

APL-NDPP Diabetes prevention invitation and referral tool

User guide for EMIS Web



Clinical Effectiveness Group Queen Mary University of London

V 3.0 December 2023

About

Systematic invitation and referral

APL-NDPP is designed for use within GP practices. It identifies patients who are eligible for behaviour change programmes through the <u>NHS Diabetes Prevention Programme</u>. Using the tool, practice teams can quickly list eligible patients and prepare a prioritised list to invite. The tool will support you to:

Prioritise

- Rank patients according to the number and importance of their relevant risk factors,
- Filter patients according to whether they have already been referred or not, or have declined referral,
- Re-import the filtered list into your clinical system to batch add codes or send appointment messages.



Tailor your approach to individuals

• See relevant details for each patient in your list including overall risk factor score, BMI, ethnicity, age and vulnerabilities - simply by clicking on their name in the tool.

How risk is calculated

The tool displays coded information from patient records and assigns a simple weighting (1 or 2) to a set of risk factors, calculating a total score for each person (maximum score = 9):

- Age: ≥ 65 years = 1
- Area-based Index of Multiple Deprivation (IMD) score Q4/5 = 1
- BMI: 35-39 = 1, 40+ = 2
- Ethnicity: Black or South Asian = 1
- Hypertension = 1
- Pre-existing cardiovascular disease: Ischemic heart disease, stroke/TIA, Atrial Fibrillation = 2
- Vulnerability: Learning disability or severe mental illness = 1

Referral eligibility

APL-NDPP uses the following criteria to identify patients as eligible for referral:

- Aged 18 years or over;
- 'Non-diabetic hyperglycaemia' (NDH), defined as having an HbA1c of 42 47 mmol/mol or a fasting plasma glucose (FPG) of 5.5 6.9 mmol/l. The blood result indicating NDH must be within the last 12 months to be eligible for referral and only the most recent blood reading can be used;
- Previous gestational diabetes and latest HbA1c <42 mmol/L.

Excludes patients who have:

- Blood results confirming a diabetes diagnosis, i.e. HbA1c of 48mmol/mol or greater or FPG of 7mmols/L or greater, or a previous diagnosis of diabetes (excluding diabetes resolved);
- A pregnancy-related code within the last 10 months;
- Palliative care;
- Eating disorders;
- Severe/moderate frailty;
- Bariatric surgery within the last two years.

About

Supporting elements

APL-NDPP is part of a wider programme of support that CEG provides to GP practices in the North East London NHS region, including 1:1 training and guidance from our team of facilitators. The tool is best used with these supporting elements in place.



Limitations

No replacement for clinical judgement

APL-NDPP is **not a diagnostic tool or intended to replace clinical judgement**. The tool displays information coded in the patient record and can be used to highlight patients who have non-diabetic hyperglycaemia. It does not make management recommendations – these are entirely a matter for the clinician.

Only presents coded information

The tool only presents information that is **coded** in the patient health record. It is important to use it with data entry templates to ensure your activity is coded correctly. In cases where the codes do not clearly describe a patient's risk factors or referral status, clinicians are advised to manually check the patient record for uncoded information which would not be picked up by the tool.

Contact us

If you have any questions or feedback about our diabetes prevention invitation and referral tool, or this user guide, please get in touch:

CEG-feedback@qmul.ac.uk

qmul.ac.uk/ceg

Our postal address is:

Clinical Effectiveness Group Queen Mary University of London Yvonne Carter Building 58 Turner Street London E1 2AB

Step-by-step: Downloading APL-NDPP

You only need to do this once

Step 1: Download

Download the APL-NDPP zip file.

Step 2: Extract

Extract the files:

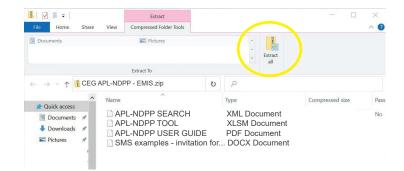
APL-NDPP SEARCH.xml (EMIS file) APL-NDPP TOOL.xlsm (Excel file) APL-NDPP USER GUIDE.pdf SMS examples (Word document)

Step 3: Save

Save the files in a shared folder so they are accessible to other practice staff, including clinicians reviewing your work. Choose a secure device or network if you intend to save exports of patient identifiable data in the same place.



CEG APL-NDPP - EMIS.zip



ſ	Our files are saved:

Step 4: Unblock macros

Microsoft has introduced a security feature that blocks Excel macros by default. Macros are automated actions that the tool uses to run - without them, it will not work.

