

Oklahoma Health Care Quality Improvement Advisory Committee

February 5, 2008
10:00 a.m. to 12:00 p.m.
Minute Summary

It was reported that four subcommittees are to be formed. These subcommittees are: LTC, Non-LTC, Home Health, and Outpatient practices. An overview was given of the indicators that each subcommittee would pursue that had actionable items that would be attainable.

The Commonwealth Fund State Quality Institute has posted a RFP for states to participate in quality initiatives with an institute, which would require participation with attendance of a conference and activities within the state. The agency will pursue this and contact the governor's office of our intent to write the proposal to be submitted in 10 days.

Four teams have been identified to work on improvement. Each sub-committee will have a chair and have developed a game plan about how the groups will work together to address the outcomes that we as partners want to change. What are the processes of how and what we are going to do to bring around the change. It is through this, we improve and move these indicators. What are the indicators that can be affected, particularly in the Commonwealth Reports? What indicators are actionable items? Oklahoma tied overall with Mississippi. Oklahoma scored 43 on quality. It was suggested to combine the hospital and home health group and have 3 groups rather than 4. Part of the failures in the past was because of have just been dealing with just the home health group or the hospital group. The committee chairmen were appointed and directives for outcomes of actionable items were reviewed.

The next meeting would be in the later part of April.