

**How Pediatric Rheumatologists and Children
with Juvenile Idiopathic Arthritis Benefit from PR-COIN**
AN INNOVATIVE APPROACH TO IMPROVING OUTCOMES FOR CHILDREN WITH JIA

Pediatric Rheumatologists and PR-COIN

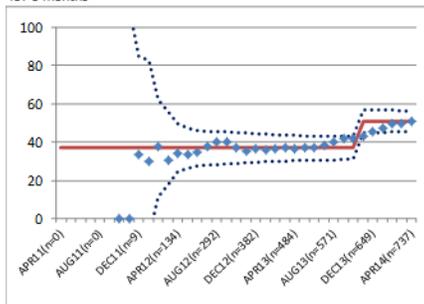
The Pediatric Rheumatology Care and Outcomes Improvement Network (PR-COIN) was established in 2011. Twenty member teams are committed to this multicenter research and improvement network to develop, evaluate and spread disease management and treatment strategies that most effectively care for and improve outcomes in remission, functional status, and pain for children and teens with Juvenile Idiopathic Arthritis (JIA). Since relatively small numbers of patients with JIA are seen at any individual center, and most centers lack sufficient resources to support population management capability, such a multicenter network is necessary to collect data in a dynamic population registry and identify best practices through data analysis.

PR-COIN's secure, de-identified registry is designed to aggregate data submitted by member sites and study patient outcomes to better understand which treatment approaches are optimal. Registry data are available to teams through monthly reports (see more below) and as a powerful Population Management Tool that stratifies aggregate and team data. For instance, based upon the Population Management Tool a physician could determine which ANA + patients with systemic JIA on medications reported pain levels above 4. Furthermore, members are privileged to analyze and publish registry data, plus participation in PR-COIN satisfies Maintenance of Certification Part IV requirements.

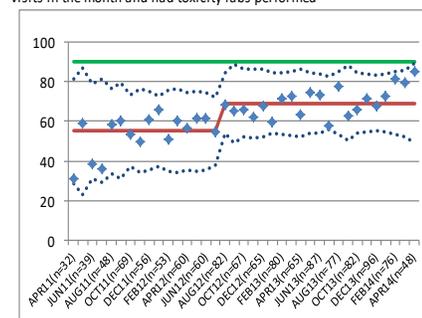
PR-COIN identifies and recommends best practices largely based upon literature, and robust analysis of the secure, web-based population registry. Teams are equipped to implement these practices through training in basic Quality Improvement techniques – which may be applied when enhancing any clinic processes for any condition. To facilitate improvement, teams are provided detailed information and support via PR-COIN communication tools, in monthly webinars and in semi-annual workshops where all teams share tips and experiences, documents, and success factors leading to improved results. Teams receive further assistance for implementing improvements through informative and effective tools, and personalized coaching enabling them to test and firmly imbed innovative ideas and processes at their clinic sites.

Monthly collaborative aggregate and team-specific performance reports are of great value in effectively guiding and prioritizing team activities since these reports graphically depict the success of improvements over time. Example measures include how reliably individual teams (and the entire network) perform specific processes including Physician Global Assessment, Medication Counseling, Quality of Life assessments etc., and display the extent to which patients are experiencing remission, high physical function, low levels of pain, and other important care indicators. By employing PR-COIN improvement methods aggregate results demonstrate teams are making statically significant improvement in processes measuring remission for patients on medications for more than 6 months, and in the way patients receive toxicity screening and medication counseling. Likewise, five individual PR-COIN teams statistically improved their performance in team specific measures. Working together PR-COIN teams are improving the care they provide.

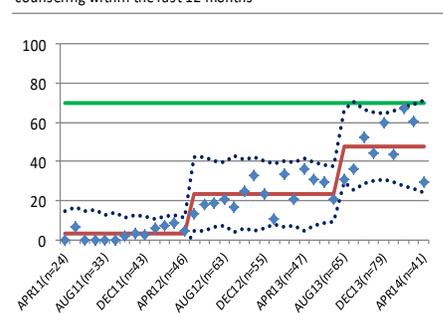
Percent of patients in remission on medications for 6 months



Percent of patients on non-biologic DMARDs who had visits in the month and had toxicity labs performed



Percent of patients on DMARDs who had medication counseling within the last 12 months



Recognizing that most patients with rheumatologic conditions experience the vast majority of their care away from the clinic setting, PR COIN began launching a series of interventions to engage patients and their families with the process of care delivery. Early efforts established volunteer parents as our Parent Work Group that advises teams and the network on methods for more effectively communicating with patients. PR-COIN provides a unique opportunity to bring the parent perspective into your team as an active partner.

To qualify for these and other benefits, PR-COIN teams pay \$20,000 annual membership fee plus travel to semiannual conferences. Additional team resources include staff time for monthly webinars, data entry and performing improvement interventions. Contact PR-COIN for more information at pr-coin@cchmc.org or visit our website www.pr-coin.org