

SDPI 2024 Grantee Conference

August 14-16, 2024 | Albuquerque, NM



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Tips and Tricks for Implementing Activities and Collecting Data on Your **Clinical** Best Practice


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Description

- This session will discuss how to pick a clinical Best Practice. We will then identify different ideas for activities addressing various clinical Best Practices. Lastly, we will evaluate the different ways to collect and report data on this measurement.



Recap: Best Practice, Required Key Measure, Target Group


- **Best Practice:** Grant requirement. Focused areas for improvement of diabetes prevention and treatment outcomes in communities and clinics. SDPI Grantees must select one Best Practice each year.
 - **Required Key Measure (RKM):** Defined measurement used to assess improvement on outcomes. Each Best Practice has one RKM.
 - **Target Group:** Number of patients/participants that you can realistically include in your activities or provide services to and collect data for with the resources you have
- 

Selecting a Best Practice and Target Group

Key considerations:

- Primary goal is to show improvement in an area of need.
- You also have to be able to collect and submit RKM data.

Other considerations:

- What are the diabetes-related needs in your clinic and community?
 - What resources are available?
 - Is there room for improvement?
 - How will you identify your Target Group members and keep track of them?
 - How will you collect RKM data?
- 

Clinical Best Practices vs. Education

- RKM generally collected in a clinic setting.
 - Target Group may be more specific to a group of patients/participants.
- RKM can be captured locally or in an electronic system.
 - Can be used to reach out widely to general audience.
 - E.g. Raise awareness

SDPI Program	Selected Best Practice	Activities/Services	Target Group Description
A	Nutrition Education	Providing nutrition education related to breastfeeding support .	Pregnant women ages 18-30 with or at risk for diabetes from local I/T/U clinic.
B	Nutrition Education	Providing nutrition education related to diabetes prevention .	Youth ages 8-15 at risk for diabetes at local Boys & Girls Club.
C	Nutrition Education	Providing nutrition education from a Registered Dietitian related to heart health .	Adults with diabetes ages 18-45 at risk for CVD from local I/T/U clinic.

All RKMs are tied to Diabetes Audit measures (except Diabetes Prevention)



What are the Clinical Best Practices?

- Aspirin or Other Antiplatelet Therapy in Cardiovascular Disease
- Blood Pressure Control
- Chronic Kidney Disease Screening and Monitoring
- Dental Exam
- Depression Screening
- Eye Exam – Retinopathy Screening
- Foot Exam
- ★ Glycemic Control
- Hepatitis C Screening
- Immunizations: Hepatitis B
- Immunizations: Influenza
- Immunizations: Pneumococcal
- Immunizations: Tetanus/Diphtheria
- Lipid Management in Cardiovascular Disease
- Tobacco Use Screening
- Tuberculosis Screening

Grantees and selected a Clinical Best Practice in 2024:

36%

You Picked a Clinical Best Practice, Now What?

Review your Project Narrative, pay attention to:

- Activities
- Target Group

Then consider the following:

- How will you collect Target Group information?
 - Which input method will you use for the SOS?
 - WebAudit
 - Individual Tool






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Activities/Services

Tips for Activities for the Clinical Best Practices

- **Each Best Practice has its own RKM**
 - Review each year, even if you selected the same Best Practice as the previous year.
 - RKMs are reviewed annually to ensure that they coincide with annual Audit updates.
 - **Clinical Best Practices may have a more detailed Target Group Guidance**
 - Target Group Guidance is your starting point for determining your Target Group.
 - Review to ensure that no Target Group members are outside of the Target Group Guidance.
 - **Ensure that activities/Services will make an improvement to the RKM**
- 

