Exercise: Using Performance Data for Quality Improvement
Instructions to Participants

Scenario:

The practice:

- Everyone in your group works in the same multi-specialty group practice. The practice has 5 PCPs and 2 specialists.
- Other staff include Nurses, Physician Assistants, Medical Assistants, an Office Manager, and front-desk staff.
- The practice has an electronic medical record.
- The practice has set aside $25,000 to implement a quality improvement initiative, which is still to be determined.
- The practice serves commercially insured, Medicare, and Medicaid patients.

Performance profiles:

- Two of the major payors with whom the practice has Pay-for-Performance contracts have monitored both clinical measures and patient experience measures, for commercially-insured patients ages 18-64 only. Actual performance impacts reimbursement.
- Similar data are also reported online in a publicly-accessible website where practices are rated and compared to one another.
- Your group is concerned with one category of performance, as identified here:

<table>
<thead>
<tr>
<th>Group</th>
<th>Performance Profiles (for commercially insured patients, ages 18-64)</th>
<th>Your Practice is Identified on the Profile as:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Adult Diagnostic and Preventive Care (Clinical)</td>
<td>Practice C</td>
</tr>
<tr>
<td>2</td>
<td>Diabetes Care for Adults (Clinical)</td>
<td>Practice F</td>
</tr>
<tr>
<td>3</td>
<td>Care from Personal Doctors: How Well Doctors Coordinate Care (Patient Experience)</td>
<td>Practice H</td>
</tr>
</tbody>
</table>

- See the Performance Profiles included in these pages.
  Note: All reports are based on actual data from the Massachusetts Health Quality Partners Healthcare Compass (http://healthcarecompassma.org/).

Assignment

- To manage the breakout exercise, each group should have participants volunteer for two roles: a leader to lead the Quality Improvement project, and a reporter (to summarize your discussion when the full group reconvenes).
In addition to these group roles, each individual will be assigned a “character” role for the scenario, e.g.:

- Primary care physician
- Specialty physician
- Physician & practice leader
- Nurse
- Medical assistant
- Physician assistant
- Office manager.

Step 1 (10 minutes): Review the Performance Profile and associated data for your group. Consider:

- How does your practice compare overall and on each measure to other local practices? To the statewide averages?
- Do you have questions about the data that you would want to ask the party that compiled them (in this case, MHQP)?
- Given that these are real data, do the statewide (Massachusetts) or national averages (depending on which profile your group has) surprise you?
- How might these reports help or harm local practices – yours as well as the other?

Step 2 (10 minutes): Consider the causes of poor performance.

- Select one of the measures where your performance is poor. What might be contributors? Participants should try to answer at first from the perspective of their assigned roles. Then you can add any factors that others might have neglected.
- Is there additional analysis that your practice might perform to assess performance?

Step 3 (25-30 minutes): Plan a quality improvement strategy. Use the QI Planning Template (below) as a guide. Go in order through each element, starting with the top box, “Problem/topic.” Spend about 4-5 minutes on each box.

The group recorder should keep notes.

1. Problem/topic: Based on the previous discussion about poor performance in one of the measures, identify the problem to address.

2. Goal/measurable objectives: Be specific regarding improvement targets.

3. Team members, roles, responsibilities: Who will participate in this process.

4. Project activity: Be specific in identifying 1-2 actions you will undertake first, that the practice can launch as soon as possible.

5. Obstacles and strategies to overcome: Consider obstacles you might encounter and how you can overcome them.
6. Evaluation and feedback: Determine how your practice can monitor performance internally until the next insurance reports or public profiles are released

- **Step 4 (5 minute):** Communicate with patients.
  - Discuss how the practice will reply to patients who view these data online and express their concerns about your performance.

- **Step 5:** Reconvene in the main room. Your reporter will summarize your discussion for the full group.
  - Reporter/Recorder: Transfer summary of discussion into the QI Planning Template poster.
  - Reporter should take 3-4 minutes to present the group’s Quality Improvement project to the full group.
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