The Road to Healthcare Value Is Driven by Quality Workforce Integration
The Call for Change

Healthcare organizations have been trying for years to improve patient outcomes and become economically successful in a value-based payment system. They’ve tested various methods for achieving value following the guide of the Triple Aim\(^1\), but a recent report\(^2\) on the progress of value-based payments suggests healthcare organizations are falling short of goal. Half of U.S. healthcare payments were intended to be value-based by 2018, but that number has been stalled at about 30 percent for the past two years, indicating healthcare organizations and their leaders are struggling to find the right formula to balance improved care quality with costs.

A major cause is the disconnect between management expectations and workforce readiness to deliver high-quality care. This is why the National Association for Healthcare Quality (NAHQ) and The Accountable Care Learning Collaborative (ACLC), two organizations that share a common mission to improve healthcare by building workforce and organizational competencies, believe healthcare leaders can boost results with a quality improvement growth strategy that better integrates their workforce. Specifically, trained, certified quality professionals provide a built-in solution to deliver improved care and financial outcomes.

NAHQ and ACLC urge healthcare executives to integrate their quality workforce and leverage their existing strengths now. Regardless of different structures, geographies and populations served, organizations who become leaders in the future healthcare value economy will employ quality improvement as a growth strategy. They will tie their success to it. In this paper, NAHQ and ACLC provide a roadmap for organizations to create a growth strategy built on leveraging quality and by integrating their workforce. NAHQ and ACLC convened a panel of Chief Executive Officers, Chief Medical Officers and Vice Presidents of Quality to inform these solutions.

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\(^1\) [http://www.ihi.org/Engage/Initiatives/TripleAim/Pages/default.aspx](http://www.ihi.org/Engage/Initiatives/TripleAim/Pages/default.aspx)

The Road to Healthcare Value is Driven by Quality Workforce Integration

Healthcare organizations know that Quality Driven Healthcare™ is the road to Value-Driven Care. The way to achieve quality and value in the current economic and regulatory environment is not as clear. NAHQ and the ACLC provide the following roadmap for healthcare organizations to leverage and engage their existing workforce. By doing so, it’s possible to improve and sustain the highest quality patient-centered care while delivering value. The model is straight-forward. Quality Driven Healthcare™ achieves patient-centered care and economic value through three key management strategies:

1. Management commits to quality workforce integration

Enlightened leaders know that metrics are not the endgame but are the result of realizing quality as a business strategy. They go beyond the requirements of compliance, process improvement and metric attainment. These executives understand the organizational competencies required to thrive in a model of value-driven healthcare and the individual competencies required of their healthcare quality professionals. They also take personal responsibility for ensuring that everyone within the organization, from the board to the frontline, understands why quality is a growth strategy and the specific competencies to achieve it. They create this widespread understanding by elevating quality professionals’ positions within the organization and clearing the path for teams to improve and innovate around quality. Importantly, executives who realize that quality is a growth strategy also provide the resources and time for their teams to invest in it as well.
The Road to Healthcare Value is Driven by Workforce Integration.

2. Workforce is trained in quality competencies

As healthcare quality professionals are recognized for their ability to achieve and sustain the level of quality improvement required by new expectations in healthcare, leaders can rely on them to design and deploy a competency-based workforce. Skillsets are defined against industry standard competencies that lead to reliability. Standardization allows providers to take on healthcare challenges systematically. Better conditions for pursuing innovation and proactive, higher quality emerge. “Groundhog Days,” as quality professionals sadly describe their repeated confrontation of the same issues, become fewer. Opportunities for system-wide improvements are not missed. Quality professionals are both trained and empowered to improve care and outcomes.

3. Practitioners are engaged: Quality IS the work

Practitioners trust quality professionals when they provide valuable insights into everyday work. Valuable insights are those that are credible, ethical and evidence-based. “Into everyday work” means quality management is fully integrated into workflows and care processes. Quality isn’t experienced by practitioners as extra work. Quality IS the work. Finally, quality professionals serve as an important role as liaisons between C-suite and practitioners, strengthening that partnership by providing evidence front-line efforts made toward high-quality care contribute to corporate objectives.

When practitioners don’t engage with quality professionals, it negatively affects patient-care. When they do engage, patient care not only improves but improvements are sustained.
Challenges to Overcome

In the race to innovate toward better outcomes, healthcare organizations have employed many solutions and encountered many challenges. Organizations that choose the road to healthcare value by integrating quality and training their workforces may face the specific challenges below. They will need to plan for and overcome these to produce sustainable results.

Demonstrating economic value
All organizational imperatives or business initiatives are resourced according to their impact. While it is widely accepted that better quality leads to better value, proof of financial outcomes is a threshold that quality management must demonstrate. Therefore, translating quality strategies into specific, meaningful tactics that link to clinical, operational and financial outcomes is necessary.

Integrating quality vertically and horizontally
Integration has to be achieved vertically, from the top to the frontline. It also has to be achieved horizontally, across service lines, siloed departments, and different care settings. Vertical integration is easier because teams report to a leader and work toward specific change measures. Horizontal integration across system-wide verticals is more challenging. Reporting, service lines and care objectives aren’t frequently aligned. Definitions can also vary, especially if one setting or practice, like acute care, is further along in their quality implementation. Shared understanding of the quality competencies will better prepare any system, large, small, diverse or homogeneous to work better together.

