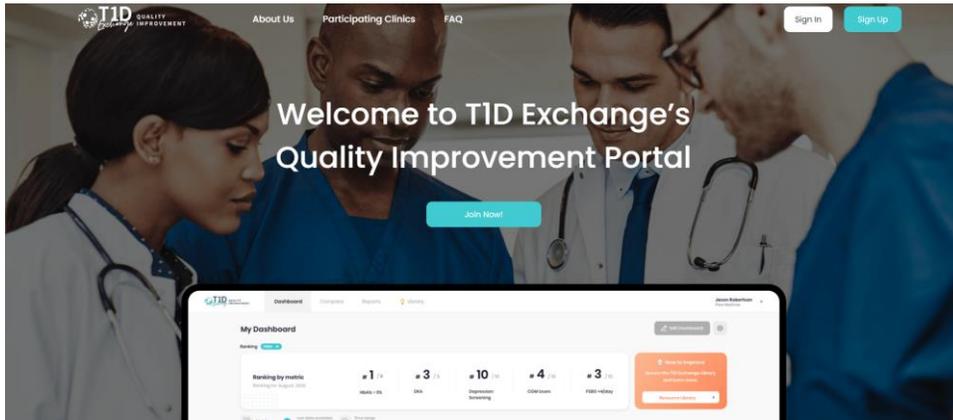# QI Portal 2023 and Beyond

Ann Mungmode, MPH, CPHQ
Senior Product Manager, T1D Exchange

Objectives

- Distinguish QI Portal and T1DX-QI Member websites

- Summarize 2023 new features

- Gather feedback on 2024 QI Portal vision and next steps

T1DX QI Portal versus Member Website

The T1DX QI Portal allows users to:

- Use real-time measures to support iterative, quality improvement cycles
- Benchmark key clinical outcomes across highly variable EMR systems
- Incorporate real-time measures into health equity efforts
- Gain population health insights and outcomes trends
- Share best practices with over 50 US endocrinology centers

https://qi.t1dplatform.org/home

The T1DX-QI Member Website allows users to:

- Access meeting minutes and materials from various T1DX-QI meetings:
  - Annual Learning Sessions
  - Collaborative Calls
  - Committees, Working Groups, Special Projects
- Access T1DX-QI publications
- Ask and answer questions to the entire T1DX-QI

https://live-qic.pantheonsite.io/

Key QI Portal 2023 Updates

- Increased to **30+ quality metrics and data filters**
  - **New in 2023!**
    - Time in Range, Time Below Range
    - Expanded SDOH → food insecurity, transportation screening, housing needs screening
    - Severe Hypo Events
    - HCLS use
- **Enhanced Library** with over 175 resources
- **Data tables** displayed under Report charts
- **Improve tab!**

