



Perceived Effectiveness of a Best Practice Advisory in the T1D Exchange Quality Improvement Collaborative (T1DX-QI)

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Background

The T1DX-QI, comprising 62 U.S.-based pediatric/adult endocrinology centers, uses data-driven strategies to improve outcomes for people with type 1 diabetes.

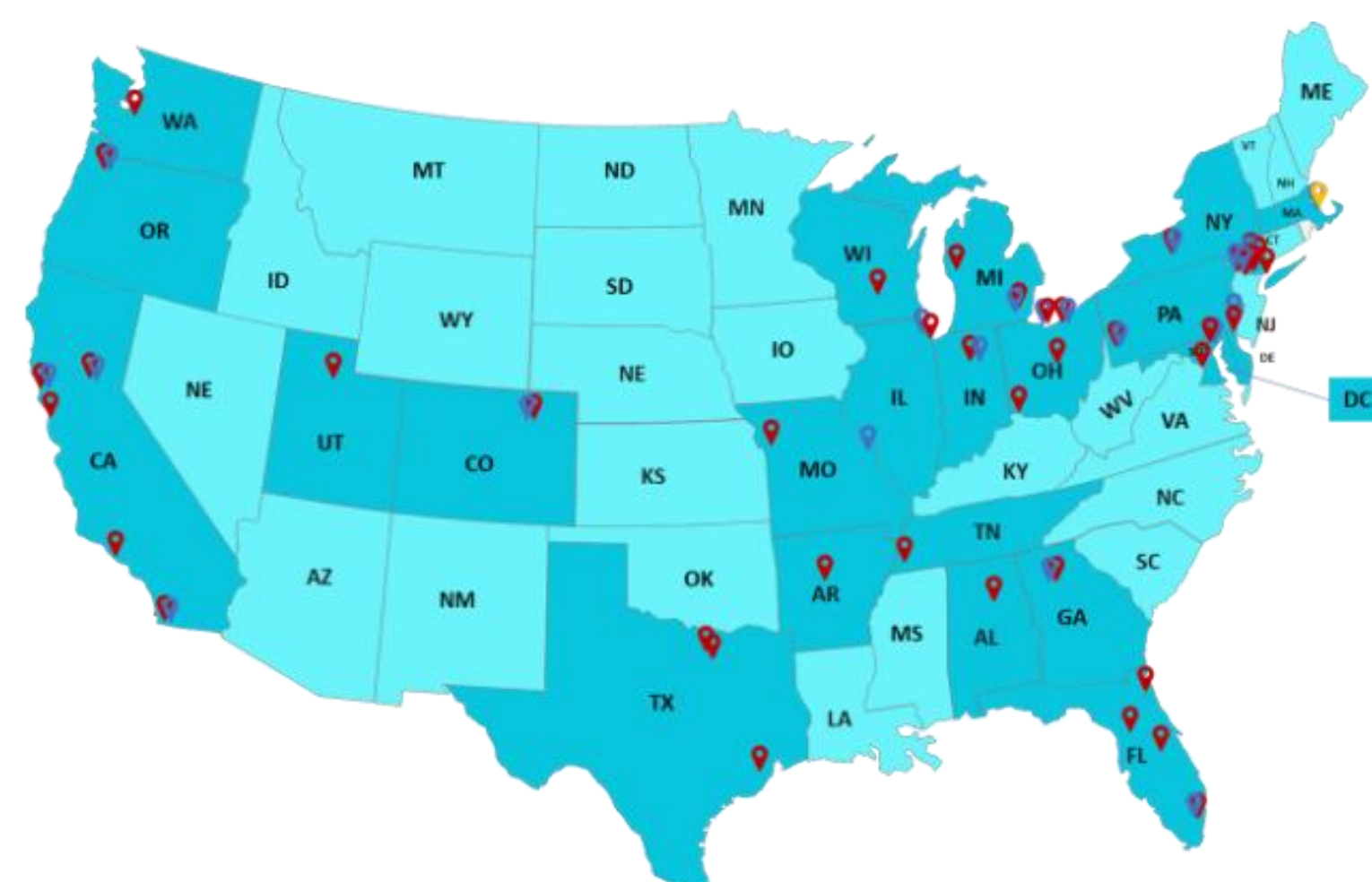
While use of continuous glucose monitors (CGM), insulin pumps, and automated insulin delivery (AID) systems are increasing, technology remains underutilized, with disparities in access and use.

Objective

To assess provider perceptions of the usefulness of BPAs in prompting discussions about and prescribing diabetes technology—specifically CGMs and insulin pumps—and in reducing disparities in technology access within the T1DX-QI network.

