

2008 ORPRN Convocation
From Research to Practice – Enhancing Rural
Health Care
April 10-11, 2008, Portland, Oregon

The Challenge of Delivering “Best Practices”
Care, or at least something tangentially related to
this topic

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Comments about US Healthcare

- 1. Primary care is in trouble**
- 2. US healthcare is in trouble (cost/quality)**
- 3. The US economy and therefore our communities are impacted by healthcare**
- 4. The answer is a systematic fix**
- 5. Health and healthcare lack stewardship**
- 6. Healthcare lacks a common set of guiding principles necessary for meaningful, consistent reform focused on both health and healthcare**

Comments about US Healthcare

- 7. Healthcare lacks a common evidence-based vision for delivery system design**
- 8. Data shows that multi-disciplinary primary care teams needs to serve a central role in a high performing health system**
- 9. To serve its role, current primary care needs improvement in leadership, culture, organization, advocacy, and cohesiveness/unity**
- 10. A common purpose and evidence-based system design is the foundation for more intentional and strategic work toward system reform.**

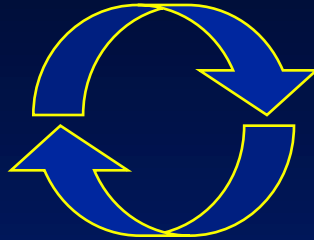
How Did We Get Here?

- **Decades of cost imperative**
- **15 years of quality imperative**
- **10 years of safety imperative**
- **Generally ineffectual health policy**
- **Generally ineffectual legislative activity**
- **Recent unprecedented focus on healthcare**
- **The persistent gap between health and healthcare**
- **General frustration over the slow pace of change**

Where are physicians and other healthcare professionals and why aren't we working together more effectively to solve healthcare's problems?

Transforming Healthcare

Leadership



Clinical Systems

1. Leadership

- Leadership structure
- Personal leadership
- Strategic planning
- Culture management

2. Continual Improvement

- Improvement infrastructure
- Change management

3. Measurement

4. Advocacy

1. Within the practice

- Implementing HIT
- Registries
- Care teams
- Doc-pt communication
- Access to care

2. Between Practices

- Coordinate care
- Virtual integration

3. Within the Community



Acipra

PHYSICIANS OF DOUGLAS COUNTY


Stewards of health and healthcare

DCIPA Resolution - Message (HTML)


File Edit View Insert Format Tools Actions Help

Reply Reply to All Forward [print icon] [attach icon] [trash icon] [delete icon] [undo icon] [redo icon] [font size icon] [help icon]

You replied on 3/20/2008 5:31 PM.

From:  Sandy Pearson [spearson@dcipa.com]
To: Chuck Kilo; Lyndsey Lederer
Cc: Larry Sharp, DO; Ron Preston
Subject: DCIPA Resolution

Sent: Thu 3/20/2008 9:30 AM

Attachments:  DCIPA Resolution Joining Better Health Initiative.pdf (29 KB)

Good morning Dr. Kilo. At our meeting on March 18th, the Board approved DCIPA joining the Better Health Initiative and, accordingly, our signed Resolution is attached. Please let me know if there is more that I can do in this regard. Thanks.

Sandy Pearson

Executive Assistant to Ron Preston

DCIPA Executive Office

phone: 541.464.4491

cell: 541.733.4278

"We are what we repeatedly do. Excellence, then, is not an act but a habit." - Aristotle

RESOLUTION FOR ORGANIZATIONS JOINING THE BETTER HEALTH INITIATIVE

Whereas, leadership by healthcare professionals is critical for the improvement of our health care delivery system; and

Whereas, intentional collaboration and cooperation among healthcare professionals is required; and

Whereas, the Douglas County IPA (“DCIPA”) endorse the Purpose, Guiding Principles for Healthcare, and Evidence-Based System Design of the Better Health Initiative included herein;

Therefore, be it resolved that DCIPA will work in concert with other signatory organizations in the Better Health Initiative to assume stewardship and provide leadership to build a coordinated, comprehensive and effective delivery system that will improve health.

From: Paul
Sent: Thursday, March 20, 2008 9:11 AM
To: Chuck Kilo
Subject: The Oregon Better Health Initiative

What are you doing to convince the specialists and subspecialists that their \$400,000/year income is a huge problem relative to what primary care providers are receiving? How are we going to redistribute this money so that we have a healthy primary care base?

Our Emergency Department census has exploded in the last year or two and seems to be accelerating. I believe this is happening in Salem as well. My theory is the we have lost a critical number of PCP's, we are at a break point, and those that remain simply do not have the resources to care for anything more than is already booked on their overbooked schedules. Sending these patients to an urgent care clinic is not a viable option in the long run. These are all staffed by PCP's that have bailed out of primary care. The busier they get, the more PCP's they will seduce. Not only that, those patients that have real problems, after semi-workups, get sent from the urgent care facility to the ED, where they get worked up again.... and billed twice. What are we going to do about this? When I think about our healthcare system and the greed that is at the core of it, i fall into the depths of despair.

Three Steps for Physicians

1. **Get our house in order**
2. **Model the right behavior**
3. **Guide our colleagues**

Primary care should help initiate and guide this process.

The Trust for Healthcare Excellence's Better Health Initiative

- Oregon Academy of Family Physicians
- Oregon Chapter of the American College of Physicians
- Oregon Geriatric Society
- Oregon Pediatric Society
- Osteopathic Physicians and Surgeons of Oregon
- Oregon Department of Public Health
- Others... including
 - Douglas County IPA

The Trust for Healthcare Excellence is a not-for-profit 501c3 whose mission to promote the collective efforts and conditions necessary for health and healthcare excellence.

The Trust for Healthcare Excellence

Delivery System Improvement

- The Better Health Initiative
- National Summit on Primary Care Strategies

Testing the following hypothesis:

If you want to fix the system, then the best way to go about it is to fix the system.

Join us → May 16 for the Oregon Better Health Initiative Statewide Summit, 8:30AM - 3:30PM at the MAC, Portland.

The Better Health Initiative & The National Summit on Primary Care Strategies

Renewing our collective

stewardship

for health and healthcare.

The Better Health Initiative

1. Shared purpose
2. Shared principles
3. Evidence-based system design
4. Direct discussion between colleagues
5. Rapid action leading to significant aggregate change

Build the Better Health Initiative Platform



Stewardship and leadership to drive real change

The Better Health Initiative: Purpose

We are healthcare professionals building a coordinated, comprehensive and effective health delivery system.

We are doing so by renewing our collective stewardship for health and healthcare in our communities through direct discussion among ourselves and others, and through action toward an improved health system. We will actively work for the wise allocation of resources and system design that delivers improved health and healthcare outcomes and lower costs across our society.

Guiding Principles for Healthcare

1. The objective (purpose) of our health system is health as measured at the individual, family, and community levels.
2. Individual and community health are public assets. Universal access to basic health services is essential to the well-being of our workforce and our communities.
3. Public resources should be allocated in a way that maximizes health across the population.
4. Decision-making about the expenditure of public resources should be evidence-based and transparent.
5. Health services should be organized to provide comprehensive, coordinated, longitudinal mental and physical health care.

Evidence-Based Health System Design

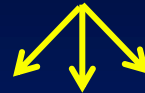


The Oregon BHI: Controlled Evolution

Today's
Non-System

Controlled iterative system
evolution

Finance
change



Design and manage the engineered
evolutionary process



Evidence-Based
System Design

The Better Health Initiative

Renewing our collective

stewardship

for health and healthcare.