

Value-Based Care: Leadership Perspective



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Why Value-Based Care? Why Now?

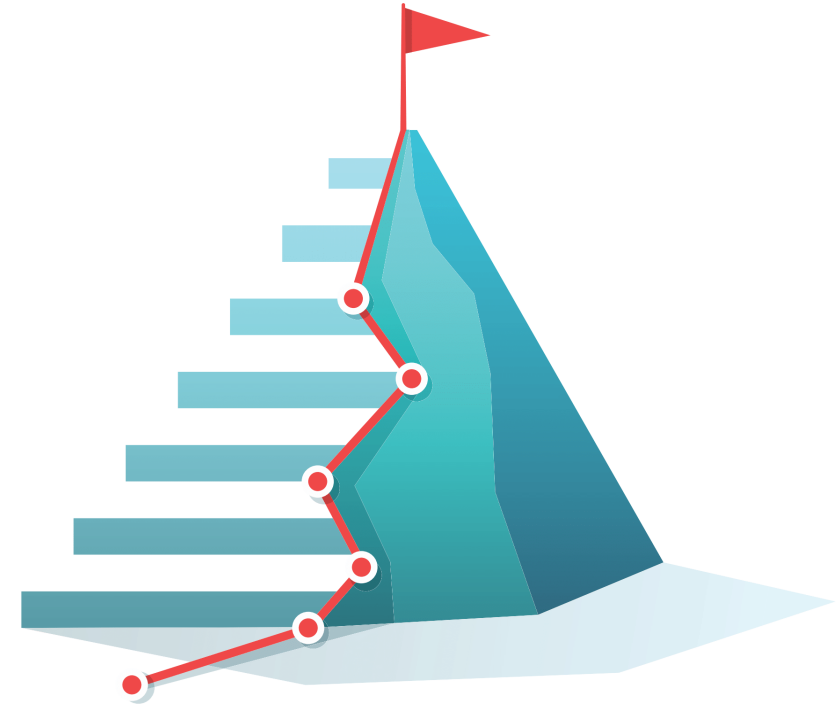


GOVERNANCE &
LEADERSHIP

Some of my whys...

- First and foremost, for our patients
- Next most notably (and perhaps urgently), for sustainability
- Less tangibly, for relevance and vitality
- Excitingly, for collaboration
- Often overlooked, to achieve new efficiencies
- Existentially, for our future and our team

What are yours?



Leadership

Evidence-Based Action Steps



WHAT?



WHY?



HOW?



Leadership



10 MINUTES



JANUARY 10TH, 2023

Microlearning: Leadership

Change Areas	ACTION STEPS	RESOURCES
 <p>GOVERNANCE & LEADERSHIP</p>  <p>POLICY</p>  <p>PARTNERSHIPS</p>  <p>PCMH</p>	<ol style="list-style-type: none"><li data-bbox="754 475 1426 554">1 CREATE your business imperative<li data-bbox="754 604 1381 682">2 FACILITATE Board engagement<li data-bbox="754 732 1747 832">3 IMPLEMENT structure and communication channels grounded in principles of psychological safety<li data-bbox="754 882 1617 961">4 ESTABLISH a culture of Quality Improvement<li data-bbox="754 1011 1755 1118">5 INITIATE partnerships that support value-based care goals<li data-bbox="754 1168 1383 1246">6 TRACK Quintuple Aim progress	<p>NACHC Leadership Action Guide</p> <p>Four Fundamentals of Value-Based Payment for Health Center Boards</p> <p>NACHC Care Teams Action Guide</p> <p>NACHC Improvement Strategy Microlearning</p>  <p>Additional resources linked throughout!</p>

Leadership



WHAT?



WHY?



HOW?

WHAT is Leadership's Role in Transformation?



Transformation requires leadership attention to the  infrastructure,  care delivery and  people systems within the health center.

Leadership encompasses the roles determined by the health center as necessary to carry out its work.

- Chief Executive Officer/Project Director
- Chief Medical Officer/Clinical Director
- Chief Financial Officer
- Chief Operating Officer
- Chief Nursing Officer
- Chief Information Officer

While *leading* is critical to systems change, one of the most important elements in the process of transformation is staff engagement and support.

