Special Diabetes Program for Indians (SDPI)

SDPI Outcomes System Required Key Measure Baseline Data Submission and Review for 2024

IHS Division of Diabetes Treatment and Prevention

January 11, 2024

SDPI – Commonly Used Abbreviations

- ADC = Area Diabetes Consultant
- Audit = IHS Diabetes Care and Outcomes Audit
- Best Practice = SDPI Diabetes Best Practice
- DDTP = IHS Division of Diabetes Treatment and Prevention
- DGM = IHS Division of Grants Management
- EMR = Electronic Medical Record
- NoA = Notice of Award for your SDPI Grant
- PHI = Protected Health Information
- PII = Personally Identifying Information
- RKM = Required Key Measure
- SDPI = Special Diabetes Program for Indians
- SOS = SDPI Outcomes System

Today's webinar

1. 2024 RKM Data: Baseline

   a. Recap of requirements

   b. Data submission: process, methods, and data review

2. SOS Website and Demonstration

3. 2023 RKM Data: Final

4. 2023 Annual Progress Report

5. Questions

Required Key Measure Data for 2024

Recap of Requirements for 2024

1. **Best Practice Requirements:**

   a. Selected one Best Practice

   b. Described proposed activities/services

   c. Described and determined size of Target Group

2. **RKM Data Submission** into the SOS:

   a. Baseline (required) ⬅

   b. Midyear (optional)

   c. Final (required)

3. **Guidance - Select a Best Practice that:**

   a. Addresses needs identified in your community

   b. You could "move the needle on", show improvement using RKM data

Why is submission of RKM data required? (Purpose of the SOS)

- To show the national results of SDPI activities.
  - Are improvements being made?
  - How big are the improvements?
  - How many people are receiving Best Practice related activities/services?
- To show stakeholders the good work that's being done.
  - You can share your program's results with tribal leaders, community members, and others.
  - Combined (not individual program) data may be shared with IHS leadership, Tribal leaders, and others.

About RKM Data

- **RKM result** = Number and percent of Target Group members who achieve the RKM

- **RKM is specific to the Best Practice selected**. Examples:
  - **Diabetes-related education**: Number and percent of individuals in your Target Group who receive education on any diabetes topic*, either in a group or individual setting. (* Includes nutrition education, physical activity education, and any other diabetes education.)
  - **Glycemic control:** Number and percent of individuals in your Target Group with most recent A1C <8.0%.

- **RKM data are:**
  - tracked locally throughout the budget period
  - submitted to DDTP via the SOS

RKM Timing for 2024

	Baseline	Mid-Year	Final
Required?	Yes	No	Yes
Reflects	Starting point	Progress so far	Final results
Collected	Before starting activities/services, around the beginning of the budget period	Around the middle of the budget period and/or other times	At the end of the budget period
Due Date for 2024	2/29/2024	6/28/2024	1/31/2025
Value	Could be 0% or higher	Generally higher than 0%	Up to 100% or even higher
Remember			"Lock" data in the SOS after submitting

RKM Data Sources

	RPMS or another EMR	Other
Target Group List: Local	Set up a register or template (different from main DM registry)	Keep track using Excel, paper, other
Target Group List: Submitting to IHS	Upload and store in WebAudit	Enter into SOS
RKM Data for Target Group Members	Upload and store in WebAudit	Enter into SOS
Baseline RKM Result	Two options: 1. Create Audit data file for Target Group for Jan-Dec of previous year>Upload into WebAudit>Pull into SOS 2. Aggregate (generally only for education BPs)	Two options: 1. Individual Entry 2. Aggregate (often appropriate for education BP)
Final RKM Result	Create Audit data file for Target Group for Jan-Dec of budget period>Upload into WebAudit>Pull into SOS	Submit into SOS using Individual Entry

2024 Best Practice and Target Group Information for Your Program

1. **Review** your program's 2024 Project Narrative Best Practice section (Part E). Note:
    a. Which Best Practice was selected
    b. Target Group information: number and description

