

June 8, 2020

Jade Perdue
Director
Division of Quality Improvement Innovation Models Testing
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Dear Ms. Perdue:

On behalf of the Collaborative for Accountability and Improvement, we are writing to express our strong support of the inclusion of Communication and Resolution Programs (CRPs) as the 6th element of the Person and Family Engagement metrics. We believe that CRPs are essential means of engaging patients and families that also support our shared goals for safer care and reduced financial waste.

CRPs, often known as CANDOR programs, are a principled, comprehensive, and systematic approach to responding to patients who have been harmed by their healthcare. CRPs seek to meet the needs of a patient and their family when something goes wrong during their care, and they also address the quality and safety gaps responsible for the event. A CRP requires that a healthcare organization and its clinicians develop a highly reliable process for:

- Being transparent with patients around risks and adverse events, including sharing information about what happened as it becomes available, whether the adverse event was preventable, and if so, why the event happened, and how recurrences will be prevented in whatever detail the patient desires.
- Analyzing adverse events using human factors principles, and developing and implementing action plans designed to prevent recurrences of adverse events caused by system failure or human error.
- Supporting the emotional needs of the patient, family, and care team affected by the event.
- Proactively and promptly offering financial and non-financial resolution to patients when adverse events were caused by unreasonable care.
- Educating patients or their families about their right to seek legal representation.
- Working collaboratively with other healthcare organizations and professional liability insurers to respond to adverse events involving multiple providers.
- Assessing regularly the effectiveness of the CRP program using accepted, validated metrics.

CRPs are fully consistent with the core Person and Family Engagement (PFE) principles because they drive quality improvement, enhance patient safety, and facilitate patient-centered accountability. As you continue to build on the success of the PFE strategy, we hope you will keep in mind the critical role that CRPs can play in improving our healthcare system. Adopting CRPs as part of the PFE metrics would be a pivotal next step towards accomplishing these goals. The Collaborative is in the process of defining and pilot testing metrics to assess the

adoption of effective/high quality CRPs in acute and non-acute settings, and we would be delighted to partner with CMS to refine and disseminate these measures.

The Collaborative is a national program that brings together leading experts to support the growth and spread of high-functioning CRPs (see enclosure). Its leadership was instrumental in creating the Communication and Optimal Resolution (CANDOR) Toolkit published by the Agency for Healthcare Quality and Research (AHRQ) in 2016.

We would like to schedule a call to discuss how we may support your PFE efforts.

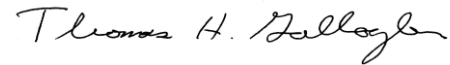
Sincerely,



Barbara Pelletreau, RN, MPH
Co-Chair
Policy Subcommittee



Michael C. Stinson, JM
Co-Chair
Policy Subcommittee



Thomas Gallagher, MD
Executive Director
Collaborative for Accountability
and Improvement

Enclosure

cc: Paul McGann, M.D.