# Diabetes Care Gap Project Altoona Family Physicians 2022

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## Introduction

Diabetes affects 37.3 million people in the Unites States and is the seventh leading cause of death. Without appropriate treatment the consequences of diabetes include blindness, kidney failure, stroke, heart attack and limb amputation. This quality initiative developed a streamlined workflow utilizing a multidisciplinary team to detect several care gaps in the management of high-risk diabetic patients. High risk diabetic patients were identified as those with hemoglobin A1C levels greater than 9 or those with undocumented levels. Our quality report dashboard statistics revealed 218 patients who met the high-risk criteria. Our initiative was designed to identify and complete overdue screening labs and referrals for these patients. In terms of the Five Models of Osteopathic Medicine, our project most applies to the Metabolic Energy domain given the pathophysiology of diabetes.

## Methods

A list of patients with hemoglobin A1C equal to or greater than 9, as well as those with undocumented Hemoglobin A1C were identified in the UPMC Diabetes Quality Report Dashboard. Patient charts were reviewed for care gaps including A1C within 6 months, lipid panel within one year, urine microalbumin within one year and diabetic eye exam within one year . Patients who were overdue for one or more of these care gaps had the orders/referrals pended and forwarded to their PCP for signing. Front office staff then contacted the patient to have the orders completed.

## Data/Results

As shown in figure 1, we saw small but potentially clinically significant improvements in the percentage of patients with hemoglobin A1C values of greater than 9 and the percentage of DM eye exams within one year. The other quality metrics remained unchanged. . Figure 2 demonstrates the increase in percentage of eye exams completed within one year from 29% in August 2022 to 32% in February 2023. Figure 3 demonstrates the decrease in percentage of patients who had a hemoglobin A1C value of greater than 9 from 35% in August 2022 to 33% in February 2023

## Discussion

Over the past half century, diabetes care has evolved significantly. Regular laboratory testing that includes hemoglobin A1c, lipids, urine microalbumin, and basic metabolic panels has become standard practice in managing the disease. By examining these care gaps in a systematic manner, we have seen some small, but potentially clinically significant improvement in quality control metrics. Additionally, our approach has the advantage of not requiring the patient to be seen in the office and being more systematic than having individual providers address care gaps at each visit.

Our study suggests that an interdisciplinary team-based approach to address diabetic care gaps can improve the frequency of completed diabetic eye exams and improve overall glycemic control.

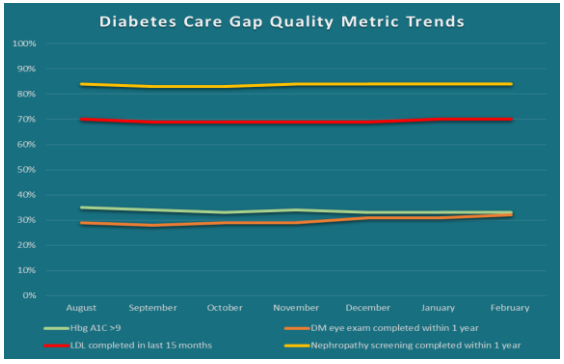


**Figure 1**

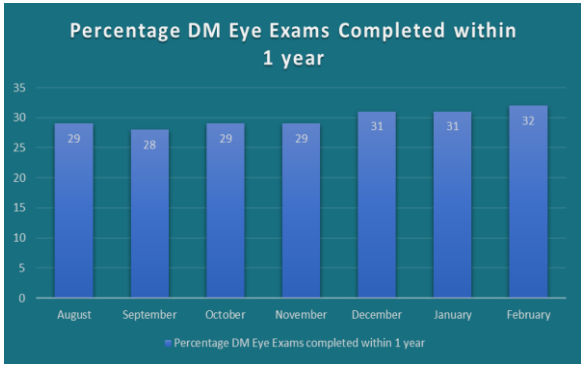


**Figure 2**

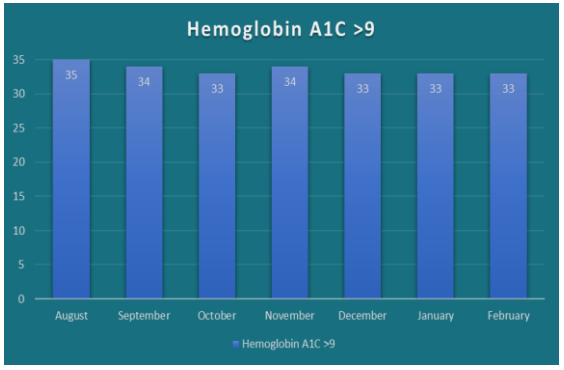


**Figure 3**

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