

The Diabetes Inpatient Team (DIT) has supported the rollout of a new paperless communication system, leading to better management of patients with Diabetes across multiple hospital sites, through the creation of a Virtual Diabetes Hospital. This has led to improved patient care and a reduction in administrative time spent by healthcare professionals.

AT A GLANCE



Healthcare professionals spending less time working on administrative tasks



Reduced length of stay for diabetes inpatients



Improved Patient Care



Benefits to Inpatients with Diabetes

- The Cayder Board Patient Flow Manager (Cayder PFM) is very easy and quick for ward staff to use and it heightens their awareness of a person with diabetes in hospital
- Diabetes is incorporated into ward hand overs routinely
- Prompts ward staff to make rapid referrals to the Diabetes Inpatient Team (DIT) where required
- Real time information for the Diabetes Inpatient Team (DIT) and it is visually very easy to see which patients with diabetes need to see the DIT on the Virtual Diabetes Hospital list
- The DIT can monitor their workload to ensure care is not compromised
- Smooth transition of diabetes care wherever the patient with diabetes resides in the Trust
- Makes NaDIA a lot easier!

IN DETAIL

The Challenge

Hull and East Yorkshire Hospitals NHS Trust serves a secondary care population of 600,000 and tertiary care population of 1.2million. The Trust's bed base (excluding paediatrics and women's health) has shrunk from 1434 (2012) to 1010 (2013) and is split over 2 sites: Hull Royal Infirmary focuses on urgent care, trauma, acute medicine; Castle Hill Hospital on elective care, oncology and medicine.

Emergency admissions continue to rise and with the reduction in bed base, patient movement between wards and across sites has increased with the potential for the loss of a patient narrative. The ability to track an individual in hospital with diabetes may be helpful in ensuring that person receives the support and care they need to have the best possible outcome, and ultimately to reduce the excess length of stay associated with having diabetes.

The Solution

The Trust piloted the Cayder PFM with the aim of enhancing communication between wards and teams in 3 areas of Hull Royal Infirmary (medical elderly, surgery and neurosurgery) in December 2010. A successful pilot led to the roll out of Cayder PFM across both hospitals.

The Cayder PFM is a finger touch screen which ward staff use to admit patients to the ward and update clinical plans which form the basis of the nursing handover. Multiple health care professionals access the Cayder PFM. It is quick and easy to use and integrates with other software used by the Trust.

The Diabetes Inpatient Team (DIT) became involved in the Cayder PFM project at an early stage, highlighting the potential benefits that developing a Virtual Diabetes Hospital could bring through reductions in length of stay, but also improved care and communication with ward staff. Diabetes became the first specialty to develop a Virtual Ward but this has now extended to Pharmacy, Therapies, Surgical Admissions Lounge, Transport and Patient Placement.

The DIT developed a simple screen shot which allows ward staff to highlight a patient with diabetes, indicate their usual diabetes treatment and request a referral to the DIT. Free text space allows staff to state the reason for referral, likewise the DIT document their intervention which is automatically updated into the nurse handover. Cayder PFM self-populates; once a person with diabetes has been highlighted, if readmitted their diabetes diagnosis remains.

The Impact

The new Virtual Diabetes Hospital has revolutionised the working schedule of the DIT to improve patient care by prioritising referrals and follow ups.

Whilst this has been supported by the implementation of the Cayder PFM, the implementation of the DIT has been able to utilise the new infrastructure to best effect.

Studies have shown that access to specialist diabetes teams reduces the average length of an inpatient stay by 3 days and can save over £400 per admission.⁽¹⁾

1 NHS Diabetes (2011), Inpatient Care for people with Diabetes: The Economic Case for Change.

WANT TO KNOW MORE?



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