

The NSW approach to value based healthcare

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| Why do we need to adapt?

Healthcare worldwide is changing with **rising health costs** and **new technologies**

The **needs** and **expectations** of patients, carers, clinicians and communities **continue to grow**



There is increasing **demand** and **complexity** of delivering care

Patients are taking **a more active role** in their healthcare and choices about what matters to them

NSW Health has developed a framework to support a shared understanding of value based healthcare

In NSW value based healthcare means continually striving to deliver care that improves:

Health outcomes that matter to patients

Experiences of receiving care

Experiences of providing care

Effectiveness and efficiency of care

Considering value based healthcare at different levels

Individual



Am I providing care that delivers the outcomes and experiences that matter most to the patient?

Service



Are we using available resources optimally to improve outcomes?

System



Are we allocating resources and creating the environment that enables the best outcomes?

Value based healthcare in NSW

Health

Vision

A sustainable health system that delivers outcomes that matter to patients and the community, is personalised, invests in wellness and is digitally enabled

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- Experiences of providing care
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Accelerating initiatives and enablers

Initiatives

- Personal and community engagement
- Personalised care
- Population health
- Prevention and early intervention
- Research and innovation
- Workforce and leadership

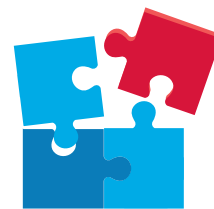
Enablers

- Leadership and governance
- Integration
- Collaborative working
- Collaborative working

Foundations

- Personal safety and security
- Personal safety and security

| How do we frame the move to value based healthcare?



Building on the good work already occurring, aligned narrative

Long-term evolution, not a discrete project



Systematic measurement of outcomes

Maximise outcomes from the patient perspective



Re-prioritising



| What distinguishes value based healthcare?



NSW Health's approach to move towards value based healthcare

Statewide priority programs and enablers



Enablers



Patient and community engagement

Engage patients and communities to understand what matters and support their empowerment



Measurement and evaluation

Improve our ability to measure and evaluate the impact our care is making to people and the system



Research and innovation

Support and harness health and medical research and innovation



Delivery organisations

Working with a range of providers across settings to deliver care where and how the best outcomes and experiences are achieved

Statewide priority programs

Leading Better Value Care

Identifying and scaling evidence based initiatives statewide for specific conditions

Integrating Care

Statewide strategies to coordinate care and processes within the health system and with other service providers

Commissioning for Better Value

Shifting focus of non-clinical and clinical support projects from outputs to outcomes

Collaborative Commissioning

Whole-of-system approach to incentivise local autonomy and accountability for delivering patient-centred and outcome-focused care in the community

Enablers



People, culture, governance and capability

Achieve a 'Fit for Purpose' workforce for now and the future



Digital health and analytics

Use analytics to better support decision making and technology to transform the way health care is delivered



