



## A guide to ABCD Audits for International Centres

In the United Kingdom we have a strong history of clinical audit utilising real-world data. The Association of British Clinical Diabetologists (ABCD) has led on multiple audits of new diabetes therapies from GLP1-agonists and SGLT2 inhibitors to FreeStyle Libre and Closed-Loop technology.

Insights into the sorts of helpful information learned from the audits that has helped improve patient care in the past can be gained through this link, though this is by no means comprehensive:

[All ABCD Audit Publications | ABCD \(Diabetes Care\) Ltd](#)

Below is a step-by-step approach for how to take part.

### Step 1. Register

All ABCD audits requires Sites, Centres and users to register to be provided with a login. This will be done through the relevant online form.

*Site* – This is the department you work in or might be a hospital within a larger group of hospitals

*Centre* – This is the organisation you work for

*User* – Each individual at a Site/Centre that needs access must register separately to be provided with a login.

### Step 2. Collect data

The ABCD audits are designed so they can be completed retrospectively or prospectively. We collect and analyse only data collected in routine clinical practise

#### Registering the patient

When setting up a new patient the tool will ask for a patient identifier – this can be the number which uniquely identifies the patient within the hospital or local Health service (in the UK we use the NHS number) or a number/code chosen by yourself. The purpose is to identify the record for follow-up visits. You should keep a secure record of this at your site. The details you enter when registering the patient cannot

be seen outside your site and the identifier is encrypted ensuring complete anonymity. You should keep locally a record of the encrypted identifier of each patient you enter.

### Baseline visits

When an audit launches it's the norm for centres to find current users of the therapy under their care and, where data is available in the medical records for before they started the therapy, record this on the online tool. If some parts of the data aren't accessible or available – that is fine! We only ask for data that is collected routinely by your clinic and would never ask patients to recall qualitative outcomes (such as Gold Hypoglycaemia Score or Diabetes Distress Score).

If new users commence on a therapy after launch then this data can be collected prospectively. If we use qualitative tools which are not commonly used by your centre or beyond the scope of your usual practice, then these do not need to be performed. We only ask for data recorded in routine clinical care.

Where data refers to NHS guidelines or criteria for funding – this is not needed for international centres.

### Follow-up visits

As an audit, no specific length of follow-up is needed. You should see the patient at the frequency that is appropriate for their clinical care and, whenever you see them at follow-up, the audit form should be completed to capture their outcomes. This can be done at any frequency – whether that be monthly, 6-monthly or yearly!

## Step 3. Analysis

Once we have accrued enough real-world data we undertake an analysis. We often look at a handful of parameters at a time (for conference abstracts) or more in depth and detailed works with the aim of publishing a manuscript. Those centres with the largest number of participants will be recognised as co-authors of the paper but all involved will receive credit in any work produced.

The ABCD audit team are always happy to discuss the audits and provide clarity if needed. To arrange this please e-mail [abcd.audits@diabetologists.org.uk](mailto:abcd.audits@diabetologists.org.uk) to arrange.

### Other tips

- When entering dates the audit uses dd/mm/yyyy format. All dates must be confirmed by clicking on the calendar in order to be recorded. This also true for Age when registering the patient.
- Printable forms are provided for ease of data collection in clinic, but it is perfectly feasible to upload data directly into the tool.
- When thinking about the free-text boxes, useful information might include the impact on sleep, work or other quality of life measures.