

**NATIONAL DIVISIONS DIABETES PROGRAM**

**DIABETES QUALITY ASSURANCE WORKSHOPS**

**Summary Report**

**February 2001**

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# Contents

<b>ACKNOWLEDGEMENTS.....</b>	<b>iii</b>
<b>NDDP DIABETES QUALITY ASSURANCE WORKSHOPS.....</b>	<b>1</b>
Background .....	1
Aim .....	1
Target Audiences .....	1
Strategic Outcomes .....	2
Learning Outcomes .....	2
The Quality Assurance Cycle as it applies to Divisions .....	2
<b>WORKSHOP CONTENT .....</b>	<b>5</b>
Workshop materials .....	6
<b>WORKSHOP EVALUATION.....</b>	<b>7</b>
Major outcomes .....	7
Characteristics of attendees .....	7
Usage of reports.....	7
Usefulness of data from other Divisions .....	8
Discussion of results with others .....	8
Discussion with GPs within the Division .....	8
Use of data .....	8
Networking.....	8
Program improvement .....	9
Value of the workshops.....	9
Post-workshop activities .....	9
<b>CONCLUSIONS .....</b>	<b>10</b>
APPENDIX II: Free Response Comments from Workshop Evaluations for GP Program Managers and Diabetes Program Managers .....	11
APPENDIX III: Summary Pre and Post-Workshop Evaluation, GP Program Managers .....	17
APPENDIX IV: Summary Pre and Post-Workshop Evaluation, Diabetes Program Officers.....	21

Note: The Summary Report contains only appendices II, III and IV from the Main Report.

## **ACKNOWLEDGEMENTS**

The authors would like to express thanks to:

Professor Mark Harris  
Dr Nicola Dunbar  
Ms Danielle Penn  
Ms Victoria Archer  
Ms Sarah Ford  
Ms Tessa Ho

# NDDP DIABETES QUALITY ASSURANCE WORKSHOPS

## Background

The National Divisions Diabetes Program (NDDP) conducted the Data Collation Project during 2000. The aim of that project was to pilot collection and collation of diabetes quality of care and health outcome indicator data from Divisions of General Practice.

The project was completed in June 2000 and the results launched in August at a conference “Doctors, Data and Diabetes – Saving Lives, Better Lives”.

At that conference, there was a resolution for the twenty-seven Divisions who participated in the quality of care and health outcomes data aggregation to be able to be identified and meet to explore further the results of the study.

As a result, two Diabetes Quality Assurance Workshops were planned for early 2001 – one for GP Program Managers and one for Diabetes Program Officers.

The workshops were held in February 2001.

## Aim

The NDDP Diabetes QA Workshops aim to:

- assist Divisions use the results of the Data Collation Project for quality assurance at the Division and practice level
- suggest ways in which Divisions can analyse and further use the published data
- identify successful strategies which may assist individual Divisions with the development and implementation of their diabetes programs
- improve diabetes care for individuals and Divisions
- develop interventions which address current difficulties and issues within Divisions
- provide an opportunity for networking for GPs and Division staff
- generate support and participation for participation in future rounds of data aggregation
- contribute to building a diabetes research network with Divisions of General Practice

## Target Audiences

The target groups were Division GP Program Managers and Diabetes Program Officers (DPOs) from the twenty-seven Divisions who took part in the quality of care and health outcomes indicator data aggregation.

Agreement was sought from the CEOs of the 27 Divisions for their identity to be revealed for the specific purpose of having the QA workshops. All 27 CEOs eventually agreed. A GP Program Manager and the Diabetes Program Officer for each of the 27 Divisions was invited. Where an individual in these roles could not be identified, the CEO was invited to nominate a suitable person to attend.

The workshops were held in two different groups in order to:

- maximise the workshop element of the activity – promotion of discussion is difficult in workshop groups of more than 30 and break out groups of more than 10.
- maximise the discussion and comment within the two different groups. There was anecdotal evidence that Program Officers would be less likely to speak freely in the presence of the GP Program Managers.
- promote consistent and relevant discussion. It was conjectured that the two different groups might have different emphases in their discussions – ie GPs on clinical issues and DPOs on program issues. This was borne out and was evidenced in the workshop evaluation.

