

#### **National Framework - Scotland**

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### Introduction

- Background
- Diabetes exemplar
- Secondary data use
- EUBIROD activities

## National eHealth Programme

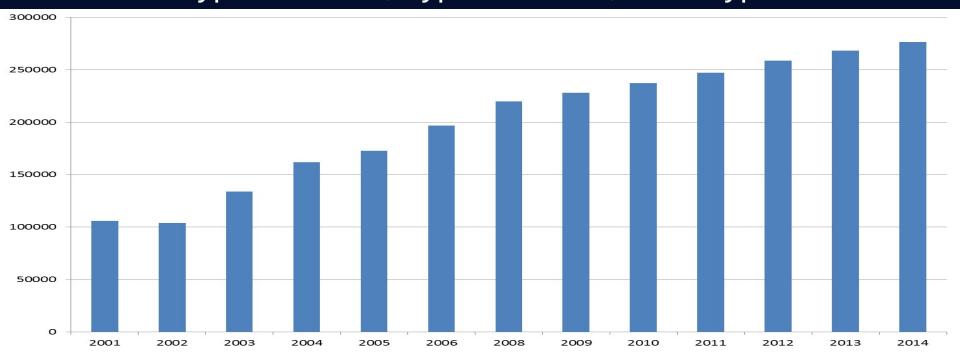
- eHealth strategy
  - Health and social care integration
  - Citizen access
- Standardisation of infrastructure
  - Master Patient Index CHI
  - Laboratories SCI-Store
  - Inpatient/outpatient management TRAK
  - Digital dictation WinScribe
  - Primary care EMIS/Vision

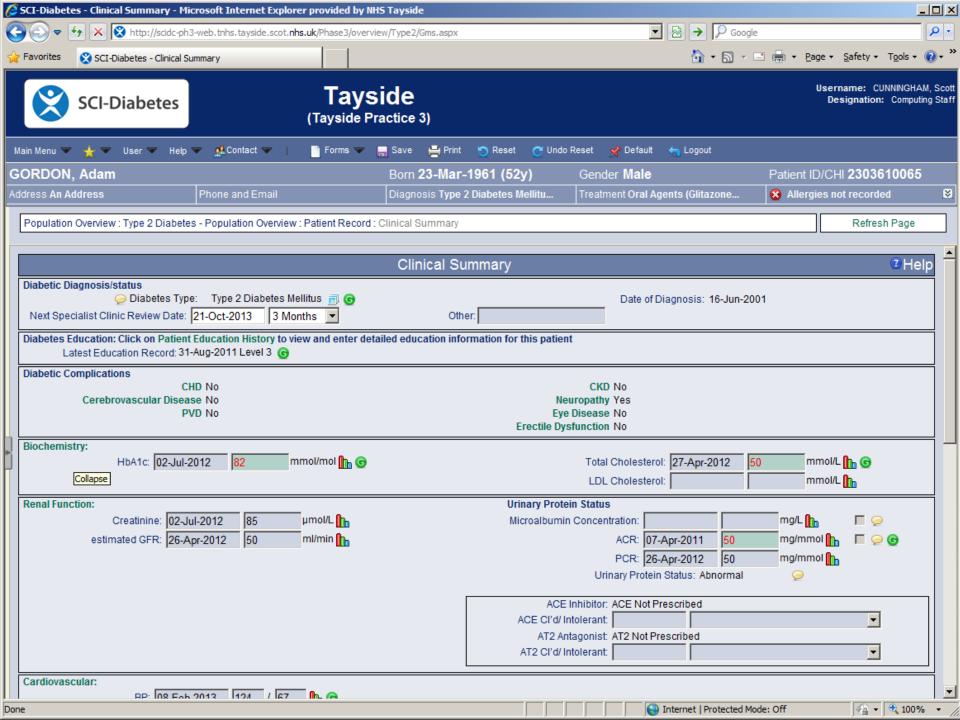
### Diabetes in Scotland

- Scottish Diabetes Group
- Diabetes Improvement Plan
  - Setting priority areas for improvement
- SCI-Diabetes

