



Robert Wood Johnson Foundation

**Aligning Forces
for Quality**



Wisconsin

ONE SIZE DOESN'T FIT ALL

The Aligning Forces for Quality (AF4Q) initiative in Wisconsin is led by the Wisconsin Collaborative for Healthcare Quality (WCHQ). Established in 2002, WCHQ is a voluntary consortium of organizations learning and working together to dramatically improve the health and increase the value of health care for the people of Wisconsin. The mission of WCHQ is to publicly report and bring meaning to performance measurement information that improves the quality and affordability of healthcare, in turn improving the health of individuals and communities.

A 28-member board of directors—including private-sector purchasers, consumers, physician groups, and hospitals—governs WCHQ.



One Size Doesn't Fit All

It all begins with data. When you slice and dice the numbers, African Americans with diabetes in Wisconsin are four times more likely than Caucasians with diabetes to have an amputation, according to 2010 Dartmouth Atlas data. The Wisconsin Collaborative for Healthcare Quality (WCHQ), leader of the Aligning Forces for Quality initiative in Wisconsin, is using a multi-pronged intervention approach to reduce racial disparities in care.

WCHQ is working toward a change in the culture of care to create a sustainable model. The Equity Improvement Initiative seeks to end disparities in care. Said Cindy Schlough, director of strategic partnerships with WCHQ, "This work is exciting because it does have the potential to have a long-lasting impact. People are getting ongoing support, and it's giving them hope about successfully managing their chronic conditions."

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WCHQ has partnered with Wheaton Franciscan Healthcare, a non-profit integrated health care system in Wisconsin, to identify and remove barriers to diabetes management. The whole process has been grounded firmly in data analysis; Wheaton Franciscan stratified its data by race, ethnicity, and language preference as part of its involvement with the Equity Improvement Initiative. This

helped reveal areas for improvement, such as diabetes management in the African American population.

Why weren't patient needs being met? Said Schlough, "The one-size fits all approach doesn't fit every population. We need to meet patients where they are." Disparities in care aren't simply the result of one factor, like language preference.

Attitudes toward chronic disease management have real implications for what type of chronic disease interventions will succeed.

Wheaton Franciscan Healthcare conducted a series of focus groups with patients to identify barriers to self-management, attitudes about diabetes, and care needs. The focus groups demonstrated that, most of all, patients wanted recognition of the challenges they faced. Many patients also expected they would get diabetes at some point in their lives; they accepted its inevitability. Attitudes toward chronic disease management have real implications for what type of chronic disease interventions will succeed.

The focus groups also revealed the benefits of peer-to-peer support for at-risk patients. Said one focus group member, "Being around others is motivating. People can give each other ideas."



The focus groups led Wheaton Franciscan to develop an innovative intervention program. First, it is implementing the community health worker model. Community health workers help connect patients to community resources for education and support based on each patient's unique needs. They also act as liaisons between patients and their providers.

"Community health workers are a trusted part of the whole care team," said Rosha Hamilton, director of community and patient health education with Wheaton Franciscan Healthcare. "Patients feel comfortable opening up to them about their needs."

Additionally, a series of education sessions and weekly support group meetings help

patients discuss best practices and lessons learned. Patients wanted a care team in one place to help deal with the complexities of managing diabetes. A nutritionist helps patients eat to manage their diabetes. Other sessions focus on how to get more exercise and cook differently at home. "Patients have said, 'We know we're supposed to eat differently, but how?' " said Hamilton. "The support group gives them the tools."

Wheaton Franciscan is tracking outcome data for participating diabetes patients to measure the effectiveness of the new intervention program. A baseline was established at the beginning of the program for several key indicators of diabetes care, which will be compared to measurements taken at program completion.

The Equity Improvement Initiative has the potential to be replicated in other disease populations as well, beginning with a thorough examination of data. "In the future, we want all our data to be stratified by race, ethnicity, and language to make sure that there's equity in all health care—that it's not just one group improving while another gets worse," said Leslie Galloway Sherard, director of diversity and inclusion programs with Wheaton Franciscan Healthcare.

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