### **Strategic Outcomes**

- Divisions and DPOs get value out of participation in data aggregation activities
- GPs and DPOs become motivated to further discuss and disseminate the results with their peers
- Participating Divisions act as advocates for Divisions not participating and for Divisions who currently do not have a diabetes program
- Divisions learn from other Divisions' successes
- a greater appreciation is gained of the role of Divisions and GPs in population health activities

### **Learning Outcomes**

It was hoped that as a result of the workshops, participants could:

- be proficient at reading graphs and tables especially those from the Data Collation Project
- analyse the data presented
- make suggestions about why the data are as they are
- identify successful strategies and to suggest strategies for improvement of results at the local level
- link the quality of care and health outcomes indicator data with other relevant data such as demographic data, service availability, program information
- understand the importance of GP and population reach of diabetes programs
- understand the concept of quality assurance as it applies at the Division level

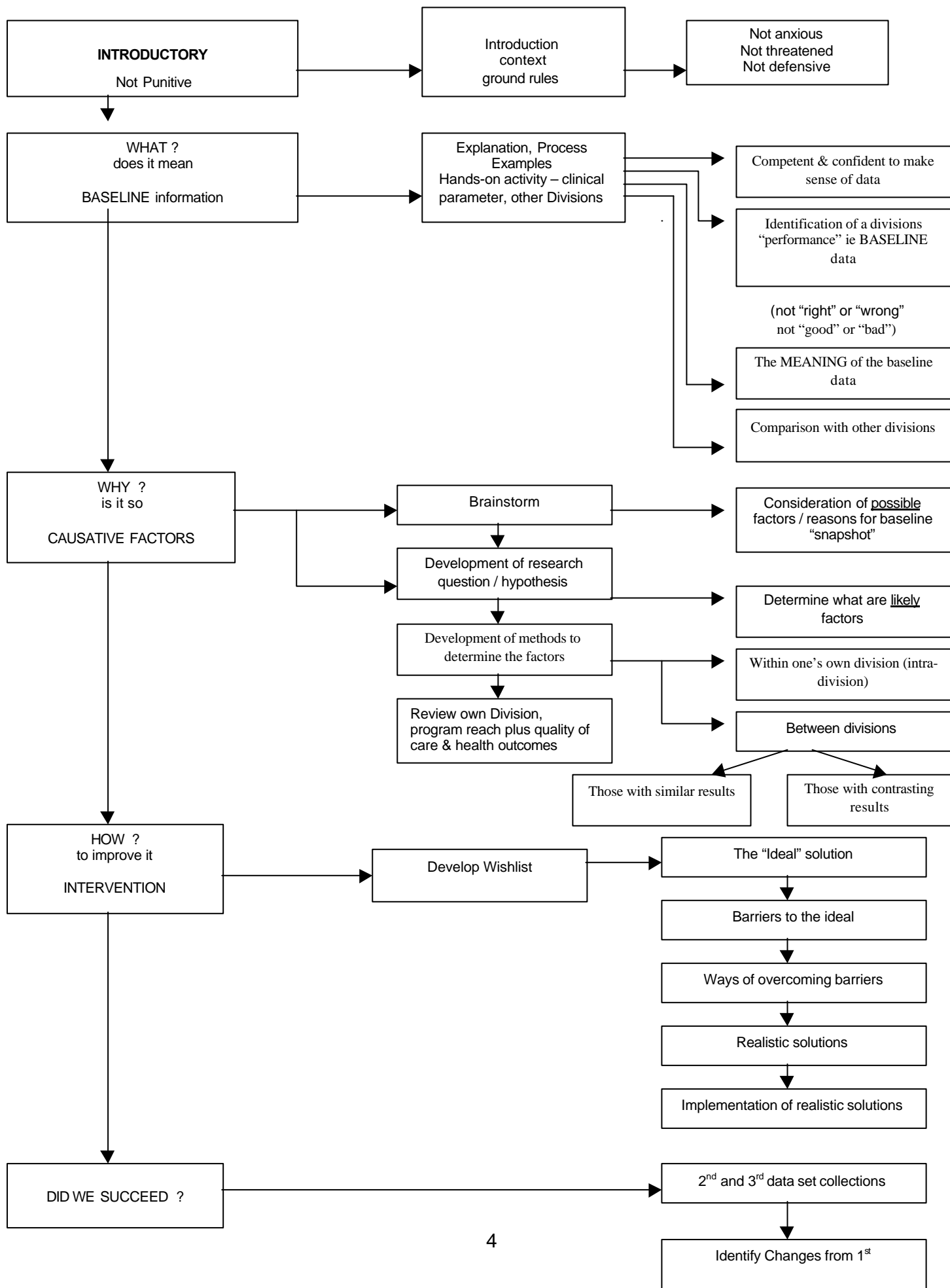
### **The Quality Assurance Cycle as it applies to Divisions**

