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Sharecare Diabetes Solution Improving Quality and Safety of Patients

About Sharecare Diabetes Solution

Sharecare Diabetes Solution™ combines evidenced-based medicine with best practice interventions to collaboratively deliver fully integrated inpatient and outpatient diabetes care plans to maintain a successful pathway of health and well-being. Our scalable solution can evolve to meet the changing needs of hospitals and physicians, while achieving the best outcomes for patients. In 2012, a large, fragmented health system engaged Sharecare (formerly Healthways, Inc), to identify and address gaps in its diabetes care model—a particularly important focus for the health system given the typical experience of a patient with diabetes and its comorbidities. It is not uncommon for these patients to more frequently be hospitalized, visit their physicians, and require diagnostic and ancillary services. People with diabetes are also at greater risk for inpatient complications that can increase costs of care and prolong stays.

Establishing Strategic Goals for Process Improvement

The health system, which includes 14 acute care hospitals, looked to Sharecare to help understand how it could better manage the care of its complex diabetes patients with multiple conditions in inpatient and outpatient settings, including transitions in care. Sharecare and the health system then established five key objectives for the scope of the effort:

- Standardize the inpatient and outpatient diabetes programs across the entire health
 system
- · Improve patient safety and quality around glycemic management
- Decrease length-of-stay gaps between individuals with diabetes and those without
- · Reduce hospital readmissions for the diabetes population
- Increase community awareness around diabetes and self-management education

Implementing a New Program in a Changing Environment

Adding complexity to the achievement of these five strategic goals was that the health system was undergoing a period of significant change: establishing new organizational structures, adding new acute-care facilities, integrating its physician group, and adapting to the new industry paradigm of quality-based reimbursement and patient experience-focused care. Despite this environment, Sharecare and the health system were able to successfully launch a scalable program for inpatient glycemic management and diabetes self-management education services.

The new program focused not only on the key outcomes of readmission reduction, complication avoidance and length of stay reduction, but also on prevention and education. To enable the health system to operate at peak efficiency, the comprehensive diabetes program featured both systemic and concurrent interventions—including a sustainable support structure with evidence-based practice and protocols for ongoing population treatment.

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"Although diabetes is not always a patient's primary diagnosis, it is a critical driver in treatment decisions and outcomes and a leading cause of healthcare cost. Working with our strategic partner Sharecare, our health system has incorporated evidence-based treatments and integrated performance improvement measures into the intraprofessional diabetes care provided to the communities we serve."

-Senior Executive and Clinical Initiative Leader

Sharecare jointly established a multidisciplinary committee to oversee the new diabetes program, emphasize front-line staff engagement, physician education and overall strategy. The onsite program directors, managed by Sharecare, had direct operational oversight for all inpatient and outpatient diabetes care initiatives. This team collaborated with health system executives, physicians and staff to improve glycemic management throughout the system.

Significant Outcomes, Proven Results Created an Award-Winning Program

In 2015, the program received statewide quality recognition honoring the health system's strategic approach to reducing variation in how diabetes care is delivered through its comprehensive diabetes care initiative that combined education, prevention, early detection and coordinated care to enhance the well-being of the community. Overall the program delivered a highly integrated, seamless care experience that generated significant improvements in quality and safety, length of stay reduction, outpatient education services, and operational efficiencies in diabetes care. These include:

- Readmission rates for patients with primary diagnosis of diabetes decreased more than 3.7% or a 22% overall reduction. For those patients with diabetes as a secondary diagnosis, readmissions showed a 1.9% drop or a 14% overall reduction.
- New diabetes program demonstrated \$3.95 million in average length of stay (ALOS) savings to the health system and a 2% system-wide level decline in ALOS for the diabetes population.
- Standardized glycemic control parameters across all diabetes-related order sets, reducing insulin errors 83% and preventing any catastrophic errors related to insulin since implementation.
- Provided professional diabetes education to over 5,000 nurses system-wide, including over 250 diabetes resource team clinicians with a provider-led curriculum.
- Established 2 new American Diabetes Association (ADA)-recognized diabetes outpatient education centers, and 1 satellite ADA location for more intensive community outreach.
- Implemented and standardized ADA-compliant diabetes self-management education materials for both inpatients and outpatients receiving treatment throughout the health system.

By establishing strategic goals and implementing best practices, Sharecare and the health system improved the quality and safety of patients with diabetes. This physicianled, multidisciplinary diabetes and glycemic management care initiative leveraged interdisciplinary teams to develop systemwide processes, guidelines, tools and integrated performance improvement efforts across the continuum of care.