Sample Activity: Blood Pressure Control

Best Practice

Blood Pressure Control

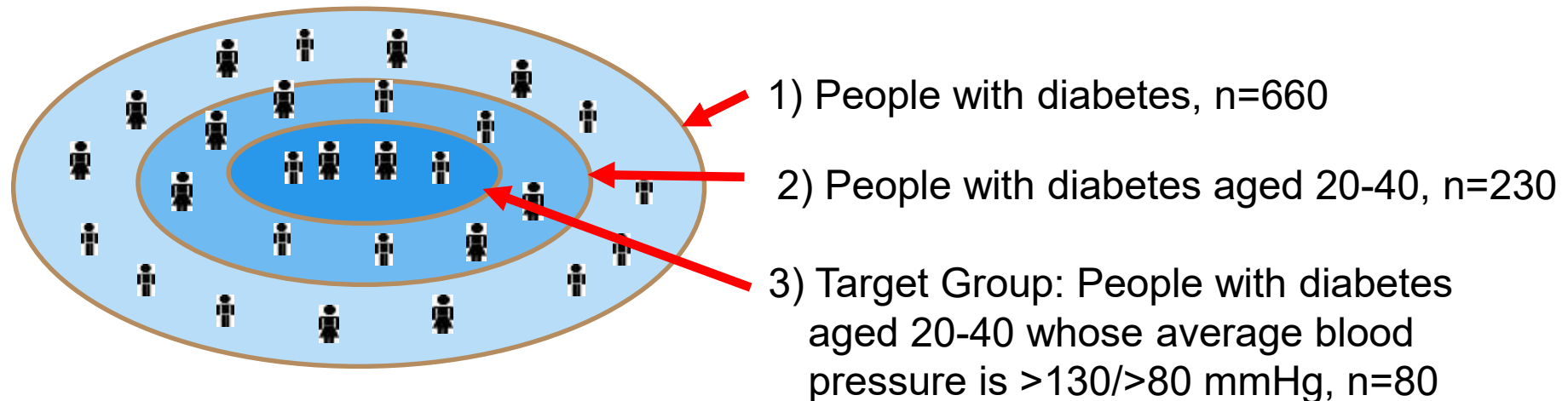
Required Key Measure

Number and percent of individuals in your Target Group who have mean blood pressure <130/<80 mmHg.

Target Group Guidance

Select from adults with diabetes.

Activities/services chosen – Intensive Case Management



Sample Activity: Blood Pressure Control (cont'd)

Blood Pressure Baseline in SOS

Selected Best Practice: Blood Pressure Control

Number in Target Group: 80

Target Group Description: People with diabetes aged 20-40 whose average blood pressure is >130/>80 mmHg

Number of Members Entered: 0

Required Key Measure: 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 provided for Blood Pressure Control is appropriate for most people with diabetes, but some patients may require individualized goals.

Review/Reference: RKM Results Submitted for FY 2024 ⓘ

Numerator ⓘ	Denominator ⓘ	Percent (Calculated)	Source	Date Submitted	Submitted By
0	80	0%	Aggregate: 2024 Application, chart review	08/05/2024 BASELINE DATA	mknight

Sample Activities

Glycemic Control

- Program decides to use their SDPI funds to purchase CGMs for their patients with diabetes
- After going through the steps, they decide that their Target Group is going to be those with a high A1C (>9.0)
- They will provide CGMs to patients that are not in the Target Group (A1c < 9.0) but they only need to track RKM data for those > 9.0



Sample Activities

Foot Exam

- Program reviewed their Annual Audit Reports and see that their foot exams decreased.
- Upon investigation, team found that foot exams were happening, but not properly documented.
- Goal for the year is to work with their team to improve foot exam documentation.



Sample Foot Exam (cont'd)

a. Major Activities (List each activity/service planned and provide a brief description)	b. Timeframe (When will this activity be implemented?)
3. Develop process steps to properly document foot exams in our EMR.	First quarter - by March 30th.
4. Train staff to properly document foot exams in EMR.	Second quarter - by June 30th.
5. Ensure new staff are trained to properly document foot exams in EMR.	Throughout year.
6. Follow-up with any staff that deviate from properly document foot exams in EMR.	Throughout year.

Sample Activities

Immunizations: Flu

- Program decides to focus on Immunizations: Flu.
- They decide to use their latest Annual Audit Data Report for their baseline
- Upon discussion with their ADC/DDTP, they were told to create a registry of this group for mid-year and final submission. Why?



Sample Flu (cont'd)

SOS Example

Numerator ⓘ	Denominator ⓘ	Percent ⓘ	Source	Date Submitted	Submitted By
69	89 This number is different from the number in your Target Group.	78%	WebAudit: Test02 Sample Data - 2023 Interim - Interim 2023 Demo Data	07/22/2024	mknight
69	89 This number is different from the number in your Target Group.	78%	WebAudit: Test02 Sample Data - 2023 Annual	01/11/2024 BASELINE DATA	melamonreg