These workshops represent the first time that Division level data has been collected, collated and made available to Divisions for comparison in a quality assurance model. In much the same way that audit and peer review is an accepted means of altering behaviour and quality improvement at the individual practitioner level, the bringing together of Divisions in a peer review situation regarding performance can be regarded as a new level of quality assurance in the primary care sphere.

The rationale is that Divisions use the data gathered in the Data Collation Project as baseline data. The quality assurance workshop then provides education and peer review opportunities to reflect on performance and, importantly, to consider strategic options for intervention. The intervention can then be considered and implemented and its impact assessed at the next data collation, closing the quality assurance loop.

A schematic for the workshop is shown at Figure 1.

**Figure 1: Schematic for diabetes quality assurance workshops**



## WORKSHOP CONTENT

The workshop was conducted as a series of Power Point presentations and breakout sessions with feedback to the whole group.

### Introductory session

This session covered:

- aims of the workshop
- description of the Data Collation Project components
- clinical parameters to be examined
- indicators
- rationale for the workshop content and activity
- what further analysis can tell us

### Morning session

This session covered:

- aim of the session
- ground rules on confidentiality and trust
- ground rules on the data being considered
- definitions
- variability
- example - linking a quality of care indicator and demographic data
- example – linking a health outcome indicator and demographic data
- break out session – description of activity
- break out session – description of process

### Afternoon session

This session covered:

- quiz on reading the data tables and graphs
- recap – what and why
- more on why – how to improve things
- case study – summarising your results
- developing interventions
- break out session – analysing your own results
- program reach

- the population perspective
- summary – what have we learnt
- further uses of the data
- suggested post-workshop activities
- longer term post-workshop activities

### **Workshop materials**

The resource manual contained:

- hard copy of the Power Point presentations for note-taking
- note paper
- Data Collation Project report Volume 3: Quality of care and health outcomes – collated Division data
- tables containing further analysis of the data
- multiple choice quiz on the data
- Division profiles of participating Divisions from the Data Collation Report series: Volume 2 – Division and Program Descriptions and Volume 4 – Quality of care and health outcomes data – individual Division data
- floppy disc with Power Point presentations, Division profile and master copy of quiz

## WORKSHOP EVALUATION

A pre and post-workshop evaluation was conducted for both the GP Program Managers workshop (GPs) and for the Diabetes Program Officers workshop (DPOs)

### Major outcomes

The evaluation of the workshops for both GPs and Diabetes Program Officers indicated a likely increase in:

- usage of results of Data Collation Project
- discussion of results within Divisions
- usefulness of data
- desire for program improvement in specific aspects of the program
- networking
- accessing of reports electronically

### Characteristics of attendees

There were 10 attendees for the GP Program Managers workshop and 21 for the Diabetes Program Officers workshops. Of the 21 attendees at the Diabetes Program Officers workshop, one was in fact a GP Program Manager who had been unable to attend the GP workshop and particularly wanted to attend.

