

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

### **Summary of Closing Session of Third Visit to SETMA of Delegation from China**

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**Your Life Your Health**

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On Wednesday afternoon, July 27, 2016, the eleven-member group from China and SETMA had a two and a half hour concluding question-and-answer session. All of the members of the Chinese team except one spoke some English. Even though, with everyone's permission, we recorded the session, the language complexity made this summary difficult. In this session, we went around the table and each of the team members made their comments and asked their questions.

The leader of the visiting team began this session with the following comments: "Last night the whole team spent about two hours to discuss our feedback about your sharing and for me it is the third time and for some the second time, or the first time to visit SETMA. What you are sharing, and we highly treasure your time and effort, but most importantly we are touched by the motivation of why you would like to share this with us. It is also motivational for us to overcome the future, the hard time because it is a journey and all that matters is that each team member shares their feedback. Each one needs to share what they would like to do to continue to learn from SETMA."

A member of the team who is on the faculty of the University of Massachusetts but who is from China said, "First, I really appreciate you. I don't want to speak on behalf of everybody, I just speak for myself. This is a very real learning experience for me to see how you use the same good idea putting it into play and getting it to work. This is a very real learning experience for me too, so I really appreciate that."

The next team member said, "In the past 2 days, we have been impacted by you. We call you the "great leader" as you share with us not only the technology or not only the some of the care model, but you share with us classic stories which make the technology real. During yesterday and today, through the stories, we see the face of your patients and we do believe that SETMA is the successful model and you have already completed the transformation from the old medical service model to the new medical model. Especially you define the value, the virtue and the trust which each patient must have. The sense of personal value and the respect of the patient and it's a big impact on the way we think of the healthcare of the future was made clear."

The next team member said, “Another surprise for us is you arranged for us to visit the diabetes management center. I think that is the perfect model for how to integrate the primary care with the specialist care and that is the multi-specialist clinic integrated with the family physicians. I have a question about when you had the idea to establish the diabetes management center and what’s the role of the center in overall healthcare delivery structure?”

The next team member said, “After 2 days of meeting I have two points that greatly impacted me. First is it greatly opened my eyes to how to leverage electronic medical record to help physician improve the level of quality and automate a lot of the work, so reserve the physician’s time to pay attention to the patients. Right now this is very weak point in China and I hope after this trip I was thinking about our hospital and our clinic how to adopt this principal to use similar kind of EMR/ So the point too is on this trip the past 2 days we learned a lot about what’s the real patient engagement and learn about how engage the patient, share the decision making.”

“Right now in China the patient is very passive role, it’s the physician deciding the solution and the patient just accept it, just to do that. And for the quality disease management, for example diabetes, hypertension, patient engagement is very important as you mentioned, it is most of the time is controlled by themselves. They need to be engaged otherwise they will not be able to adjust their lifestyle behavior. The past 2 days we learned a lot about that, we will try to adopt this in China.”

Dr. Holly’s response: “I also want to respond that while you can see the deficiencies of the system in China, I see the deficiencies of the system in America and they are very much the same. The task you have before you is hard, but the task we have before us is hard as well and that’s why I think we have such a warm interaction and relationship here. We realize that I don’t have all the solutions and you don’t have all the problems. I don’t have all the problems and you don’t have all the solutions but together we can work on solutions that work for both of us.”

The next member of the delegation said, “Dr Holly first many, many thanks for your 2 days hosting and I think some very valuable time for us all. First, I want to refer to your saying to use (CHINESE) and never give it up. It impresses me very, very much. You know all though we are on the way to build our Chinese primary care transformation model and I think I’m feeling maybe our team or so are feeling very tough, it’s very hard. It’s a very challenging task for us, however, I think with your encouragement, I think we will keep on and never give it up. Thank you. And so, once more I still remember that you said you are now one team member of us, and I think that you will be our team leader and the spiritual leader and our mentor for us. I think with you and with your encouragement we must have success.”

The following is my response to the above. “That is the great honor. Thank you, I don’t deserve it and I will be a team member, but you have a great leader already. Jingwei Liu is the driving force and so it is up to Dr. Gu Yuan, leader of Primary Care in China, and to all of you. Because the very fact that you are here means you are leaders. You are at the point of the spear in driving this process forward. So I congratulate you as well. But thank you, I do appreciate your affirmation and because you are of an age that I would see you as a granddaughter, I look upon you and appreciate that because as a young woman your influence will be felt for a long, long time.”

The following is my concluding response to this final discussion:

“Electronics can help you monitor the population you are caring for that has diabetes. You can monitor:

- the frequency of their visits.
- if they miss a visit. You can set your system up, say if a patient makes an appointment with diabetes and they don't show up you won't know that unless your system audits that. Every day we get a report for every patient with diabetes that didn't keep their appointments and they are called immediately to set up another appointment and make sure that they do come.
- a contrast between the patients who are treated to goal and those that are not treated to goal. In this process, we saw that the patients treated to goal were seen more often, were tested more often, or that they were on more medications or not. You can find a statistical significance in things that might make a difference. For instance, we saw that those patients treated to goal for the hemoglobin A1C had 3.2 visits a year and those not to goal had 1.2 visits a year. Statistically that was significant. So we surmised perhaps if we see these patients twice more a year, we can move some of those patients from here to there.
- the value and power of analytics – The above is something you do with analytics and with computers that you couldn't do otherwise. You can recognize, that patients that were well treated and well controlled from January to October suddenly started losing their control and you look at the social calendar in our country and maybe that calendar would be different in China, it might be a different time of the year. When the Chinese New Year or some other time, when patients lose their discipline for whatever reason.
- you are able to look at patterns, longitudinally, over time for the same population. These things can really help you look for leverage points. When you see a problem, you want to look for the leverage point that gives the greatest impact on that problem. A leverage point is a concept of a lever and those of you that have studied physics know that if you have a lever and the weight is right in the middle and the fulcrum is right here this is the lever and the fulcrum is right here, it's going to take a lot of energy to move that. But if your lever is longer and the arc then it is going to take less energy.

“So you look for those things that are going to be the easiest to impact and that's something you can do with analytics and with just sitting down as process analysis. It's something that you're not going to do once and for all, it's like the activation, it's not hitting the start button and the thing runs by itself. It's a process. And so finding these points of leverage, finding the opportunities to improve, it's going to be a constant process that you will want to think about.

And, perhaps I should say this, the most important thing you will do any of you is thinking about what you're doing. It is to say that we can increase the impact of what we do with them by having thought through the process, designed a solution, deploy that solution and measuring the outcome of that solution.”

As time goes on, we will have additional contact with our friends from China and we will look forward to hearing of their success.