

**Committee on Physician Quality
April 15, 2015**

Meeting Minutes

Attendance

Members & MMA Staff

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| <input checked="" type="checkbox"/> Russell DeJong, MD | <input type="checkbox"/> Buell Miller, MD (excused) |
| <input checked="" type="checkbox"/> Jeff Brown, M.Ed. | <input type="checkbox"/> Rebecca Morin, MPH |
| <input type="checkbox"/> Rick Cabot, MD | <input checked="" type="checkbox"/> Daniel Onion, MD |
| <input checked="" type="checkbox"/> David Dixon, MD | <input checked="" type="checkbox"/> Dianna Poulin |
| <input checked="" type="checkbox"/> Alicia Forster, MD | <input checked="" type="checkbox"/> Roderick Prior, MD |
| <input type="checkbox"/> Anne Marie Kayashima, MPH | <input type="checkbox"/> Gordon Smith, Esq. (excused) |
| <input type="checkbox"/> Lisa Letourneau, MD | <input type="checkbox"/> Celeste Sampson, BS, RN |
| <input type="checkbox"/> David McDermott, MD (excused) | <input type="checkbox"/> Narasimha Swamy, MD |
| | <input checked="" type="checkbox"/> James Timoney, MD |
| | <input type="checkbox"/> Martyn Vickers, Jr., MD |
| | <input type="checkbox"/> Angela Westhoff |

| Topic | Discussion | Action/Follow-up |
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| Call to Order | Dr. Prior called the meeting to order at 4:03 p.m. | |
| Introduction of New CPQ Member | The group welcomed Jeff Brown, MEPCA. Mr. Brown has replaced Rebecca Emmons on the committee. Mr. Brown is the Director of Continuous Quality Improvement and works across numerous programs at the Maine Primary Care Association with a large focus on providing training and technical assistance around Patient Centered Medical Home initiatives. | Mr. Brown is available to provide technical assistance to practices around PCMH initiatives. |
| December 9, 2014 Meeting Minutes | The December 9, 2014 meeting minutes were included with the agenda packets. <i>A motion was made and seconded to approve the minutes as mailed. Vote: Motion Carried.</i> | Accepted |
| Review of 2014 Annual Plans | Health Center Dr. Dan Onion presented his review for [REDACTED]. He stated that he is very impressed with their plan, and paid compliments to Dr. Ray and his team. They provided benchmark data and were able to illustrate their performance against both Maine and national data. Their analysis of the findings included comments and text for what they plan to do differently the following year based on their findings. Dr. Onion recommends acceptance of this plan and | Accepted. D. Poulin will seek permission to share this plan with others. (Note: permission granted via e-mail during the meeting) |

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| | suggested, with permission, that this plan be shared with other organizations as a template for what an annual plan should look like. Following discussion and review, a motion was made and seconded to accept [REDACTED] annual plan as presented. Vote: Motion carried. | |
| | [REDACTED] Health Center. Dr. David McDermott was unable to make the meeting but reviewed the plan and submitted the following comments: “Overall an acceptable plan with supporting documents provided showing the track record of meaningful QI work this Center has been doing for the past 18 months. Targets are measurable and achievable; they document learning from their successes as well as from evaluating missed targets. One note: on page 5 of the overall plan they state that they have an annual evaluation with an external peer review from MMA. I wondered if this is indeed done annually. If so: that is great. If not: they don't necessarily need it but the plan should not include this event.” Dr. McDermott recommends acceptance of this plan. Following discussion and review, a motion was made and seconded to accept [REDACTED] annual plan as presented. Vote: Motion carried. | Accepted with comments. |
| | [REDACTED] . Dr. Russ DeJong reviewed [REDACTED] plan and felt that it clearly embraces the concept of continuous quality improvement. Last year's plan was likewise very robust and was confirmed with the only suggestion to identify quality indicators. In this plan multiple quality indicators are referenced and their goals listed. If there was any improvement needed, an improvement strategy was often offered. Dr. DeJong recommends approval of [REDACTED] which he describes as a well thought-out and comprehensive plan. Following discussion and review, a motion was made and seconded to accept [REDACTED] plan as presented. Vote: Motion carried. | Accepted. |
| | [REDACTED] . Dr. Buell Miller reviewed the plan and found it acceptable with no comments. He recommends acceptance of the plan. Following discussion and review, a motion was made and seconded to accept [REDACTED] plan as presented. Vote: Motion carried. | Accepted |
| | [REDACTED] . Dr. David Dixon reviewed [REDACTED] annual review. He remarked that there were lots of copies of meeting minutes and there seemed to be a lot of activity related to compliance in preparation for accreditation. He did not find a lot of direct information regarding quality or performance improvement. He noted the comments he made last year are very much the same for this year. Overall, he | D. Poulin will share [REDACTED] plan with Ms. Morrison. Approval of [REDACTED] plan will be postponed for six months. |