Funding and purchasing

Shift the focus from activity to outcomes

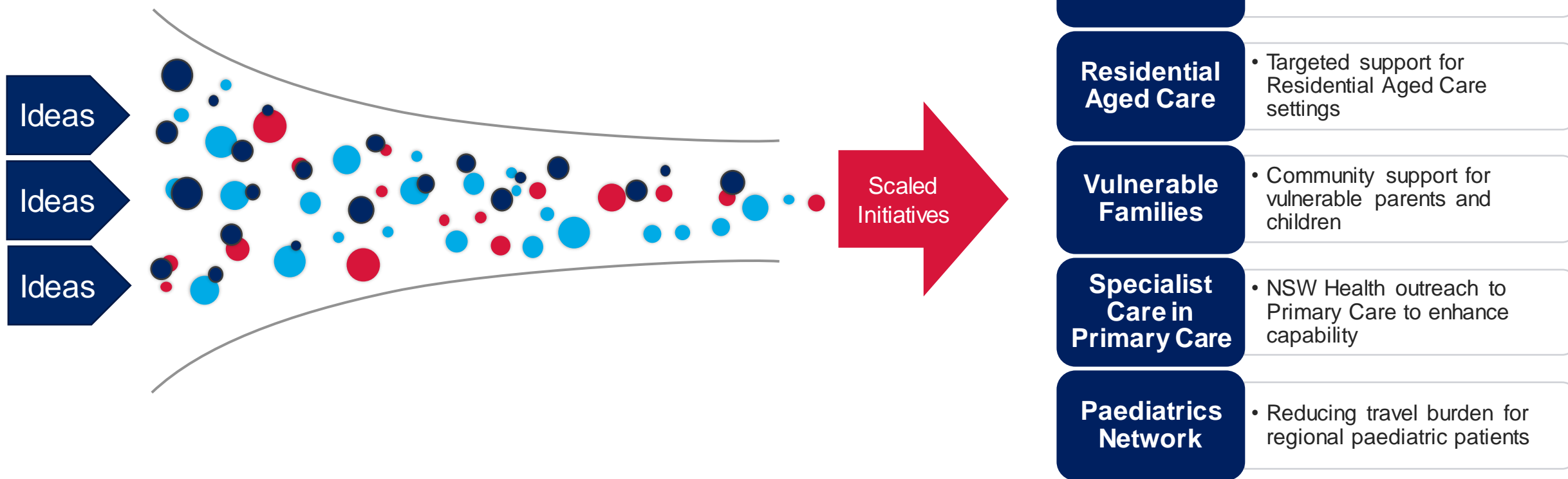


Clinical leadership and engagement

Managers and clinicians working together to lead evidence based change

| Integrated Care

LHDs implementing at least one **evidence based integrated care initiative** from the five options



| Collaborative Commissioning

Principles

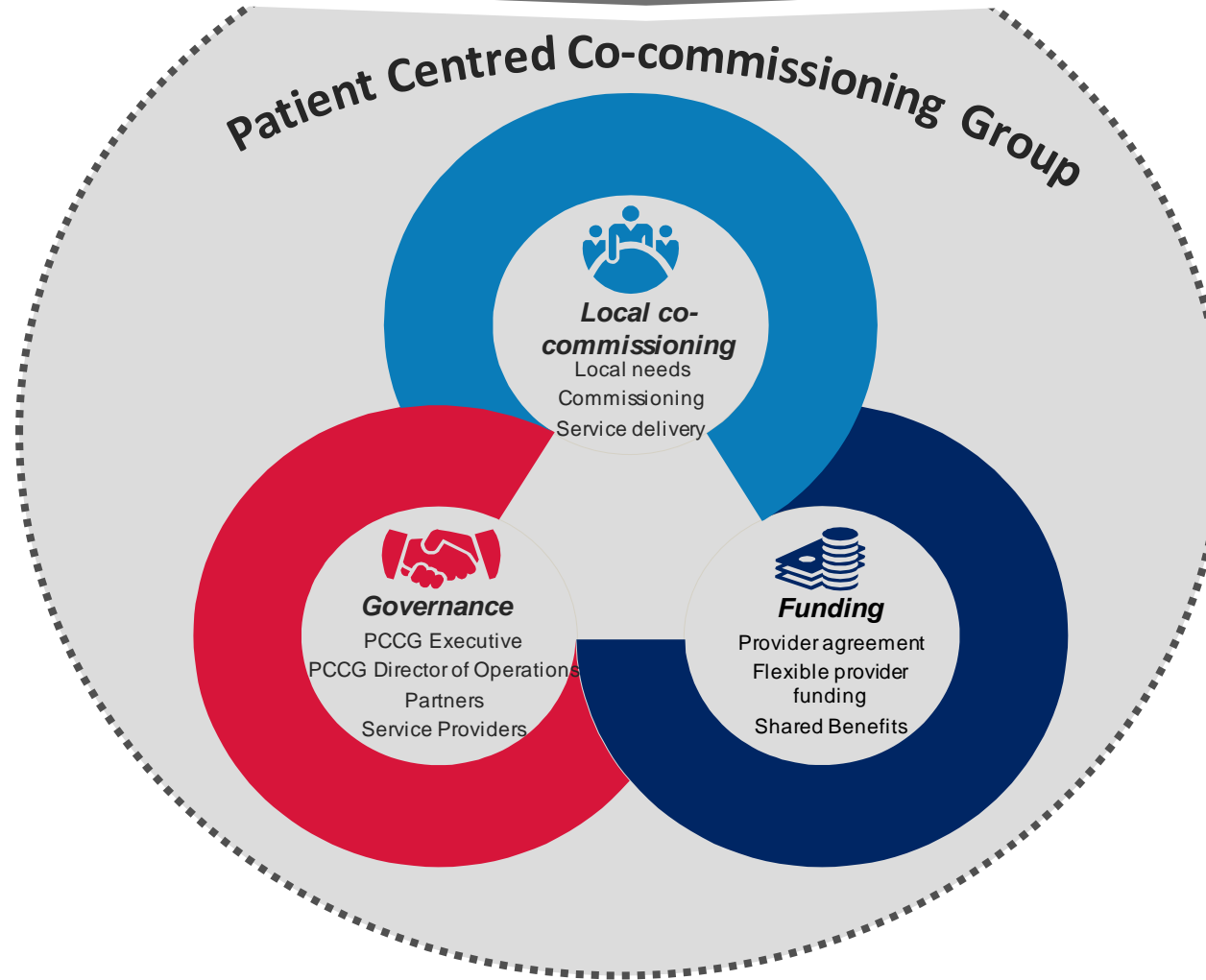
1. Evidence based focus on regional need and priorities for patients

