

Getting It Right First Time - Queensland

Diabetes

Data Measures Attributions List

October 2023

Section	Sub-section	#	Indicators	Page No.	
A	Patients	Patient Age	A.1	Distribution of Admissions with Diabetes, by Age Group	4
		Casemix and Complexity	A.2	The Average Charlson Comorbidity Index for Patients with Diabetes	5
		Socio-economic Status	A.3	Average Quintile of Index of Relative Socio-economic Advantage and Disadvantage (IRSAD)	6
			A.4	Percentage of Patients with Diabetes in the lowest (most disadvantaged) IRSAD Deprivation Quintile	7
		First Nations Status	A.5	Percentage of Patients with Diabetes who identified as being Aboriginal and Torres Strait Islander Peoples	8
		Burden of Disease	A.6	Percentage of Patients with Diabetes	9
		Distribution of Disease	A.7	The Percentage of Patients who have Type 1 and Type 2 Diabetes	10
B	Outpatients	Outpatients Services	B.1	Outpatients Services - For Discussion	11
C	Priority Area 1 - Type 1 Diabetes	DKA Admission Rates	C.1	Type 1 Diabetes Patients Admitted for Diabetic Ketoacidosis	12
		Re-admissions	C.2	Type 1 Diabetes - Re-admissions for Diabetic Ketoacidosis within 7 days	13
			C.3	Type 1 Diabetes - Re-admissions for Diabetic Ketoacidosis within 28 days	14
		ICU Re-admissions for DKA	C.4	Type 1 Diabetes - Diabetic Ketoacidosis Admissions with Re-admission to the Intensive Care Unit within the Hospital Stay	15
D	Priority Area 2 - Inpatient Care	Medication Incidents	D.1	Diabetic Medication Errors - Prescription - For Discussion	16
			D.2	Diabetic Medication Errors - Administration- For Discussion	17
		Diabetic Control	D.3	Percent of Good Diabetes Days	18
			D.4	Episodes of Hypoglycaemia	19
		Efficiencies	D.5	Diabetes Coded During Admission	20
			D.6	Average Length of Stay for Patients with vs without Diabetes	21
			D.7	Type 2 Diabetes Patients Admitted for Diabetic Ketoacidosis	22
			D.8	Patients with a Surgical Site Infection within 28 days of the Planned Procedure	23
		Surgical Site Infections	D.9	Total Hip Replacement, Primary Minor Complexity, Length of Stay with and without Diabetes	24
			D.10	Total Knee Replacement, Primary Minor Complexity, Length of Stay with and without Diabetes	25
			D.11	Surgical Site Infection at 28 days - Total Knee Replacement, Primary Minor Complexity with and without Diabetes	26
			D.12	Surgical Site Infection at 28 days - Total Hip Replacement, Primary Minor Complexity with and without Diabetes	27
		Re-admissions	D.13	Re-admissions within 7 days for Patients with Diabetes	28
		Hospital Acquired Complications	D.14	Percentage of In-Scope Hospital Acquired Complications	29
		Patient Reported Experience Measures	D.15	Inpatient Patient Experience Survey Response - 'Were you involved in the planning of your diabetes treatment whilst in hospital?'	30
			D.16	Inpatient Patient Experience Survey Response - 'Have you been allowed to make decisions on the control of your blood sugar management?'	31
E	Priority Area 3 - High Risk Diabetic Foot	Outcomes	E.1	High Risk Diabetic Foot Disease - Foot Amputation Percentage	32
		Efficiencies	E.2	High Risk Diabetic Foot Disease - Foot Amputation Length of Stay	33
		Complications	E.3	High Risk Diabetic Foot Disease - Foot Amputation Re-admissions within 7 days	34
F	Low Benefit Care	Low Benefit Care	F.1	Diabetes Low Benefit Care - For Discussion	35
G	Workforce	Workforce Size	G.1	Diabetes Workforce - For Discussion	36
H	Service Models	Service Models Relating to Diabetes Care	H.1	Service Models Relating to Diabetes Care - For Discussion	37
Appendix 1 - GIRFT-Q In-Scope Sites				38	
Appendix 2 - GIRFT-Q Out of Scope Sites				39	



Data Definitions	
Admissions	<p>A formal admission is the administrative process by which a hospital records the commencement of treatment and/or care and/or accommodation of a patient.</p> <p>In-scope admissions in this data pack are admitted patient episodes of care within Queensland public acute hospitals, with the following exclusions;</p> <p>(1) The care type was boarder, posthumous organ procurement or newborn without qualified (acute) days, or</p> <p>(2) Same-day chemotherapy (admission and separation on the same date and DRG v9.0 R63Z), or</p> <p>(3) Same-day haemodialysis (admission and separation on the same date and DRG v9.0 L61Z).</p> <p>In addition to public acute hospital admissions, admissions to Queensland private acute hospitals are used to identify diagnoses of diabetes (see "Diabetes patients", below) but not otherwise reported. Admissions for same-day chemotherapy and same-day haemodialysis are also used to identify diagnoses of diabetes.</p> <p>Source: Queensland Hospital Admitted Patient Data Collection (QHAPDC).</p>
Patients admitted with diabetes	A patient who is admitted to a facility for a condition other than diabetes but who has previously been admitted with or for diabetes, or who has a diabetes diagnosis.
Patients admitted for diabetes	A patient who is admitted to a facility for diabetes or a condition that is directly related to diabetes that affects its control or is complicated by diabetes.
Diabetes patients (type 1 and type 2)	<p>Patients with at least one admission during the current reporting quarter in any Queensland public or private acute hospitals, or another admission up to 3 years prior to the end of the current reporting quarter, in which an ICD-10-AM code of E10 (Type 1 diabetes mellitus) or E11 (Type 2 diabetes mellitus) was recorded as a principal or other diagnosis.</p> <p>Type 1 diabetes patients: As above, where at least one ICD-10-AM code so recorded was E10 (Type 1 diabetes mellitus).</p> <p>Type 2 diabetes patients: As above, where at least one ICD-10-AM code so recorded was E11 (Type 2 diabetes mellitus) and none were E10 (Type 1 diabetes mellitus).</p> <p>ICD-10-AM codes for other, unspecified and gestational diabetes are intentionally excluded from this definition.</p> <p><i>Note: When referring to 'diabetes patients' in this data pack, the reference is to a patient that has a diagnosis of diabetes, solely for the purpose of ensuring the most comprehensive presentation of data possible.</i></p>
Unique patients	Where unique patients are reported, each patient with at least one admission within a quarter and HHS/facility will be counted only once. Unique patient activity should not be summed across quarters or HHS/facilities, as this may result in patients being counted more than once.
DKA	<p>DKA was defined by the following ICD-10-AM codes;</p> <ul style="list-style-type: none"> • E10.11 (Type 1 diabetes mellitus with ketoacidosis, without coma) • E10.12 (Type 1 diabetes mellitus with ketoacidosis, with coma) • E10.13 (Type 1 diabetes mellitus with lactic acidosis, without coma) • E10.14 (Type 1 diabetes mellitus with lactic acidosis, with coma) • E10.15 (Type 1 diabetes mellitus with ketoacidosis, with lactic acidosis, without coma) • E10.16 (Type 1 diabetes mellitus with ketoacidosis, with lactic acidosis, with coma) • E11.11 (Type 2 diabetes mellitus with ketoacidosis, without coma) • E11.12 (Type 2 diabetes mellitus with ketoacidosis, with coma) • E11.13 (Type 2 diabetes mellitus with lactic acidosis, without coma) • E11.14 (Type 2 diabetes mellitus with lactic acidosis, with coma) • E11.15 (Type 2 diabetes mellitus with ketoacidosis, with lactic acidosis, without coma) • E11.16 (Type 2 diabetes mellitus with ketoacidosis, with lactic acidosis, with coma).
Foot amputation	<p>Foot amputations are defined by the following ACHI codes;</p> <ul style="list-style-type: none"> • 44338-00 Amputation of toe • 44358-00 Amputation of toe including metatarsal bone • 44361-00 Disarticulation through ankle • 44361-01 Amputation of ankle through malleoli of tibia and fibula • 44364-00 Mid-tarsal amputation • 44364-01 Trans-metatarsal amputation • 90557-00 Disarticulation through toe.
Planned procedures	<p>Admissions in Queensland public acute hospitals in which;</p> <p>1) The care type was either newborn with qualified (acute) days or acute, and</p> <p>2) The Australian Refined Diagnosis Related Group (AR-DRG; v9) was surgical, or the AR-DRG was one of L43A NEPHROLITHIASIS INTERVENTIONS, MAJOR COMPLEXITY or L43B NEPHROLITHIASIS INTERVENTIONS, MINOR COMPLEXITY, and</p> <p>3) The elective status was elective (i.e. care that, in the opinion of the treating clinician, is necessary and admission for which can be delayed for at least 24 hours), and</p> <p>4) The referral source was not planned emergency (i.e. the patient presented for planned Category E emergency surgery in a public hospital), and</p> <p>5) The patient, during the episode of care, was not removed from the elective surgery waiting list for the reason "Admitted and treated as an emergency patient for awaited procedure".</p> <p>Source: Queensland Hospital Admitted Patient Data Collection (QHAPDC).</p> <p>NB: Reported QHAPDC data only includes records for admitted patients. Patients who underwent a planned procedure as an outpatient are excluded.</p>
Surgical site infection	Admissions for surgical site infections are those in which ICD-10-AM code T81.4 (Wound infection following a procedure, not elsewhere classified) is recorded as a principal or other diagnosis.



