The Roundtable

The Institute of Medicine’s Roundtable on Value & Science-Driven Health Care provides a trusted venue for national leaders in health and health care to work cooperatively toward their common commitment to effective, innovative care that consistently adds value to patients and society. Members share the concern that, despite the world’s best care, in certain circumstances, health in America falls far short on important measures of outcomes, value and equity. Care that is important is often not delivered, and care that is delivered is often not important. Roundtable Members are leaders from core stakeholder communities (clinicians, patients, health care institutions, employers, manufacturers, insurers, health information technology, researchers, and policy makers) brought together by their common commitment to steward the advances in science, value and culture necessary for a health system that continuously learns and improves in fostering healthier people.

What are the Roundtable’s vision and goals?

- A continuously learning health system in which science, informatics, incentives, and culture are aligned for continuous improvement and innovation—with best practices seamlessly embedded in the care process, patients and families active participants in all elements, and new knowledge captured as an integral by-product of the care experience.
- Promote collective action and progress so that “By the year 2020, ninety percent of clinical decision will . . . reflect the best available evidence.” (Roundtable Charter, 2006)

How does the Roundtable work?

- Through stakeholder workshops and meetings: to accelerate understanding and progress toward the vision of a continuously improving and learning health system.
- Through joint projects through the work of six affinity group Innovation Collaboratives focused on:
  - Best clinical practices (health professional societies and organizations)
  - Clinical effectiveness research (innovative research scientists and institutions)
  - Communication of medical evidence (marketing experts and decision scientists)
  - Digital technology for health (health IT and care delivery experts)
  - Incentives for value in health care (health care purchasers and payers)
  - Systems engineering for health improvement (medical, engineering, and IT leaders)

How is the Roundtable making a difference?

- Describing the possible through the 13 publications in the Learning Health System series providing the foundation for the landmark IOM report Best Care at Lower Cost.
- Stewarding action projects of the Roundtable’s Innovation Collaborative stakeholders, working cooperatively to advance science and value in health and health care. Examples include:
  - Documentation of cost and waste
  - Improving the science of transparency
  - Essential principles of team-based care
  - CEO checklist for high-value care
  - Point-of-care evidence access
  - Systems engineering for high-value care
  - Core metrics for better health at lower cost
  - Cost and evidence as patient priorities
  - Essential principles for evidence communication
  - Building patient and family leadership for system improvement
  - Making the case for outcomes research
  - Patient role in knowledge generation
  - Cooperative clinical research (PEDSNet)
  - Common Rule update
  - Digital infrastructure for a learning system
  - Strengthening the science of data-driven medicine
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Senior Fellow
The Brookings Institution

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Health Resources and Services Administration
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National Institutes of Health
Francis Collins, MD, PhD, Director
Kathy Hudson, PhD, MS, Deputy Director

Office of the National Coordinator for Health IT
Jacob Reider, MD, National Coordinator


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Making a Difference ... by mapping strategies

IOM Roundtable Vision & Strategy

VALUE
- Outcomes: Lives saved, Health gained, People satisfied
- Costs: Right care, Right price, Efficiently delivered

Science-Driven Health Care

SCIENCE
- Evidence & continuous learning

CULTURE
- People & continuous engagement

Collaborative Action
- Best Practices
- Evidence Communication
- Digital Learning
- Clinical Effectiveness
- Research Innovation
- Value Incentives
- Learning Collaborative
- Systems Approaches for Health Innovation Collaborative

Issue Assessments

Foundation Stones for Transformation
- Care Innovation
- Caregiver Culture
- Patient Engagement
- Evidence Standards
- Financial Incentives
- Information Technology
- Clinical Data
- Clinical Research

Vision
- "We seek the development of a continuously learning health system in which science, informatics, incentives, and culture are aligned for continuous improvement and innovation, with best practices seamlessly embedded in the delivery process and new knowledge captured as an integral by-product of the delivery experience." (Roundtable Charter)

Motivating Challenges
- "Care that is important is often not delivered. Care that is delivered is often not important. Improving the return on our healthcare investment is a vital imperative that will require quickening our efforts to position evidence development and application as natural outgrowths of clinical care—to foster health care that learns." (Roundtable Charter)