FINAL STAKEHOLDER COMMUNITY AND OUTREACH CENTER CHARTER

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Agency for Healthcare Research and Quality:
Clinical Decision Support Innovation Collaborative (CDSiC)

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PROJECT:

Clinical Decision Support Innovation Collaborative (CDSiC)
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TASK & DELIVERABLE:

Deliverable 2.1: Develop a charter and operational framework for the CDSiC Stakeholder Community and Outreach Center

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CDSiC Vision and Mission

Vision Statement: A world where patients, caregivers, and clinicians have the right information at the right time to make evidence-informed decisions that improve health and well-being for all individuals.

Mission Statement: CDSiC aims to advance the design, development, dissemination, implementation, use, measurement, and evaluation, of evidence-based, shareable, interoperable, and publicly available patient-centered clinical decision support (PC CDS) to improve health outcomes of all patients by creating a proving ground of innovation. To achieve this, CDSiC will:

- Create a learning community to share the knowledge, tools, and techniques for designing, developing, implementing, using, measuring, and evaluating high-quality, PC CDS.
- Promote the practice and adoption of PC CDS that facilitates whole-person care and considers the patient, caregivers, and clinician workflows, preferences, and values around shared-decision making.
- Advance standards-based PC CDS that can be shared with patients, caregivers, clinicians, healthcare organizations, and health IT developers across the U.S. and result in measurable improvements in healthcare, patient health, and patient care experience.
- Engage key clinicians, informaticians, researchers, payers and patients in the creation and implementation of comprehensive CDS measurement frameworks that assess the design, development, implementation, use, and outcomes of CDS. This may include:
  - ► Standardize measurement of CDS
  - ► Demonstrate CDS utility through implementation of effective CDS
  - ► Develop measurement framework(s) and standardized criteria for CDS usage and utility to providers and patients
  - ► Identify taxonomy and measurement concepts for assessing effectiveness and safety of PC CDS and unintended consequences

Reasons for Establishing

The purpose of this charter is to formally initiate the CDSiC Stakeholder Community and Outreach Center (Stakeholder Center). The current fragmented state of healthcare delivery and CDS activities highlight the challenges that the CDS community currently faces in advancing the field. These barriers underscore the importance of removing siloes and connecting disparate members of the CDS community. Through its Workgroups, the Stakeholder Center will create a forum where members representing diverse perspectives within the CDS ecosystem can tackle persistent CDS challenges, foster innovation, and accelerate uptake of CDS within the U.S. healthcare system. Workgroup members will also review and recommend CDS concepts for demonstration in real-world applications and help develop products to advance CDS.

The primary audiences of this Charter are the Agency for Healthcare Research and Quality (AHRQ), the Stakeholder Center leadership, and the Stakeholder Center Planning Committee. The Charter will be ratified by the Project Directorate and the Stakeholder Center Planning Committee. The Charter will be publicly available on the CDSiC website.

Purpose

The Stakeholder Center and its four Workgroups will provide CDSiC's thought leadership—developing products that advance CDS for the broader community, guiding the overall work of the CDSiC (in partnership with the CDSiC Operations Center Steering Committee), and offering input on projects the CDSiC Innovation Center develops. Critically, the Stakeholder Center will engage diverse stakeholders in CDSiC activities, consistent with the mandate established by Section 6301 of the Affordable Care Act for AHRQ to engage and obtain feedback from diverse stakeholders.[1]

The Stakeholder Center will 1) establish and regularly convene a Planning Committee to guide Center activities, 2) establish and regularly convene four stakeholder-led Workgroups, 3) develop products across the four Workgroups, and 4) provide thought leadership across CDSiC in conjunction with the CDSiC Steering Committee to inform the direction of the collaborative and its work products.

