

Aligning Forces for Quality in Kansas City A Community Snapshot

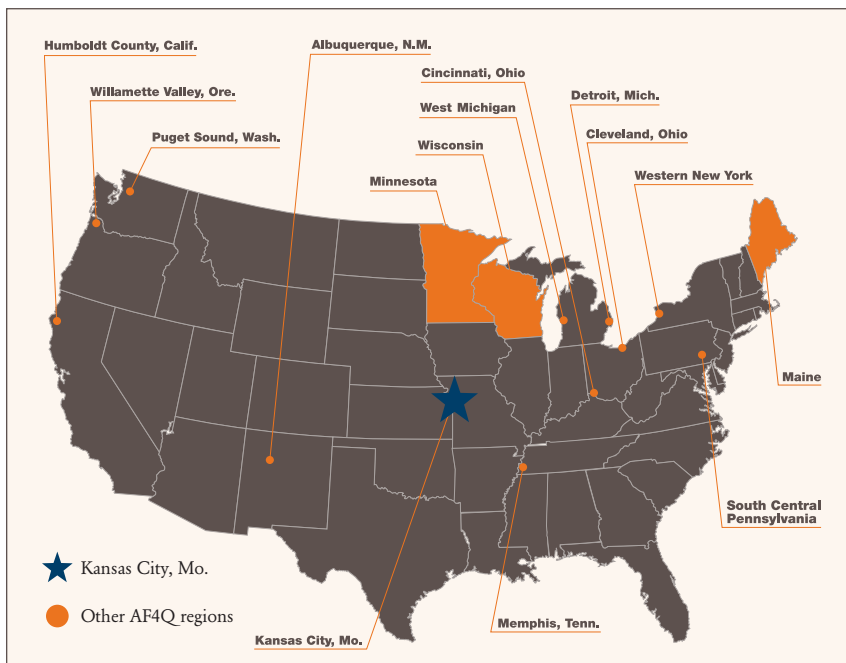
Located near the center of the continental United States, the Kansas City area proclaims itself “the heart of America.” A staging point for pioneers heading west in its early years, it quickly grew into one of the nation’s main rail hubs and soon boasted one of its biggest stockyards. Today it has a stable, diversified business base grounded in telecommunications, transportation, agribusiness, and consumer goods and services.

But even economically hardy regions like the Kansas City area face tough social problems, including serious health care challenges. According to the Dartmouth Atlas of Health Care, African Americans there face a four-times greater risk than whites of losing a leg to diabetes. The region’s health care system is straining under the weight of rising costs, a growing uninsured population and an explosion of chronic illness tied to obesity.

Kansas City is hardly alone. These are examples of a broader crisis in the quality of care that the U.S. medical system delivers. The statistics in Kansas City are repeated in community after community, endangering the health of millions. And it is not just the failure to deliver care that contributes to the quality problem. Delivering care that harms people—or delivering care that people do not need—is adding billions of dollars to the national health care bill and is one reason why so many Americans cannot afford health insurance.

While the health care crisis is national, care is delivered locally. That is why the Robert Wood Johnson Foundation (RWJF) is investing \$300 million in promising efforts to improve local health systems in Kansas City and 14 other regions across the nation. Called *Aligning Forces for Quality* (AF4Q), the initiative brings

an unprecedented commitment of resources, expertise and training to turn proven health care reforms into real results at the community level. The AF4Q initiative focuses on the full continuum of health care delivery—the care provided in doctors’ offices, clinics and hospitals, and the support provided in the community. It also emphasizes reducing racial and ethnic disparities in care and strengthening nursing’s role in improving quality. It advances three interrelated reforms that experts believe are essential to improving health care quality:



The Robert Wood Johnson Foundation’s Aligning Forces for Quality initiative is a \$300-million commitment of resources, expertise and training to turn proven health care reforms into real results in Kansas City and 14 other regions across the country.

- **Performance measurement and public reporting:** using common standards to measure the quality of patient care and publicly disclosing that performance information.
- **Consumer engagement:** educating patients about their local health care systems to encourage them to demand higher-quality care and help them take a more active role in their own health.
- **Quality improvement:** implementing techniques and protocols that let doctors and hospitals raise the quality of care they deliver to patients.

This snapshot describes how the AF4Q initiative is being implemented in Kansas City and the progress being made on these three main fronts.

How AF4Q is Being Implemented in Kansas City

In 2007, RWJF selected the Kansas City Quality Improvement Consortium (KCQIC), a bi-state nonprofit health care coalition, to implement the AF4Q effort in metropolitan Kansas City. KCQIC unites health care consumers, payers, providers and other key stakeholders in five Kansas and Missouri counties in a joint effort to broaden access to high-quality health care.

KCQIC was chosen through a competition to find groups best positioned to make fundamental, cutting-edge changes to their region’s health care system. In addition to expertise, technical assistance and training from national experts, RWJF is providing KCQIC with more than \$1 million over three years and access to additional grants for specific projects.

KCQIC has also drawn the federal government’s notice as a promising national model. The U.S. Department of Health and Human Services recently added it to its national network of 25 Chartered Value Exchanges. Membership gives KCQIC access to technical assistance that will enrich its AF4Q work, plus opportunities to learn from other collaboratives pursuing data-driven quality improvement.

The Kansas City consortium’s goals for AF4Q include:

- equipping consumers to make informed health care choices,
- encouraging physicians to adopt publicly reported performance measures and other processes to improve health care quality for patients, and
- increasing the role of family and community resources in helping people select health care services.