2. Collaboration to improve care and outcomes for patients

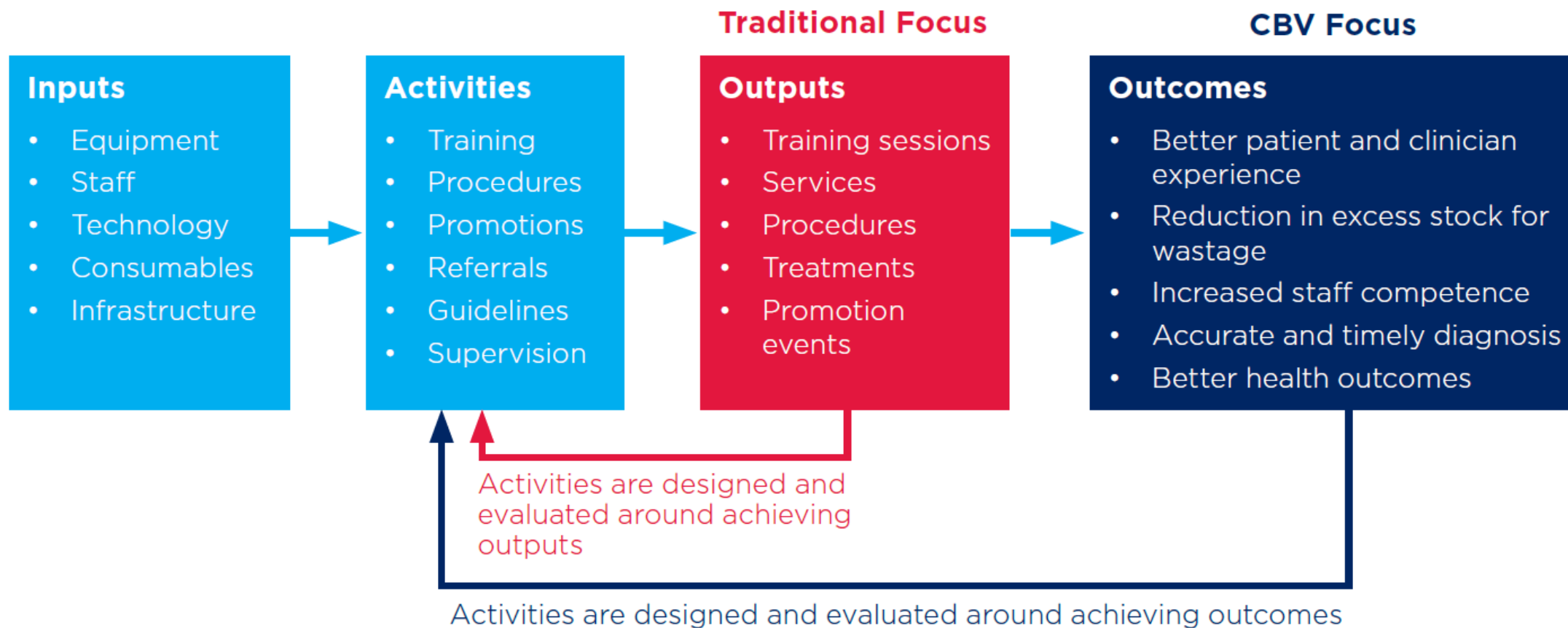
3. Joint accountability across providers

