PURPOSE
AIM: To meet the Quality Care Measure (QCM) criteria in DM management (ADA, 2018)
Outcome Measures:
- A documented annual eye examination for every patient with DM.
- Level of HbA1c levels in each patient with DM.

BACKGROUND
Poor vision impacts the quality of life due to impaired mobility, affects mental health and cognition, weakens employment and educational achievements (Hendrick, Gibson & Kulshreshtha, 2015).

QUALITY CARE MEASURE
The National Committee for Quality Assurance (NCQA) recommended an annual eye examination as a required Quality Care Measure (QCM) in patients with diabetes mellitus (DM) [Centers for Disease Control, 2017]. Visual changes such as diabetic retinopathy (DR) can occur when the glycosylated hemoglobin (HbA1c) exceeds 7.0% [American Diabetes Association (ADA), 2018].

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METHODS
Retrospective Data Period June 01, 2017 - March 31, 2018
Patients with a diagnosis of diabetes (HbA1c over 6.5%)
Demographics-age, gender, race, date of HbA1c, results HbA1c levels
Documentation of eye examination (yes/no)
Date of eye examination completed

RESULTS
Descriptive and inferential statistics used for results
N=129 male (n=93) female (n=36)
100% adherence in documentation of HbA1c results
- overall HbA1c mean of 7.41%
- HbA1c<7.0% (51%, n=66)
- HbA1c >7.0% (49%, n=63)
- Only 30% (n=39) patients had documented eye examination

DISCUSSION
HbA1c Results revealed
Rate of completed HbA1c N=129 mean HbA1c 7.41%
Rate of completed Eye examination n=39
Why is there a delay in getting examination done?
1. Missing documentation?
2. Patients not getting examination done?
3. Do new tactics have to be used in obtaining results?

IMPLICATIONS
Need reduction in HbA1c values for 49% of patients (desired value <7.0%)
No established flow sheet
- for HbA1c
- for eye exam completion

CONCLUSIONS
Chart reviews are helpful for QI programs in obtaining the HbA1c levels and eye examination results. Improving practice methods for documentation will give a better insight of adherence to recommendations made by the physician. Education to lower HbA1c at each visit will be beneficial. Ultimate goal is to provide better patient outcomes.

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