

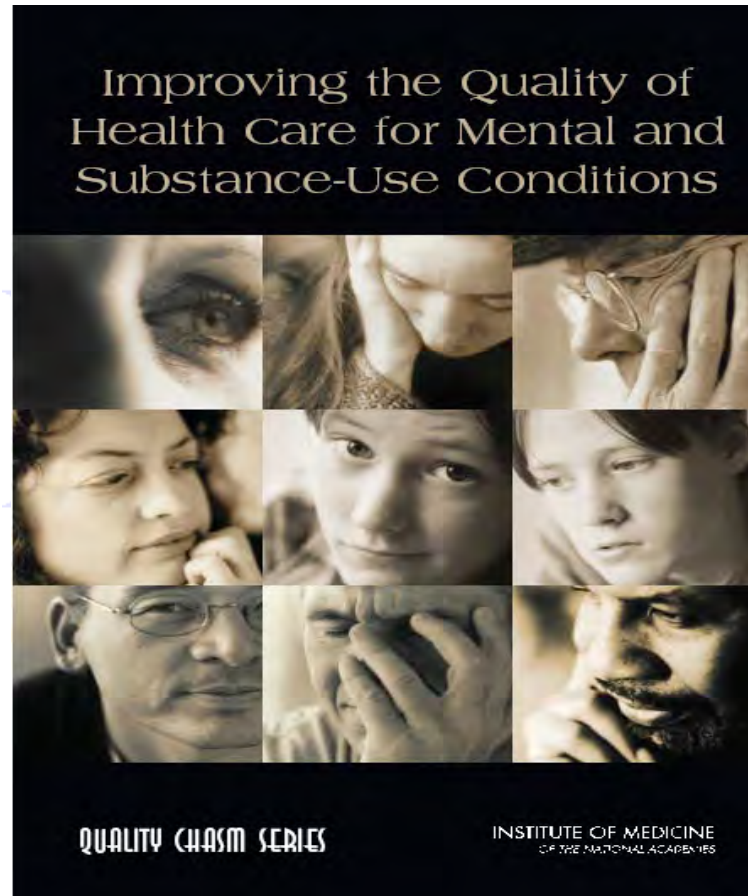
Improving the Quality of Health Care for Mental and Substance-Use Conditions

*“A Report in the Quality Chasm
Series”*

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Improving the Quality of Health Care for Mental and Substance-Use (M/SU) Conditions

— A Report in the Quality Chasm Series



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Improving the Quality of Health Care for Mental and Substance-Use Conditions

Contents

1. The nature of the quality problem in M/SU health care
2. Chasm framework for QI
3. Supporting patient decision making and preferences
4. Strengthening the evidence base and QI infrastructure
5. Coordinating care
6. Ensuring the NHII benefits persons with M/SU needs
7. Increasing workforce capacity
8. Using marketplace incentives for QI
9. A comprehensive agenda for change
10. Constraints on information sharing by federal & state laws, organization practices

Six Problems in the Quality of M/SU Health Care – and Solutions

Problem 1: Patient-Centered Care

Problem 2: Weak measurement & improvement infrastructure

Problem 3: Poor linkages across systems of care

Problem 4: Lack of involvement in the National Health Information infrastructure

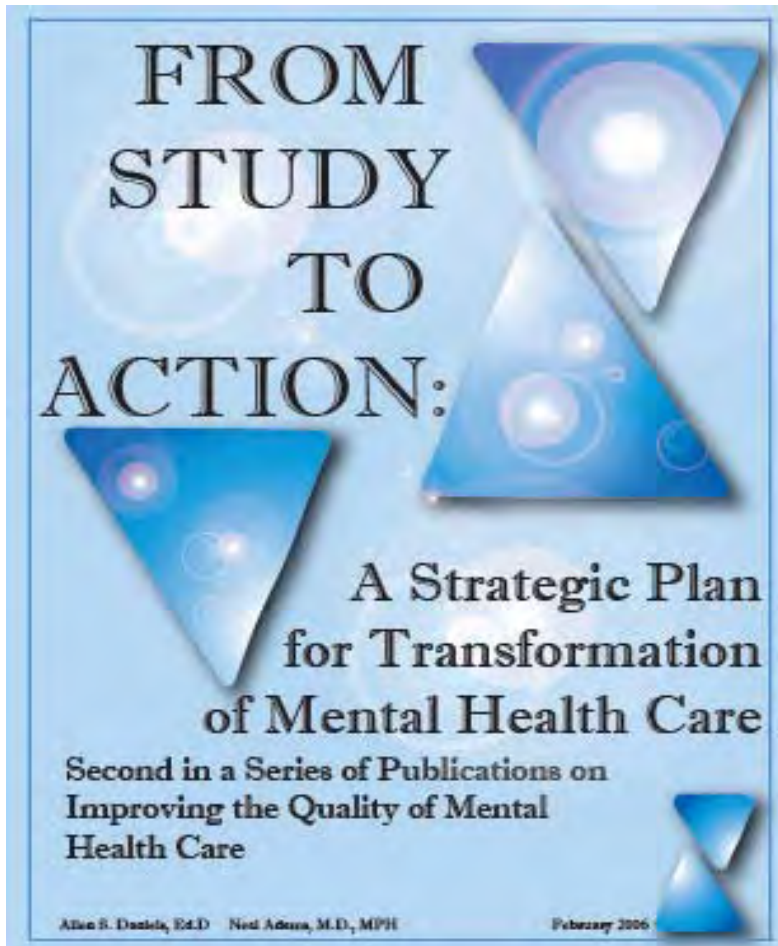
Problem 5: Insufficient Workforce Capacity

Problem 6: A Differently Structured Marketplace

Improving M/SU Health Care Requires an Action-Agenda by Stakeholder Groups: Chapter 9 (tables 9.1 - 9.8)

- Clinicians
- Health care organizations
- Health plans
- Purchasers
- State policy officials
- Federal policy officials
- Accrediting bodies
- Institutions of higher education
- Funders of research

Resources:



Partnership for Health Care Change is a resource affiliated with the University of Cincinnati Department of Psychiatry and committed to the improvement of health care for mental and substance use conditions. We welcome input, links, and public domain examples of quality improvement, innovation, and activities that support transformation of systems of care.