Improve Tab

- Document QI Projects and PDSA cycles
- Collaborate and manage team member responsibilities
- Monitor project progress, status, and timeline
- Upload QI tools and project documents
- Annotate metric charts
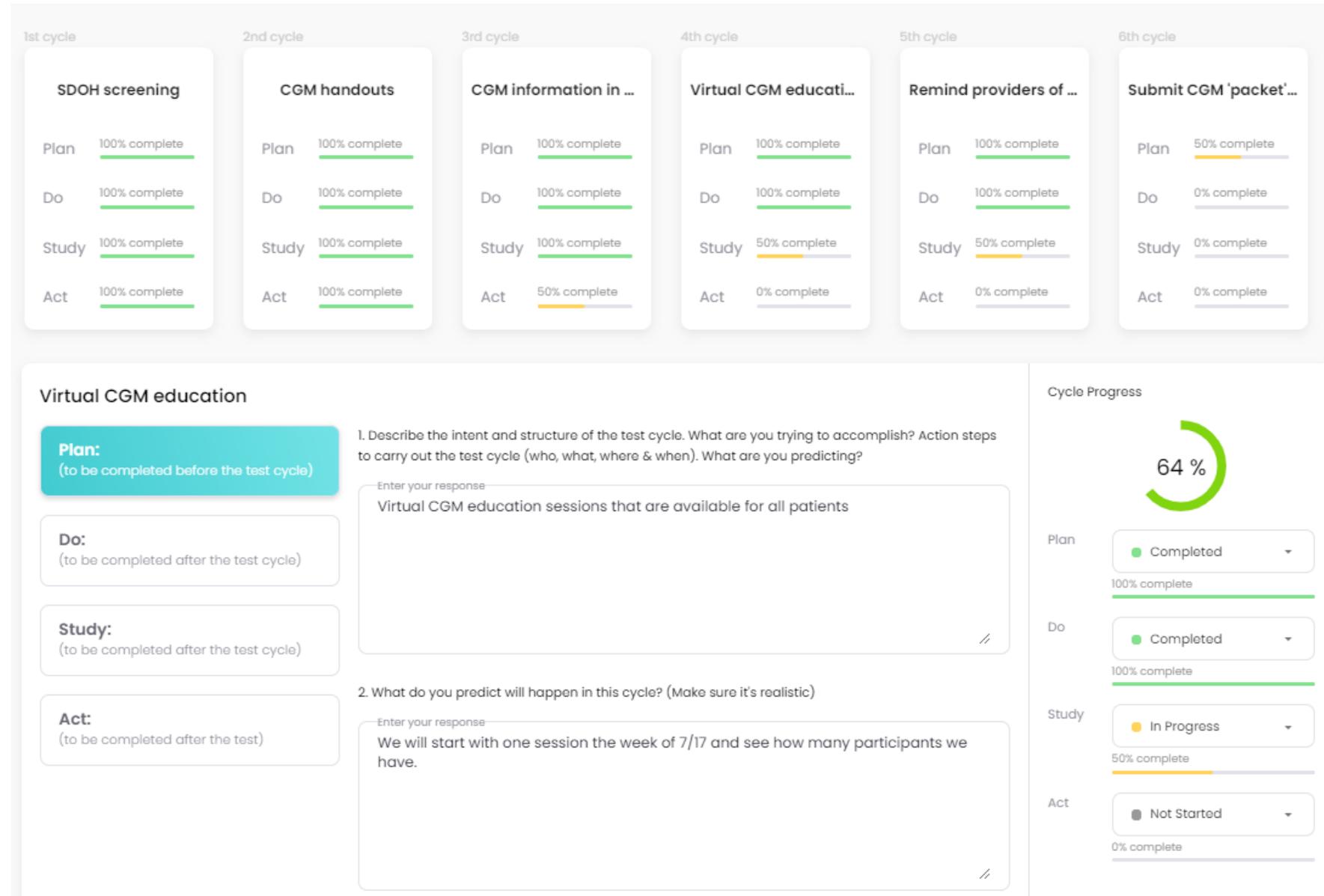
Project Documentation

As of 11/9/23

Center	1+ QI Project	1+ PDSA	1+ QI Tool
BDC peds	✓	✓	✓
Boston Medical Center	✓	✓	
CCF peds	✓	✓	✓
Children's National	✓	✓	✓
Cornell	✓	✓	
JHU adult	✓	✓	✓
Le Bonheur	✓	✓	
Lurie	✓	✓	✓
Miami adult	✓	✓	
Montefiore	✓		
Mt. Sinai adult	✓	✓	
NYU Mineola	✓	✓	✓
Seattle	✓		
SUNY adult	✓		✓
Texas	✓	✓	✓
U of Florida	✓		
U of Utah	✓	✓	✓
U of Wisconsin	✓	✓	

1D
hange

QI Portal 2024 Design Review

New! T2D

New! Insights

REP refresh

LIB refresh

We need your feedback!

We need your feedback!

Make sure we hear which feature most excites you! Survey completers will be entered for the chance to win a $25 gift card!

Building Quality Improvement Capacity

Don Buckingham, MBOE, CPHQ

Learning Objectives:

- Selecting **outcome and process measures** that will leverage best results
- Mastering the **PDSA small tests of change** for sustainable improvement
- Drawing on **local subject matter experts and collaborative partners** for interventions that really work
- Rapid formation of a synergetic **multidisciplinary team**
- Identifying which of your interventions will yield the **most impact with the least effort**

T1D Exchange

Quality Improvement Capacity – what is it?

- *Quality* **=** the **_standard_** we adopt for best outcomes (readiness / reliability)

- *Improvement* **=** those quality **_interventions_** we test, implement, and sustain

- *Capacity* **=** the strength of our team to **_operationalize_** quality improvement, drawing upon available:
  - 1) personnel
  - 2) resources
  - 3) time

Quality Improvement Capacity – what does it look like?

