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”Comparative effectiveness evaluation of audit and feedback strategies to improve integrated healthcare models for chronic and acute conditions”

Work Package 1 – Lazio

DIEPI Lazio
Dipartimento di Epidemiologia
del Servizio Sanitario Regionale
Regione Lazio

SALUTE LAZIO
SISTEMA SANITARIO REGIONALE

REGIONE LAZIO

Objectives

1 To define, compute and evaluate process and outcome indicators in order to identify potential weaknesses and inequalities in care pathways of chronic and acute conditions.

2 To assess the comparative effectiveness of three kinds of feedback strategies, in patients with **diabetes**, **chronic-obstructive pulmonary disease (COPD)** and **chronic heart failure (CHF)**.

3 To evaluate the effectiveness of different audit and feedback strategies for improving appropriateness and timeliness of emergency healthcare interventions, in patients with **acute myocardial infarction (AMI)** and **stroke**.

Two A&F Research Activities

EMERGENCY CARE (HOSPITAL)

AMI

STROKE

CHRONIC CARE (COMMUNITY)

DIABETES

COPD

CHF

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Study design and Audit & Feedback interventions

EMERGENCY CARE

AMI

STROKE

Study design

Pre-post intervention with a **control group**

TARGET

Hospitals: two groups of specialists involved in emergency care respectively for AMI and STROKE

AMI Cardiologists, Emergency medicine specialists, hospital healthcare managers

STROKE Neurologists, Emergency medicine specialists, hospital healthcare managers

Control group

Usual reporting activities

PREVALE Programma Regionale Valutazione degli Esiti degli Interventi Sanitari

A regional web based platform publicly available that regularly publishes several indicators measuring healthcare processes and outcomes for several chronic and acute health conditions including AMI and stroke.

Intervention

- **Periodic feedback reports** (every 6 months) including a series of outcome and process indicators at hospital level and references (standard, benchmark, regional mean, best performer)
- Guidelines for conducting **Audit meeting** after receiving each report
- A form for collecting **Audit characteristics** (date, participants, discussion of indicators, improvement activities identification, meeting report etc) to return to investigators

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Study design and Audit & Feedback interventions

Study design

pre-post intervention with a **control group**

TARGET

General Practitioners: receiving indicators on their own patients

Control group

Usual reporting activities

PREVALE Programma Regionale Valutazione degli Esiti degli Interventi Sanitari

MiSalVa

MiStraL
SISTEMA DI MISURA E STRATIFICAZIONE DEL LAZIO

Regional web based platforms publicly available that regularly publish several indicators measuring healthcare processes and outcomes for several chronic and acute health conditions including Diabetes, COPD and CHF.

Intervention

Middle-intensive ⇨ **Periodic feedback reports** (every 6 months) including a series of outcome and process indicators at General Practitioner (GP) level, compared to the standard of care, to the mean results at the level of the group of GPs working together, of the Health District and Local Health Authorities in which they work.

High-intensive ⇨ In addition to the feedback report, the GPs will be invited to participate in periodic **multidisciplinary and multiprofessional meetings** aimed to discuss critical indicators, related problems and possible solutions. In these discussion meetings will be also invited medical specialists for the conditions considered and representatives of the Management of the Health Districts. The meetings will be a part of an **educational and training course** mainly about guidelines for the management of the diseases considered and about the Audit & Feedback methodology.

State of the Art, Obstacles and Solutions

EMERGENCY CARE

What we have done…

CHRONIC CARE

- ✓ Hospital recruitment (on a voluntary basis)
- ✓ A baseline structured survey to the hospital recruited about the level of knowledge, application and characteristics of A&F methodologies at the hospital
- ✓ Consensus development about the indicators to be used for the feedback activities with the participants , using a modified Delphi methods, separately for AMI and Stroke.
- ✓ Drafting and sharing with the participants the form for the collection of Audit characteristics

- ✓ Local Health Authorities and Districts recruitment (on a voluntary basis)
- ✓ Selection and definition of indicators for the report
- ✓ Development of an educational and training course on clinical guidelines for the conditions considered and on A&F methodologies (in progress)
- ✓ Development of an interactive dashboard for the consultation of indicators (in progress)
- ✓ **Collaboration with all the involved stakeholders**

Main obstacles, besides the pandemic spread, and **proposed solutions**

Obstacles	Solutions
• Difficulties in Hospitals and LHAs, Districts and GPs recruitment (decline or no response to invitation).	Modification of the study design from RCT to pre-post intervention on voluntary participation (2021 as pre-intervention period)
• **Incompleteness of data** from health administrative databases for some indicators (emergency). • **Timeliness of data** from some health administrative databases for several indicators (chronic care, particularly during pandemic period)	• **Audit discussion** Discuss and collect possible problems of data recording and/or other issues from the participants. Collect and highlight critical points, possible solutions as final results of the project and to point out these in the final report • **Qualitative research**
• Perception of the intervention as imposed or as a mere judgement on the practice or just for a research interest	Share decision and co-design several characteristics and steps of the intervention with the involved professionals

Future activities (2022-2023)

What we will do…

EMERGENCY CARE

- ✓ Release of the first feedback (**January 2022**)
- ✓ First audit on feedback data (**January/February 2022**)
- ✓ Knowledge, Attitudes and Behaviours (KAB) on A&F survey pre-intervention (**January 2022**)

CHRONIC CARE

- ✓ Release of the first feedback (**January 2022**)
- ✓ First audit on feedback data (**January/February 2022**)
- ✓ Starting of the educational and training course on clinical guidelines for the conditions considered and on A&F methodologies (audit will be integrated in this course)
- ✓ Release of the interactive dashboard for the consultation of indicators (**June 2022**).
- ✓ Knowledge, Attitudes and Behaviours on A&F survey pre-intervention (**January 2022**)
- ✓ **Collaboration with all the involved stakeholders**

Other future activities

2022

- ✓ **January – June 2022** -> improvement activities identified during the Audits
- ✓ **June 2022** -> Second feedbacks and related Audits

2023

- ✓ **January 2023** -> Third feedbacks and related Audits
- ✓ **June 2023** -> Fourth feedbacks and related Audits

Post-intervention survey on KAB

Thank You

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