



# Value-Based Healthcare at ABUHB

**The VBHC Programme at ABUHB is ambitious and unique, while working within a restrictive environment and an operational legacy system. Every VBHC initiative at ABUHB is clinically-led and outcomes-focused, offering unique opportunities to deliver sustainable culture change and better patient service**

The Value-Based Healthcare programme is not like other change management projects. It offers a different way of thinking, a unique approach that goes beyond reducing costs. ‘The key to the programme’s success is that clinicians are in the driving seat: it is our clinical leaders who invite the VBHC team in to work together to review opportunities to improve services for patients’ – *Adele Cahill, VBHC Programme*

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*‘Achieving the outcomes that matter to people, whilst being good stewards of the finite resources available, working together to do the right thing across the whole system*  
- *Vision statement*

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## Background

The NHS in Wales faces a range of challenges: rising costs, an ageing population and increasing demand. Prudent Healthcare puts NHS Wales at the forefront of a growing international effort to get greater value from health systems. Our aim is to meet the needs of patients while avoiding waste. ABUHB is embracing Value-Based Health Care. We aim to capture patient and clinically-reported outcomes, in parallel with costing data across the whole cycle of care. This is done by collecting and analysing a minimum dataset, using common IT infrastructure, to remodel our services.

Our journey began as an idea in 2014-15, before moving to the discovery, preparation and delivery phases. In 2019, we will move to align these concepts across Divisions to ensure this becomes business-as-usual. Our joint goal is sustaining the change and sharing experiences of the VBHC model. It is vitally important that healthcare professionals and others, including patients, the public, and politicians, have the opportunity to talk openly about how best to improve the health of the population, understanding what is important to patients regarding their outcomes and how we make best use of the resources available.

## The meaning of value at ABUHB

It does not mean ‘cheap’ and is not a mechanism for ‘rationing’, but it does mean that ABUHB look to use finite resources wisely: in particular to improve the experience and outcomes for our patients.

## Measuring value

To measure value, we are systematically capturing clinical and patient-reported experience and outcome measures as well as costs.

## Defining outcomes

Much of what is traditionally measured are not true outcomes. They are indicators, proxies or process measures. The Health Board focuses on measures related to treatment and interventions from the individual’s perspective, especially functional outcomes, wellbeing and adverse effects of treatment.

*Dr Sally Lewis – National Clinical Lead*

## 5 stages to implement VBHC

A five-stage implementation framework has been devised to guide our initiatives from the concept to reality: *pre-implementation, idea, delivery, review* and *sustainability*. This framework offers indicative time-frames and sets out the practical steps required for a successful project. At each stage, participants focus on over-riding drivers: *Why? What? When? How? Who? And most importantly, So what?*



### A bespoke methodology

The VBHC team has developed an approach that deploys a combination of proven change management methodologies. Building on the Managing Successful Programmes (MSP) methodology, the implementation framework is flexible enough to meet the unique needs of services. While offering a standardised approach, the team works with clinical leaders to take a ‘pick and mix’ approach, tailored to their needs. ‘It’s a hybrid model, taking the best of standard methodologies to create a unique approach,’ says Daniel Davies, Programme Manager, VBHC.

### Programme outputs

- Use of standard ‘toolkits’ for each condition/disease areas where VBHC is implemented
- Patient level and Time-Driven Activity-Based Costing (or hybrid options)
- Systematic collection of experience, outcomes and costs across cycle of care
- Detailed programme plans to support rollout and implementation
- Dashboards combining data at patient and cohort level for clinical and management use
- Plan, Do, Study, Act cycle with each phase of programmes
- Access to key functionality through the IT platform supported by DrDoctor
- Local, national and international benchmarking using standard toolsets
- Access to national and international Communities of Practice

### Priorities for 2019

18 projects at various stages of maturity, driven by demand from clinicians and clinical networks, in line with national plans.

Additional work in the areas of COPD, MSK Transformation and Outpatients Collaboration.

Opportunities to work across health and Social Care e.g. Children and Young Peoples Mental Health Services

### Take away

A clinically-led and outcomes-focused programme aiming to make Value-Based healthcare ‘business as usual’

### Value-Based Care Team – key contacts

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