## Diabetes in Scotland

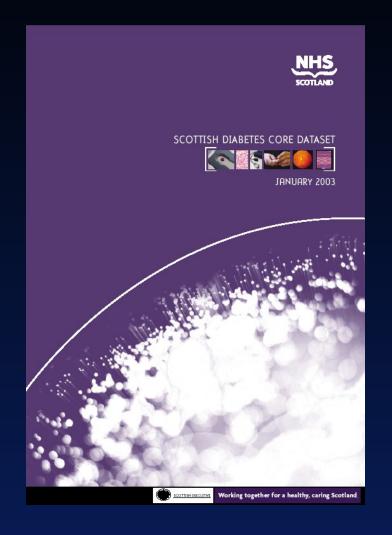
- Scotland's diabetes prevalence
  - **2002: 103,835 (2%)**
  - -2014:276,430(5.2%)
    - Type 1: 10.8%; Type 2: 88.3%; Other types: 0.9%





## Common language

- Standardised dataset of terms
- Clear and unambiguous clinical definitions





#### **SCI-Diabetes Data Flows**











**Audit and Reporting** 



**Primary Care Systems** 





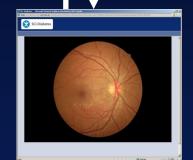




Secondary Care Systems



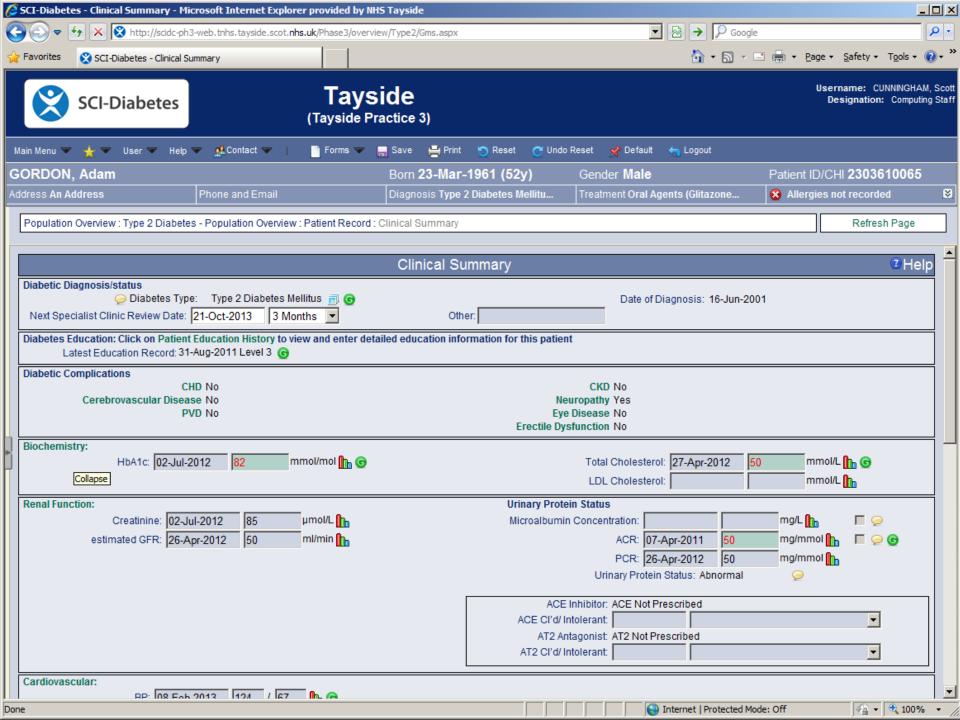
Inpatient Linkage

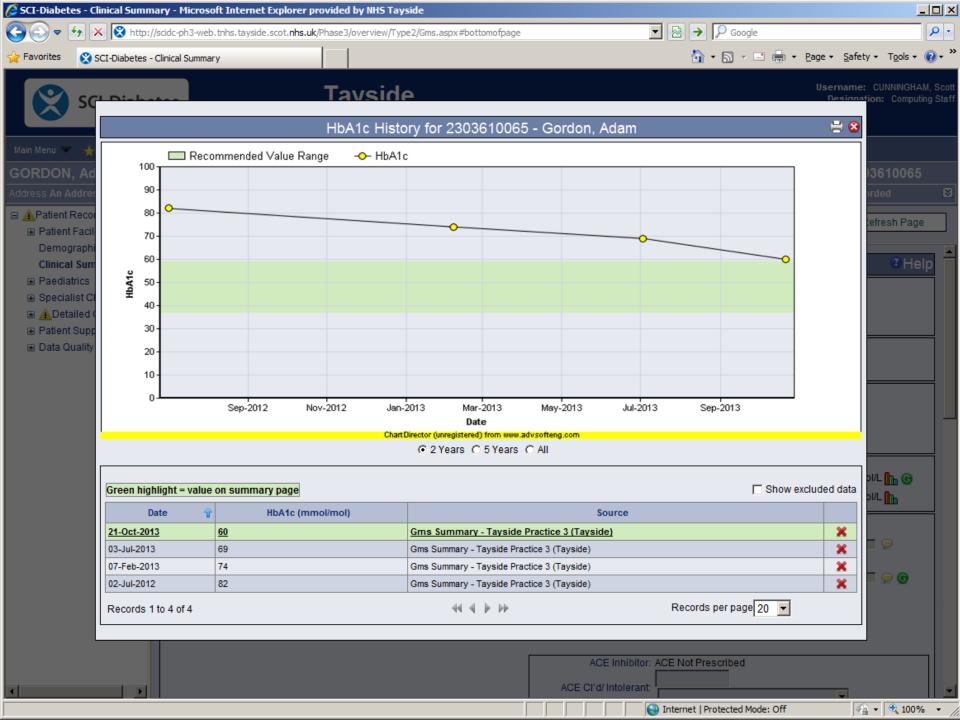


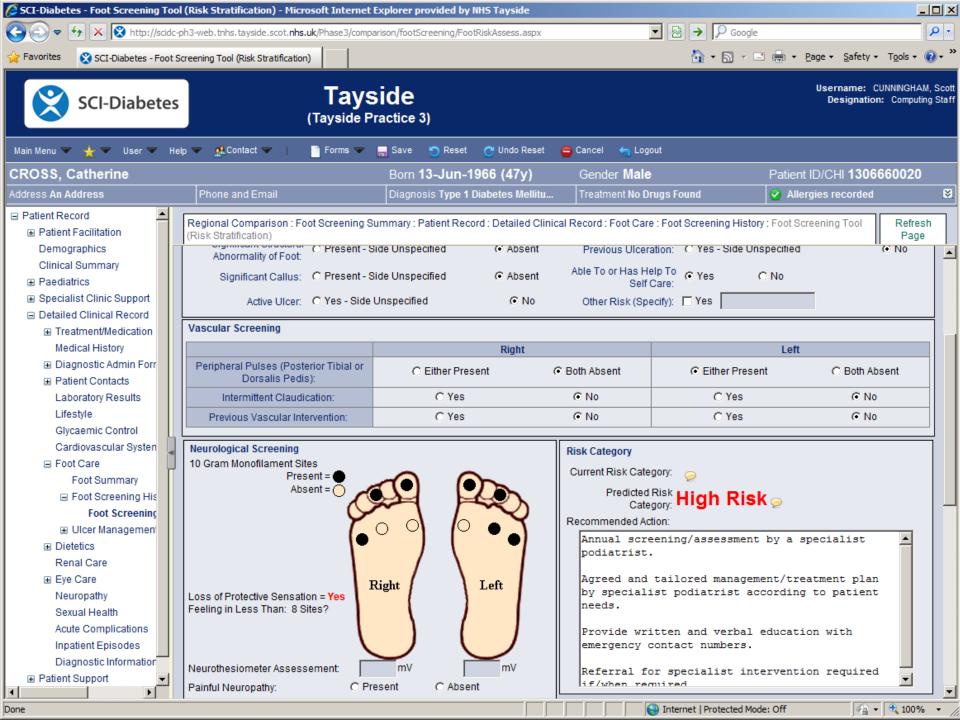
Diabetic Retinopathy
Screening

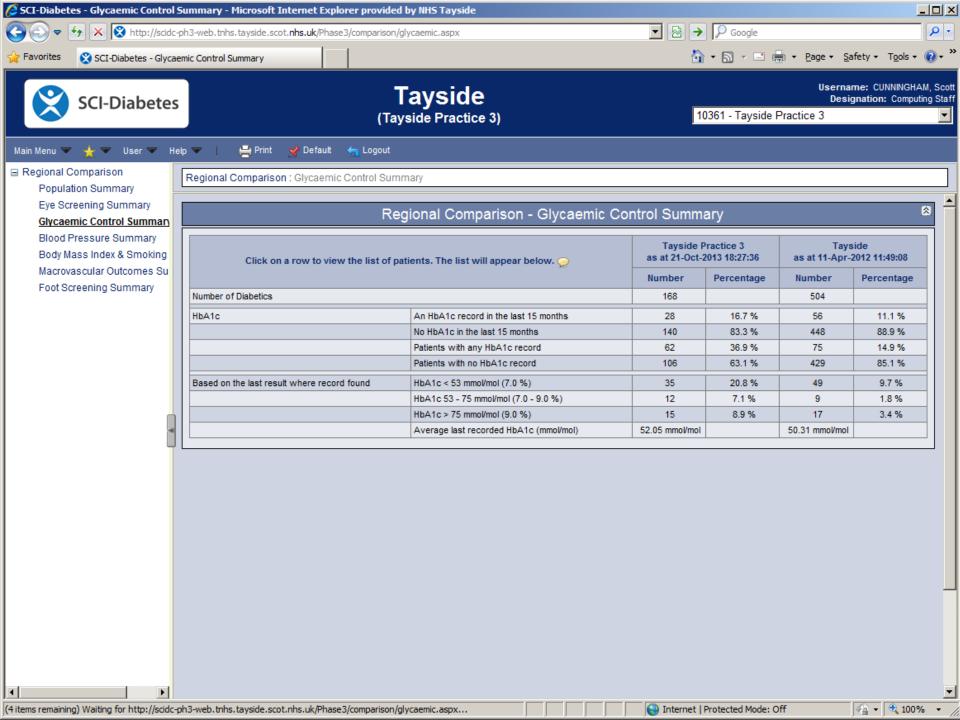


Scottish Diabetes Research Network









## **Secondary Data Use**

- Regional reporting