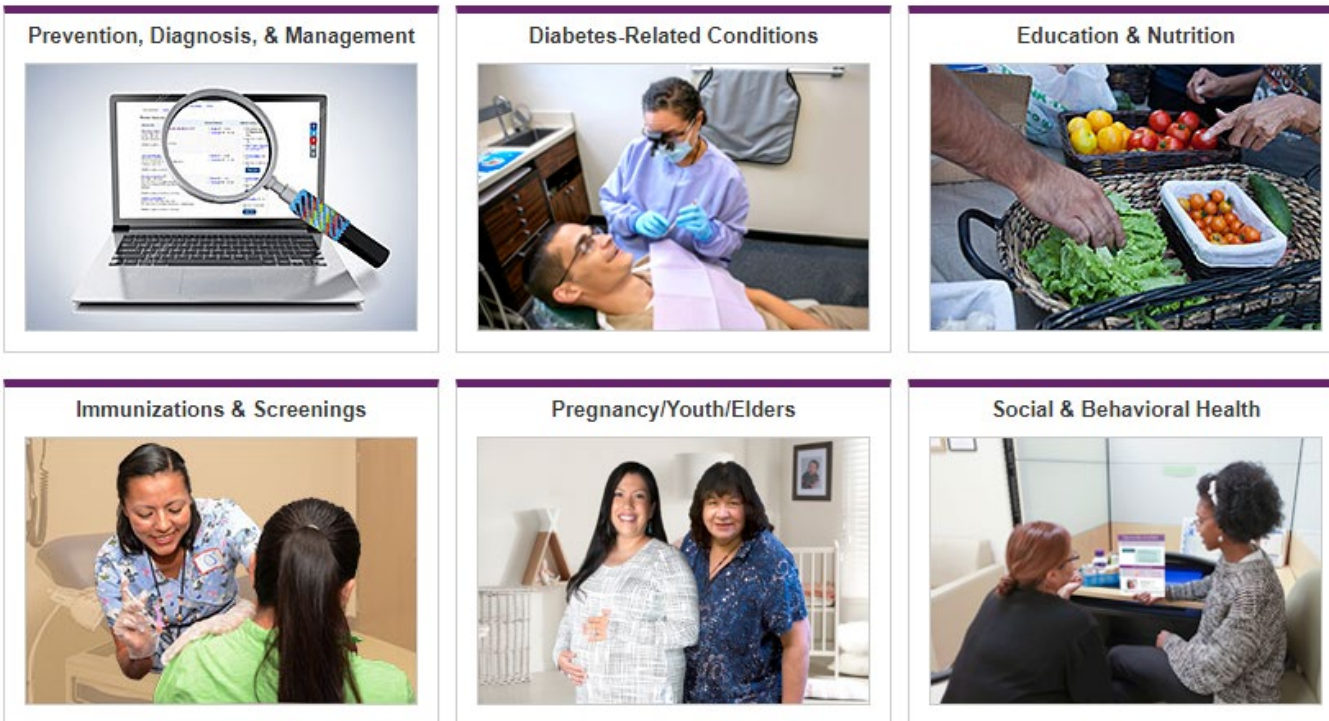
Need Training Materials/Guidance?

Visit our Standards of Care: <https://www.ihs.gov/diabetes/education-materials-and-resources/>

Diabetes Standards of Care and Resources for Clinicians and Educators

The Diabetes Standards of Care and Resources for Clinicians and Educators are intended to provide guidance to clinicians and educators as they care for American Indian and Alaska Native people who have or are at risk for type 2 diabetes. Use the [Recommendations At-a-Glance](#) as a quick reference. For each diabetes care topic, click on the link below to find regularly-updated recommendations, useful clinical tools and resources, and patient education materials.

Diabetes Care Topics by Group



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Target Group

Tips/Tricks for Target Group

- **It's okay to go small**
 - The Project Narrative provides steps to help you determine your Target Group to realistically include in your activities or provide services to and collect data for with the resources you have.
- **If pre-selected/determined, avoid adding any new members**
 - Once you make your list, stick with them
 - Individuals can be removed due to death/relocation.
 - Make sure at least one other colleague knows of this list.
- **Alternatively, you can add as you go**
 - Works best with low intensity activities/services intended to reach a wider group.



Additional Target Group Considerations

- Can your Target Group be tracked in the Audit?
- If not, can you collect/track the **required** Target Group individual data?
 - Month of birth
 - Year of birth
 - Gender
 - Whether or not RKM has been achieved

A banner with a white background and a dotted border, featuring a chevron shape on the right side. The text is in a dark red, serif font. The banner is set against a background of a woven straw pattern.

