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FROM THE EDITOR

When It Comes to Quality, It's Not All About You

Report cards can feel personal unless you view them simply as feedback to make the whole team better.

I have a confession to make. I'm one of those medical director types that sends out "report cards" on your "quality." The group I harass is my own medical group of 170 providers, mostly family physicians and internists.

Before you tune me out, telling yourself that I'm one of the evil ones, let me tell you something reassuring. Or not. When it comes to quality, it's not all about you. You know that, right? It's not really about how much you know, how smart you are, or even necessarily how diligent you are. It's about having an effective workflow, working with a high-performing team, focusing on the important things, and having the attitude that nothing is perfect and virtually any process can be improved.

We talk about teams, systems, and workflows in *FPM* a lot. You can see that again in the article in this issue by Arnold E. Cuenca, DO, called "Preparing for Value-Based Payment: Five Essential Skills for Success" (page 25). Our mantra is evaluate what you do, improve it, test it, and then reevaluate.

What stinks about all of this is that, although it isn't all about you (or me), *we* are the ones getting graded. I still practice medicine, still get measured, and still very much prefer to get only As. Performance measurement can feel unfair, unless I don't view it as grading and I don't view it as personal. Instead, I try to view these reports simply as feedback given to us because we are the heads of our teams. I want to see each of us and our teams do better. I want to see the whole group do better.

Another thing that stinks is that the status quo is never good enough; we are never exactly where we want to be. That means change is constant and the goal is, more often than not, on the horizon – visible, but not right in front of us. That isn't satisfying to overachieving, smart, perfectionistic clinicians who were taught in medical school that it really is all about us.

I don't know how to adequately address this conflict between quality improvement principles and the physician psyche. But somehow we need to reconcile our need to be seen as doing excellent work with the fact that the work can nearly always be better. Quality measurement is here to stay. The goals will continue to be on the horizon, and we'll never be perfect. Like you, I'll need to keep reminding myself that it isn't all about me. FPM



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