- 35% of GPs and 20% of DPOs attended the launch of the Data Collation Project results in August 2000 in Brisbane
- 60% of GPs and 95% of DPOs had received the DCP reports
- 60% of GPs and 85% of DPOs had looked at them since receiving them
- None of the GPs or DPOs had accessed the reports online. 70% of GPs and 61% of DPOs indicated they would do so in the post-workshop evaluation

### Usage of reports

Both GPs and DPOs indicated they would use the reports more following the workshop (except for DPOs volume 2 usage which indicated a slight decrease)

#### Volume 2 (descriptive profiles)

30% of GPs indicated they had used or thought they could use the data pre-workshop and 70% post-workshop

65% of DPOs indicated they had used or thought they could use the data pre-workshop and 61% post-workshop

#### Volumes 3 and 5 (quality of care and health outcomes)

40% of GPs indicated they had used or thought they could use the data pre-workshop and 100% post-workshop

55% of DPOs indicated they had used or thought they could use the data pre-workshop and 89% post-workshop

#### Volume 4 (individual Division quality of care and health outcomes data)

40% of GPs indicated they had used or thought they could use the data pre-workshop and 100% post-workshop

55% of DPOs indicated they had used or thought they could use the data pre-workshop and 83% post-workshop

### **Usefulness of data from other Divisions**

Following the workshop, DPOs indicated a decreased usefulness of all aspects of data from other Divisions. This would indicate that the workshop provided a successful learning opportunity to understand and work with the data and found the workshop sufficient to gain knowledge about other Divisions.

GPs however thought that demographic data, advice from other Divisions and data on GP reach was more useful following the workshop, indicating further opportunities to explore this data may be useful.

### **Discussion of results with others**

For both groups, indications are that the workshop was successful in promoting further discussion of the results within Divisions but reduced the likelihood of discussion outside the Division.

Both groups indicated that increased discussion would take place with:

- Division Board
- GP Reference Group
- Diabetes Program Officer or GP Program Manager respectively

DPOs indicated they would have increased discussions with other Program Officers (such as Population Health Coordinators). DPOs also indicated an increased likelihood to discuss the results with the Division CEO (there was no change on this parameter for the GPs).

### **Discussion with GPs within the Division**

Both groups indicated this would increase after the workshop. Prior to the workshop, 50% of DPOs and 30% of GPs had discussed with other GPs. Reasons for GPs included: complexity and volume of the data and uncertainty about the level of interest of GPs as well as lack of time. For DPOs reasons included lack of certainty about GP interest and suspect quality of the data (although this was less so after the workshop).

### **Use of data**

Both groups found the data more useful after the workshop for program planning (but not evaluation or review), service planning and patient participation. In addition, DPOs thought the data more useful in regard to GP participation (but GPs didn't).

### **Networking**

Both groups indicated this would be likely to increase following the workshop.

## **Program improvement**

Both groups experienced and increased desire to improve the following aspects of their program following the workshop:

- patient participation
- health outcomes of patients
- increased case detection.

In addition, GPs wanted improvement in quality of care offered and targeting of high risk populations. DPOs wanted improved GP participation in the program.

## **Value of the workshops**

94% of DPOs and 100% of GPs found the workshop valuable in helping to better understand the reports and results from the Data Collation Project. In particular, both groups found the networking experience of the workshop, the process of analysing the results (especially their own Division results) and learning to develop interventions most valuable.

## **Post-workshop activities**

- E-mail networks for both groups are being set up.
- Workshop materials are being disseminated to those who did not attend.
- Project is being submitted for the 2001 General Practice and Primary Health Care Research Conference.
- The NDDP Program Manager has been invited to present at the GPD-V Conference in March.

## **CONCLUSIONS**

Based on the evaluations, the workshops were successful in achieving their short term aims.

Post-workshop activities and subsequent data aggregation projects may shed some light on whether longer term objectives around developing and implementing interventions are achieved.

