

# MOC, QI and Publication – Creating a Framework

SACME 2014

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MOC Portfolio Program Manager, UW Health

No financial relationships to disclose

# Objectives

- Outline a model for MOC for QI to support scholarly publications
- Recognize benefits to collaboration between MOC planners and research planners
- *Decide for yourself!*

# MOC Portfolio Program

- Approved at an organizational level
- Allows sponsor organizations to approve quality improvement projects for MOC Part IV

Part I. Licensure and Professional Standing (maintain your medical license)

Part II. Lifelong Learning and Self-Assessment (get enough CME)

Part III. Cognitive Expertise (pass your board exam)

**Part IV. Practice Performance Assessment:** Demonstrate use of best evidence and practices compared to peers and national benchmarks (do quality improvement work using performance data)

- 18 of 24 ABMS boards currently participate
  - *Excluding: Colon and Rectal Surgery, Neurologic Surgery, Nuclear Medicine, Plastic Surgery, Radiology, Urology*

# Health Innovation Program (HIP)

- Mission:

To improve health care delivery and population health across the state of Wisconsin and the nation through conducting and disseminating health services research that partners UW Faculty with Wisconsin healthcare organizations.

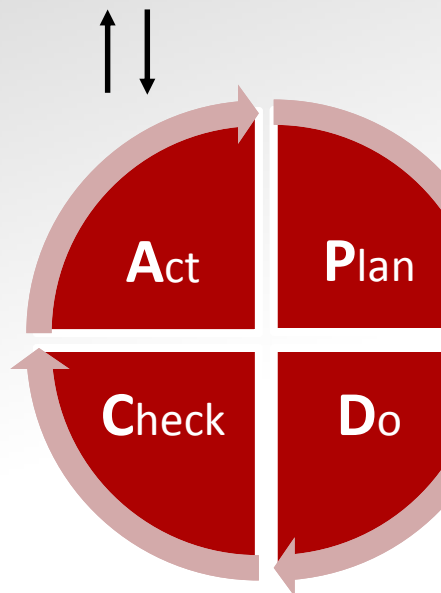
- Resources available for:

- Research and education: seminars, connections to community, collaborative working groups, short courses, secure data storage, research tools, etc.
- Grant writing: mock review sessions, consultation, samples, funding opportunities, other resources
- Dissemination: toolkit development, website hosting, videos, reports, forums, surveys, patient tracking, etc.

# FOCUS-PDCA

## All MOC Portfolio projects use the A3 Format

1. Find a Process to Improve
2. Organize a Team
3. Clarify Current Knowledge
4. Understand Root Causes
5. Select the Improvement



Use the **A3** tool to document improvement work

TEAM: Team Grant  
Date Initiated: Aug 2011

**FOCUS**

**LWHealth**

**1 - FIND a Process to Improve (Background Information, Data, Value Stream Map)**

Type	Scheduled Length	Avg Provider Time	Total Avg Cycle Time	Ideal Cycle Time (Min)
OPV	15.0	22.5	37.5	22.5
LOV	30.0	29.4	59.4	45.0
PMT	45.0	32.4	77.4	60.0

Since we found out that regular office visits typically ran over, we collected more data to find a baseline measure for our specific aim statement

**2 - ORGANIZE a Team (List of Team & Ad hoc Members and Roles)**

Lisa Grant (MD), Judy Barnard (CMA), Sheila Muldoon (RN), Pam Armentrout (Receptionist), and Lindsay Anderson (Clinical Operations Assistant).

**3 - CLARIFY Current Knowledge (Process Map, Observations, Data, Specific Aim)**

**Operational Definition:** Scheduled Appointment Length is the time the patient is scheduled to spend with the physician (Dr. Grant)

**Specific Aim:** We will decrease the percentage of OPV appointments that exceed the scheduled slot from 57% to 35% by 11/1/11.