Change

Quality

Improvement
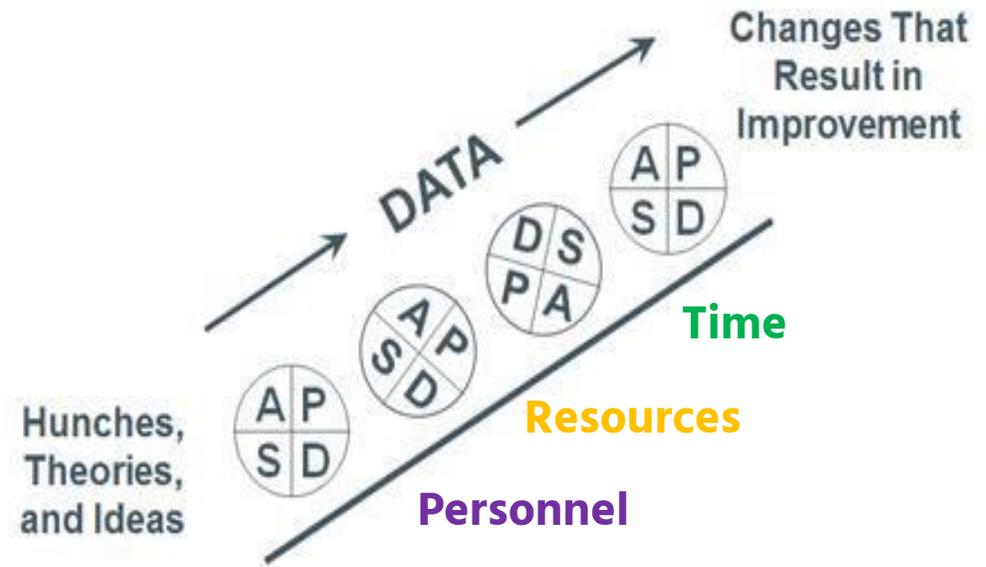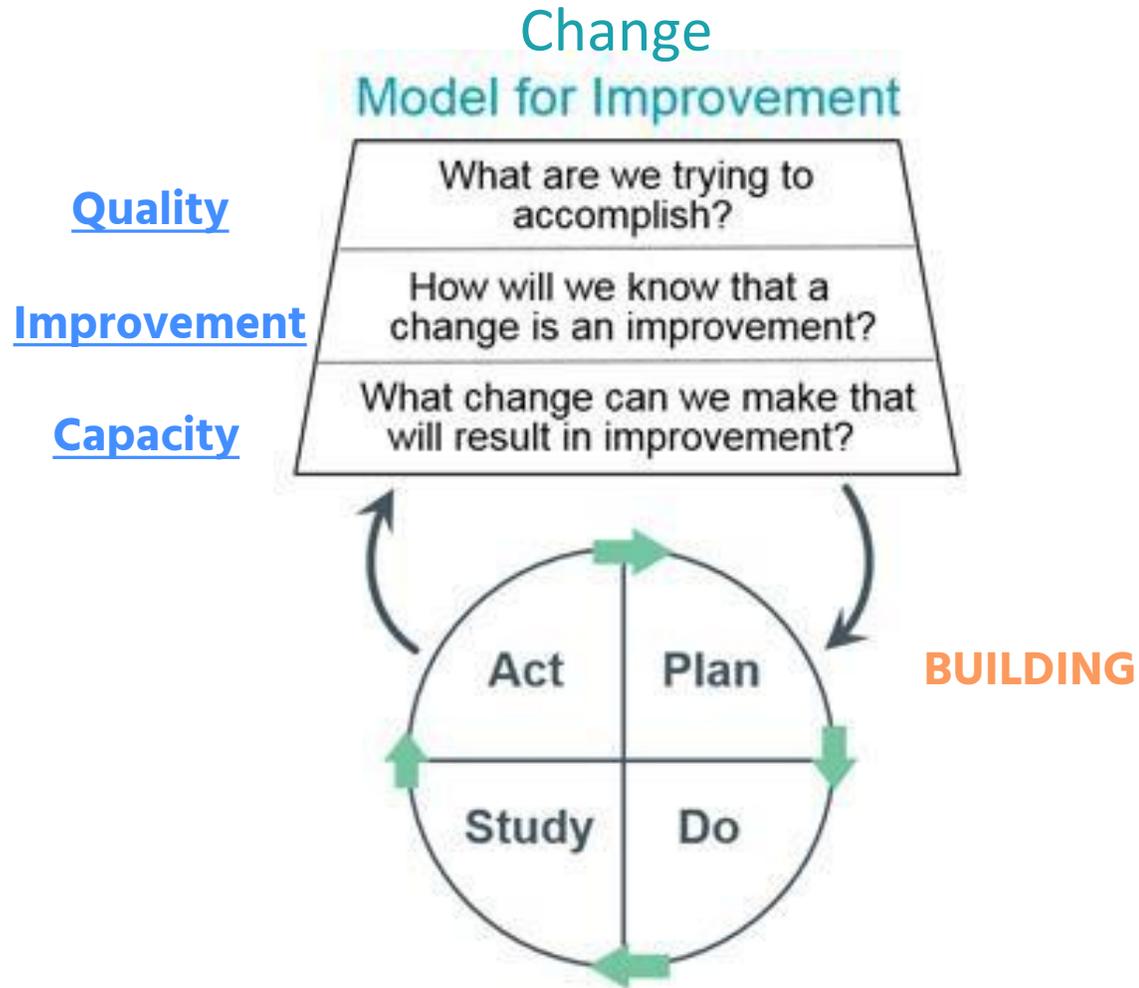
Capacity

