



Robert Wood Johnson Foundation

{Quality/Equality}

By June 2008, 80 percent of the Quality/Equality community leadership teams will include organizations representing consumers that can effectively advocate for health care to become more patient-centered and equitable.

In most communities in America, people get health care through fragmented and often chaotic systems. Different stakeholders—physicians, nurses, health insurance companies, hospitals, businesses and patients—bring different perspectives about what the important aspects of health care value and quality are, but there are no clear pathways for any of these groups to achieve real, system-wide improvement.

As a result, the symptoms of dysfunctional health care systems are becoming more evident and problematic. Health care costs are growing at a rate that places bigger burdens on our nation's economy and individuals' finances. Many Americans—especially people from specific racial or ethnic backgrounds—continue to experience poor quality care, which can take many forms: the failure to provide a recommended treatment for a particular chronic disease, like asthma; the struggle for timely authorization to see a specialist; unnecessary complications from surgical procedures; or an easily preventable medication error.

In recent years, national organizations and the federal government have begun to collaborate around concepts of measuring and reporting the quality and cost of health care. These concepts depend upon the belief that making health care information readily available to relevant stakeholders leads to a better understanding of what high-quality health care looks like and how to create a collective demand for it. While the Robert Wood Johnson Foundation continues to support national efforts towards greater transparency of health care information, we are now focusing more of our attention on our regional quality strategy, an ambitious effort to transform health care at the ground level in specific communities across the country.



We began our regional quality work in 2006 with the launch of a national program, *Aligning Forces for Quality: The Regional Market Project*. Aligning Forces for Quality is working with 14 communities across the country to increase public reporting of health care quality information, document quality improvement initiatives undertaken by physicians in outpatient settings, and engage people to use health care information to become more involved in creating better health care systems.

To be considered for participation in this program, organizations in these communities were required to demonstrate commitment and involvement from multiple stakeholders: physicians, health insurance plans, and organizations representing consumer-level interests. These groups came together to form leadership teams supported by a hub grantee organization in each community—some representing a major metropolitan region, like Detroit, others representing an entire state, like Wisconsin.

For many of these leadership teams, even the act of getting together to agree on common goals related to health care quality was an extraordinary step. For example, if a particular region has two dominant health insurance plans, it is not typical for these two competitive interests to collaborate on measuring and reporting health care quality. Nor is it right to assume that the local physician groups in any one region will agree with publicly measuring and reporting performance. And at the patient and consumer level, most people do not treat purchasing health care in the way that they would, for example, buying a car—they are more concerned with being able to choose a doctor they trust to provide their health care than with how much the doctor charges.

Aligning Forces for Quality requires these groups to step beyond their entrenched perspectives and *work together* to create better health care systems. The work has been challenging, complicated, and intense—but all those involved know that the greater risk lies in *not* taking on these fundamental, necessary changes.

In 2007 RWJF took the next steps to invest even more in our regional quality work. We have brought together different strands from the Foundation's previous targeted investments in Quality, Disparities, and Nursing, and made them explicit points of emphasis in our new Quality/Equality strategic approach. We know, for example, that nurses play an integral role in patient care and can be a galvanizing force when they lead efforts to improve care in ways that truly matter to patients. We also know that we can take traditional quality improvement techniques like performance measurement and integrate addressing racial and ethnic gaps in care as part of these strategies.



Therefore, in 2007 the Foundation issued a call for proposals to the 14 Aligning Forces for Quality communities and asked them to propose big next steps, in partnership with the Foundation, toward high-quality, more equitable health care. The communities were invited to build on the work they have started in quality improvement, public reporting, and consumer engagement. We challenged them to focus on improving health care in multiple outpatient and inpatient settings, with an eye toward easing the often difficult transitions that occur between different points of care.

The final selection of communities for RWJF's regional quality work should be complete by the end of 2008. By that time, we hope that the communities will have expanded their leadership teams to include nurse and hospital leaders, minority advocacy organizations, and people who can effectively represent the concerns of consumers and real patients.

We will support the efforts of our partner communities with financial resources and the best technical assistance and research from the many other projects and programs in which we have invested over the past decade. And we will support communications efforts at both the local and national level to create consistent, accessible ways for multiple audiences to understand the changes—in policy, practice, and behavior—that need to happen to improve health care dramatically. In several years' time, we expect that our ongoing evaluation efforts—and our efforts to track the progress of health care quality and value—will tell us that our regional efforts have yielded unprecedented improvements in health care quality and that these communities can serve as nationally replicable models.

For additional information about our initiatives and objectives, visit www.rwjf.org/quality.