Learning Collaborative Purpose and Aim

Asthma is a significant problem in the United States and in New York with significant public health and financial consequences. Compared to the nation, New York has higher asthma emergency department (ED) and hospital discharge rates for all age groups. New York State’s rates are roughly twice the levels targeted in Healthy People 2020. The mission of the NYS Asthma Quality Improvement Collaborative (AQIC) is to improve the quality of asthma care and asthma-related health outcomes among children with moderate to high risk asthma in primary care and school-based health center settings using evidence-based practices.

The NYS AQIC will support participating organizations to use and implement evidence-based asthma care practices to create sustainable transformational practice changes over a period of 14 months starting in May 2018. Active and consistent engagement of a QI team from each clinical practice site will create an interactive, cross-team learning structure to support the design, testing, implementation, and spread of evidence-based and best practice approaches to delivering asthma care.

Learning Collaborative Measurement

Measurement will play several important roles throughout the project. It will help to identify points in your system that represent the greatest opportunity for improvement and allow you to try new and innovative ways to accomplish and sustain improvement over time. The data measurement plan which includes both process and outcome measures, will be used across AQIC teams to assess progress toward Collaborative and individual team goals. Participating teams will collect and report data, and analyze results monthly. The measures will be graphed to monitor progress over time and provide a consistent mechanism for the Improvement Advisor and AQIC Faculty to assess and provide Collaborative and individual team feedback.

Learning Collaborative Methodology

The AQIC will apply the Institute for Healthcare Improvement (IHI) Breakthrough Series (BTS) methodology as a vehicle for identifying, testing, and spreading changes that are effective for improving care and outcomes for defined populations. A BTS Collaborative brings together several teams from different organizations to seek improvement in a focused area. The BTS Collaborative structure includes Learning Sessions and Action Periods:
AQIC teams will learn to apply the Model for Improvement, a structured approach to system change used to drive improvement. AQIC faculty and staff will provide intensive support to the Collaborative to facilitate teams to achieve significant improvements in asthma outcomes. The Collaborative will be designed to achieve a well-focused, time-limited aim, using process and outcome measures to track improvement and evaluate progress.

**Learning Sessions (LS)** provide Collaborative teams with an opportunity to explore, in an interactive way, QI methods and techniques with the support of participating teams working to achieve a common outcome. Through plenary sessions, small group discussions and team meetings, attendees will:

- Learn from distinguished faculty and colleagues
- Receive coaching from faculty members and the Improvement Advisor
- Gather new knowledge on the subject matter and process improvement
- Create an action plan for improvement that will be carried out between learning sessions using plan do study act (PDSA) cycles
- Share experiences, challenges, ideas and solutions to overcoming improvement barriers

**Action Periods (AP)** consist of the times in between Learning Sessions. During Action Periods, Collaborative team members work within their organizations to test and implement an organizational approach to treating and controlling asthma. Teams remain in contact with each other and the Collaborative staff through ongoing email correspondence, updates to the Collaborative’s IHI Extranet site, and monthly calls/webinars.

### Collaborative Expectations

Participating organizations will commit to the following:

- Empowering a selected team of multidisciplinary individuals to represent your organization and all facets of the project such as: a physician, nurse practitioner, respiratory therapist, nurse, certified asthma educator, case manager/care coordinator/patient navigator, community health worker, IT expert, etc.
- Supporting team attendance and engagement in 3 Learning Sessions (2 in-person and 1 virtual)
  - Learning Session 1 (in-person*): June 7th and 8th in Albany, NY
  - Learning Session 2 (in-person*): TBD Fall 2018
  - Learning Session 3 (virtual): Spring 2019
  
  *Transportation and lodging expenses for in-person learning session will be covered as funds are available
- Completing all pre-work activities to prepare for Learning Sessions and Action Periods
- Reporting quantitative data on process and outcome measures, and qualitative data to provide details of changes made, throughout and at the conclusion of the Collaborative period
- Engaging in monthly action period webinars
- Performing rapid cycle PDSA tests of change on a set of quality improvement measures
- Collecting asthma qualitative and quantitative data and report progress via the IHI Extranet

**Interested practice sites should complete a brief interest form to receive additional details about joining the AQIC.**

Please email asthma@health.ny.gov with any questions.