



Making Data Count

Measuring Diabetes and Obesity in the Indian Health System

December 18-20, 2007

IHS Division of Diabetes Treatment and Prevention

Diabetes Data Collection Technical Assistance Urban Indian Health Organizations

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Session: C1

Diabetes Data Collection Technical Assistance

Urban Indian Health Organizations

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Introduction

Diabetes Technical Assistance

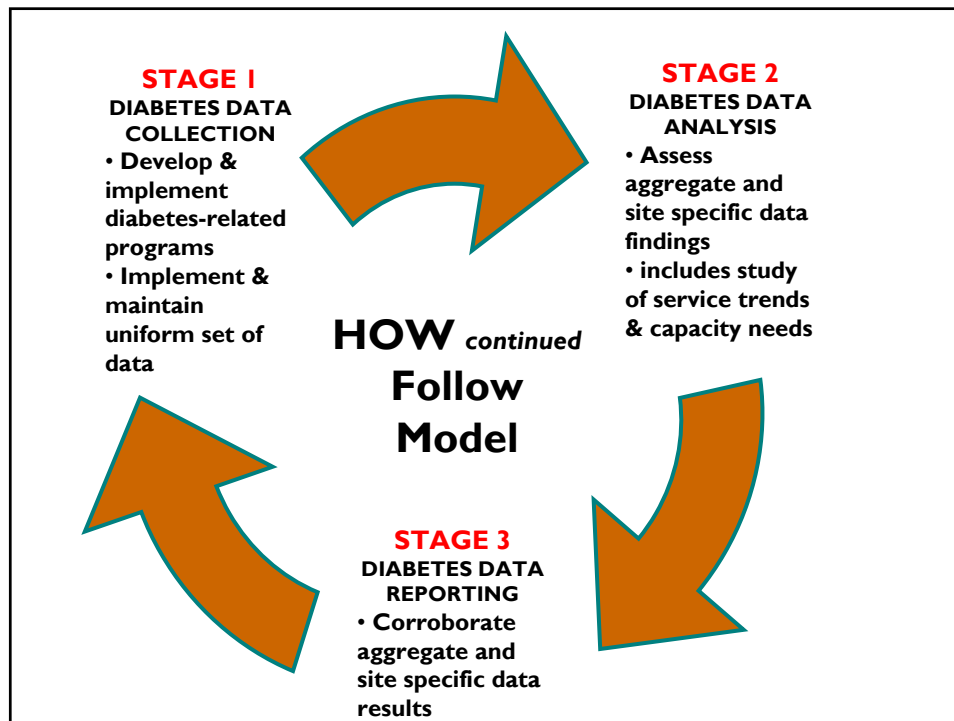
- **Available for 34 Urban Indian Health Organizations (UIHO)**
- **Nation-wide**
- **Funded by Special Diabetes Program for Indians**

Background

- **No organized method of diabetes data collection among 34 urban diabetes programs**
- **Need 'systems approach' methodology to establish uniformity throughout all programs**

How

- **Implementation of a uniform diabetes registry**
- **Capacity building to increase UIHO's participation in the IHS annual diabetes audit**
- **Begin developing diabetes education programs that employ national standards for IHS Integrated Diabetes Education Recognition Program (IDERP).**



Offer UIHO's Technical Assistance

REQUESTS

1st Priority Diabetes training and education		2nd Priority Diabetes program development and related data collection
	3rd Priority Other technical assistance requests	

Deliverables

- I. Urban Indian Health Organizations will have the capacity to create a diabetes registry with baseline data collection variables.**

STATUS: Goal Met

- Diabetes registries are implemented among the 34 Organizations**

Deliverables continued

- 2. Urban Indian Health Organizations will have the capacity to participate in the annual IHS Diabetes Care and Outcomes Audit.**

STATUS: Goal Partially Met

- Capacity increased from 9 in 2000 to 23 in 2005

06, 07 audit results pending

Deliverables continued

- 3. Urban Indian Health Organizations will have the capacity to describe their target population(s) utilizing diabetes data collection.**

STATUS: Goal Partially Met

- **Example**
 - Using aggregate data (may be applied locally)
 - 64% BMI + > 30
 - 67% Dx High Blood Pressure or taking Rx

Deliverables continued

- 4. Urban Indian Health Organizations will have the capacity to identify needs of the diabetes population.**

STATUS: Goal Met

- **Example**
 - **Using demographic data; duration of disease among the aggregate population**
 - 42% have had diabetes less than 5 years
 - 67% have had diabetes less than 10 years

