

A woman with long brown hair, wearing blue scrubs, is shown in profile from the chest up. She is holding a tablet computer with both hands and looking at the screen. The background is a blurred hospital or clinic setting with warm lighting.

Glytec®

THE NURSE'S GUIDE TO:

# Winning Buy-In for eGlycemic Management

## When it comes to improving care for patients with diabetes, implementing an eGlycemic Management System (eGMS) has proven benefits.

Glytec's eGMS improves insulin management by replacing outdated paper protocols and sliding-scale insulin protocols that put patients at risk<sup>1</sup>. Studied benefits include **reduced average time-to-target blood glucose<sup>2</sup>, fewer insulin dosing errors<sup>3</sup> and reduced incidence of hypoglycemia<sup>3</sup>** — which all contribute to **improved patient safety**.

Guided workflows and safety alerts can also ease **practice change** and enable doctors and nurses to follow best practice protocols and metrics and dashboards **improve visibility** into the overall state of glycemic management within the hospital.

But convincing hospital leadership to approve an eGMS project isn't always simple. As with other healthcare technology projects, you're likely to run into obstacles like red tape, budgetary concerns and a lack of awareness among decision-makers.

At Glytec, our mission is to improve the lives of patients managing glycemic issues, and those who administer their care, by optimizing insulin therapy. We find that nurses often share our mission, and can immediately understand the benefits of our eGMS.

**This guide, synthesized from experience implementing eGMS at nearly 300 hospitals, provides step-by-step instructions for nurses and nursing executives to overcome obstacles and win buy-in for this solution.**

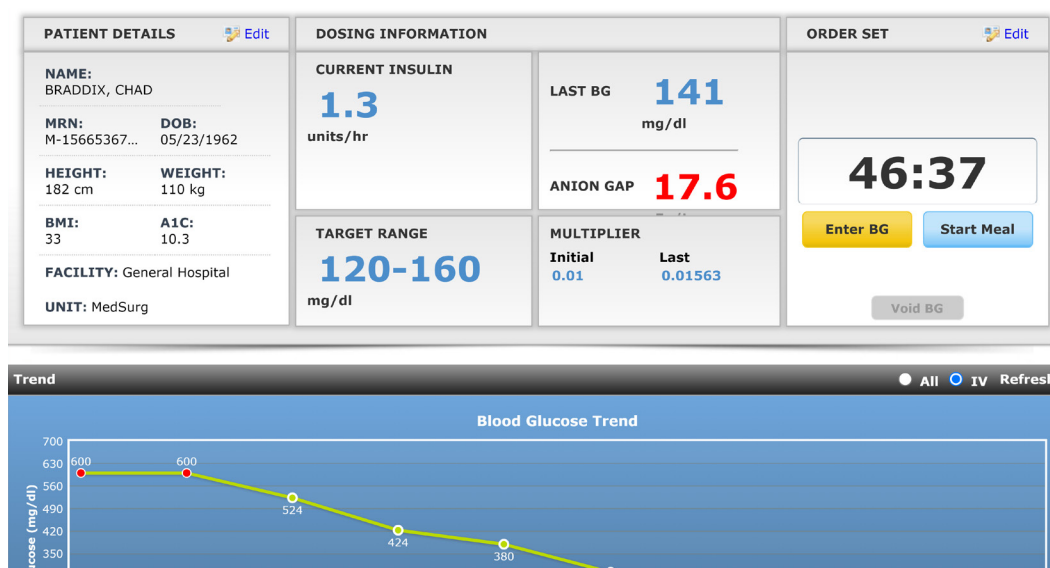
**We'll also preview the eGMS implementation process to help you answer any questions that may come up about next steps.**

**But first, a brief review.**



# What is eGlycemic Management?

eGMS is glycemic management software that uses data-driven algorithms to provide personalized insulin dosing recommendations at the point of care. eGMS effectively replaces paper protocols and sliding scale for insulin dosing in the hospital, but there are many more benefits beyond just replacing existing protocols.



An example of Glytec's eGMS interface. The software is integrated with the EMR for streamlined workflows.

Using eGMS, clinicians are able to get patients into target blood glucose range quickly and safely<sup>2</sup> while reducing the incidence of hypoglycemia and hyperglycemia.<sup>5</sup>

Glucommander™, Glytec's insulin dosing software, is FDA-cleared for use in IV insulin therapy and subcutaneous (SubQ) insulin therapy for both adult and pediatric patients.