Leaders can drive and inspire change by engaging the entire team and valuing ideas for improvement at all levels.

Leadership



WHAT?



WHY?



HOW?

WHY is Leadership Critical to Transformation?

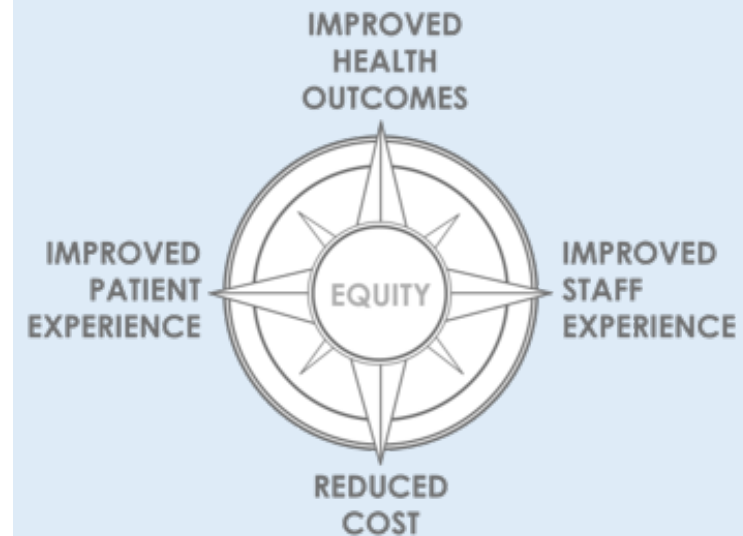


As healthcare moves from volume to value-based reimbursement, the business model and care model must connect and support one another.

Leaders can advance their organization's efforts to deliver better care with more efficiency, gaining a competitive advantage.

Leaders can take action to create the **environment, skills, and structure needed to support transformation.**

How a leader or governing body uses their position and knowledge to lead is essential to reaching improvements in the Quintuple Aim.



Leadership



WHAT?



WHY?



HOW?

STEP 1

CREATE YOUR BUSINESS IMPERATIVE



Create a business case for **'why change'** and **'why now'**. A strong business case justifies the course of action and outlines how resources should be aligned to make the change.

Present this imperative to the Board for feedback and incorporation into the health center strategic plan.

To develop an effective business imperative, understand your health center's current state of readiness for value-based care.

- NACHC's **Value Transformation Framework Assessment** tool allows health center leaders and staff to self-assess organizational progress in 15 change areas for transformation.
- The results of this assessment can be utilized to drive value transformation and improvement efforts.



Tools & Resources:

- [NACHC Leadership Action Guide](#)
- [Value Transformation Framework Assessment](#)

STEP 2

FACILITATE BOARD ENGAGEMENT



A Board plays a critical role in a health center's value transformation through their strategic, oversight, and policy roles.

Partner with your Board to understand if there is value-based payment activity locally.

- ✓ Hold education sessions to be sure the Board understands these payment models and the associated implications.
- ✓ CEO and Board work together to include value-based payment goals in the center's strategic plan.
- ✓ CEO and Board work together to review current and prospective payment contracts and the associated strategic and financial implications.
- ✓ Ensure continued focus and oversight of quality indicators with a focus on improved patient outcomes.



Helpful Resource: [Four Fundamentals of Value-Based Payment for Health Center Boards](#)

STEP 3

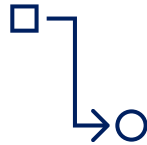
*IMPLEMENT STRUCTURE AND COMMUNICATION CHANNELS
GROUNDED IN PRINCIPLES OF PSYCHOLOGICAL SAFETY*



Consistent structures provide clarity and help organize and unite people and processes



Policies



Procedures



Defined Responsibilities

- Structure provides a clear sense of business direction and stability.
- Formal structures also facilitate communication and decision-making needed to build a strong team culture.