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Data

Tips for Data Collection

General:

- Review your Target Group before each activity so you know who to need to collect RKM data on for SDPI.
- Review each activity and visualize and/or document method/process steps that will be used to collect RKM information for your Target Group members.
- If possible, collect baseline from your Target Group for the previous year so you can compare to the current year.
 - Example – For 2024
 - Baseline: January – December 2023
 - Final: January – December 2024

More Tips for Data Collection

WebAudit

- Set up a registry so no new individuals are added throughout the year
- If manual entry, minimum requirements are:
 - Audit Period End Date
 - Month of Birth
 - Year of Birth
 - Birth Sex
 - Education Provided

Individual Tool (SOS)

- Set up a local tracking list.
- Aggregate for baseline is acceptable.
- For individual entry in the SOS, you will need to enter the following:
 - Month of Birth
 - Year of Birth
 - Gender
 - Whether or not RKM was met



Tricks for Data Collection

For WebAudit/SOS

- If possible, do quality checks on data before uploading into the WebAudit
- If manually entering data, utilize the tab button on your keyboard access to next form field.
- Keep your Target Group in mind to avoid accidentally adding additional individuals.
- You can omit adding individuals who have passed or relocated. Reach out to sdpi@ihs.gov to update your Target Group number.

Data into WebAudit - Electronic

```
Audit2024DemoData_N5.txt - Notepad
File Edit Format View Help
AUDITDATE^FACILITYNA^REVIEWER^STATE^MOB^YOB^SEX^DODX^DMTYPE^TOBSCREEN^TOBACCOUSE^TOBCOUNSEL^ENDSSCREEN^ENDSUSE^FEI
12/31/2022^DEMODATA^KLS^NM^6^1963^2^1/19/2012^2^1^2^ ^1^2^5^3.78^171^1^127^80^126^81^105^62^1^1^1^2^1^2^1^1^2^2^1^
12/31/2022^DEMODATA^KLS^NM^3^1953^1^11/3/1995^2^1^2^ ^1^2^5^0.91^133^1^153^88^134^64^151^77^1^1^1^2^1^2^1^1^2^1^1^
12/31/2022^DEMODATA^KLS^NM^5^1964^2^3/1/1985^2^1^2^ ^1^2^5^4^180^1^123^73^136^97^128^84^1^1^2^2^1^4^1^1^2^1^1^2^1^
12/31/2022^DEMODATA^KLS^NM^3^1957^1^6/10/2011^2^1^2^ ^1^2^5^0.63^160^1^147^74^138^81^157^71^1^1^1^2^1^2^1^1^2^2^1^
```

Data file from RPMS or other EMR



Diabetes WebAudit



[Facility Administration](#)

Enter facility information and lock data.



[Data Processing](#)

Submit (entry or upload), view, download, and check data.



[Reports](#)

Generate reports and graphs.



Data into WebAudit - Manual

Diabetes WebAudit



Facility Administration

Enter facility information and lock data.



Data Processing

Submit (entry or upload), view, download, and check data.



Reports

Generate reports and graphs.

Audit Forms



Data into WebAudit – Manual (cont'd)

* Required Fields

WebAudit ID for this record	* Audit Period End Date	Facility Name	IHS Area Code	SU Code	Facility Code	Number of Eligible Patients
1001	(mm/dd/yyyy) 12/31/2024	Test02 Sample Data	TE	ST	02	750

Reviewer initials:

State of residence:

Select a state... ▼

* Month of Birth: enter or select

Choose one... ▼

* Year of Birth: enter or select

Choose one... ▼

* Birth Sex:

Choose one... ▼

Date of Diabetes Diagnosis:

(mm/dd/yyyy)

Laboratory Data (most recent result during Audit period)

A1C:

%

A1C Date obtained:

(mm/dd/yyyy)

WebAudit → SOS

Diabetes WebAudit

Diabetes WebAudit

Facility Administration

Data Processing

Reports

Audit Resources

Data Systems

Sign Out

Diabetes WebAudit



[Facility Administration](#)

Enter facility information and lock data.



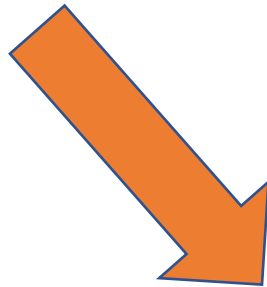
[Data Processing](#)

Submit (entry or upload), view, download, and check data.



[Reports](#)

Generate reports and graphs.



Choose a DDTP System

**SDPI
Outcomes
System
(SOS)**



[SDPI Outcomes System \(SOS\)](#) – Tools for SDPI grantees to submit Required Key Measure data for their selected [Diabetes Best Practice](#)

DATA PROCESSING
AUDIT RESOURCES
WEBAUDIT
FACILITY ADMINISTRATION
AUDIT REPORTS

[WebAudit](#) – Tools for conducting [IHS Diabetes Audits](#)

WebAudit → SOS (cont'd)

[SDPI Outcomes System \(SOS\)](#) / [Submit RKM Data](#)

SDPI Outcomes System (SOS)

[Best Practice / Target Group Info](#)

Submit RKM Data

Pull from WebAudit

[Enter Individual](#)

[Enter Aggregate](#)

[SOS Grantee Reports](#)

[Lock SOS Data](#)

[Data Systems](#)

[Contact Us](#)

[Sign Out](#)

Submit RKM Data



Pull from WebAudit

Requires access to the IHS Diabetes [WebAudit](#) and previously uploaded or entered data for your Target Group in the WebAudit



[Enter Individual](#)

Requires entry of information and RKM data for each individual member of your Target Group



[Enter Aggregate](#)

Requires an outside data source that can provide the number of your Target Group members that achieve the RKM

+ Submitting RKM Data

Facility Name: Test02 Sample Data

Select the Audit session with data for your Target Group for the relevant time period from the drop down menu, then click **Go**.