Section A: Patients	
A.1 - Distribution of Admissions with Diabetes, by Age Group	
Description	The distribution of admissions with diabetes, by age group.
Data source	Queensland Hospital Admitted Patient Data Collection.
Calculation	For each age group: $\left(\frac{\text{Number of diabetes patients from specified age group}}{\text{Number of diabetes patients}} \right) * 100$
Counting unit	Unique patients.
Timeframe	Latest available four quarters of data.
Patient age range	Age groups: <ul style="list-style-type: none"> • 0-15 • 16-24 • 25-44 • 45-64 • 65-79 • 80+.
Inclusions	Diabetes patients (Type 1 and Type 2) admitted to Queensland public acute hospitals.
Exclusions	See "Data Definitions" for general exclusions.
Considerations for use	<ul style="list-style-type: none"> • "Data Definitions" defines unique patients and diabetes patients. • It is important to consider clinical frailty when assessing comorbidity, function, and cognition and making judgements around patients' vulnerability for developing increased dependency and/or mortality. • Patients' age is taken from their first admission in each quarter and HHS/facility.



Section A: Patients	
A.2 - The Average Charlson Comorbidity Index for Patients with Diabetes	
Description	The average Charlson Comorbidity Index for patients with diabetes.
Data source	Queensland Hospital Admitted Patient Data Collection.
Calculation	$\frac{\text{Sum of Charlson Comorbidity Index scores of diabetes patients}}{\text{Number of diabetes patients}}$
Counting unit	Unique patients.
Timeframe	Latest available four quarters of data.
Patient age range	All ages.
Inclusions	Diabetes patients (type 1 and type 2) admitted to Queensland public acute hospitals.
Exclusions	See "Data Definitions" for general exclusions.
Considerations for use	<ul style="list-style-type: none"> • "Data Definitions" defines unique patients and diabetes patients. • The Charlson Comorbidity Index (CCI) is a method of categorising comorbidities of patients based on the International Classification of Diseases (ICD) diagnosis codes found in administrative data, such as hospital abstracts data. Each comorbidity category has an associated weight (from 1 to 6), based on the adjusted risk of mortality, and the sum of all the weights results in a single comorbidity score for a patient. A score of zero indicates that no comorbidities were identified within the episode of care. The higher the score, the more likely the predicted outcome will result in mortality within 1 year of hospitalisation. Resource use was not an outcome used to validate the Index but is likely to be higher among patients with higher Charlson scores. • See Quan et al. (2011). Updating and Validating the Charlson Comorbidity Index and Score for Risk Adjustment in Hospital Discharge Abstracts Using Data From 6 Countries. American Journal of Epidemiology, 173(6), 676–682. • In these indicators, patients' Charlson score is taken from all conditions recorded in patients' admissions in Queensland public acute hospitals within the quarter.



Section A: Patients	
A.3 - Average Quintile of Index of Relative Socio-economic Advantage and Disadvantage (IRSAD)	
Description	The average Index of Relative Socio-economic Advantage and Disadvantage (IRSAD) for patients with type 1 and type 2 diabetes.
Data source	Queensland Hospital Admitted Patient Data Collection.
Calculation	$\frac{\text{Sum of IRSAD scores of diabetes patients}}{\text{Number of diabetes patients}}$
Counting unit	Unique patients.
Timeframe	Latest available four quarters of data.
Patient age range	All ages.
Inclusions	Diabetes patients (type 1 and type 2) admitted to Queensland public acute hospitals.
Exclusions	<ul style="list-style-type: none"> • Patients with an unknown Socio-Economic Index for Areas (SEIFA). • Patients residing outside of Queensland.
Considerations for use	<ul style="list-style-type: none"> • "Data Definitions" defines unique patients and diabetes patients. • The Index of Relative Socio-economic Advantage and Disadvantage (IRSAD) is a summary measure, developed by the Australian Bureau of Statistics (ABS) from census information, that provides information about the economic and social conditions of people and households within an area. IRSAD scores are based on the patient's residential address. A low IRSAD score indicates relatively greater disadvantage and a lack of advantage in general. • Patients' address and IRSAD quintile are taken from their first admission in each quarter and HHS/facility.



Section A: Patients	
A.4 - Percentage of Patients with Diabetes in the Lowest (most disadvantaged) IRSAD Deprivation Quintile	
Description	The percentage of diabetes patients residing in the most disadvantaged quintile of Index of Relative Socio-economic Advantage and Disadvantage.
Data source	Queensland Hospital Admitted Patient Data Collection.
Calculation	$\left(\frac{\text{Number of diabetes patients residing within IRSAD deciles 1 and 2 (quintile 1)}}{\text{Number of diabetes patients}} \right) * 100$
Counting unit	Unique patients.
Timeframe	Latest available four quarters of data.
Patient age range	All ages.
Inclusions	Diabetes patients (type 1 and type 2) admitted to Queensland public acute hospitals.
Exclusions	<ul style="list-style-type: none"> • Patients with an unknown Socio-Economic Index for Areas (SEIFA). • Patients residing outside of Queensland.
Considerations for use	<ul style="list-style-type: none"> • "Data Definitions" defines unique patients and diabetes patients. • The Index of Relative Socio-economic Advantage and Disadvantage (IRSAD) is a summary measure, developed by the Australian Bureau of Statistics (ABS) from census information, that provides information about the economic and social conditions of people and households within an area. IRSAD scores are based on the patient's residential address. • A low IRSAD score indicates relatively greater disadvantage and a lack of advantage in general. • Patients' address and IRSAD quintile are taken from their first admission in each quarter and HHS/facility.



Section A: Patients	
A.5 - Percentage of Patients with Diabetes who identified as being Aboriginal and Torres Strait Islander Peoples	
Description	The percentage of diabetes patients who identified as being Aboriginal and Torres Strait Islander Peoples.
Data source	Queensland Hospital Admitted Patient Data Collection.
Calculation	$\left(\frac{\text{Number of diabetes patients who identified as being Aboriginal and Torres Strait Islander peoples}}{\text{Number of diabetes patients}} \right) * 100$
Counting unit	Unique patients.
Timeframe	Latest available four quarters of data.
Patient age range	All ages.
Inclusions	Diabetes patients (type 1 and type 2) admitted to Queensland public acute hospitals.
Exclusions	See "Data Definitions" for general exclusions.
Considerations for use	<ul style="list-style-type: none"> • "Data Definitions" defines unique patients and diabetes patients. • Patients' Aboriginal and Torres Strait Islander status is taken from their first admission in each quarter and HHS/facility.



Section A: Patients	
A.6 - Percentage of Patients with Diabetes	
Description	The percentage of patients with diabetes.
Data source	Queensland Hospital Admitted Patient Data Collection.
Calculation	$\left(\frac{\text{Count of admitted patients with type 1 and type 2 diabetes}}{\text{Count of admitted patients}} \right) * 100$
Counting unit	Unique patients.
Timeframe	Latest available four quarters of data.
Patient age range	All ages.
Inclusions	Patients admitted to Queensland public acute hospitals.
Exclusions	None.
Considerations for use	"Data Definitions" defines unique patients and diabetes patients.



Section A: Patients	
A.7 - The Percentage of Patients who have Type 1 and Type 2 Diabetes	
Description	Of admitted patients, the percentage who have type 1 diabetes compared to the percentage who have type 2 diabetes.
Data source	Queensland Hospital Admitted Patient Data Collection.
Calculation	$\left(\frac{\text{Number of patients with type 1 diabetes}}{\text{Number of patients with type 1 and type 2 diabetes}} \right) * 100$ $\left(\frac{\text{Number of patients with type 2 diabetes}}{\text{Number of patients with type 1 and type 2 diabetes}} \right) * 100$
Counting unit	Unique patients.
Timeframe	Latest quarter from available four quarters of data.
Patient age range	All ages.
Inclusions	Diabetes patients (type 1 and type 2) admitted to Queensland public acute hospitals.
Exclusions	See "Data Definitions" for general exclusions.
Considerations for use	"Data Definitions" defines unique patients, type 1 diabetes patients and type 2 diabetes patients.



Section B: Outpatients	
B.1 - Outpatient Services - For Discussion	
Description	Placeholder for discussion. The relevant Corporate Clinic Code has not been in use so data is not currently available for this indicator. The CCC (255) will be reinstated from 1st July 2023 and so data on this will likely be available in future rounds of GIRFT Diabetes. Discussion around how this code is being applied.
Data source	N/A
Calculation	N/A
Counting unit	N/A
Timeframe	N/A
Patient age range	N/A
Inclusions	N/A
Exclusions	N/A
Considerations for use	N/A



Section C: Diabetes Priority Area 1 - Type 1 Diabetes	
C.1 - Type 1 Diabetes Patients Admitted for Diabetic Ketoacidosis (DKA)	
Description	The proportion of type 1 diabetes patients admitted with a principal diagnosis of DKA.
Data source	Queensland Hospital Admitted Patient Data Collection.
Calculation	$\left(\frac{\text{Number of type 1 diabetes patients admitted with a principal diagnosis of DKA at a Queensland public hospital within the quarter}}{\text{Number of type 1 diabetes patients}} \right) * 100$
Counting unit	Unique patients.
Timeframe	Latest available four quarters of data.
Patient age range	All ages.
Inclusions	Diabetes patients (type 1 and type 2) admitted to Queensland public acute hospitals.
Exclusions	See "Data Definitions" for general exclusions.
Considerations for use	<ul style="list-style-type: none"> • "Data Definitions" defines unique patients, type 1 diabetes patients and DKA. • A patient is considered admitted for DKA if they have at least one admission with a principal diagnosis of DKA within that quarter and HHS/facility.



