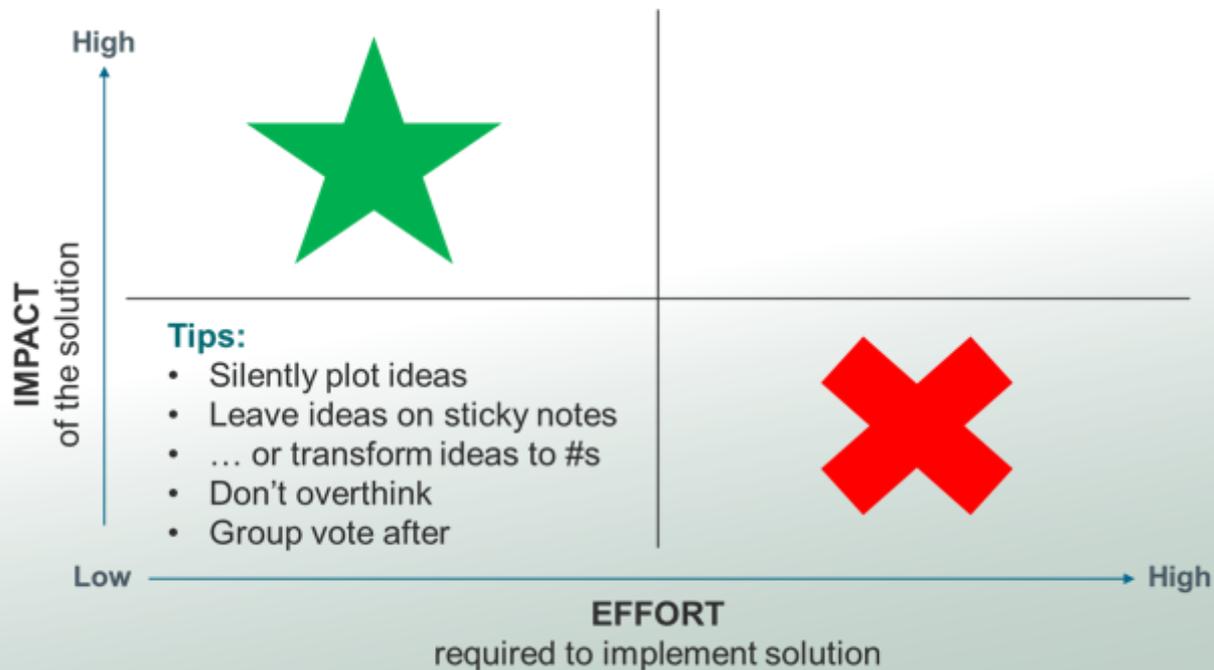
By **Mar 31, 2019**, we will reduce severe hypoglycemic events (less than 50 mg/dL) **by 20%** in our **non-critical care medical units with the guidance of our physician champion, Dr. Steve Tremain.**

Developing Change Ideas

AIM	PRIMARY DRIVERS	SECONDARY DRIVERS	CHANGE IDEAS
Your Aim Statement Here!	1	1a	!!
		1b	
	2	2a	!!
		2b	
	3	3a	!!
		3b	!!
		3c	
	4	4a	!!

Selecting Change Ideas

Idea	Can be accomplished in 90 days?	There's will to fix this problem?	Is within our control?	Is a sponsor for this work?
Idea 1	2	4	3	4
Idea 2	5	4	4	5
Idea X	4	2	1	3



Let's chat

- What was your small test of change (STOC)?
- Why did you choose this STOC?
- Who was involved?
- What did you learn from going through this?
- What actions were taken and what happened?

SAFE ZONE!



Palos Community Hospital

Aim Statement	We will increase our inpatient hypoglycemic (<i>blood glucose <70</i>) events retrospective chart review to 75% or up to 20 cases per month of cases for 4Q18, to establish baseline data & areas of focus with the guidance of Dr. James Draguesku, Physician Advisor.
First Test of Change	Having one RN review one case from September 2018 discharges to help determine the chart review turnaround time.
Is this test of change planned or did you execute it already?	This was completed 10/22/18, and the RN did feel it took sometime. She did try it another case after establishing where to look and the process was more fluent. We will share these areas with the case reviewer.



Morris Hospital and Healthcare - Morris

Aim Statement	We will reduce our hypoglycemia rate for inpatients on 2 South by 20% in 6 months with guidance of the Nurse Quality Committee, Pharmacy, Cara Marco (Manager of 2 South), and our CNO, Kim Landers.
First Test of Change	RN's to ask Provider for a Point of Care finger stick order on admission for all diabetic patients and for those that are NPO or not eating (diabetic or non-diabetic patients).
Is this test of change planned or did you execute it already?	It is a planned change.



