



CARE CULTURE AND DECISION-MAKING INNOVATION COLLABORATIVE

Winter 2019 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

- Leadership Consortium Members Meeting—focus: increasing consolidation in the health care industry and implications for care culture, value, and evidence in a continuously learning health system. (September 13, 2018; summary)
Digital Learning Collaborative—focus: convening of the NAM Artificial Intelligence (AI) & Machine Learning (ML) in Health Care Working Group and external experts to discuss a draft NAM Special Publication describing the promise, development, and deployment of AI/ML models to improve health. (January 16, 2019; event page)
Care Culture and Decision-Making Innovation Collaborative—focus: convening of the NAM Working Group on the Community Health Needs Assessment and Improvement Process: Principles & Practices to discuss a draft NAM Special Publication. (December 6, 2018; summary)
NAM Action Collaborative on Clinician Well-Being and Resilience—focus: establishing clinician well-being as a national priority. (May 29, 2019; event page)
Clinical Effectiveness Research Innovation Collaborative—focus: stakeholder convening for the NAM Generating Support and Demand for Health Data Sharing, Linkage, and Use initiative to review the progress and develop principles, approaches, and strategies for addressing barriers to data sharing, linkage, and use. (February 7, 2019; 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 is writing a special publication to describe the emerging principles of the community health improvement process; how these principles can be used to further the goals of health equity; and opportunities for transformative assessment and improvement in population health that include perspectives from all stakeholders, including health systems, public health departments, and the community.
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, equitable, accessible and convenient for patients, while enhancing the quality of medical decisions. The working group is in the process of writing three NAM discussion papers on related sub-topics. Summary of a recent meeting of this group is available here.
Assessing Community Engagement in Health & Health Care Measurement Development Project– with support from the Robert Wood Johnson Foundation, this collaborative project seeks to review existing measures for evaluating community engagement in health care program and policy decision-making at the healthcare system, local, state, and nation levels and to establish a process for identifying an indicator or set of indicators that can be used to measure community engagement in a wide range of settings.
Patient and Family Engaged Care: An Essential Element of Health Equity– 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.

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:

- Executive incentives for reducing disparities. Explore the use of health care executive compensation incentives to reduce community health disparities.
Person, family and community activation for better care, better value and better health. Develop an NAM initiative to support activation 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.
Assessment of community values. Using Vital Signs framework, explore metrics for assessing community values and community engagement.
Improved networking for innovations. Assess landscape of proven community engagement models and explore opportunities for better networking so information transfer about successful models is accelerated.

STAYING ENGAGED WITH CCDmIC

The next CCDmIC meeting will take place June 19, 2019 in Washington, DC. If you would like to join via videoconference, contact Fasika Gebru (fgebru@nas.edu). Please be in touch for information, to indicate interest in participating in an activity, or to offer any comments with Anna Cupito, (ACupito@nas.edu).

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



THE LEARNING HEALTH SYSTEM SERIES

CARE CULTURE AND DECISION-MAKING INNOVATION COLLABORATIVE

Organizations Participating in Recent Collaborative Projects

AARP	Consumers United for Evidence-Based Healthcare	Kaiser Permanente Lown Institute	Robert Wood Johnson Foundation Schwartz Center for Compassionate Healthcare
American Academy of Nursing	C.S. Mott Children's Hospital	Mayo Clinic	Sentrian
American Academy of Pediatrics	Dana-Farber Cancer Institute	Ntl. Assn. of Community Health Centers	University Hospitals
American Academy of Physician Assistants	Dartmouth Center for Health Care Delivery Science	Natl. Business Group on Health	University of North Carolina
American College of Clinical Pharmacy	Dell Children's Medical Center	Ntl. Committee for Quality Assurance	University of Pennsylvania
American College of Nurse-Midwives	Duke University	National Governors Association	University of Washington
American Hospital Association	Emory University	Ntl. Partnership for Women & Families	Vidant Health System
American Institutes for Research	Family Voices	Nemours Health System	Virginia Commonwealth University
American Medical Association	Georgetown University	Northwestern University	
American Nurses Association	George Washington University	NYU Langone Medical Center	Federal agencies:
Assn. of Academic Health Centers	Georgia Regents Medical Center	Oregon Health & Science University	U.S. Dep't of HHS
Assn. of American Medical Colleges	Gordon and Betty Moore Foundation	Patient Centered Outcomes Research Institute	- AHRQ
Asthma and Allergy Fdn. of America	Health Dialog	Patient-Centered Primary Care Collaborative	- HRSA
Beryl Institute	Healthwise	PatientsLikeMe	- NIH
Blue Shield of California Foundation	Henry J. Kaiser Family Foundation	PFCCpartners	- CMS
Boston Children's Hospital	Informed Medical Decisions Fdn.	Planetree	- ONC
Braintree Rehabilitation Hospital	Institute for Healthcare Improvement	RAND Corporation	- CDC
C-Change	Inst. for Patient- & Family-Centered Care	Research!America	U.S. Dep't of Defense
Cincinnati Children's Hospital	Johns Hopkins Health System		U.S. Dep't of VA
Coalition to Transform Advanced Care	Josiah Macy, Jr. Foundation		U.S. Dep't of Treasury
Consumers Union			

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

Chair	Robert Hughes	Richard J. Pollack	DoD
Mark B. McClellan	Missouri Foundation for Health	AHA	Thomas McCaffery
Duke University			Michael Dinneen
Members	Jeff Hurd	Peter J. Pronovost	DHHS
Jeffrey Balser	AstraZeneca	Johns Hopkins Medicine	Brett Giroir
Vanderbilt University Medical Ctr.			
Georges Benjamin	Gary Kaplan	John W. Rowe	VA
American Public Health Association	Virginia Mason Health System	Former, Columbia University	Richard Stone
	Darrell G. Kirch	Jaewon Ryu	FDA
David Blumenthal	AAMC	Geisinger Health System	Scott Gottlieb
The Commonwealth Fund	Richard E. Kuntz	Lewis G. Sandy	HRSA
	Medtronic	United Health Group, Inc.	George Sigounas
Patrick Conway	Peter Long	Leonard D. Schaeffer	NIH
BCBS of North Carolina	Blue Shield of California Foundation	USC	Francis Collins
			Michael Lauer
Susan DeVore	James L. Madara	Joe Selby	ONC
Premier, Inc.	AMA	PCORI	Don Rucker
Judith Faulkner	Mark E. Miller	Jennifer Taubert	
Epic Systems	Laura & John Arnold Foundation	Johnson & Johnson	
Joseph F. Fifer	Ameeth Nathwani, MD	Marta Tellado	
Healthcare Financial Mgmt Assn	Sanofi US	Consumers Union	
Stephen Friedhoff	Mary D. Naylor	Reed V. Tuckson	
Anthem, Inc.	University of Pennsylvania	Tuckson Health Connections	
Patricia A. Gabow	William D. Novelli	Debra B. Whitman	
Former, Denver Health	Georgetown University & C-TAC	AARP	
Atul Gawande	Sally Okun	Ex-Officio	
Harvard School of Public Health	PatientsLikeMe	AHRQ	
		Gopal Khanna	
Julie L. Gerberding	Harold Paz	CDC	
Merck & Co, Inc.	Aetna	Robert Redfield	
Sandra Hernández	Jonathan B. Perlin	Chesley Richards	
California Health Care Foundation	HCA, Inc.		
Diane Holder	Richard Platt	CMS	
UPMC Health Plan	Harvard Medical School	Seema Verma	
		Kate Goodrich	