

# Value-Based Health Care (VBHC) in Wales

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# Agenda

**Background**

**Strategy & Case Study**

**Strategy 2.0**

**Next steps**

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Strategy

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Next steps

# The NHS in Wales



- Population of over 3 million people
- Budget of > GBP 8 billion
- 7 Local Health Boards that plan and deliver healthcare services in their areas – fully integrated system



## Vision

- Longer, healthier and happy lives...whole system approach...underpinned by quality and safety standards

## Core values

- Putting quality and safety above all else – providing high value evidence-based care for our patients at all times.
- Measuring the health and well-being outcomes which matter to people and using that information to support improvement and better collaborative decision making

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# 12 months ago we set out with five key goals and associated work areas

Goals	Work areas
<b>All Health Boards across Wales collecting, analysing and using outcomes data in two disease areas</b>	<ul style="list-style-type: none"><li>• Create a dashboard for lung cancer</li><li>• Create a dashboard for heart failure</li></ul>
<b>Introduce a structure to enable scaling of VBHC in Wales</b>	<ul style="list-style-type: none"><li>• Bring together a national operational Steering Group for VBHC</li></ul>
<b>Welsh population becomes aware of what VBHC means and how it applies to them</b>	<ul style="list-style-type: none"><li>• Deliver VBHC roadshows to all Health Boards</li><li>• Organise an annual conference</li></ul>
<b>Wales partners with other international organisations to support the leadership of the global adoption of VBHC</b>	<ul style="list-style-type: none"><li>• Work in conjunction with the OECD to support the delivery of the PaRIS programme</li></ul>
<b>Wales partners with commercial and academic organisations to support the delivery of VBHC</b>	<ul style="list-style-type: none"><li>• Bring together an Executive Summit with the leaders of life science companies, universities and informatics companies – taking place on the 18<sup>th</sup> September 2019.</li></ul>

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The CanISC data used in this dashboard was updated on: 10 January 2019

## Page Filters

HealthBoard  
All

Organisation  
All

Age Band  
All

Year of Diagnosis  
All

Gender  
All

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## Survival

25.68K

Diagnoses

39%

1 Year Survival

18%

5 Year Survival

498

Average of Survival (Days)

55%

Death in NHS Establishment

13

Nights in Hospital in Last 30 Days of Life

Date of Diagnosis

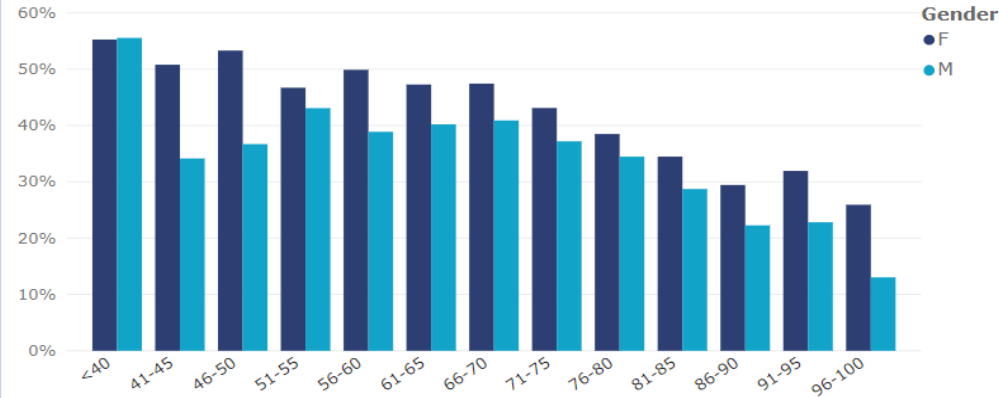
01/01/2007

18/10/2018



Home

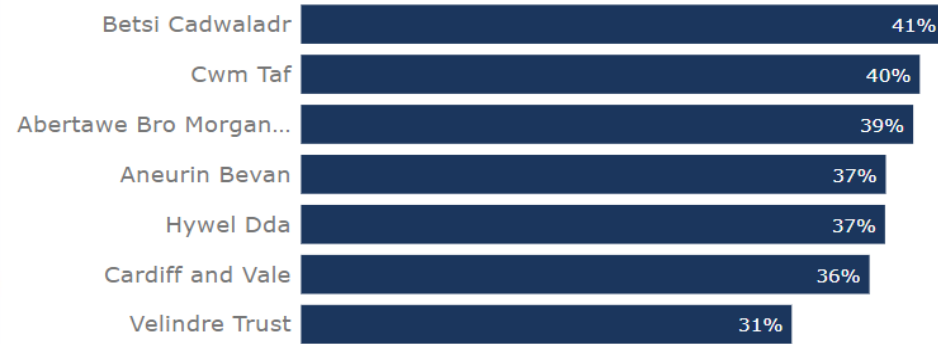
### Survival Rate by Age Band and Gender



Diagnosis

Residence

### Survival Rate 1 Year Actual by Diagnosing Health Board



Chemotherapy?