In addition to dosing decision support, [Glytec's eGMS includes modules](#) that can help nurses:

- Automatically monitor patients not on insulin to identify patients at risk of hyperglycemia
- Track BG tests and current infusion rates of all patients in a unit to better coordinate insulin therapy, especially during shift changes or transitions to step-down units
- Track glucose control KPIs with built-in reporting and analytics

## Benefits of eGMS



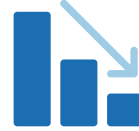
Improved patient safety<sup>2</sup>



Decreased cost of care<sup>5</sup>



Improved clinician workflows<sup>6</sup>



Visibility into glycemic management KPI metrics



Save nurses time in IV workflows<sup>6</sup>

## Winning buy-in for eGMS

How exactly you convince decision-makers to approve an eGMS project will depend on your hospital's organizational structure (and the personalities within it).

It will also depend on your hospital's **procurement process**. How do new technologies get selected and purchased at your hospital? Understanding this will enable you to contact the right people at the right time.

### Building your team

While every hospital is different, the road to success almost always starts with building a team. The more allies you have supporting the cause of improving glycemic management, the better equipped you'll be to convince hospital leadership to sign onto the project.

## People from many different groups and departments might be persuaded to join your team, including:

**Doctors** — Endocrinologists, especially those you work with frequently, are the natural place to begin when gaining buy-in. However, many different specialists may be interested in the benefits of eGMS, including cardiac surgeons, OB/GYNs, ICU and emergency physicians.

**Diabetes Educators** – Certified Diabetes Care and Education Specialists (CDCESs) connect on a personal level with patients with diabetes to ensure they receive the best care in the hospital and at home. They will want to know how eGMS can help them improve quality of care and patient safety, and can be a major champion for your eGMS initiative.

**Pharmacists** — Pharmacy leaders typically have to approve changes to insulin therapy workflows, and it's important to get their insight and involvement early in the process. They'll be interested in how eGMS can help them reduce hypoglycemic events and insulin dosing errors and achieve best practices.

**IT professionals** — The IT department will eventually help implement eGMS, and they can become a blocker to success if they're not looped in. However, members of the IT team can also be champions of eGMS. Show them how eGMS can improve the ROI of the EMR purchase, how the cloud-based software is easy to integrate and maintain and how it's superior to other solutions they might have been asked to implement, such as homegrown dosing calculators.

Your buy-in team will also include allies from Glytec, including your sales representative and experts from our clinical, technical and product teams.

## Whose budget?

When you build a team of allies, you're not just increasing the support for eGMS — you're opening potential new paths to the goal of winning approval from hospital leadership.

Ultimately, finding a **department head** (or two!) willing to allocate some of their budget to the eGMS project will be a crucial step on the way to approval. The nursing department is the natural place to start, but eGMS also has many proven benefits for various departments outside of nursing. If one department head isn't interested, don't be discouraged — another may give you the buy-in you need.

Departments for which eGMS has proven value include:

- Endocrinology
- Emergency
- Intensive care
- Cardiac surgery
- Obstetrics and gynecology
- Pharmacy

*“Before we began using Glucommander, if a nurse believed a patient was not in good control of their blood glucose, the nurse would have to call the patient’s provider to make a dose change. When you’re checking blood sugar five times a day per patient, it led our staff to make a minimum of 3,000 calls a month to providers just to adjust insulin doses. That’s just the first call!*

*By the time doctors would call back, approve the order, and the nurses would administer the insulin, the amount of time wasted was both staggering and frustrating. The use of Glucommander has reduced our amount of monthly calls by 95% - from over 3,000 to 150.”*

**Debra Dudley, RN, CDE, BS<sup>7</sup>**

**Clinical Diabetes Educator for AdventHealth Waterman in Tavares, Florida**

## Bring your own data

Your conversations with potential allies may be formal presentations or informal chats. However, it’s important to go into these conversations equipped with data concerning both the insulin management status quo and the benefits of eGMS.

Glytec’s eGMS has over 80 studies proving its clinical and business outcomes<sup>8</sup>, and we can provide many data points about the safety and effectiveness of our solutions.

When it comes to talking about the status quo, however, we find the most compelling data is that which comes from *your own hospital*, and will therefore align with providers' experiences.

Dig into internal databases to gather statistics on topics like:

- Hypoglycemic events
- Rebound DKA
- Hypoglycemic coma
- Hyperglycemia rates

Different people will be interested in different data points. A diabetes educator may be primarily interested in hearing how eGMS can improve quality of care for their patients. An emergency physician may want to hear about how Glucommander IV can reduce time-to-target blood glucose. The chief quality officer, meanwhile, will likely want to hear how eGMS can reduce readmission rates, hypo events and length of stay.

Being selective about which facts you lead with can make the difference in terms of engaging busy colleagues and getting them to buy into your cause.

### **A LITTLE HELP FROM YOUR FRIENDS**

Your allies from Glytec will be available to assist you in gathering data, preparing your presentations and even connecting you with existing Glytec customers to help you make your case. Don't be afraid to lean on us!



