

PRESENTED AT THE 2011 DNP CONFERENCE

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Abstract Category: DNP in Clinical Leadership

Title: Project ABI: implementation of evidence-based chronic disease care

Purpose: To pilot a program providing primary care team education to enable peripheral arterial disease (PAD) clinical practice guideline (CPG) implementation as a route to improve chronic disease management and self-care.

Objective 1: Innovation of primary care chronic disease management through ABI measurement, and PAD education presented in workshops. Participating sites were provided an ABI Tool Kit and clinical specialty support over a 3-month period to generate revenue and income

Objective 2: Collaboration enhancement between primary care providers, and specialty clinicians to support PAD assessment and management within primary care. Collaboration was gained through post workshop survey to assess outcomes and evaluate the workshop.

Objective 3: Resource efficiency enabled by inclusion of ABI assessment in primary care settings as a means of providing cost effective PAD care. The point of care change was evidenced by post workshop tally of ABI assessments with an end-point of medical management

Abstract:

Problem: Chronic disease management is the most common and costly of all health problems and has become an epidemic of unparalleled proportion in the United States (CDC, 2003). Evidence: Effective regional programs are the best route to afford health care system change to support care improvement, and help providers redesign care (IOM, 2001). Strategy: Develop and pilot a program providing primary care team education to enable peripheral arterial disease (PAD) clinical practice guideline (CPG) implementation as a route to improve chronic disease management. The plan is to provide PAD/ABI workshops to primary care practice teams. The project objectives are: Innovation of primary care chronic disease management through ABI measurement and PAD education workshops. Participating sites are provided an ABI Tool Kit and clinical specialty support for 3 months to generate revenue through ABI measurement affording ABI Tool Kit purchase to sustain the practice change. Practice change is evidenced by ABI assessments and ABI Tool Kit procurement. Collaboration enhancement between primary care providers, and specialty clinicians gained through post workshop survey to assess outcomes and evaluate the workshop. Resource efficiency enabled by ABI assessment in primary care settings as a means for cost effective PAD care evidenced by post workshop tally of ABI assessments with an end-point of medical management or appropriate timely specialty care referral. Evaluation: Findings support: a) program potential to enable PAD CPG implementation for improvement in chronic disease care; b) ABI measurement can be effectively tasked to medical assistants when supervised by

knowledgeable providers, and c) engaging in ABI measurement is challenging to incorporate into primary care practice, but offers providers a valuable tool to improve PAD care. Recommendations: Refinement of workshop format and delivery is recommended. Longer post workshop interval for skills acclimation and more focus on reimbursement documentation could improve outcomes.