NATIONAL ACADEMY OF MEDICINE

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; summary).
- 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; summary).
- 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.
- 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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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 Colleges
Asthma and Allergy Foundation of America
Beryl Institute
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Boston Children’s Hospital
Brantree Rehabilitation Hospital C-Change
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Coalition to Transform Advanced Care
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Consumers United for Evidence-Based Healthcare
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Federal agencies:
U.S. Dep’t of HHS
- AHRQ
- CMS
- HRSA
- ONC
- CDC
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