afhto

Moving beyond measurement to improvement in Ontario's interdisciplinary primary care teams

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The last will be first & the first will be last (Matthew, 20:16)…The Sports Illustrated jinx…The trouble with normal is it always gets worse (Bruce Cockburn, 1983)

Key messages

- AFHTO members are measuring – but **not all teams are improving** yet
- Performance of AFHTO members **might be regressing** to the mean
- Regression is **not inevitable**! AFHTO members can **do something** to avoid this "sophomore slump"
- Teams that are already improving might provide **clues for action** to help move beyond measurement

What is "improvement"?

3 groups of teams identified on basis of performance on core D2D indicators

Increasers:
Teams whose improvement between iterations was in top 10 for 2+ intervals (9 teams)

Decreasers:
Teams whose improvement between iterations was in the lowest 10 for 2+ intervals (13 teams)

Middle of the pack:
All others (140 teams)

What is the measurement of "quality"?

Overall quality based on average score of the composite **quality roll-up indicator** for each of the 3 groups. This is acceptable to do at the **group (vs team) level**, even with missing data, because imputation was done **randomly.**

Relationship between Improvement & Quality
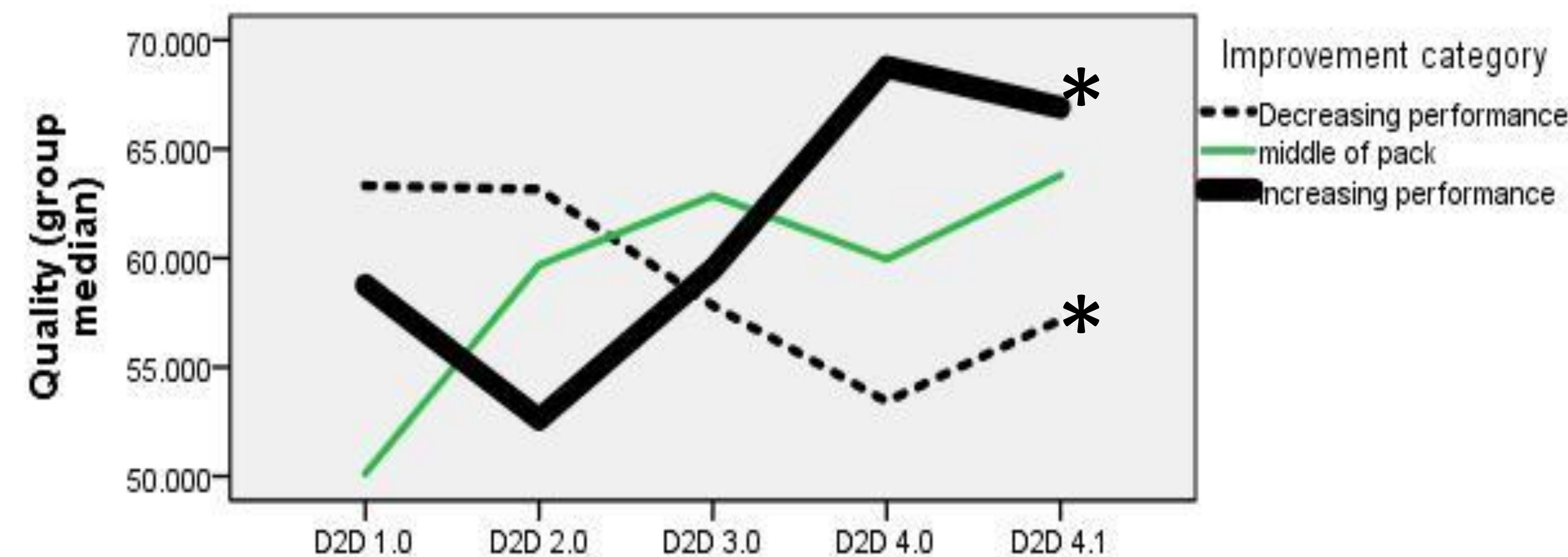
Increasers:
- Lowest overall quality in initial iteration (not significant)
- Highest in the 2 most recent iterations (p=0.10)

Decreasers:
- Highest overall quality in initial iteration (not significant)
- Lowest quality in all subsequent iterations (p=0.10)

Middle of the pack:
- Nonsignificant (or no?) changes in overall quality

*p-values reflect differences between increasers & decreasers

Who is improving?

- **Increasers** more likely than decreasers to have **better EMR integration** with hospital systems (OR=1.33, p<0.10)
- **No other differences** between increasers and decreasers in team size, patient complexity, or willingness of teams to be identified to their peers
- NOTE: study had **very low power**

Now what?

- **Refine definitions**: Decreasers may be increasing in non-D2D indicators; middle of pack may not be able to improve due to "ceiling effect"
- **Increase power**: Increase sample size with another iteration of D2D
- **Expand scope of data:** Collect qualitative data about team climate, physician champions, governance, QI processes and structures, etc
- **Compare/contrast:** Deepen analysis of differences between groups to **help the last get closer to the first** & **keep the first from getting worse**