2018 YEAR-IN-REVIEW
Working together to improve health care quality, outcomes, and affordability in Washington State.

Twenty-Five recommendations

Five workgroups met in 2018
Opioid Prescribing – LGBTQ Health Care – Suicide Care – Collaborative Care for Chronic Pain – Re-Review of Lumbar Fusion Bundle and Warranty

Five workgroups for 2019
Continuing Opioid Prescribing – Maternity Care Bundle – Palliative Care – Shared Decision Making – Harm to Self and Others

Thank you to our dedicated Bree Collaborative members and our many workgroup members who have donated countless hours to identify evidence-based solutions to pressing health care issues. From all of us:

Hugh Straley, MD
Chair
Ginny Weir, MPH
Director
Alicia Parris
Administrative Coordinator

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www.breecollaborative.org
Reflections

Ginny Weir, MPH
Director, Bree Collaborative

To me, our Collaborative is such an opportunity for Washington State to work on some of the thorniest problems in health care. We have worked hard to create a trusted avenue for health care improvement, a place where very different people and very different organizations can all come together to talk about how to help people who are struggling with thoughts of suicide or who are facing real barriers in accessing gender-affirming care. Every one of us spends so many hours of our day away from our families that we have to make that time count doing work that matters. I am proud to be part of this work.

One of my favorite parts of 2018 was working with graduate students from the University of Washington School of Public Health. I think the Bree Collaborative can serve as a great window into our sometimes convoluted and often non-transparent Washington State health care environment. We have so many content areas and such strong connections to our large delivery systems, plans, and governmental agencies. I really want both graduate and undergraduate students to be able to work with us and really use us as a means to learn and to make connections. This would have been so invaluable when I was just starting out.

I am honored that the Legislature asked us to continue our focus on behavioral health with a new workgroup that we have called Harm to Self and Others to help add clarity to situations in which patients express suicidal or homicidal thoughts. This really shows the value that we bring to our community. Our workgroup is meeting for the first time on January 17th and I welcome anyone who is interested to join the conversation.

I am also looking forward to our new work developing a bundled payment model for maternity care. I gave birth to my daughter in July and feel keenly connected to the individual journey that every person experiences through the birth process. Labor and delivery nurses deserve all the praise in the world. Pregnancy, birth, and those first months are huge – setting the stage for the rest of a person’s life. We all deserve the best start to life that modern medicine can provide. Join us on January 8th.

I believe in the power of collaboration, connection, and the dedicated efforts of a small group of people. Together we can build a more equitable health care system for a healthier Washington State.
Completed: Suicide Care
Suicide is both a preventable outcome and a public health issue. The effect of a suicide on family members, friends, and clinical providers is long lasting and profound. Our goal is integration of implementable standards for suicide care, assessment, management, treatment, and supporting suicide loss survivors into clinical care pathways. Recommendations are applicable to in- and out-patient care settings including for care transitions, behavioral health providers and clinics, and for specialty care like cancer care. Read more: www.breecollaborative.org/topic-areas/suicide-prevention/

Completed: LGBTQ Health Care
Our goal is a health care system that allows everyone to have a fair opportunity to be healthier. This year were able to focus specially on the health care for those who identify as lesbian, gay, bisexual, transgender and queer or questioning (LGBTQ), acknowledging that LGBTQ people share common challenges and have distinct health care needs. We organize the recommendations around communication, language, and inclusive environments; screening and taking a social and sexual history, and areas requiring LGBTQ-specific standards and systems of care. Read more: www.breecollaborative.org/topic-areas/lgbtq-health-care/

www.breecollaborative.org
Looking to 2019

Workgroups for Maternity Care Bundle, Palliative Care, Harm to Self and Others, and Shared Decision Making will start meeting in January 2019. Our new focus area of the Opioid Prescribing workgroup had its first meeting in December 2018 and the full Bree Collaborative will continue to meet every other month.

Interested in joining the conversation? Find out when and where meetings are scheduled here: breecollaborative.org/meetings/

Bree in the New England Journal of Medicine: Improving Care by Redesigning Payment

By Marcia Peterson, MHA and Sarah Rolph, MFA, Washington State Health Care Authority

“To address the inconsistent cost and quality of joint replacement procedures, the Washington State Health Care Authority created a Center of Excellence Program. The program requires providers to meet external quality standards for certain procedures, for which the Health Care Authority pays a single, fixed amount. This benefit design allows members to receive high-quality care when they need it for a predictable cost.”

Read more here

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