2. **Determine** which method your program will use to track RKM data and submit into the SOS for 2024:
    a. RPMS or another EMR -> Upload into WebAudit-> pull into SOS
    b. Other data source -> Enter Individual into SOS

3. **Determine** if your Target Group members are:
    a. Known at baseline (generally for Best Practices with a clinical focus)
    b. Not known at baseline (generally for education Best Practices)

Best Practice Changes for 2024: Immunizations: Pneumococcal

2023

RKM

- Number and percent of individuals in your Target Group who have ever received a pneumococcal vaccine (includes PPSV23, PCV15, and/or PCV20).

Target Group Guidance

- Select your Target Group from adults and/or youth with diabetes.

2024

RKM

- Number and percent of individuals in your Target Group who have ever received a Pneumovax (PPSV23) vaccine

Target Group Guidance

- Same as 2023

Best Practice Changes for 2024: Blood Pressure Control

2023

RKM

- Number and percent of individuals in your Target Group who have mean blood pressure <140/<90 mmHg*

  *One value or mean of 2 or 3 values.

Target Group Guidance

- Select your Target Group* from adults with diabetes.

  * Exclude pregnant individuals.

2024

RKM

- Number and percent of individuals in your Target Group who have mean blood pressure <130/<80 mmHg* (one value or mean of 2 or 3 values).

  * The treatment goal of <130/<80 mmHg is appropriate for most people with diabetes, but some patients may require individualized goals.

Target Group Guidance

- Same as 2023

Blood Pressure Control Resources – Standards of Care

https://www.ihs.gov/diabetes/clinician-resources/soc/blood-pressure1/

Blood Pressure Control Resources – Updated Algorithm
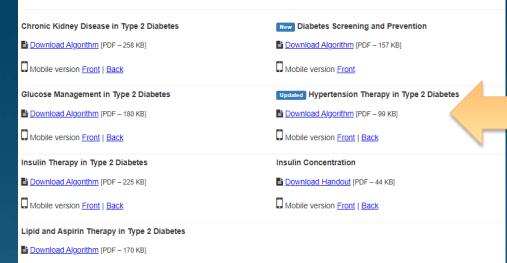

Diabetes Treatment Algorithms

These algorithms provide clinicians with a quick reference to specific diabetes care recommendations based on national guidelines and the Diabetes Standards of Care and Resources for Clinicians and Educators. These tools are developed with Indian Health Service clinical consultants, pharmacists, and other professionals.

The algorithms provide:

- Basic information of diabetes-related conditions.
- Step-by-step management of common clinical problems.
- Dosing, common adverse reactions, and contraindications for medications on the IHS National Core Formulary.
- Treatment targets and recommended monitoring parameters.

The Diabetes Treatment Algorithms are intended to serve as a tool for providers who treat patients with type 2 diabetes. They are updated periodically but changes in national practice may occur more quickly—users are advised to stay abreast of current clinical practice recommendations.

Chronic Kidney Disease in Type 2 Diabetes
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Glucose Management in Type 2 Diabetes
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Updated Hypertension Therapy in Type 2 Diabetes
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Insulin Therapy in Type 2 Diabetes
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Insulin Concentration
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Lipid and Aspirin Therapy in Type 2 Diabetes
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Algorithm webpage:

https://www.ihs.gov/diabetes/clinician-resources/#algorithms

Algorithm PDF:
https://www.ihs.gov/sites/diabetes/themes/responsive2017/display_objects/documents/algorithms/dm_hypertension_algorithm.pdf

New Best Practice for 2024: Diabetes Prevention

Special Diabetes Program for Indians (SDPI)

Search SDPI and DDTP

About Us

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Training

Best Practices

SDPI Basics

Program Spotlights

Toolkits

SDPI Outcomes System (SOS)

Audit/SOS Login

Fact Sheets and Publications

SDPI Reports to Congress

Tribal Leaders Diabetes Committee (TLDC)

Diabetes Prevention

Importance

Healthy eating, regular physical activity, and reducing weight can help prevent type 2 diabetes.

