NCIOM Task Force Process

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NC Institute of Medicine

• Quasi-state agency chartered in 1983 by the NC General Assembly to:
  • Be concerned with the health of the people of North Carolina
  • Monitor and study health matters
  • Respond authoritatively when found advisable
  • Respond to requests from outside sources for analysis and advice when this will aid in forming a basis for health policy decisions

_NCGS §90-470_
NCIOM Studies

• NCIOM studies issues at the request of:
  • North Carolina General Assembly
  • North Carolina state agencies
  • Health professional organizations
  • NCIOM Board of Directors

• Often work in partnership with other organizations to study health issues
Recent NCIOM Studies

- Recent studies include:
  - Healthy North Carolina 2030 (2019)
  - Serious Illness Care (2019)
  - Perinatal System of Care (2019)
  - Services for Deaf and Hard of Hearing (2019)
  - Accountable Care Communities (2018)
  - Claims to Improve Health in North Carolina: A Report from the NCIOM Task Force on All-Payer Claims Database (2017)
  - Transforming North Carolina’s Mental Health and Substance Use Systems: A Report from the NCIOM Task Force on Mental Health and Substance Use (2016)
  - Dementia-Capable North Carolina: A Strategic Plan for Addressing Alzheimer’s Disease and Related Dementia (2016)
  - Patient and Family Engagement: A Partnership for Culture Change (2015)
NCMJ – North Carolina Medical Journal

• NCIOM also publishes the NCMJ
  • Each issue contains a special focus area with articles and commentaries discussing specific health issues
  • One of the issues of the NCMJ will include an issue brief (4-6 pages) about the Task Force’s work and recommendations
    • NC Medical Journal circulated to more than 170,000 people across the state
Task Force Process

- NCIOM creates broad-based task forces to study health issues facing the state
  - Task Forces generally comprised of 30-60 people
  - Task Forces are guided by co-chairs
  - Task Force members typically include representatives of state and local policy makers and agency officials, health professionals, insurers, business and community leaders, consumers, advocacy organizations, and other interested individuals
  - Meetings are open to the public
Task Force Process (cont’d)

- Task Force work guided by a smaller steering committee
  - People with expertise or knowledge of the issue
  - Help shape the agenda and identify potential speakers

- Presentations
  - May include research summaries and/or statistics, descriptions of programs, challenges or barriers to best practices, national developments
  - Presenters may include task force members, researchers, national or state leaders, state health care professionals, consumers, or NCIOM staff
Task Force Process (cont’d)

• NCIOM staff
  • Prepare agendas, invite speakers, gather information, and identify evidence-based studies when available to inform the Task Force’s work
  • Synthesize recommendations based on Task Force discussions – to be reviewed and revised by Task Force members
  • Write first draft of the final report, and seek input from the Task Force and Steering Committee members
Task Force Process (cont’d)

• Task Force report
  • Report is circulated to Task Force for review several times before being finalized
  • Task Force members may be asked to prioritize recommendations or metrics
  • Task Force members will take final vote on the recommendations and report

• NCIOM Board of Directors
  • Board members must review the report before it is finalized

• Reports distributed widely, other dissemination
  • Shorter 4-6 page Issue Brief (included in NCMJ issue)
  • Update published 3-5 years after report is published.
Meeting Materials on NCIOM Website

• We know that Task Force members may have conflicts for some of the meetings
  • We host webinars and conference calls for each meeting so that they can follow online or participate over the phone
  • We post meeting summaries and all meeting presentations on our website: www.nciom.org
  • Calendar and directions also available on the NCIOM website
Success Stories

• 50-90% of recommendations partially or fully implemented

• Recent example - Alzheimer’s Task Force:
  • Alzheimer’s statewide Brain Health Registry (recurring appropriation) – connection to clinical trials
  • Increase in Community Alternatives Program (CAP-DA) slots
  • Dementia-friendly hospitals designation out east
  • Dementia Coalition through DAAS meets quarterly about best practices in communities
  • Legislative change to create guardianship reciprocity
  • Dedicated position within DAAS to work with NC 211 to make sure resources are up-to-date; serving as model for how they want work to be done with NCCARE360
Success Stories, cont.

• 2011 – Task Force on Short- and Long-Term Solutions for Co-Location in Adult and Family Care Homes (2016 Report Update)

  • Fully implemented –
    • Pilot Program to evaluate costs, quality, consumer satisfaction, and patient outcomes of a program that supports individuals who would otherwise be in an adult or family care home and who want to move back into independent supported housing
    • Inventory of Community Housing Options for Individuals with Disabilities
    • Require standardized preadmission screening, level of services, and assessment instruments in adult and family care homes and 122C facilities

  • Partially implemented –
    • Increase funding for housing for individuals with disabilities
    • Require adult and family care home staff to be trained and to exhibit competency in person-centered thinking and crisis prevention
    • Pilot new behavioral health training and competency examination requirements for new direct care workers
Potential Task Force on Healthy Aging

• Association of State and Territorial Health Officials (ASTHO) framework with 4 areas of focus:
  1. Falls prevention
  2. Food and nutrition
  3. Mobility (i.e., transportation)
  4. Aging in place (i.e., HCBS and living arrangements)

• Timing:
  • Steering Committee to begin meeting January
  • Task Force meetings to begin March
  • 10 meetings over 1 year

• Funding is being discussed with multiple organizations
For More Information

• Websites:  www.nciom.org  
  www.ncmedicaljournal.com

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