Special Diabetes Program for Indians (SDPI)

SDPI Outcomes System (SOS) Baseline Data for 2020

IHS Division of Diabetes Treatment and Prevention January 23, 2020



Today's webinar

- 1. 2020 Required Key Measure (RKM) Data: Baseline
 - a. Recap of requirements
 - b. Data submission: process, methods, and data review
- 2. SOS Website and Demonstration
- 3. 2019 RKM Data: Final
- 4. 2019 Annual Progress Report
- 5. Questions



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
- EHR = Electronic Health Record System
- 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



Required Key Measure (RKM) Data for 2020



Recap of Requirements for 2020

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 SDPI Outcomes System (SOS):

- a. Baseline (required) 🛑 💳
- b. Midyear (optional)
- c. Final (required)

3. Guidance - Select a Best Practice that:

- 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 is 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 SDPI Outcomes System (SOS)



RKM Timing for 2020

	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 2020	2/28/2020	6/30/2020	1/29/2021
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

1. Create Audit data file for Target

2. Aggregate (generally only for

Create Audit data file for Target

period>Upload into WebAudit>Pull

Group for Jan-Dec of budget

Group for Jan-Dec of previous

year>Upload into WebAudit>Pull

RDMS or another FHR

Two options:

into SOS

into SOS

education BPs)

Group Members

Final RKM Result

Baseline RKM Result

	Krivis of afformer Lifts	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	Upload and store in WebAudit	Enter into SOS

Othor

Two options:

Entry

1. Individual Entry

for education BP)

Aggregate (often appropriate

Submit into SOS using Individual

2020 Best Practice and Target Group Information for Your Program

- **1. Review** your program's 2020 Project Narrative Best Practice section (Part F). 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 2020:
 - a. RPMS or another EHR -> 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)



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 EHR.
 - b. Submit into the SOS.



SOS Access

- To request access, visit the <u>SDPI website</u>.
- 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 1/1/2020
 - 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 EHR 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 2019
 - b. Final: Jan 1-Dec 31 of 2020
- 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 EHR 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 EHR Considerations

– Requirements:

- Access to RPMS (or another EHR).
- 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 EHR Considerations

– Pros:

- Once Target Group is set up and data are entered into EHR, 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 EHR and WebAudit.
- If data are not accurate or entered into RPMS/other EHR 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 EHR)

– 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 EHR 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.
- 2. Each individual is assigned a random ID number 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.
- 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 2020 from the SOS. Look for:

- General Issues
 - Is the exact same value in there more than once? If so, contact the SDPI team to remove one of the values.
 - 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 2019 or 2020 in DMS.
 - Use 12/31/2019 as the Audit Period End Date.
 - In the WebAudit select the year that matches the DMS "version"
 2019 for DM19 and 2020 for DM20.
- 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 shared with anyone other than DDTP,
 DGM, and ADCs.
- 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 Website: https://www.ihs.gov/sdpi/sdpi-outcomes-system-sos/
 - Checklists for RKM data submission on <u>General Information webpage</u>
 - Recorded webinars on <u>Training webpage</u>
- 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/



Questions?



SOS Website & Demonstration



2019 Final RKM Data

- Required for all grantees.
- Due date: 1/31/2020.
- Before locking data in SOS, run and review RKM Data
 Summary Report for 2019.
- Resources
 - Recorded webinar on <u>SOS Training webpage</u>.
 - Checklists on <u>SOS General Information webpage</u>.



FY 2019 Annual Progress Report Reminder

- Required for all grantees.
- Due 3/31/2020 in GrantSolutions (If you are a subgrantee, check with your primary program on due date and submission preferences.).