

Aim: To increase the percentage of patients at Gillbrae Medical Practice with Type 1 or Type 2 Diabetes Mellitus aged between 50 and 60 years old that are prescribed statins to 75% to align with Scottish Government aspirations for diabetes care.

1 Understanding the Problem

Patients with diabetes have a 2-4 times higher risk of cardiovascular disease than patients without diabetes. Statins have been shown to reduce occurrence of cardiovascular events regardless of baseline cholesterol.

The SIGN guidelines recommend diabetics >40y.o. should be prescribed a statin. Evidence from SCI-DC has highlighted insufficient statin prescription in this patient group, and aims for 75% of patients >50y.o. with diabetes to be prescribed statins.

After engagement with a range of stakeholders, we chose to target 50-60 y.o. to maximise the impact of the project.

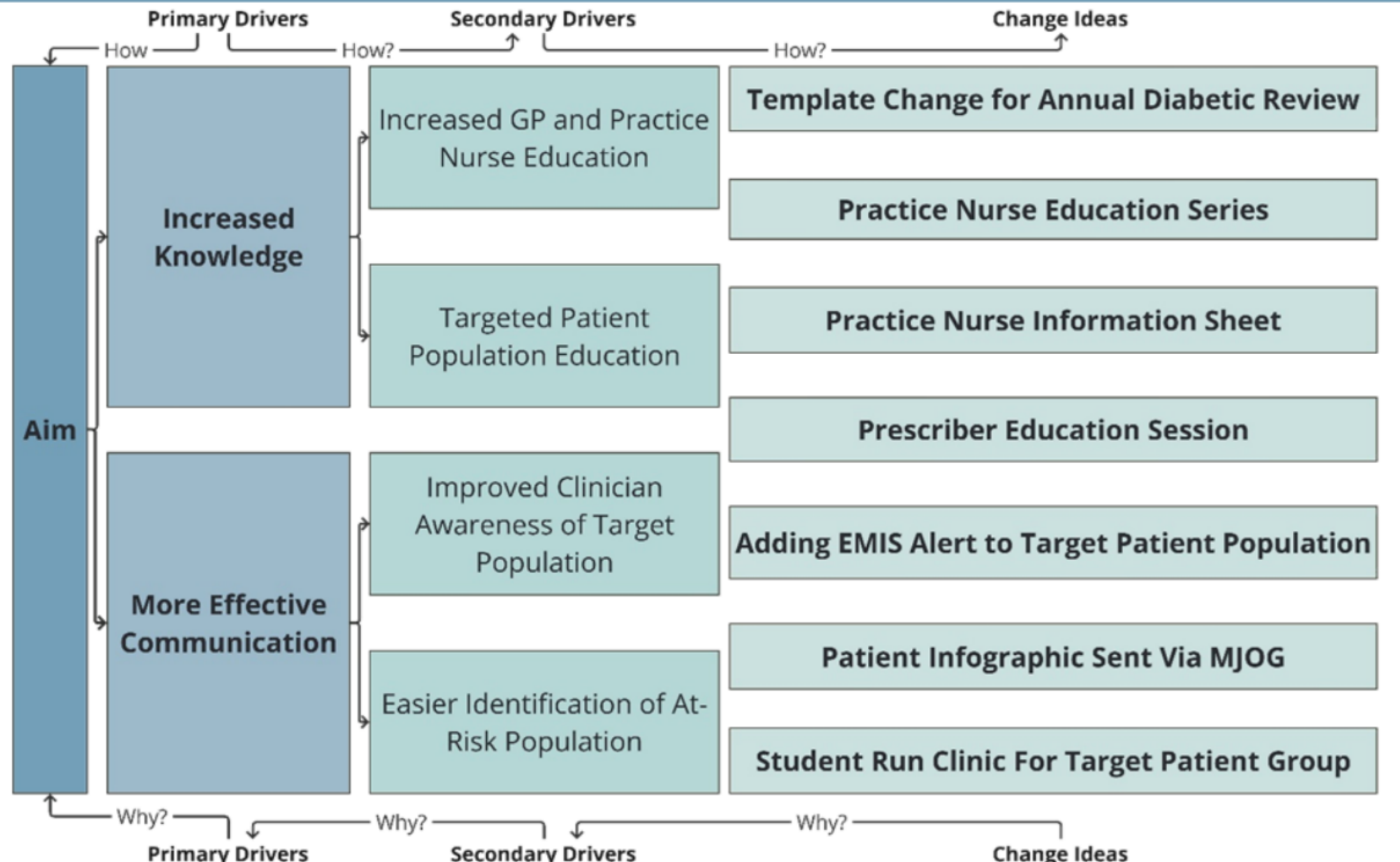


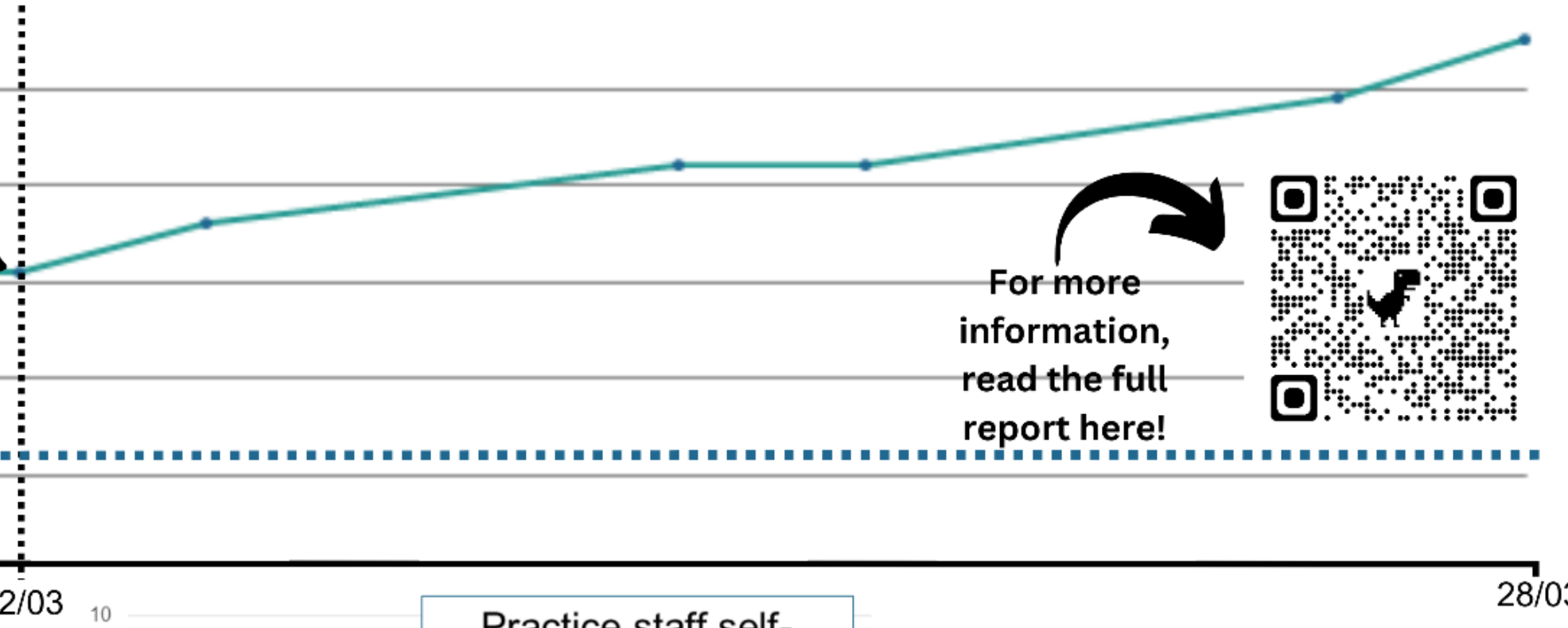
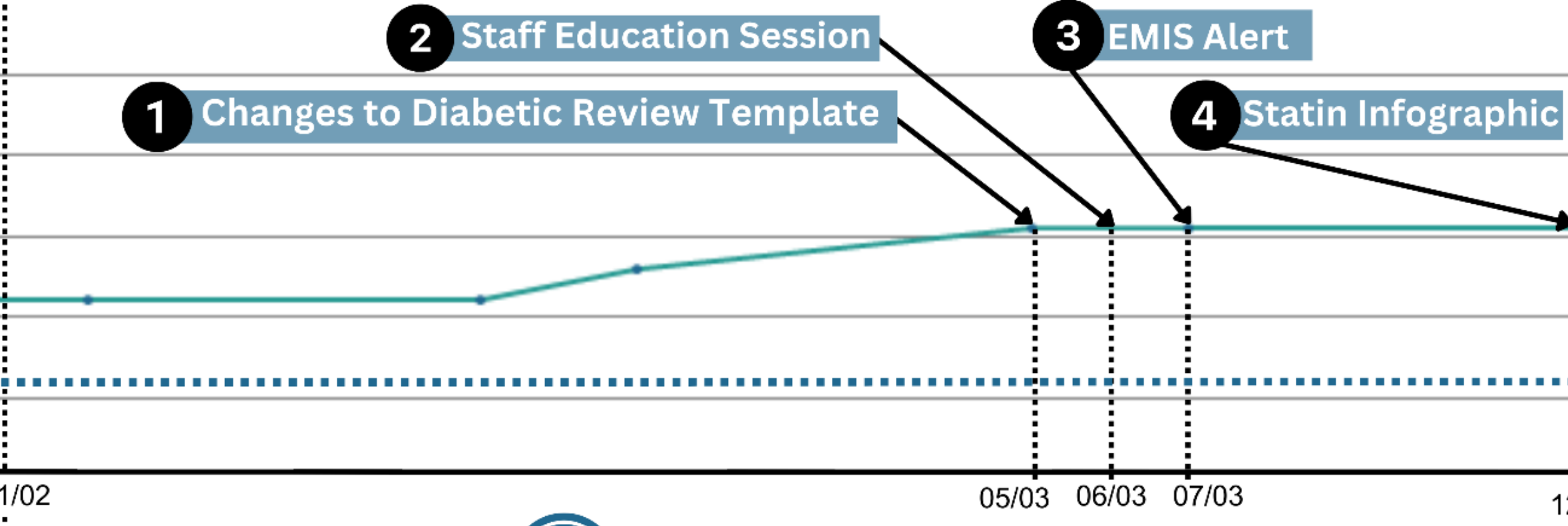
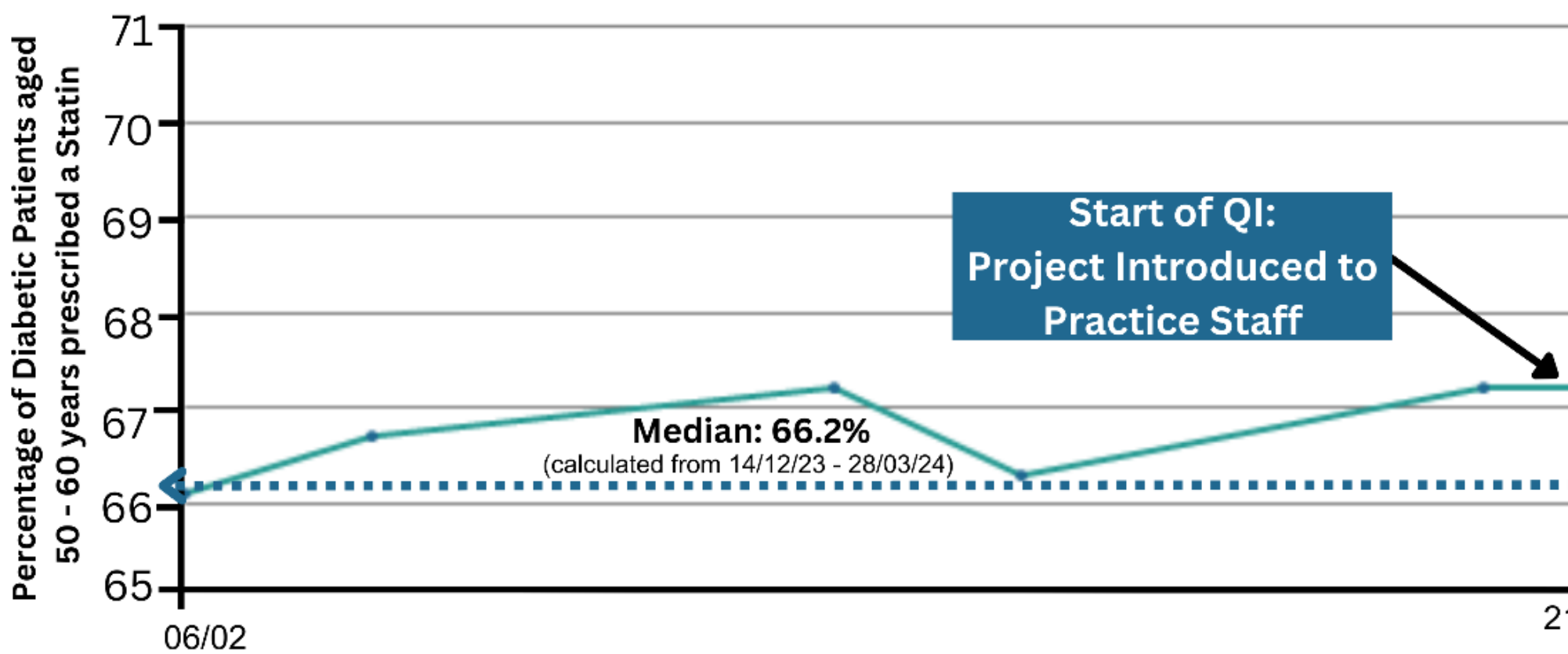
Figure 2: Driver Diagram highlighting drivers of change and change ideas for increased statin prescription