- National reporting
- Research
- Patient access







## Improving treatment and care for people with diabetes in Tayside

The Annual Report of NHS Tayside
Diabetes Managed Clinical Network
2009/10

www.diabetes-healthnet.ac.uk

## Scottish Diabetes Survey

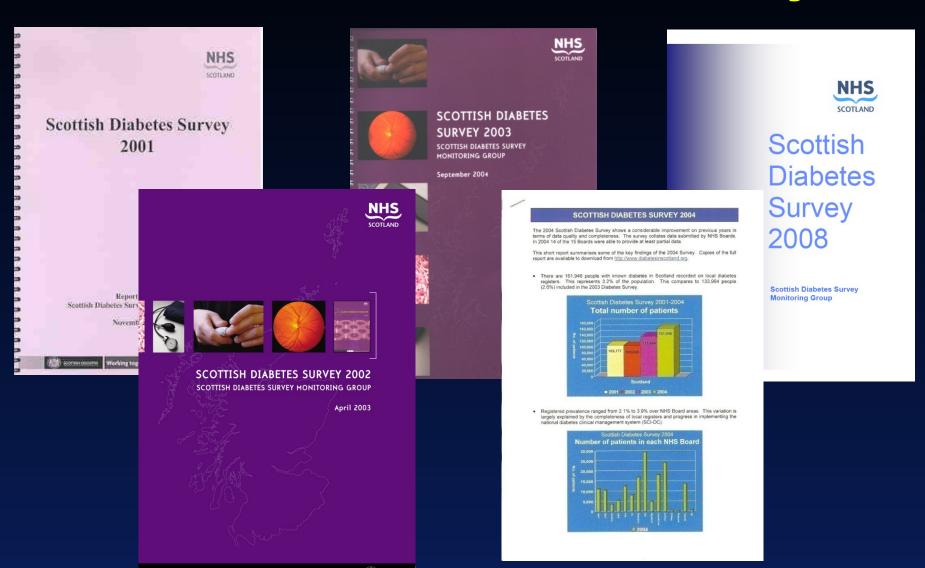
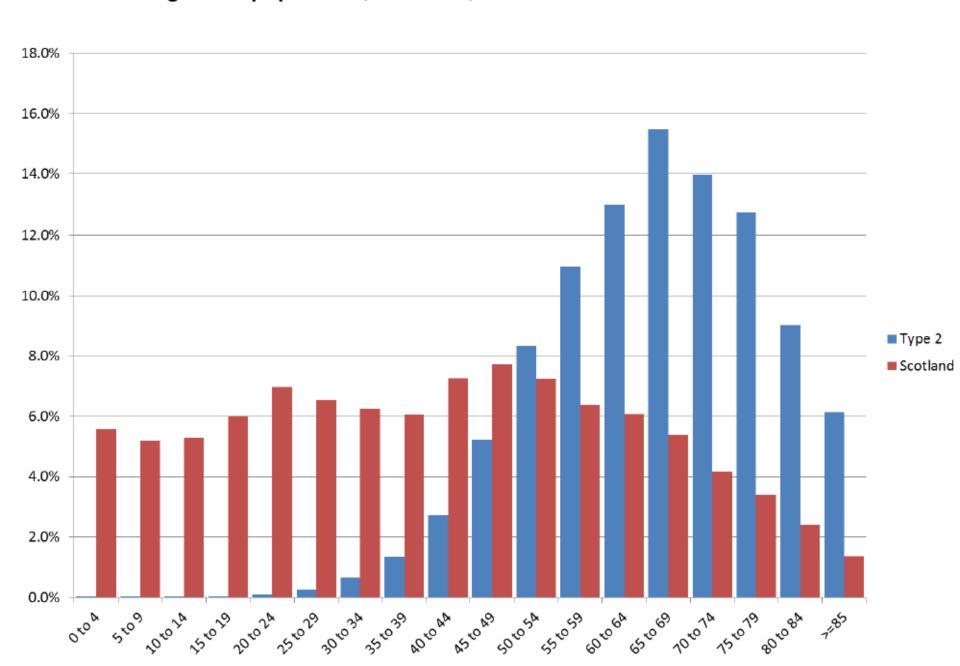
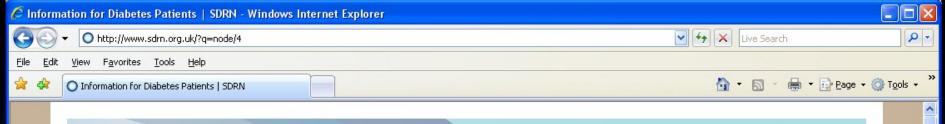


