Call for feedback: The JBDS-IP guideline on variable-rate intravenous insulin infusions in medical inpatients

he Joint British Diabetes Societies for Inpatient Care Group (JBDS-IP) has published several guidelines over the years that have proved beneficial to healthcare professionals working with hospital inpatients who have diabetes. These guidelines have aimed to help tackle specific issues faced by inpatient teams and, by standardising practice, to make it easier to gather real-world evidence of what works (and what does not) on the wards.

One of the more common interventions used to help patients achieve control of their glycaemia on the wards is the use of variable rate intravenous insulin infusions (VRIIIs). These are used in many settings, and separate guidelines have been written for patients in the perioperative setting as well as those on the medical wards. However, until recently, there were a huge variety of intravenous scales used, and the fluids that were used alongside the intravenous insulin were also highly variable. This was often seen to be a source of error as staff moved from Trust to Trust. In addition, the evaluation of the safety of these scales was very difficult to undertake – was one better than another, for example?

The JBDS-IP writing team, therefore, sought to write a guideline so that hospital teams could follow one standardised protocol. This was published in 2014 and can be accessed at: www.diabetologists-abcd.org.uk/JBDS/JBDS
IP VRIII.pdf. The aim was for the guideline to become used nationally and, therefore, allow its use to then be audited to find out how safe, as well as easy to use, it was. It has been accessed on the Association of British Clinical Diabetologists

(ABCD) website over 85 000 times since its publication. Three years on, the time has come to see whether it needs to be changed.

Requesting your feedback

The JBDS-IP has now developed a tool to evaluate the guideline's use, which has been sent to members of several societies, including the ABCD and the Diabetes Inpatient Specialist Nurses UK (DISN UK) Group. It is hoped that each Trust can send in five completed forms: one for each of five consecutive patients who were treated using a VRIII (although Trusts can send more if they want!).

Any member of the diabetes team can fill these in, but we ask that it be completed at least 24 hours after the VRII has finished, to allow for the stepdown to usual treatment to be evaluated. Each patient form should be completed separately and labelled with the Trust name and patient survey number to make it easier to identify the different forms (e.g. A N Other Trust Survey, 2 of 5).

The forms are easy to use and can just be emailed back to Dr Stella George at: stellageorge@nhs.net. A copy of the form can be accessed on the ABCD website at: https://abcd.care/jbds-vriii-audit, or by emailing Dr George directly at the email address above.

The data collection is due to finish by late August, and the data will be used to rewrite the guideline in the months after that. All other feedback is also gratefully welcomed, and it is hoped that teams will find the new, rewritten guideline even easier and safer to use for their patients on the wards.



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Citation: George S (2018)
Call for feedback: The JBDS-IP guideline on variable-rate intravenous insulin infusions in medical inpatients. *Journal of Diabetes Nursing* **22**: JDN020