Deliverables continued

- 5. Urban Indian Health Organizations will have the capacity to plan programs according to the needs of the population.**

STATUS: Goal Met:

- **Example**
 - **Using aggregate data; shows need for planning services**
 - persons with type 2 diabetes with duration of disease less than 10 years
 - special attention on persons between the ages 45 – 64 years for treatment and prevention

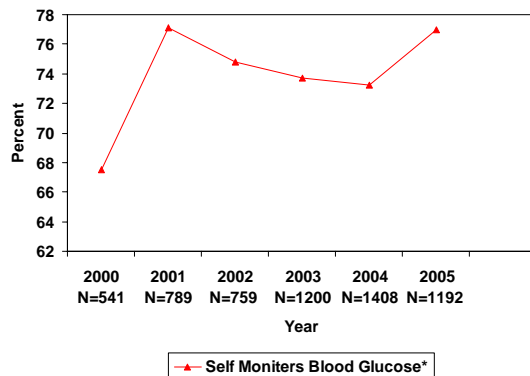
Deliverables continued

6. Urban Indian Health Organizations will have the capacity to utilize data collection to identify service trends.

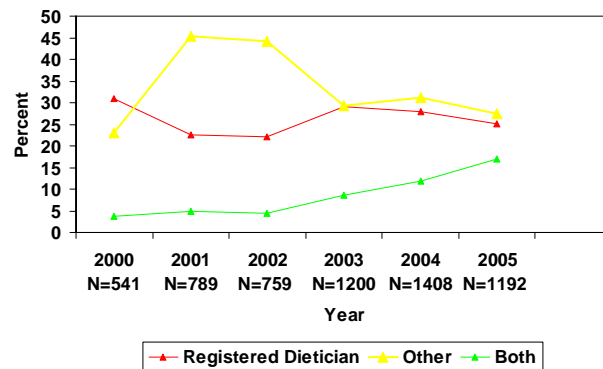
STATUS: Goal Partially Met

- Organizations have the capacity to identify service trends using data collection (demonstrated in next 2 slides)

Deliverables continued



Deliverables continued



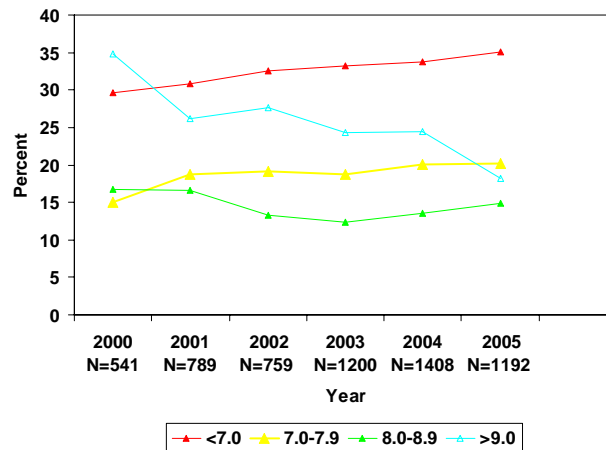
Deliverables continued

7. Urban Indian Health Organizations will have the capacity to implement and maintain national diabetes care and education standards.

STATUS: Goal Partially Met

- **Organizations have the capacity to maintain diabetes care standards**
(demonstrated in next slide)

Deliverables continued



Deliverables continued

8. Urban Indian Health Organizations will have the capacity to apply for the IHS Integrated Diabetes Education Recognition Program.

STATUS: Goal Partially Met

- Fifteen organizations are currently implementing national education standards into their diabetes programs; self paced, will continue throughout the grant process.

Challenges

- **Financial resources vary from organization to organization**
- **Level of service and staffing capacity also vary in the organizations**
- **Various data collection methods are implemented throughout the 34 Urban Indian Health Organizations**
- **Extremely challenging for quality data collection and reporting.**

Next Steps continued

- I. **Begin dialog among**
 - **Office of Urban Indian Health Programs; it's Diabetes Workgroup**
 - **IHS Division of Diabetes Treatment and Prevention**
 - **Seattle Indian Health Board's Urban Indian Health Institute**

Next Steps continued

Quality Reporting

- **Integrating diabetes into Chronic Care Model**
- **GPRA reporting; across all groups**
- **RPMS and non-RPMS users**
- **ICD 9 codes**

Summary

- **Diabetes data collection technical assistance is available to ALL UIHO upon request**
- **Requests may be made:**
 - **Office of Urban Indian Health Programs**
 - **Susan Mathew, Urban Diabetes Training Specialist (206) 605 – 4262**

Thank You

**QUESTIONS
&
ANSWERS**