4.1 Right click on the '**APL-Imms TOOL**' XLSM file and select '**Properties**'.

4.2 In the 'General' tab, tick the box to 'Unblock'

4.3 Click '**Apply**'. You must click 'Apply' before 'OK', otherwise the change won't take affect.

If you accidentally click 'OK' without clicking 'Apply', the option will no longer be visible and you will need to download the file again.

eneral Secu	urity Details Previous Versions				
×	APL-Imms TOOL				
Type of file:	Microsoft Excel Worksheet (.xlsx)				
Opens with:	Excel Change				
ocation:	C:\				
Size:	272 KB (279,548 bytes)				
Size on disk:	276 KB (282,624 bytes)				
Created:	16 March 2022, 15:46:44				
Modified:	16 March 2022, 15:46:45				
Accessed:	05 July 2022, 11:20:03				
Attributes:	Read-only Hidden Advanced.				
Security: This file came from another computer and might be blocked to Unblock help protect this computer.					

Troubleshooting

If you unblocked macros but still find that some of the tool functions do not work, add the folder you saved it into as a 'trusted location'. In Excel, click 'File', 'Options', then 'Trust Center', then follow <u>Microsoft's instructions</u>. **If you have any problems installing or using the tool, contact your local CEG facilitator for help.**

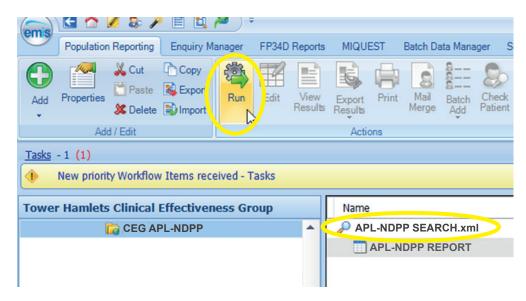
Step 1: Run the search in EMIS

1.1 Open EMIS Web and click '**Population Reporting**' in the Quick Launch Menu.

1.2 Choose a destination folder and click 'Import':

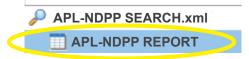
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Population Reporting	Enquiry Manager	FP34D Reports	MIQUEST	Batch Data Man	ager SN
Add Properties & Cut	Copy Export Import	Edit View Results	Export Results	Mail Merge Add	Check Patient
Add / Edit			Actions		
Tasks - 1 (1)					
🜗 New priority Workflow	/ Items received - T	Tasks			
Tower Hamlets Clinical	Effectiveness Gr	oup		Name	
Example fo	lder			🔯 Example f	older
		😫 Example folder			
Example for	tolder				
				<u> [</u> Example f	older

1.3 Navigate to APL-NDPP SEARCH.xml (EMIS file) and click 'Run':



Step 2: Export the search results

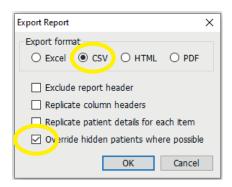
2.1 When the run is complete, select the **APL-NDPP Report** (it has a grid icon rather than a magnifying glass):



2.2 Click '**View Results**'. Then, when the table of patients has loaded, click '**Export**' (now visible in the top ribbon).

ems	Population Reporting	Enquiry Manager	 FP34D Reports 	MIQUEST	Batch Data Ma	nager SN	IOMED CT	l'inactive c	odes		
Add	Properties	Run	Edit View Results	Export Results	Mail Batol Merge Add		8 Patient List	Patient + Address		Auto	Full Hierarchy
	Add / Edit			Actions				Run Re	port		1
Tasks	- 1 (1) New priority Workflow	Items received -	Tasks								
Tower	Hamlets Clinical E	Effectiveness G	roup	Name							P
	CEG A	PL-NDPP	-	🔑 APL-N	DPP SEAR	CH.xml					
				🛄 AP	L-NDPP RE	PORT					

2.3 Choose to export it as a **CSV** and tick the bottom checkbox: '**Override hidden patients where possible**':



2.4 Save your export in a location where you can find it easily and include the export date in the file name.

Important: Patient identifiable data should always be stored on a secure device or network.

