

CVD dashboard user guide for general practices

June 2024

This guide will walk you through Pinnacle’s cardiovascular disease (CVD) dashboard. It can be used in conjunction with the video: [CVD dashboard with Dr Jo Scott-Jones](#)

The Pinnacle CVD dashboard empowers you to analyse your practice's CVD data, identify areas for improvement, and ultimately enhance patient care and address inequities.

Assumptions: This guide assumes you have a basic understanding of Power BI. We encourage you to review our video: [Introduction to Power BI](#).

Notes:

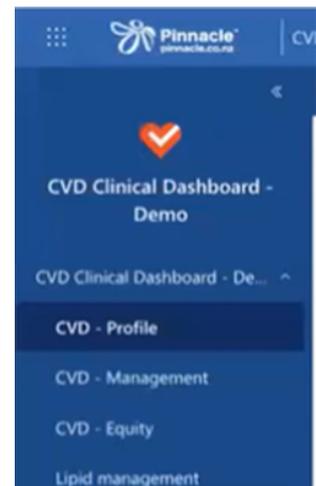
- i. This guide and the CVD dashboard video use anonymised data.
- ii. The screenshots are for instructional purposes only.

1. Dashboard overview

Pinnacle’s CVD dashboard provides insights into your practice's cardiovascular disease (CVD) burden and management. Using the filters, you can compare your practice data to a benchmark region.

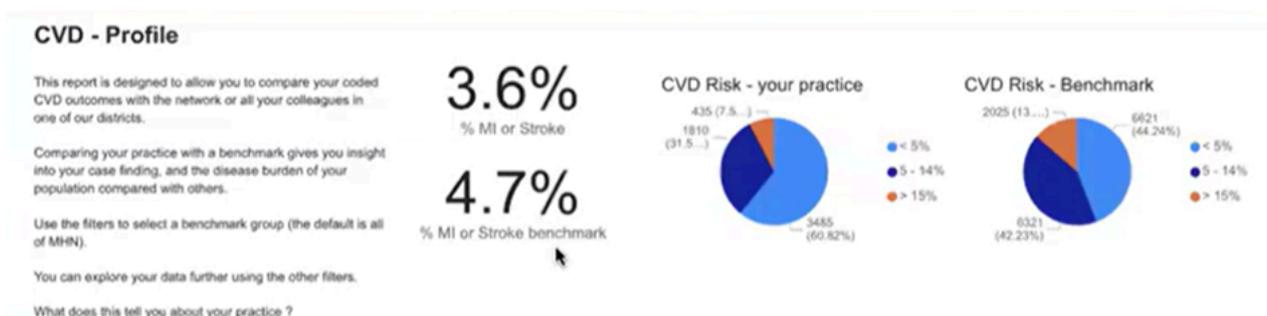
Power BI navigation notes

- Filters: Select ‘filter’ options on the right to refine the clinically relevant data and display it in the centre reports.

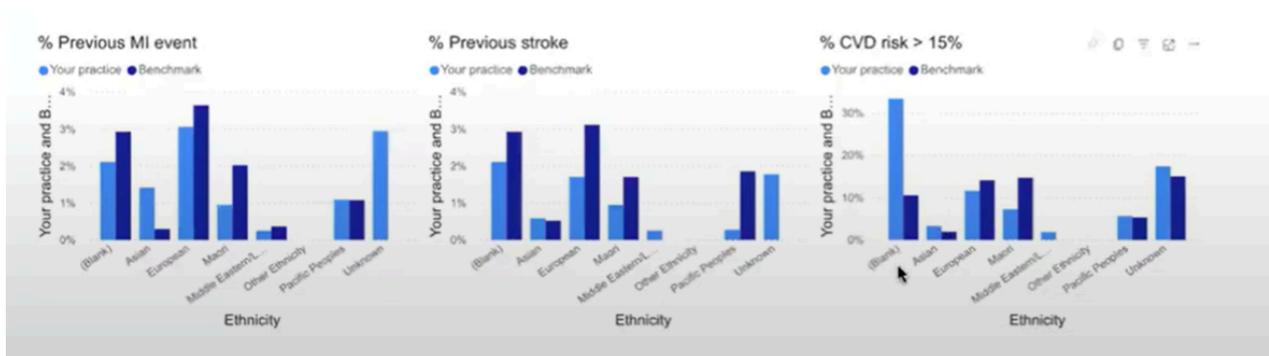


2. Getting started | CVD burden

Disease burden: This section provides an overview of CVD prevalence in your practice compared to the benchmark, and whether the disease burden at your practice is lower or higher than the benchmark.