Section C: Diabetes Priority Area 1 - Type 1 Diabetes	
C.2 - Type 1 Diabetes - Re-admissions for Diabetic Ketoacidosis (DKA) within 7 days	
Description	The rate of acute readmissions for DKA to any public hospital within 7 days of discharge from admissions of type 1 diabetes patients. Expressed as a rate of readmissions per 1,000 index admissions.
Data source	Queensland Hospital Admitted Patient Data Collection; Queensland Master Linkage File.
Calculation	$\left(\frac{\text{Count of acute readmissions for DKA within 7 days of an index admission}}{\text{Count of index admissions (type 1 diabetes patients)}} \right) * 1,000$
Counting unit	Admissions (but see note 2 in considerations for use).
Timeframe	Latest available four quarters of data.
Patient age range	All ages.
Inclusions	<p>Index admissions:</p> <ul style="list-style-type: none"> • the admission was within a Queensland public acute hospital, and • the patient had type 1 diabetes, and • the care type was acute, and • the state of usual residence was recorded as Queensland, and • the patient was not discharged against medical advice, and • the admission was not within 7 days of a previous index admission. <p>Readmissions:</p> <ul style="list-style-type: none"> • the admission was within a Queensland public acute hospital, and • the admission was within 7 days of separation from an index admission, and • the admission had a principal diagnosis of DKA, and • the admission was for acute care, and • a public chargeable status was recorded at some point during the admission, and • the admission was not for dialysis or chemotherapy (DRG v9.0 of L61Z Haemodialysis or R63Z Chemotherapy), and • the admission was not for pregnancy or childbirth (ICD-10-AM principal diagnosis of O00-O99).
Exclusions	See "Data Definitions" for general exclusions.
Considerations for use	<p>"Data Definitions" defines type 1 diabetes patients and DKA.</p> <p>Both index admissions and readmissions were grouped with adjacent admissions from the same person, where those admissions formed a single care event (e.g. transfers and episode changes). This prevents, for instance, an episode change from an index event being considered a readmission, or a single care event being counted as multiple readmissions.</p> <p>A single index admission may result in multiple readmissions where multiple readmissions occur within 7 days of the index admission.</p>



Section C: Diabetes Priority Area 1 - Type 1 Diabetes	
C.3 - Type 1 Diabetes - Re-admissions for Diabetic Ketoacidosis (DKA) within 28 days	
Description	The rate of acute readmissions for DKA to any public hospital within 28 days of discharge from admissions of type 1 diabetes patients. Expressed as a rate of readmissions per 1,000 index admissions.
Data source	Queensland Hospital Admitted Patient Data Collection; Queensland Master Linkage File.
Calculation	$\left(\frac{\text{Count of acute readmissions for DKA within 28 days of an index admission}}{\text{Count of index admissions (type 1 diabetes patients)}} \right)^*$
Counting unit	Admissions (but see note 2 in considerations for use).
Timeframe	Latest available four quarters of data.
Patient age range	All ages.
Inclusions	<p>Index admissions:</p> <ul style="list-style-type: none"> • the admission was within a Queensland public acute hospital, and • the patient had type 1 diabetes, and • the care type was acute, and • the state of usual residence was recorded as Queensland, and • the patient was not discharged against medical advice, and • the admission was not within 28 days of a previous index admission. <p>Readmissions:</p> <ul style="list-style-type: none"> • the admission was within a Queensland public acute hospital, and • the admission was within 28 days of separation from an index admission, and • the admission had a principal diagnosis of DKA, and • the admission was for acute care, and • a public chargeable status was recorded at some point during the admission, and • the admission was not for dialysis or chemotherapy (DRG v9.0 of L61Z Haemodialysis or R63Z Chemotherapy), and • the admission was not for pregnancy or childbirth (ICD-10-AM principal diagnosis of O00-O99).
Exclusions	See "Data Definitions" for general exclusions.
Considerations for use	<p>"Data Definitions" defines type 1 diabetes patients and DKA.</p> <p>Both index admissions and readmissions were grouped with adjacent admissions from the same person, where those admissions formed a single care event (e.g. transfers and episode changes). This prevents, for instance, an episode change from an index event being considered a readmission, or a single care event being counted as multiple readmissions.</p> <p>A single index admission may result in multiple readmissions where multiple readmissions occur within 28 days of the index admission.</p>



Section C: Diabetes Priority Area 1 - Type 1 Diabetes	
C.4 - Type 1 Diabetes - Diabetic Ketoacidosis Admissions with Re-admission to the Intensive Care Unit within the Hospital Stay	
Description	Of hospitals stays of type 1 diabetes patients for DKA which included admission to an intensive care unit, the percentage of these in which the patient was subsequently discharged from and readmitted to an intensive care unit.
Data source	Queensland Hospital Admitted Patient Data Collection.
Calculation	$\left(\frac{\text{Count of hospital stays of type 1 diabetes patients for DKA in which the patient was admitted to ICU and subsequently readmitted to ICU within the same hospital stay}}{\text{Count of hospital stays of type 1 diabetes patients for DKA in which the patient was admitted to ICU}} \right) * 100$
Counting unit	Admissions (but see notes 3 and 4 in considerations for use).
Timeframe	Latest available four quarters of data.
Patient age range	All ages.
Inclusions	Hospital stays of type 1 diabetes patients within a Queensland public acute hospital in which DKA was the principal diagnosis and the patient was admitted to an ICU at least once.
Exclusions	None.
Considerations for use	<p>"Data Definitions" defines type 1 diabetes patients and admissions for DKA.</p> <p>Admission to ICU was defined by at least one admission to a ward with a standard ward code of ICU4, ICU5, ICU6, CIC4, CIC5 or CIC6 (Intensive Care Level 4-6 or Children's Intensive Care Level 4-6).</p> <p>Readmission to ICU was defined by discharge from ICU to a non-ICU ward and subsequent readmission to an ICU ward, either within the same episode of care or within subsequent episode/s of care at the same hospital linked by episode changes/statistical discharges.</p> <p>The term <i>hospital stay</i> refers to individual admissions as well as situations where multiple admissions at the same hospital have been linked by episode changes/statistical discharges.</p>



Section D: Diabetes Priority Area 2 - Inpatient Care	
D.1 - Diabetic Medication Errors - Prescription - For Discussion	
Description	Placeholder for discussion.
Data source	N/A
Calculation	N/A
Counting unit	N/A
Timeframe	N/A
Patient age range	N/A
Inclusions	N/A
Exclusions	N/A
Considerations for use	N/A



Section D: Diabetes Priority Area 2 - Inpatient Care	
D.2 - Diabetic Medication Errors - Administration - For Discussion	
Description	Placeholder for discussion.
Data source	N/A
Calculation	N/A
Counting unit	N/A
Timeframe	N/A
Patient age range	N/A
Inclusions	N/A
Exclusions	N/A
Considerations for use	N/A



Section D: Diabetes Priority Area 2 - Inpatient Care	
D.3 - Percent of Good Diabetes Days	
Description	The percent of good diabetes days.
Data source	Queensland Inpatient Diabetes Survey Report 2023 (data from the Bedside Audit - 'glycaemic control').
Calculation	$\left(\frac{\text{Number of good diabetes days}}{5 \text{ days}} \right) * 100$
Counting unit	Day (24 hours).
Timeframe	2023
Patient age range	N/A
Inclusions	N/A
Exclusions	N/A
Considerations for use	<ul style="list-style-type: none"> • The QuIDS 2023 report defines a 'good diabetes day' as: <i>a day in which the patient had appropriate blood glucose monitoring, no hypoglycaemia and no more than one blood glucose level above the target range (4-12mmo/L).</i> • The data provided is sample data only aimed to be representative of the population.



Section D: Diabetes Priority Area 2 - Inpatient Care	
D.4 - Episodes of Hypoglycaemia (Blood Glucose Level <4.0 mmol/L)	
Description	Episodes (yes / no) of hypoglycaemia (blood glucose level <4.0 mmol/L) in the last five days.
Data source	Queensland Inpatient Diabetes Survey Report 2021 (data from the Bedside Audit - 'glycaemic control').
Calculation	Count of yes/no episodes.
Counting unit	Episodes.
Timeframe	2019-2021.
Patient age range	N/A
Inclusions	N/A
Exclusions	N/A
Considerations for use	<ul style="list-style-type: none"> The data provided is sample data only aimed to be representative of the population.



Section D: Diabetes Priority Area 2 - Inpatient Care	
D.5 - Diabetes Coded During Admission	
Description	The percentage of admissions of diabetes patients in which diabetes was recorded within the admission.
Data source	Queensland Hospital Admitted Patient Data Collection; Queensland Master Linkage File.
Calculation	$\left(\frac{\text{Number of admissions of diabetes patients in which diabetes was recorded}}{\text{Number of admissions of diabetes patients}} \right) * 100$
Counting unit	Admissions.
Timeframe	Latest available four quarters of data.
Patient age range	All ages.
Inclusions	Diabetes patients admitted to Queensland public acute hospitals.
Exclusions	<ul style="list-style-type: none"> • The first admission in which each patient is identified as diabetic. • See "Data Definitions" for general exclusions.
Considerations for use	Under Australian Coding Standard 0401, diabetes mellitus should always be coded when documented. Despite this, patients with multiple episodes often have diabetes recorded in only some of these, suggesting that diabetes is not always coded when present. For this reason, diabetes patients in these indicators were defined using diagnoses in all Queensland public acute hospitals, including prior to the current quarter (see "Data Definitions").