Yes

No

Radiotherapy?

Yes

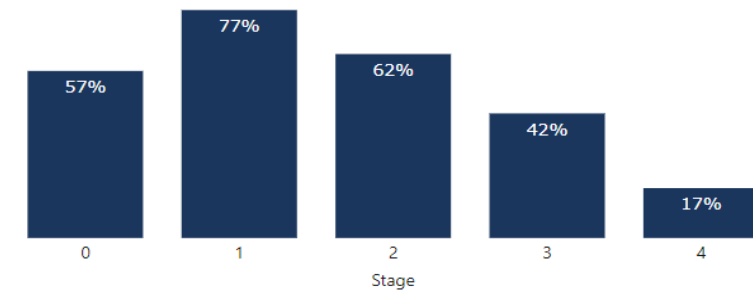
No

Surgery?

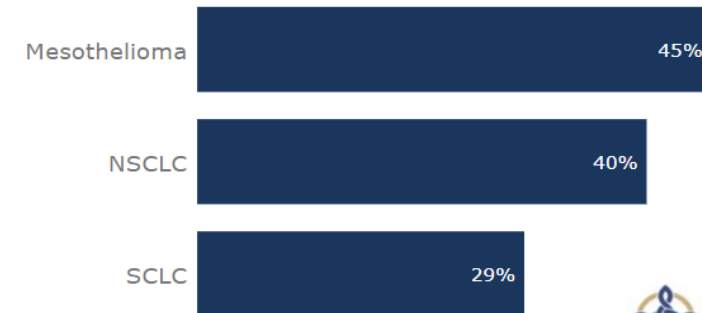
Yes

No

### Survival Rate by Stage/PS at Diagnosis



### Survival Rate by Type of Diagnosis



## Page Filters

HealthBoard  
All

Organisation  
All

Age Band  
All

Year of Diagnosis  
All

Gender  
All

## Patient Pathway

25.68K

Diagnoses

50

Average of Wait time  
Referral to Treatment (days)

24

Average of Wait time  
Referral to Diagnosis (days)

37

Average of Wait time  
Referral to MDT

Date of Diagnosis

01/01/2007

18/10/2018



Home

### Average Wait Time in Days of:

Referral to CT Scan

5

Referral to Specialist Nurse

22

Referral to Diagnosis

24

Referral to Bronchoscopy

25

Referral to MDT

37

Referral to CT Guided Biopsy

38

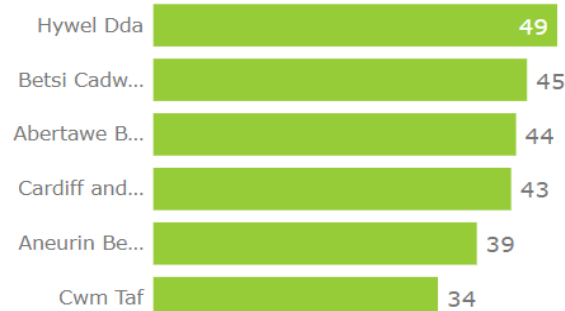
Referral to PET Scan

40

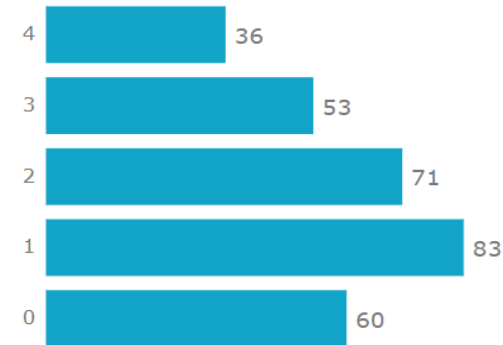
Referral to Treatment (RTT)

50

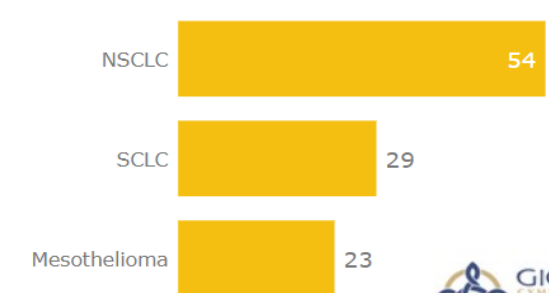
### RTT Days by Health Board



### RTT Days by Stage at Diagnosis



### RTT Days by Diagnosis Type





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HealthBoard  
All

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All

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All

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## PROMS Data

This page shows measures relating to the PROMS data, using the first available PROM record for the individual.

