

Inviting physicians to participate in a Task Force or Focus Group to Explore the Causes of Variation in evaluating or Treating a clinical condition

Efficiency Collaborative – Teleconference 2, April 1, 2008

Physicians – 8:00 – 8:45

Collaborative Teams 8:00 – 9:15

AGENDA

Focus Group 8:00 – 8:45

Discussion 8:45 – 9:15 (may end early)

Description of the Teleconference

The purpose of our April Teleconference:

- Primary objective: To demonstrate how to conduct a focus group to engage physicians in providing feedback on sources and solutions to variation for the ED measure by having Howard facilitate a focus group on our April teleconference with Collaborative Medical Directors and their practicing doctors.
- Secondary objective: To identify sources for ED variation and interventions to improve in the ED measure

At Learning Session 1 we touched on the importance and value of engaging physicians in reviewing variation charts, identifying where there may be unnecessary variation, surfacing potential sources for the unnecessary variation and partnering with physicians to identify potential interventions and solutions for measures you selected. Effective strategies for engaging physician input are establishing a Task Force or conducting a series of 1-3 focus groups for each measure targeted. We will be modeling the focus group on our teleconference.

Who will be part of the Focus Group?

- Medical Directors from each of the Collaborative Teams
- Practicing physicians from Collaborative Teams' organizations
- Other team members, including Collaborative staff (except for Howard), will be observers

It would be would be great to have 1 practicing physician whom you respect in your organization to participate in the focus group if possible. Pages 2 and 3 include some guidance when inviting physicians as well as a draft invitation you may adapt and use. Please confirm to Amy on March 28, 2007 whether a practicing physician from your organization is scheduled to attend.

Length of Focus Group

- 45 minutes for the Medical Directors and practicing physicians
- 15 minute debrief for entire Collaborative team (practicing physicians would not participate)

Guidance for Engaging a Practicing Physician to Participate

- a. To encourage participation, offer a stipend - \$150-400 depending on the time of day, history of prior payments, practitioner level of involvement in organization, possibly specialty
- b. Make the time convenient for the practitioner, rather than the staff
- c. Be explicit about what the goals of the meetings are and what time commitment is required
- d. In forming a group, try and mirror the diversity of the IPA or group.
If variation analysis has been performed, choose high, medium and low Utilizers to get a broad sense of what practitioners might be thinking
- e. When possible, include both those who order and perform the test or procedure in question. Interdisciplinary teams are more successful.
- f. Rather than give your recommendation(s) first, frame the question, have evidence available for distribution, and then listen to the physician's thoughts about why the variation in question exists.
Continue to ask, "Anything else?" until no further ideas are offered. If there is a pause while participants are thinking, avoid filling the space with your ideas. Doing so terminates their offering suggestions.
- g. As usual, maintain a non-judgmental, respectful demeanor while facilitating the group discussion
- h. Occasionally summarize what has been said and at the end of the session, summarize again and list the to do's for the next meeting if one is needed. Ask for volunteers to complete the tasks and if no volunteers, assign staff

Invitation

The invitation – a sample written script is provided for your review. It is targeted to the focus group we will be running during teleconference 2. For those with whom you have lesser working relationships, a letter followed by a call is probably best. For those with whom your team is comfortable, a call is fine.

Dear Dr. _____,

As you know, _____IPA is committed to improving both the quality and efficiency of the care we provide for our patients. As part of that commitment, our IPA has joined a California wide physician group and health plan collaborative to improve the efficiency of care we provide. One of the things the collaborative has stressed is defining quality as doing the right thing for the right patient at the right time. Another way of describing that is reducing overuse, misuse and underuse of services.

The collaborative has focused our attention on a few areas where there appears to be significant variation in the way physicians provide services. Use of the emergency room is one such area. All of the six participating physician groups will be focusing on how we might improve care by reducing reliance on emergency departments; especially for visits for which less intense alternatives would be more appropriate. To begin that process, we are participating in a focus group via teleconference to explore the reasons for the variation in the frequency of emergency visits.

Each group has been asked to invite a respected primary care physician to participate in the focus group. We immediately thought of you. The purpose of the focus group is to help uncover the variety of reasons patients with relatively minor conditions seek care in our local emergency departments. This assists us in determining how to create incentives for both patients and their doctors to avoid unnecessary ED visits while providing needed care.

We hope you will agree to participate in our teleconference focus group to be held on _____, April __, at _____AM. Appreciating the impact on your practice, we would like to offer a \$250 stipend to defray your lost revenue.

I will call in the next few days to see if you are able to attend or you can email me at if it more convenient.

Thank you for helping us as we struggle to deliver the best possible care as efficiently as possible.

Sincerely,