**4 - UNDERSTAND Root Causes (Fishbone Diagram, Five Whys, Data, Affinity Diagram, Patient Input)**

**Causes**

- State Technology
- Vague scheduling guidelines
- Scheduling template
- No process to identify patients who need more time

**Effects**

- Patient Length Exceeds Match with N. Grant

**5 - SELECT the Improvement (Brainstorming)**

#	ROOT CAUSE(S)	CHANGE IDEA(S)
1	Vague scheduling guidelines	Define when to use LOV vs. OPV
2	Scheduling template	More Receptionist Flexibility, Rearrange same-days
3	No process to identify patients who need more time	Cycle time collection; Permanent note in chart

**P - PLAN the Improvement (Future State Process Map)**

**D - DO the Improvement (Improvement Action Items Plan, Measures, Forms)**

**CHANGE IDEAS**

- Maintained daily huddles & reviewing schedule
- Scheduling Template: Provided more scheduling flexibility for Reception & rearranged Same Days
- Ensure Patient Early Arrival: Asked first 2 patients of AM/PM sessions to arrive 10 mins before their scheduled appt time
- Scheduling Guidelines: Defined when to schedule LOV vs. OPV
- Identify Patients Requiring More Time: Created permanent note in chart for scheduling
- Cycle Time: Continued using cycle time tool in exam room to keep track of time

**MEASURES/OUTCOMES**

- Report 3003: 32% arrived 10+ mins early, 92% arrived 1+ mins early
- Reception Tics & Tallies: Scheduled X LOV in 1 week
- Patient Satisfaction Survey: 22 out of 22 patients felt they had enough time with Dr. Grant and were able to schedule in a timely manner
- Cycle time data (below)

**C - CHECK the Results (Graphic Display of Data)**

**% Office Visits Over 15 Mins (scheduled length)**

Graph showing % Office Visits Over 15 Mins (scheduled length) from Aug 11 to Nov 11. The graph shows a downward trend from 57% to 35%.

**A - CT and Determine Next Steps (Timeline, Action Items List, Lessons Learned, Sustainability Plan)**

- Standardize workflows and create Playbook
- Review Report 3003 in a month to see if patients are still arriving early
- Review Access reports periodically to ensure patients can still schedule appointments in a timely manner.

# UW Health MOC Website

**UW HEALTH**  
**MOC Portfolio Program**  
(Maintenance of Certification)

Home | MOC at UW Health | UW Dept MOCALs | Help/FAQ | MOC Staff

**GET STARTED** **UW QI RESOURCES** **MOC TOOLKIT**

The UW Health MOC Portfolio Program provides an easy way for physicians to align the QI work they are doing at UW Health with MOC requirements in order to receive Part IV credit.

UW Health values this program and wants to support our physicians through this process. The MOC Portfolio Program is a win-win for UW Health: physicians participate and fulfill their individual MOC requirements, successful practices are disseminated, and the quality of our patient care is improved!

**American Board of Medical Specialties (ABMS) MOC PROCESS:**  
The process of Maintaining Certification is more than the sum of its requirements: testing current knowledge, CME credits and QI work. Rather, this process allows physicians a way to practically apply the six core competencies into their daily practice, assess that practice, "...and then apply the best evidence or consensus recommendations to improve that care." (ABMS, Value of ABMS MOC, 2013). In addition, the ABMS MOC process provides the public a means to ensure that their provider is meeting certain standards of care. Learn more:  
[http://www.abms.org/Maintenance\\_of\\_Certification/](http://www.abms.org/Maintenance_of_Certification/)

**MOC Advisor and Liaison Committee:**  
The UW Health MOCAL Committee is a group of dedicated faculty, each of whom has a specific interest in quality improvement, who are serving the MOC Portfolio Program and UW Health physicians through their committee work. For more information, visit the "UW Dept MOCALs" page.

**What is the Portfolio Program?**  
The Multi-Specialty MOC Portfolio Approval Program (Portfolio Program) offers a single process for healthcare organizations to support physician involvement in quality improvement and Maintenance of Certification (MOC) across multiple ABMS specialties. This pathway offers a streamlined approach for organizations that sponsor and support multiple well-designed quality improvement efforts involving physicians across multiple disciplines to work with ABMS Member Boards to grant MOC Part IV credit to physicians who are involved in those improvement efforts.