BUILDING

Source: *The Improvement Guide*, p. 103

Model for Improvement

What are we trying to accomplish?

How will we know that a change is an improvement?

What change can we make that will result in improvement?

Act | Plan
Study | Do

Changes That Result in Improvement

DATA

Hunches, Theories, and Ideas

Time

Resources

Personnel

Quality Improvement Capacity – how do we build it?

- **Quality** = the ***standard*** we adopt for best patient outcomes
- **Improvement** = the quality ***interventions*** we test, implement, and sustain
- **Capacity** = the strength of our team to ***operationalize*** quality improvement, drawing upon available:
  - personnel
  - resources
  - time.

The most successful teams …

Selected *outcome and process measures* that leveraged best results … using a smart AIM

Mastered *PDSA small tests of change* for sustainable improvement

Drew on local *subject matter experts,* and *collaborative partners* for interventions that worked

Rapidly assembled a synergetic *multidisciplinary team*

Identified which interventions will yield *the most impact with the least effort*

T1D Exchange

Standard of Quality
Builds Capacity

AIM: Increase the number of T1D adolescents who adopt Continuous Glucose Monitoring (CGM) technology by 40% in 6 months

❖ Specific – ✓ increase CGM Use
❖ Measurable – ✓ increasing it by 40%(T1DX measures)
❖ Achievable – ✓ is this possible considering multiple factors? Yes
❖ Realistic – ✓ Is this something the clinic can achieve? Yes
❖ Time bound – ✓ within next6 months

Intervention Sustainability
Builds Capacity
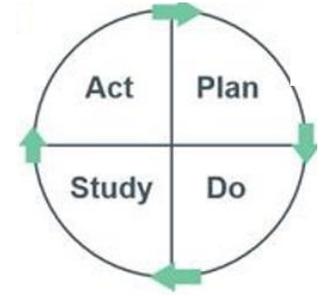
PLAN

- Determine the aim and customer
- Map the current process, identify appropriate measure(s)
- Identify factors contributing to the problem
- Brainstorm change concepts and possible improvements
- Prioritize and make predictions

DO

- Test out one small change at a time

STUDY

- Measure and compare results with predictions

ACT

- Take action
- Repeat cycle
- Share lessons and have fun

Local SME and Collaborative Partners
Build Capacity

Your Subject Matter Experts: KDD

Key Drivers

Aim

Increase/decrease what, in which group or population, from what to what, by when and for how long

People / Staffing? ← Training, educating . . . Capacity balancing . . .