Eliminating variabilities
As healthcare mergers and acquisitions take center stage, the acquired sites become part of a larger healthcare system. When this happens, the systems get a bird’s eye view of the variability in care and service levels across settings and geographies. For large systems to live up to their corporate brand for quality, standardization of quality needs to be balanced with local needs emanating from population health. Healthcare organizations who take the time to understand the communities they serve will have a better chance of achieving corporate quality goals.
Taking Action and Next Steps

The modern healthcare environment is innovating and piloting multiple value-driven solutions but cannot achieve desired transformation without healthcare leaders, quality management and practitioners working together to improve efficiency and effectiveness of care delivery. Quality professionals are central to this strategy because when successfully integrated across the organization, they provide ethical, credible and evidence-based insights into practitioners’ everyday work that result in higher quality care. They help healthcare organizations achieve the Aims and succeed under value-driven payment models.

While value-based care models challenge healthcare organizations to thrive amid new and varied demands, one certainty is true: value-based care is here to stay. Healthcare in the United States must become economically sustainable. It cannot continue its pace toward 20 percent of U.S. GDP3 with key outcomes that are not improving and performance that falls below other countries that spend less.4

Healthcare organizations should commit to a Quality Driven Healthcare model immediately, making use of existing resources by supporting and investing in their quality workforces to deliver on value-based goals. The road to economic viability is clear: engage and integrate your existing quality workforce to achieve quality patient-centered care. Healthcare organizations should commit to this goal without delay.

System executives must be aware of the defined competency set required to do quality work and they should leverage their healthcare quality staff within the healthcare systems and ensure their engagement with practitioners to optimize care.

3. Health spending is projected to grow 1.0 percentage point faster than Gross Domestic Product (GDP) per year over the 2017-2026 period; as a result, the health share of GDP is expected to rise from 17.9 percent in 2016 to 19.7 percent by 2026. https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/NationalHealthExpendData/NationalHealthAccountsProjected.html
Participating Hospital Systems & Individuals

**Beebe Healthcare**
Joan Thomas, RN  
Vice President, Clinical and Ambulatory Services

**Christiana Care Health System**
Lynn Jones, MHA, FACHE  
President, Visiting Nurse Association & Senior Vice President, Post-Acute Care Services

Patty Resnik, CPHQ, FACHE  
Vice President, Quality and Care Management

**Huntington Hospital**
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Resources

About NAHQ
NAHQ is the only organization dedicated to healthcare quality professionals and offers the only accredited certification in healthcare quality, the CPHQ. Defining the standards of excellence for the quality profession, NAHQ equips professionals and organizations across the healthcare continuum with extensive educational programming, networking opportunities, and career resources. NAHQ collaborates with institutions, corporations, and other organizations to advance the field of healthcare quality.

HQ Essentials
Industry-elevating HQ Essentials: competencies for the healthcare quality professional for advanced and master practitioners in healthcare quality in six key areas: performance & process improvement; population health & care transitions, health data analytics, patient safety, regulatory and accreditation and quality review & accountability.

Career Profiles of Healthcare Quality Professionals in the Field
NAHQ’s career profiles provide examples of the paths that healthcare quality professionals have taken in the field and demonstrate the qualities and skills necessary to advance the profession in six key areas: performance & process improvement; population health & care transitions, health data analytics, patient safety, regulatory and accreditation and quality review & accountability.

NAHQ Code of Ethics for the Healthcare Quality Profession and Code of Conduct
A healthcare quality professional — regardless of his or her specific practice setting, organization size, or portfolio of work — is dedicated to improving clinical outcomes, reducing systemic waste, and ensuring stakeholder engagement and satisfaction. This purpose is often, but not always, captured in a specific quality role. A healthcare quality professional is defined by his or her purpose and not by a job description. The NAHQ Code of Ethics informs individual decision-making about ethical situations within a given role or relationship.

About the ACLC
The ACLC will accelerate the transition to accountable care by identifying the care delivery competencies needed for providers to succeed in risk-bearing payment models. As the accountable care movement progresses, organizations are transitioning from “what to do” to “how to do it.” The ACLC brings together the top performers in accountable care and industry leaders who know what it takes to succeed.

Accountable Care Atlas
The Accountable Care Atlas is a public resource intended to help the provider community identify and prioritize the care delivery competencies necessary for success under risk-based payment. The Accountable Care Atlas organizes more than 160 competencies in relationship to one another and in context for implementation.

ACLC Case Study Briefs
Each Case Study Brief (CSB) is a 2-page document describing the efforts of one provider organization is implementing one of the ACLC identified competencies for accountable care. Each brief covers the organization’s background, approach to the competency, results to date, tools and vendor partners, challenges with implementation and key learnings.

Sample CSBs Related to Quality
– Advocate HealthCare – Creating a Culture of Engagement
– Ascension Care Management – Selecting and Supporting High-Value Leaders for Accountable Care
– Total ACO – Building Internal Quality Reporting Expertise
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