

## MEETINGS:

Overall, the expectation is to attend as many LM1 meetings and Landmark Leadership meetings as invited to. Having Clinical Leadership to listen, learn, and give feedback is one of the most important parts of the job. Being on time, present and practicing good meeting etiquette shows the professional respect all are committed to and expect of each other.

### ❖ **Company wide**

- **“Your time with the CEO”**
- **“Fireside” Chats** with UHG CEO Andrew Witty are semi-regular.
- Monthly or Quarterly **Town Halls** with Home and Community CEO Shawna Gisch.
  - Not required but encouraged.
- **Biweekly National leadership meeting**
  - Every other Monday with companywide management leadership. Attendees include national leadership, and includes RLTs, MLTs, other divisional leaders/execs, and shared services. Summarized in MLT Weekly Digest email. Organized by Strategic Operations Manager.
  - [NLT invite request form](#)
  - Meetings will contain summaries and links to presentations imbedded within the invite. Invite should also come with addition to the [MLTs and Senior Leadership Teams Channel](#) which will also have files of past presentations stored within it.
  - Highly encouraged.
- **Train the Trainer: Scheduled as needed**
  - Company-wide educational materials for dissemination dependent on the applicability of the content to the employee's role.
  - Attendance encouraged, one AMD can be assigned to attend and report any relevant material presented to the rest of the LM1 Clinical leadership as applicable.
- **Palliative Physician Lead meeting:**
  - The Palliative Physician Lead role is primarily for market associate medical director with market-level responsibilities related to palliative care. Alexa Gale, MD, is filling this role for LM1.

### ❖ **Meetings within Landmark First**

- **Monthly Clinician meeting:**
  - Past meetings can be found either in the LM1 APC's Teams channel files under [Monthly Clinicians Meetings](#) (includes 2023), or in the LM1 Doctors teams channel under [APC Meetings](#).
  - Physicians will be responsible for creating educational content (see [Education divide](#)), and Physicians content. Karen A also includes opening content and

discussion of metrics. APC may step forward to help with education as the LM1 physician working on education sees fit.

- Numerous options (usually 2-3) for APCs and RNs during the third week of the month, required to attend at least one if scheduled to do so by WFM, or can be scheduled to watch on their work hours. All meetings will be recorded and one posted after all of the three meetings have taken place.
- TaShawn Wilson will send out Teams meeting reminders at 7 days prior and 3 days prior to the first meeting to gather agenda items into the posted template and go over meeting structure and who is presenting each slide.
  - The 3 day reminder meeting will occur on the Friday before the week of meetings, and will be used to do a dry run of the deck and make sure all that need to submit slides to TaShawn have done so.
- Meeting Quiz emailed out after last meeting of the week, created and able to be found in Microsoft Forms, for APCs due 3 weeks after that month's meeting: ([Forms page, where to find Knowledge check](#)) See Education divide for more information. Report is uploaded to the APC Meetings Folder in LM1 Docs Teams Channel (look for "Meeting Attendance AKA Quiz" folder)
  - No specific score is mandated, but may provide opportunities for reinforcement or discussion of answers at 1:1 meeting. 2-3 of the most missed questions will be highlighted during the next month's meeting.
  - Meeting attendance taken from completed Quiz and is recorded in the [Monthly meeting attendance](#) by the AMD/DMD.
- LM1 physician attendance at all Clinician meetings is highly encouraged, and needed when a physician is presenting.

➤ **LM1 Clinical Leadership Meeting:**

- Mondays mid-day
- LM1 physician to include the Chief of Acute Care, DMDs, and the National UE program director. Nursing leadership, Training and Implantation leadership, as well as Ops leadership for LM1 attend.
- [Meeting Topics](#) are kept in the files under the LM1 Leadership Meetings Teams channel. Individual and group projects proposed, discussed, updates given. New and urgent matters discussed as well.
- Required for DMDs.