Figure 6. Type 2 diabetes: age distribution of people recorded compared with age distribution of general population, Scotland, 2014.







#### User login Username: \* Password: \* Log in

#### Request new password

#### Contact

**SDRN Office** University of Dundee Diabetes Support Centre Level 8 Ninewells Hospital Dundee **DD1 95Y** t 01382 660111 x 34594 f 01382 740147 admin{at}sdrn.org.uk

Search the web support Diabetes UK Diabetes

Everyclick is an internet search engine with a big difference it denotes half

#### Information for Diabetes Patients Overview

The Scottish Diabetes Research Network (SDRN) has been established to speed up development and adoption into the clinic of better treatments to improve the lives of people with diabetes. We would like to invite you to consider giving your permission to be contacted about research studies which may affect the way in which patients with diabetes are treated in future.

Research may include measuring the effects on diabetes of:

- New medicines
- · Lifestyle interventions such as diet or exercise
- · Genetic make-up

#### Research Register

We would like to ask if we can approach you about any research which is relevant to your individual medical history. By signing the Permission to Contact form, we will hold your contact details on a secured Research Register and write to you with details of any studies for which you may be a suitable participant. Access to this database is strictly limited to your normal healthcare provider (usually your GP or hospital consultant) and Scottish Diabetes Research Network (SDRN) staff. Sometimes pharmaceutical companies sponsor clinical research but your details will not be passed on unless you have agreed to take part in a study. Please feel free to discuss with family members or friends your decision before agreeing to join.

If you agree to join the Research Register you will be given general information about diabetes research in Scotland and a credit-card sized reminder which details how you can leave the register if you change your mind later. Withdrawal involves a simple

#### Research Register



Scotland wide permission to contact research register

#### read more...

#### Patient Testimonials



"I took part in a clinical







#### ARTICLE

## Use of insulin glargine and cancer incidence in Scotland: a study from the Scottish Diabetes Research Network Epidemiology Group

H. M. Colhoun · SDRN Epidemiology Group

Received: 5 June 2009 / Accepted: 24 June 2009 / Published online: 15 July 2009 © The Author(s) 2009. This article is published with open access at Springerlink.com

#### Abstract

Aims/hypothesis The aim of the present study was to examine whether patients with diabetes in Scotland using insulin glargine have a greater cancer risk than patients using other types of insulin.