Section D: Diabetes Priority Area 2 - Inpatient Care	
D.6 - Average Length of Stay for Patients with vs without Diabetes	
Description	A comparison of the average length of stay for patients with diabetes vs the average length of stay for patients without diabetes.
Data source	Queensland Hospital Admitted Patient Data Collection.
Calculation	$\left(\frac{\text{Sum of admitted length of stay of admissions of diabetes patients}}{\text{Number of admissions of diabetes patients}} \right)$ $\left(\frac{\text{Sum of admitted length of stay of admissions of non-diabetes patients}}{\text{Number of admissions of non-diabetes patients}} \right)$
Counting unit	Admissions.
Timeframe	Latest available four quarters of data.
Patient age range	All ages.
Inclusions	Patients admitted to Queensland public acute hospitals.
Exclusions	See "Data Definitions" for general exclusions.
Considerations for use	"Data Definitions" defines diabetes patients.



Section D: Diabetes Priority Area 2 - Inpatient Care	
D.7 - Type 2 Diabetes Patients Admitted for Diabetic Ketoacidosis (DKA)	
Description	The proportion of type 2 diabetes patients admitted for DKA.
Data source	Queensland Hospital Admitted Patient Data Collection.
Calculation	$\left(\frac{\text{Number of type 2 diabetes patients admitted with a principal diagnosis of DKA at a Queensland public hospital within the quarter}}{\text{Number of type 2 diabetes patients}} \right) * 100$
Counting unit	Unique patients.
Timeframe	Latest available four quarters of data.
Patient age range	All ages.
Inclusions	Type 2 diabetes patients admitted to Queensland public acute hospitals.
Exclusions	See "Data Definitions" for general exclusions.
Considerations for use	<ul style="list-style-type: none"> • "Data Definitions" defines unique patients, type 2 diabetes patients and DKA. • A patient is considered admitted for DKA if they have at least one admission with a principal diagnosis of DKA within that quarter and HHS/facility.



Section D: Diabetes Priority Area 2 - Inpatient Care	
D.8 - Patients with a Surgical Site Infection within 28 days of the Planned Procedure	
Description	<p>Comparison between diabetes patients and patients without diabetes: The rate of acute readmissions with surgical site infections to any public hospital within 28 days of discharge from planned procedure admissions. Expressed as a rate of readmissions per 1,000 index admissions.</p> <p>A comparison of the rate of patients with type 1 and type 2 diabetes with a Surgical Site Infection within 28 days of a planned procedure vs the rate of patients without Diabetes with a Surgical Site Infection within 28 days of a planned procedure.</p>
Data source	Queensland Hospital Admitted Patient Data Collection; Queensland Master Linkage File.
Calculation	<p>Diabetes patients:</p> $\left(\frac{\text{Count of readmissions for SSI within 28 days of an index admission}}{\text{Count of index admissions (planned procedures)}} \right) * 1,000$ <p>Patients without diabetes:</p> $\left(\frac{\text{Count of readmissions for SSI within 28 days of an index admission}}{\text{Count of index admissions (planned procedures)}} \right) * 1,000$
Counting unit	Admissions (but see note 2 in considerations for use).
Timeframe	Latest available four quarters of data.
Patient age range	All ages.
Inclusions	<p>Index admissions:</p> <ul style="list-style-type: none"> • the admission was within a Queensland public acute hospital, and • the patient had diabetes, and • the admission was for a planned procedure, and • the state of usual residence was recorded as Queensland, and • the patient was not discharged against medical advice, and • the admission was not within 28 days of a previous index admission. <p>Readmissions:</p> <ul style="list-style-type: none"> • the admission was within a Queensland public acute hospital, and • the admission was within 28 days of separation from an index admission, and • a surgical site infection was recorded during the admission, and • the admission was for acute care, and • a public chargeable status was recorded at some point during the admission, and • the admission was not for dialysis or chemotherapy (DRG v9.0 of L61Z Haemodialysis or R63Z Chemotherapy), and • the admission was not for pregnancy or childbirth (ICD-10-AM principal diagnosis of O00-O99).
Exclusions	None.
Considerations for use	<p>"Data Definitions" defines diabetes patients, planned procedures and surgical site infections.</p> <p>Both index admissions and readmissions were grouped with adjacent admissions from the same person, where those admissions formed a single care event (e.g. transfers and episode changes). This prevents, for instance, an episode change from an index event being considered a readmission, or a single care event being counted as multiple readmissions.</p> <p>A single index admission may result in multiple readmissions where multiple readmissions occur within 28 days of the index admission.</p>



Section D: Diabetes Priority Area 2 - Inpatient Care	
D.9 - Total Hip Replacement, Primary Minor Complexity, Length of Stay with and without Diabetes	
Description	A comparison of the average length of stay for patients who have a Total Hip Replacement (minor complexity) with type 1 or type 2 diabetes vs the average length of stay for patients who have a Total Hip Replacement (minor complexity) without type 1 or type 2 diabetes.
Data source	Queensland Hospital Admitted Patient Data Collection.
Calculation	$\left(\frac{\text{Sum of admitted length of stay of admissions of diabetes patients for total hip replacement, minor complexity}}{\text{Number of admissions of diabetes patients for total hip replacement, minor complexity}} \right)$ $\left(\frac{\text{Sum of admitted length of stay of admissions of non-diabetes patients for total hip replacement, minor complexity}}{\text{Number of admissions of non-diabetes patients for total hip replacement, minor complexity}} \right)$
Counting unit	Admissions.
Timeframe	Latest available four quarters of data.
Patient age range	Adults only - 18+.
Inclusions	Diabetes patients admitted to Queensland public acute hospitals with a planned procedure and a DRG (v9.0) of I33B Hip Replacement for non trauma, Minor Complexity.
Exclusions	See "Data Definitions" for general exclusions.
Considerations for use	Data Definitions defines diabetes patients and planned procedures.



Section D: Diabetes Priority Area 2 - Inpatient Care	
D.10 - Total Knee Replacement, Primary Minor Complexity, Length of Stay with and without Diabetes	
Description	A comparison of the average length of stay for patients who have a Total Knee Replacement (minor complexity) with type 1 or type 2 diabetes vs the average length of stay for patients who have a Total Knee Replacement (minor complexity) without type 1 or type 2 diabetes.
Data source	Queensland Hospital Admitted Patient Data Collection.
Calculation	$\left(\frac{\text{Sum of admitted length of stay of admissions of diabetes patients for total knee replacement, minor complexity}}{\text{Number of admissions of diabetes patients for total knee replacement, minor complexity}} \right)$ $\left(\frac{\text{Sum of admitted length of stay of admissions of non-diabetes patients for total knee replacement, minor complexity}}{\text{Number of admissions of non-diabetes patients for total knee replacement, minor complexity}} \right)$
Counting unit	Admissions.
Timeframe	Latest available four quarters of data.
Patient age range	Adults only - 18+.
Inclusions	Diabetes patients admitted to Queensland public acute hospitals with a planned procedure and a DRG (v9.0) of I04B Knee Replacement, Minor Complexity.
Exclusions	See "Data Definitions" for general exclusions.
Considerations for use	Data Definitions defines diabetes patients and planned procedures.



Section D: Diabetes Priority Area 2 - Inpatient Care	
D.11 - Surgical Site Infection at 28 days - Total Knee Replacement, Primary Minor Complexity with and without Diabetes	
Description	<p>Comparison between diabetes patients and patients without diabetes: The rate of acute readmissions with surgical site infections to any public hospital within 28 days of discharge from planned procedure admissions for knee replacement, minor complexity. Expressed as a rate of readmissions per 1,000 index admissions.</p> <p>A comparison of the number of surgical site infections at 28 days between patients with and without Diabetes following a Total Knee Replacement, minor complexity.</p>
Data source	Queensland Hospital Admitted Patient Data Collection; Queensland Master Linkage File.
Calculation	<p>Diabetes patients:</p> $\left(\frac{\text{Count of readmissions for SSI within 28 days of an index admission}}{\text{Count of index admissions (knee replacement, minor complexity)}} \right) * 1,000$ <p>Patients without diabetes:</p> $\left(\frac{\text{Count of readmissions for SSI within 28 days of an index admission}}{\text{Count of index admissions (knee replacement, minor complexity)}} \right) * 1,000$
Counting unit	Admissions (but see note 2 in Considerations for use).
Timeframe	Latest available four quarters of data.
Patient age range	Adults only - 18+.
Inclusions	<p>Index admissions:</p> <ul style="list-style-type: none"> • the admission was within a Queensland public acute hospital, and • the DRG v9.0 was I04B (knee replacement, minor complexity), and • age of admission was recorded as 18 or above, and • the admission was for a planned procedure, and • the admission was for acute care, and • the state of usual residence was recorded as Queensland, and • the patient was not discharged against medical advice, and • the admission was not within 28 days of a previous index admission. <p>Readmissions:</p> <ul style="list-style-type: none"> • the admission was within a Queensland public acute hospital, and • the admission was within 28 days of separation from an index admission, and • a surgical site infection was recorded during the admission, and • the admission was for acute care, and • a public chargeable status was recorded at some point during the admission, and • the admission was not for dialysis or chemotherapy (DRG v9.0 of L61Z Haemodialysis or R63Z Chemotherapy), and • the admission was not for pregnancy or childbirth (ICD-10-AM principal diagnosis of O00-O99).
Exclusions	See "Data Definitions" for general exclusions.
Considerations for use	<p>"Data Definitions" defines diabetes patients and surgical site infections.</p> <p>Both index admissions and readmissions were grouped with adjacent admissions from the same person, where those admissions formed a single care event (e.g. transfers and episode changes). This prevents, for instance, an episode change from an index event being considered a readmission, or a single care event being counted as multiple readmissions.</p> <p>A single index admission may result in multiple readmissions where multiple readmissions occur within 28 days of the index admission.</p>