## **APPENDIX II: Free Response Comments from Workshop Evaluations for GP Program Managers and Diabetes Program Managers**

### **GP Program Managers**

#### Pre-workshop: What do you expect to get out of the workshop?

- overview of best means to improve diabetes management in community
- networking
- compare (results) with other divisions and find ways to get greater GP and patient participation
- ideas about how to improve diabetes program and encourage GP involvement
- how to improve CARDIAB uptake and effectiveness in our Division
- ideas to assist the diabetes program strategies
- forward directions
- better design and plan our new diabetes program
- ideas

#### Post-workshop: Comments about the workshop

- need to continue to meet with other Divisions about where they are going
- not enough time for group participants to talk to each other in the group
- would like epidemiological support in interpreting future data
- well done, thank you

### **Diabetes Program Officers**

#### Pre-workshop: What do you expect to get out of the workshop?

- information on improvements to database; networking; better use of data; overcoming hurdles; motivation to keep up
- networking; future direction of programs; models; purpose of data collection to date
- strategies to improve; patient outcomes; quality of care by GPs
- find out how to address barriers of GP data collection; GP incentives
- peer support; advice on increasing GP participation
- information to get the Board to start up the project again
- extracting data from CARDIAB; how to use it; auditing data; recall – other divisions' methods of achieving effective recall
- networking; future directions; data collection benefits and barriers

- to know about the data which other divisions had provided and which I have not as yet accessed from the reports provided
- information on successful programs and their design and evaluation
- share information and ideas with other Divisions; examine future of similar projects
- some new ideas and directions for the diabetes program
- how I can use the data; others' experience with their database

#### Post-workshop: Comments about the workshop

- fantastic workshop; data is much easier now to read; hope this will continue; very supportive forum; sharing ideas and networking invaluable for isolated Divisions
- the network and problem solving techniques and process was invaluable; I would like more problem solving; data reflecting program process and planning
- great to be involved for three years; great venue
- would be interesting to see actual forms used by different Divisions to collect data by GPs/nurse educator; also incentives used by Divisions or budgets would be useful
- the workshop was a great idea not so much in how to understand but the limitations of the data
- needs to start where we ended; would have been good for each program to present where they were in 1999 and how they have evolved since
- we are asking GPs to forward us data of their diabetic patients – this process has been shown to work well but often data is missing; GPs now have the opportunity to be remunerated to prepare care plans for their patients with diabetes; these require two different tools/forms; how can we merge these tools into one and have this data available to be electronically sent (ie via the messaging service)

#### **Usage of Reports**

##### Volume 2

##### *Pre-workshop - GPs*

- feedback to GPs; validation of project to funding body

##### *Pre-workshop - DPOs*

- forward planning & CME
- CME & GP feedback
- brief report to Steering Committee and Board of Directors
- we may use them to compare data between Divisions when publishing our results
- to support our present program from being axed or downgraded
- statistics supporting program development
- future planning
- inform GPs

- feedback to GPs

*Post-workshop - GPs*

- justifying direction of program
- redesigning diabetes program
- discussion with Division Management Committee
- rethinking services
- continue the learning done here

*Post-workshop - DPOs*

- program evaluation and development
- to look at building a database
- better management and program development
- further planning
- project planning
- future planning
- no baseline and other parts
- motivating GPs; reports for funding; part workshop
- planning
- planning new diabetes program

Volumes 3 & 5

*Pre-workshop - DPOs*

- report back to GPs
- we may use them to compare data between Divisions when publishing our results
- if we have staff time
- program substantiation
- statistics supporting program development
- benchmarking progress
- brief report to Steering Committee and Board of Directors

*Post-workshop - GPs*

- justifying direction of program
- benchmarking our Division as well down the rankings at present

- redirect our program
- discussion with Division Management Committee
- inform discussion groups with GPs; design of new CME activities
- service planning
- continue the learning done here

*Post-workshop - DPOs*

- program evaluation; networking
- to look at building a database
- analysis and comparison
- comparisons
- project planning
- future planning
- limited usefulness
- building strategies
- relating results to other Divisions' programs
- to look for similar Divisions and their successes
- for comparison purposes
- reporting/evaluation

Volume 4

*Pre-workshop - DPOs*

- sub-committee meetings and reports
- if we have staff time
- to network between other programs
- evaluation of program

*Post-workshop - GPs*

- justifying direction of program
- benchmarking our Division as well down the rankings at present
- only as a comparison
- discussion with Division Management Committee
- inform discussion groups with GPs; design of new CME activities

- looking at improvements in QA activities
- continue the learning done here

*Post-workshop - DPOs*

- program planning
- to look at building a database
- evaluation
- better management
- general project planning
- future planning
- inform the Board
- comparisons
- comparison/interest
- to look for similar Divisions and their successes
- for reporting
- reporting/evaluation