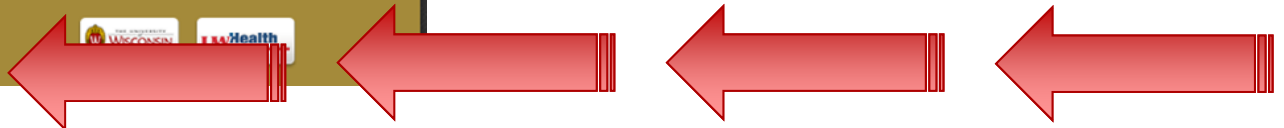
The official Portfolio Program website is:  
<http://mocportfolioprogram.org/>

**Improvement Resources**  
UW Health Quality, Safety and Innovation  
UWHIN  
UWHIN Toolkit

**Participating ABMS Boards**  
Office of Continuing Professional Development  
Health Innovation Program

**UW Health**

- What is MOC P.P.
- Benefits of participating
- Program oversight
- Evolving as we speak
- Physicians have access to HIP website from MOC site
- Now link; soon page and toolkit



# UW Health MOC Website

## APPROVED MOC PROJECTS

**NOTE:** Though you are encouraged to work on MOC projects as a group, it is still the responsibility of each participating individual to submit his/her own A3 documentation in order to receive MOC Part IV points.

### Project Details

1. Diabetes Improvement Initiative
  - a. [Project Information Sheet](#)
  - b. [Enrollment Form](#)
  - c. [Project A3 Example - Diabetes](#)
  - d. [Project A3 Template - Diabetes](#)
2. WeTALK - a communication project for the Department of Medicine
  - a. [Project Information Sheet](#)
  - b. [Enrollment Form](#)
  - c. [Project A3 Template - Avatar](#)
  - d. [Project A3 Template - HCAHPS](#)
  - e. Other Project Documents:
    - [Credit Unions](#)
    - [Fishbone Diagram](#)
3. Patient-Family Centered Rounds (PFCR) - a project for physicians who see Pediatric patients in the inpatient setting  
**NOTE: Participants in this project must contact project lead, Dr. Michelle Kelly ([mkelly@pediatrics.wisc.edu](mailto:mkelly@pediatrics.wisc.edu)) to obtain project documentation.**
  - a. [Project Information Sheet](#)
  - b. [Enrollment Form](#)
  - c. [Project A3 Example](#)
  - d. [Project A3 Template](#)

FOR QUESTIONS ABOUT HOW TO COMPLETE AN A3, CONTACT: [USI@UWHEALTH.ORG](mailto:USI@UWHEALTH.ORG)

FOR QUESTIONS ABOUT THE UW HEALTH MOC PORTFOLIO PROGRAM, OR SUBMITTING YOUR MOC PROJECT DOCUMENTS, CONTACT: [moc@ocpd.wisc.edu](mailto:moc@ocpd.wisc.edu)

Improvement Resources  
UW Health Quality, Safety and Innovation  
UWHIN  
UWHIN Toolkit

Participating ABMS Boards  
Office of Continuing Professional  
Development  
Health Innovation Program



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Last updated: 04/09/2014  
[moc@ocpd.wisc.edu](mailto:moc@ocpd.wisc.edu)

- List of approved projects
  - For enrollment
  - *Examples to share, learn, collaborate*
- Project details – CME Info
- Project documents
  - **A3**
  - Fishbone
  - Other

