

## Diabetes Inpatient Care Queen Elizabeth University Hospital - Glasgow

### Name of Collaboration

Joint Working Project between NHS Greater Glasgow and Clyde & Sanofi - Inpatient Diabetes Care within the Queen Elizabeth University Hospital

### NHS Scotland Partner

NHS Greater Glasgow & Clyde  
Diabetes Department at the QEUH

### External Partner

Sanofi

### Aim of the work

NHS Greater Glasgow & Clyde and Sanofi developed a joint working project the aim of which was to: Reduce delayed discharges, unnecessary severe hypoglycaemic episodes, and harm from serious medication errors (including insulin errors), via the development of consistently high standards of multidisciplinary inpatient care throughout the Queen Elizabeth University Hospital.

### What was done?

NHSGGC and Sanofi jointly developed a project group which coordinated the project together to deliver the project's overall objectives including:

- Service and in-patient pathway redesign to provide co-ordination, leadership and accountability for the management of insulin dependent patients across the hospital including those in non-diabetic wards.
- The development of a structured approach to therapy reviews for all in-patients with diabetes regardless of their entry point to the hospital and ward in which they receive care.
- Implementation of safe procedures for in-patient self-administration of pen insulin or nurse led administration of pen insulin throughout all hospital wards, including the joint creation of a bespoke protocol for in patient administration of insulin.
- The provision and roll out of an educational service and focal point of support for nursing teams.

Part of the project involved the joint funding by NHS GGC and Sanofi for two part-time Diabetes specialist nurses (1 WTE) over two years from 2018-2020.

### Supporting quote from lead clinician

“This Joint Working Project has been very successful in delivering its goals, even in the context of severe disruption to normal processes enforced by the COVID pandemic. The planning and ‘business’ support provided to the Project Team by Industry colleagues was

excellent and perhaps this aspect in many NHS Projects is somewhat neglected. Factoring in this approach may well optimise the outputs from future Projects.

We have witnessed an important reduction of SAE's (serious adverse events) related to insulin errors in clinical practice over the last 4 years in NHS GGC South Sector, particularly in high prevalence areas (renal, vascular surgery, elderly medicine, and obstetrics).

The fact that NHSGGC was keen to continue the successful work of this JWP is evidence of the value and quality of the intervention."

**Dr Steve Cleland**, *Diabetes Clinical Lead (NHSGGC South Sector 2017 - 2021) and Chair of Inpatient Subgroup of Diabetes MCN (NHSGGC 2016-present)*

### Outcomes Delivered:

#### *Benefit for Patients*

*With the introduction of new documentation patients were able to retain their autonomy with regard to the self-management of their prescribed insulin administration*

*As a result of the in-depth hypoglycaemia education delivered to health care professionals, hypoglycaemic patients were identified earlier and received the appropriate treatment in a timely fashion in accordance with the clinical guidelines*

#### *Benefit for NHS team*

*A complex educational intervention targeted for ward nurses significantly improved adherence to clinical guidelines and management of hypoglycaemia.*

*The provision of bite size diabetes education for healthcare professionals increased the skills and confidence in the management of in-patients with diabetes*

#### *Benefit for non-NHS partners*

*Further enhancement of Sanofi's reputation within NHS Greater Glasgow & Clyde*

*This joint working project facilitated valuable insight into the current management of in-patients with diabetes.*

*Despite a pandemic, joint working continued to the benefit of both patients and staff*

#### *Benefit for wider NHS Scotland*

*An adaptable joint working project that has the potential to be replicated within other Health Boards to reduce hypoglycaemia, insulin errors and improve the overall management of in-patients through bite size diabetes education.*