**APPENDIX III: Summary Pre and Post-Workshop Evaluation, GP Program Managers**

<b>NDDP DIABETES QUALITY ASSURANCE WORKSHOPS SUMMARY PRE AND POST WORKSHOP EVALUATIONS GP PROGRAM MANAGERS</b>					
		<b>PRE</b>		<b>POST</b>	
		<b>Yes</b>	<b>%</b>	<b>Yes</b>	<b>%</b>
<b>1</b>	Did you attend the NDDP Conference held in August in Brisbane?	2	20		
<b>2</b>	Have you received a copy of the Data Collation Reports?	6	60		
<b>3</b>	If yes, have you looked at the reports since you received them?	6	60		
<b>4</b>	Have you accessed the reports on the CGPIS website?	0	0	7	70
<b>5</b>	Have/could you use the data from volume 2 (descriptive) for any purpose?	3	30	7	70
<b>5T</b>	If yes, what have you used the data for?				
<b>6</b>	Have/could you use the data from vol 3 or 5 ?	4	40	10	100
<b>6T</b>	If yes, what have you used the data for?				
<b>7</b>	Have/could you use the data from volume 4?	4	40	10	100
<b>7T</b>	If yes, what have you used the data for?				
	Which of the following data about other Divisions do you think might be useful to you?				
<b>8A</b>	demographic data (ATSI status, NESB status)	2	20	3	30
<b>8B</b>	program descriptive data	6	60	6	60
<b>8C</b>	services needed and services available data	2	20	2	20
<b>8D</b>	clinical indicators data - quality of care	8	80	3	30
<b>8E</b>	clinical indicators data – health outcomes	8	80	4	40
<b>8F</b>	achievements of other Divisions	8	80	8	80
<b>8G</b>	barriers limiting implementation of diabetes program	9	90	7	70
<b>8H</b>	advice from other Divisions	5	50	6	60
<b>8I</b>	GP program reach (proportion of GPs registering patients)	5	50	7	70
<b>8J</b>	Patient reach	6	60	6	60
<b>8K</b>	other (specify)	0		1	10
<b>8KT</b>					
	Have you discussed the results from your Division with anyone:				
<b>9A</b>	within your Division	8	80	9	90

NDDP DIABETES QUALITY ASSURANCE WORKSHOPS SUMMARY PRE AND POST WORKSHOP EVALUATIONS GP PROGRAM MANAGERS					
		PRE		POST	
		Yes	%	Yes	%
<b>9B</b>	outside your Division	2	20		0
	With whom have you discussed any of the results?				
<b>10A</b>	Board	3	30	8	80
<b>10B</b>	Division CEO	5	50	5	50
<b>10C</b>	GP or Program Reference Group	3	30	6	60
<b>10D</b>	Diabetes Program Officer	6	60	9	90
<b>10E</b>	other Program Officers (eg CVD Coordinator/Population Health Coordinator)	1	10	1	10
<b>10F</b>	other	0		0	
<b>10FT</b>					
<b>11</b>	Have you communicated or discussed the results with other GPs in your Division?	3	30	9	90
	If not, why not?				
<b>11A</b>	Data too complex		0	1	10
<b>11B</b>	too much data		0	1	10
<b>11C</b>	suspect the quality/accuracy of the data				
<b>11D</b>	don't know if GPs would be interested	1	10	1	10
<b>11E</b>	not sure which parts are of interest to GPs		0	1	10
<b>11F</b>	not enough time	1	10	1	10
<b>11G</b>	other (specify)	5	50	0	0
<b>11GT</b>					
	Do you think the data may be of use in:				
<b>12A</b>	program planning	8	80	9	90
<b>12B</b>	service planning or provision	4	40	8	80
<b>12C</b>	program evaluation or review	8	80	7	70
<b>12D</b>	improving GP participation in diabetes program	7	70	7	70
<b>12E</b>	improving patient participation in diabetes program	5	50	6	60
<b>12F</b>	other (specify)	0		0	
<b>12FT</b>					
<b>13</b>	Do you currently network with GP Program Managers from other Divisions?	1	10	4	40
	If yes, what do you find valuable about such networking?				

