Our team at Altarum has embarked on a very exciting project, and we are looking to invite a few leadership organizations concerned about improving eldercare within their geographic community to partner with us. We have some funding from the Gordon and Betty Moore Foundation to work on this exciting possibility. Aggregating existing personal data and analyzing it for the local population could give communities substantial insight into how well their local system is working and then guide them in improvement initiatives.

We are developing the methods to bring together information about the needs of disabled elderly people and the supply and quality of services available. So much of what happens to elders living with disabilities depends upon the services available where they live. If an organization, whether a government entity or a private coalition, sets out to improve the experiences of elders and their families, they will need information about how well their local system works. We intend to help community leaders with this essential element -- building metrics that will enable them to see strengths and shortcomings in the local system, to set priorities for investments and improvements, and to monitor the effects of efforts to improve.

In a funded project, we are looking to build on the current trends that move data from multiple sources into an integrated database, with the sources encompassing all manner of medical, behavioral, and supportive services. We aim to make better use of data sources that many communities already have on hand, but which are underutilized as sources of guidance for improving how we care for elders needing support and medical care. Then, the community could analyze the data to identify shortages, oversupply, maldistribution, quality problems, and areas of high performance. Wouldn't it be transformative to know whether your community's elders generally have to move to nursing homes because there are very few disability-adapted housing options! Or that three-quarters of those eligible for and needing nutrition assistance are not receiving it. Perhaps you are concerned about the pressure ulcer rate, or the rate of use of major tranquillizers, and an aggregated data set would enable monitoring of these performance characteristics over time.

We know of some communities that have been working on this sort of challenge, but we are now casting a wider net. With a groundbreaking initiative like this, we need to work with teams that already are partway along toward managing eldercare for their community, or something similar. We'll connect these communities with one another and help provide needed expertise. We also have some funding to help incentivize local demonstrations.

Could your community be far enough along to be one of the partners in this work? Or do you know of a community that we should consider? If so, have a look at our Request for Information which is available online at: https://medicaring.org/communities-rfi

Then, fill out the short form below and send it in no later than November 24, 2017. You may copy the questions into a mail message, download a Word document, or print a PDF version and mail it in. We'll be in touch!

If you have questions about this, contact Greg Becker at 202-776-5107 or info@medicaring.org

1. Name(s) of person or persons submitting the form

2. Contact information for the submitter(s) – email, phone, address

3. Name or description of the community you are recommending? By "community" we mean a geographically-defined catchment area of some sort. Say also how would you would like to define the community geographically – city or county boundaries, ZIP codes, or some other boundary?

4. Roughly how many people live in the community?

5. Contact information for other leaders who are interested – perhaps from health systems, public health, Area Agencies on Aging, or existing coalitions or commissions.

6. Is there any organizational entity that views itself as responsible for the entire community's elderly (rather than being responsible only for the clients from that community who use their services)?

7. Tell us a little about how elders living with disabilities associated with aging are doing. What problems are already recognized?

8. Within that community, what organizations are most involved in effort(s) to improve supportive services, medical care, caregivers, or other elements that are key to living well with disabilities in old age?

9. Why do you think this community's leadership organizations would want to engage in this work? Can you suggest a few metrics that you feel would be helpful in guiding efforts to improve reliability and quality of eldercare in their community?

10. Tell us what you readily know about your health-related information systems. What is the status of digital information and interoperability? Is there a Health Information Exchange? Is there any entity that is already aggregating some data across different types of providers (e.g., Medicaid and other publicly paid social service is being combined with medical care information, or health care utilization is being joined with social services utilization)?