Methods We used a nationwide diabetes clinical database that covers the majority of the Scottish population with diagnosed diabetes, and examined patients with diabetes who were exposed to any insulin therapy between 1 January 2002 and 31 December 2005. Among these we defined a fixed cohort based on exposure during a 4 month period in 2003 (n=36,254, in whom 715 cases of cancer occurred) and a cohort of new insulin users across the period (n=12,852 in whom 381 cancers occurred). Records from these cohorts

p=0.9 in the fixed cohort) The subset of patients using insulin glargine alone (n=447) had a significantly higher incidence of all cancers than those using other insulins only (n=32,295) (HR 1.55, 95% CI 1.01–2.37, p=0.045), and those using insulin glargine with other insulins (n=3,512) had a slightly lower incidence (HR 0.81, 95% CI 0.55–1.18, p=0.26). There were important differences in baseline characteristics between these three groups, although the risk ratios were broadly unaltered on adjustment for these. Overall, there was no increase in breast cancer rates associated with insulin glargine use (HR 1.49, 95% CI 0.79–2.83, though insulin glargine only users had a higher rate than those using non-glargine insulin only (HR 3.39, 95% CI 1.46–7.85, p=0.004). Among type 2 diabetic













my preferences | logout

my details | my lifestyle | my results | my eyes | my feet | my medication | my diary | my correspondence | my recordings | my summaries

#### ARCHIBALD MACKIE

#### My Test Results

- My target chart:
- 🕜 HbA1c: 36.0 mmol/mol (5.4%) on 17/11/2011 🏁
- diasend. 🛂 Blood Glucose: 9.0 mmol/L on 12/09/2014 🍱
- 🕜 Blood Pressure: 180/70 mmHg on 24/03/2014 🏁 📝
- 🕜 Total Cholesterol: 4.5 mmol/L on 29/11/2013 🏁 📝
- 🕜 HDL Cholesterol: 1.50 mmol/L on 31/01/2012 🍱
- 🕜 LDL Cholesterol: 1.2 mmol/L on 30/01/2012 🏁
- 🕜 Triglycerides: 1.3 mmol/L on 29/01/2012 🏁
- Creatinine: 88.0 umol/L on 17/11/2011 🏁
- 🛂 Albumin/Creatinine Ratio: > 2 mg/mmol on 15/06/2005 🏁
- 🕜 eGFR: > 68 ml/min on 05/06/2009 🏁

#### My Links





Change in HbA1c Results

#### **Print Options**



Print this page

### **EUBIROD**

- Dataset
- Data dictionary
- Metadata registry
- Publication
  - Defining a European diabetes data dictionary for clinical audit and healthcare delivery: core standards of the EUBIROD project. *Methods of Information in Medicine*, In Press

## Dataset

BIRO003	TYPE DM	Type Of Diabetes	Enumerated	1 = Type 1
	_			2 = Type 2
				3 = Other Types of Diabetes
BIRO004	SEX	Sex	Enumerated	1 = Male
				2 = Female
BIRO005	DOB	Date of Birth	Date/Time	Range: ≥01/01/1900 - <current date<="" td=""></current>
BIRO006	DT_DIAG	Date of Diagnosis	Date/Time	Range: ≥DOB - <current date<="" td=""></current>
BIRO007	EPI_DATE	Episode Date	Date/Time	Range: ≥DOB - <current date<="" td=""></current>
BIRO008	SMOK_STAT	Smoking Status	Enumerated	1 = Current Smoker
				2 = Non-Smoker
				3 = Ex-Smoker
BIRO009	CIGS_DAY	Cigarettes per day	Integer	Range: 0 – 100
BIRO010	ALCOHOL	Alcohol Intake	Integer	Range: 0 - 60
BIRO011	WEIGHT	Weight	Real	Range: 5 – 300
BIRO012	HEIGHT	Height	Real	Range: 0.3 – 3
BIRO013	BMI	Body Mass Index	Real	Range: 0.01 – 100
BIRO014	SBP	Systolic Blood Pressure	Integer	Range: 10 – 400
BIRO015	DBP	Diastolic Blood Pressure	Integer	Range: 10 – 300
BIRO016	HBA1C	HbA1c	Real	Range: 2.15 – 25.02
BIRO017	CREAT	Creatinine	Integer	Range: 3 – 1999
BIRO018	MA_TEST	Microalbumin	Enumerated	1 = MA Test Normal
				2 = MA Test Abnormal
				0 = No MA Test Recorded
BIRO019	CHOL	Total Cholesterol	Real	Range: 0.01 – 50
BIRO020	HDL	HDL	Real	Range: 0.01 – 5
BIRO021	TG	Triglycerides	Real	Range: 0.01 – 100
BIRO022	RETINAL_EXAM	Retinal Examination	Enumerated	1 = Yes
				0 = No
BIRO023	RETINA	Retinopathy Status	Enumerated	1 = No Retinopathy
				2 = Background Retinopathy
				3 = Referable Retinopathy
BIRO024	MACULA	Maculopathy Status	Enumerated	1 = No Maculopathy
				2 = Referable Maculopathy
BIRO025	FOOT_EXAM	Foot Examination	Enumerated	1 = Yes
				0 = No
BIRO026	PULSES	Foot Pulses	Enumerated	1 = Present



