



DSMES Awareness Using EHR Data

Sharing data outcomes and successes from Electronic Health Records (EHR) data can help providers see the successes from their patients attending a DSMES program.

Importance of EHR Data

Electronic Health Record (EHR) data can be used to share information about patients' successes after attending a DSMES program. By analyzing data and sharing with providers, DSMES programs can provide information about the successes of DSMES in decreasing average A1Cs for patients.

DSMES Successes

The following reiterates successes of DSMES programming:

- Patient participation in DSMES has proven to decrease A1C by 0.6%, as much as many medications.¹
- DSMES is delivered by healthcare professionals, who help patients learn how to make diabetes-related decisions, eat healthy, check blood sugar, manage medications, solve problems, be emotionally healthy, and reduce stress.²

Pulling EHR Data

The first step in pulling EHR data is to develop a baseline number of patients that data has been pulled for. The equations below can be used to pull EHR data for a specific clinic or provider's patients. The equation on the left is the sample equation, while the sample equation on the right shows how data can be pulled.

Sample Data: *The sample data is based on Dr. Smith's patient data. Dr. Smith is a primary care provider at a small medical clinic in South Dakota.*



_____ %

Total number of patients with diabetes (A1C $\geq 6.5\%$).



120/980
12 %

Total number of patients with diabetes (A1C $\geq 6.5\%$).



_____ %

Total number of patients with diabetes (A1C $\geq 6.5\%$) who have had an A1C check within the past _____ months.



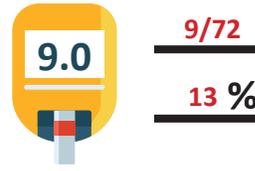
72/120
60 %

Total number of patients with diabetes (A1C $\geq 6.5\%$) who have had an A1C check within the past **6** months.

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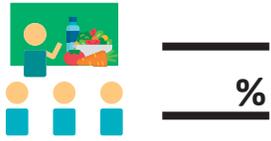


Total number of patients with diabetes and an A1C \geq 9% in the past _____ months.

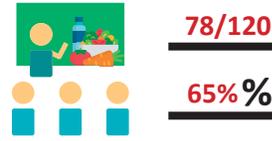


Total number of patients with diabetes and an A1C \geq 9% in the past _____ months.

6



Total number of patients with diabetes who have attended diabetes education (DSMES).



Total number of patients with diabetes who have attended diabetes education (DSMES).



Average A1C of patients prior to attending diabetes education (DSMES).



Average A1C of patients prior to attending diabetes education (DSMES).

Average A1C of patients after attending diabetes education (DSMES).

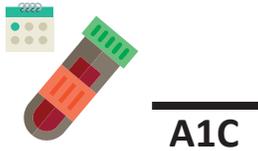
A1C



Average A1C of patients after attending diabetes education (DSMES).

6.9

A1C



Average A1C of patients at first A1C testing (did not attend diabetes education (DSMES)).



Average A1C of patients at first A1C testing (did not attend diabetes education (DSMES)).

Average A1C of patients at second A1C testing (did not attend diabetes education (DSMES)).

A1C



Average A1C of patients at second A1C testing (did not attend diabetes education (DSMES)).

7.2

A1C



Sharing Data

Once the data is calculated using the above equations, a DSMES program can then share the findings with providers and/or clinics in a letter or presentation. A sample letter is available at the link below.

1. Diabetes Care (2017) 2017 National Standards for Diabetes Self-Management Education and Support. Diabetes Care; 40:1409-1419. <https://doi.org/10.2337/dci17-0025>
2. Centers for Disease Control and Prevention (2017) Education and Support. Retrieved from <https://www.cdc.gov/diabetes/managing/education.html>.

A sample letter to a provider or clinic regarding EHR data results can be found by accessing the SDDC website (www.SDDiabetesCoalition.org) and clicking on "Educators"