3 Measures and Conclusions

Aim Measure: Statin prescription in our target group increased from 67.2% to 70.5% during our project. We did not meet the 75% target set by the SCI Diabetes Collaboration.

Baseline data shows increasing statin prescription for our target patient group, and it is possible that the increase we saw over our project period was a continuation of this trend.

However, we have still managed to make some important process measure improvements to patient knowledge, staff knowledge and confidence (Fig. 4).



QI Toolkit:

We used a **process map** to identify choke points in the prescription of statins, a **fishbone diagram** (Fig. 1) to unpack factors leading to suboptimal prescribing, an **impact/influence chart** to highlight major stakeholders, a **driver diagram** (Fig. 2) to scaffold our change ideas, and refined these through stakeholder engaged **PDSA cycles** (Fig. 3).

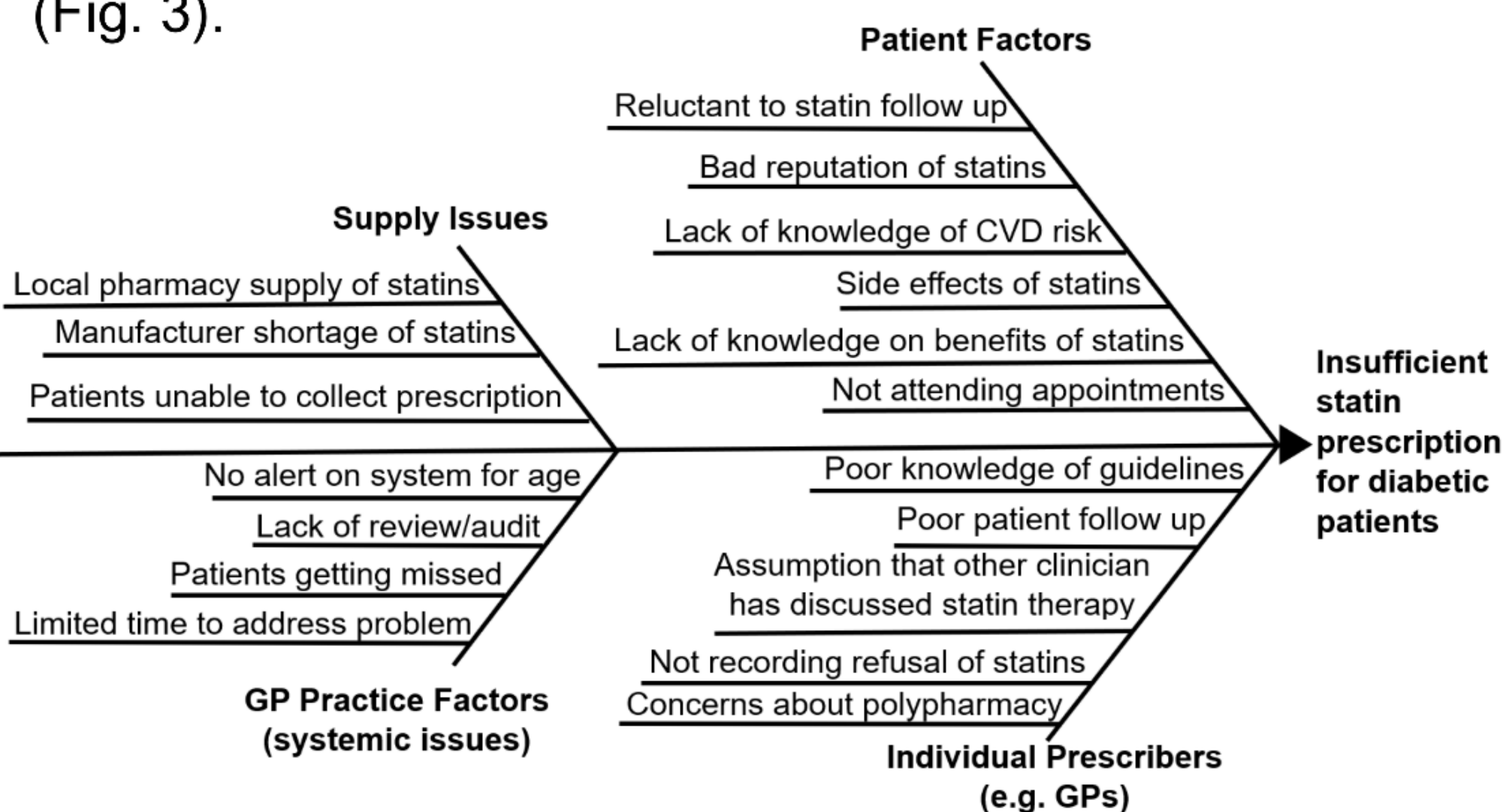


Figure 1: Fishbone Diagram

2 Tests of Change

- Added questions about statins to **Diabetic Review Template**.
- Ran a **Staff Education Session** on SIGN guidelines.
- Placed an **EMIS alert** on the notes of patients not prescribed statins.
- Sent out an **Infographic** on statins to patients via MJOG.