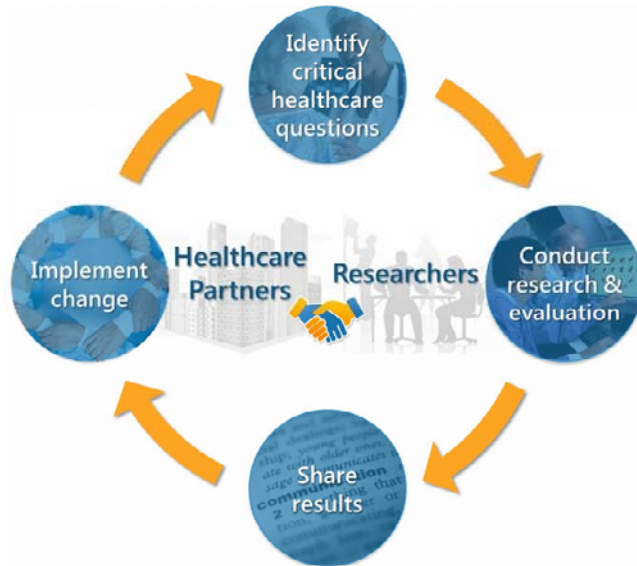


# UW Health HIP Website



[About Us](#) [Resources](#) [My Communities](#) [News & Events](#) [Log In](#)

## About Us



## Mission

To improve health care delivery and population health across the State of Wisconsin and the nation through conducting and disseminating health services research that partners UW faculty with Wisconsin healthcare organizations.

## Vision

To be the leading organization in the nation that integrates health services research with clinical practice.

## Message from the Director



Each day we face a healthcare system that delivers unpredictable quality at an increasing cost. We currently have

only the most rudimentary tools to improve the value of care that is delivered. Collaboration among both researchers and healthcare organizations is critical to develop new tools and drive improvement. HIP supports innovation in healthcare practice through providing data resources that support both high-quality research and evidence-based decision making. We also facilitate direct links between University of Wisconsin researchers and our partnering healthcare organizations. By supporting both research and improvement goals, HIP seeks to reduce the barriers to creating and using evidence to improve healthcare for patients across the state of Wisconsin and the nation.

- Maureen Smith, MD, PhD, MPH

## Funding

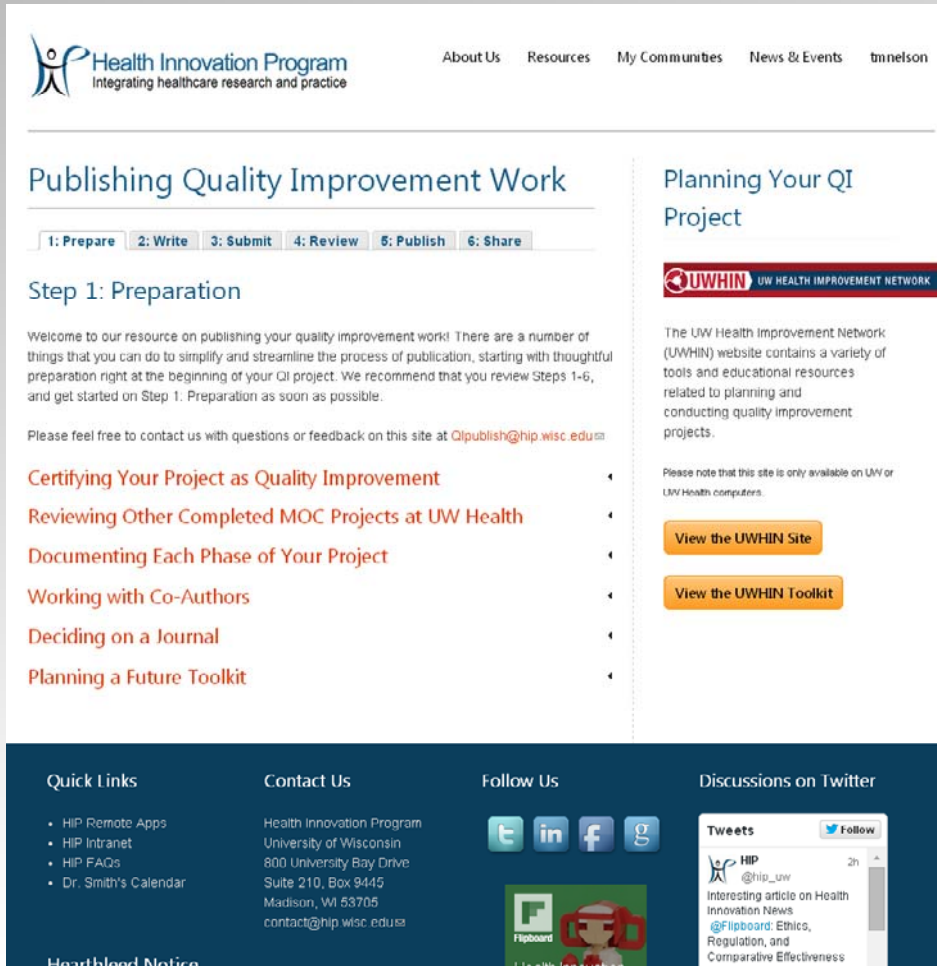
HIP investigators have externally-funded research programs with funding primarily from [AHRQ](#) and [NIH](#), in partnership with the [Institute of Clinical and Translational Research](#). HIP has created research resources to support

