

***FINAL REPORT***

***ANDIAB2 2010***

Quality Assurance of Patient Practices  
and Diabetes Centre Care



***September 2010***

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## Quality Assurance of Patient Practices and Diabetes Centre Care

### Acknowledgement

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## FOREWORD

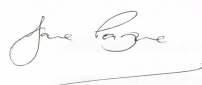
ANDIAB, the Australian National Diabetes Information Audit and Benchmarking exercise, provides an overview of the clinical status of people with diabetes attending specialist diabetes services. Participating Diabetes Centres and Endocrinologists can evaluate their data against that of their peers, enabling them to identify and implement mechanisms to improve outcomes amongst their patients. There has long been a perceived need for a more 'Education and Patient Self-care' focused initiative than the more 'Medically' focused ANDIAB – and this was piloted successfully in 2005 as ANDIAB2, but not run since. It had been seen as an appropriate initiative to run in the alternate years between ANDIAB surveys.

This document reports on ANDIAB2 2010, the second 'Education and Patient Self-care' focused diabetes data collection initiative conducted by the National Association of Diabetes Centres [NADC]. This year 27 data collection sites participated, collating de-identified data on over 2100 individuals attending participating specialist diabetes services during the months of May or June 2010, and providing clinical process and outcomes information. Hopefully the information contained in this report of pooled data from all sites will be used and disseminated as widely as possible.

The outcome is that ANDIAB2 has resulted in the collection of substantial data on diabetes across the country, providing a framework by which diabetes strategies could be developed. Without the dedication and personal commitment of A/Prof Jeff Flack this project would not be the exceptional resource it is today. We should also recognise the ongoing commitment of the ANDIAB project team.

The NADC is proud of the work ANDIAB and ANDIAB2 are doing and would like to thank all the dedicated multidisciplinary teams who have contributed to this report.

Finally, it is important to acknowledge the generous support of the Commonwealth Department of Health and Ageing who provided the funds necessary to undertake this project.



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