4. Flexible purchasing arrangements

5. Sustainability through realignment of existing resources



| Commissioning for Better Value



| Leading Better Value Care

- Identifying and scaling evidence based initiatives to improve outcomes across the quadruple aim
- Focuses on specific conditions or risk factors
- All local health districts working on the same initiatives at the same time
- Strategy and system management from the Ministry
- Solution development and implementation support from Pillars
- Flexible local implementation
- Consistent measurement, monitoring and evaluation



A structured statewide program for value based healthcare

Tranche 1 clinical initiatives



**Chronic
heart
failure**



**Chronic
obstructive
pulmonary
disease**



**Diabetes
mellitus**



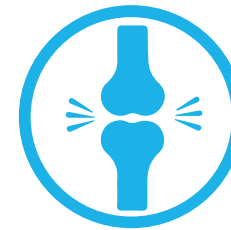
**Diabetic
high risk
foot services**



**Renal
supportive
care**



**Falls in
hospital**

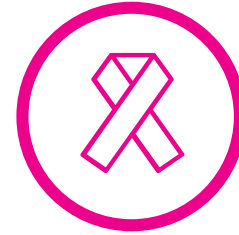


**Osteoarthritis
chronic care**



**Osteoporosis
re-fracture
prevention**

Tranche 2 clinical initiatives



**Hypofractionated
radiotherapy for
early stage
breast cancer**



**Direct access
colonoscopy**



**Hip
fracture
care**



**Chronic wound
management**



Bronchiolitis

| LBVC: Approach to measurement



**Economic
Assessment**

**Quarterly
Monitoring**

**Patient
reported
measures**

**Activity
Benefit**

**Costing
Studies**

**Registry of
Outcomes,
Value &
Experience
(ROVE)**

Evaluations



Economic
justification,
cost avoided,
inform
purchasing,
ensure
sustainability

Monitor and
influence
change

Used in real-
time and for
evaluation and
analysis

Repurposing,
inform
purchasing

Assess actual
service costs
for accurate
funding

Linked data
across journey
is critical to
understand
value

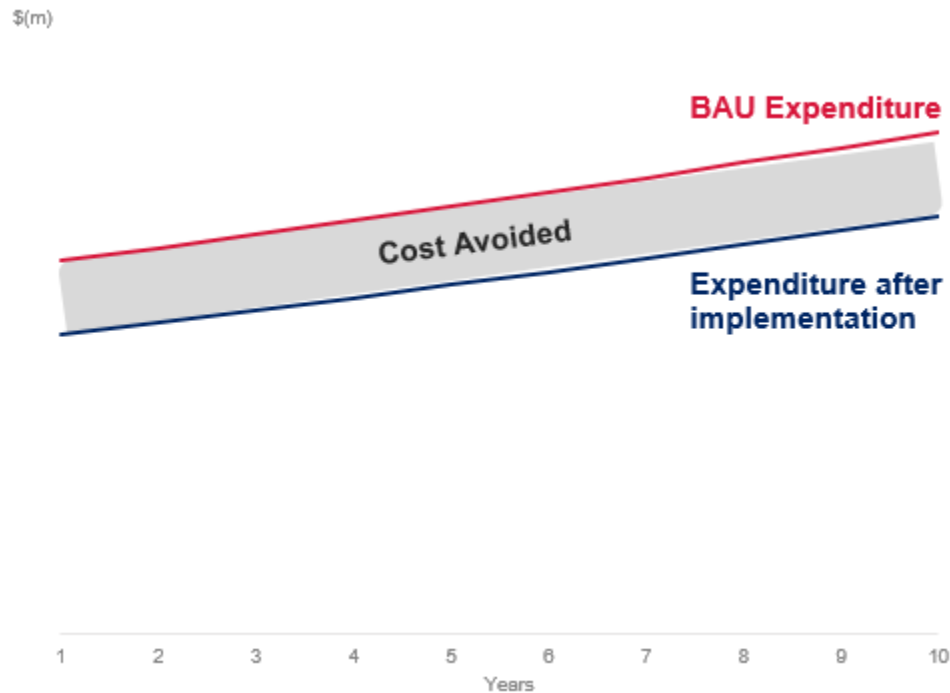
Measure
impact
across four
dimensions
of value

“The rigour of the program appeals to people. The evidence of the data and models have reduced the squeaky wheels. This makes LBVC look a bit different to other programs or strategies that have come before”.

