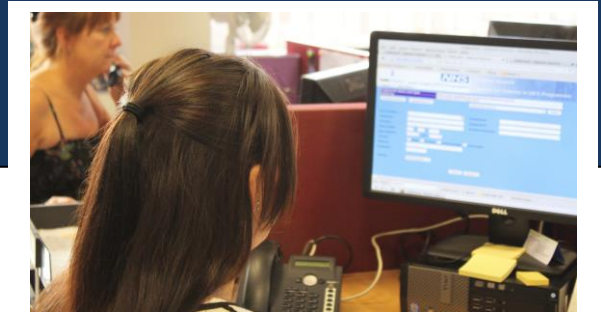# Improving the Accuracy of the Diabetes Register for DESP

It is important that General Practice establish and maintain an accurate register of patients with diabetes and to deliver timely referrals to the Diabetic Eye Screening Programme (DESP).

This involves collating a list of all the patients with a diagnosis of Diabetes aged 12 and over; generating referrals to DESP; providing regular updates of registration and administrative data; and participating in audits of the register.

Health Intelligence has significant experience in managing Diabetes Registers. With the agreement of each GP Practice, an automated export from each clinical system is undertaken and reconciled with the DESP register.

Why Automate the Export Process?

It is estimated that using the automated export and reconciliation service will save each Practice two to three weeks administration time per annum for each GP Practice. For Hounslow as a whole this saves approximately £35,000 per annum.

The Management of Change

Working with Hounslow

In order for improvements to occur, it was vital to form a joint working agreement between Health Intelligence, the London Area Team within NHS England, Hounslow CCG and GP Practices. The North West London LMC was involved with confirming the Information Governance arrangements before the implementation had begun.

Implementation of Change

Health Intelligence engaged with all 54 GP Practices within Hounslow to securely deliver data exports over the N3 network directly from their GP Practice's clinical system. All Practice exports commenced within a few weeks of the Practice sign up to the new service this removed the manual referral process for the referral of patients, the provision of updated patient registration data and quarterly audit. This service is currently been deployed to 94% of Practices within the CCG.

Demographic Batch Service (DBS)

In support of the implementation of the service, the DESP register was validated against the DBS, which obtains data from GP Practices and the Registrar of Births and Deaths. The DBS was used to identify any patients who are now deceased; who have moved outside the programme area; who have changed their registered GP Practice; or changed their address or other updates to their administrative data. This enabled 349 deceased patients to be removed from the register and 1,616 patients' administrative details to be updated (including 239 patients who have moved out of the area). The process assisted in ensuring the DESP register was as up to date as possible prior to undertaking the reconciliation exercise against each Practice's diabetes register.

Outcome

The first reconciliation exercise of GP Practice sourced data against the validated DESP register (15,537 patients) identified the following discrepancies and enabled a single electronic notification to the DESP of new patients and amendments:

- 842 (5.4%) patients who had not been referred to DESP
- 471 (3.0%) with updates details (changes of address)
- 349 (2.3%) deceased patients
- 2,462 (15.8%) identified with data indicating the possibility of diabetes for a diagnostic review.

Benefits of Change

- Monthly automated exports from GP Practices and the DBS help GP Practices maintain their registers
- A saving of two to three weeks administrative time per GP Practice each year
- Practices and DESP diabetes registers are up to date meaning that patients are known to the system, and can begin to access the care and support required

From a study* of 31,329 patients with Diabetes, 1,768 patients were classified with referable Diabetic Retinopathy at the first

*Stratton, I.M. *et al* (2013) A Simple Risk Stratification for Time to Development of Sight Threatening Diabetic Retinopathy, *Diabetes Care*, Mar, 36 (3), 580-5

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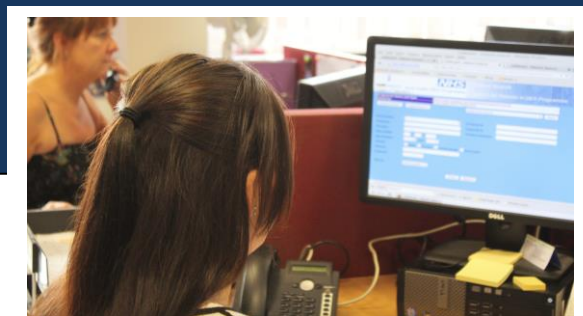
screening event, this equates to 5.64% of the eligible cohort. Applying this logic to Hounslow, out of the 842 missing referrals approximately 47 patients would have sight threatening DR and would require a referral to HES. This service is therefore reducing clinical risk for Practices and the Programme overall.

Conclusion

Health Intelligence's automated export and reconciliation service has proven to be a great success for DESPs. Labour intensive processes have been saved, and the GP Practices and DESP have quicker access to more accurate data. A patient's time from diagnosis to referral is being reduced to a minimum and GP Practices are no longer holding clinical risk associated with not referring their patients in a timely manner.

The results would not have been achieved without the dedication of all those involved and the co-operation of the Hounslow GP Practices.

> "This service has enabled Hounslow to resolve its issues with the quality of the diabetes register, improving outcomes for patients and reducing the administrative burden on both Practices and the DESP administration team."
> **Tina Bragaglia, Interim Project Manager – Diabetic Retinal Screening Lead Programme Manager – Ealing, Hounslow & Kingston DESP**