



Value Masterclass

Value in progress

28 February 2017, London

Agenda

Value provides the overarching context for the Institute – value in healthcare providers and how commissioners deliver value across their whole budgets. It's about managing the limited resources that are available more effectively so that we can deliver the best possible outcomes for patients.

A number of clear themes have emerged for the advances in healthcare value throughout the UK and abroad. In this masterclass we will be focusing on how to translate the theory of 'value-based healthcare' into practice, and specifically how to do this jointly as finance and clinical leaders.

This masterclass is aimed jointly at NHS finance directors and senior clinicians. Every HC4V Institute member trust is recommended to send one finance leader representative and one clinical leader representative in order to gain the most benefit from the day.

09.00 Registration, coffee and networking

10.00 Chair's welcome

Lorraine Bewes OBE, former NHS finance director and HC4V Institute Council Vice-Chair

10.10 Diagnosis, treatment and cure for our NHS

Dr Steve Alder, Consultant Neurologist, Re:Cognition Health

If the NHS was a patient you might argue that the condition has been diagnosed as a lack of productivity (described across the NHS in other terms such as inefficiency or wastage) and that some treatment has started in the form of value-based healthcare, but that we are a long way from a cure. Where the disease is most rife it presents symptoms of high cost and poor quality.

In this session Steve will use a case study example of overuse in stroke patients to illustrate an improvement method that can be used to target low value care. In examples such as this you find clinical leadership, behavioural change and patient-defined pathways all contribute to raising the quality of care, and invariably the costs lower as a consequence. However to use this kind of improvement methodology in practice requires learning and action from NHS leadership teams. Steve will challenge us to understand what action is required at director level in order to turn pockets of good practice into a widespread treatment programme, which might just lead to a cure for our NHS.

11.00 Coffee break and networking

11.30 Value-based healthcare for mental health services

Jane Carlile, Group Medical Director, Northumberland, Tyne and Wear NHS FT

Chris Cressey, Head of Costing, Northumberland, Tyne and Wear NHS FT

Jackie Atkin, Care Champion, Newcastle West Community Mental Health Team

In this session we will look at the key challenges and perspectives when trying to apply a value-based healthcare approach to mental health services and to the triangle of care between patient, staff and carer.

Increasing demand on clinical teams means less time to measure the clinical outcomes side of the value equation, and clinical interest in costing data for mental health is still at an early stage with a wariness against clinical judgement being clouded by the influence of cost. During the session we'll explore how looking at mental health through a 'value' lens can lead to difference approaches such as increased investment of resources for the more complex patients which could increase the quality of care and decrease the cost in the long-term.

Jane and Chris will explore the balance between finance and clinical, and Jackie will bring the view of the patient and carer to life reminding us what the elements of 'value-based healthcare' look like from the frontline, and how 'cost' against the quality of someone's life might be viewed from the carer's perspective.

12.15 Lunch and networking

13.00 Value challenge pilot – first steps to improvement

Helen Strain, Consultant, HFMA

Scott Hodgson, Head of Costing

Nottingham University Hospitals NHS Trust

Stuart Burney, Head of Contracting, Income & Costing

Chris Tulloch, Associate Medical Director (Consultant Orthopaedic Surgeon)

Jean MacLeod, Consultant Physician in Medicine and Diabetes

North Tees and Hartlepool NHS Foundation Trust

Michael Mansfield, Clinical Director - Acute Medicine Clinical Service Unit

Leeds Teaching Hospitals NHS Trust

With the NHS's requirement to find £22 billion savings by 2020, much has been written and discussed about the concept of 'value'. What has become apparent is the world-wide struggle to take the theory of value-based based healthcare and turn it into practical application.

In this session we will hear from three NHS trusts where finance and clinical colleagues have been working jointly on a pilot project to pull patient-level cost data and clinical outcome data for cohorts of patients in diabetes and orthopaedics, and to bring this information together in a format that can be analysed and tested against the value framework hypothesis. We will discuss the findings and limitations of the study, and most importantly what comes next.

14.30 Coffee break and networking

14.45 Patient-defined outcomes and population health management

Caroline Sayer, Chair, Camden Clinical Commissioning Group

Delivering value-based healthcare in practice will only progress so far if the work is conducted in silos. Eventually we will have to require an integrated system-wide approach that bridges the gap between outcomes/cost for the individual patient, and population health management. Camden CCG has been strongly influenced by Michael Porter's work suggesting that an outcome defined by patients in itself could drive the integration of care, particularly if it requires a system approach across organisations.

The CCG has developed its own population health management tool to identify segments of population by developing groups based on similar health needs. The aim is to understand what drives patients to fit into one of the groups, for example a combination of disease and demographic factors. Caroline will outline how they have developed local outcomes directly with patients and used the population health management tool to re-design services based on the needs of the population, which can then be measured in success by the related outcomes and cost.

15.30 Chair's final comments and close

Lorraine Bewes OBE, former NHS finance director and HC4V Institute Council Vice-Chair

15.45 Closed focus group for Clinical Fellows

17.00 Focus group end