Presence Mercy Medical Center– Aurora

Aim Statement	By Mar 31, 2019, we will reduce severe hypoglycemic events (less than 50 mg/dL) by 10% in our critical and non-critical care medical units with the guidance of our physician champion, Dr. Juliana Eshbach.
First Test of Change	Our first test of change will be changing how we interchange or continue patients with long acting insulin. Currently, we interchange all patients from Lantus to Levemir and adjust their dose if they are on 50 units or above by dividing the dose into twice daily dosing. We will continue to interchange Lantus to Levemir but change the way we adjust the dose. We will convert all doses that are 30 units and greater into twice daily dosing.
Is this test of change planned or did you execute it already?	The test of change is planned to begin November 1 st , 2018.



AMITA St. Alexius Medical Center – Hoffman Estates

Aim Statement	By June 30, 2019, we will reduce severe hypoglycemia events by 20% in our non-critical care units with the guidance of Branka Milicev.
First Test of Change	<ol style="list-style-type: none">1. Set up a pharmacist alert in TheraDoc for BG < 80, to evaluate the patient and page the provider to discuss changing/updating the insulin regimen.2. Schedule aspart meal time insulins to be scheduled with meals rather than before meals (times the insulin 30 mins before the tray comes)3. Add insulin protocol to auto-modify home insulin regimens while inpatient. Other hospitals have instituted reduction of 20% automatically while inpatient (due to being sick and dietary changes)4. Better identify patients who are diabetic when they receive their food tray. Work with dietary to add a sticker the diabetic trays, so the nurse/dietary communication improves
Is this test of change planned or did you execute it already?	Planned.



Presence Saint Joseph Hospital– Elgin

Aim Statement	By May 31, 2019, we will reduce severe hypoglycemic episodes (<50 mg/dL) by 15% in our non-critical care medical units.
First Test of Change	Trialing new checklist/education for coordinating meals and insulin (standardize process).
Is this test of change planned or did you execute it already?	Planned – trial on MED/ONC unit (most hypoglycemic episodes) first



Little Company of Mary

Aim Statement	We will reduce severe hypoglycemic events by 20% for adults inpatients and perioperative patients by March 31, 2019, with the guidance and support of our Pharmacy & Therapeutics Committee, Patient Care Services and Executive Leadership.
First Test of Change	Automatically initiate basal / bolus insulin protocol for patients in the Progressive Care Unit (PCU) with 2 consecutive BG values > 180 mg/dL.
Is this test of change planned or did you execute it already?	This was started on Monday 10/29 , and we have our first patient who meets criteria today (Wednesday 10/31).



Presence Saint Joseph Hospital– Chicago

Aim Statement	Saint Joseph Hospital will achieve a 30% reduction in adverse drug reactions due to anticoagulation therapy, by March 2019 with the utilization of Pharmacy dosing and monitoring protocols on our Telemetry Unit with the guidance of our Chief Medical Officer Shesh Rao, M.D.
First Test of Change	To implement a pharmacy consultation process for every patient who is on or has an order for Warfarin.
Is this test of change planned or did you execute it already?	Small test of change to begin the week of November 12, 2018.



Presence Saint Mary Hospital– Kankakee

Aim Statement	We will reduce the number of patients who experience over-sedation due to opioid use in MICU to no more than 1 patient per week by January 31, 2019 with the assistance of our Unit-based Nursing council and our Nursing Leadership team.
First Test of Change	Implementation of Pasero Opioid Sedation Scale
Is this test of change planned or did you execute it already?	Planned for first week of December 2018 (education to take place during November)



Presence Saint Joseph Medical Center – Joliet

Aim Statement	We will reduce the incidence of opioid induced respiratory events by 20% for all patients undergoing a total knee procedure from post-surgery to discharge.
First Test of Change	First Test of Change: Trial of supplemental oxygen during transportation initiated in OR →PACU→7West. Second Test of Change: Evaluation of Oxygen level performed at next level of care. Third Test of Change: CO2 monitoring (continuous) performed on 7 west via PCA pump
Is this test of change planned or did you execute it already?	Planned for second week of December 2018 (education to take place during November). Topics for education: Mandatory use of Oxygen during transportation as standard of care.



Anyone else??

THIS IS YOUR TIME TO RECEIVE
PERSONAL FEEDBACK!



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Let's Sum Up What We Heard!

- What Themes Did We Hear?
- What Common Suggestions Were Made?



Next Steps

Review Resources from Workshop

[Slide Deck](#) – [Driver Diagram](#) – [Improvement Calculator](#)

[Discovery Tools](#) – [PA Opioid Knowledge Assessment](#) – [HRET Change Packet](#)

- Over the next few weeks, continue to refine your aim statements, add more STOC cycles and move your team forward
- Final Webinar (November 19; 10-11a)

Thank you!

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