

## **James L. Holly, M.D.**

### **A Series of Questions About PC-MH Part III**

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**Your Life Y our Health**

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A national publication submitted a series of questions to me in preparation for publishing an article about SETMA and patient-centered medical home. This is the last in a three-part series from this work.

**Question: Your Community Council gives your patients a very strong voice in SETMA governance and operations. Were any of your staff or doctors worried about that when you first set it up?**

Our staff had no more anxiety about involving our patients in the governance and operations of SETMA than our patients had have in involving us in their health care decisions. This was a reflection of SETMA's mission statement, which declared: **"To build a multi-specialty clinic in Southeast Texas which is worthy of the trust of every patient who seeks our help with their health, and to promote excellence in healthcare delivery by example."** Our patients have to trust that we have their best interest in heart and we have to do the same in trusting them. In exercising that trust SEMTA has the control and guidance of our three standards of decision making which are legality, morality and ethicality. We will do anything they asked, as we will do anything we judge to be good for them, as long as it is legal, moral and ethical. We are in the early stages of the development of the full potential of the Council but so far it has posed no risk to our commitments, values or standards.

**Question: You and your team have successfully earned recognition/accreditation already from AAAHC, NCQA, The Joint Commission, and URAC -- which is a lot of work -- and you're now looking at Planetree. Anybody there getting "accreditation fatigue"?**

Yes, we did experience "accreditation fatigue" after completing the first four in a twelve-month period. We did not pursue Planetree immediately after completing The Joint Commission in March, 2014 because of that "accreditation fatigue." Because we renewed NCQA and AAACH and gained initial accreditation from URAC and The Joint Commission from July, 2013 to June, 2014, future renewals of all four will always occur in a 12-month time frame. We are addressing future risks of fatigue by the development and maturing of our accreditation team and by practicing a plan of continuous review of our compliance with all elements and standards of

all four organizations. Not only does that continuously improve our march toward a true PC-MH delivery model, it also updates our performance when the standards and/or requirements of any of the accreditations change. Thus when it is time to renew our accreditations, it will simply be part of our routine work plan.

**Question: What advice do you have for practices that want to begin (and continue) the transformation journey to become a patient-centered medical home?**

PC-MH recognition and accreditation are worth the process, the price, and the pain. We believe that PC-MH is the future of healthcare, and it is possible to be part of that future now. It is not easy to transform a practice into a medical but it is not impossible. A practice with the goal of being a medical home should measure success by their own advancement and not by whether someone else is ahead of or behind them. In the same way, they must share their success with others. Remember, recognition and accreditation are valuable but ultimately it is the cultural change which will make a difference.

The following steps will help:

- Determine where you are and where you want to be.
- Select the template or model you will follow.
- Outline the steps you will take.
- Develop a timeline for completing each task.
- Be innovative. Emulate the best of others, but expand upon the work and make it yours.
- Be patient but eager.
- Enjoy what you are doing and celebrate where you are.
- Be relentless; don't give up.

**Question: Finally, tell us something about yourself that few people would know.**

I am fundamentally a lazy person, but I am driven by a passion for excellence which obscures that weakness. And, my raw intellectual capability is below the performance level we maintain at SETMA. I attribute the differential to the providence of God and to the collective ability and synergism of our team which team includes Mrs. Carolyn Holly and the other spouses of SETMA's partners and colleagues.

But, I do have what Peter Senge in *The Fifth Discipline* calls *Personal Mastery* which is described by ten principles:

1. They have a special sense of purpose that lies behind their vision and goals. For such a person, a vision is a calling rather than simply a good idea.
2. They see current reality as an ally, not an enemy. They have learned how to perceive and work with forces of change rather than resist those forces.
3. They are deeply inquisitive, committed to continually seeing reality more and more accurately.
4. They feel connected to others and to life itself.
5. Yet, they sacrifice none of their uniqueness.

6. They feel as if they are part of a larger creative process, which they can influence but cannot unilaterally control.
7. Live in a continual learning mode.
8. They never ARRIVE!
9. (They) are acutely aware of their ignorance, their incompetence, and their growth areas.
10. And they are deeply self-confident!

These characteristics are more a function of a team than of a single individual. And, the most significant of the ten are the last three, particularly how they interact. Seemingly contradictory, “knowing your ignorance” and “being deeply self-confident,” these do not produce arrogance and pride but the discipline and hard work of humility. I believe SETMA has Personal Mastery and that we demonstrate the above characteristics, such that like me as an individual, we as a team are imperfect but with our collective energy and drive, we function at a much higher level than the summation of our individual capabilities.