ImproveCareNow: Expanding on a Decade of Learning

Wallace Crandall, MD

Disclosures

I’m horribly conflicted:
- Abbott (speaking, consulting)
- Avaxia (consulting)
- Nestle (consulting)
- AbbVie (research)
- ImproveCareNow (travel)

Objectives

1. Review some of the ICN accomplishments to date (improved clinical remission)
2. Understand limitations of the current work (what does improved clinical remission really mean?)
3. Consider important future directions for QI (is this just about IBD?)
Ty Cobb’s Lifetime
Batting Average- .366

50%
Only 55% of recommended care was received.

“Deficits in the quality of care provided to children appear to be similar in magnitude to those previously reported for adults.”
“…QI work is an ethical imperative because it supports clinically effective care, prevents harm, and allows for the just allocation of resources...”

Pedro Weislender, MD, PhD
Director, The Center for Pediatric Bioethics at Nationwide Children’s Hospital

730 Pediatric Gastroenterologists
130,000 Patient Visits
$31 Million Federal Grants

**ImproveCareNow: By the Numbers**

79% Clinical Remission
82 Centers 23,400 Patients
Five Things I Have Learned Through ICN

#1 Use the Right Tools

Research  Outcomes

How do we get better outcomes?
Basic Biomedical Science → Efficacy and Effectiveness → Quality, Value and Population Health

**P < 0.05**
#1 Use the Right Tools

#2 Understand Your Data
Which center is best?

A

B

P<0.05

How good is the measure?

Clinical Remission

A

B

P<0.05

Steroid Use

A

B

P<0.05

How good is the measure?
Which center is best?

How good is the measure?

Did we improve?

How consistent was the measure?
#2 Understand Your Data

#3 Learn From Your Data
A Learning Health System

- Pre-Visit Planning
- Population Management
- Care Stratification

Better Care

Research

Outcomes

ImproveCareNow n=96; REACH n=112
A Learning Health System

1. American Board of Pediatrics
2. Collaborative Chronic Care Network Project. NIH
Transformative research award NIDDK R01DK085719
3. Enhanced registries project. AHRQ R01HS020024
4. Enhanced registries continuation AHRQ R01HS022974-01
5. Center for Education and Research in Therapeutics U19HS021114-04
6. Patient Powered Research Network PCORI PPRN-1306-01754

#3 Learn From Your Data
#4 Expand Your Reach

Cure Me Progress Map

<table>
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<tr>
<th>Project Description</th>
<th>Baseline Data</th>
<th>Early Results</th>
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<tr>
<td>1. Adolescent Med - MATA Program</td>
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<td>2. Behavioral Health - Treatment of depression</td>
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<td>3. Heart Center - Hospital days in single ventricle patients</td>
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<td>4. ENT - Tracheostomy Care Index</td>
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<td>5. Gastroenterology - IBD patients in remission</td>
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<td>6. Gastroenterology - Celiac Patients in remission</td>
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<td>7. Hematology/Oncology - Cancer Care Index</td>
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<td>8. Infectious disease - Hospital days for pneumonia patients</td>
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<td>9. Neonatology - BPD in main campus NICUs</td>
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<td>10. Nephrology - Chronic Kidney Disease Care Index</td>
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<td>11. Neurology - Total hospital days for epilepsy</td>
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<td>12. PICU - Sepsis</td>
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<td>13. Pulmonary - Total hospital days for asthma cohort</td>
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<td>14. Pediatric Surgery - Missed school days appendicitis patients</td>
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<td>15. Endocrine - HgB A1c levels in adolescent DM patients</td>
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Complete/Improving | No change | Worsening | Not yet done |
Celiac Disease

#4 Expand Your Reach

#5 Do the Impossible
“ICN has quietly worked to accomplish what many in healthcare continue to assume is impossible. They have created a true working partnership between provider and patient/family and researcher, one which offers genuine authority to the patient and family…”

Carolyn Wong Simpkins, MD, PhD
Global Lead, BMJ Outcomes
Clinical Director, BMJ North America

Tania Moon
Parent Mentor
QI Team Member
Leader of ICN National Parent Group
ICN Board of Directors

#5 Do the Impossible
50%

“…QI work is an ethical imperative…”

Summary
Use the right tools
Understand your data
Learn from your data
Expand your reach
Do the impossible