

Diabetes Day Hospital: A “How-to” Manual

A step-by-step book documenting how to develop a successful diabetes day hospital program is now available to hospitals across the country, compliments of Cincinnati Children's. The e-book describes detailed planning and lessons learned in building Cincinnati Children's Diabetes Day Hospital Program, established in 2017 for children newly diagnosed with diabetes.

“We developed the Diabetes Day Hospital as an alternative to reduce hospital charges and length of stay while providing top-quality education. It's very safe and well-accepted by families,” says Sarah Lawson, MD, Cincinnati Children's Endocrine/Diabetes inpatient medical director. She is the lead author of the how-to manual and a key developer of the program, which has greatly decreased treatment and education charges, while reducing hospital readmission rates (both 30- and 365-day rates) for children with new-onset diabetes.

The book is being shared among physicians, nurses, social workers, dietitians and other professionals as a resource for building a day program for new-onset Type 1 and, more recently, Type 2 diabetes. It is adaptable for different types and sizes of pediatric institutions.

Lawson says interest in replicating the program is snowballing as hospitals seek a better experience for families and learn that Cincinnati Children's went from an 80 percent insurance company denial rate for inpatient treatment and education to 0 percent denial for the day hospital. As she recounted Cincinnati Children's two-year planning and implementation steps in the book, Lawson vowed to “write what I wish I had known before I started this. We've worked out many of the kinks.”

She concludes, “We achieved and exceeded our goals for the day hospital. It is sustainable and has become our standard of care. We want to share our experience with programs around the country.”

Program Development Components

Key discussions in the Diabetes Day Hospital Program Development book include:

- Determining feasibility of a program
- Identifying key support departments
- Establishing finance-payor relations
- Creating triage/admitting/registration/rounding practices
- Determining patient and family education on monitoring and treating complications of diabetes
- Seeking parent input in program development
- Incorporating residents, Pharmacy, Nutrition and Environmental Services
- Staff training
- Quality improvement

DIABETES DAY PROGRAM REDUCES PATIENT CHARGES AND READMISSIONS

Reduction in charge to the patient (data collected over a 14 month period):

Inpatient admission = **\$24,000** / Day Hospital admission = **\$2,800**

Maintenance of 30 day readmission rate:

National average = **3%** / Day Hospital = **0%**

Reduction in 1 year re-admission rate:

National average = **24%** / Day Hospital = **Reduction from 14% to 3%**