



# Quality Improvement for Diabetes and Asthma Care: AHRQ's Guides and Workbooks for State Action

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State Healthcare Quality Improvement Workshop:  
Tools You Can Use to Make a Difference  
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# Colleagues

## ■ AHRQ

- Dwight McNeill, PhD
- Ed Kelley, ScD
- Ernest Moy, MD, MPH
- Roxanne Andrews, PHD

## ■ TH

- Kelly McDermott, MA
- Karen Ho, M.S.
- David Adamson, PhD

## ■ CSG

- Trudi Matthews, MA
- Jenny Sewell



# AHRQ Partners for G&Ws

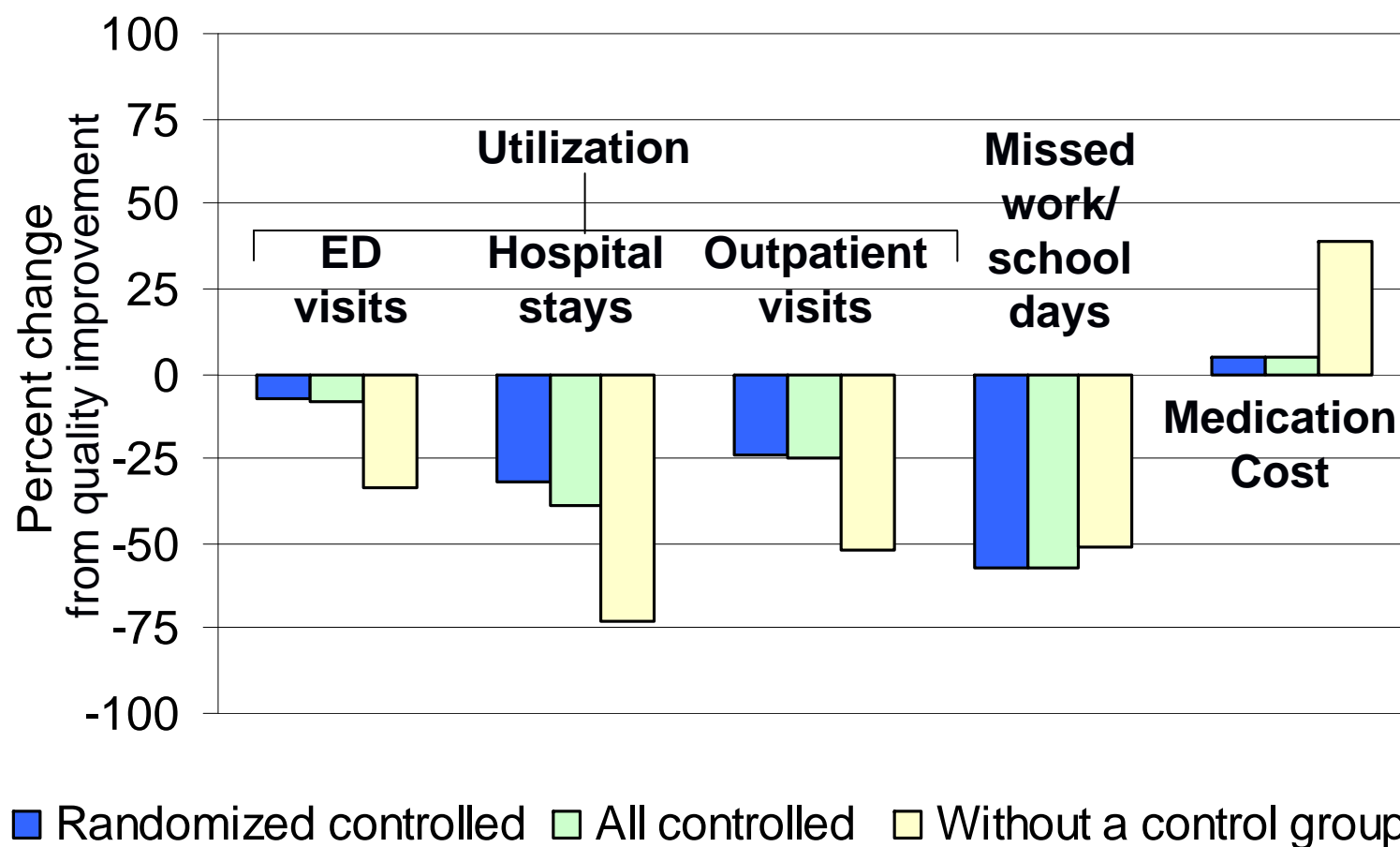
Advisors	Diabetes	Asthma
Federal:	CDC	CDC, NHLBI
State (Public health):	AR, WA	OR, NY, WA
State (Data orgs):	GA, MA, MI, WA	GA, NY, PA
State (Lawmakers):	KS, OH, NY, MN, WA	
Advocates:	ADA	AAA, ALA, ATS
QI groups:		JCAHO
Clinician researchers:		(several)



