

Diabetes Management HbA1C

2017 Symposium on the Future of Complex Care Gallery of Promising Practices

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PROMISING PRACTICE OVERVIEW

OLE Health tracks the percentage of patients with a diagnosis of diabetes and their most recent HbA1c measurement.

In January 2017, the percentage of patients with a recent HbA1C under 9.0 was 47.5% and increased to 57.4% in October 2017. The improvement was a result of EHR optimizations and staff training.

The Evidence Based Care Committee at OLE Health reviewed the clinical guidelines, protocols and best practices to build and standardize the workflow of care team members who support patients with diabetes.

The team trained Medical Assistants and Providers on documentation and processes for diabetes management team based care.

ACTIONS TAKEN

The Evidence Based Care Committee (EBCC) at OLE Health developed a training for care teams based on evidence based care guidelines, protocols and eCW optimization processes.

The training included:

1. Review of the measurement and report of HbA1c of OLE Health patients
2. Review of guidelines and protocols
3. Review of new workflow and templates to be used during daily huddles

After the training, a second meeting was scheduled with staff to review the initial training and review case studies and progress on the measure.

AIM

To improve diabetes management of HbA1c of OLE Health adult patients (18-75 years old) with a diagnosis of diabetes.

MEASURES

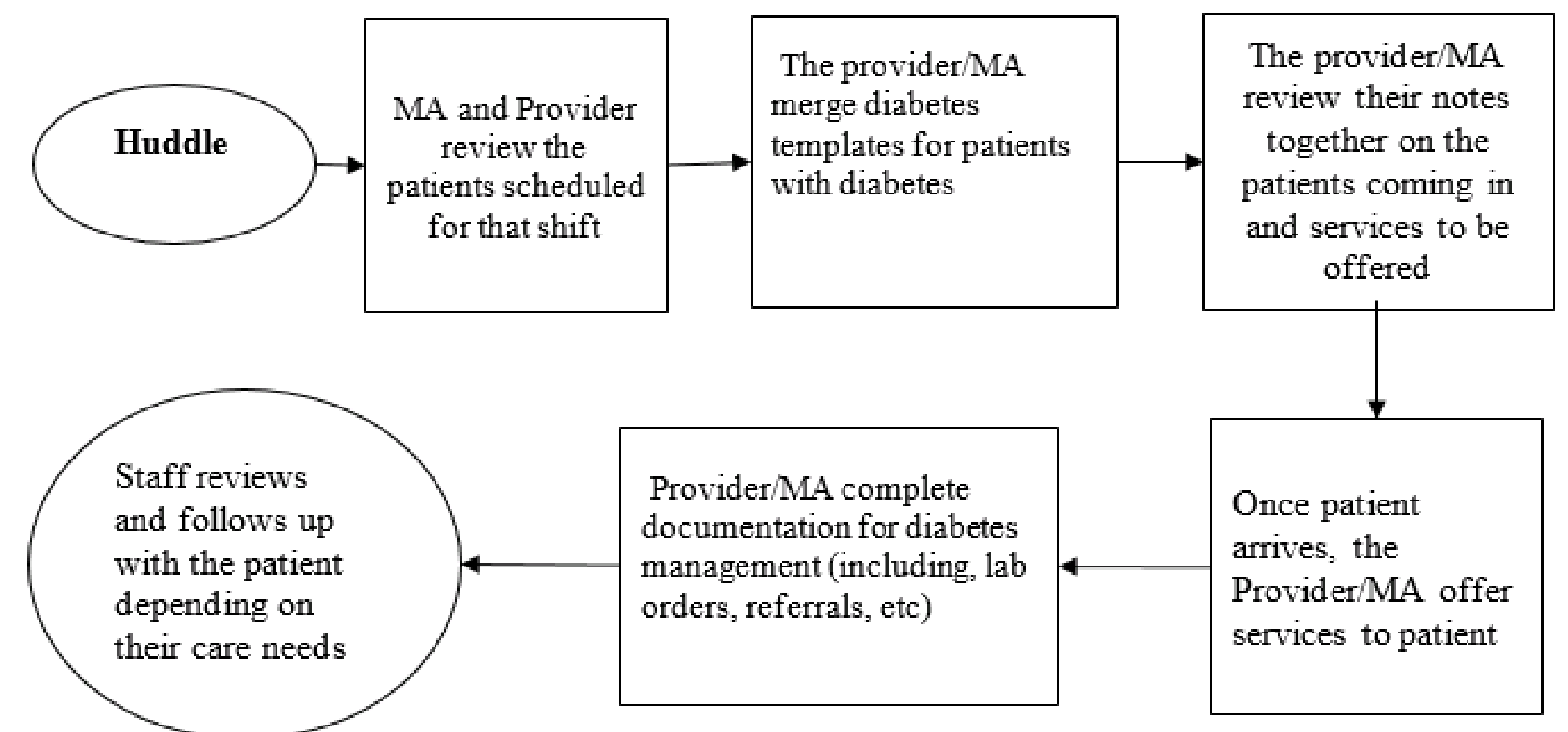
Measure: Diabetes Management – HbA1c

Numerator:

