



Improvement Partnerships to Advance Child Healthcare Quality

An Improvement Partnership (IP) is a durable state or regional collaboration of public and private partners that uses the science of quality improvement and a systems approach to improve healthcare infrastructure and practice. Improvement Partnerships bring together key players from across the healthcare system who can effect desired changes. This coordination supports quality improvement in the clinical settings where care takes place and promotes policy changes at the regulatory or state levels to sustain these improvements in care.

Improvement Partnerships draw from the collective expertise of a wide range of partners, including representatives from state Medicaid, public health, mental health and education agencies; professional organizations (e.g. local chapters of the American Academy of Pediatrics and American Academy of Family Physicians); academic institutions; children's hospitals; healthcare delivery institutions; policymakers; private insurers; schools; pediatricians; family practitioners; obstetricians and others to 1) create a unified vision around issues related to child/adolescent healthcare and health outcomes and 2) develop concrete, measurement-based efforts to achieve that vision. IPs serve as *both* a coordinating body *and* an action arm to reduce redundancies, build infrastructure and provider capacity for improved child health, measure performance and develop and disseminate best practice. More specifically, IPs:

- Develop and test strategies, measures and tools
- Serve as a resource to practitioners for support and technical assistance for quality improvement activities
- Translate knowledge through engagement of national and local experts
- Disseminate findings in peer-reviewed journals and other publications
- Inform policy
- Serve as convener at the state and local levels
- May provide opportunities for pediatricians to fulfill Maintenance of Certification (MOC) Part IV requirements

To date, IPs exist or are forming in: Arizona, Connecticut, Idaho, Indiana, Iowa, Maine, Michigan, Minnesota, New Mexico, New York, Ohio, Oklahoma, Oregon, Rhode Island, Utah, Vermont, Washington, Washington DC, and West Virginia.

The National Improvement Partnership Network (NIPN)

In July 2009, in response to a growing interest across IP states to pool resources and share learnings, the National Improvement Partnership Network (NIPN) was established. Vermont's IP, the Vermont Child Health Improvement Program (VCHIP), provides leadership to NIPN. NIPN works to 1) convene its member state groups for monthly conference calls and annual national meetings; 2) facilitate "peer learning" and connections across IP states; 3) serve as a repository for tools, measures, evaluation resources and other materials and 4) disseminate findings through peer-reviewed journals and other publications. Through funding from Maine and Vermont's Children's Health Insurance Program Reauthorization Act (CHIPRA) Quality Demonstration grant, VCHIP will work to expand the national network to an additional 20 states through February 2015 by providing technical assistance to states for development of an IP program.

More and more, states are looking to Improvement Partnerships as an effective approach to realize meaningful improvements in the quality of care provided to children.

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