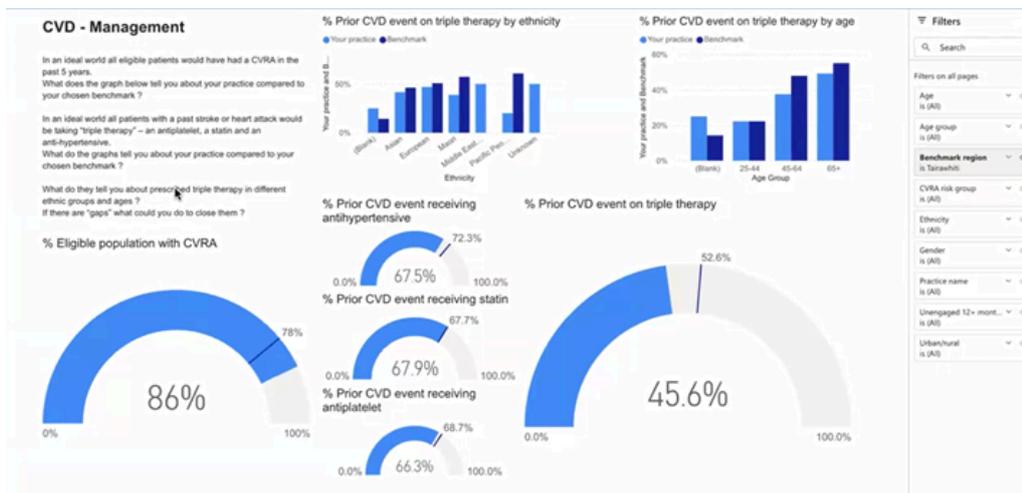


- **Coded patients:** Identify the percentage of patients with a history of stroke or myocardial infarction (MI).
- **Cardiovascular risk profile:** Analyse the distribution of patients by cardiovascular risk according to your practice records, and compare to the benchmark population.
- **Ethnicity breakdown:** Examine the ethnicity distribution of patients to identify potential disparities in disease burden compared to the benchmark. It is not uncommon to see patients whose ethnicity is unknown or left blank in every practice; this is an opportunity for the practice to improve the recording of this data in the practice management systems (PMS).

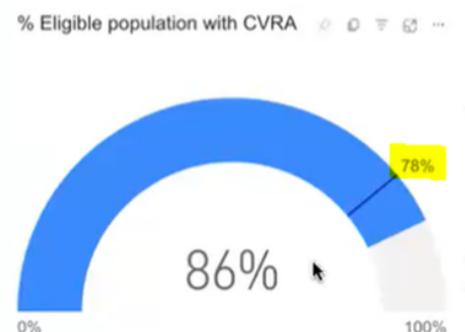


3. CVD - Management

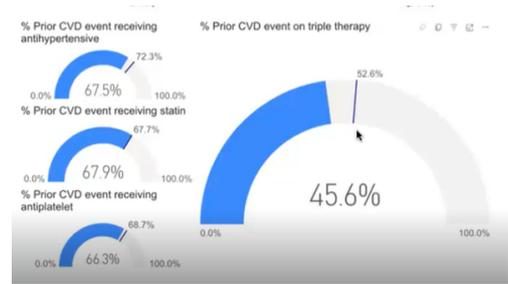
This report focuses on how well your practice manages cardiovascular disease.



- **Cardiovascular risk assessment (CVRA):** Gauge the percentage of eligible patients who have had a cardiovascular risk assessment (CVRA). The black line is the benchmark.



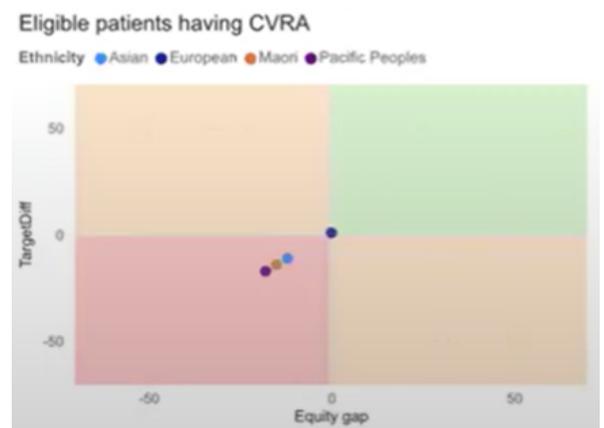
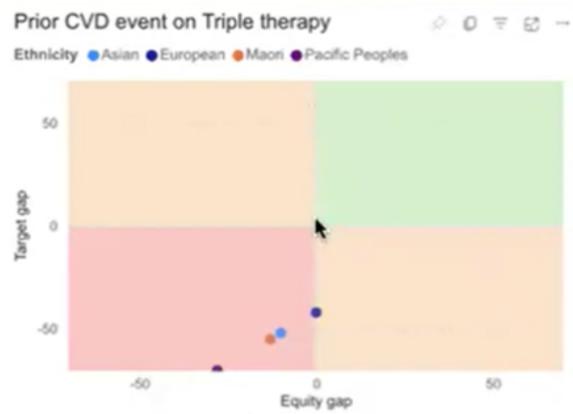
- **Triple therapy:** Analyse the proportion of patients with a prior CVD event receiving recommended triple therapy (antihypertensive, antiplatelet, and lipid-lowering medications).



