

Quality Improvement Collaboratives used to implement clinical guidelines may save more money than they cost to implement

de la Perrelle L, Radisic G, Cations M, Kaambwa B, Barbery G, Laver K. [Costs and economic evaluations of Quality Improvement Collaboratives in healthcare: A systematic review](#). BMC Health Services Research. 2020;20:155

What is the context of this review?

- Quality Improvement Collaboratives (QICs) refer to teams from multiple healthcare facilities working together to improve performance on a given topic supported by experts who share evidence on best practices.
- Despite their potential benefits, the cost of implementing QICs has often been considered a barrier to their use.

What question is being addressed?

- What are the costs and cost-effectiveness of QICs when used to implement clinical guidelines?

How was the review done?

- The authors searched multiple databases for economic evaluations or cost studies of QICs in healthcare before screening the results for applicability.
- After reviewing 3,481 titles and abstracts, 22 studies were reviewed of which 8 studies met the criteria and were included in the systematic review.

How up to date is this review?

- The authors searched for studies published up to 20 August 2019.

What are the main results of the review?

- The findings reveal that potential cost savings for healthcare settings (for both acute and chronic conditions) may be possible by implementing QICs.
- The cost savings to healthcare settings outweighed the cost of the QIC itself.

Box 1: Coverage of OHT building blocks

This review addresses [building block #8](#):

- 1) defined patient population
- 2) in-scope services
- 3) patient partnership and community engagement
- 4) patient care and experience
- 5) digital health
- 6) leadership, accountability and governance
- 7) funding and incentive structure
- 8) performance measurement, quality improvement, and continuous learning (domain 57 - Rapid learning and improvement collaboratives)**

How confident are we in the results?

- This is a recent and moderate-quality systematic review with an AMSTAR score of 6/9.
- Variations in study designs indicate that caution is needed when drawing definite conclusions.

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