- HIP mission and goals
- Important info about HIP
- Resources
  - Grant writing group, consulting, training, tools
- My Communities, News and Events
- LOG IN





# UW Health HIP Website



The screenshot shows the UW Health HIP Website. The header includes the Health Innovation Program logo and navigation links: About Us, Resources, My Communities, News & Events, and bnnelson. The main content area is titled "Publishing Quality Improvement Work" and features a progress bar with steps: 1: Prepare, 2: Write, 3: Submit, 4: Review, 5: Publish, and 6: Share. The "Step 1: Preparation" section welcomes users and provides a list of links for certifying projects, reviewing MOC projects, documenting phases, working with co-authors, deciding on a journal, and planning a future toolkit. A sidebar titled "Planning Your QI Project" includes the UW Health Improvement Network (UWHIN) logo and text about the network's resources, with buttons to "View the UWHIN Site" and "View the UWHIN Toolkit". The footer contains "Quick Links" (HIP Remote Apps, HIP Intranet, HIP FAQs, Dr. Smith's Calendar), "Contact Us" (Health Innovation Program, University of Wisconsin, 800 University Bay Drive, Suite 210, Box 9445, Madison, WI 53705, contact@hip.wisc.edu), "Follow Us" (Twitter, LinkedIn, Facebook, Google+), and "Discussions on Twitter" (a tweet from @hip\_uw about an article on Health Innovation News).

Health Innovation Program  
Integrating healthcare research and practice

About Us Resources My Communities News & Events bnnelson

## Publishing Quality Improvement Work

1: Prepare 2: Write 3: Submit 4: Review 5: Publish 6: Share

### Step 1: Preparation

Welcome to our resource on publishing your quality improvement work! There are a number of things that you can do to simplify and streamline the process of publication, starting with thoughtful preparation right at the beginning of your QI project. We recommend that you review Steps 1-6, and get started on Step 1. Preparation as soon as possible.

Please feel free to contact us with questions or feedback on this site at [Qipublish@hip.wisc.edu](mailto:Qipublish@hip.wisc.edu)

- Certifying Your Project as Quality Improvement
- Reviewing Other Completed MOC Projects at UW Health
- Documenting Each Phase of Your Project
- Working with Co-Authors
- Deciding on a Journal
- Planning a Future Toolkit

### Planning Your QI Project

**UWHIN** UW HEALTH IMPROVEMENT NETWORK

The UW Health Improvement Network (UWHIN) website contains a variety of tools and educational resources related to planning and conducting quality improvement projects.

Please note that this site is only available on UW or UW Health computers.

