PRIMARY CARE QUALITY MEASURES GROUP TERMS OF REFERENCE

Introduction

In 2017, the Doctors of BC and government agreed to work together during the term of the 2014 – 2019 Physician Master Agreement in a focused and structured way on areas of mutual interest. As part of the Mid-Term Policy Consultations the Parties engaged in collaborative discussions focused on the development of a system of measurements to sup-port continuous quality improvement and high value to patients that:

Provides data at the individual level to enable physicians to improve the quality of care they provide to patients, and

Enables assessment of overall health system performance and of the value of physician services through aggregated and anonymized data at the facility/population and provincial level. *(Statement of Joint Interests and Foundational Principles, Mid Term Consultation on Quality and Cost Effectiveness, dated June 23, 2017)*

Under the Measurement System for Physician Quality Improvement Framework Agreement, the Parties agreed to establish the Measurement System for Physician Quality Improvement Steering Committee (the “MSPQI Steering Committee”) to oversee the development and implementation of the Measurement System for Physician Quality Improvement (the “MSPQI”), five Quality Measures Groups to identify quality measures and advance the physician participation strategy in a defined service area (Primary Care, Community Specialist/Specialized Care, Acute & Emergency Care, Surgical Care and Diagnostics), and a Technical Working Group to develop the roadmap for building the virtual data environment for multi-level access to quality measure data.

Mandate

The Quality Measures Group (“QMG”) is a sub-committee of the Steering Committee for the purpose of identifying quality measures and advancing a physician participation strategy for Primary Care in accordance with the MSPQI Objectives and Foundational Principles.

Objectives

Provide advice to the MSPQI Steering Committee on the current landscape of quality projects, known quality gaps, unwarranted variation in care and significant opportunities to advance population health, in order to assist the MSPQI Steering Committee establish priorities.

Using priorities established by the MSPQI Steering Committee, advice from the Technical working Group and by learning from existing in BC, as well as other jurisdictions, identify a shortlist of meaningful quality measures.

Develop recommendations for an initial set of measures, taken from existing data elements requiring no additional work by physicians, in accordance with the MSPQI Objectives and Foundational Principles.

Recommend to the MSPQI Steering Committee a physician participation strategy (communications, education, physician champions, connection to existing practice improvement supports etc.) to include all physicians within the area of focus.

Actively build physician awareness and interest in the MSPQI

Develop a work plan that includes sequencing of additional measures including new data sources if necessary (for phase 3 or later).

Provide recommendations to the MSPQI Steering Committee for a regular process for revising and expanding measure sets within the Primary Care (for phase 2 or later).

(For Primary Care only) Ensure effective co-ordination and cooperation with the Health Data Coalition (HDC) to avoid duplication of efforts and to obtain the benefit of the experience of the HDC in developing and implementing a quality measurement system for primary care physicians.

Decision Making

The QMG will make all recommendations and decisions by consensus decision (defined as agreement of every member, present minus one). Where consensus cannot be achieved following comprehensive discussion of a matter including the identification of the views of all members present, the Chair may request feedback or direction from the MSPQI Steering Committee.

Membership

Membership will be representative of the appropriate stakeholders.

4 physicians with direct experience in Primary Carepreferably with at least one of the following qualifications:

Membership on a related Joint Collaborative Committee with familiarity with practice improvement supports available for Primary Care.

Membership on other provincial committees or groups focused on improvement to Primary Care*.*

Proven track record for consulting with and engaging physician peers.

Expertise in quality measurement.

1 to 2 senior representatives from the Ministry of Health with responsibility for Primary Care.

1 to 2 senior representatives from the health authorities/PHC with responsibility for Primary Care.

1 patient representative

At the first meeting of the QMG, a chair will be selected from amongst the members by majority vote.

Individual Member Responsibilities

Work collaboratively and draw on expertise to resolve issues and reach decisions to support successful outcomes.

Act as a bridge with own organization and/or committee they are representing to help with integration and alignment across the system by connecting and communicating relevant opportunities, priorities and concerns of each organization to the other.

Fulfill role of sponsor through positively positioning and advancing the work of the QMG.

Ensure preparedness for meaningful participation in meetings.

The Chair will ensure that everyone participating in the meeting, telephone discussion, email exchange, or in another form of communication has received clear instructions on the confidentiality of the proceedings.

Reporting, Relationships & Accountability

The QMG is accountable to the MSPQI Steering Committee and will submit work plans and reports to the MSPQI Steering Committee as requested.

Review

The QMG’s progress and Terms of Reference will be reviewed by the MSPQI Steering Committee by (see projected timeline).

Resources

Direct support and coordination for the QMG is provided by the MSPQI Secretariat. This includes administrative support with meeting logistics, timely distribution of meeting materials, preparing summary materials on behalf of the QMG, and assisting the QMG in preparing work plans.

Meetings

The QMG will meet as required to achieve the objectives. Agenda items and materials must be submitted to kile.brokop@bcpsqc.ca for circulation to Quality Measure Group members no later than 1 week prior to each meeting.

Last revised