

Special Diabetes Program for Indians (SDPI)

SDPI Required Key Measure Baseline Data Submission and Review for 2026

IHS Division of Diabetes Treatment and Prevention

February 10, 2026

Indian Health Service



SDPI – Commonly Used Abbreviations



- ADC = Area Diabetes Consultant
- Audit/WebAudit = IHS Diabetes Care and Outcomes Audit
- Best Practice = SDPI Diabetes Best Practice
- CY = Calendar Year
- DDTP = IHS Division of Diabetes Treatment and Prevention
- DGM = IHS Division of Grants Management
- EMR = Electronic Medical Record
- GMS = Grants Management Specialist
- GS = GrantSolutions
- NoA = Notice of Award for your SDPI Grant
- PHI = Protected Health Information
- PII = Personally Identifying Information
- PPR = Performance Progress Report
- RKM = Required Key Measure
- SDPI = Special Diabetes Program for Indians
- SOS = SDPI Outcomes System



What we'll cover

1. 2026 RKM Data: Baseline
 - a. Recap of requirements
 - b. Data submission: process, methods, and data review
2. SOS Website and Demonstration
3. Questions



Required Key Measure Data for 2026

Recap of Best Practice Requirements

1. Best Practice Requirements:

- a. Select one Best Practice
- b. Identify a Target Group and select members
- c. Implement proposed activities/services
- d. Collect RKM data for Target Group

2. RKM Data Submission: SDPI Outcomes System (SOS)

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

3. Guidance - Select a Best Practice that:

- a. 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) RKM data may be shared with IHS leadership, Tribal leaders, and others.

RKM Data



- **RKM result** = Number and percent of Target Group members who achieve the RKM
- **RKM is specific to the Best Practice selected.** Examples:
 - **Nutrition education:** Number and percent of individuals in your Target Group who receive nutrition education.*
* Performed by a Registered Dietitian or other health or wellness program staff.
 - **Foot Exam:** Number and percent of individuals in your Target Group who receive a comprehensive foot exam.*
* A foot exam includes assessment of sensation and vascular status.
- **RKM data are:**
 - Tracked locally throughout the budget period (calendar year).
 - Submitted to DDTP via the SOS at the beginning and end of the budget period.

SDPI 2026 RKM Details



Prompt	Baseline	Mid-Year	Final
Required?	Yes	No	Yes
Reflects	Starting point	Progress so far	Final results
Data 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	2/27/2026	6/30/2026	1/29/2027
Value	Education BP: Usually 0% Other BP: Could be 0% or higher	Generally higher than 0%	Up to 100% or even higher
Remember	n/a	n/a	“Lock” data in the SOS after submitting

Two Possible Sources for RKM Data



	EMR (RPMS or Other)	Local Tracking
Target Group List	Set up a register or template (different from main diabetes registry)	Keep track locally using Excel, paper, or other method
Target Group Members Information	Upload and store in WebAudit	Enter into SOS
Target Group Members RKM Data	Upload and store in WebAudit	Enter into SOS
Baseline RKM Result	Two options: 1. Upload into and Pull from WebAudit for Jan-Dec of previous year 2. Aggregate	Two options: 1. Submit RKM result from Individual Entry 2. Aggregate
Final RKM Result	Upload into and pull from WebAudit for Jan-Dec of budget period	Submit using Individual Entry

2026 Best Practice and Target Group Information for Your Program



1. **Review** your program's 2026 Project Narrative Best Practice section (Part E). 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 2026:
 - a. RPMS or another EMR -> Upload into WebAudit-> pull into SOS
 - b. Other data source -> Enter Individuals into the 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 EMR.
 - b. Submit into the SOS.

SOS Access

- To request access, visit the [SDPI website](#).
- Requires an IHS web account: user name and password.
 - Anyone can set up a web account – does not require IHS email.
 - Avoid using personal email - use work-based email.
 - If IHS, 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: Known at Baseline



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 1/1/2026
 - 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 Unknown at Baseline



- **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 EMR → 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 2025
 - b. Final: Jan 1-Dec 31 of 2026
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

RPMS or EMR Considerations

- Requirements:
 - Access to RPMS (or another EMR).
 - 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 EMR Considerations

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

- **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 EMR 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 and Tips



1. Personal identifiers (including names, chart numbers, and full dates of birth) **cannot** be entered into the SOS. Month/year of birth, gender, and RKM measure are collected in the SOS.
2. Each individual is assigned a consecutive ID number (participant identifier), starting with 1001, 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.
4. 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 2026 from the SOS. Look for:

- General Issues
 - Can you pull up the report? If not, your baseline data has probably not been submitted.
 - Does the exact same result appear more than once? If so, contact the SDPI team to remove duplicates.
 - 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 2025 or 2026 in DMS.
 - Use 12/31/2025 as the Audit Period End Date.
 - In the WebAudit select the year that matches the DMS “version” – 2025 for DM25 and 2026 for DM26.
- WebAudit method cannot be used for the Diabetes Prevention Best Practice.
- Your program can only submit RKM data for your **one** 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 used to determine whether 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 [General Information webpage](#)
- Recorded webinars on [Training webpage](#)

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/>



SOS Website & Demonstration



Updates



Resource: SDPI Grant Program Application and Report Due Dates Table

2026 Table now
available!

Special Diabetes Program for Indians (SDPI)

Important Dates for 2025 - 2027 Budget Period

Updated December 2025

Notes:

- 2026 funds are contingent on Congressional Appropriations.
- All dates are tentative and subject to change.

Date	Activity
2026	
01/01/2026	Beginning of SDPI 2026 budget year.
01/30/2026 - Due	2025 Required Key Measure (RKM) ¹ final data submitted & locked in SDPI Outcomes System (SOS) ² .
01/30/2026 - Due	2025 Annual Progress Report completed and submitted in GrantSolutions ³ .
02/27/2026 - Due	2026 RKM baseline data submitted into SOS ² .
03/20/2026 - Due	2026 Annual Diabetes Care and Outcomes Audit data submitted & locked in WebAudit ⁴ (Audit period: Jan 1-Dec 31, 2025).
03/31/2026 - Due	2025 Annual Federal Financial Report due in Payment Management System (90 days after Budget Period End Date).
06/30/2026 - Due	2026 RKM mid-year data submitted in the SOS ² ; encouraged but not required.
09/01/2026	2027 Continuation Application information available on the SDPI website ³ .
10/30/2026 - Due	2027 Continuation Applications due in GrantSolutions ³ .
11/12/2026	2026 Annual Progress Report information available on the SDPI website ³ .
12/31/2026	End of SDPI 2026 budget year.
2027	
01/01/2027	Beginning of SDPI 2027 budget year.
01/29/2027 - Due	2026 RKM final data submitted & locked in the SOS ² .
01/29/2027 - Due	2026 Annual Progress Report completed and submitted in GrantSolutions ³ .
03/31/2027 - Due	2026 Annual Federal Financial Report due in Payment Management System (90 days after Budget Period End Date).



Questions

[DDTP Website](#)

[SDPI Website](#)