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| | <p>believes [REDACTED] is on the right track but there does not appear to be much physician engagement in the process. [REDACTED] agreed with Dr. Dixon's comments and is well aware that there is a lot of compliance indicators built into their plan. She noted that for 2015 they are working on creating more opportunities for physician engagement, and they are working towards developing fewer and more meaningful clinical standards. All agreed that although [REDACTED] is heading in the right direction, there is still some work to be done. Following discussion and review a motion was made and seconded to postpone acceptance of HAN's annual plan for six months. Vote: Motion Carried.</p> | |
| | <p>[REDACTED] Dr. Roderick Prior reviewed [REDACTED] 2014 Annual Plan. Dr. Prior acknowledged that [REDACTED] is an excellent but complex organization that is doing much more than many of their counterparts in terms of quality. However, their committee structure seems complex and their Quality Committee does a lot of work including compliance and risk management, and there is a separate committee structure that does the quality work. As he reviewed the plan he didn't feel like he saw enough of the "plan" in the documentation. He suggested that department heads should report their activities as part of a set agenda in a way that states what they did, what was the result, and their plan of action based on their findings. He noted that there is some very good data but would like to see more closing of loops. [REDACTED], Manager for Safety & Risk for [REDACTED] shared with the group that as of April 1st [REDACTED] changed its committee structure to best maximize functions with names. She also reported that the managers and division chiefs now meet monthly to do all of the above. Dr. Prior noted that he was impressed with the Playbooks developed by [REDACTED]. Ms. [REDACTED] commented the Playbooks were the result of the work of several groups. Overall [REDACTED] is doing a very good job with quality, and the CPQ looks forward to their review next year. Following discussion and review, a motion was made and seconded to accept [REDACTED] 2014 Annual Plan. Vote: Motion carried.</p> | <p>Accepted with comments</p> |
| | <p>[REDACTED] Dr. Alicia Forster completed her review of [REDACTED] 2014 Annual plan. She was pleased to see that three specialties: Radiology, Anesthesiology and Pathology had good quality data, but the data for the outpatient practices (Pain Mgmt.) seem sparse at best. She wondered if there was more to come for the outpatient practice. Ms. [REDACTED] responded that the [REDACTED] division is fairly new to [REDACTED]. [REDACTED] multi-disciplinary QI team is in the development phase of defining the process for the outpatient practice, and pain management requires a much different algorithm for them. Dr. Forster commented that some of</p> | <p>y</p> |

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| | the information they are gathering has come out of their patient satisfaction tools, which only provides limited information. They may want to consider collecting data on procedural outcomes. She would like to see development of an action plan for the outpatient practice; however, she recommends acceptance of their plan. <i>Following discussion and review, a motion was made and seconded to accept [REDACTED] 2014 Annual Report as presented with comments noted: Vote: Motion Carried.</i> | |
| FQHC Membership Update | D. Poulin reported that all ten of the FQHC's we invited to participate in MMA's Membership Program for Small FQHC's have signed up. To date we have received payment for 7 of the 10 FQHC's. | Informational |
| Specialty Solutions | D. Poulin reported that to date two of the nine Specialty Solutions practices are working on performance improvement plans. Several of the groups are starting from scratch but she sent them templates and sample plans to get them started | G. Smith and D. Poulin will provide an update in June. |
| Schedule of Meetings | D. Poulin asked the group if they wanted to change the schedule of meetings to prevent her having to cancel due to lack of business. Those present liked the current schedule and had no issue with cancelling meetings. | D. Poulin will continue with the current schedule of meetings and if she has to cancel will provide ample notice to members. |
| Next Meeting(s) | The next meeting is scheduled for <u>Tuesday, June 9, 2015</u> 4-6 p.m., MMA Headquarters | Informational. |

Meeting adjourned at 5:25 p.m.

Minutes respectfully submitted by Dianna Poulin, Coordinator for Peer Review & Quality

2015 Meeting Schedule (Subject to change)

No meetings in July/August unless plans need to be reviewed

September 8, 2015

November 10, 2015