Select Audit Session:

2023 Interim - Interim 2023 Demo Data (02/22/24)

Go

Pull and Submit RKM Data from the WebAudit

Required Key Measure:

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

Numerator ⁱ	Denominator ⁱ	Percent ⁱ
69	89 <small>This number is different from the number in your Target Group. Click on Submit to save this information or Cancel.</small>	78%

Submit

Cancel

Data into SOS



OUTPUT BROWSER Dec 31, 2021 12:25:21 Page: 1 of 48

***** CONFIDENTIAL PATIENT INFORMATION *****

DR DEMO HOSPITAL Page 1
Patients on the IHS DIABETES Register
without a visit between Jan 01, 2021 and Dec 31, 2021

PATIENT NAME	HRN	STATUS	CASE MANAGER	LAST VISIT	# DM DXS	LAST DM DX
DEMO, MARIE	999490	ACTIVE		03/22/2019	158	02/22/2019
DEMOA, CHANTEL	999991	ACTIVE		05/17/2005	18	02/08/2005
DEMOB, LAYLA GABRIELL	999992	ACTIVE		08/09/2010	4	08/09/2010
DEMOC, PHYLLIS N	999993	ACTIVE		04/10/2019	124	04/10/2019
DEMOD, CARLA	999994	ACTIVE		11/05/2004	0	
DEMOF, ILLYANA	999995	ACTIVE		10/29/1993	1	10/27/1993

+ Enter ?? for more actions >>>
+ NEXT SCREEN - PREVIOUS SCREEN Q QUIT
Select Action: +//

Paper charts or local EMR output



SOS

Submit RKM Data



[Pull from WebAudit](#)

Requires access to the IHS Diabetes [WebAudit](#) and previously uploaded or entered data for your Target Group in the WebAudit



[Enter Individual](#)

Requires entry of information and RKM data for each individual member of your Target Group



[Enter Aggregate](#)

Requires an outside data source that can provide the number of your Target Group members that achieve the RKM



Data into SOS (cont'd)

Selected Best Practice: Glycemic Control



Number in Target Group: 8

Target Group Description: Patients with A1C > 9.0.

Number of Members Entered: 4

Required Key Measure: Number and percent of individuals in your Target Group with most recent A1C <8.0%.

Review/Reference: RKM Results Submitted for FY 2024 ⓘ

Edit	Remove	Numerator ⓘ	Denominator ⓘ	Percent (Calculated)	Source	Date Submitted	Submitted By
		3	8	38%	Individual Entry	01/05/2024	mknight

Submit RKM Current Result

Numerator ⓘ	Denominator ⓘ	Percent (Calculated)
4	8	50%

Add a New Target Group Member

**Required Field*

Participant Identifier:

*Month of Birth: enter or select

*Year of Birth: enter or select

*Gender: enter 1 for male, 2 for female or select 3 for unknown

Was the Required Key Measure met for this Target Group Member?

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Report

Report Tips

- Use the SOS to report on the RKM of your selected Best Practice.
 - You only need to collect/submit RKM data for your Target Group.

For any other activities:

- If you have access to the WebAudit, review the Reports tools to see what you can use.



Resources/Tools

- **SDPI Best Practices webpage:** <https://www.ihs.gov/sdpi/sdpi-community-directed/diabetes-best-practices/>
 - Review Resources (look for PIE!)
- **SOS webpage:** <https://www.ihs.gov/sdpi/sdpi-outcomes-system-sos/>
 - General Information tab
- **IHS Diabetes Care and Outcomes Audit:** <https://www.ihs.gov/diabetes/audit/>
 - Audit Resources
 - Audit Training

What are your tips?

- Activities/Services
- Target Group
- Data
- Report



A banner with a white background and a dotted border, featuring a right-pointing arrow shape. The text is centered within the arrow. The banner is set against a background of a woven straw mat with a colorful geometric pattern of blue, yellow, and red stripes.

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Questions?

Thank you!