STEP 3

continued

*IMPLEMENT STRUCTURE AND COMMUNICATION CHANNELS
GROUNDED IN PRINCIPLES OF PSYCHOLOGICAL SAFETY*



Incorporate opportunities for interdisciplinary collaboration into health center meeting structure.

- For example, meetings that include health center staff representatives responsible for finance, operations, clinical processes, quality improvement, billing and coding, and health information technology.
- Having interdisciplinary collaboration within the health center is necessary to breaking down silos and driving systems transformation.

At the patient-care level, care team huddles are a communication channel designed to increase the effectiveness of team-based care, create operational efficiency, and improve patient health outcomes.

- Care team huddles are also required activities for Patient-Centered Medical Home (PCMH) programs.



Helpful Resources:

- [Daily Huddle Toolkit](#)
- [NACHC Care Teams Action Guide](#)

STEP 3

continued

IMPLEMENT STRUCTURE AND COMMUNICATION CHANNELS GROUNDED IN PRINCIPLES OF PSYCHOLOGICAL SAFETY



- Formalizing communication channels ensures all necessary team members are provided with the opportunity to contribute to conversations driving value-based care.
- Grounding these communication channels in the principles of psychological safety helps to ensure communication is effective.

Psychological safety: The feeling that an individual's opinions or innovative ideas are appreciated and welcome, even if they differ from the views of others on the team.

- When an individual perceives that the team is safe for taking risks with ideas or contributions—rather than a place where they feel incompetent, ignorant, negative or disruptive—then great ideas arise.



Helpful Resources:

- [Set of Questions to Assess Team Functioning and Psychological Safety](#)
- [Three Simple Steps to Foster Psychological Safety](#)

STEP 4

ESTABLISH A CULTURE OF QUALITY IMPROVEMENT



Rooted in the health center's **improvement strategy** – a process to measure and communicate information about the quality, value, and outcomes of the health care experience and use this information to drive improved performance effectively and routinely.

Engaged leadership is essential to a culture of quality improvement!

Organizational transformation requires that leaders invest in training health center staff in a formal model of quality improvement, while also providing staff with protected time to spend working toward quality improvement goals.

Leadership must also invest in the tools and infrastructure necessary to the delivery of value-based care.

- ✓ Health information technology to streamline the process of measuring and monitoring care delivery and reimbursement
- ✓ New staffing positions for extended care team roles, such as care managers



Helpful Resources:

- [NACHC Improvement Strategy Microlearning](#)
- [IHI Open School](#)
- [IHI: An Introduction to the Model for Improvement](#)

STEP 5

INITIATE PARTNERSHIPS THAT SUPPORT VALUE-BASED CARE GOALS



HRSA health center program requirement to collaborate with other providers or programs in the service area, including:



Hospitals



Specialty Providers



Social Service Organizations

to support reductions in the non-urgent use of hospital emergency departments, continuity of care across community providers, and access to other health or community services that impact the patient population.

Additionally, health center engagement with state and regional organizations (PCAs, HCCNs, and Medicaid plans) and national organizations (NACHC and CMS) **amplifies efforts around advocacy, policy, and payment reform.**

A variety of tools are available to support organizations in developing or cultivating effective partnerships.



Helpful Resources:

- [Collaborative Relationships, HRSA Health Center Program Site Visit Protocol](#)
- [Community Tool Box](#)
- [The Practical Playbook: Building Multisector Partnerships that Work](#)
- [Partnership Assessment Tool for Health \(PATH\)](#)

STEP 6

TRACK QUINTUPLE AIM PROGRESS



How does your health center measure movement toward Quintuple Aim goals?

- UDS measures to track health outcomes and assess performance across different racial, ethnic, gender, and target populations
- Periodic surveys to monitor patient and staff experience
- Analyze attrition/retention statistics as additional measures of staff experience
- Monitor total cost per patient over time using UDS data or other metrics available internally or through payers

To streamline organizational processes, incorporate measures of Quintuple Aim progress into your health center's Improvement Strategy (Step 4) and report regularly on performance and progress to the Board of Directors.



Helpful Resources:

- [HITEQ's Health Center Value Proposition Template](#)