



Robert Wood Johnson Foundation

ABOUT US

For more than 35 years the Robert Wood Johnson Foundation (RWJF) has brought experience, commitment and a rigorous, balanced approach to the problems that affect the health and health care of those we serve. We leverage our reputation to bring people together, share our body of knowledge to spark discussion and debate, and build common ground in addressing some of the most pressing health and health care problems facing our country. When it comes to helping Americans lead healthier lives and get the care they need, we expect to make a difference in your lifetime.

MISSION

The mission of the Robert Wood Johnson Foundation is to improve the health and health care of all Americans. Our goal is clear: To help society transform itself for the better.

Our efforts focus on improving both the *health* of everyone in America and their health *care*—how it is delivered, how it is paid for, and how well it does for patients and their families.

We are guided by a fundamental premise: we are stewards of private funds that must be used in the public's interest. Our endowment is not our greatest asset; it is the way we help create leverage for change. We create leverage by building evidence and producing, synthesizing and distributing knowledge, new ideas and expertise. We harness the power of partnerships by bringing together key players, collaborating with colleagues, and securing the sustained commitment of other funders and advocates to improve the health and health care of all Americans.

To ensure that our programs are effective, we developed a framework to organize our grantmaking practices and areas of focus. This framework recognizes that we do several different kinds of grantmaking and that improving the ways these grants work together can enhance the measurable progress we make toward our overall mission. The framework groups most of our grantmaking into four clusters we call portfolios—Human Capital, Vulnerable Populations, Pioneer and Targeted. Within the Targeted portfolio, we have chosen a group of critical issues to address—Childhood Obesity, Health Insurance Coverage, Public Health and Quality/Equality—by setting specific time-limited objectives, benchmarks, a plan of action, and a budget to accomplish the objective.

QUALITY/EQUALITY

Quality/Equality aims to help communities set and achieve ambitious goals to improve the quality of health care in ways that matter to all patients and their families, and in particular to patients from specific racial and ethnic backgrounds who often experience lower-quality care.

The Problem

Despite advances in medical technology and science, health care in America is still fraught with uneven and often poor quality, especially in the treatment of chronic diseases that affect millions of Americans, like diabetes, asthma and cardiovascular disease. Although we know many of the best practices to improve the quality of treatment, formidable barriers prevent these practices from taking hold and transforming care across the country. In most communities, health care is delivered through fragmented systems within which hospitals, clinics, doctors, nurses and patients struggle to understand what quality care is and how to achieve it.

Beyond the burdens placed on providers and patients by dysfunctional health care systems, health care costs are growing at a rate that places bigger burdens on our country's economy. Therefore, we need far more rational ways to determine if our health care delivers value that is worth the investment—value to patients, physicians, nurses, hospitals, health plans, businesses and government. Right now, health care in America represents one of the biggest expenditures by the federal government and others and people still are not getting the right care at the right time.

Not only do we have a quality and value problem in the U.S. health care system, but research shows that certain groups—from specific racial, ethnic, cultural and socioeconomic backgrounds—persistently suffer the lowest-quality care. These gaps in quality persist even when other factors, such as insurance status and income level, are taken into account between minority and non-minority patients.

Our Approach

One of the lessons we have learned from RWJF's long history of investment to improve chronic care is that it *is* possible, with RWJF support and knowledge, to improve incrementally the quality of health care. Now, with our new Quality/Equality strategy, we want to go beyond the sum of what we have learned through our many programs and projects and achieve more sustained impact on the ground. It will take the efforts of all forces working together to achieve fundamental community-wide improvements in quality. What we are driving towards now is sustained local collaboration toward shared and ambitious goals of high-quality health care. We are asking leadership teams in targeted communities to 1) increase the number of physicians who participate in performance measurement and public reporting of health care; 2) engage patients and consumers in different aspects of their health care, like choosing high-performing clinicians; 3) develop networks of information and resources to help clinicians commit to and learn how to improve; and 4) focus on improving care across inpatient and outpatient settings, with an emphasis on racial and ethnic gaps in care.

For the most current information on our strategy, please visit www.rwjf.org/qualityequality.