# Guides & Workbooks (G&Ws)

- Diabetes Care Quality Improvement:
  - A Resource Guide for State Action
  - A Workbook for State Action
  - <http://www.ahrq.gov/qual/diabqualoc.htm>
- Asthma Care Quality Improvement:
  - A Resource Guide for State Action
  - A Workbook for State Action
  - <http://www.ahrq.gov/qual/asthmaqual.htm>
- Why these?
- What areas are your weakest?

## Why G&Ws? Difficult to synthesize research on quality and costs (asthma)



# What's in Guides/Workbooks?

- **Guides:** Provide information on:
  1. Motivation – Making the case
  2. Framework – Strategy for State-led QI
  3. Scan – State QI activities
  4. Data – Measuring quality of care
  5. Implications – Moving ahead to action

**Workbooks** help you make your case:

- Work through the module exercises
- Assemble data on prevalence, cost, and potential savings
- Provide critical information to a State work group

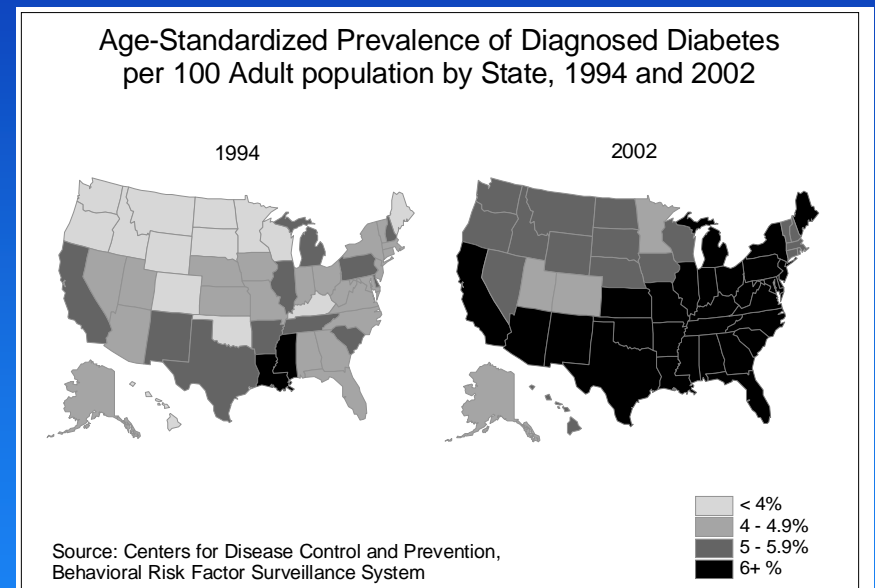
# 1. Making the Case

## ■ Why should states make asthma or diabetes a priority for QI initiatives?

- Increasing prevalence
- Significant disparities
- State variation
- Potential cost savings
- Quality improvement opportunity

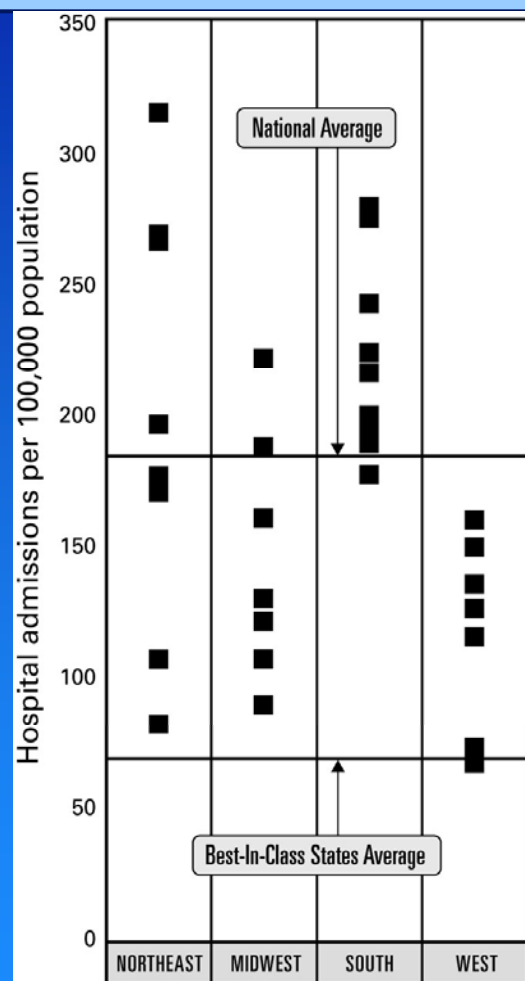
### In the **Workbook**:

