

Bwrdd Iechyd Prifysgol Hywel Dda University Health Board

## PWYLLGOR CYLLID FINANCE COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	25 May 2021
TEITL YR ADRODDIAD: TITLE OF REPORT:	Value Based Health Care Update
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Dr Phil Kloer and Mr Huw Thomas
SWYDDOG ADRODD: REPORTING OFFICER:	Dr Leighton Phillips

Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate) Ar Gyfer Trafodaeth/For Discussion

# ADRODDIAD SCAA SBAR REPORT

#### Sefyllfa / Situation

This report provides an update on the progress made in developing and rolling out Hywel Dda University Health Board's Value Based Healthcare (VBHC) Programme.

## Cefndir / Background

Since June 2019, Hywel Dda University Health Board (HDdUHB) has been developing and implementing a VBHC programme in line with Welsh Government policy imperatives and investments geared towards progressing the programme. VBHC is one of the most important system drivers currently advocated and features heavily within the Health Board's (HB) strategic planning objectives.

Broadly the objectives of the VBHC Programme are to:

- Make sense of the data provided by Patient Recorded Outcome Measures (PROMs) and analysis of resources consumed, in terms of the way in which the HB delivers care and support, and where this might be improved;
- Make it easier to digitally correspond with patients, in the context of the Digital Strategy, whether this is in the arrangement of appointments, appointment reminders, or conducting digital assessments online;
- Improve knowledge of how to apply VBHC in practice through the delivery of the innovative 'Bringing Value to Life' Education Programme. HDdUHB is one of the first organisations to run a dedicated 'case based' education programme in partnership with academia and with international reach, recognising that the application of VBHC is not merely a technical challenge, but also requires people to believe in the concept and to feel equipped to make it happen.

The VBHC Programme is well underway in rolling out the capture of PROMs and costing data across a number of specialty areas using the *DrDoctor* digital platform. Work is also underway

with Informatics colleagues to develop data visualisation dashboards which will be used by clinical staff during patient consultations, as well as by service managers to review the value inherent in the way services are provided.

The first education programme has now been successfully concluded and a second programme is being planned for delivery in July 2021, with a further programme being developed for delivery in the Autumn of 2021 in support of the Mid Wales Health Care Collaborative. This programme will help to develop the understanding of VBHC and create a community of VBHC practice across HDdUHB, Betsi Cadwaladr University Health Board and Powys Teaching Health Board.

It is hoped, based on the experience of other healthcare systems, that the benefits of progressing a VBHC approach will be:

- A measurable improvement in the outcomes and experience of HDdUHB patients, evidenced by the PROMs which will be captured on a routine basis, eventually across all HB areas;
- Better management of the demand for the HB's services, with prioritisation based on need rather than sole focus upon the length of waiting time;
- Improved quality and safety management, with HB systems infused with an ongoing understanding of what matters to patients;
- Resource investment decisions increasingly guided by what matters to patients, with evidenced improvement in the utilisation of services; and
- Improved communication, with routine and structured discussions with patients guided by what matters to them.

## Asesiad / Assessment

To support the rollout of VBHC, HDdUHB has:

- Entered a 2½ year technology partnership with a company called *DrDoctor*, which provides a digital system to capture what matters to patients in both clinical and home settings. The software will also allow the HB to shift towards digital correspondence, while also ensuring that those who are unable or unwilling to correspond digitally are still able to communicate what matters to them on a routine basis;
- Strengthened and substantiated the delivery team to ensure the progressive roll out of VBHC, including the clinical, informatics, programme management, and financial leadership needed to advance the programme at pace. This includes making VBHC the unifying thread within the Transforming Clinical Services strategy;
- Started work within Informatics to support the real-time visualisation of PROM information, supporting better decisions at the time they really matter;
- Ensured a high level of executive oversight for the programme, with a dedicated Strategic Enabling Group which includes Executive leads for key enablers; and
- Continued investment in HDdUHB staff's ability to apply VBHC in practice through the continuation of the HB's novel VBHC cased-based education programme.

The VBHC Programme has developed a service-by-service implementation plan, which will be shared with Finance Committee Members as part of an update presentation.

The development of data visualisation is progressing, with pilot dashboards being developed and reviewed in Heart Failure and Trauma & Orthopaedic services. Once the initial pilot has been proven, development and deployment of pathway-specific dashboards will be undertaken in line with the roll out of PROM capture.

Using the intelligence gathered through the implementation phase, services will be able to review the evidence and evaluate different approaches, not just across pathways of care, but also in considering population health.

VBHC forms an integral part of the 'Improving Together' approach, which aligns the objectives of value-based approaches with performance improvement and quality improvement.

#### Argymhelliad / Recommendation

It is recommended that the Finance Committee takes assurance from this update paper and offers comments to help inform the programme design to optimise its probability of success.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.5.12 Receive reports relating to the Health Board's Digital Programme to ensure benefits realisation from the investment made.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable
Safon(au) Gofal ac lechyd: Health and Care Standard(s):	All Health & Care Standards Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	4. Improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners.
Amcanion Llesiant BIP: UHB Well-being Objectives: <u>Hyperlink to HDdUHB Well-being</u> <u>Objectives Annual Report 2018-2019</u>	<ul> <li>4. Improve Population Health through prevention and early intervention, supporting people to live happy and healthy lives</li> <li>8. Transform our communities through collaboration with people, communities and partners</li> </ul>

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Evidence is included within the report.
Rhestr Termau: Glossary of Terms:	Explanation of terms is included within the report.
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Cyllid:	Not Applicable

Parties / Committees consulted prior	
to Finance Committee:	

Effaith: (rhaid cwblhau) Impact: (must be completed)		
Ariannol / Gwerth am Arian: Financial / Service:	Not Applicable	
Ansawdd / Gofal Claf: Quality / Patient Care:	No adverse quality and/or patient care outcomes/impacts.	
Gweithlu: Workforce:	No adverse existing or future staffing impacts.	
Risg: Risk:	No risks identified	
Cyfreithiol: Legal:	No legal impacts or likelihood of legal challenge.	
Enw Da: Reputational:	No likelihood of adverse political or media interest or public opposition.	
Gyfrinachedd: Privacy:	Privacy Impact Assessments completed for individual project areas undertaken.	
Cydraddoldeb: Equality:	Equality Impact Assessment to be undertaken	