4. CVD - Equity

- **Equity matrix:** This tool highlights potential equity gaps in care delivery for different ethnicities. Use the target lines to assess how each group compares. The European population is used as a reference point, represented by a vertical line. If another population is performing worse than the European population, it falls to the left of this line. Conversely, if a population is performing better, it falls to the right.

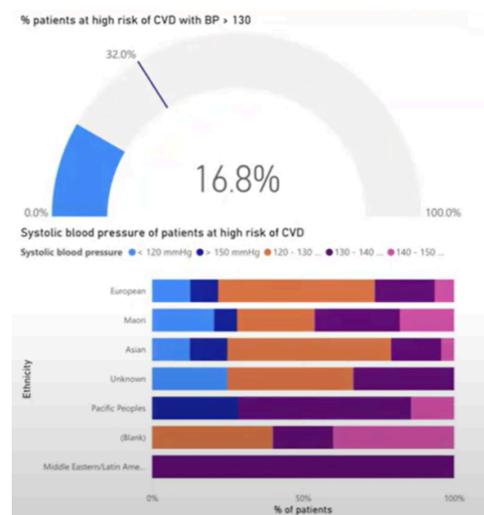
Note: Large target gaps can alert you to populations you may want to do something about.



5. Deep dives: other reports

The dashboard includes additional reports on specific clinical areas:

- **Lipid management:** Monitor how effectively LDL levels are controlled in patients with known CVD risk.
- **Blood pressure management:** Evaluate how well blood pressure is controlled in patients at high risk of CVD.



- **Atrial fibrillation management:** Assess the use of anticoagulants and antiplatelets in patients with atrial fibrillation.
- **Renal risk:** Identify patients on ‘triple whammy therapy’, a combination of medications (ACE/ARB, diuretics, and NSAID/Cox-2) [ML1] that can harm the kidneys. HQSC Atlas of Variation data indicates the Pinnacle network has a high burden of patients on triple whammy therapy compared to other networks.

6. Patient list builder

Use the insights from the various reports and drill down to the patients you might want to recall.

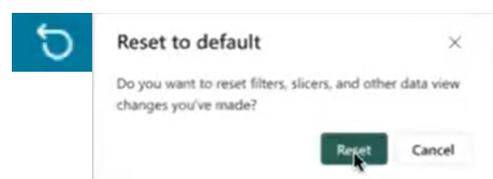


Reminder: All data shown in the CVD resource and video are anonymised.

- **Filters:** This section has a much wider range of filters than previous sections. Start with your filters completely blank.
- You can use the filters to narrow down the patient population by various criteria (e.g., ethnicity, CVRA eligibility, CVRA risk group, medication use).

Considerations for further action:

- Populations with the largest equity gap.
- Patients who are eligible for a CVRA, or need a recall.
- Those who don't have a risk group recorded means they haven't had a CVRA.
- **Unengaged report:** Identify patients who haven't had any contact with the practice in the last 12 months. It is usually easier to begin interventions with those who are engaged.
- **Exporting data:** Clicking the three dots (...) on a chart allows you to export a list of patient data (NHIs) for further action.
- To clear the filters, tap the reset key. This will return you to your original group of patients.



Examples of using the patient list builder

You can use the filters to explore your patient population and their risk factors, for example:

- Identify Pacific peoples who haven't had a CVRA despite being eligible.
- Find Māori patients with a history of CVD who aren't receiving triple therapy.
- Locate patients with very high blood pressure, e.g. >150 mmHg who are not prescribed antihypertensive medication, prioritising older adults and specific ethnicities.

7. Contact details

For questions and further information, contact:

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