

# QUALITY IMPROVEMENT ACTIVITY (QIA) PLANNING SHEET



Name of Practice:

Date:

Name of QIA:

Use our Lumos Report to Improve Coding of “Undiagnosed” Diabetics

## Quality Improvement Team

Names	Roles/Responsibilities

### GOAL

(Simple, Measurable, Achievable, Realistic, Timely)  
What are we trying to accomplish and when?

To review our patients with undiagnosed diabetes, and code them according to type.

### MEASURES

What data will we use to track our improvement?  
Eg Pen CAT/POLAR

We will use our extraction tool (Pen or POLAR) to create a list of undiagnosed diabetics. We will cleanse the data and then rerun the search. We aim to have 50% fewer undiagnosed diabetics

### INITIAL BENCHMARK

What is our current data saying?

Review your **Lumos** report to assess what percentage of your diabetics have an undiagnosed type. Then create a patient list using your data extraction tool.

### IDEAS

What changes will we make that will lead to an improvement?  
NB: These ideas are not practice specific and are designed to give you some general ideas.  
The QI Team should develop these ideas together.

To assist with clinical decision making, consider using HealthPathways, see:  
HealthPathways Sydney: <https://sydney.communityhealthpathways.org/>  
Username: connected  
P/w: healthcare

HealthPathways South East Sydney: <https://sesydney.healthpathwayscommunity.org>  
Username: sesydney  
P/w: healthcare

Run search (if possible, save the parameters for future searches)

Sort the list by Usual GP (use the export to Excel function)

List to be reviewed by a suitable qualified person and re-coded as necessary

Run the same search again and review

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PLAN How will we do it?				DO Did we do it? Unexpected problems?	STUDY Review/reflect on results Lessons learnt What did/didn't work well?	ACT Next steps? Review or extend activity?
What	Who	When				
1	Review Lumos Report					
2	Create list with Data Extraction Tool (DET) Export to Excel and sort by Usual GP					
3	Review and Recode as necessary					
4	Rerun search with DET and analyse results					
5	Meet with team to discuss changes to practice processes to help avoid incorrect coding					
6	Review next Lumos report Celebrate improvement with the team					



You are one step closer to becoming a PCMN practice.