Section D: Diabetes Priority Area 2 - Inpatient Care	
D.12 - Surgical Site Infection at 28 days - Total Hip Replacement, Primary Minor Complexity with and without Diabetes	
Description	<p>Comparison between diabetes patients and patients without diabetes: The rate of acute readmissions with surgical site infections to any public hospital within 28 days of discharge from planned procedure admissions for hip replacement, minor complexity. Expressed as a rate of readmissions per 1,000 index admissions.</p> <p>A comparison of the number of surgical site infections at 28 days between patients with and without diabetes following a Total hip Replacement, minor complexity .</p>
Data source	Queensland Hospital Admitted Patient Data Collection; Queensland Master Linkage File.
Calculation	<p>Diabetes patients:</p> $\left(\frac{\text{Count of readmissions for SSI within 28 days of an index admission}}{\text{Count of index admissions (hip replacement, minor complexity)}} \right) * 1,000$ <p>Patients without diabetes:</p> $\left(\frac{\text{Count of readmissions for SSI within 28 days of an index admission}}{\text{Count of index admissions (hip replacement, minor complexity)}} \right) * 1,000$
Counting unit	Admissions (but see note 2 in Considerations for use).
Timeframe	Latest available four quarters of data.
Patient age range	Adults only - 18+.
Inclusions	<p>Index admissions:</p> <ul style="list-style-type: none"> • the admission was within a Queensland public acute hospital, and • the DRG V9 was I33B (Hip replacement for non-trauma, minor complexity), and • age of admission was recorded as 18 or above, and • the admission was for a planned procedure, and • the admission was for acute care, and • the state of usual residence was recorded as Queensland, and • the patient was not discharged against medical advice, and • the admission was not within 28 days of a previous index admission. <p>Readmissions:</p> <ul style="list-style-type: none"> • the admission was within a Queensland public acute hospital, and • the admission was within 28 days of separation from an index admission, and • a surgical site infection was recorded during the admission, and • the admission was for acute care, and • a public chargeable status was recorded at some point during the admission, and • the admission was not for dialysis or chemotherapy (DRG v9.0 of L61Z Haemodialysis or R63Z Chemotherapy), and • the admission was not for pregnancy or childbirth (ICD-10-AM principal diagnosis of O00-O99).
Exclusions	See "Data Definitions" for general exclusions.
Considerations for use	<p>"Data Definitions" defines diabetes patients and surgical site infections.</p> <p>Both index admissions and readmissions were grouped with adjacent admissions from the same person, where those admissions formed a single care event (e.g. transfers and episode changes). This prevents, for instance, an episode change from an index event being considered a readmission, or a single care event being counted as multiple readmissions.</p> <p>A single index admission may result in multiple readmissions where multiple readmissions occur within 28 days of the index admission.</p>



Section D: Diabetes Priority Area 2 - Inpatient Care	
D.13 - Re-admissions within 7 days for Patients with Diabetes	
Description	The rate of all-cause, acute readmissions to any public hospital within 7 days of discharge from admissions of diabetes patients. Expressed as a rate of readmissions per 1,000 index admissions.
Data source	Queensland Hospital Admitted Patient Data Collection; Queensland Master Linkage File.
Calculation	$\left(\frac{\text{Count of acute readmissions within 7 days of an index admission}}{\text{Count of index admissions (diabetes patients)}} \right) * 1,000$
Counting unit	Admissions (but see note 2 in considerations for use).
Timeframe	Latest available four quarters of data.
Patient age range	All ages.
Inclusions	<p>Index admissions:</p> <ul style="list-style-type: none"> • the admission was within a Queensland public acute hospital, and • the patient had type 1 or type 2 diabetes, and • the admission was for acute care, and • the state of usual residence was recorded as Queensland, and • the patient was not discharged against medical advice, and • the admission was not within 7 days of a previous index admission. <p>Readmissions:</p> <ul style="list-style-type: none"> • the admission was within a Queensland public acute hospital, and • the admission was within 7 days of separation from an index admission, and • the admission was for acute care, and • a public chargeable status was recorded at some point during the admission, and • the admission was not for dialysis or chemotherapy (DRG v9.0 of L61Z Haemodialysis or R63Z Chemotherapy), and • the admission was not for pregnancy or childbirth (ICD-10-AM principal diagnosis of O00-O99).
Exclusions	See "Data Definitions" for general exclusions.
Considerations for use	<p>"Data Definitions" defines diabetes patients.</p> <p>Both index admissions and readmissions were grouped with adjacent admissions from the same person, where those admissions formed a single care event (e.g. transfers and episode changes). This prevents, for instance, an episode change from an index event being considered a readmission, or a single care event being counted as multiple readmissions.</p> <p>A single index admission may result in multiple readmissions where multiple readmissions occur within 7 days of the index admission.</p>



Section D: Diabetes Priority Area 2 - Inpatient Care	
D.14 - Percentage of In-Scope Hospital Acquired Complications	
Description	A comparison of rate of Hospital Acquired Complications (HACs) between patients with and without type 1 and type 2 diabetes, by selected HAC diagnoses.
Data source	Queensland Hospital Admitted Patient Data Collection.
Calculation	For diabetes patients: $\left(\frac{\text{Count of admissions in which HAC was recorded}}{\text{Count of admissions}} \right) * 100$ For non-diabetic patients: $\left(\frac{\text{Count of admissions in which HAC was recorded}}{\text{Count of admissions}} \right) * 100$
Counting unit	Admissions.
Timeframe	Latest available four quarters of data.
Patient age range	All ages.
Inclusions*	Admissions within Queensland public acute hospitals. In-scope HAC diagnoses are; <ul style="list-style-type: none"> • 3.1 Urinary tract infection (part of; only with N39.0 Urinary tract infection, site not specified or N30.0 Acute cystitis) • 3.4 Blood stream infection • 7.1 Pulmonary embolism • 7.2 Deep vein thrombosis • 11.1 Delirium • 13.2 Hypoglycaemia.
Exclusions	<ul style="list-style-type: none"> • Private hospital patients. • Patients with Gestational Diabetes.
Considerations for use	Hospital Acquired Complication (v3.0) definitions and denominators defined in https://www.safetyandquality.gov.au/publications-and-resources/resource-library/hospital-acquired-complications-hacs-list-specifications-version-31 .



Section D: Diabetes Priority Area 2 - Inpatient Care	
D.15 - Inpatient Patient Experience Survey Response - 'Were you involved in the planning of your diabetes treatment whilst in hospital?'	
Description	Responses to PREMs question: ' <i>Were you involved in the planning of your diabetes treatment whilst in hospital?</i> ' .
Data source	Queensland Inpatient Diabetes Survey Report 2021.
Calculation	N/A
Counting unit	N/A
Timeframe	2019-2021.
Patient age range	N/A
Inclusions	N/A
Exclusions	N/A
Considerations for use	Data provided is on a statewide basis, for facility specific data, reference should be made to own facilities QUIDs reports.



Section D: Diabetes Priority Area 2 - Inpatient Care	
D.16 - Inpatient Patient Experience Survey Response - 'Have you been allowed to make decisions on the control of your blood sugar management?'	
Description	Responses to PREMS Question: ' <i>Have you been allowed to make decisions on the control of your blood sugar management?</i> '.
Data source	Queensland Inpatient Diabetes Survey Report 2021.
Calculation	N/A
Counting unit	N/A
Timeframe	2019-2021.
Patient age range	N/A
Inclusions	N/A
Exclusions	N/A
Considerations for use	Data provided is on a statewide basis, for facility specific data, reference should be made to own facilities QUIDs reports.



Section E: Diabetes Priority Area 3 - High Risk Diabetic Foot (HRDF) Disease	
E.1 - High Risk Diabetic Foot Disease - Foot Amputation Percentage	
Description	The percentage of diabetes patients who undergo foot amputations.
Data source	Queensland Hospital Admitted Patient Data Collection.
Calculation	$\left(\frac{\text{Admissions of type 1 and type 2 diabetes patients for foot amputation}}{\text{Admissions of type 1 and type 2 diabetes patients}} \right) * 100$
Counting unit	Admissions.
Timeframe	Latest available four quarters of data.
Patient age range	All ages.
Inclusions	Diabetes patients admitted to Queensland public acute hospitals.
Exclusions	See "Data Definitions" for general exclusions.
Considerations for use	"Data Definitions" defines diabetes patients and foot amputations.



Section E: Diabetes Priority Area 3 - High Risk Diabetic Foot (HRDF) Disease	
E.2 - High Risk Diabetic Foot Disease - Foot Amputation Length of Stay	
Description	Average length of stay of diabetes patients admitted for foot amputation.
Data source	Queensland Hospital Admitted Patient Data Collection.
Calculation	$\left(\frac{\text{Sum of admitted LOS of admissions of diabetes patients for foot amputation}}{\text{Number of admissions of diabetes patients for foot amputation}} \right)$
Counting unit	Admissions.
Timeframe	Latest available four quarters of data.
Patient age range	All ages.
Inclusions	Diabetes patients admitted to Queensland public acute hospitals with a procedure code for foot amputation.
Exclusions	See "Data Definitions" for general exclusions.
Considerations for use	"Data Definitions" defines diabetes patients and foot amputations.