- How to estimate prevalence by sub-groups
- Resources for state data
- How to estimate costs of asthma/diabetes care

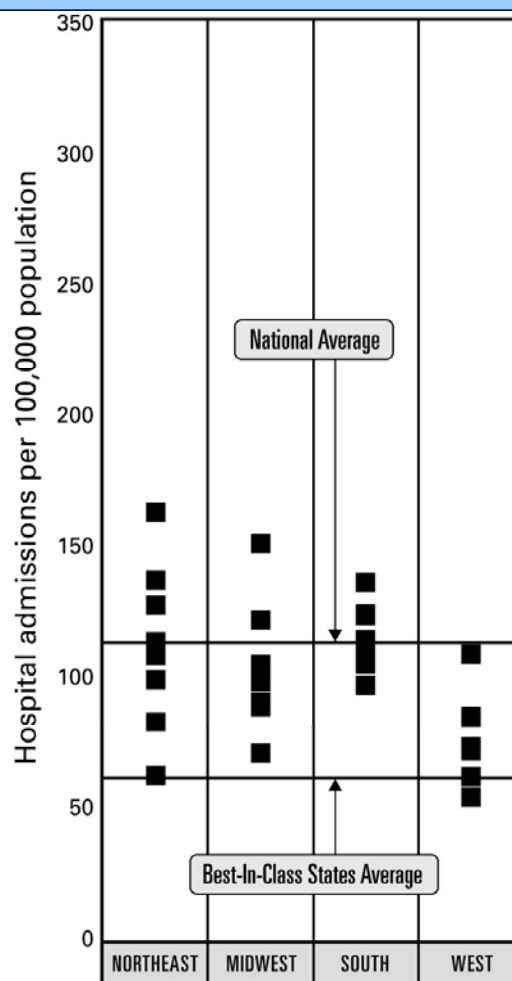


# Why?

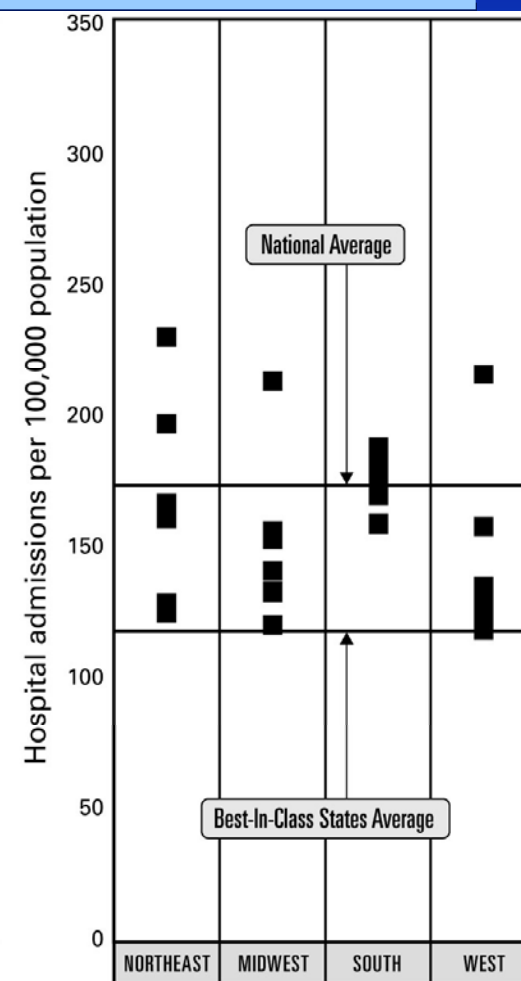
## Variation in quality (asthma)



Hospital admission for pediatric asthma under age 18 (PQI 4)



Hospital admission for adult asthma age 18-64 (PQI 15)



Hospital admissions for adult asthma age 65 and older (PQI 15 modified)

