High-performing Health Systems

Reflections & Key Lessons from the Day

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Key Questions & Concepts

- What is a health system?
- What is high performance?
- Depends: what you ask, of whom, when & how?
- What are common policy questions across countries & jurisdictions eg needs-based equity?
- How much health is the system producing?
- Should we concentrate on Avoidable Mortality?
- How much competition is beneficial & for what?

International Issues & Approaches

- Challenge of chronic disease & multiple conditions
- Acute episodic care doesn't align well
- Care co-ordination influences outcomes
- Incentives & payment aligned to desired outcomes
- Structured disease management programs work
- Strengthen role of nurses- delivery & co-ordination
- Clinical information systems are underdeveloped
- Knowledge & DSTs are key to successful integration
- Provision of patient self-management support
- Reduce fragmentation & barriers between sectors
- Integrate prevention & chronic disease management

International Issues & Approaches (2)

- Large potential efficiency gains remain possible
- Focus on high cost, high risk & high volume
- 'Targets & terror' top-down performance mgt
- Balancing duality of top-down vs bottom-up
- Use payment and incentive systems wisely
- Some fixes fail
- Beware of being cream of the crap
- Results take time & politicians can be impatient

Monitoring & Measuring High Performance

- Monitoring & measurement drive management
- Must agree on what we measure & what it means
- Cross-country measures & benchmarks invaluable
- Variability begets explanation & performance
- Measures: input, output & efficiency indicators
- Measures: look below the country level
- Comparative performance reporting of providers

Health System Performance: What Matters to the Public?

- Differentiate system performance & public interests
- Who is the public; is it about the patient experience?
- What engagement; what matters to that audience?
- Don't start by talking about money & costs
- Performance measures are about value
- People care about connectedness & attachment
- Every person must have a 'medical home'
- Patient experience, quality & safety reporting systems
- The public understands determinants of health

Towards High Performance: Reaching for the Top

- Set ambitious goals towards improvement
- Manage performance to achieve targets
- Ranking & spanking has a place, but limitations
- Balance . central with local control
 - . top-down with bottom-up
- Engage & empower clinical leaders
- Physicians as stewards of resource allocation
- Elucidate & introduce cost-saving interventions

Towards High Performance: Reaching for the Top (2)

- Avoid health indicator chaos
- Provide evidence on demand seamlessly to workflow
- Develop 'proactive office encounter' (pre/post)
- Work hard on safe, informed transitions of care
- Secure messaging between patient & provider
- Develop and use patient engagement indicators
- Compare with your neighbours

A Few & Final Thoughts

- There is NO ideal health system
- Investment without reform you'll be like Canada
- Cross-national measurement & learning essential
- Efficiency gains remain possible in most countries
- Beware-increasing efficiency may reduce equity
- Innovation may not be cost-reducing
- Access (equitable) a priority can/must be improved
- Payment & incentive systems as instruments
- Create 'shared fate model' sustained over the long run
- Don't put in too much money, or too quickly

