VERMONT’S ASTHMA LEARNING COLLABORATIVE

A look at working on health care delivery to one population of patients

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AIM:

- To improve adherence to evidence-based guidelines in primary care management of asthma
- To utilize documentation tools to guide evidenced-based care
Each practice assembled a multi-disciplinary team

Series of 3 all-day learning sessions over a 6 month time period

Action periods between learning sessions including:
- data collection
- quality improvement projects

Conference calls between learning sessions for monthly contact

Each team assigned a facilitator
Measures of Success:

- Baseline, manual retrospective record review of 10% of asthma panel or minimum of 50 records
- Random selection by counting every 10th patient from printout of asthma panel
- Second record review conducted in month 4 and recommended quarterly thereafter
- Tools and support provided for data collection, data entry and display
ASTHMA LEARNING COLLABORATIVE

Shared Learning

- 2 collaboratives: 15 practices
- Peer presentations (at learning session #2 and #3)
  - Challenges, successes
  - “Dude, we all suck”
  - All improved !!!
Process/system changes that were made in primary care practices:

- Identify the asthma panel!
- Development of asthma visit templates
- Planned visits for asthma management
- Workflow redesign to include assessment of control and completion of asthma action plans
- More patients prescribed controller medications, based on severity
- Spirometry in office
- Asthma educator in practice
ANOTHER EXAMPLE: CHAMP IMMUNIZATION PROJECT

Aggregate Data on Children with complete vaccine series

Percent

0% 20% 40% 60% 80% 100%

Baseline Month 1 Month 2 Month 3 Month 4 Month 5 Month 6

No Fall
## ONE MORE: CHITTENDEN COUNTY COLLABORATION

<table>
<thead>
<tr>
<th>Measure/Practice</th>
<th>Practice A</th>
<th>Practice B</th>
<th>Practice C</th>
</tr>
</thead>
<tbody>
<tr>
<td>30 months old UTD for DTaP # 4</td>
<td>93%</td>
<td>100%</td>
<td>88%</td>
</tr>
<tr>
<td>30 months old UTD for lead test</td>
<td>99%</td>
<td>98%</td>
<td>97%</td>
</tr>
<tr>
<td>30 months old UTD for MCHAT screening</td>
<td>93%</td>
<td>96%</td>
<td>96%</td>
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<tr>
<td>Patients with dx of asthma with level of severity assessed</td>
<td>58%</td>
<td>96%</td>
<td>33%</td>
</tr>
<tr>
<td>Patients with dx of asthma with level of control assessed</td>
<td>0%</td>
<td>71%</td>
<td>13%</td>
</tr>
<tr>
<td>Patients with dx of asthma with asthma action plan</td>
<td>6%</td>
<td>87%</td>
<td>41%</td>
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<tr>
<td>documented in the last 12 months</td>
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