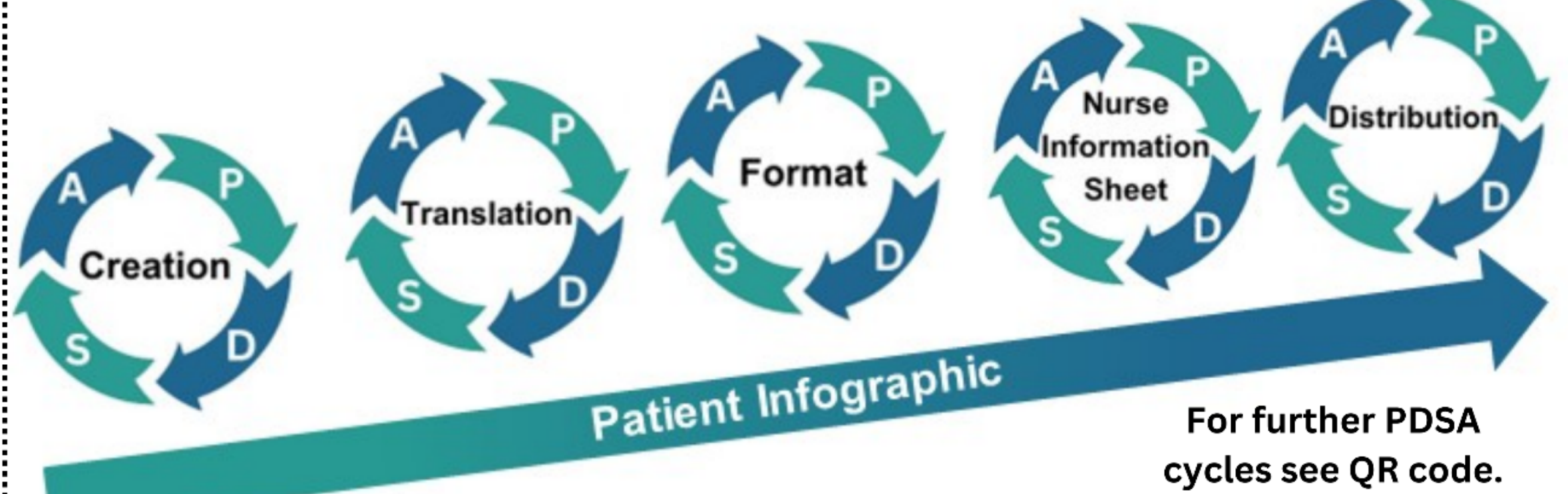
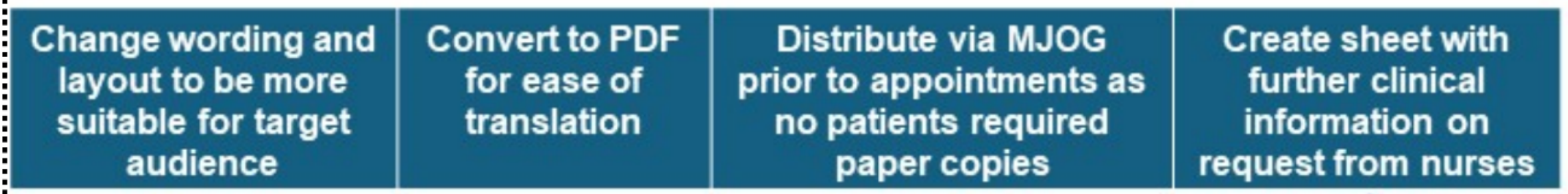