NDDP DIABETES QUALITY ASSURANCE WORKSHOPS SUMMARY PRE AND POST WORKSHOP EVALUATIONS GP PROGRAM MANAGERS					
		PRE		POST	
		Yes	%	Yes	%
<b>13A</b>	Sharing information	1	10	3	30
<b>13B</b>	Sharing experience		0	4	40
<b>13C</b>	Peer support	1	10	4	40
<b>13D</b>	Other (specify)	0			
<b>13DT</b>					
	Which aspect of your Division's program would you most like to improve?				
<b>14A</b>	patient participation	6	60	7	70
<b>14B</b>	GP participation	9	90	8	80
<b>14C</b>	targeting of high risk patient population	4	40	5	50
<b>14D</b>	service planning/provision	3	30	3	30
<b>14E</b>	program evaluation	5	50	3	30
<b>14F</b>	quality of care offered	1	10	3	30
<b>14G</b>	health outcomes of patients	5	50	6	60
<b>14H</b>	increased case detection	5	50	7	70
<b>14I</b>	patient compliance	5	50	4	40
<b>14J</b>	other (specify)	0		1	10
<b>14JT</b>					
	<b>POST-WORKSHOP ONLY</b>				
<b>12</b>	Did you think the workshop valuable in helping you better understand the NDDP Data Collation Project reports and results?				
	Yes			10	100
	No				
<b>13</b>	Which aspects of the workshop did you find most valuable?				
	networking			6	60
	analysing results - process			5	50
	analysing results – morning session			1	10
	analysing results – afternoon session			5	50

NDDP DIABETES QUALITY ASSURANCE WORKSHOPS SUMMARY PRE AND POST WORKSHOP EVALUATIONS GP PROGRAM MANAGERS					
		PRE		POST	
		Yes	%	Yes	%
	population health			2	20
	developing interventions			4	40
	other (specify)			1	10
<b>14</b>	We welcome your feedback. Please feel free to make any other comments about the workshop			4	40

**APPENDIX IV: Summary Pre and Post-Workshop Evaluation, Diabetes Program Officers**

<b>NDDP DIABETES QUALITY ASSURANCE WORKSHOPS SUMMARY PRE- and POST- WORKSHOP EVALUATION DIABETES PROGRAM OFFICERS</b>					
		<b>PRE</b>		<b>POST</b>	
		<b>Yes</b>	<b>%</b>	<b>Yes</b>	<b>%</b>
<b>1</b>	Did you attend the NDDP Conference held in August in Brisbane?	7	35		
<b>2</b>	Have you received a copy of the Data Collation Reports?	19	95		
<b>3</b>	If yes, have you looked at the reports since you received them?	17	85		
<b>4</b>	Have you accessed the reports on the CGPIS website?	0	0	11	61
<b>5</b>	Have/could you use the data from volume 2 (descriptive) for any purpose?	13	65	11	61
<b>5T</b>	If yes, what have you used the data for?	9	45		
<b>6</b>	Have/could you use the data from vol 3 or 5 ?	11	55	16	89
<b>6T</b>	If yes, what have you used the data for?	6	30		
<b>7</b>	Have/could you use the data from volume 4?	11	55	15	83
<b>7T</b>	If yes, what have you used the data for?	5	25		
	Which of the following data about other Divisions do you think might be useful to you?				
<b>8A</b>	demographic data (ATSI status, NESB status)	14	70	7	39
<b>8B</b>	program descriptive data	14	70	9	50
<b>8C</b>	services needed and services available data	12	60	8	44
<b>8D</b>	clinical indicators data - quality of care	18	90	10	56
<b>8E</b>	clinical indicators data – health outcomes	15	75	10	56
<b>8F</b>	achievements of other Divisions	17	85	12	67
<b>8G</b>	barriers limiting implementation of diabetes program	18	90	10	56
<b>8H</b>	advice from other Divisions	15	75	8	44
<b>8I</b>	GP program reach (proportion of GPs registering patients)	12	60	11	61
<b>8J</b>	Patient reach	14	70	9	50
<b>8K</b>	other (specify)	1	5	1	6
<b>8KT</b>		0	0		
	Have you discussed the results from your Division with anyone:				

