

## QI Activity

# Diabetes Data Quality

### Accreditation reference

<b>RACGP Standards for general practices 5<sup>th</sup> edition</b>
<b>Core Standard 5: Clinical management of health issues</b> Criterion C5.1 – Diagnosis and management of health issues
<b>Quality Improvement Standard 1: Quality Improvement</b> Criterion QI 1.3 – Improving clinical care

### Diabetes Data quality activity example

<b>Goal</b>
<b>What are you trying to accomplish?</b>
To improve the accuracy and completeness of the diabetes register by (insert date here).

<b>Measure</b>
<b>How will you know that a change is an improvement?</b>
Compare: <ul style="list-style-type: none"><li>• Number of patients on the diabetes register at <b>start</b> of improvement activity (baseline).</li><li>• Number of patients on the diabetes register <b>after</b> the improvement activity.</li></ul>

<b>Ideas</b>		
<b>What changes can we make that will lead to an improvement? – small steps/ideas</b>		
<b>1. Archive inactive patients</b>	<b>Date Completed</b>	<b>Notes</b>
<input type="checkbox"/> Archive inactive patients as per the practice data cleansing policy.		
<b>2. Agree on a clear definition of diabetes</b>		
<input type="checkbox"/> Determine how your clinicians are currently coding patients with diabetes. Clinicians are probably		

	doing it differently, with some using the free text field in the clinical software.		
<input type="checkbox"/>	As a team, review the definition of Type 1 and Type 2 diabetes as per the <a href="#">RACGP General practice management of Type 2 diabetes 2016-2018</a> .		
<input type="checkbox"/>	Monitor and review the system. This could include providing training for clinicians as part of orientation, and providing regular updates and reminders of the definitions to all staff.		
<input type="checkbox"/>	Acknowledge the efforts of your general practice team when coding improves. This will help to ensure these changes are sustained.		
<b>3. Develop a clean register of patients with Type 1 and Type 2 diabetes</b>			
<input type="checkbox"/>	Search for all patients that have diabetes recorded but not coded as Type 1 or Type 2 (unspecified or unknown type).		
<input type="checkbox"/>	Search for all patients who do not have a diagnosis of diabetes but are on insulin and/or oral hypoglycaemic medications. Review and code appropriately.		
<input type="checkbox"/>	Search for all patients who do not have a diagnosis of diabetes but have had an HbA1c blood test recorded. Review and code appropriately.		
<b>4. Develop systems to maintain your diabetes register</b>			
<input type="checkbox"/>	Identify who will maintain the diabetes register once the register has been established and validated.		
<input type="checkbox"/>	Provide protected time to this allocated person to review the register on a regular basis.		
<input type="checkbox"/>	Identify how often the diabetes register will be reviewed to check for accuracy.		
<b>5. Develop systems to improve and maintain data quality in your practice with specific focus on elements of the shared health summary</b>			
<input type="checkbox"/>	For people with diabetes, review the accuracy of data for the five elements of a Shared Health Summary <ul style="list-style-type: none"> <li>• Demographics</li> <li>• Medication List</li> <li>• Past History</li> <li>• Allergies</li> <li>• Immunisations</li> </ul>		