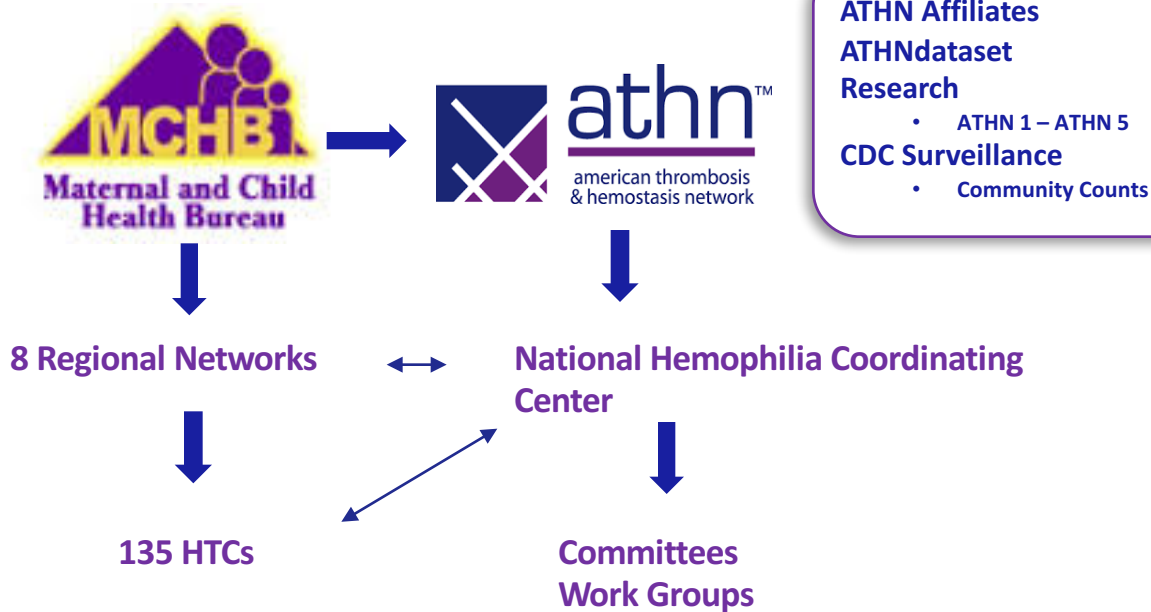


Moving Forward Together

Christine Kempton, MD, MSc



Regional Hemophilia Network



QI and National Hemophilia Program

2012

- NHPCC Begins (grant #1- 3 years)
 - Focus on needs assessment and capacity building
- Regional Networks (grant #1 – 5 years)
 - QI specific expectation

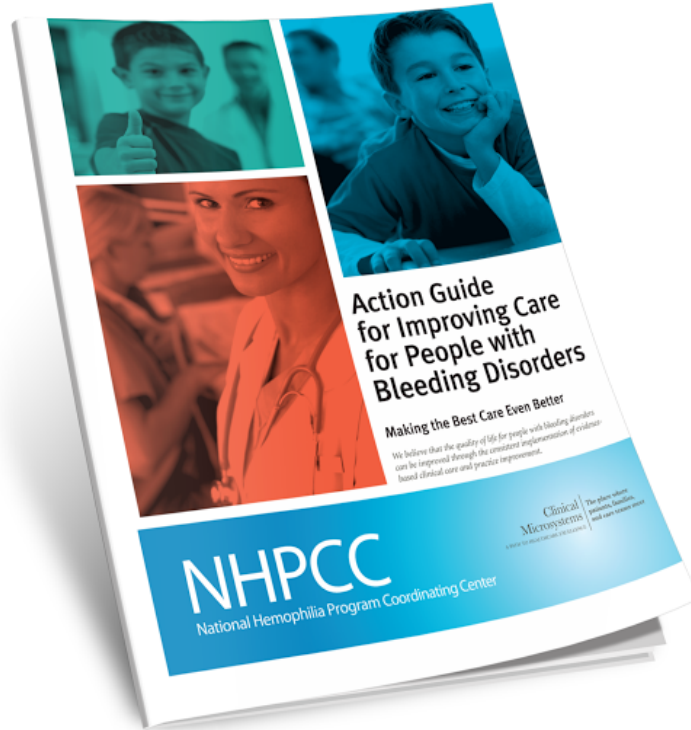
2015

- NHPCC Grant #2 (2 years)
 - MCHB requires NHPCC to conduct QI

Increasing Quality Improvement Capacity

- Collaboration with The Dartmouth Microsystems Academy (TDIMA) with two pronged approach
 - Train Improvement Teams
 - Train Coaches
- 16 Improvement teams and 20 coaches trained by June 2017
 - 26 centers with QI capacity (20% of HTC's)
 - Almost 100 staff trained in QI Nationally
 - Additional QI and training at HTC's or Regions