**NDDP DIABETES QUALITY ASSURANCE WORKSHOPS  
SUMMARY PRE- and POST- WORKSHOP EVALUATION  
DIABETES PROGRAM OFFICERS**

		PRE		POST	
<b>9A</b>	within your Division	14	70	16	89
<b>9B</b>	outside your Division	7	35	5	28
	With whom have you discussed any of the results?				
<b>10A</b>	Board	5	25	10	56
<b>10B</b>	Division CEO	10	50	13	72
<b>10C</b>	GP or Program Reference Group	11	55	14	78
<b>10D</b>	Diabetes Program Officer	4	20	9	50
<b>10E</b>	other Program Officers (eg CVD Coordinator or Population Health Coordinator)	7	35	7	39
<b>10F</b>	other	1	5	3	17
<b>10FT</b>		1	5		
<b>11</b>	Have you communicated/discussed the results with other GPs in your Division?	10	50	16	89
	If not, why not?				
<b>11A</b>	Data too complex	1	5		
<b>11B</b>	too much data	1	5		
<b>11C</b>	suspect the quality/accuracy of the data	2	10	1	6
<b>11D</b>	don't know if GPs would be interested	0	0	1	6
<b>11E</b>	not sure which parts are of interest to GPs	1	5		
<b>11F</b>	not enough time	3	15		
<b>11G</b>	other (specify)	3	15		
<b>11GT</b>		3	15		
	Do you think the data may be of use in:				
<b>12A</b>	program planning	12	60	16	89
<b>12B</b>	service planning or provision	9	45	11	61
<b>12C</b>	program evaluation or review	14	70	11	61
<b>12D</b>	improving GP participation in diabetes program	12	60	12	67
<b>12E</b>	improving patient participation in diabetes program			7	39
<b>12F</b>	other (specify)	5	25		

**NDDP DIABETES QUALITY ASSURANCE WORKSHOPS  
SUMMARY PRE- and POST- WORKSHOP EVALUATION  
DIABETES PROGRAM OFFICERS**

		PRE		POST	
<b>12FT</b>		2	10		
<b>13</b>	Do you currently network with GP Program Managers from other Divisions?	15	75	18	100
	If yes, what do you find valuable about such networking?				
<b>13A</b>	Sharing information	14	70	17	94
<b>13B</b>	Sharing experience	14	70	17	94
<b>13C</b>	Peer support	11	55	14	78
<b>13D</b>	Other (specify)	2	10	11	61
<b>13DT</b>		2	10		
	Which aspect of your Division's program would you most like to improve?				
<b>14A</b>	patient participation	6	30	9	50
<b>14B</b>	GP participation	14	70	15	83
<b>14C</b>	targeting of high risk patient population	9	45	7	39
<b>14D</b>	service planning/provision	6	30	4	22
<b>14E</b>	program evaluation	8	40	7	39
<b>14F</b>	quality of care offered	6	30	5	28
<b>14G</b>	health outcomes of patients	8	40	10	56
<b>14H</b>	increased case detection	7	35	8	44
<b>14I</b>	patient compliance	4	20	3	17
<b>14J</b>	other (specify)	0	0		
<b>14JT</b>		0	0		
<b>15</b>	What do you expect to get out of the workshop?	13	65		
<b>POST WORKSHOP ONLY</b>					
<b>12</b>	Did you think the workshop valuable in helping you better understand the				
	NDDP Data Collation Project reports and results?				
	Yes			17	94

**NDDP DIABETES QUALITY ASSURANCE WORKSHOPS  
SUMMARY PRE- and POST- WORKSHOP EVALUATION  
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		PRE		POST	
	No				
<b>13</b>	Which aspects of the workshop did you find most valuable?				
	networking			16	89
	analysing results - process			10	56
	analysing results – morning session			7	39
	analysing results – afternoon session			9	50
	population health			5	28
	developing interventions			5	28
	other (specify)			0	0
<b>14</b>	We welcome your feedback. Please feel free to make any other comments about the workshop			7	39