

A History of Quality: The Rhode Island Medical Society's Commitment

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Before there was Evidence-Based Medicine or Comparative Effectiveness Research—indeed, before there was even medical licensure—there were medical societies. The **Rhode Island Medical Society (RIMS)** is one of the oldest continuously operating medical societies in North America, having been called into being by an act of the Rhode Island General Assembly in February 1812.

The legislature's rationale in issuing a charter for the formation of the Society was that "the medical art is important to the health and happiness of society, [and therefore] every institution calculated to further its improvement is entitled to public attention" and should be "encouraged by the patronage of the laws."

As the RIMS approaches its two hundredth anniversary, it is fitting to consider the role it has played and continues to play in the "improvement of the medical art" in Rhode Island. Has RIMS been faithful to the mission foreseen for it by the state legislature and by the Society's own 46 founding members back in 1812?

It will not surprise that as medicine has profoundly changed, so has RIMS continually evolved and reinvented itself over the past two centuries. At the same time, however, it is easy to discern a continuity of purpose that connects the RIMS of the early 19th century with the RIMS of the early 21st and integrates the earnest efforts of thousands of Rhode Island physicians and RIMS members throughout the intervening decades.

One unifying theme of RIMS' past and present is the commitment to quality. For at least the first century and a half of its existence, RIMS' concern for quality was mostly focused inward on improving the knowledge, skill and professionalism of its members. In granting the original charter, the General Assembly bestowed upon RIMS "full power and authority to examine all candidates for the practice of physic and surgery... respecting their skill in their profession;

and if upon examination the said candidates shall be found skilled in their profession, and fitted for the practice of it, they shall receive the approbation of the said society in letters testimonial..." Not until eighty years later did Rhode Island institute medical licensure as a state function in order to better protect the public from "irregular practitioners." Medical licensure was at the top of RIMS' public policy agenda for decades during the 19th century before it finally became law.

"Fitness for practice" is another unifying theme of RIMS' perennial efforts to improve quality, elevate the medical profession and promote good patient care. Though the scope and substance have changed and expanded radically since 1812, the core mission of medical societies has always been defined by professional ethics, medical education, and peer review, all for the purpose of ensuring physicians' fitness for practice and their ability to provide the best quality patient care consistent with the state of medical knowledge at the time.

RIMS' evolving role in medical education illustrates the coexistence of profound change with continuity of purpose over time. The 19th century records of the Rhode Island Medical Society bear abundant witness to the optimistic strivings of RIMS' earliest members and their belief in the progress of medical science through observation, dissemination of scholarship and the vigorous exchange of ideas. Members of the Rhode Island Medical Society are seen engaging one another in mutual clinical education, presenting papers to one another, sharing professional insights and experiences, debating the efficacy of various remedies and attempting to define new standards of care. They collect and share books, subscribe to journals and quickly establish a growing medical library for their common edification. They stimulate research and discussion among themselves by sponsoring scientific essay competitions and prizes.

RIMS gave its educational mission a watershed boost in 1911, when it broke ground on Smith Hill in Providence to build a permanent home for the Society's wandering medical library collection. The handsome brick Federal Revival building, which still stands at the corner of Francis and Hayes Streets opposite the south lawn of the State House, served as the headquarters of the Rhode Island Medical Society for 90 years, from 1912 to 2002. With a collection that grew to over 50,000 volumes, a spacious, sunny reading room with individual study tables, a lecture hall that seated 200, and a staff of professional librarians, the RIMS building served as the state's principal center for continuing medical education for much of the 20th century.

With the growing specialization of medicine and the explosion of medical knowledge in the past fifty years, clinical education and continuing medical education naturally evolved away from state medical societies and became the province of specialty societies and academic medical centers. Accordingly, RIMS gifted its historic library collection to Brown University in 1987. The oldest and most notable parts of the RIMS collection as well as a number of antique medical instruments still reside together in the Lownes Room of Brown's John Hay Library.

RIMS still provides vital and unique educational services to the state today, for RIMS is the accrediting agency for the CME programs of all the hospitals in Rhode Island. The Society is recognized by the national Accreditation Council for Continuing Medical Education to perform this important function. The work of accreditation is carried out by RIMS' Committee on Continuing Medical Education, currently under the able leadership of Patrick J. Sweeney, MD, PhD, MPH.

Another RIMS educational contribution of long standing is the Society's monthly journal, *Medicine and Health Rhode Island*, known for most of its life as

the *Rhode Island Medical Journal*. Founded by the Providence Medical Association in the 1890's, the journal has been a RIMS publication since the era of World War I. Today it is a joint undertaking of RIMS with Quality Partners of Rhode Island, the Warren Alpert Medical School at Brown, and the RI Department of Health. The RIMS Journal has had a succession of distinguished editors, including the late Siebert Goldowsky, MD, and Brown's founding medical dean, Stanley M. Aronson, MD. The RIMS Journal is currently in the capable hands of Joseph H. Friedman, MD, Editor in Chief, and Joan Retsinas, PhD, Managing Editor.

So while much (indeed, everything) has changed in medical education, and while RIMS too has changed with the times, the fundamental objective of continuing medical education remains today what it so clearly was in 1812 for RIMS' founders: bringing the best of medical knowledge to the bedside.