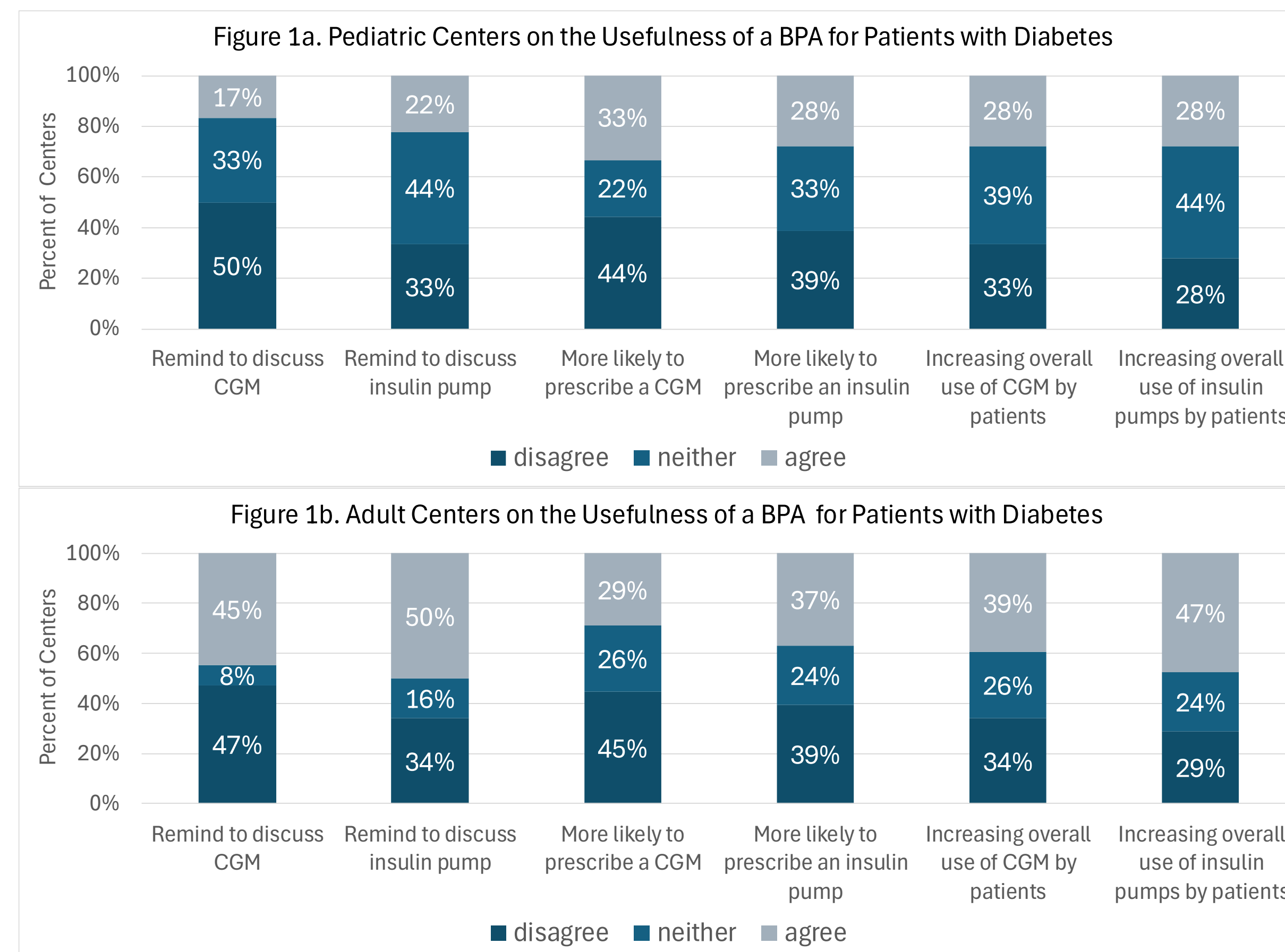
Methods

- Survey was deployed via Qualtrics to all 62 T1DX-QI centers from September–November 2024
- The survey evaluated perceived effectiveness of BPAs for recommending and encouraging adoption of CGMs and pumps, as well as their ability to reduce racial and ethnic disparities in technology prescribing.
- Response differences between pediatric and adult centers were examined.