[View the UWHIN Site](#)

[View the UWHIN Toolkit](#)

**Quick Links**

- HIP Remote Apps
- HIP Intranet
- HIP FAQs
- Dr. Smith's Calendar

**Contact Us**

Health Innovation Program  
University of Wisconsin  
800 University Bay Drive  
Suite 210, Box 9445  
Madison, WI 53705  
[contact@hip.wisc.edu](mailto:contact@hip.wisc.edu)

**Follow Us**

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**Discussions on Twitter**

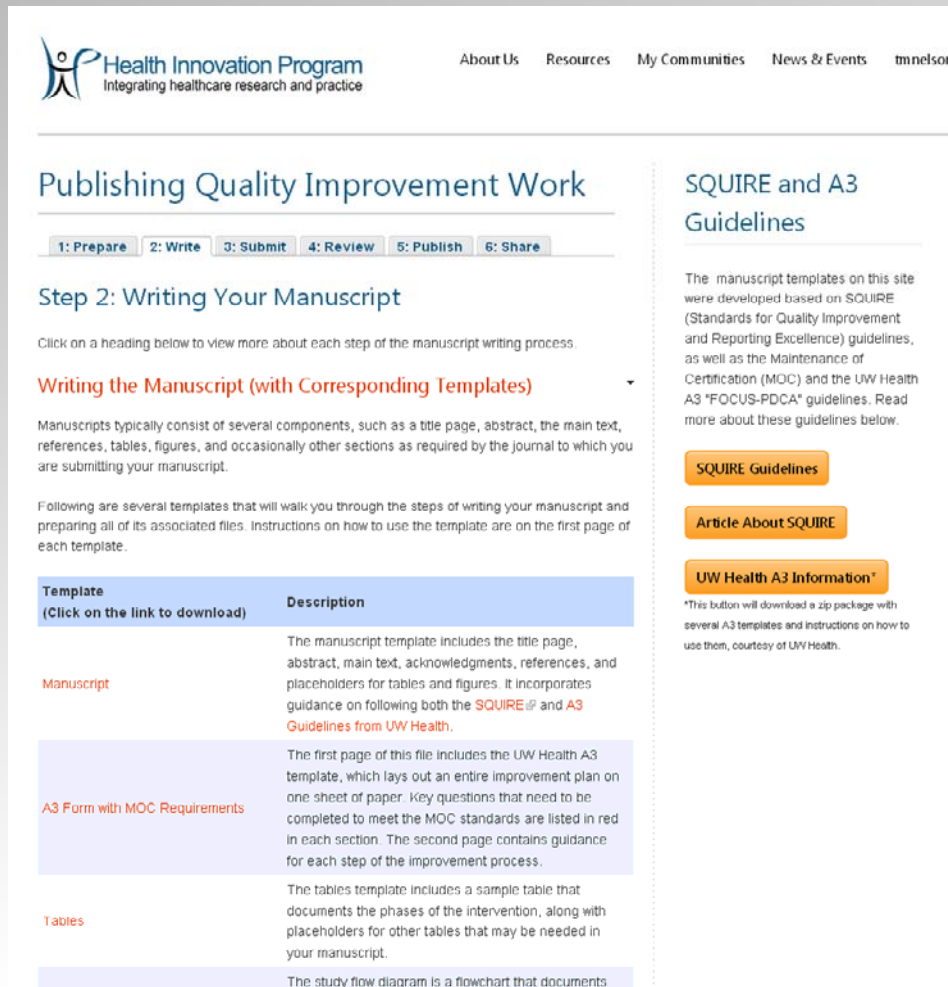
**Tweets**

[@hip\\_uw](#) 2h  
Interesting article on Health Innovation News  
[@Flipboard](#): Ethics, Regulation, and Comparative Effectiveness

HealthInnovation

- IRB or not IRB
- Review other MOC projects
- Documentation via HIPxChange
- Connect with others doing same work
- Help selecting appropriate journal
- Help planning and creating a toolkit