Objectives

The Stakeholder Center's activities will primarily focus on the four Workgroups and the development of products. The objectives of the Stakeholder Center are outlined below:

- Establish four stakeholder-led Workgroups focused on key topic areas: 1) CDS Outcomes and Objectives, 2) Scaling, Measurement and Dissemination of CDS, 3) Trust and Patient-Centeredness, and 4) CDS Standards and Regulatory Frameworks.
- Develop 12 high-quality, written products across the four Workgroups that will inform the activities of the CDSiC Innovation Center and support the external community in advancing the development, implementation, and measurement of CDS to reach short- and long-term CDS goals.

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[1] Patient Protection and Affordable Care Act of 2010, Pub. L. No. 111–148, 124 Stat. 119 (2010), Codified as Amended 42 U.S.C. § 18001.

Outputs and Projected Outcomes

The Stakeholder Center will achieve the aforementioned objectives through a variety of activities as well as through continued communication and collaboration with CDSiC Steering Committee and Innovation Center. The outputs of the Stakeholder Center are outlined below:

- Provide, in conjunction with the CDSiC Steering Committee, thought leadership that will inform all CDSiC activities, in particular projects developed by the CDSiC Innovation Center.
- Develop an Operational Framework to describe the Stakeholder Center's structure and activities.
- Establish processes, including but not limited to the use of Confluence and/or other asynchronous discussion tools, to ensure that the activities of the Stakeholder Center Planning Committee and Workgroups are properly sequenced and that information flows across tasks to inform each other.
- Convene regular meetings of the Planning Committee to discuss, make decisions on, and provide input for Workgroup activities as well as provide input on CDSiC activities.
- Establish and regularly convene four Workgroups that represent a diversity of perspectives within the CDS ecosystem.
- Ensure that Workgroup leadership and members have sufficient guidance and support to develop products that will inform the work of the CDSiC Innovation Center and advance CDS within the external CDS community.
- Develop a clear reporting structure across the Workgroups, Stakeholder Center Planning Committee, other CDSiC Centers, and AHRQ, to ensure that there are routine opportunities to identify challenges, mitigation strategies, and synergies across workstreams.
- Utilize decision-making frameworks within the Planning Committee and wider project teams to reconcile conflicts or differences in opinions related to CDSiC activities.

The projected outcomes of the Stakeholder Center activities are as follows:

- Dedicated forums where CDSiC can engage a range of stakeholders from the CDS ecosystem, and where issues, priorities, diverse perspectives, and other inputs are obtained from participating members.
- Recommendations for short- and long-term goals for both CDSiC and the broader CDS community, and guidance for how to achieve these goals.
- Advancements in the design, implementation, and measurement of CDS as a result of the products developed by the Workgroups.

Constraints and Potential Challenges

Potential constraints to achieving the objectives of the Stakeholder Center are described below:

- All products must be informed by stakeholder input, specifically Workgroup members, and should reflect the inputs of the majority of, if not all, Workgroup members. The Stakeholder Center will recommend products based on each workgroup's focus area defined by AHRQ and will not directly develop CDS tools (e.g., creating new CDS) or conduct demonstration projects.
- All products must be planned and executed with the understanding that they are to be completed within the timelines established by AHRQ.

The potential challenges to the Stakeholder Center achieving desired outcomes are outlined below:

- Ensuring coordination across Workgroups to prevent duplication of efforts.
- Sustaining continued engagement among Workgroup leadership and volunteer members.
- Addressing the needs of a diverse CDS community that may have different, and at times conflicting, needs and values.
- Fostering an inclusive environment and facilitating productive discussions where each stakeholder participant is valued, respected, and heard.
- Avoiding duplication of external CDS efforts from parallel activities and organizations.
- Relying on Workgroup members who hold full-time positions outside of CDSiC and have only a part-time commitment to the CDSiC to contribute to Workgroup products in a timely manner.

Relevant Stakeholders

The Stakeholder Center Planning Committee, consisting of CDSiC project leadership (i.e., the PI, co-investigators, and Stakeholder Center leadership), Workgroup leadership, and AHRQ leadership, will be central to the operations of Stakeholder Center and will provide oversight for all Center activities. The Center's four Workgroups will be led by thought leaders and emerging voices within the CDS community. Each Workgroup will have a Chair, Associate Lead, and dedicated Workgroup support.