➤ **Weekly Leadership Catch up:**

- Thursdays Mid-day
- LM1 Physicians (CAC, DMDs, AMDs) and nursing leadership
- Clinical focused topics, group and individual projects.

- Clinical Leadership Meeting [Meeting Topics](#) in TeamsLM1 Doc channel
- **Required for AMD's**
- **Optional Monthly Office hours Q&A:**
  - 2-3 one-hour Q&A sessions 1-2 weeks after the monthly Clinician's meeting, voluntary for APCs and RNs, AMDs and other clinical leadership should attend if possible.
  - Operated by Dr. Karen Abrashkin (or designee) to answer questions from APCs and RNs regarding various topics.
  - Summaries will be made by TaShawn Wilson and sent out via email the following week.
  - Highly encouraged.
- **LM1 Full Leadership Meeting:**
  - Monthly, Monday or Wednesday afternoon
  - LM1 Full Leadership: CAC, DMDs, AMDs, TLs, TIQ, Ops leadership, ED, RN Manager, Supervisor of Clinical Ops.
  - Required
- **APC Bi-weekly Team Lead meeting:**
  - Bi-Weekly Wednesday Afternoons
  - LM1 AMDs and Team leads, discussion of matters that TLs are seeing, address issues and concerns brought up by the teams
  - Organized by Laura Roan, MD, but delegated to another AMD when needed
  - Highly encouraged
- **Bi-Monthly 2:1 meeting:**
  - National VP (Anessa Issa-Bazouzi) and Chief of Acute Care (Dr. Karen Abrashkin) for feedback, review performance, problem solving
  - Required for DMDs
- **Monthly or Bi-Monthly 1:1 AMD:DMD**
  - Established AMDs once onboarded will have their reports transitioned from the Chief of Acute Care to one of the DMDs
  - Required
- ~~➤ **Team meetings with Leads:**~~
  - ~~▪ Each Associate Medical Director will meet on a regular basis with the APC lead assigned to that AMD's APC team. Time will be at the discretion of the AMD and lead. They will review any issues related to their team, or other Landmark First issues as needed.~~
  - ~~▪ Highly encouraged~~
- **Bi-weekly Quality/ Peer Review:**

- Thursday afternoons
- Headed by Dr. Taylor Spencer
- Go through recent Peer review cases
- Required

➤ **Special work groups, non-recurrent, short term meetings examples**

- TL APC work group: Formed to include Team Leads, Clinical and Ops LM1 Leadership, to help analyze the work expectations of the Team Lead APCs and better realign duties to either them or other groups within the organization (WFM).
- RN Strategy work group: LM1 Clinical Leadership, Nursing leadership, and TL volunteers, evaluate the role of RNs within LM1 and their workflows (Clear Triage)
- Encouraged, commitment is based on time allowed and interest.

❖ **MARKET MEETINGS**

- CMD/DMD: Market MD/RMD 1:1: As needed. Organized by parties involved when there are issues particular to a market that need to be discussed.

➤ **LM1 Regional Market Meetings:**

- Monthly meetings between LM1 Clinical Leadership to include TLs, AMDs, and DMDs. Optional attendees are Ops leadership, PCC leadership.
- 5 meetings occur during 2<sup>nd</sup> and 3<sup>rd</sup> weeks of the month, one for each sub-territory.
- Meetings will focus on Ops announcements for LM1, shared metrics, Humanity, workflows, program changes and updates, call coverage, and market concerns brought forward.
- Agendas are found in the LM1 Clinical Leadership Teams channel, [Regional Meeting Agendas](#). We will ask for the Markets to send agenda items up to 3 days prior to the meeting date. Agenda are meant to contain majority shared material but may contain regional specific material such as Licensing and Credentialing updates for region specific states and LM1 coverage.
- TaShawn Wilson owns the invites and these are based on the [OAH Leadership Market Mapping](#).
  - TaShawn will also schedule a 3 days “dry run” meeting before the first LM1 Regional Meeting of the month for all LM1 attendees to review the agenda.