# UW Health HIP Website



The screenshot shows the 'Publishing Quality Improvement Work' page on the UW Health HIP website. The page has a navigation bar with links: About Us, Resources, My Communities, News & Events, and tmnelson. The main heading is 'Publishing Quality Improvement Work' with a sub-heading 'Step 2: Writing Your Manuscript'. A progress bar shows steps: 1: Prepare, 2: Write, 3: Submit, 4: Review, 5: Publish, 6: Share. The '2: Write' step is selected. The page content includes a section 'Writing the Manuscript (with Corresponding Templates)' with a description of manuscript components and a list of templates. The templates are: Manuscript, A3 Form with MOC Requirements, and Tables. The 'Manuscript' template description states it includes title page, abstract, main text, acknowledgments, references, and placeholders for tables and figures. The 'A3 Form with MOC Requirements' template description states it includes the UW Health A3 template, key questions, and MOC standards. The 'Tables' template description states it includes a sample table and placeholders for other tables. The 'Study flow diagram' is also mentioned. On the right side, there are links for 'SQUIRE and A3 Guidelines', 'SQUIRE Guidelines', 'Article About SQUIRE', and 'UW Health A3 Information'.

Health Innovation Program  
Integrating healthcare research and practice

About Us Resources My Communities News & Events tmnelson

## Publishing Quality Improvement Work

1: Prepare 2: Write 3: Submit 4: Review 5: Publish 6: Share

### Step 2: Writing Your Manuscript

Click on a heading below to view more about each step of the manuscript writing process.

#### Writing the Manuscript (with Corresponding Templates)

Manuscripts typically consist of several components, such as a title page, abstract, the main text, references, tables, figures, and occasionally other sections as required by the journal to which you are submitting your manuscript.

Following are several templates that will walk you through the steps of writing your manuscript and preparing all of its associated files. Instructions on how to use the template are on the first page of each template.

Template (Click on the link to download)	Description
Manuscript	The manuscript template includes the title page, abstract, main text, acknowledgments, references, and placeholders for tables and figures. It incorporates guidance on following both the <a href="#">SQUIRE</a> and <a href="#">A3 Guidelines from UW Health</a> .
A3 Form with MOC Requirements	The first page of this file includes the UW Health A3 template, which lays out an entire improvement plan on one sheet of paper. Key questions that need to be completed to meet the MOC standards are listed in red in each section. The second page contains guidance for each step of the improvement process.
Tables	The tables template includes a sample table that documents the phases of the intervention, along with placeholders for other tables that may be needed in your manuscript.
	The study flow diagram is a flowchart that documents

### SQUIRE and A3 Guidelines

The manuscript templates on this site were developed based on SQUIRE (Standards for Quality Improvement and Reporting Excellence) guidelines, as well as the Maintenance of Certification (MOC) and the UW Health A3 "FOCUS-PDCA" guidelines. Read more about these guidelines below.

[SQUIRE Guidelines](#)

[Article About SQUIRE](#)

[UW Health A3 Information](#)

\*This button will download a zip package with several A3 templates and instructions on how to use them, courtesy of UW Health.

- SQUIRE guidelines
  - Standards for Quality Improvement and Reporting Excellence
- Links to **A3** documentation and instructions
- *Submit, Review, Publish, Share*

# UW Health MOC Website

UW HEALTH

MOC Portfolio Program

(Maintenance of Certification)

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Dr. Sally Kraft - UW Health MOC Portfolio Program





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Office of Continuing Professional Development  
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UWHealth

Improvement Resources  
UW Health Quality, Safety and Innovation  
UWHIN  
UWHIN Toolkit

Participating ABMS Boards  
Office of Continuing Professional Development  
Health Innovation Program

- New page will include:
  - IRB information
  - SQUIRE information and Guidelines
  - List of QI journals
  - Contact information
  - More...

# Benefits of MOC/HIP Collaboration

- OCPD & QSI are building bridges and fostering relationships that did not exist before, allowing synergy = good for all
- Other inter-departmental relationships: OCPD & \_\_\_\_\_, QSI & \_\_\_\_\_, clinical department & clinical department
- Physicians get help translating QI work to publication, which is difficult, new
- UW produces more publications – docs, program, school, community at large, academia
- Patients: increased incentive to participate in QI due to MOC, QI methods improve as desire to publish pushes people to follow more stringent processes

The Proverbial End.

Questions?