Reflective of AHRQ's commitment to advancing patient-centered care and ensuring that a range of stakeholder viewpoints are heard, respected, and incorporated across CDSiC activities, the Stakeholder Center is committed to meaningfully engaging patient representatives and a range of other stakeholders within the CDS community across all activities. Through the four Workgroups, the Stakeholder Center will engage patients/patient representatives, caregivers, federal agencies/policymakers, clinicians, medical/academic institutions, CDS content developers, informaticists, standards developers, PCOR researchers, electronic health record (EHR) developers, and health systems. All members will be equal partners within each Workgroup.

Decision-Making Frameworks

The Stakeholder Center Planning Committee will come to decisions using applicable decision-making frameworks depending on scope and the types of decision to be made. The Stakeholder Center will utilize the RACI (Responsible, Accountable, Consulted, and Informed) matrix framework as a starting framework to determine the role different parties will play in making a decision, including defining when and how Planning Committee members will be involved. Definitions for the RACI matrix are outlined below:

RACI Definitions[2]:

- R – Responsible ("The Doer")
  - ► The "doer" is the individual(s) who actually completes the task. The "doer" is responsible for action/implementation. Responsibility can be shared. The degree of responsibility is determined by the individual with the "A".
- A – Accountable/sign off ("The Buck Stops Here")
  - ► The "accountable" person is the individual who is ultimately answerable for the activity or decision. This includes "yes" or "no" authority and veto power. Only one "A" per decision.
- C – Consult/two way ("In the Loop")
  - ► The "consult" role is individual(s) (typically subject matter experts) to be consulted prior to a final decision or action. This is a predetermined need for two-way communication. Input from the designated position is required.
- I – Inform/one way ("Keep in the Picture")
  - ► This is individual(s) who needs to be informed after a decision or action.

The Stakeholder Center Planning Committee will be "Responsible" for communicating to Workgroup members strategic decisions made by the CDSiC and the Stakeholder Center and executing upon these decisions. The Stakeholder Center Planning Committee will also execute the "Consult" and "Inform" dimensions of the RACI framework in relation to Workgroup activities and developed products. In the event of irreconcilable differences within the Workgroups, the Planning Committee will be asked for their opinion or advice, to help break the stalemate and reconcile dissenting views.

In the launch of the four Workgroups, Workgroup members will fulfill a range of roles including the "Responsible", "Consult", and "Inform" dimensions of the RACI framework. Workgroup members will be responsible for identifying potential Workgroup products through discussion and deliberation based on criteria established by project leadership and determining the final products to be developed pending approval from the Stakeholder Center Planning Committee and AHRQ. Workgroup members will also provide input into Innovation Center activities. After the Workgroups are established, members will fulfill the "Responsible" dimension for a particular product or activity. Stakeholder Center leadership and the

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[2] Smith ML, Erwin J. Role & Responsibility Charting (RACI) [Internet]. Available from: https://pmicie.starchapter.com/images/downloads/raci_r_web3_1.pdf

CDSiC Project Directorate will ultimately be responsible and accountable for the timely completion of high-quality products.

The Planning Committee may make a variety of decisions as part of establishing the Workgroups, providing guidance about potential products, and providing strategic input on Innovation Center projects. Different types of decisions may benefit from the use of more robust decision-making frameworks. Such frameworks may include but are not limited to:

- Decision matrix: evaluates and prioritizes a list of options against an established list of weighted criteria and then evaluates each option against those criteria.
- Risk-benefit analysis: comparison between the risks of a situation and its benefits to determine whether a course of action is worth taking or if risks are too high.
- Feasibility-impact analysis: comparison of the factors of a project/activity that determine the probability of its successful completion relative to the significance in change that would be occur as a result of the project/activity.

The goals of the Committee will be to achieve consensus. However, in the event of irreconcilable differences within the Planning Committee, AHRQ will be asked for their opinion or advice to help break the stalemate.