VOLUME-8, ISSUE-4, APRIL-2019 • PRINT ISSN No 2277 - 8160

Original Research Paper

Health Science

OUTCOME BASED HEALTH CARE: JOURNEY THAT HAS STARTED

Dr Shashikant Sharma

Assistant Professor, Department of Hospital Administration, Armed Forces Medical College, Pune 411040, Maharashtra

ABSTRACT

Let me tell you a borrowed story"A friend of mine loves to hike and was telling me about a fancy one-legged stool he carries around with him. He explained that he only really needs one leg; packing three-legged stools causes extra weight. While this mentality might work for time spent on the trail, it doesn't hold up when it comes to measuring healthcare outcomes—I'd choose the balanced stability offered by the three-legged variety any day". Similarly, healthcare systems shouldn't rely on the single "leg" of outcomes measures to improve quality and costs, even though these metrics are plentiful. In addition, we must create a solid foundation of evidence-based outcome & process measures that provide more granular data, and then stabilize these metrics with balance measures, to help drive better outcomes.

KEYWORDS :

Everybody is trying to define quality

The Robert Wood Johnson Foundation defines quality improvement as, "The process-based, data-driven approach to improving the quality of a product or service. It operates under the belief that there is always room for improving operations, processes, and activities to increase quality."[1]

CDC's definition focuses on activities that improve population health, ensure healthcare's affordability, and deliver the best patient experience. These three dimensions mirror the Institute of Health Care Improvement (IHI) Triple Aim and tieback to Institute of Medicine (IoM) six aims of improvement, namely care given should be Safe, Effective, Patient Centered, Timely, Efficient & Equitable.[2][3]

Traditionally quality of health care has been examined from three fundamental perspective Structure Process and Outcome measures. On those lines only, Healthcare Analytics uses three similar types of outcome measures, namely [4]

a)Outcome measures:

Which are the high-level clinical or financial outcomes that concern healthcare organizations, often reported to government and commercial payers. Some examples of metrics for outcome measures include mortality rates, readmissions rates, and surgical site infection rates.

b)Balance measures:

These are the metrics a health system must track to ensure an improvement in one area isn't negatively impacting another area. For example, let's say length of stay (LOS) in labor and delivery is the outcome metric. The hospital wants to reduce LOS and save money. The balance metric might be patient satisfaction. If mothers feel rushed toward discharge, the outcome there might be a negative impact on patient satisfaction even while improving LOS.

c)Process measures:

These measures are the specific steps in a process that lead — either positively or negatively — to a particular outcome metric. For example, let's say the outcome measure is LOS. A process metric for that outcome might be the amount of time that passes between when the physician ordered the discharge and when the patient was actually discharged. Digging even deeper, you might look at the turnaround time between take-home medication being ordered and medication delivery to the unit. If it takes the pharmacy three hours to get the necessary medications, it is potentially delaying the discharge — you've pinpointed a concrete opportunity for healthcare process improvement.

So outcome measures should be careful chosen so as to reflect the standard of care to be achieved.

What is Health outcome?

Outcome is your health status change over a period of time in terms of physiologic functional cognitive emotional and behavioral Health. Which can be an improvement, decline or a neutral and not in a presumed directions. But due consideration & diligence is required of risk adjustment due to natural progression of disease or disability which is critical to accurate outcome analysis.

Health systems today are scrambling to identify the most important measurements to be labeled as Outcome indicators in order to generate stable and consistent growth in Quality.

Outcomes Versus Accountability Focus[5]

Most outcomes improvement project teams operate under one of two precepts: measure for accountability or measure for improvement. Projects that measure for accountability primarily focus on rewarding or punishing based on whether or not individuals adhere to certain processes and procedures. A classic example would be paying an individual physician a bonus (or charging a penalty) based on his or her compliance with some clinical initiative at a facility. The focus of those being ensured quickly shifts to whether or not a specific data point is accurate for a particular individual. The project becomes mired in slurry of minutia.

When this happens, individuals worry about the negative spotlight and the ensuing punishment. With this approach, there is no rising tide that lifts all boats. Sure, some of the outliers at the bottom may improve, but personal interest takes priority instead of examining the process and focusing on interventions that will help move the overall mean. Outcome improvement is delayed or never reaches its full potential. So we need to decide which way we want to go " outcome focus or accountability focus"

Organisations as systems

On way to move towards 'outcome focus' is to think of organizations as a system or an excessively integrated and interdependent 'Microsystems'.

'WHO Safe Surgery Initiative' a surgical improvement program to minimize the most common errors which endanger the lives and well-being of surgical patients. Implementation of the checklist a systems approach that encourages surgical team to ask ques like "Are we performing the right procedure in the right patient in the right area". Aim is to design a system that ensures patient safety and doesn't allow introduction of errors.

After you've worked on a sufficient number of QI projects, it's easy to identify differences between those that deliver sustainable successful outcomes and those that deliver, shall we say, less-than-stellar results. Quality measurement in health care is the process of

using data to evaluate the performance of health plans and health care providers against recognized quality standards.