Executive Sponsor, LHD

| LBVC: Early results

- ▶ More than 100 health facilities now have a Leading Better Value care initiative in place
- ▶ Early data indicates that the initiatives are freeing up capacity in hospitals – we are “bending the curve”



In 2019-20 compared to BAU:



390

fewer patients need joint replacement operations



3,200

fewer patients with diabetes need hospitalisation for HRFS



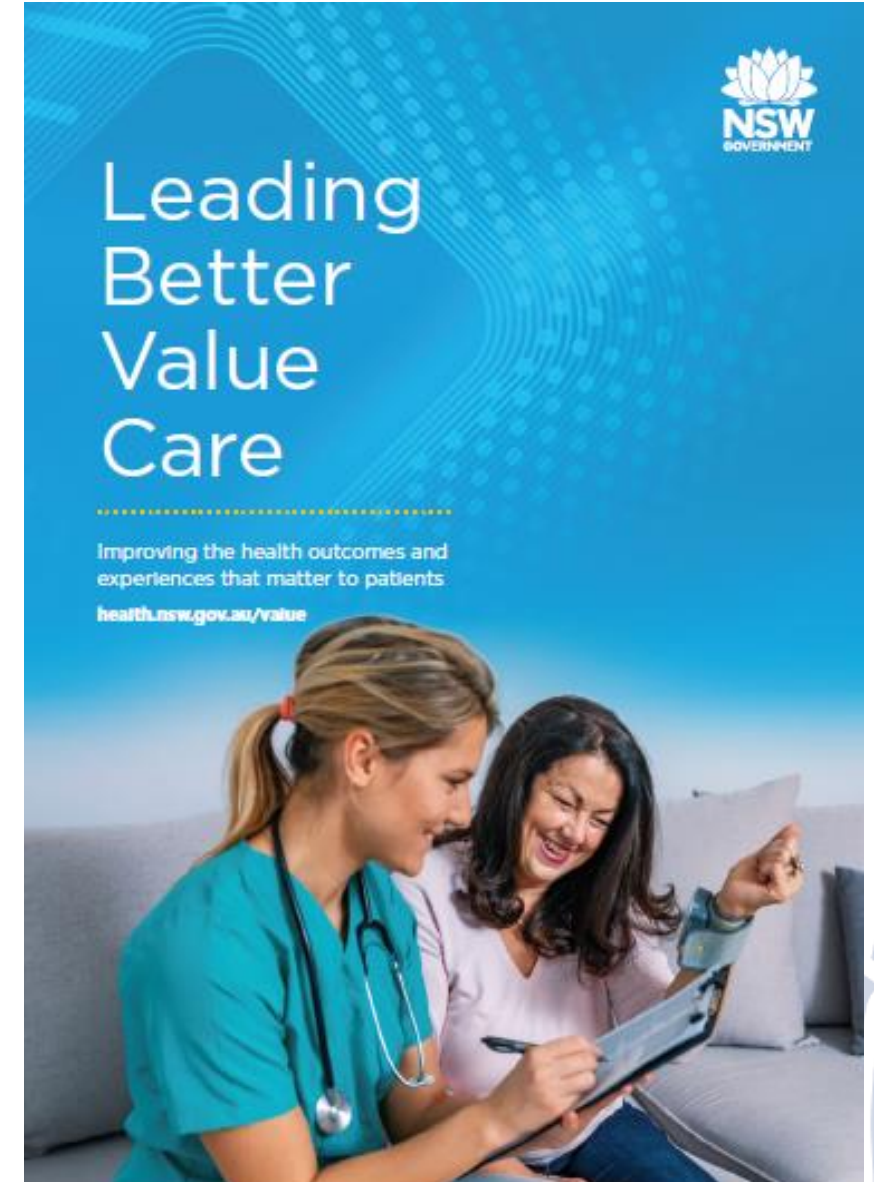
1,200

fewer patients need hospitalisation for refracture

Key lessons to date

Feedback from our local health districts:

- ▶ Enabling environment from a structured state-wide program has been well received
- ▶ Initiatives need authorised clinical consensus
- ▶ Executive and clinical leadership are critical success factors
- ▶ Different implementation approaches and models in rural (allied, community and primary led) and metropolitan districts (medical and specialist led)
- ▶ Change fatigue. Work required to implement is significant and some see it as 'additional' or a short-term project
- ▶ Case for change provided through data was critical to minimising resistance
- ▶ It takes time to build understanding and capability to repurpose avoided costs



More Information

For more information visit:

www.health.nsw.gov.au/value