Section E: Diabetes Priority Area 3 - High Risk Diabetic Foot (HRDF) Disease	
E.3 - High Risk Diabetic Foot Disease - Foot Amputation Re-admissions within 7 days	
Description	The rate of acute readmissions for foot amputation to any public hospital within 7 days of discharge from admissions of diabetes patients. Expressed as a rate of readmissions per 1,000 index admissions.
Data source	Queensland Hospital Admitted Patient Data Collection; Queensland Master Linkage File.
Calculation	$\left(\frac{\text{Count of acute readmissions for foot amputation within 7 days}}{\text{Count of index admissions (diabetes patients)}} \right) * 1,000$
Counting unit	Admissions (but see note 2 in considerations for use).
Timeframe	Latest available four quarters of data.
Patient age range	All ages.
Inclusions	<p>Index admissions:</p> <ul style="list-style-type: none"> • the admission was within a Queensland public acute hospital, and • the patient had diabetes, and • the admission was for acute care, and • the state of usual residence was recorded as Queensland, and • the patient was not discharged against medical advice, and • the admission was not within 7 days of a previous index admission.
	<p>Readmissions:</p> <ul style="list-style-type: none"> • the admission was within a Queensland public acute hospital, and • the admission was within 7 days of separation from an index admission, and • the admission was for foot amputation, and • the admission was for acute care, and • a public chargeable status was recorded at some point during the admission, and • the admission was not for dialysis or chemotherapy (DRG v9.0 of L61Z Haemodialysis or R63Z Chemotherapy), and • the admission was not for pregnancy or childbirth (ICD-10-AM principal diagnosis of O00-O99).
Exclusions	None.
Considerations for use	<p>"Data Definitions" defines diabetes patients and foot amputations.</p> <p>Both index admissions and readmissions were grouped with adjacent admissions from the same person, where those admissions formed a single care event (e.g. transfers and episode changes). This prevents, for instance, an episode change from an index event being considered a readmission, or a single care event being counted as multiple readmissions.</p> <p>A single index admission may result in multiple readmissions where multiple readmissions occur within 7 days of the index admission.</p>



Section F - Diabetes Low Benefit Care	
F.1 - Diabetes Low Benefit Care - For Discussion	
Description	Known areas of low benefit care are: foot swabs and measurement of ketones in type 2 diabetes patients.
Data source	N/A
Calculation	N/A
Counting unit	N/A
Timeframe	N/A
Patient age range	N/A
Inclusions	N/A
Exclusions	N/A
Considerations for use	N/A



Section G: Diabetes Workforce	
G.1 - Diabetes Workforce - For Discussion	
Description	Discussion around workforce to support diabetes services - specifically requirements and challenges.
Data source	N/A
Calculation	N/A
Counting unit	N/A
Timeframe	N/A
Patient age range	N/A
Inclusions	N/A
Exclusions	N/A
Considerations for use	N/A



Section H: Service Models	
H.1 - Service Models Relating to Diabetes Care - For Discussion	
Description	Discussion around the following service models: <ul style="list-style-type: none"> • Diabetes service models • Hub and spoke services • Outreach services • High risk foot services • Diabetes Educators.
Data source	N/A
Calculation	N/A
Counting unit	N/A
Timeframe	N/A
Patient age range	N/A
Inclusions	N/A
Exclusions	N/A
Considerations for use	N/A



GIRFT Diabetes in Scope Public Acute Hospitals - for HHS Level Reporting

Hospital and Health Service	Fac ID	Facility Name	Address	Phone Number
<u>Cairns and Hinterland</u>				
	211	ATHERTON HOSPITAL	Cnr Louise and Jack Sts, ATHERTON, 4883	(07)40911211
	212	BABINDA HOSPITAL	128 Munro St, BABINDA, 4861	(07)40678200
	214	CAIRNS HOSPITAL	165 The Esplanade, CAIRNS, 4870	(07)40506333
	220	GORDONVALE HOSPITAL	1-11 Highleigh Rd, GORDONVALE, 4865	(07)40433100
	221	HERBERTON HOSPITAL	23 Grace St, HERBERTON, 4872	(07)40962222
	222	INNISFAIL HOSPITAL	87 Rankin St, INNISFAIL, 4860	(07)40161411
	223	MAREEBA HOSPITAL	21 Lloyd St, MAREEBA, 4880	(07)40922322
	224	MOSSMAN HOSPITAL	9 Hospital St, MOSSMAN, 4873	(07)40841200
	227	TULLY HOSPITAL	17 Bryant St, TULLY, 4854	(07)40681144
<u>Central Queensland</u>				
	132	BARALABA HOSPITAL	1 Stopford St, BARALABA, 4702	(07)49982800
	133	BILOELA HOSPITAL	2 Hospital Rd, BILOELA, 4715	(07)49921333
	134	BLACKWATER HOSPITAL	41 Mackenzie St, BLACKWATER, 4717	(07)49825455
	144	CAPRICORN COAST HOSPITAL	8 Hoskyn Dr, YEPPOON, 4703	(07)4913 3000
	135	EMERALD HOSPITAL	69 Hospital Rd, EMERALD, 4720	(07)49879400
	136	GLADSTONE HOSPITAL	Park St, GLADSTONE, 4680	(07)49763200
	139	MOUNT MORGAN HOSPITAL	Black St, MOUNT MORGAN, 4714	(07)49381311
	140	MOURA HOSPITAL	14 Nott St, MOURA, 4718	(07)49971301
	141	ROCKHAMPTON BASE HOSPITAL	2 Canning St, ROCKHAMPTON, 4700	(07)49206536
	142	SPRINGSURE HOSPITAL	21 Woodbine St, SPRINGSURE, 4722	(07)49841200
	143	THEODORE HOSPITAL	87 The Boulevard, THEODORE, 4719	(07)49931166
	145	WOORABINDA HOSPITAL	1 Munns Dr, WOORABINDA, 4702	(07)49350133
<u>Central West</u>				
	131	ALPHA HOSPITAL	1 Burns St, ALPHA, 4724	(07)48097000
	152	BARCALDINE HOSPITAL	25 Oak St, BARCALDINE, 4725	(07)46504000
	153	BLACKALL HOSPITAL	189 Shamrock St, BLACKALL, 4472	(07)46507700
	156	LONGREACH HOSPITAL	Cnr Jabiru and Plover Sts, LONGREACH, 4730	(07)46584700
	159	WINTON HOSPITAL	Bloomfield St, WINTON, 4735	(07)46571144
<u>Children's Health Queensland</u>				
	17	ELLEN BARRON FAMILY CENTRE	Hamilton Rd, CHERMSIDE, 4032	(07)31396500
	202	QUEENSLAND CHILDREN'S HOSPITAL	501 Stanley St, SOUTH BRISBANE, 4101	(07)30681111
<u>Darling Downs</u>				
	63	CHERBOURG HOSPITAL	Fisher St, CHERBOURG, 4605	(07)41698800
	91	CHINCHILLA HOSPITAL	Slessar St, CHINCHILLA, 4413	(07)46628888
	92	DALBY HOSPITAL	Hospital Rd, DALBY, 4405	(07)46690555
	93	GOONDIWINDI HOSPITAL	4-18 Bowen St, GOONDIWINDI, 4390	(07)45782400
	94	INGLEWOOD HOSPITAL	24606 Cunningham Hwy, INGLEWOOD, 4387	(07)46512311