Figure 3: Infographic PDSA Ramps of Change

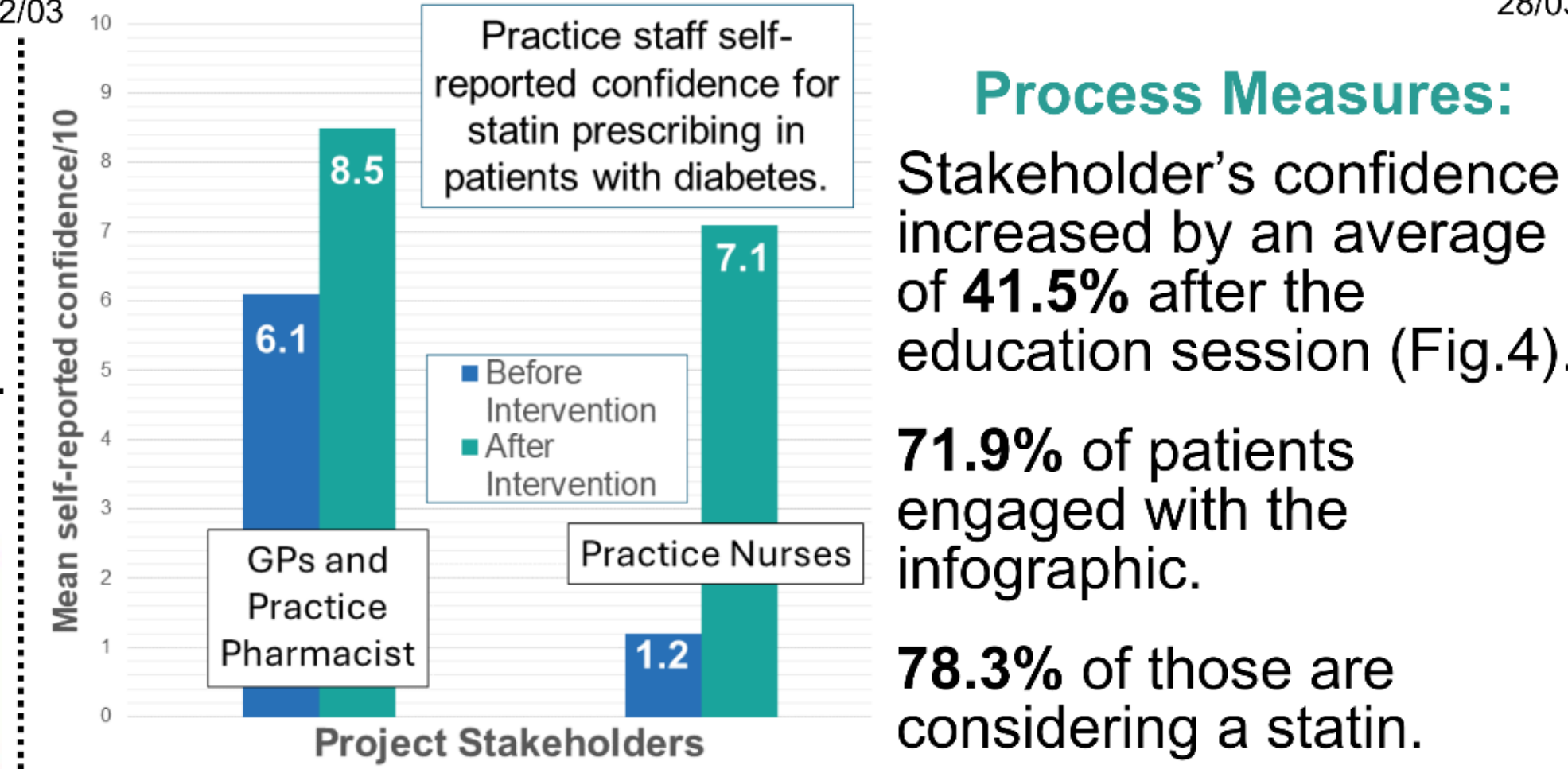


Figure 4: Confidence Levels of Project Stakeholders

Process Measures:

Stakeholder's confidence increased by an average of **41.5%** after the education session (Fig.4).

71.9% of patients engaged with the infographic.

78.3% of those are considering a statin.

Legacy:

"I wasn't aware about statins for diabetic patients but now I find it **easy to discuss** at every review." - Practice Nurse

"The education session means **I feel confident** that I am prescribing optimally for diabetic patients." - GP Partner

"This helps us to **grow and continue** the project to deliver quality care to all diabetic patients." - Practice Manager