

# Clinical Quality Program



SOC Telemed has executed a comprehensive quality management program that supports evidence-based practices, tracks satisfaction levels, and encourages continuous improvement of telemedicine services. These processes undergo regular review by the Joint Commission as part of its ongoing accreditation processes.

The scope of SOC Telemed's organizational performance improvement program includes the following focus components:

**Compliance with recognized national guidelines for care:** SOC Telemed's psychiatry, neurology, and intensivist groups all regularly review changing standards and, when appropriate, make immediate changes to internal protocols. As these standards change, physicians will work with client success staff to assure that client hospitals are aware of these changes and are able to implement them effectively.

**Key performance indicators:** Collaborative and specific indicators of both key processes and outcomes of care are designed, measured and assessed by appropriate disciplines in an effort to improve patient/staff safety and organizational performance. These indicators are objective, measurable, based on current knowledge and experience and are structured to produce statistically valid performance measures of care, treatment and services provided. This mechanism also provides for evaluation of improvements and the stability of the improvement over time. Included in the scope are: SOC Telemed physicians, client facilities, consult coordination center, IT services, and administrative services, such as scheduling and other administrative functions.

**Assessment of patient populations:** We currently report regularly on consult activities by consult type, recommendation, and physician, along with various performance parameters. In working with our partners, we are developing a system for more active acquisition and analysis of outcome data that will allow for improvement in quality assessment and benchmarking for our client hospitals. The outcome data collected in partnership with our hospital partners will ultimately allow for specific and flexible benchmarking.

**Changing practice protocols:** Many of our physicians have current and past experience working on protocol development workgroups. As new practice standards develop, our physicians review them and adapt them to a national telemedicine practice.



**SOC TELEMED  
PHYSICIANS**



**CLIENT  
FACILITIES**



**CONSULT  
COORDINATION  
CENTER**

**IT SERVICES**



**ADMINISTRATIVE  
SERVICES**

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**Clinical best practices:** We work with hundreds of hospitals, observing unique aspects of some hospital practices. With this perspective, we are able to report to our hospitals on clinical best practices, workflow mechanisms, and other issues that can improve individual hospital performance.

**Resolving clinical service issues:** Our clinical team reviews all clinical issues generated from any source and reports back directly on the results of those reviews in order to effect any change needed. SOC's Vice President of Quality, Service Line Chiefs, and Chief Medical Officer oversee this process.

## **Outcomes tracking and measurements:**

Currently we have dedicated staff working to acquire information available from facility medical records. Our current data looks at hemorrhagic conversion in thrombolytic cases and reversal of commitment in psychiatry. In the future, neurology outcomes will include comprehensive data to include discharge status, reperfusion, endovascular outcomes and functional scores. In psychiatry, length of stay and readmissions will be important parameters. Critical care measures include ICU and hospital length of stay, and complication rates.

## **Focused physician performance evaluation (FPPE) and ongoing physician performance evaluation (OPPE) requirements:**

SOC conducts an objective and evidence-based process for monitoring performance. Senior members of the medical staff perform practice evaluations, and reviewers assess randomly selected charts for inclusion of comprehensive documentation elements. Physicians are evaluated during initial onboarding, as well as through ongoing professional practice evaluations (OPPE). A focused professional practice evaluation (FPPE) review can also be performed on a case-by-case basis if a concern is identified.

**Physician leadership structure:** A full-time Chief Medical Officer leads the physician practice. Each service has a designated Chief of Service who is actively engaged in clinical practice. The structure includes a Medical Executive Committee and other designated leadership committees.

**Designated quality committee:** Each practice specialty group has a designated quality committee that sets continuous and intermittent performance parameters, and then directly reviews cases and trends in performance, regularly reporting on these issues to clinical leadership.

## **Feedback and performance improvement related to physician patient care activities:**

We receive feedback from a variety of sources, including client hospitals and medical staff, our own operations staff, and our physicians. As trends or new methodologies are identified, leadership will provide group feedback, including audio and video conferences, written policies, and other educational methods. Our physicians meet on a weekly or biweekly basis to conduct case reviews and protocol discussions, in addition to conducting more focused meetings to react to rapidly changing clinical issues.

**Quality review with local staff:** Our physicians can easily and readily interact with local staff for educational purposes. This is commonly delivered by video. Our staff will also participate within local quality review processes as needed or can also serve as a source of expertise for general planning.

**Dedicated quality leader:** SOC has a Vice President of Clinical Quality and Compliance who reports to the Chief Medical Officer. This role is responsible for the continuing development and oversight of a comprehensive clinical quality program, conducted within parameters consistent with SOC Telemed's Joint Commission accreditation.