Source: Asthma Guide

## 2: Strategy for State-led Quality Improvement

Leadership

Partnership

Implementation

- **Provide leadership** to create a vision
- **Work in partnership** with key stakeholders
- **Implement improvement** by leading partners to create interventions and assess impact

In the **Workbook**:  
Worksheets for planning a state QI program



**ASSESS**



# 3. Scan State Activities

- Review module on national and specific state activities
- Investigate your own state's activities
- Learn from what other states have done

## In **Workbook:**

- A checklist for summarizing your state's activities

Asthma-Related Quality Improvement Programs in Your State, by Type of Activity			
Type of activity	✓	Name of program	Program contact
Advisory bodies/councils/workgroups			
Coalitions (networks)			
Collaboratives			
Cross-agency work			
Data measurement and reporting			

Type of activity	✓	Name of program	Program contact
Developing/enforcing guidelines			
Disease management			
Minority and rural outreach			
Public service/education efforts			
Self-management			
Provider training			
Use of technology			



## 4. Data & Measures: The Keys to Improvement

- Motto: “You can’t change what you can’t measure”
- Measures: Learn the standard measures for the disease
- State data: Do an inventory of relevant data
- National data: Assemble benchmarks (Tip: don’t be satisfied with “average”)

### In the **Workbook**:

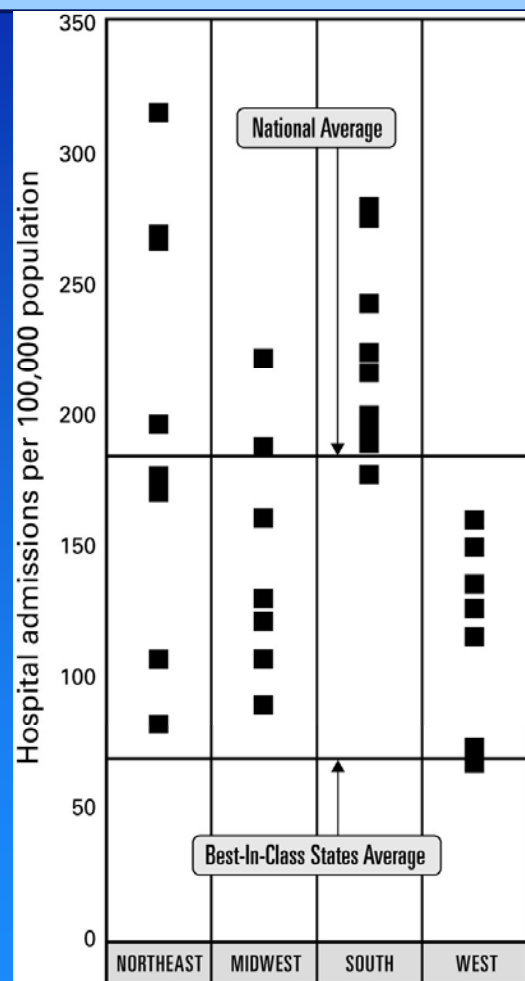
- List of state data sources
  - How to compare to the best-in-class
  - And much more...
- } **Hands-on Session**



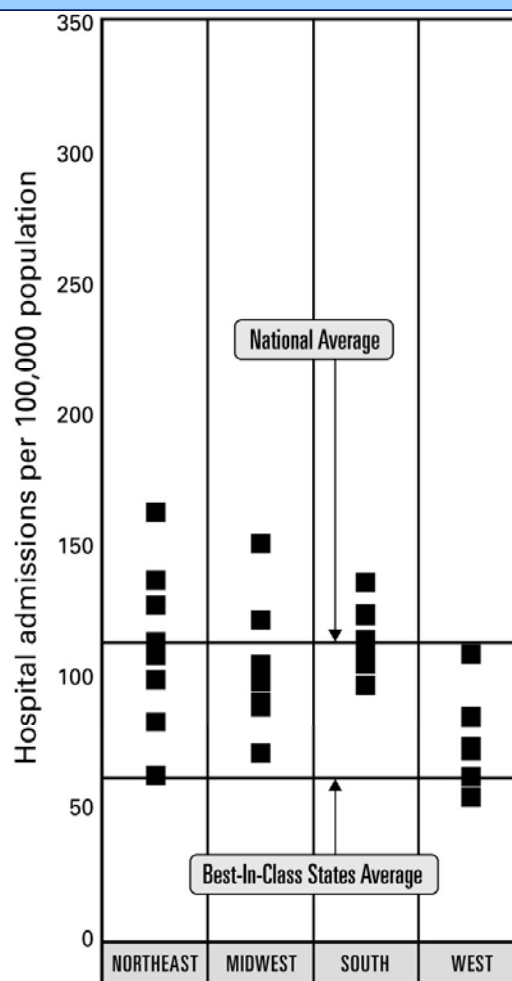
## 4. Data & Measures: Types and Examples