Step 3: Import data into the tool

3.1 Open APL-NDPP TOOL.xlsm (Excel file).

3.2 Select your clinical system.

APL - National Diabetes Prevention Tool								
		en created to present clinical in or intended to replace clinical ju		oded in the pat	ient health record.	It is not a	AI	
Press to locate CSV file				Export NHS nu	ımber 🗾		RESET to clear	
Filters		Practice Summary					Risk Factors	
			Number	Referred	Not Referred	Declined	Ethnicity – Black or South Asian = 1	
Referral Not yet referred Referred Declined Age <65	≥ 65	Entire cohort	0	0.0%	0.0%	0.0%	Deprivation – IMD score Q4/5 = 1	
		% BMI < 30	0	0.0%	0.0%	0.0%	BMI - 35-39=1, ≥ 40=2	
Ethnic Group South Asian Black White Other Risk Factors 0-4	5-9	% BMI 30 - 34	0	0.0%	0.0%	0.0%	Vulnerability – LD or SMI = 1	
		% BMI 35 - 39	0	0.0%	0.0%	0.0%	Pre-existing CVD - IHD, Stroke/TIA, AF = 2	
BMI		% BMI ≥ 40	0	0.0%	0.0%	0.0%	Pre-existing Hypertension = 1	
Disease CVD (IHD/Stroke/TIA/PAD/AF) Hypertension Gestational Diab? Yes		% South Asian/Black	0	0.0%	0.0%	0.0%	Age ≥ 65 years = 1	
CVD (IHD/Stroke/TIA/PAD/AF) i hypertension Gestational Diab? Reset	t Filters							

3.3 Click 'Press to locate CSV file'. Find and select the file you just exported from EMIS Web.

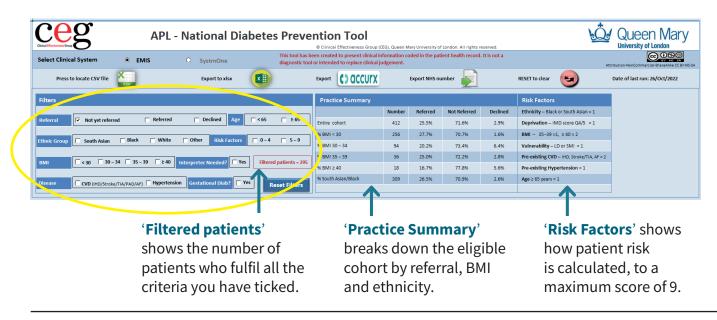
<u>Ceeg</u> Gircia Effectiveness Group G	Queen Mary				
Select Clinical System	EMIS	O SystmOne	This tool has been created to present clinical information coded in the patient health record. It is not a diagnostic tool or intended to replace clinical judgement.		Attribution-NonCommercial-ShareAlike CC BY-NC-SA
Press to locate CSV file	K.	Export to xlsx	Export COCCUTX Export NHS number	RESET to clear	
eth.					

Important: Each time you use the tool, run a new search in EMIS and import fresh data to ensure you are seeing the latest information.

Step 4: Filter the patient list

Use the **checkboxes** to filter your patient list. The tool will list all patients who meet the criteria.

Depending on who you want to prioritise for invitation, you could list patients who have not been referred, who are under 65 years old, with risk factors 5-9 and have a BMI ≥ 40, for example.



Step 5: Review individuals easily

5.1 Click a patient's name in the list to see more detail from their EMIS record:

		APL -	Nat	ional Di	abetes	Preve			EG), Queen N	fary University of	London. All rights	reserved.	<u>L</u> Q.	Queen Mar	ry
Select Clinical System © EMIS C SystemOne discussion costed to present clinical information coded in the patient health record, it is not a										tribution-NonCommercial-ShareAlike CC	10				
Press to locate CSV file	X csv			Export to xlsx			Export	accurx		Export NHS nu	mber 🗾		RESET to clear	Date of last run: 26/Oct/2022	
lters							Practice Su	ummary					Risk Factors		
									Number	Referred	Not Referred	Declined	Ethnicity – Black or South Asian = 1		
eferral 🔽 Not yet refe	rred	Referred		Declined Age	┌┐ < 65	□ ≥ 65	Entire cohort		412	25.5%	71.6%	2.9%	Deprivation – IMD score Q4/5 = 1		
	Black	White	C Othe	f Risk Factor	s □ 0-4	5-9	% BMI < 30		256	27.7%	70.7%	1.6%	BMI - 35-39 =1, ≥ 40 = 2		
nnic Group South Asian	DIdCK	winte	Oule	KISK Pactor	0-4	3=9	% BMI 30 - 34		94	20.2%	73.4%	6.4%	Vulnerability – LD or SMI = 1		
VII < 30 50	- 34 🔲 35 - 3	0 240	1-0-0-0-0	er Needed?	(or Eliterada	patients – 295	% BMI 35 - 39		36	25.0%	72.2%	2.8%	Pre-existing CVD – IHD, Stroke/TIA, AF = 2		
	- 34 33 - 3	3 1 240	interpret	er Needeu?	rittered j	patients = 295	% BMI ≥ 40		18	16.7%	77.8%	5.6%	Pre-existing Hypertension = 1		
sease CVD (IHD/Strol		Hypertensi	on Gest	ational Diab?	Yes	set Filters	% South Asian/E	Black	309	26.5%	70.9%	2.6%	Age ≥ 65 years = 1		
	,,,,,,,,,,,				Kes	set Filters									
Full Name	Patient Reference no.	Sex	Age	Ethnic Group	Risk Factors ↓		A1c st 12m	BMI	CVD	Hypertension	Gestational Diabetes?	Referral Status	Interpreter status	Main Language Spoken	
838caa8-037e-6925-af7e-19f02		Female	69	South Asian	5	42	03-Aug-2022	32.8	Yes	Yes	No	Not referred		Main spoken language Bengali	
bb5ebe1-4d76-a02c-4abd-65c44		Female	79	Black	5	44	02-Sep-2022	43.7	No	Yes	No	Not referred	Interpreter not needed	Main spoken language English	
6ae2d55-8983-3c02-d097-c88a5		Female	77	South Asian	5	43	06-Oct-2022	23.9	Yes	Yes	No	Not referred	Interpreter present	Main spoken language Bengali	