Required Key Measure

Must be reported by grantees that select this Best Practice.

> Number and percent of adults and/or youth in your Target Group who participate in a diabetes prevention program that addresses: 1) nutrition, 2) physical activity, and 3) weight loss.*
>
> * The program activities/services must address all 3 components

- **Improvement:** Increasing the number and percent of individuals in your Target Group who achieve this measure shows improvement.
- **Timeframe:** The timeframe for collecting data on the Required Key Measure will be January 1st to December 31st.
- **Data Collection:** For more information on data collection and reporting, see the SDPI Outcomes System (SOS).

Target Group Guidance

> Select your Target Group* from adults and/or youth who are at risk for developing diabetes
> * Excludes individuals who are pregnant and/or have diagnosed diabetes.

Indian Health Service
Division of Diabetes Treatment and Prevention

Data Submission:
Process, Methods, and Data Review

Overview of steps for collecting and submitting RKM data

1. SOS access: Request (if you don't already have it).

2. Target Group:

   a. Set up a list to track your Target Group. Add members when you know who they are.

   b. Collect RKM data for Target Group members.

3. Best Practice and Target Group info: Enter into the SOS.

4. RKM data:

   a. Gather locally or from RPMS/other EMR.

   b. Submit into the SOS.

SOS Access

– To request access, visit the SDPI website.

– Requires an IHS web account: user name and password.

  • Anyone can set up a web account – does not require IHS email.

  • Different from what you use to log into your email and computer.

– If you have forgotten your user name or need assistance, contact the SDPI team via email: sdpi@ihs.gov.

– More than one person from the same program can have SOS access.

– Each person who needs to use the SOS should request access using their own IHS Web Account.

Select Target Group members

A Target Group is the largest number of patients or participants that you can realistically include in the activities or services for your selected Best Practice.

– **If members are known at baseline:**

  • Determine Target Group members on or around 1/1/2024

  • Follow the same Target Group members through the entire budget period.

    – Don't add members.

    – Don't remove members, except special circumstances (e.g., death, relocation).

  • Example: Best Practice is glycemic control. Grantee identifies diabetes patients with most recent A1C>9 and selects those for whom A1C<8 is an appropriate goal.

Select Target Group members

– **If members are not known at baseline:**

  - Add Target Group members throughout the budget period.

  - Example: Best Practice is physical activity education. Grantee is providing community-based education sessions, so they can't identify the entire group they will serve ahead of time. They will add members as they hold education sessions.

RKM Data from RPMS or another EMR ➡ SOS: Pull from WebAudit

1. Set up Target Group list in RPMS.

   a. If you **do** know who members are at the beginning of the Budget Period, add them.

   b. If you **do not** know who members are, add them as you go along.

2. Create an Audit data file for your Target Group.

   a. Baseline: Jan 1-Dec 31 of 2023

   b. Final: Jan 1-Dec 31 of 2024

3. Upload the Audit data file into the WebAudit as an Interim Audit.

4. Enter Best Practice and Target Group information into SOS.

5. Submit RKM data into SOS: Pull from WebAudit

RKM Data from RPMS or another EMR ➡ SOS: Pull from WebAudit

Possible exception: For the three education Best Practices, for baseline only you may use aggregate entry in the SOS to start at 0%.

RPMS or EMR Considerations

– Requirements:

- Access to RPMS (or another EMR).
- Ability to create registry or template of Target Group members.
- Timely and accurate entry of data for RKM into system.
- Access to the WebAudit.

RPMS or EMR Considerations

- Pros:
  - Once Target Group is set up and data are entered into EMR, data can be pulled into a data file - does not require separate entry of data into SOS.
  - Can use RPMS and WebAudit tools, including reports and graphs.
- Cons:
  - Not available if program does not have access to RPMS/other EMR and WebAudit.
  - If data are not accurate or entered into RPMS/other EMR in a timely manner, RKM data will not be current or correct.