Pediatric Adult T1D Exchange HQ

Results



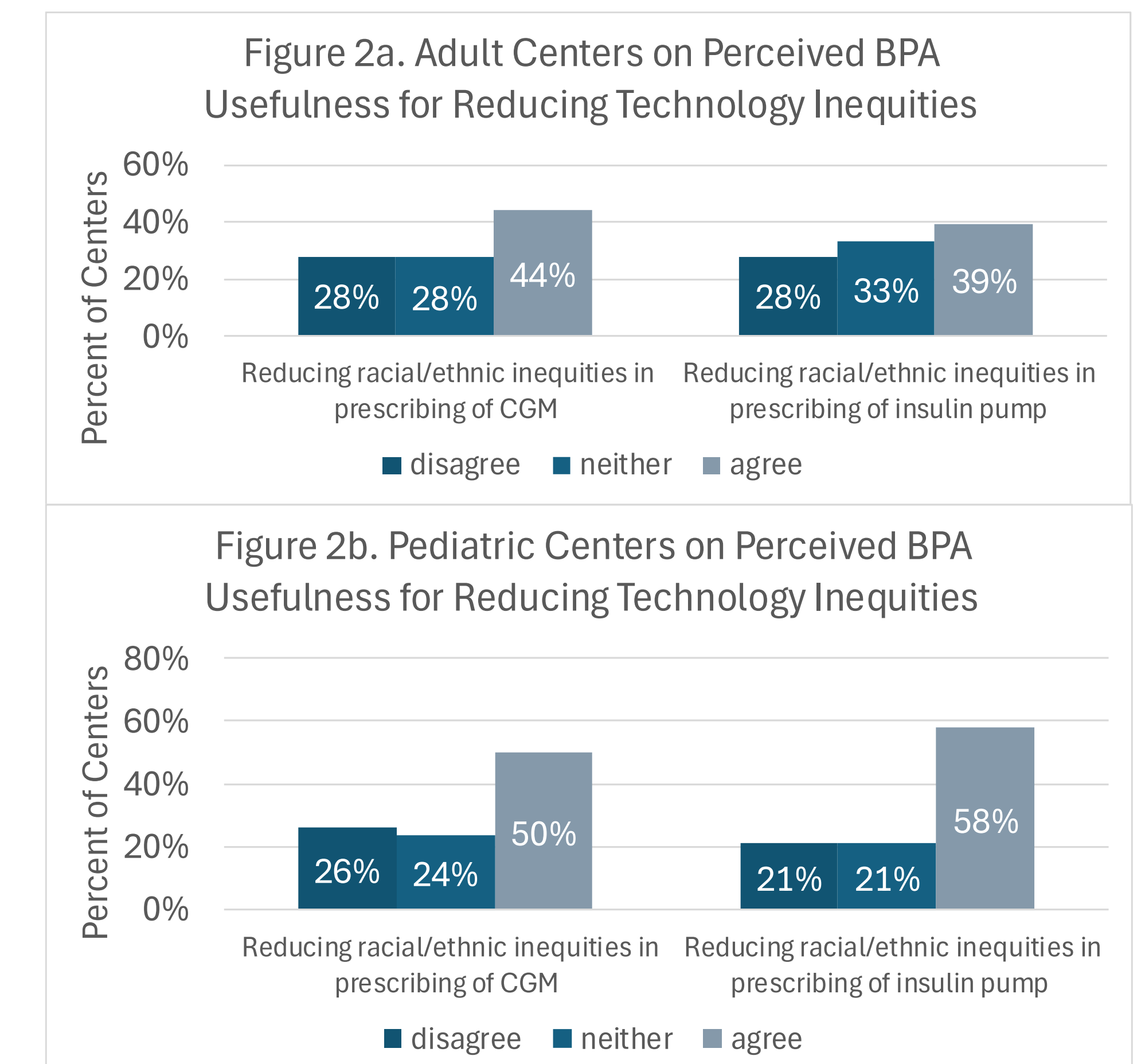
56 centers responded (38 pediatric, 18 adult; 90% response)

- Pediatric centers were more likely to view BPAs as effective in prompting CGM conversation and prescription and increasing CGM uptake.
- Adult centers acknowledged BPA value for CGM prescribing and use but reported lower usefulness for pump-related prompts.
- Over half of pediatric centers and slightly fewer adult centers believed BPAs could help reduce racial/ethnic inequities in technology prescribing.

Conclusions

BPAs are perceived as more impactful in pediatric than adult care settings, especially for CGM-focused prompting. BPA hesitancy is influenced by resource limitations across centers. Tailoring BPA implementation to care environment and patient needs may optimize their contribution to technology access and equity.

Results



Overall, **44% agreed** BPAs support more equitable CGM prescribing, and **39% agreed** they could improve equity in insulin pump prescribing.

- Pediatric centers expressed the strongest confidence: **50% agreed** BPAs improve equity in CGM prescribing and **58%** for insulin pumps
- Agreement levels were lower in adult centers, suggesting that BPA implementation strategies may require adjustment for adult care workflows and patient needs.

Acknowledgements

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