Kansas City Overview

AF4Q service region:

- 5 counties: Johnson and Wyandotte in Kansas; and Clay, Jackson and Platte in Missouri

Health system:

- General hospitals:¹ 25
- General hospital beds:¹ 5,277
- Primary care providers (M.D.s):² 1,005
- Primary care physicians (D.O.s):³ 584

Population:⁴ 1,643,998

- White: 81.4%
- African American: 14.0%
- Asian: 2.3%
- Two or more races: 1.7%
- American Indian or Pacific Islander: < 1.0%
- Hispanic: 7.9% (includes all races)
- Under age 18: 26.0%
- Ages 18–64: 62.9%
- Ages 65 and older: 11.1%

Per capita income:⁵ \$28,317

Uninsured (ages 18–64):⁶ 14.6%

Progress on Performance Measurement and Public Reporting

In most places in the United States, information about health care quality is siloed in a number of sources. The 15 AF4Q teams are forging relationships and breaking down barriers between health care providers, payers and employers to create common systems for collecting and reporting health care performance data.

In addition to collecting and reporting performance data, all AF4Q teams are seeking ways to measure and analyze their community's overall health. These efforts can help them identify public health interventions in tandem with improvements in care in clinical settings.

KCQIC has considerable experience with health care performance measurement and reporting. Since 2003, it has been gathering physician performance data on asthma and diabetes care from local health plans. The indicators are based on national standards for such care. It then reports the results to primary care physicians and, by request, to group practices. It also publishes findings on physicians' collective performance that are reported on widely by the local media.

KCQIC will use its AF4Q funding to begin collecting and reporting physician performance data for more chronic diseases, performance data for hospitals and measures of patient satisfaction with their doctors and hospitals. It will also begin to analyze hospitals' performance data on the basis of patients' race, ethnicity and primary language to spot potential disparities in the care they receive. The newly expanded reports will be published on KCQIC's Web site (www.kcqic.org). It also has enlisted local physicians and consumers to help it make those reports more user-friendly.

Progress on Consumer Engagement

The Kansas City area has a long history of community activism. KCQIC is using its AF4Q funding to enhance the role that families and communities play in helping patients manage their health, with a focus on chronic conditions, minority populations and stronger partnerships between patients and their physicians.

For example, KCQIC recently launched a communitywide chronic-illness awareness campaign called "KC Kick It Up a Notch" in conjunction with the Kansas City Chronic Disease Coalition, a nonprofit group that works to fight diabetes and heart disease in the region's urban core, and the Kansas City Local Investment Commission, another nonprofit group that aids low-income children and families. The campaign uses advertising in newspapers, buses and on billboards and distributes "Kick It Up a Notch" materials in doctors' offices, churches and the like to teach local residents how to prevent and manage chronic diseases. It also advises doctors on ways to improve their care.

KCQIC also distributes "Healthy Habits" brochures in English and Spanish on diabetes, heart failure, hypertension, asthma, obesity, depression and tobacco use; sponsors "Diabetes at Work" sessions at local businesses; and trains caregivers for patients with chronic illnesses.

Progress on Quality Improvement

Quality improvement efforts in health care increasingly focus on lifting the performance of entire systems, not just that of individuals. All 15 AF4Q grantees have been asked to consider ways to create a permanent quality improvement resource in their community, for example by identifying or founding an entity or setting up a network to share knowledge and best practices on improving care.

KCQIC's quality improvement and consumer engagement efforts are closely intertwined. For example, it has used its AF4Q funds to forge closer bonds with neighborhood, faith-based, cultural and school-based groups. Those linkages, in turn, led to the creation of a healthy lifestyles support program that pairs local young people with adult mentors.

KCQIC's physician leaders, meanwhile, were instrumental in obtaining commitments from several local hospitals to begin collecting performance data based on race and ethnicity and to take other steps to improve their quality of care. KCQIC expects at least five local hospitals to implement RWJF's and the Institute for Healthcare Improvement's *Transforming Care at the Bedside* quality initiative.⁷

Aligning Forces for Quality

The premise of AF4Q is that these strategies—public reporting and performance measurement, consumer engagement and quality improvement—must be implemented in a coordinated way in order to lift the overall quality of health care. That is why the overarching goal of both the national AF4Q program and KCQIC in Kansas City is to bring community stakeholders together to drive change on these three critical fronts to improve health and health care quality.

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For more information about AF4Q in Kansas City, visit www.kcqc.org and www.rwjf.org/qualityequality/af4q/communities/kc.jsp.

Research for this report was provided by the Aligning Forces for Quality Evaluation Team at Penn State University's Center for Health Care and Policy Research, which is studying the AF4Q initiative to gain insights about community-based reform that can guide health care practice and policy. For more information, visit www.bhdev.psu.edu/CHCPR/activities/project_alignforce.html.

¹2005 American Hospital Association Annual Survey of Hospitals (taken from the 2007 HRSA Area Resource File).

²2006 American Medical Association Physician Masterfile (taken from the 2007 HRSA Area Resource File).

³2004 American Osteopathic Association (taken from the 2007 HRSA Area Resource File).

⁴2007 Population Estimates—U.S. Census Bureau.

⁵2005–2007 American Community Survey 3-Year Estimates.

⁶2005 Census Small Area Health Insurance Estimates.

⁷For more information, visit www.rwjf.org/files/publications/other/TCABBrochure041007.pdf.