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## The 65th ASH Annual Meeting Abstracts

## POSTER ABSTRACTS

## 901.HEALTH SERVICES AND QUALITY IMPROVEMENT - NON-MALIGNANT CONDITIONS

## The Quest for Improving Sickle Cell Care: Creating High-Level Quality Improvement Goals with a Care Process **Team**

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Background: A Care Process Team (CPT) is an interdisciplinary team focused on improvement effort across systems or a population cohort with high degree of variation in care, high volume, high cost, or institutional priority. The Texas Children's Hospital Quality & Safety Department has implemented CPTs for several disease populations including, asthma, diabetes, and pain management.

In 2021, the sickle cell CPT (SCCPT) was launched in partnership with the Texas Children's Cancer and Hematology Center. An early step in developing a CPT is delineating goals via a balanced scorecard, a comprehensive framework that translates the team's strategic objectives into a coherent set of performance measures. After establishing priority quality metrics, the SCCPT sought to establish an operational structure and to define and implement specific quality improvement (QI) initiatives to improve outcomes.

Methods: The SCCPT assembled a multi-disciplinary expert panel which included providers, nurses, division leadership, data architects, analysts, and quality specialists. After a systematic review of the literature identified metrics with best practice evidence, a modified-Delphi process was used to rank quality metrics according to standards set forth by the National Quality Forum. High-priority metrics were organized into a balanced scorecard. Goals were developed based on Institute of Healthcare QI methodology. A QlikView® dashboard was created to abstract patient data from the electronic medical record.

Results: The expert panel met 7 times between January to October 2021. The systematic review found 26 quality measures for SCD and subsequently panel review expanded the list to 34 measures. Expert consensus was reached and 5 metrics were selected for the final SCCPT balanced scorecard.

The SCCPT initiated routine meetings in January 2022. Three goals and SMART aims were prioritized from balanced scorecard metrics relating to stroke screenings, disease-modifying drug education and prescriptions, and assignment of a primary Hematology team. Baseline data revealed that 60% of eligible children with SCD had obtained a transcranial Doppler ultrasound within the last 15 months. Hydroxyurea was prescribed to 70% of patients with Hb SS or S/beta-0-thalassemia disease. Primary Hematologist and nurse coordinator teams were assigned to 50% and 23%, respectively. To design and implement QI projects, two teams were created: one focused on prevention-related metrics and the other on treatment-related metrics. Discussion: The successful launch of the SCCPT involved the convening a team of multi-disciplinary members, creation of a balanced scorecard, prioritizing goals, and analyzing baseline data to set SMART aims related to improving SCD care. Two operational teams were created and have proceeded to design and implement QI projects related to SMART aims.

Disclosures Fasipe: Forma Therapeutics: Consultancy, Ended employment in the past 24 months; Novartis: Consultancy, Ended employment in the past 24 months; Global Blood Therapeutics: Consultancy, Ended employment in the past 24 months. Tubman: Perkin Elmer: Honoraria; Vertex Pharmaceuticals: Consultancy; Blueprint Medicines: Consultancy; Global Blood Therapeutics: Consultancy; Novartis Pharmaceuticals: Consultancy.

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