- **Process:** Performance indicators based on clinical care guidelines
  - Doctor visit every 6 months
  - Written asthma management plan
- **Outcome:** Health status, the ultimate objective
  - Mortality rates
  - Hospitalization rates
- **Contextual Factors:** Difficult to change
  - Access – percent uninsured
  - Prevalence – percent with diabetes or asthma

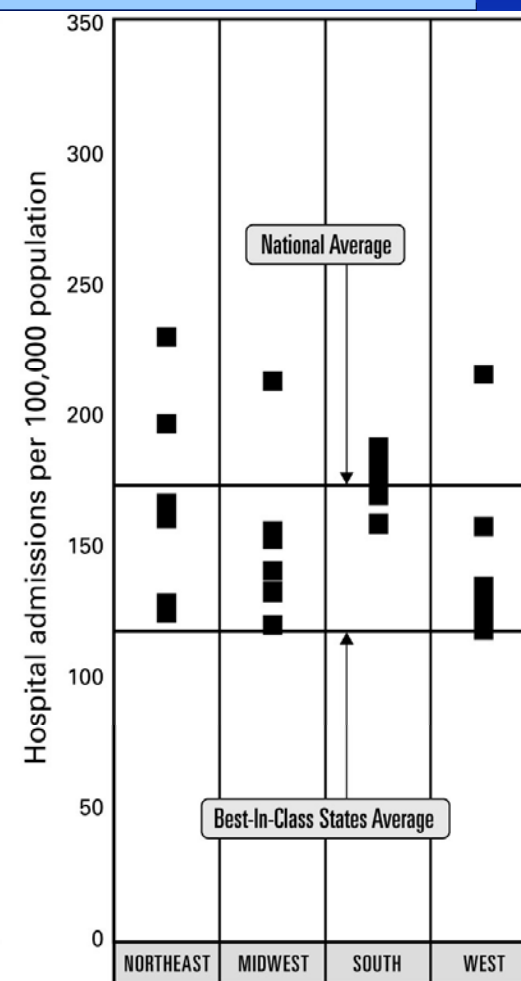
## 4. Data & Measures: Benchmarks for Asthma Quality Improvement



Hospital admission for pediatric asthma under age 18 (PQI 4)



Hospital admission for adult asthma age 18-64 (PQI 15)



Hospital admissions for adult asthma age 65 and older (PQI 15 modified)

Source: Asthma Guide



## 5. Take the Opportunity: Have an Impact on Quality of Care

### THE QI CYCLE:

- **Plan:** Identify issue, stakeholders, goals (topics)
- **Do:**
  - Select change agents →
    - Providers – Societies, IHI, etc.
    - Health plans – NCQA
    - Employers – Firms / coalitions
    - **States – Who in state?**
  - Guide & support with resources
- **Assess:** Evaluate, modify, test, & reassess

**Implement successes broadly**  
**Use the QI Cycle to assess and**  
**modify implementations**



# The Workbook Steps for States

1. **Make your case:** Assess avoidable hospitalizations, prevalence, costs, and potential saving related to the disease
2. **Understand state-led quality improvement:**
  - a. Apply the 3 steps – leadership, partnership, and improvement
  - b. Identify national resources to help
3. **Review relevant programs** of QI in your state
4. **Understand measurement and data:**
  - a. Learn about measures for the disease
  - b. Assess available data for state and local estimates; identify gaps
  - c. Find national benchmarks to compare your state against
5. **Summarize** your state's case for disease quality improvement and identify next steps to **action** (e.g., set preliminary goals)



*Agency for Healthcare Research and Quality*

*Advancing Excellence in Health Care*

[www.ahrq.gov](http://www.ahrq.gov)

# Questions?

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# Measurement – Getting started

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- Choose topic
- Identify standard measures
- Identify data sources
- Collect *readily available* estimates
- Identify benchmarks
- Tell the story with graphics



# Moving Forward

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- Get buy-in
- Staffing and funding
- Planning
  - Don't forget to plan evaluation at outset