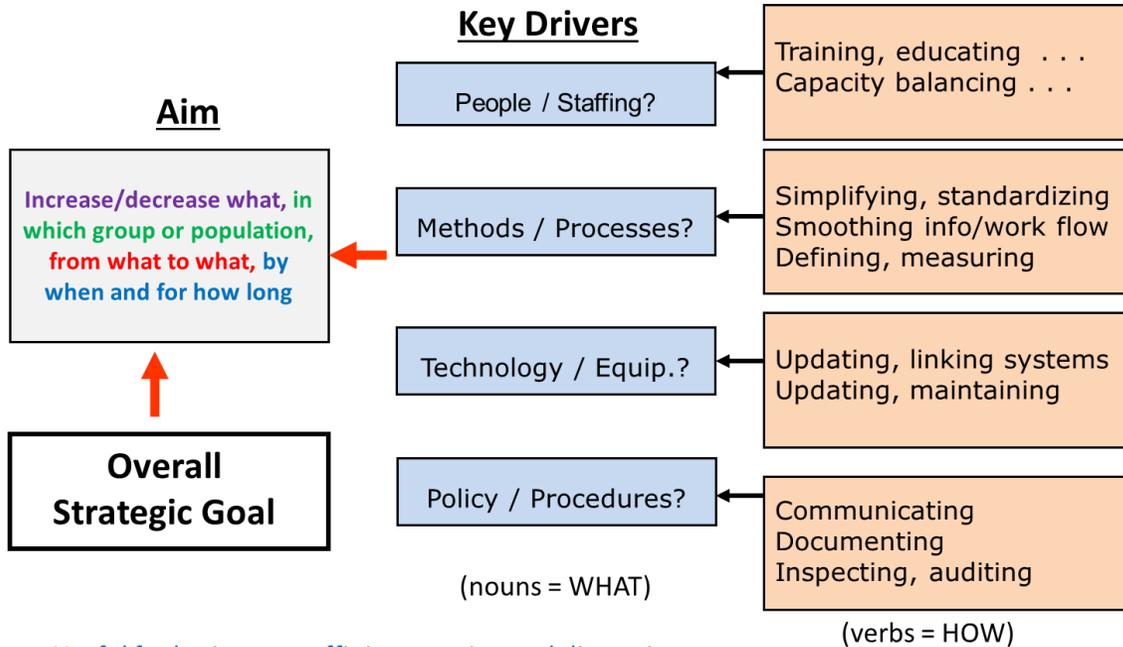Methods / Processes? ← Simplifying, standardizing Smoothing info/work flow Defining, measuring

Technology / Equip.? ← Updating, linking systems Updating, maintaining

Overall Strategic Goal

Policy / Procedures? ← Communicating Documenting Inspecting, auditing

(nouns = WHAT)

(verbs = HOW)

Useful for brainstorm affinity grouping and discussion starters ….

Collaborative QI Portal Library

T1D QUALITY IMPROVEMENT — Dashboard Compare Reports 💡 Library

All Resources	107
Adult practice	13
Advocacy	3
BG Composite	0
Bolus 3X among pump	0
Blood Pressure >140/90	1
CGM use	13
Change Packages	4
Composite Insulin use	0
COVID-19	15
Diabetes Screening	1

Hi Don, how can we help?

Welcome to our resource library. We have collected a range of articles and tools that will help you improve your center's metrics. For meeting minutes, presentations, and publications, visit our internal TIDX-QI webpage.

Search in All Resources

All Resources   Newest ▾

⊞ Quality Improvement, T1D Exchange

Baseline Quality Improvement Capacity of 33 Endocrinology Centers Participating in the T1D Exchange Quality Improvement Collaborative   View

👁 1 views   ⬇ 1 downloads   📅 Oct 24 2022

⊞ Adult practice, HbA1c Improved ≥ 0.5%, Quality Improvement

Factors Associated With Improved A1C Among Adults With Type 1 Diabetes in the United States   View

👁 0 views   ⬇ 0 downloads   📅 Oct 24 2022

Improving our [Multidisciplinary Team](#) Builds Capacity

Representing these roles

1. Endocrinologist/Clinical leader
2. QI Coordinator/Analyst
3. Educator/Social Worker/Nurse
4. Patient/Parent Advisor

Effort/Impact Prioritization
Builds Capacity

Prioritize
INTERVENTIONS

① ☐
② ☐
③ ☐
④ ☐
⑤ ☐
⑥ ☐
⑦ ☐
⑧ ☐
⑨ ☐
⑩ ☐

	Effort L/H	Impact L/H
①	L	H
②	H	L
③	H	H
④	L	L
⑤		
⑥		
⑦		
⑧		
⑨		
⑩		

Effort Impact Matrix		
	Low Effort	High Effort
High Impact	1	3
Low Impact	4	2

Quality Improvement Capacity – Questions / Discussion

Which Interests or concerns your team?

The most successful teams …

- **Quality** = the **_standard_** we adopt for best patient outcomes

  ⟵ Selected **_outcome and process measures_** that leveraged best results … using a smart AIM

- **Improvement** = the quality **_interventions_** we test, implement, and sustain

  ⟵ Mastered **_PDSA small tests of change_** for sustainable improvement

- **Capacity** = the strength of our team to **_operationalize_** quality improvement, drawing upon available:

  ⟵ Drew on local **_subject matter experts_**, and **_collaborative partners_** for interventions that worked

  Rapidly assembled a synergetic **_multidisciplinary team_**

- personnel

  ⟵

- resources

- time.

  ⟵ Identified which interventions will yield **_the most impact with the least effort_**