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Improving SCIP-4 Glucose Measures
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Plan
A performance improvement project was initiated to increase the Surgical Care Improvement Project (SCIP) glucose measure compliance.
- Order sets were modified to standardize glucose monitoring frequency and initiate insulin infusions.
- A previous practice of double documentation (manual and glucose meter interface documentation) were abstracted as 2 separate results. When glucose interfacing became an option, the practice of manual entries did not stop.
- The use of manually documented results for decisions failed to prompt interface confirmation; non-validated results do not interface.

The plan:
- Implement order set changes.
- Eliminate manual documentation.
- Rely on interfaced measures to make clinical decisions.

Do
Pilot modified order sets and the sole use of interfaced glucose results were implemented in ICU October 2013.

Study

| # of Non-Validated Interfaced Glucose Results: Pre/Post ICU Pilot |
|---------------------------|--------------------------|
| Pre  | Post  |
| Dec-13 | Jan-14 |
| 176    | 82     |

The number of non-validated glucose results decreased following the ICU pilot and hospital wide implementation of sole use of interfaced glucose result.

| # of Non-Validated Interfaced Glucose Results: Pre/Post Hospital |
|---------------------------|--------------------------|
| Pre  | Post  |
| Dec13-Jan14 | Dec14-Jan15 |
| 4598    | 2904     |

Act
With improvement in SCIP glucose measure results, hospital wide implementation was planned. Another change was to have the interfaced glucose results flow to the intervention documentation flowsheet. To ensure patient safety and provide timely feedback, the Lab Point of Care Specialist reported unaccepted results. A reduction in measure results 3 months after implementation revealed diabetic patients had higher carbohydrate intake than expected. Modifications in diet management were made. The SCIP-4 core measure reporting has been suspended for discharges after 7/1/14.

Team Members
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References