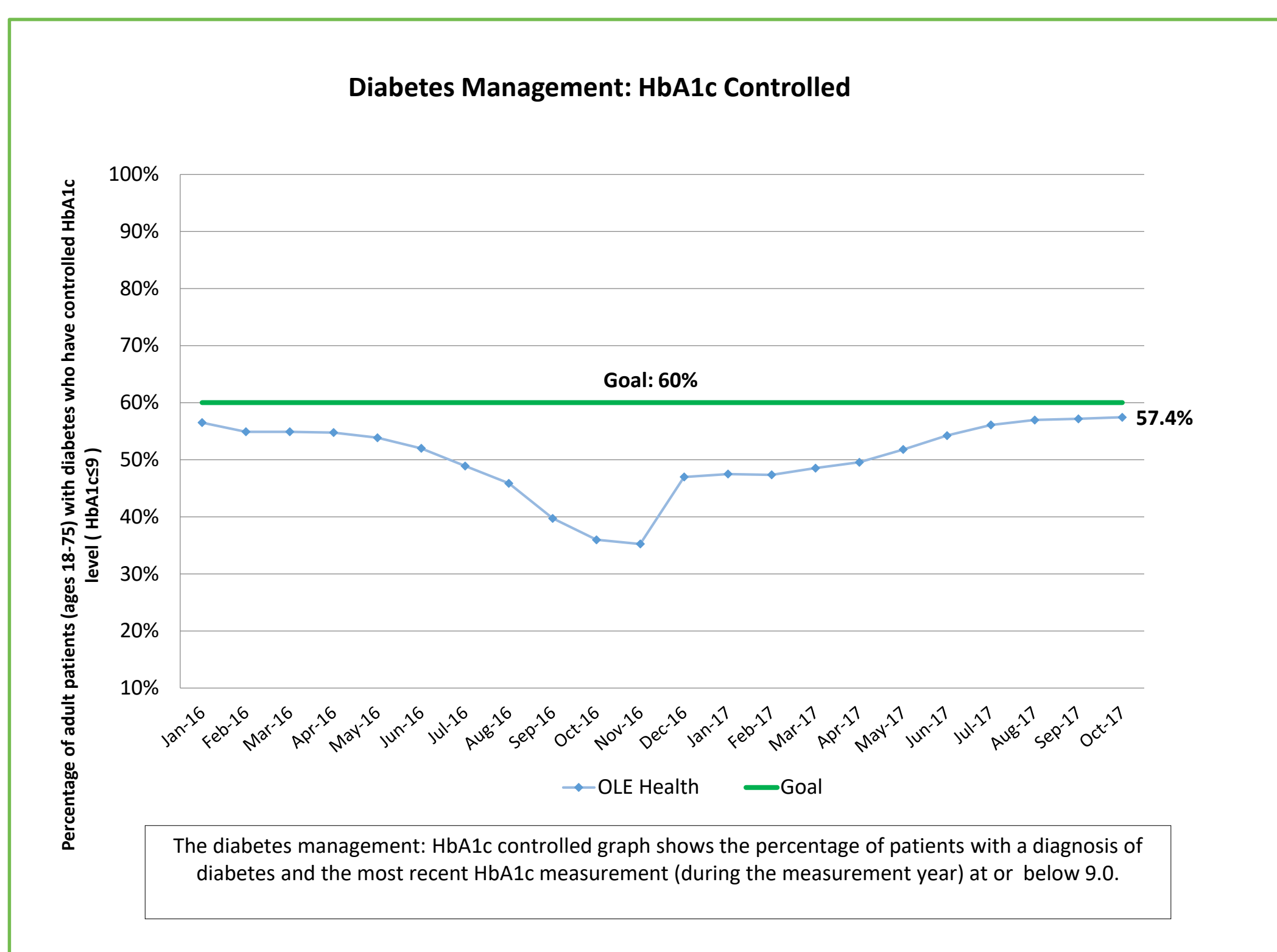
The number of patients with diagnosis of diabetes with a HbA1c less than or equal to 9.0% during the measurement year.

Denominator: The percentage of 18-75 year old patients with a diagnosis of diabetes

WORKFLOW



Graph: Diabetes Management: HbA1c



RESULTS TO DATE

OLE Health's Diabetes Management HbA1c measure has improved from 47.5% to 57.4% from January to October.

LESSONS LEARNED

The team based care diabetes training was helpful. Staff was able to review the care guidelines for patients with diabetes as well as the proper way to document in eCW the health needs and outcomes of patients.

Another lesson came from the feedback from the MAs that although helpful, the templates took a long time to complete during the huddle. A new project arose from this feedback to simplify/reorganize all MA templates.