Outcomes-Based Healthcare Is Reactive and Proactive [6]

Historically, health care has been more reactive than proactive; its primary focus has been helping sick patients restore their health. Most outcomes-based healthcare definitions center on a reactive approach to healthcare—curing diseases, for example. Operating in reactive mode, health systems continuously ask, "Did we cure that sepsis patient?" or "Did we properly treat that heart failure patient?" Outcomes-based healthcare also targets a more proactive approach to healthcare: creating a healthcare system that strives to maintain healthy populations and prevent illness. Embracing the proactive aspect of outcomes-based healthcare leads health systems to consistently ask several questions:

a) How do we maintain the health of our patient populations?
b) How do we prevent illness and keep individuals out of the hospital?
c) How do we operate outside our system walls to optimize community healthcare?
d) How do we incorporate population health into our business model?

Embracing these reactive and proactive nuances is critical for health systems transitioning to outcomes-based healthcare.

How to select a Health Care outcome

A Standard should define the structure & process that must be substantially in place in an organisation to enhance the quality of care, which can be measured by a number of outcome Indicators. On important thing should be kept in mind that the Outcome Indicators should reflect the standard in totality, so that acceptable compliance to Indicators determines the overall compliance to the standard.

Text book approach say an indicator should be "Credible, Standardized, Easily Available, Timely, Relevant, Valid ,Stable, Comparable and most importantly measures Appropriate for Your Audience

I know the list is long but "If you ask for moon you will definitely land among the stars. To realise this big a list, there will be challenges, some of which in my experience can be:

a) Identify and balance the competing perspectives of the major participants in the health care delivery system
b) Develop an accountability framework
c) Establish the explicit criteria by which health system performance will be judged
d) Select a sub set of indicators for routine reporting
e) Minimize the conflict between financial and non financial incentives and quality-of-care objectives
f) Facilitate the development of information systems necessary to support quality monitoring.

The first two challenges address the framework within which quality assessment should be conducted. The third and fourth challenges define the quality measurement work plan. The fifth and sixth challenges identify factors that now inhibit progress in improving and assessing performance.

Mortality, Safety of Care, Readmissions, Patient Experience Effectiveness of Care, Timeliness of Care, Efficient Use of Medical Imaging are some of the outcome indicators one might like to follow on.

After identification of these outcome indicators start developing those in action plans, identify strategies, use a specific intervention implement a little action plan mouldering the program and expanding in limitation then cheers for culture and governance and there you are, ON THE TOP OF QUALITY

Health Outcomes Research?

Health outcomes research is a methodology used to identify and measure the link between treatments or interventions delivered and the actual outcomes achieved. Put simply, health outcomes studies help determine what works and what doesn't in health care. [7]

Unlike clinical trials or other highly regulated scientific studies that consider only concrete, measurable data (such as mortality rates), health outcomes research takes a broader view to also incorporate clinical outcomes, financial impact, and a range of functional measures, including patients' reported quality of life and satisfaction. By looking at a greater range of measures, health outcomes studies can provide guidance on a broader set of interventions and decisions than can clinical trials.

Outcomes Improvement: A Continuous Journey

32Doctors, nurses, executives, IT professionals, analysts, administrators—anyone reading to this—are all incredibly busy people with full plates. Quality improvement projects are typically additional responsibilities to all of us who live and breathe healthcare.

But let's face it, improving and delivering quality, whether it's clinical care or operations, is why we do what we do. When everything clicks and you can measurably say that this project saved lives by decreasing infection rates, or prevented over a dozen amputations for diabetic patients this year, or improved the patient experience by decreasing wait time – what a great experience to be a part of that!

Those assigned to outcomes improvement teams need the security of positive intent. They need clearly defined goals and aim statements. The team needs an owner, a champion, end users, and super users involved every step of the way with one-on-one training to aid adoption. Finally, the tools and interventions must be designed so it's easy to do the right thing. If appropriate, the results are adjusted for external factors that could make a healthcare organization's performance appear better or worse than it really is.

REFERENCES

1. Defining Quality Improvement in Public Health, Riley, William J. PhD; Moran, John W. PhD, MBA, CQIA, CQM, CMC; Corso, Liza C. MPA; Beitsch, Leslie M. MD, JD; Bialek, Ronald MPP; Cofsky, Abbey ,Journal of Public Health Management and Practice: January-February 2010 - Volume 16 - Issue 1 - p 5–7.
2. https://www.cdc.gov/publichealthgateway/performance/index.html, accessed on 06 Apr 2019.
3. http://www.ihi.org/Engage/Initiatives/TripleAim/Pages/MeasuresResults.aspx, accessed on 06 Apr 2019.
4. Why Process Measures Are Often More Important Than Outcome Measures in Healthcare,Tom Burton, President of Professional Services, https://www.healthcatalyst.com/insights/process-vs-outcome-measures-healthcare, accessed on 06 Apr 19.
5. Seven Features of Highly Effective Outcomes Improvement Projects By Brant Avondet, https://www.healthcatalyst.com/insights/process-vs-outcome-measures-healthcare, accessed on 06 Apr 19.
6. The Top Success Factors for Making the Switch to Outcomes-Based Healthcare, Bryan Oshiro, MD,https://www.healthcatalyst.com/insights/process-vs-outcome-measures-healthcare, accessed on 06 Apr 19.
7. Using Health Outcomes Research to Improve Quality of Care by Lisa Ellis Using Health Outcomes Research to Improve Quality of Care | Executive and Continuing Professional Education | Harvard T.H. Chan School of Public Health. https://www.hsph.harvard.edu/ecpe/using-health-outcomes-research-to-improve-quality-of-care/