Peer review is another enduring constant of RIMS' commitment to quality, and it too has evolved over time. For most of the 19th century, before the practice of medicine had a legal definition and a state licensure requirement, peer review was the only means for developing and enforcing standards of professional ethics, and it was virtually the sole corrective against such offenses as charging excessive fees, peddling nostrums and claiming to have exclusive, secret remedies.

In more recent times, RIMS has been a national leader in the kinds of peer review that focus most clearly on a narrow understanding of words that echo from the 1812 charter: "fitness to practice." In 1978, RIMS established the Physician Health Program (originally known as the Impaired Physicians Committee) when a series of three local physician suicides made clear the need for the physician community to take better care of its own. For thirty years now, RIMS' Physician Health Program has been preserving the reputations, careers, marriages and lives of Rhode Island physicians, dentists, podiatrists and Physician Assistants under the visionary leadership of Herbert Rakatansky, MD. It is a program that carries out its sensitive mission with great success, thanks to the leadership and hard work many individuals, including RIMS'

own dedicated and skilled Rosemary Maher, ACSW, LCSW, CEAP, who provides administrative and professional support for the program, and her pioneering predecessor, the late William Moclair, RN.

Uniquely propitious for the RIMS Physician Health Program is the respectful and mutually appreciative relationship that has been carefully cultivated over the years between RIMS and the Board of Medical Licensure and Discipline, whose Chief Administrative Officers Milton Hamolsky, MD, and now Robert Crausman, MD, deserve great credit for helping to build and maintain an excellent and constructive relationship with RIMS since the Board's inception in 1987. (RIMS also had a good working relationship with the current Board's predecessor, the Board of Medical Review.) Analogous relationships in other states, in tragic contrast, tend to be characterized by mutual mistrust and political conflict, resulting in the waste of human and financial resources and poorer service to the public and the medical profession than is the case in Rhode Island.

RIMS remains a notable pioneer in inventing another peer review program that specifically identifies and addresses issues of competence in individual physicians. The Competency Committee was the brainchild of the same Dr. Herbert Rakatansky who has chaired the Physician Health Committee for thirty years. He inspired the establishment of the new Competency Committee during his presidency of RIMS in 1985-86; no other medical society in the US has a comparable program, with the qualified exception of the Oregon Medical Association.

RIMS maintains three other peer review committees, incidentally, one of which is the oldest continuously functioning Maternal Health Committee in the nation, established in 1931.

All of the programs and efforts noted so far were designed to promote quality in medical care by focusing on the qualifications, skill, knowledge, professionalism and well-being of the individual physician as the primary actor in providing and directing medical services for patients. Certainly that focus has always been appropriate for a medical society.

In 1995, however, under the presidency of Barbara Schepps, MD, RIMS

took an unprecedented step outside of its traditional comfort zone, which had for the previous 183 years been circumscribed by the boundaries of the medical profession itself. This time RIMS, with the overwhelming majority of its members expressing their support for the venture through a RIMS mail survey, gave birth to a new kind of organization: Quality Partners of Rhode Island, the primary mission of which was to ensure that Medicare beneficiaries in Rhode Island receive the best care possible. RIMS founded and named Quality Partners in recognition of the fact that quality in modern medical care depends not only on individual professionals, but on systems and teamwork.

Early in 1996, RIMS installed the first three employees of Quality Partners in a neighboring frame building on Hayes Street that RIMS had acquired in 1978. By the turn of the century four years later, Quality Partners' staff and budget already dwarfed those of its parent, and Quality Partners was exerting an ever widening and deepening influence on the quality of medical care received not only by Rhode Islanders, but in some cases by patients across the country. The salutary influence of Quality Partners, though it is still nominally focused on Medicare patients, is happily systemic in Rhode Island, since caregivers obviously afford the same good care to every patient, regardless of payer.

Having proactively provided itself with a strong "quality arm" and despite its own modest size and resources, RIMS was well positioned to contribute disproportionately to the Quality Movement in American medicine, which received important impetus from the series of "Quality Chasm" reports by the Institute of Medicine, starting with the watershed publication of *To Err is Human* in 1999. The Quality Movement, in which Quality Partners is a national leader, continues to reshape American health care in progressive and exciting ways that are highlighted elsewhere in this edition of *Medicine and Health/Rhode Island*.

There are many more chapters to the story of RIMS' commitment to quality. Space permits the mention here of one more recent development that is notable for its symbolic as well as practical significance. In 2007, the Rhode Island

Medical Society agreed to support Quality Partners in its bid to change its tax status with the Internal Revenue Service so that Quality Partners could henceforth apply for philanthropic grants from corporations and foundations as well as compete for corporate, state and federal government contracts. The effort to transform Quality Partners into a 501(c)(3) was successful, but it required RIMS to relinquish the last vestiges of control over its daughter organization.

RIMS quickly and willingly agreed to do so. That demonstration of parental

generosity, esteem and confidence affirmed once again the public-spirited priorities of the Rhode Island Medical Society and its enduring commitment to quality care over the past 197 years.

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The author has no financial interests to disclose.

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