## Meta Registry of













































The BIRO system is a global solution for the international exchange of diabetes information.

The "Meta Registry of Diabetes Data Sources" is the central resource for BIRO user management. It allows EUBIROD partners to autonomously register and manage local data sources that will be used to produce the global report.

For each data source, the following structural characteristics are required:

- user details (name of the person entering information)
- site header (contact details of the institution managing data)
- site profile (data source type and structural characteristics of the catchment area)
- BIRO Unique Data Source Identifier (NUTS code of the catchment area)

Additionally, we request users to further specify:

- local data items (consistency/completeness of BIRO parameters at the local source)
- privacy requirements(privacy performance assessment)

Successful completion of these details allows using the BIRO software in integrated mode to submit aggregate data and produce standardized benchmarking reports in a completely autonomous way.

Please login to access the secure area of the Meta-Registry:

Username.

Password

Login

To access a demo of the registration process, please login with these credentials:

USERNAME: user

PASSWORD: quest



## Meta Registry of



















DATA ITEM: BIRO032



























Change Data Source Change your Password

Data Source: UKM21.1

Structure

Local Data Items

Privacy Questionnaire

Download

**User Guide** 

Active Foot Ulcer **Activity End Date Activity End Reason Activity Start Date Activity Start Reason** Alcohol Intake Alcohol Status Amputation Anti-Platelet Therapy

Antihypertensive Medication

Average Injections

**Body Mass Index** Cigarettes per day

Blindness

Creatinine Date

Date of Birth Diabetes Specific Education Diastolic Blood

Click on one of the item from t	the left li	st to displ	lay the stored	data
---------------------------------	-------------	-------------	----------------	------

Field name:	Active Foot Ulcer				
Clinical Definition	Ulcer is defined as any break in the epithelium greater than a crack below the level of the malleoli. It is required as an indicator of possible risk of future amputation 1 = Yes: Ulcer field contains valid year 0 = No: Ulcer field is NULL or contains invalid numeric data				
Recorded	Yes ○ No Mandatory	/Routine	O Mandatory O Routine		
Consistency	Medium Quality Sco	re	Medium		
Data Completeness	70%				
Additional Comments	Arbitrary percentage as data in	clusion from clinic	al systems is not vetted.		
			Save Reset Fields		



You are not logged in. (Login)



#### Site news



Welcome to the Eubirod E-learning platform

by Massimo Massi Benedetti - Friday, 17 February 2012, 01:28 PM

This portal contains self-administered tests and questionnaires to evaluate the effectiveness of the training activity.

If you wish to have a look at the available courses, please simply click on any of the courses listed below or in the "Courses" navigation link on your left.

Guests are able to access the Course content automatically, but not to attempt Course quizzes or assessments.

## Online users (last 5 minutes) Massimo Brillante Massimo Massi Benedetti

**6** 🖁 📭

0 4

#### Courses

- ▼Eubirod Core
  - Common Dataset
  - Customized Toolbox
  - 🕏 EU Diabetes Report
  - 🦆 International Diabetes Report
  - Privacy, Data Protection and Health Information Systems

Collapse all Expand all

Search courses: Go

# my diabetes + my way

Dr Scott G Cunningham, Technical Consultant scott.cunningham@nhs.net

www.sci-diabetes.scot.nhs.uk www.mydiabetesmyway.scot.nhs.uk

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- **mww.facebook.com/mydiabetesmyway**