

# CARE CULTURE AND DECISION-MAKING INNOVATION COLLABORATIVE

Summer 2018 Update

Colleagues: Thank you for your involvement in the Care Culture and Decision-Making Innovation Collaborative (CCDmIC), a convening activity under the auspices of the National Academy of Medicine (NAM) Leadership Consortium for a Value & Science-Driven Health System.

#### NAM MEETINGS OF INTEREST TO COLLABORATIVE PARTICIPANTS

- Procuring Digital Interoperability for Health Care—focus: driving healthcare interoperability through collaborative procurement strategies (January 30, 2018; event page).
- Better Care for High-Need Patients Webinar Series—focus: to advance insights and perspectives on how to better manage the care of the high-need patient population (February 16, 2018 April 25, 2018; <u>summary</u>)
- Building the Evidence Base for Improving Health Care Symposium—focus: contributions of health services research (HSR) to effectiveness and efficiency in health and health care (February 26 & 27, 2018; event page)
- Care Culture and Decision-Making Innovation Collaborative Meeting—focus: community health needs assessments as a means to activate communities in co-creating agendas to promote health and well-being. (May 17, 2018; <a href="mailto:summary">summary</a>)
- Evidence and the Individual Patient: Understanding Heterogeneous Treatment Effects Meeting—focus: inherent limitations of using group data to guide treatment decisions for individuals (May 31, 2018; event page)
- Clinical Effectiveness Research Innovation Collaborative Meeting—focus: establishing a shared vision for generating stakeholder support and demand for data sharing, linkage, and use for a continuously learning health system (June 11, 2018)
- Digital Learning Collaborative Meeting—focus: patient ownership of health data in a learning health system (June 28, 2018; event page) COLLABORATIVE PROJECTS STEWARDED BY CCDmIC

Collaborative projects: 1) identify issues of common interest and marshal needed leadership; 2) develop tools and networks needed for progress; and 3) develop joint leadership possibilities through individually-authored *Perspectives* papers:

- Community Health Needs Assessments Principles & Practices: An NAM Working Group an *ad hoc* working group to explore principles to optimize the added value of community health needs assessments, share promising practices on the conduct of assessments, and identify how IRS regulations and requirements related to community benefit can offer more guidance.
- Technologies to Enhance Person, Family, & Community Activation: An NAM Working Group an *ad hoc* working group comprised of leadership from key stakeholder sectors to identify, prioritize, and advise on key issues related to the potential of technologies to make care more patient-centered, accessible and convenient for patients, while enhancing the quality of medical decisions. The working group has identified three topics for further exploration in NAM discussion papers.
- Patient and Family Engaged Care: Shifting Culture and Policies Improve Health and Reduce Disparities building on an NAM Perspectives Harnessing Evidence and Experience to Change Culture: A Guiding Framework for Patient and Family Engaged Care and discussions at CCDmIC meetings, a group of key thought leaders will assess issues and explore the culture change elements necessary to meaningfully engage patients, families and communities to co-create health equity and reduce health and health care disparities.
- Hospital and Health System Leadership Incentives to Improve Health and Reduce Disparities An expert discussion paper, in collaboration with the American Hospital Association, will explore trends in executive compensation of hospital and health system leaders for successful reduction of health disparities and meeting population health goals.

## COLLABORATIVE PROJECTS UNDER CONSIDERATION FOR CCDmIC

Collaborative projects: 1) identify issues of common interest and marshal needed leadership; 2) develop tools and networks needed for progress; and 3) develop joint leadership possibilities through individually-authored *Perspectives* papers:

- Improved networking for innovations. Assess landscape of proven community engagement models and explore opportunities for better networking of patients, families and health system Patient and Family Advisory Councils in CHNAs so information about successful models is accelerated.
- Assessment of community values. Using Vital Signs framework, explore metrics for assessing community values and community engagement.
- Executive incentives for reducing disparities. Explore use of executive compensation incentives to reduce community health disparities.
- Person, family and community engagement for better care, better value and better health. NAM initiative to support engagement of individuals, families, and communities as effective health and health care change agents by addressing three key areas: access to the evidence base to guide strategies; collaboration to apply evidence; and cultures and policies that are supportive and facilitative of their engagement.
- Advancement of patient and family engaged care. Develop common PFEC action and research agenda with a crosswalk of PFEC standards and
  measures and determine ways to digest the framework into messages for various stakeholders.

#### STAYING ENGAGED WITH CCDmIC

The next CCDmIC meeting will take place **December 6th**, **2018** in Washington, DC. If you would like to join via webcast contact Ioana Petricel (ipetricel@nas.edu). Please be in touch for information, to indicate interest in participating in an activity, or to offer any comments.

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Vision • Research • Evidence • Effectiveness • Trials • IT Platform • Data Quality & Use • Health Costs • Value • Complexity • Best Care • Patients • Systems • Measures • Leadership



## CARE CULTURE AND DECISION-MAKING INNOVATION COLLABORATIVE

Participating Organizations

AARP American Academy of Nursing American Academy of Pediatrics American Academy of Physician

Assistants

American College of Clinical Pharmacy

American College of Nurse-

Midwives

American Hospital Association American Institutes for Research American Medical Association American Nurses Association Association of Academic Health

Centers

Association of American Medical

Asthma and Allergy Foundation of

America Beryl Institute

Blue Shield of California

Foundation

Boston Children's Hospital Braintree Rehabilitation Hospital

C-Change

Cincinnati Children's Hospital

Coalition to Transform Advanced

Consumers Union

Consumers United for Evidence-

Based Healthcare

C.S. Mott Children's Hospital Dana-Farber Cancer Institute Dartmouth Center for Health Care

Delivery Science

Dell Children's Medical Center

Duke University Emory University Family Voices Georgetown University George Washington University Georgia Regents Medical Center

Gordon and Betty Moore Foundation Health Dialog Healthwise

Henry J. Kaiser Family Foundation Informed Medical Decisions

Foundation

Institute for Healthcare

Improvement

Institute for Patient- & Family-Centered Care

Johns Hopkins Health System Josiah Macy, Jr. Foundation Kaiser Permanente

Lown Institute Mayo Clinic

National Association of Community Health Centers National Business Group on

Health

National Committee for Quality

Assurance

National Governors Association National Partnership for Women

& Families

National Quality Forum Nemours Health System Northwestern University NYU Langone Medical Center Oregon Health & Science

University

Patient-Centered Outcomes Research Institute

Patient-Centered Primary Care

Collaborative PatientsLikeMe PFCCpartners Planetree

RAND Corporation Research!America

Robert Wood Johnson Foundation

Schwartz Center for Compassionate Healthcare

Sentrian

University Hospitals University of North Carolina University of Pennsylvania University of Washington Vidant Health System Virginia Commonwealth

University

Federal agencies: U.S. Dep't of HHS

- AHRQ - HRSA - NIH - CMS - ONC - CDC

U.S. Dep't of Defense U.S. Dep't of VA

### NAM LEADERSHIP CONSORTIUM FOR A VALUE & SCIENCE-DRIVEN HEALTH SYSTEM

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Association

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