



Department
of Health



Data Disparities Drill Down

February 26, 2019

Agenda

- The System of Profound Knowledge
- Drilling Down Data to Discover Disparities
- Discussion: Real Life Drill Downs

Learning Objectives

- Understand how to calculate viral load suppression rates for subgroups of patients to identify disparities in health outcomes
- Share ideas with peers about how to improve VLS rates among specific populations

W. Edwards Deming's System of Profound Knowledge

Appreciate the System	Understand Variation
Psychology	Theory of Knowledge

Deming's System of Profound Knowledge

- As you think about disparities amongst patient groups, keep in mind Deming's System of Profound Knowledge:
 - Psychology of patients and clinic staff
 - Systems within which they work and live
 - Variation in lives and data outcomes, both expected and unexpected
 - What is known about working with this community of patients and how that can impact your work

Drilling Down Data to Discover Disparities

Exercise Outline

- Participants will split into four groups to represent four different clinic teams
- Each team gets a brief description of the resource at their clinic
- Each clinic team will receive patient data for their clinic, including viral load test results and patient characteristics. Each team will also receive a blank table with 4 subgroups listed at the top.
- Each clinic team will be asked to identify which patients belong in each subgroup and then to calculate the viral load suppression rate of each cohort of patients.
- Each clinic team will discuss, based on their calculations and background information on the clinic, how they will prioritize process improvements to support viral load suppression

How to Calculate Viral Load Suppression Rate

Numerator: Number of patients suppressed* at last viral load.

Denominator: Total number of eligible** patients.

*Suppressed as defined in your program (ex. VL<200)

**eligible as defined by your program (ex. On ART >12 weeks)

Background on Clinics

- **Clinic A:** has a special grant to provide care for adolescent girls and young women, does not provide substance use treatment services onsite.
- **Clinic B:** has strong linkage with an organization providing supportive services in the LGBT community and a special funding for providing services to sex workers.
- **Clinic C:** has a support group for adolescent girls/young women and substance use treatment services onsite.
- **Clinic D:** has support groups for MSM and sex workers but no substance use treatment services onsite.

Do you know the Drill? (20 minutes)

- Using your clinic's data, fill in the clinic cohorts table, identifying
 - Adolescent Girls/Young Women (<25)
 - Sex Workers
 - People with Active Injection Drug Use
 - Men who have Sex with Men (MSM)
- Record the patient number and corresponding VL result that belong in each cohort
- Once the Clinic Cohort Table is complete, calculate the VLS rate for each cohort.

Discussion Questions (20 minutes)

- Given these data results and additional clinic information, how would you prioritize process improvements to support viral load suppression?
- What other factors would you consider in prioritizing process improvements?
- Using Deming's System of Profound Knowledge, what is your plan to improve the viral load suppression rate of your clinic?

Discussion: Real Life Drill Down

- In your actual clinic, what are you currently doing to address disparities?
- What processes are currently in place to help patients who are not viral load suppressed to become and sustain VLS? (Consider mapping out the current step-by-step processes by developing a process flow diagram.)
- What strategies (process changes) could you test to help patients who are not suppressed to become and sustain viral load suppression? How can you tailor your improvement activities to meet the needs of the identified subgroups? How will you know if a change is an improvement?
- How can team members in your group work collaboratively to improve the rate of viral load suppression?
- What are the opportunities of a team approach to improving the rate of viral load suppression?
- What are the challenges?
- How can challenges be overcome and opportunities be capitalized upon to move from ideas to action?

Thank you!!!

References

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