

# QIDS

## Quality Improvement Demonstration Study

A DOH-PhilHealth-UCSF-UPecon Partnership

Research Bulletin No. 5

October 2006

### QIDS Commences Round 2 Surveys

On September 1st, 2006 QIDS officially started its second round of data collection. Over the next several months, QIDS field staff will conduct patient exit surveys (3,000), household surveys (1,800), physician surveys, vignettes (150), and facility surveys (30) in 30 QIDS sites across the Visayas. Data collection will follow round one procedures. We will obtain important biomarkers including c-reactive protein (CRP), folate, hemoglobin, and lead levels in blood; conduct psychological assessments on children; conduct surveys on households where our index children reside and administer vignettes to physicians. (See Figure 1 for the QIDS sampling scheme).

In addition to the above sampling scheme, the QIDS team will re-survey 1,500 children who were interviewed as pneumonia or diarrhea patients in the 2003 baseline round. Information from these panel children should help QIDS monitor the potential long term effects of the QIDS interventions on this cohort of children.

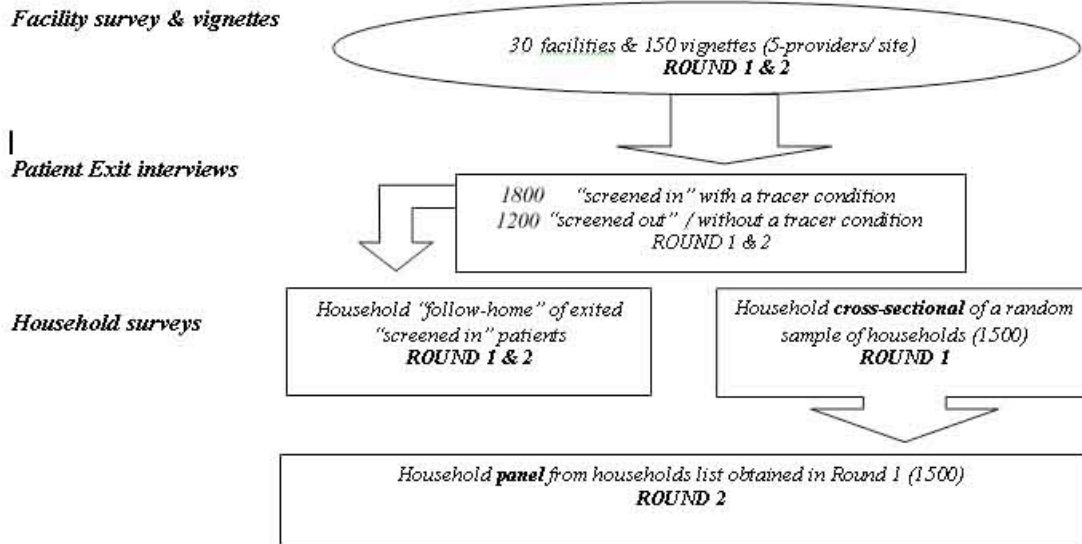
A second round of data collection is critical to help QIDS achieve its primary objective of evaluating the impact of health policy on the health status of children in the context of a natural policy experiment. The two policy interventions include expanded health insurance coverage for indigent children and bonus scheme to improve quality of care provided at the district hospitals. To model elements of the gold standard of study design, QIDS incorporated randomization and use of controls in our study design. We selected and recruited 30 districts

hospitals in the Visayas, organized them into matched blocks of three, and randomly assigned these two policy interventions. Finally, we included control sites to isolate the effects of these policy interventions. This carefully constructed study design allows us to compare policy effects before and after the policy interventions were launched, as well as analyze effects across each intervention.

Preparations for the start of Round 2 were underway as early as January 2006. Over the last seven months, baseline data were analyzed, field notes from the previous round were compiled, questionnaires were reviewed, and interviewers and field supervisors were recruited and trained. The QIDS Round 2 field team boasts a total field staff count of 69:30 medical technologists, 26 psychologists, 9 supervisors, 3 regional managers, and 1 survey leader. The field staff is carefully supervised by a pathologist and a professional psychologist to ensure that blood drawing and psychological tests are conducted appropriately and in a timely, professional manner. Quality of field work is consistently monitored at multiple levels to ensure we collect high quality, accurate data.

QIDS expects to complete its second round of data collection within 12 months. This next round of data collection provides a more definitive point of comparison from which the QIDS team and its collaborating partners can carefully assess the measurable effects of two major health reforms on the health status of Filipino children.

Figure 1: QIDS Sampling Frame



The Quality Improvement Demonstration Study (QIDS), which is jointly being undertaken by the Department of Health (DOH), Philippine Health Insurance Corporation (PhilHealth), University of California San Francisco (UCSF), and the UPecon Foundation, attempts to evaluate policy interventions implemented under the DOH Health Sector Reform Agenda. QIDS is funded by the US National Institutes for Health and PhilHealth.

QIDS evaluates the impacts of three policy interventions of interest to PHIC: expanding access to PhilHealth benefits for the most vulnerable populations; targeting bonuses for high quality care that leads to better health outcomes; and the current benefit program. In the QIDS project, these three interventions were randomly assigned to 30 district hospitals in the Visayas. To determine which intervention results in the greatest health benefits, QIDS is carrying out evaluations at baseline, every quarter and at the end-of-project. There are surveys of hospitals, physicians, exiting patients, patient follow home and random households.

The members of the editorial team are: John W. Peabody (UCSF), Orville Solon (UPecon), Stella Quimbo (UPecon), Kristan Elwell (UCSF) Jhiedon Florentino (UPecon), Marife Bacate (UPecon), and Mitch Abdon (UPecon). You may also reach us by contacting the QIDS Regional Program Managers (RPMs) in your vicinity.

QIDS RPMs			
Position	Assigned Area	Name	E-mail Address
Regional Project Managers	Region 6	Aura Mar M. Galino, MD	auragalino@yahoo.com
	Region 7	Evelyn Duron, MD	evemd2002@yahoo.com
	Region 8	Palmera Isip- Baltazar, MD	palmerabaltazar@yahoo.com

Comments may be sent to Rm. 342 Economics Bldg., University of the Philippines, Diliman, Quezon City or [qids\\_02@yahoo.com.ph](mailto:qids_02@yahoo.com.ph)