
Short read: 4 manageable steps to value-based healthcare



Previously the concept of value in healthcare was frowned up as “a utopian vision”; however, today this concept is widely regarded by industry leaders as a strategic priority. Improving value has to do with measuring outcomes that matter most to patients. Moreover, establishing value for patients is made when an organisation, guided by dedicated senior leaders, undergoes a dramatic cultural shift for sustaining high standards of care.

"We've observed four steps that organisations seeking to redefine care delivery work through, albeit in varying orders, at different paces and to different degrees. Taking these 'steps within your stride' transforms an organisation in the direction of higher value services for patients without heroic leaps," according to Elizabeth Teisberg, PhD, an internationally recognised author and professor, and Scott Wallace, JD, an international consultant on health IT, policy, innovation and finance. The two are currently affiliated with Dell Medical School, an innovative new, value-based medical school in Austin, Texas.

Step 1: Measure results

The adage that what isn't measured won't improve is widely accepted. That makes medicine's dearth of systematic outcomes measures unusual, possibly even unique. Although clinicians routinely ask patients how they are feeling, learning from feedback about patients' results is slowed by failing to systematically collect outcome data. Measuring a discrete, meaningful set of outcomes enables insights that have dramatic implications for care delivery: i) outcomes unmask faulty assumptions; and ii) outcomes measurement supports professionalism.

Step 2: Document care paths

Identifying care paths exposes discrepancies in care, uncovers redundancies and leads to debate about improving practices. Like faulty care assumptions, waste and redundancy are often surprises. These can be avoided through care path identification, which is a key to reducing costs. A care path for a medical condition should be a reality check, not a straitjacket. Professional judgment can and should still be applied and variations can then be analysed to drive learning and improvement. Identifying differences and determining which paths improve patient outcomes fuels innovation.

Step 3: Create teams

Teams that integrate delivery across the full cycle of care and learn together are the essence of value-based care delivery. Clinicians often describe themselves as members of teams and are surprised to realise they really work within groups that lack the key characteristics of teams. Teams share specific objectives of their work, trust one another, communicate consistently and effectively, and measure results together. Teams that function well together quickly reach the issue of sharing payment, making bundled pricing of services a challenging but natural step rather than a daunting leap. Some services or activities that aren't directly reimbursed can improve patients' outcomes and lever clinicians' time.

Step 4: Engage in human-centred design

Most healthcare services are organised around providers and their training, rather than around the needs of patients. While each patient is unique, those with Type 2 diabetes, for example, have relatively predictable needs and typically require a collection of services from endocrinology, cardiology, podiatry, and retinal care, to name just a few specialities. Typically, patients bear the burden of organising and coordinating the many dimensions of their care. If the fast food sector followed healthcare's structure, lunch might require visits to three separate restaurants to get a burger, fries and a drink. Making care more effective requires restructuring services to be more convenient and efficient for patients.

"Consider your organisation's strengths and start with the step that best uses those advantages," Teisberg and Wallace note. "Not surprisingly,

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