Nuts and Bolts of Conducting Diabetes Audits

Karen Sheff
IHS Division of Diabetes Treatment and Prevention
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Objectives

1. Locate resources necessary for conducting an Audit.
2. Perform a manual or electronic Audit.
3. Submit Audit data into the WebAudit.
4. Review Data Quality Checks in the WebAudit.
What is the Audit and why do it?

**What:** A process for assessing diabetes care and health outcomes for American Indian and Alaska Native people with diagnosed diabetes.

**Why:**

1. To work towards the goal of providing all diabetes patients with the highest quality of care, as outlined in the [IHS Standards of Care](#).
2. To assess the diabetes care provided at a facility, including strengths and areas for improvement.
3. To fulfill requirements of Special Diabetes Program for Indians (SDPI) grants (participation in Annual Audit).
4. To contribute to Area and IHS outcome measures and reports.
Diabetes Standards of Care & Clinical Practice Resources

https://www.ihs.gov/diabetes/clinician-resources/soc/
When are Audits done?

1. **Annual Audit**: Once per year, data submitted to and processed by the IHS Division of Diabetes
   a. **Period of care**: Jan 1-Dec 31
   b. **Due date**: March of the following year

2. **Interim Audits***: Can be many times per year, for SDPI, Area, or local use – check with your Area Diabetes Consultant (ADC)
   a. **Period of care**: Locally or Area determined
   b. **Due date**: Locally or Area determined

*Use of the IHS Diabetes Care and Outcomes Audit tools for any purpose other than the *Annual Diabetes Audit*. 
Who conducts Audit?

I/T/U health care facilities

• Participation in the Annual Audit is **required** for SDPI grantees.
• Others are welcome and encouraged to participate in the Annual Audit.
• All participating facilities have access to all Audit resources, regardless of whether they have an SDPI grant.
What outcomes does the Audit measure?

- Blood pressure
- Height and weight
- Tobacco use
- Exams
- Education
- Medications
- Immunizations
- Lab results
- Comorbidities: depression, CVD, TB
- More ...

There are changes every year!
Different Time Periods for Different Items

• **Most** Audit items are reviewed for the past 12 months, including:
  - Tobacco/ENDS screening
  - Blood pressure
  - Medications
  - Weight
  - Education
  - Labs

• **Exceptions** include:
  - Tobacco/ENDS use
  - TB test/results/tx
  - Health conditions (e.g., HTN, CVD)
  - Height
  - Immunizations (except flu)

• **Look for key words**: “Audit period”, “ever”
Encounter to WebAudit

Throughout the year:

1. Patient encounters take place – Visits with providers, medication pick up or refills, lab tests done, immunizations given, others

2. Information about encounters is documented in paper chart or EHR

3. Other (historical) information can also be added to EHR

Audit time:

1. Patient is on registry or added to diabetes patient list

2. Audit is “run” on registry/patient list

3. Selected information is pulled from the EHR according to the detailed logic (rules) for each item and used in reports or Audit data file

4. Audit data file is uploaded into the WebAudit
Audit Methods

To conduct an Audit, data for patients with diabetes are collected at a clinic or hospital by one of two methods:

1. **Electronic Audit:** Data are extracted from an electronic medical record system into a data file.

2. **Manual Audit:** Paper charts are reviewed and data are written onto a paper Audit form for each patient.

See the [Audit 2017 Instructions](#) for additional information.
## Electronic Audits – RPMS vs. Others

The process and requirements for conducting an electronic Audit depends on the health record system used at your facility.

<table>
<thead>
<tr>
<th></th>
<th>RPMS</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Software programming done by</strong></td>
<td>IHS for all</td>
<td>Your software company or vendor</td>
</tr>
<tr>
<td><strong>Preparation</strong></td>
<td>Install patch</td>
<td>Software dependent</td>
</tr>
<tr>
<td></td>
<td>Update taxonomies</td>
<td></td>
</tr>
<tr>
<td><strong>Need separate reporting software</strong></td>
<td>No</td>
<td>Usually</td>
</tr>
<tr>
<td><strong>Health factors &amp; exam codes used</strong></td>
<td>Yes</td>
<td>Not usually (may use CPT codes)</td>
</tr>
<tr>
<td><strong>Education documentation</strong></td>
<td>RPMS specific coding</td>
<td>System dependent</td>
</tr>
<tr>
<td><strong>Diabetes register/patient list tools</strong></td>
<td>Yes</td>
<td>Not usually (create list ‘on the fly’ based on ICD codes)</td>
</tr>
</tbody>
</table>
Electronic Audit Process (Part 1)

1. **Update** electronic diabetes registry/patient list or confirm that it’s current.

2. **Prepare** electronic medical record system for current Audit software (2017). For RPMS/DMS:
   a. **Verify** that patch 10 has been installed or request installation by RPMS site manager.
   b. **Review and update** local taxonomies as needed.

3. **Create** Audit data export file for 12-month time period of interest.

4. **Retrieve** Audit data file – may require assistance from OIT.

