Supporting Improvements in Diabetes Care using the Diabetes Dashboard

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SCI-Diabetes

- Provides a shared electronic patient record to support treatment of people with diabetes in Scotland
- Web-based access to the shared record
- Data captured from multiple sources
- Real-time data-entry and update
- Supports multidisciplinary team-working
- Support for specialty groups eg DSNs, Podiatry, Dietetics
- Clinically relevant tools and views on data
- Clinically led and driven
- Local, regional and national reporting
How often do you use it?

What do you find helpful?

Some useful features:

- Prescribing Timeline
- Foot Screening Tool
- Processes of Care
SCI-Diabetes

- Domains of Care allow groups of patients to be allocated to different populations.
- Patients are aligned to one or more domains e.g. GP Practice and clinic domain.
- Patients will have a Main Domain of Care identified where their main care is provided.
- Ghost domains can be set up to cater for patients who are disengaged from services.
Reviewing Diabetes Care in Scotland

- Diabetes Improvement Plan 2014 sets out the priorities to improve the experience and clinical outcomes for patients living with diabetes across Scotland.
- Scottish Diabetes Survey provides a view on diabetes care across the whole population of Scotland annually.
- SCI-Diabetes provide reports on health board performance against the 12 quality improvement and outcome measures quarterly.
- SCI-Diabetes provide reports on HbA1c levels at GP Cluster level and Diabetes Centre level quarterly.
Aim of the Diabetes Dashboard

- Provide information on meaningful outcome measures linked to the diabetes pathway of care
- Easy to interpret local data available at individual practice/centre level
- Format that supports improvement in care in real time
- Performance against measures highlighted with nationally agreed RAG and trend status
- Allow for comparisons to be made across Scotland
- Iterative inclusive process as measures are agreed, ability to capture information is harnessed and improvement takes place
Diabetes Dashboard

- Available to all SCI-Diabetes users
- Drill down ability to support individual care at practice/centre level
- Data from GP/Cluster/HSCP/Diabetes Clinic/Board is available to all but drill down level is only visible to people authorised to view that patient population
- Separate report views for Type 1 adults and Type 2 adults, paediatrics, prevention, pregnancy and inpatient care etc
- T1 and T2 over 18 dashboard available in June 19
<table>
<thead>
<tr>
<th>Pathways of care</th>
<th>Measures of care</th>
<th>Standards of care</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Ninewells Diabetes Clinic</td>
<td>Tayside</td>
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<tr>
<td><strong>01. Glycaemic Control</strong></td>
<td></td>
<td></td>
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<tr>
<td>01.1 % HbA1c in the last 15 months</td>
<td>30.2%</td>
<td>8.1%</td>
</tr>
<tr>
<td>01.2 % HbA1c &lt; 58 mmol/mol 1 year post diagnosis</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>01.3 % HbA1c &lt;58 mmol/mol</td>
<td>30.8%</td>
<td>31.8%</td>
</tr>
<tr>
<td>01.4 % HbA1c &gt;75mmol/mol</td>
<td>30.8%</td>
<td>45.5%</td>
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<tr>
<td><strong>02. Cardiovascular Health</strong></td>
<td></td>
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</tr>
<tr>
<td>02.1 % BP recorded in the last 15 months</td>
<td>11.6%</td>
<td>2.6%</td>
</tr>
<tr>
<td>02.2 % BP &lt;= 130/80mmHg</td>
<td>Pending</td>
<td>Pending</td>
</tr>
<tr>
<td>02.3 % Cholesterol measured in the last 15 months</td>
<td>Pending</td>
<td>Pending</td>
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<tr>
<td>02.4 % statin use in those age 50 and above</td>
<td>Pending</td>
<td>Pending</td>
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<tr>
<td><strong>03. Kidney Health</strong></td>
<td></td>
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<tr>
<td>03.1 % albuminuric screening in last 15 months</td>
<td>Pending</td>
<td>Pending</td>
</tr>
<tr>
<td>03.5 % microalbuminuria and HbA1c &gt; 75mmol/mol</td>
<td>Pending</td>
<td>Pending</td>
</tr>
<tr>
<td>03.2 % eGFR in last 15 months</td>
<td>Pending</td>
<td>Pending</td>
</tr>
<tr>
<td>03.3 % microalbuminuria on ACE/AT2RB</td>
<td>Pending</td>
<td>Pending</td>
</tr>
<tr>
<td>03.4 % microalbuminuria with systolic BP &gt; 130mmHg</td>
<td>Pending</td>
<td>Pending</td>
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<tr>
<td><strong>04. Eye Health</strong></td>
<td></td>
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<tr>
<td>04.1 % retinal screening within the required timescale</td>
<td>Pending</td>
<td>Pending</td>
</tr>
<tr>
<td>04.2 % with referable retinopathy with systolic BP &gt; 130mmHg</td>
<td>Pending</td>
<td>Pending</td>
</tr>
<tr>
<td>04.3 % with referable retinopathy and HbA1c &gt; 75mmol/mol</td>
<td>Pending</td>
<td>Pending</td>
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<tr>
<td><strong>05. Foot Health</strong></td>
<td></td>
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<tr>
<td>05.1 % foot screening in the last 15 months</td>
<td>Pending</td>
<td>Pending</td>
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<tr>
<td><strong>06. Lifestyle and Engagement with Service</strong></td>
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</table>
Type 2 Diabetes Dashboard

Glycaemic Control

- Range of measures available eg HbA1c recorded, glycaemic control at one year diagnosis and overall glycaemic control
- Run rate and trend status available
- RAG shows performance of your patient population and comparison against Cluster/HSCP/HB
- Patient data available to identify/contact those who could benefit from further support
Type 2 Diabetes Dashboard

Kidney Health

- Is regular screening taking place?
- Who has microalbuminuria?
- Are people on the right treatment i.e. ACEI or AT2RB?
- Measures also give indication of those with microalbuminuria who also have
  - high blood pressure
  - poor glycaemic control
Type 2 Diabetes Dashboard

Cardiovascular Health

- Blood pressure measure of $<130/80$
- Statin use in over 50s - there is opportunity to code if statin not appropriate, contraindicated or declined to exclude these people from the measure.

- Frailty exclusions being considered - some measures may allow for people who need less stringent targets to be excluded without excluding them from the overall patient population.
Type 2 Diabetes Dashboard

Eye Health
- retinal screening in required timescale
- retinopathy and poor glycaemic control
- retinopathy and high BP

Foot Health
- foot screening
- ulcer management
- amputations

Lifestyle/Service Engagement
- disengaged from services
- weight management
- self management
- smoking
Thank You

For further information on the Diabetes Dashboard or if you have any comments please get in touch.

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