Hospital and Health Service	Fac ID	Facility Name	Address	Phone Number
	95	JANDOWAE HOSPITAL	13 Dalby St, JANDOWAE, 4410	(07)46685356
	70	KINGAROY HOSPITAL	166 Youngman St, KINGAROY, 4610	(07)41629200
	97	MILES HOSPITAL	5-11 Colamba St, MILES, 4415	(07)46285600
	98	MILLMERRAN HOSPITAL	50 Commens St, MILLMERRAN, 4357	(07)46953111
	75	MURGON HOSPITAL	Coronation Dr, MURGON, 4605	(07)41681444
	76	NANANGO HOSPITAL	135 Brisbane St, NANANGO, 4615	(07)41631533
	99	OAKEY HOSPITAL	Cnr Beale & Fitzpatrick Sts, OAKEY, 4401	(07)46914888
	100	STANTHORPE HOSPITAL	8 McGregor Tce, STANTHORPE, 4380	(07)46833400
	102	TAROOM HOSPITAL	Miller St, TAROOM, 4420	(07)46273177
	101	TARA HOSPITAL	15 Bilton St, TARA, 4421	(07)46653299
	103	TEXAS HOSPITAL	Mingoola Rd, TEXAS, 4385	(07)46531233
	104	TOOWOOMBA HOSPITAL	Pechey St, TOOWOOMBA, 4350	(07)46166000
	105	WARWICK HOSPITAL	56 Locke St, WARWICK, 4370	(07)46616900
	77	WONDAI HOSPITAL	Bramston St, WONDAI, 4606	(07)41692600
<u>Gold Coast</u>				
	934	ROBINA HOSPITAL	2 Bayberry Lane, ROBINA, 4226	(07)5668 6000
	936	GOLD COAST UNIVERSITY HOSPITAL	1 Hospital Blvd, SOUTHPORT, 4215	1300744284
<u>Mackay</u>				
	192	BOWEN HOSPITAL	61 Gregory St, BOWEN, 4805	(07)47861422
	171	CLERMONT HOSPITAL	24 Francis St, CLERMONT, 4721	(07)49834000
	194	COLLINSVILLE HOSPITAL	81-91 Garrick St, COLLINSVILLE, 4804	(07)47854777
	176	DYSART HOSPITAL	28 Queen Elizabeth Dr, DYSART, 4745	(07)49581733
	172	MACKAY BASE HOSPITAL	475 Bridge Rd, MACKAY, 4740	(07)49686000
	173	MORANBAH HOSPITAL	Cnr Elliott St & Mills Ave, MORANBAH, 4744	(07)49414600
	174	PROSERPINE HOSPITAL	26-32 Taylor St, PROSERPINE, 4800	(07)48139400
	175	SARINA HOSPITAL	1 Hospital St, SARINA, 4737	(07)49438777
<u>North West</u>				
	243	CLONCURRY HOSPITAL	Musgrave St, CLONCURRY, 4824	(07)47421300
	252	DOOMADGEE HOSPITAL	Sharpe St, DOOMADGEE, 4830	(07)47458800
	249	MORNINGTON ISLAND HOSPITAL	Lardil St, MORNINGTON ISLAND, 4892	(07)47457209
	245	JULIA CREEK HOSPITAL	1 Burke St, Julia Creek, 4823	(07)47464000
	246	MOUNT ISA HOSPITAL	30 Camooweal St, MOUNT ISA, 4825	(07)47444444
	247	NORMANTON HOSPITAL	199 Brown St, NORMANTON, 4890	(07)47452100

Hospital and Health Service	Fac ID	Facility Name	Address	Phone Number
<u>South West</u>				
	111	AUGATHELLA HOSPITAL	Cavanagh St, AUGATHELLA, 4477	(07)46547100
	112	CHARLEVILLE HOSPITAL	72 King St, CHARLEVILLE, 4470	(07)46544300
	113	CUNNAMULLA HOSPITAL	56 Wicks St, CUNNAMULLA, 4490	(07)46558100
	114	DIRRANBANDI HOSPITAL	Cnr Jane & Crothers Sts, DIRRANBANDI, 4486	(07)46258222
	115	INJUNE HOSPITAL	Fifth Ave, INJUNE, 4454	(07)46261188
	116	MITCHELL HOSPITAL	95 Ann St, MITCHELL, 4465	(07)46231277
	117	MUNGINDI HOSPITAL	Barwon St, MUNGINDI, 2406	(02)67056100
	118	QUILPIE HOSPITAL	Gyrica St, QUILPIE, 4480	(07)46560100
	119	ROMA HOSPITAL	197-234 McDowall St, ROMA, 4455	(07)46242700
	120	ST GEORGE HOSPITAL	Victoria St, ST GEORGE, 4487	(07)46253144
	121	SURAT HOSPITAL	Ivan St, SURAT, 4417	(07)46265166
<u>Sunshine Coast</u>				
	43	CALOUNDRA HOSPITAL	West Terrace, CALOUNDRA, 4551	(07)54368500
	68	GYMPIE HOSPITAL	12 Henry St, GYMPIE, 4570	(07)54898444
	48	MALENY HOSPITAL	17 Bean St, MALENY, 4552	(07)54942208
	49	NAMBOUR HOSPITAL	Hospital Road, NAMBOUR, 4560	(07)54706600
	32	SUNSHINE COAST UNIVERSITY HOSPITAL	6 Doherty St, BIRTINYA, 4575	(07)52020000
<u>Torres and Cape</u>				
	213	BAMAGA HOSPITAL	82 Sagaukaz St, BAMAGA, 4876	(07)40693166
	216	COOKTOWN HOSPITAL	48 Hope St, COOKTOWN, 4895	(07)40430100
	226	THURSDAY ISLAND HOSPITAL	163 Douglas St, THURSDAY ISLAND, 4875	(07)40690200
	228	WEIPA HOSPITAL	Cnr Central & Northern Ave, WEIPA, 4874	(07)40699155
<u>Townsville</u>				
	191	AYR HOSPITAL	2 Chippendale St, AYR, 4807	(07)47830855
	193	CHARTERS TOWERS HOSPITAL	137 - 139 Gill St, CHARTERS TOWERS, 4820	(07)47870333
	195	HOME HILL HOSPITAL	Tenth Ave, HOME HILL, 4806	(07)47905700
	244	HUGHENDEN HOSPITAL	Flinders Highway, HUGHENDEN, 4821	(07)47411622
	196	INGHAM HOSPITAL	Mcllwraith St, INGHAM, 4850	(07)47762000
	197	JOYCE PALMER HEALTH SERVICE	Beach Rd, PALM ISLAND, 4816	(07)47525100
	248	RICHMOND HOSPITAL	Gallagher Dr, RICHMOND, 4822	(07)47413233
	200	TOWNSVILLE UNIVERSITY HOSPITAL	100 Angus Smith Dr, DOUGLAS, 4814	(07)47961111
<u>West Moreton</u>				
	42	BOONAH HOSPITAL	11-17 Leonard St, BOONAH, 4310	(07)45631266
	44	ESK HOSPITAL	30 Highland St, ESK, 4312	(07)54241288
	45	GATTON HOSPITAL	97 - 103 William St, GATTON, 4343	(07)54620110
	15	IPSWICH HOSPITAL	Chelmsford Ave, IPSWICH, 4305	(07)38101111
	47	LAIDLEY HOSPITAL	75 William St, LAIDLEY, 4341	(07)54651499
<u>Wide Bay</u>				
	61	BIGGENDEN HOSPITAL	57 Alice St, BIGGENDEN, 4621	(07)41276400

Hospital and Health Service	Fac ID	Facility Name	Address	Phone Number
	62	BUNDABERG BASE HOSPITAL	271-275 Bourbong St, BUNDABERG, 4670	(07)41502222
	64	CHILDERS HOSPITAL	44 Broadhurst St, CHILDERS, 4660	(07)41261733
	65	EIDSVOLD HOSPITAL	Crackow Rd, EIDSVOLD, 4627	(07)41651166
	66	GAYNDAH HOSPITAL	69 Warton St, GAYNDAH, 4625	(07)41613500
	67	GIN GIN HOSPITAL	5 King St, GIN GIN, 4671	(07)41572222
	69	HERVEY BAY HOSPITAL	Cnr Nissen St & Uraween Rd, PIALBA, 4655	(07)43256666
	71	MARYBOROUGH HOSPITAL	185 Walker St, MARYBOROUGH, 4650	(07)41238222
	72	MONTO HOSPITAL	35 Flinders St, MONTO, 4630	(07)41669300
	74	MUNDUBBERA HOSPITAL	96 Leichhardt St, MUNDUBBERA, 4626	(07)4165 5202

GIRFT Diabetes Out of Scope - Public Acute Hospitals

Hospital and Health Service	Fac ID	Facility Name	Address	Phone Number
<u>Mater Public Hospitals</u>				
	1	MATER HOSPITAL BRISBANE	Raymond Terrace, SOUTH BRISBANE, 4101	(07)31638111
	3	MATER MOTHERS' HOSPITAL	Raymond Terrace, SOUTH BRISBANE, 4101	(07)31631918
<u>Metro North</u>				
	30	CABOOLTURE HOSPITAL	120 McKean St, CABOOLTURE, 4510	(07)54338888
	46	KILCOY HOSPITAL	19 Brown St, KILCOY, 4515	(07)54971333
	33	SURGICAL TREATMENT & REHABILITATION SERVICE	296 Herston Rd, ROYAL BRISBANE HOSPITAL, 4029	(07)36464445
<u>Metro South</u>				
	41	BEAUDESERT HOSPITAL	64 Tina St, BEAUDESERT, 4285	(07)55411411
	28	REDLAND HOSPITAL	Weippin St, CLEVELAND, 4163	(07)34883111

GIRFT Diabetes Out of Scope - Primary Health Centres

Hospital and Health Service	Fac ID	Facility Name	Address	Phone Number
<u>Cairns and Hinterland</u>				
	215	CHILLAGOE PRIMARY HEALTH CENTRE (PHC)	Hospital Rd, CHILLAGOE, 4871	(07)40947162
	217	CROYDON HOSPITAL (PHC)	Sircom St, CROYDON, 4871	(07)47487000
	908	DIMBULAH OUTPATIENTS CLINIC (PHC)	3-5 Stephens St, DIMBULAH, 4872	(07)40935333
	218	FORSAYTH HOSPITAL (PHC)	Fourth St, FORSAYTH, 4871	(07)40625372
	219	GEORGETOWN HOSPITAL (PHC)	High St, GEORGETOWN, 4871	(07)40621266
	917	MALANDA OUTPATIENTS CLINIC (PHC)	3/15 Catherine St, MALANDA, 4885	(07)40965339
	920	MILLAA MILLAA OUTPATIENTS CLINIC (PHC)	45 Palm Ave, MILLAA MILLAA, 4886	(07)40972223
	225	MOUNT GARNET OUTPATIENTS CLINIC (PHC)	Galena St, MOUNT GARNET, 4872	(07)40979101
	924	RAVENSHOE OUTPATIENTS CLINIC (PHC)	27 Kuradilla St, RAVENSHOE, 4872	(07)40976223
	229	YARRABAH EMERGENCY SERVICE (PHC)	1 Bukki Rd, YARRABAH, 4871	(07)42264100
<u>Central Queensland</u>				
	905	CAPELLA OUTPATIENTS CLINIC (PHC)	5 Slider St, CAPELLA, 4702	(07)49849634
	910	DUARINGA OUTPATIENTS CLINIC (PHC)	C/- QATB CENTRE, Alice St, DUARINGA, 4702	(07)49357991
	940	GEMFIELDS OUTPATIENTS CLINIC (PHC)	984 Rubyvale Rd, SAPPHIRE, 4702	(07)49854547
<u>Central West</u>				
	151	ARAMAC PRIMARY HEALTHCARE CENTRE (PHC)	17 McAuliffe St, ARAMAC, 4726	(07)46513366
	938	BEDOURIE PRIMARY HEALTH CENTRE (PHC)	Kepler St, BEDOURIE, 4829	(07)47461226
	913	BIRDSVILLE PRIMARY HEALTH CENTRE (PHC)	22 Adelaide St, BIRDSVILLE, 4482	(07)46563245

