



Research Week 2021

Health Outcomes of the SUMMIT Ambulatory-ICU Primary Care Model in an Urban Federally Qualified Health Center

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Keywords

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Abstract

Background

A large percentage of the total health care expenditure lies in a small percentage of the total population. The SUMMIT team, an “ambulatory ICU” intensive primary care intervention of physician, nursing, social work, pharmacy, and care coordinator with low patient-to-staff ratios, was created to improve utilization and patient experience at a Federally Qualified Health Center (FQHC) in Portland Oregon. This study assessed improvements in cardiovascular health markers in patients in the SUMMIT compared to traditional care (TC).

Method

This is a nested randomized controlled trial of primary data from the SUMMIT study. Participants were included if they had one or more of the following diagnoses: hypertension, heart conditions, dis/hyperlipidemia, and diabetes. We abstracted the participants’ blood pressure and hemoglobin A1C at time of enrollment and at 6 months. Our primary outcome was change in percentage of patients with HbA1c and/or blood pressure at goal per standard guidelines. We used paired T-tests to assess differences between treatment groups for each health outcome.

Results

Of the 160 enrolled in the trial, 128 met inclusion diagnoses, 55 patients had complete HbA1c data and 110 patients had complete blood pressure measurements to include in this analysis. For % of patients meeting HbA1c goal (n=55), SUMMIT group had a 9.1% improvement compared to 3.2% in the control group (95% CI: -7%, 19%). For % of patients meeting blood pressure goal (n=110), SUMMIT group had no improvement compared to an 8.9% decrease in the control group (95% CI: -8%, 26%).

Conclusion

An intensive primary care intervention for HNHC patients did not show improvements in clinical blood pressure and diabetes outcomes at 6-months. Limitations include small sample size, and missing data, limiting statistical power. Our results may reflect the challenges of improving such quality measures in a socially complex and high-poverty context.