We used a dummy dataset for demonstration purposes, but the full names of patients will appear here.

The **Patient Information** screen pulls relevant details from the patient record, including registration data, type 2 diabetes risk factors and result and date of their last HbA1c and/or fasting blood glucose.

Crical Effectiveness Group B APL -	National Diabetes Preven		Jeen Mary ersity of London	
Patient Information		Total risk factors	5	
Full Name	4838caa8-037e-6925-af7e-19f02a372ebe	Gender	Female	
Date of Birth		Age	69	
NHS Number		Patient Ref #		Total risk factors
Home/Work Telephone		Mobile Telephone		> 6 risk factors
Main Language Spoken	Main spoken language Bengali	Main Language Date Recorded	30-Jul-2021	4 - 6 risk factors
Interpreter Status		Interpreter Status Date Recorded	< 4 risk factors	
NDDP Referral	Description		Date Recorded	Legend
Referral Status	Not referred			High Risk
				Moderate Risk
Risk Factors	Description/Value		Date Recorded	Mild Risk
CVD (IHD/Stroke/TIA/PAD/AF)	Stroke/TIA			
Hypertension				Risk Factors

5.2 Click 'BACK' to go back to your patient list.

Step 6: Export your list for invitation

Option 1: Excel file: click 'Export to xlsx'

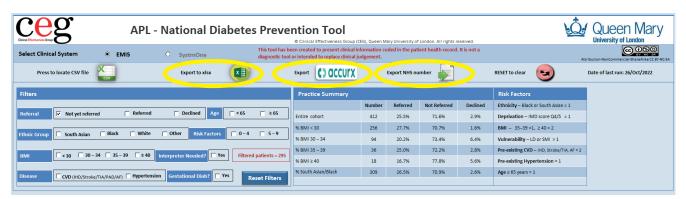
You could use this file to add notes of actions taken/to be taken, but these will not go into the patient record.

Option 2: Accurx csv file: click 'Export accurx'

This method will create a .csv file that you can import into the Accurx text message system to batch send text invitations to patients.

Option 3: NHS numbers: click 'Export NHS number'

This will create a .txt file that you can import back into EMIS to batch add codes, letters, text messages, or even run searches or auto reports - see step 7.



The tool download folder includes a Word document with example SMS messages (written by NHS North East London). The Diabetes Prevention Programme invitation letter is available in Resource Publisher: 'NDPP Invitation Letter CEG (RP)'

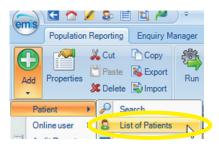
Step 7: Import NHS numbers into EMIS

7.1 Open EMIS Web and click 'Population Reporting'.

7.2 Select a folder of your choosing. Click 'Add', 'Patient', 'List of Patients'.

7.3 Click '**Import**' and navigate to your .txt file of NHS numbers (repeat if you have multiple lists) then click '**OK**'.

Tip: Remember to use CEG templates to code any actions, including referrals and declines. This will ensure every patient record has a clear, coded history that the tool will draw from next time you use it.



New List of Patient Re	eport		×
Name			~
🛟 Add 🔉 Remove	Search	Results	
Patient No.	Patient Name		NHS Number
Patient list.txt			
			K Cancel



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