TDIMA Clinical Microsystems Quality Improvement Tools and Resources



Posted on ATHN.org

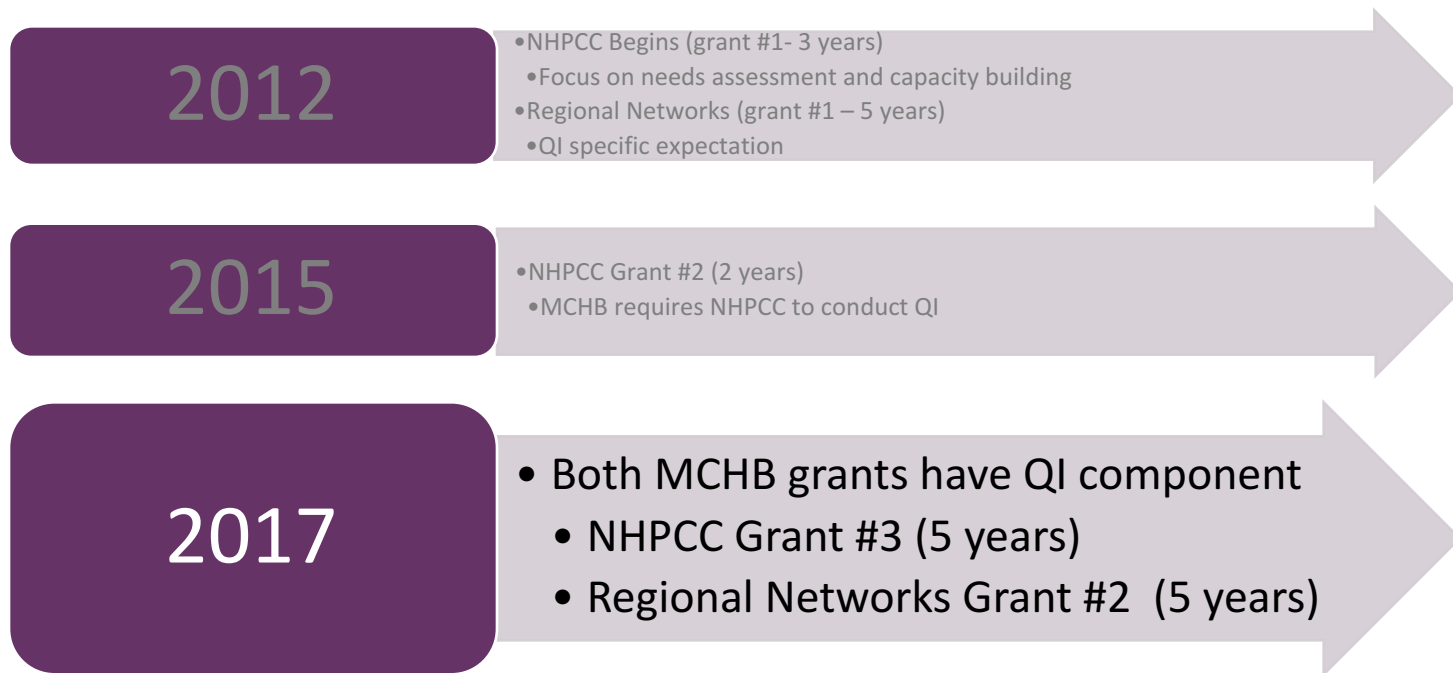
Hard copies available from
cahaupt@athn.org

Improving Improvement

Ongoing evaluation of the current TDIMA program includes:

- Post learning session evaluations
- HTC team evaluation of their ATHN coach
- Quality improvement knowledge (coaches and HTC staff)
- The transcript and summary from focus groups conducted by the external consultants
- Assessment of cost and time required to participate in the program

Next Steps for QI National Hemophilia Program



Collaboration

NHPCC

- Focus on technical assistance
- Increase capacity to perform QI
- Disseminate information knowledge gained

Regional Network

- Facilitate engagement of the region's HTC in QI initiatives
- Collaborate with the NHPCC on reporting of regional QI activities and dissemination of QI results

MCHB Quality Improvement Goal

By 2022, 75% of HTC's will have participated in a national QI project directed at:

1. Transition pediatric to adult care
2. Increasing patient family engagement in care decisions and HTC, regional and NHPCC activities
3. Ensuring access to a medical home and integrating hemophilia treatment with other systems of care

Infrastructure for Other QI Initiatives

Measure	Source	Baseline
✓ BDBS-15 VWD	CDC Surveillance-patient population	2014
✓ BDBS-16 Joint	CDC Surveillance - registry	2015
✓ AH-5.6 School Absenteeism	CDC Surveillance - registry	2015
✓ BDBS-X High School Graduation	CDC Surveillance - registry	2015
o DH-5 Transition	Patient Experience	2015
✓ Comprehensive visits	ATHN Data Set	2014
✓ Prophylaxis, severe patient	ATHN Data Set	2014
✓ BMI	ATHN Data Set	2014
✓ Immune Tolerance Therapy	ATHN Data Set	2014
✓ Hepatitis C Viremia	ATHN Data Set	2014

Resources

- National Repository (Library) on ATHN website
 - Regional/NHPCC collaboration to collect materials
- Interactive learning platform for the RHNs and HTC's to access QI tools, provide a format for working on document and publications and real time posting of questions and information to colleagues across the national network (Summer, 2017)
- Expanded number of NHPCC work groups to gather and develop resources for QI

Take Home Points

- The National Hemophilia Treatment Center Network has solid foundation for addressing the quality improvement goals
- All centers participate in collecting longitudinal data in Clinical Manager and reporting national metrics from the ATHNdataset, Community Counts – the CDC Surveillance project and the Patient Experience Survey
- Resources to learn and implement QI are available on the ATHN website, soon to be expanded with a repository with enhanced management capabilities
- Regions have QI capacity through trained coaches and HTC improvement teams that can extend their reach to work within and outside their region
- **THERE ARE FIVE YEARS TO ACCOMPLISH THE NATIONAL GOALS!**