# What happens next?

So you've gathered data, built a team of allies and successfully convinced hospital leadership to buy into the eGMS project. Now what?

We're focused on making purchase, implementation and support as streamlined and painless as possible, and we're constantly improving these processes based on client feedback.

However, there's no way around the fact that *someone* from the hospital will need to assist with keeping the project on track — and as the ones who will be using the software every day, nurses often take on a large part of the responsibility.

Here's a brief rundown of next steps to help you understand what to expect (and how to prepare!).

## Approval, purchase and pre-implementation

After you've received verbal buy-in from hospital decision-makers, Glytec will take the reins to finalize the deal. Typically, your CMO, CFO and legal department will get involved at this stage. We'll work out the terms of the agreement together and sign a contract.

When the ink is dry on the contract, we enter the **pre-implementation phase**. Our goal is to be ready for official project kick-off within 30 days of signing the contract.

During these 30 days, Glytec will work with you to identify what resources will be available from your side, and you'll be asked to put together a project management team.

You don't have to handle this responsibility by yourself. Other people who can be very helpful as project management teammates include:

- Members of the glycemic steering committee
- Diabetes educators
- Diabetes nurse champions
- Department nurse educators
- Nurse informaticists
- Endocrinologists
- Hospitalists and other providers



During this time, you'll also be asked to fill out some questionnaires with information that will help Glytec prepare for implementation.

## Implementation

The “I” word is always scary when it comes to healthcare technology, but implementing Glytec's eGMS is easier than it sounds! In fact, the process can usually be handled completely remotely.

Our tried-and-true implementation process includes detailed milestones, weekly meetings and regular progress reports. We also standardized our technical integrations to make work as easy as possible for your IT team.

From start to finish, the implementation process for our IV solution usually takes at least 12 weeks.

### eGMS implementation includes seven distinct phases:

1. **Kick-off:** Meet the teams, share context and set up a weekly meeting
2. **Discovery:** Decide order set strategy, EMR build plan, training strategy, configuration, etc.
3. **Build:** Build and configure a test environment, build order sets in your EMR, etc.
4. **Test:** Walk through different patient workflows and ensure integrations are functional
5. **Go-live prep/End-user training:** Build the system, roll-out computer-based training for nurses and providers and finalize logistics
6. **Go-live!:** Roll out the system over the course of a few days
7. **Optimization:** Workflow optimization, training on additional modules and transition to support relationship

## Training

We offer a comprehensive training program that supports the initial eGMS rollout, continual onboarding of new employees and long-term optimization.

Training is computer-based and can be made available from your hospital's learning management system. Training modules are customized to your own workflows, order sets and EMR, and are broken out by role for nurses, prescribing providers and pharmacists.



## Ongoing support

Following implementation, your clinical and technical personnel will have access to 24/7/365 customer support, and our customer success team will be checking in with you from time to time to ensure things are going smoothly. We will also reach out to coordinate updates to the software and let you know about new capabilities.

Finally, we go above and beyond to help our partners achieve glycemic management success, helping with provider adoption of standard-of-care practices and in many cases even sitting on hospital glycemic management committees.

All Glytec, training and support is 100% included in the cost of your annual licensing fees and is never metered.

## Let's do this.

Now you've got an idea of what it will take to get buy-in for eGMS and what the implementation process will look like.

We know it can all be daunting, and for a busy nursing professional, it can seem like an overwhelming challenge.

But rest assured, Glytec will be there to back you up during every step of the process, and when in doubt, don't lose track of the goal — better, safer care for your patients.

Ready to take the first step?

## Schedule a Demo of Glytec's eGMS

**(864) 370-3297**

**Get in Touch**

**[info@glytecsystems.com](mailto:info@glytecsystems.com)**

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8. 80+ studies with clinical evidence showing efficacy of eGMS: <https://glytecsystems.com/evidence/>

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The eGlycemic Management System® is a modularized solution for glycemic management across the care continuum that includes Glucomander™. Glucomander™ is a prescription-only software medical device for glycemic management intended to evaluate current as well as cumulative patient blood glucose values coupled with patient information including age, weight and height, and, based on the aggregate of these measurement parameters, whether one or many, recommend an IV dosage of insulin, glucose or saline or a subcutaneous basal and bolus insulin dosing recommendation to adjust and maintain the blood glucose level towards a configurable physician-determined target range. Glucomander™ is indicated for use in adult and pediatric (ages 2-17 years) patients. The measurements and calculations generated are intended to be used by qualified and trained medical personnel in evaluating patient conditions in conjunction with clinical history, symptoms, and other diagnostic measurements, as well as the medical professional's clinical judgement. No medical decision should be based solely on the recommended guidance provided by this software program.

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