



**Service Priorities and Programmes
Electronic Presentations**

Convention ID: 1175

Submitting author: Dr Pui Sang Ignatius CHOY

Post title: Associate Consultant, Queen Elizabeth Hospital

**An audit on Chronic Disease Management (CDM) including Diabetes,
Hypertension and Hyperlipidemia in Diabetes at KCC GOPCs**

P S Choy, K H K Chan

*Department of Family Medicine and General Out-patient Clinic, Kowloon Central
Cluster*

Keywords:

Audit

Chronic Disease Management

Diabetes

Hypertension

Hyperlipidemia

KCC GOPCs

Introduction

Diabetes (DM), Hypertension (HT) and Hyperlipidemia are common chronic diseases that are seen at General Out-patient Clinics (GOPCs). The population-based approach can reduce the incidence of complications and associated morbidities and mortality (3) in chronic disease management.

Objectives

In order to attain such goal, the quality of care delivery is of utmost important. Our department decided to use a two-pronged approach, namely aligned education slides and audit on the quality of management of the three chronic diseases: Diabetes, Hypertension and lipid control in DM patients since 2013 (lipid control since 2014), aiming at improving the quality of management of the mentioned chronic diseases. This paper mainly focused on reporting the audit done in KCC GOPCs .

Methodology

After the promulgation on chronic disease management with a set of aligned slides in late 2013, the Service Quality Subcommittee of KCC GOPCs set up the criteria of the audit, based on the Key Performance Index (KPI) laid down by the Service Quality Subcommittee of COC(FM). The BP control should be

Result

For the period of 1Q2014 to 2Q2016, the number of staff audited ranged from around 20-40, depending on the period of audit. The results of the audit on hypertension ranged from 95-100%. The results for the audit on diabetes were 100%. For the lipid control in diabetic patients, the compliance rate ranged from 81-100%
The performance of the KPI at KCC GOPCs improved during the audit period. For hypertension, it improved from 83.5% to 89.7%. For diabetes, the HbA1c control rate improved from 65% to 68%. The lipid control rate improved from 48.7% to 75.2%. The continuation of the audit cycle is one of the key components in enhancing the quality of our service.