RKM Data from Other Source ➡️SOS: Enter Individual

Use Excel, other software, or paper to keep track of data for Target Group and RKM. Basic steps:

1. Set up a Target Group list.
   a. If you **do** know who members are at the beginning of the Budget Period, add them.
   b. If you **do not** know who members are, add them during the Budget Period.
2. Enter Best Practice and Target Group information into SOS.
3. Enter individual information for each Target Group member into SOS.
4. Enter/Submit RKM data for Target Group Members
   a. Baseline:
      i. Individual, if Target Group known
      ii. Aggregate Entry, if Target Group not known
   b. Final:
      i. Finish entry of individual data in SOS to be sure it is complete.
      ii. Submit final RKM result in the SOS using Individual Entry.

Considerations for Other Data Sources (not RPMS or EMR)

- Requirements:
  - Local system for tracking of Target Group and RKM.
  - Entry of information for each Target Group member into SOS.
- Pros: Does not require access to any EMR system.
- Cons:
  - Must keep track of Target Group members outside of SOS also – no PII can be entered.
  - Must enter data into SOS in addition to local system.

Individual Entry - Reminders

1. Personal identifiers (including names, chart numbers, and full dates of birth) **cannot** be entered into the SOS. Month/year of birth, gender, and RKM measure are collected in the SOS.

2. Each individual is assigned a random ID number (participant identifier) by the SOS. There is no way to connect SOS ID number with identifying information about an individual within the SOS. Your program should **add** the SOS ID number to your local list.

3. Since your local list will contain personal identifiers, be sure to store it in an appropriately secure location on your computer or network.

4. Be sure that more than one team member knows where your local list is stored and has access to it.

RKM Data Review

After submitting, review your program's RKM Data Summary Report for 2024 from the SOS. Look for:

– General Issues

- Can you pull up the report? If not, your baseline data has probably not been submitted.

- Does the exact same result appear more than once? If so, contact the SDPI team to remove duplicates.

- Is the correct value marked as Baseline? If not, contact the SDPI team to fix.

RKM Data Review (cont'd)

– WebAudit Method Issue

- Is your Denominator "very" different from your Target Group Number? If so, check that your baseline Audit was run on the correct registry/list. Rerun and resubmit if necessary.

– Individual Entry Method Issues

- Is the number of individuals entered "much" smaller than your Target Group Number? If so, determine if additional individuals need to be entered.

- Is the number of individuals entered "much" bigger than your Target Group Number? If so, discuss with your Area Diabetes Consultant.

Baseline RKM Data - Other Considerations

- If you are using the WebAudit method with RPMS/DMS:
  - Use Audit 2023 or 2024 in DMS.
  - Use 12/31/2023 as the Audit Period End Date.
  - In the WebAudit select the year that matches the DMS "version" – 2023 for DM23 and 2024 for DM24.

- WebAudit method cannot be used for the Diabetes Prevention Best Practice.

- Your program can only submit RKM data for your <u>one</u> selected Best Practice and Target Group.

- RKM data can only be submitted for the Target Group as a whole; it cannot be submitted separately for sub-groups.

Your program's RKM data

– Will not be used to determine whether or not you will receive future SDPI funding.

– Will not evaluate activities/services that are not related to your Best Practice.

- Evaluate these activities/services as described in your Application Project Narrative.

SOS Information and Resources

- **SOS Websit**e: https://www.ihs.gov/sdpi/sdpi-outcomes-system-sos/
  - Checklists for RKM data submission on General Information webpage
  - Recorded webinars on Training webpage
- **Other resources:**
  - SDPI website: https://www.ihs.gov/sdpi/
  - Diabetes Audit website: https://www.ihs.gov/diabetes/audit/
  - RPMS website: https://www.ihs.gov/RPMS/

SOS Website & Demonstration