

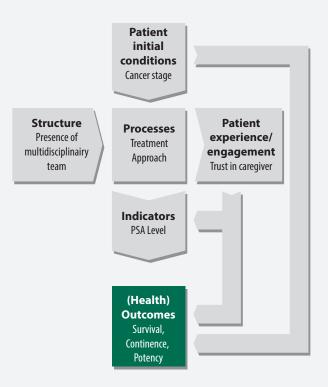
#### INTERNATIONAL CONSORTIUM FOR HEALTH OUTCOMES MEASUREMENT NEWSLETTER WINTER 2013

## DEAR FRIENDS AND SUPPORTERS OF ICHOM,

Attendees at our inaugural conference in late October will recall we faced an unexpected challenge: Hurricane Sandy had chosen to strike the East Coast at a most inconvenient moment for our new organization. We were lucky in that the Boston-area escaped largely unscathed, but we were luckier still to have such an enthusiastic, inspiring, and dedicated group of supporters turn out to discuss our mutual goal of moving health outcome measurement forward. I first want to express my profound gratitude for your support then and in the weeks after.

We're happy to report that we've been quite busy these past few months getting ICHOM off the ground. Soon after the conference, Caleb Stowell, vice president of research, and I were fortunate to find an outstanding new colleague – Pieter de Bey – to add to our leadership team as vice president of operations. (You'll find a short introduction to the three of us on a following page.)

As we progress, we wanted to share with you our thinking about ICHOM's strategy and objectives, which we believe differentiate it from the many other initiatives in the health care: We believe ICHOM's primary mission is to



This figure describes the measurement landscape. The examples of measures are for the medical condition Prostate Cancer. Health outcomes and patient initial conditions are the focus of ICHOM, because that represents the value delivered across the full cycle of care and is what matters most to patients

## DEFINE A GLOBAL STANDARD SET A8 OUTCOME MEASURES THAT REALLY MATTER TO PATIENTS

for the most relevant medical conditions, and to drive adoption of these measures worldwide to unlock the potential of value based health care.

Outcomes measurement today is hindered by fragmentation of efforts and unnecessary variation of indicators. A global standard has the power to unite these disparate efforts into a single global network of learning and improvement and to facilitate new measurement efforts to join.

### THANKS TO YOUR KIND AND GENEROUS SUPPORT, ICHOM IS ALREADY OFF TO A RUNNING START.

Working in partnership with patients and patient advocacy groups, our medical condition working groups are well on their way to defining these global standards. Even more exciting is that leaders from two new conditions, degenerative lumbar disease and prostate cancer, have also approached us about forming working groups, and we hope to launch these groups later this spring.

As mentioned above, we believe ICHOM should not only define the global standard for outcome measures by condition but should also drive adoption of these measures worldwide. To facilitate this process, we are developing our expertise in data collection and reporting practices and plan to provide case studies and other resources that will simplify adoption and increase the impact of our partners' measurement efforts.

ICHOM's focus on outcomes that matter to patients, its goal of standardization, and its international focus set us apart, and we are proud to already have the support of so many health care leaders and organizations.

This generous support and the aid of our founding organizations (see below for a list of our Founding Members) has allowed us to move into office space in 12 Arrow Street in Harvard Square. We are thrilled to be embarking on this journey in such a stimulating working area. We've already begun training a group of outstanding research assistants to help us ramp up. Their enthusiasm is palpable, and we couldn't be happier with their work to date. Important for our donors is that in February ICHOM officially received its tax exempt status under section 501c3 of the Internal Revenue Code.

We will organize our second annual conference in Boston on Nov 20th / 21st. A more detailed agenda will follow. Please don't hesitate to reach out to us if you want to be more involved or would like more information on our current activities. In the following issues of this newsletter, we will also inform you in more detail about our progress.

Thanks to your kind and generous support, ICHOM is already off to a running start. We have an important and challenging goal, a great team, and a wonderful working environment. We are looking forward to continuing to work with you for the betterment of health care!

Yours, Dr. Jens Deerberg-Wittram, MD President ICHOM





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# WE ARE:



#### JENS DEERBERG-WITTRAM, MD PRESIDENT

Trained as a physician and molecular oncologist, Jens served from 2004 to 2012 as Chief Executive for a German 15 hospital, 4.800 beds provider organization. He has developed and implemented value-based corporate strategy and established a worldwide leading medical outcomes measurement and reporting system. Prior to working in hospital management, Jens was a project leader for BCG. Before working as a strategy consultant, he was a management trainee in the diagnostic industry.

Since 2009 he has closely collaborated with Professor Michael Porter. He is a Senior Fellow and Faculty Member of the Harvard Business School and lecturer in executive courses about value-based healthcare delivery.



#### CALEB STOWELL, MD VP OF RESEARCH AND DEVELOPMENT

Caleb joins ICHOM after spending two years as Research Associate and then Senior Health Care Researcher with Professor Michael Porter at the Institute for Strategy and Competitiveness at Harvard Business School. During this time, he contributed to academic articles, case studies, and presentations promoting a value-based approach to health care delivery in the US and abroad. More recently, he served as the ISC's primary liaison in launching ICHOM and since November 2012 joined ICHOM full-time to lead its global outcome measure standardization efforts. Caleb received his MD from Harvard Medical School.



#### PIETER DE BEY, VP OF OPERATIONS

After his masters in Theoretical Physics from the University of Utrecht, Pieter joined the Boston Consulting Group in Amsterdam. Since 2005 he has worked in many industries with a focus on Health Care and Financial Services. During that period he worked on strategic questions and complex reorganizations, such as hospital mergers. In 2009 Pieter received his MBA from Kellogg School of Management. He joined ICHOM in January 2013 and is responsible for operations and for a number of functional topics, such as the Data Collection and Reporting knowledge development.

## WE ARE THANKFUL TO OUR DONORS



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