5. **Upload** data file to WebAudit.
Manual Audit Process (Part 1)

1. **Select** charts to review according to [Audit Instructions](#) (all or a sample).
2. **Review** each selected medical chart.
3. **Complete** one Audit form for each chart.
4. **Enter data** manually into WebAudit.
### Electronic & Manual Audit Process (Part 2)

After gathering Audit data, in the WebAudit:

<table>
<thead>
<tr>
<th>Step</th>
<th>WebAudit Tool(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong></td>
<td>Enter facility information</td>
</tr>
<tr>
<td><strong>2</strong></td>
<td>Submit data (choose one): Electronic Audit, Manual Audit</td>
</tr>
<tr>
<td><strong>3</strong></td>
<td>Check data for potential errors → revise data as needed</td>
</tr>
<tr>
<td><strong>4</strong></td>
<td>Review reports and graphs of results → revise data as needed</td>
</tr>
<tr>
<td><strong>5</strong></td>
<td>“Lock” data</td>
</tr>
<tr>
<td><strong>6</strong></td>
<td>Complete user survey</td>
</tr>
</tbody>
</table>
Audit Data Security

**Manual Audits:** Paper forms contain patient data and should be handled according to facility’s policies.

**Electronic Audits**

- RPMS/DMS Audit files contain patient data and should be handled according to facility’s policies.
- Save DMS Audit files in a secure location, as instructed by your facility.
Audit Data Security

WebAudit

- Do not give your username/password to anyone. More than one person from a facility can have access.
- Lock your workstation or log out if you need to do something else.
- Protect files and documents with patient data (from View/Download Data or Data Quality Check tool) according to local policies.
WebAudit Tips

1. **Logging in** - In your browser, add the WebAudit login page or the Audit main webpage to your ‘favorites’.

2. **Data Entry** – Use the tab and number keys.

3. **WebAudit help** – Email link in lefthand menu.

4. **Interim Electronic Audits** – Be sure to select the Audit year that matches the DMS Audit version you used (e.g., 2017 for DM17).
# Audits: Annual vs. Interim vs. SDPI RKM Data

<table>
<thead>
<tr>
<th></th>
<th>Annual Audit</th>
<th>Interim Audit</th>
<th>SDPI RKM Data</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Frequency</strong></td>
<td>Once per year</td>
<td>As many as needed</td>
<td>As many as needed</td>
</tr>
<tr>
<td><strong>WebAudit Audit Type</strong></td>
<td>Annual</td>
<td>Interim</td>
<td>Interim</td>
</tr>
<tr>
<td><strong>WebAudit Versions Available</strong></td>
<td>Current year only</td>
<td>Current + previous year</td>
<td>Current + previous year</td>
</tr>
<tr>
<td><strong>Conducted When</strong></td>
<td>Feb-Marc</td>
<td>All year</td>
<td>All year</td>
</tr>
<tr>
<td><strong>Period Covered</strong></td>
<td>Jan-Dec</td>
<td>Locally determined</td>
<td>Locally determined</td>
</tr>
<tr>
<td><strong>Due Date</strong></td>
<td>2018: 3/15/2018</td>
<td>Determined by Area or program</td>
<td>2017 Baseline: 2/28/17 2017 Final: 1/31/18</td>
</tr>
</tbody>
</table>
| **Who is included**      | **Electronic:** All eligible DM patients  
**Manual:** All or sample of eligible DM patients | Determined by Area or program | SDPI Target Group |
| **Data reviewed by DDTP** | Yes          | No            | No            |
| **Data used for national reports** | Yes | No | Yes (baseline & final only) |
Audit Resources

Website – Access information and resources below
– https://www.ihs.gov/diabetes
– Click on the IHS Diabetes Audit link in the left hand menu.

1. **Materials:** Form, Instructions, Checklists, RPMS/DMS Addendum
2. **Training:** Live, recorded, OIT/DMS, other
3. **Support from Audit team (WebAudit and general ?):**
   email ddtpwebauditadmins@ihs.gov
4. **OIT Service Desk** (RPMS electronic Audits):
   https://www.ihs.gov/Helpdesk/
5. **Area Diabetes Consultants/Area Audit Support**
Diabetes Audit Team

Ann Bullock
Director, IHS Division of Diabetes

Karen Schellenberger
WebAudit Developer

Lori Butcher
RPMS Developer

Karen Sheff
Biostatistician, Support, Training

Cecilia Butler
WebAudit Support

Mark Williams
Visual DMS Developer

Chris Lamer
RPMS Support, Clinical Expert
Introduction to Audit Website & WebAudit
Questions?
Thank you!

Want more Audit training?

• Audit Power Tools: Understanding and Using Reports and Graphs
  Wednesday at 1:15p - Fiesta I-II (same room)

• Making the Case: Sharing Diabetes Data with Tribal Leaders and Other Stakeholders
  Wednesday at 2:20p - Pavilion VI

• Don’t File that Audit Report Away Yet! Use Your Diabetes Audit for Improvement Activities
  Thursday at 9:05a - Fiesta I-II (same room)

• Outside the RPMS Box: Using non-RPMS Systems for Diabetes Data
  Wednesday at 3:35p - Fiesta III-IV