	154	BOULIA PRIMARY HEALTH CENTRE (PHC)	Wills St, BOULIA, 4829	(07)47462333
	160	ISISFORD PRIMARY HEALTH CENTRE (PHC)	St Helena St, ISISFORD, 4731	(07)46588500
	155	JUNDAH PRIMARY HEALTH CENTRE (PHC)	1 Hospital Road, JUNDAH, 4736	(07)46586188
	157	MUTTABURRA PRIMARY HEALTH CENTRE (PHC)	Edkins St, MUTTABURRA, 4732	(07)46587166
	158	TAMBO PRIMARY HEALTH CARE CENTRE (PHC)	Garden St, TAMBO, 4478	(07)46546211
	162	WINDORAH CLINIC (PHC)	15 Victoria St, WINDORAH, 4481	(07)46566100
	161	YARAKA CLINIC (PHC)	Jarley St, YARAKA, 4702	(07)46563144
<u>Darling Downs</u>				
	106	WANDOAN HOSPITAL (PHC)	14 Henderson Rd, WANDOAN, 4419	(07)46274444
<u>Metro South</u>				
	25	MARIE ROSE CENTRE (PHC)	36 Oxley Parade, DUNWICH, STRADBROKE ISLAND, 4183	(07)34099059
<u>North West</u>				
	241	BURKETOWN HEALTH CLINIC (PHC)	1 Hospital Rd, BURKETOWN, 4830	(07)47455133
	242	CAMOOWEAL HEALTH CLINIC (PHC)	52-60 Morrison St, CAMOOWEAL, 4828	(07)47482159
	251	DAJARRA HEALTH CLINIC (PHC)	8 Burke St, DAJARRA, 4825	(07)47492929
	250	KARUMBA HEALTH CLINIC (PHC)	160 Walker St, KARUMBA, 4891	(07)47459137
<u>South West</u>				
	901	BOLLON COMMUNITY CLINIC (PHC)	37 Main Street, BOLLON, 4488	(07)46256105
	921	MORVEN OUTPATIENTS CLINIC (PHC)	Charleville Rd, MORVEN, 4468	(07)46548133
	122	THARGOMINDAH HOSPITAL (PHC)	Dowling St, THARGOMINDAH, 4492	(07)46553120

	123	WALLUMBILLA OUTPATIENTS CLINIC (PHC)	Stake Yard Rd, WALLUMBILLA, 4428	(07)46234233
<u>Torres and Cape</u>				
	230	AURUKUN PRIMARY HEALTH CARE CENTRE (PHC)	Kang Kang Rd, AURUKUN, 4892	(07)40606700
	942	BADU ISLAND PRIMARY HEALTH CARE CENTRE (PHC)	181 Tamwoy St, BADU ISLAND, 4875	(07)40694127
	967	BAMAGA PRIMARY HEALTH CARE CENTRE (PHC)	175 Adidi St, BAMAGA, 4876	(07)40693200
	943	BOIGU ISLAND PRIMARY HEALTH CARE CENTRE (PHC)	Chambers St, BOIGU ISLAND, 4875	(07)40694153
	946	COCONUT ISLAND HEALTH CENTRE (PHC)	William St, PORUMA ISLAND, 4875	(07)40694288
	255	COEN PRIMARY HEALTH CARE CENTRE (PHC)	2 Armbrust St, COEN, 4871	(07)40835900
	944	DARNLEY ISLAND PRIMARY HEALTH CARE CENTRE (PHC)	Lot 64 The Esplanade, DARNLEY ISLAND, 4875	(07)40901500
	945	DAUAN ISLAND PRIMARY HEALTH CARE CENTRE (PHC)	DAUAN ISLAND, 4875	(07)40694260
	231	HOPE VALE PRIMARY HEALTH CARE CENTRE (PHC)	Aerodrome Rd, HOPEVALE, 4871	(07)40838100
	80062	HORN ISLAND PRIMARY HEALTH CARE CENTRE (PHC)	29 Nawie St, HORN ISLAND, 4875	(07)40306200
	957	INJINOO PRIMARY HEALTH CARE CENTRE (PHC)	55 Pablo St, INJINOO, 4876	(07)40693817
	253	KOWANYAMA PRIMARY HEALTH CARE CENTRE (PHC)	Carrington St, KOWANYAMA, 4892	(07)40605133
	961	KUBIN PRIMARY HEALTH CARE CENTRE (PHC)	Kubin Village Health Centre, Lot 77 Kubin Village, MOA ISLAND	(07)40901100
	915	LAURA PRIMARY HEALTH CARE CENTRE (PHC)	1 Gladwell Court, LAURA, 4892	(07)40603320
	233	LOCKHART RIVER PRIMARY HEALTH CARE CENTRE (PHC)	Paytam St, LOCKHART RIVER, 4892	(07)40607155
	947	MABUIAG ISLAND PRIMARY HEALTH CARE CENTRE (PHC)	Lot 2 Map St, MABUIAG ISLAND, 4875	(07)40901200
	928	MALAKOOLA PRIMARY HEALTH CARE CENTRE (PHC)	313 Moun-ding St, NAPRANUM, 4874	(07)40823500
	965	MAPOON PRIMARY HEALTH CARE CENTRE (PHC)	Main St, MAPOON, 4874	(07)40829400
	948	MURRAY ISLAND PRIMARY HEALTH CENTRE (PHC)	MURRAY ISLAND, 4875	(07)40694089
	958	NEW MAPOON HEALTH CENTRE (PHC)	C/- POST OFFICE MAPOON via BAMAGA, 4876	(07)40693454
	254	PORMPURAAW PRIMARY HEALTH CARE CENTRE (PHC)	8 Korca St, PORMPURAAW, 4892	(07)40604233
	949	SAIBAI ISLAND PRIMARY HEALTH CARE CENTRE (PHC)	SAIBAI ISLAND, 4875	(07)40694252
	960	SEISIA PRIMARY HEALTH CARE CENTRE (PHC)	Lot 100 Mugai St, SEISIA, 4876	(07)40693271
	950	ST PAUL'S PRIMARY HEALTH CARE CENTRE (PHC)	Lot 33 Main St, St Paul's Village, MOA ISLAND, 4875	(07)40694348
	951	STEPHEN ISLAND PRIMARY HEALTH CARE CENTRE (PHC)	Lot 10 Orankie St, STEPHENS ISLAND, 4875	(07)40694086
	966	THURSDAY ISLAND PRIMARY HEALTH CARE CENTRE (PHC)	74 Douglas St, THURSDAY ISLAND, 4875	(07)40690400
	962	UMAGICO PRIMARY HEALTH CARE CENTRE (PHC)	Umagico Community Council, c/- PO Umagico via BAMAGA, 48	(07)40693306
	952	WARRABER ISLAND PRIMARY HEALTH CARE CENTRE (PHC)	Cnr Esplanade and Aikuru St, WARRABER ISLAND, 4875	(07)40901400
	232	WUJAL WUJAL PRIMARY HEALTH CARE CENTRE (PHC)	100 Douglas St, WUJAL WUJAL, 4895	(07)40839000
	953	YAM ISLAND PRIMARY HEALTH CARE CENTRE (PHC)	Lot 13 Garth Lane, YAM ISLAND, 4875	(07)40901000
	954	YORKE ISLAND PRIMARY HEALTH CARE CENTRE (PHC)	YORKE ISLAND, 4875	(07)40694296
<u>Townsville</u>				
	916	MAGNETIC ISLAND HEALTH SERVICE CENTRE (PHC)	76 Sooning St, MAGNETIC ISLAND, 4819	(07)47785107
<u>Wide Bay</u>				
	73	MOUNT PERRY HEALTH CENTRE (PHC)	Heussman St, MOUNT PERRY, 4671	(07)41563222

GIRFT Diabetes Out of Scope - Other Primary Health Centres

Hospital and Health Service	Fac ID	Facility Name	Address	Phone Number
<u>North West</u>				
	969	MCKINLAY PRIMARY HEALTH CLINIC (PHC)	Wylde St, MCKINLAY 4823	(07)47258868
<u>Torres and Cape</u>				
	90037	WEIPA COMMUNITY WELLNESS CENTRE	407 John Evans Drive, WEIPA 4874	
<u>Townsville</u>				
	90034	PALM ISLAND PRIMARY HEALTH CARE CENTRE	1 Main Street, PALM ISLAND 4816	

