

ICHOM Newsletter Interview

Dr Luz Sousa Fialho is a Director of Outcomes Research, overseeing ICHOM's development of new Standard Sets of outcomes.

Luz initially joined ICHOM as a project manager leading the development of standard sets for mental health conditions. A pharmacologist by training, Luz completed her DPhil studies in Cardiovascular Science at the University of Oxford, with a focus on cardiac metabolism in type 2 diabetes. Luz subsequently worked with a mental health organisation, coordinating the Oxfordshire Mental Health recovery college. Luz has also worked as a researcher in the pharmaceutical industry (GSK) and as a freelance data consultant in healthcare and finance.

- 1. Tell us about your current role and responsibilities/key focus?

 Currently, as a director of outcomes research, I oversee the development of ICHOM's new standard sets. This involves managing a team of project managers and research associates to lead these projects to completion and supporting the groundwork for new projects. I am also leading ICHOM's contribution to the European-wide BigData@Heart project, helping to define the key outcomes across cardiac conditions.
- 2. What is your background in outcomes measurement/value based healthcare?

 I previously worked as a project manager here at ICHOM, developing standard sets for several different conditions. My background is in pre-clinical research, particularly in diabetes and cardiovascular disease. But I have worked in a variety of contexts, including the pharmaceutical industry, academia, and charitable organisations.
- 3. What is the biggest lesson you have learnt regarding your experience to date with outcomes measurement and value based healthcare?

 The biggest lesson I have learned is that we often take for granted what "global" really means. It is important to really think about having a representative group when we want to work with a global vision. I have also learned that change takes time. Value-based healthcare has been around for several years, but it services are slow to adopt new approaches, and we still have a lot of work to do to drive this change.
- 4. What is the most important piece of advice you would offer a peer considering outcomes measurement and value based healthcare implementation?

 I would say it is important to get things right from the first pilots, so really take the time and make the investment to do this well at the beginning. Because this is what will determine the quality of the data and the potential for care improvement when you start analysing the

data you get out of it. And this has tremendous potential, so it is key to invest in the early steps of implementation. It is certainly worth the investment.

- 5. What do you think are the biggest obstacles to value based healthcare?

 I think the biggest obstacle currently is the resistance to change and the need for investment. I think that many providers probably feel that this is simply not a priority. And while this stance is likely justified, it is a shame that the opportunity is not seen as valuable. This is why I think this change will take time and, unfortunately, we have just been faced with a major health crisis due to the current pandemic. This, again, could be an opportunity for value-based healthcare to develop, but it is seen by many as an unnecessary risk. I hope that some of the work that is being done in this area will help to shift this view eventually.
- 6. Where do you see the biggest opportunity for value based healthcare to flourish? There are many such opportunities, in my view. But one that I am particularly curious about is the movement towards value-based payment models. I hope that this is a compelling opportunity for healthcare providers to move towards a value-based approach.
- 7. What advice would you offer on how to approach outcomes measurement and where to get started?

It is important to start with a manageable scope, so that the data collected is of high quality. There are a number of resources available to those starting in this space from scratch. For example, ICHOM currently works with a Partners Programme, which allows providers looking to implement our standard sets to find a local implementation partner to support them in this work.

8. What are the top 3 case studies and real world examples of outcomes measurement and value based healthcare implementation that would you recommend for further investigation?

I am certain that there are many high-quality case studies of value-based healthcare implementation that are worth looking into. I would suggest the following as some inspiring examples:

- The Santeon hospital network in the Netherlands, which implemented a value-based approach in several care pathways, allowing for evidence-based decision making and care improvement¹. Also in the Netherlands, the Diabeter clinic network have implemented a value-based model and shown improvement in outcomes with no significant increase in costs².
- NHS Wales implemented patient-reported outcome measures for lung cancer and heart failure in order to begin activity-based costing and improve healthcare in a financially sustainable and patient value centred way^{3,4}.
- New South Wales Health implemented a multi-programme initiative of value-based healthcare, shifting focus on non-clinical and clinical support projects from outputs to outcomes and allowing for the identification and scaling of evidence-based initiatives state-wide for specific conditions^{5,6}.
- 9. What further reading would you recommend to assist our stakeholders in their value based healthcare journey?

EIT Health recently published a handbook on implementing value-based healthcare in Europe, which compiles several case studies as well as theory (2020, available here).

The Boston Consulting Group published a report on implementing a value-based model in hospitals (2018, available <u>here</u>), which I think is a useful resource when beginning to think about this approach to healthcare.

10. Have we missed anything you would like to add? No, thank you. I look forward to the Conference!

Please include links to any Articles, Reports and Citations you wish for us to include for our readers and stakeholders.

- 1 Collaborating for value: The Santeon Hospitals in the Netherlands. 2017, ICHOM. https://www.ichom.org/news/case-study-collaborating-for-value-the-santeon-hospitals-in-the-netherlands/
- 2 Deerberg-Wittram & Lüdtke, *Diabeter: Value-base healthcare delivery in diabetes*, The Boston Consulting Group, 2016 https://diabeter.nl/media/cms_page_media/130/Value%20Based%20Healthcare%20Diabeter%20 White%20Paper.pdf
- 3 Valuing our health: Chief Medical Officer for Wales Annual Report 2018/19 https://gov.wales/sites/default/files/publications/2019-05/valuing-our-health.pdf
- 4 Value-based Healthcare Dashboards, NHS Wales https://nwis.nhs.wales/information-services/welsh-data-hub/value-based-healthcare1/
- 5 NSW Health Value-based healthcare https://www.health.nsw.gov.au/Value/Pages/default.aspx
- 6 Rutherford, C., Campbell, R., Tinsley, M. *et al.* Implementing Patient-Reported Outcome Measures into Clinical Practice Across NSW: Mixed Methods Evaluation of the First Year. *Applied Research Quality Life* (2020). https://doi.org/10.1007/511482-020-09817-2