

## JCCHD QI Task Force Members

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# JCCHD

**Joint Council on Congenital Heart  
Disease**

**National Quality Improvement  
Collaborative**



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**Joint Council on  
Congenital Heart Disease**

**JCCHD National  
Collaborative for  
Improvement in Pediatric  
Cardiovascular Disease**



Join cardiac centers from across the country  
in a network designed to improve care  
for children with cardiovascular disease.

**[[www.jcchdqi.org](http://www.jcchdqi.org)]** ◀

## You are invited:

Join us in improving care for children with cardiovascular disease. Pediatric Cardiology programs of all sizes are invited to participate in this collaborative.

Activities include: three 2-day workshops, monthly teleconferences, data collection and improvement projects that will begin in Spring 2009.

This project will meet Maintenance of Certification requirements of the American Board of Pediatrics.

## Benefits

- Participation in and access to a national improvement database —designed for and by Pediatric Cardiologists.
- Opportunity to learn from and share successes with clinical teams from other centers participating in the learning collaborative.
- Regular performance reports for your site, and the opportunity to benchmark against aggregate collaborative data.
- Improvement science training through learning collaborative methodology.

## Our Mission

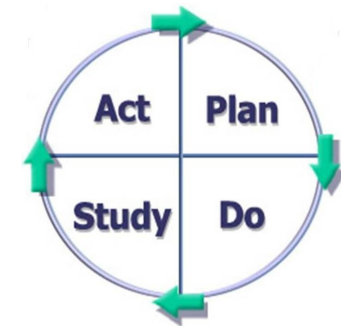
The mission of the JCCHD National Quality Improvement Collaborative is to improve dramatically the outcomes of care for children with cardiovascular disease.

The initial activities of the JCCHD National Collaborative are:

- 1) To build a sustainable collaborative network of pediatric cardiologists in North America, including a registry database, to inform future improvement projects. This network will provide opportunities for pediatric cardiologists to collaborate on quality improvement and research projects.
- 2) To plan and implement a quality improvement project intended to improve survival and quality of life of infants with HLHS during the “interstage” period between discharge from Stage 1 Norwood and admission for Stage 2 bidirectional Glenn.

## Project Requirements

- Formation of a 3-4 person core improvement team that will participate in collaborative and attend workshops.
- Monthly data collection via secure web-based database to document clinical care processes and outcomes.
- Willingness to evaluate clinical “change packages” intended to improve processes and outcomes.
- Organizational Senior leadership commitment to support improvement team and activities.



## Currently Participating Sites

- Children’s Hospital Boston
- Children’s Hospital Omaha
- Cincinnati Children’s Hospital Medical Center
- Children’s Hospital Cleveland Clinic
- Mattel Children’s Hospital at UCLA
- Children’s National Medical Center
- Texas Children’s Hospital