Value-based health care: What this might mean for North Brisbane

Nick Steele, Deputy Director-General
Fad or future?

Real and lasting change?

Or new name for more of the same?

Value-based care
### Volume to value

<table>
<thead>
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- Providers deliver precision medicine – the right care for each individual
Delivering what matters

Consumers?

Providers?

Government?

VALUE

...FOR WHOM?
Delivering what matters

Data/Analytics
Intelligently targeted insights that support improvements in the organisation & delivery of care

System improvement efforts

Clinical improvement efforts

Culture and leadership
Trust and collaboration in pursuit of shared objectives; Supportive not punitive; Courage to pursue disruptive transformations

Making value an organisational reality

Optimising patient journeys, care pathways, and understanding variation

Providing only the care that is necessary—nothing more, nothing less

Avoiding harm

Changing healthcare trajectories to reduce demand for acute public hospital services

Organisational reinforcement systems
Focus on outcomes and quality; used as an enabler of clinical innovation and improvement efforts

Policies and planning
Reflect and reinforce learnings from clinical improvement initiatives
Other key enablers

- To support conversations about “What matters”, enhancing shared decision-making and precision medicine.
- To keep people well in the community for as long as possible, and to achieve better outcomes for people with chronic and complex conditions.
- To assess alignment between care delivery and desired outcomes.
- To provide tools and support for identifying and acting on opportunities for better value care.
Key areas of change

01 – REBALANCE SYSTEM KPIS
Broadening the definition of successful performance to include delivery of the health outcomes that matter to patients

02 – REDUCED FOCUS ON VOLUME
Transition to accountability for agreed outcomes rather than units of activity

03 – INCREASED TRANSPARENCY
Greater sharing of information to support learning and improvement

04 – ACCELERATE HIGH VALUE CARE
Conversations on the occurrence of low value care and, more importantly, accelerating examples of high value care

05 – REBALANCE INVESTMENT
To support people to stay well in the community for as long as possible

06 – PURCHASE OUTCOMES
Purchase specified outcomes for target groups rather than specified volumes of certain activity types to increase funding flexibility

07 – MAINTAIN ACCESS
Continue to ensure timely access to outpatient, elective and emergency care for Queenslanders

08 – SYSTEM APPROACH
Encourage a whole system approach to designing and delivering optimal patient pathways
Next steps

01
REDUCE LOW VALUE CARE
Drawing on the work of Choosing Wisely to understand the occurrence of LVC, and reduce it where possible

02
STRENGTHENED PREVENTION
Keep people well in the community for as long as possible through evidence-based prevention and targeting the social determinants of health; initial focus on obesity

03
REDUCE VARIATION IN OUTCOMES
Work to understand and reduce the occurrence of clinical outcome variation that is unwarranted, starting with total joint replacement (prosthetics)

04
IMPROVE VALUE FOR TARGET GROUPS
Better healthcare outcomes for patient populations, beginning with frail elderly and high utilisers

05
SCALE HIGH VALUE CARE
Expansion of evidence-based models that achieve person-centred outcomes in the least burdensome ways e.g. home dialysis; HITH
How can you be ready?

**Capitalise**
Take advantage of investment opportunities (e.g. $20M investment in frail elderly; QIPs) and analysis support (e.g. LVC reports)

**Compare**
Know how your quality and outcomes compare to peers and national benchmarks

**Identify**
Identify opportunities and priorities for value improvement, and focus on models evidenced to impact

**Understand**
Engage with clinicians to understand what drives variation in clinical practice and outcomes

**Enable**
Work on getting key enablers in place, especially the empowerment of clinicians and consumers as agents of change

**Negotiate**
Where there is a value proposition – speak to us!
A Queensland example

Is bariatric surgery right for me?
Questions?

More information/further discussion:

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