88

Number of Records

54

Average Health Value Score

Date of Diagnosis

01/01/2007

18/10/2018

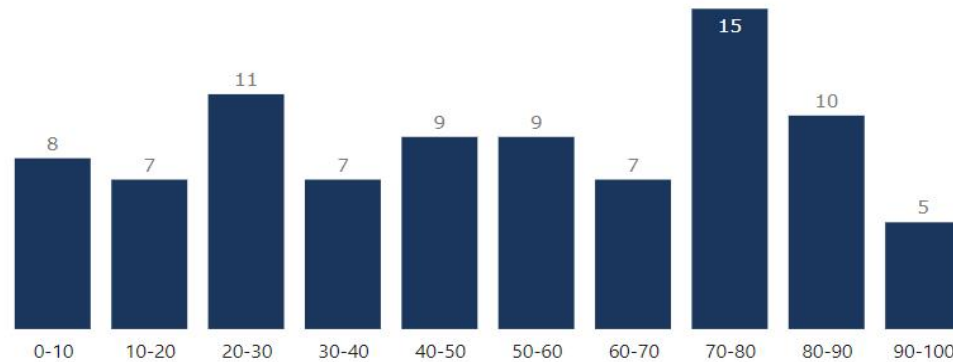


Home

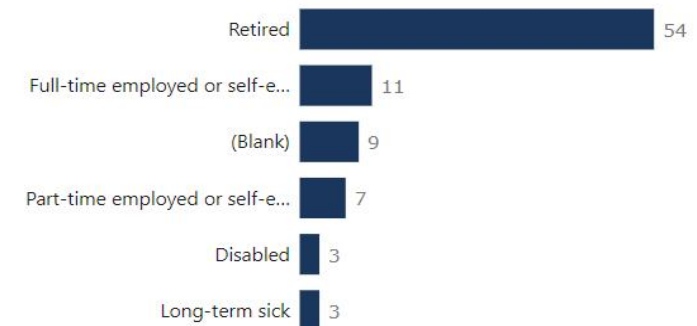
Diagnosis

Residence

Health Today Value



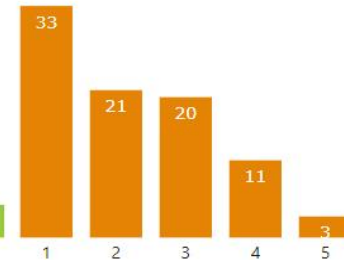
Employment Status



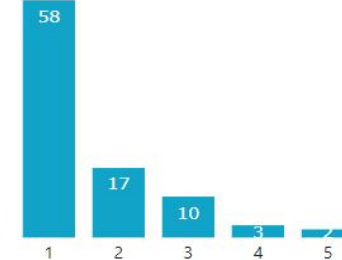
Mobility



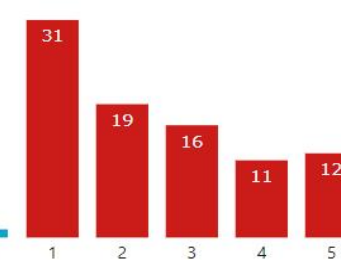
Pain/Discomfort



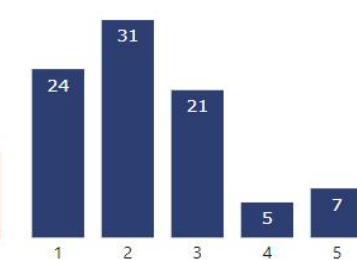
Self-Care



Usual Activities



Anxiety/Depression



# Using the dashboard

- Available for different Health Boards to compare their performance and to drive performance improvement in local teams
- Available for the National Lung Cancer Network to discuss variations and to begin developing hypotheses for reasons behind the variation
- Opportunity for management to allocate resource based on methods to improve the outcomes
- Opportunity for management to be held to account based on the dashboards

# Wales is driving key strategic partnerships with industry & academic partners

## Value-Based Procurement (VBP)

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### Old approach

- Buy products
- The more you buy the more you spend
- Industry partners seek to sell as many products as possible

### New approach

- Buy value
- We seek products that will deliver value
- Industry works with our health boards to deliver value
- Remuneration is based on the achievement of real world value

## Moving beyond VBP

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- Determine how we can form strategic partnerships, working together with industry, informatics and universities to drive the value agenda
- We want to determine how we can best work “above the transaction”
- Executive Summit on the 18<sup>th</sup> September 2019 hosted by the Minister, to discuss this topic

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# We are now developing a plan to scale VBHC across the NHS in Wales from 2019-2022

- 1 Collect, combine, analyse, present and use outcomes and costs in fifteen clinical areas. Work in partnership with the national Welsh Informatics service to develop information products to support decision-making in NHS Wales, from the clinic/ward to the Board
- 2 Encourage the use of patient-reported outcome measures as a way of enhancing communication between patients and their clinicians in support of shared decision making and to influence the digital transformation necessary to achieve this as outlined in A Healthier Wales
- 3 Embed a culture of value in NHS Wales supported by formal and informal education and engagement mechanisms. Support the application of value-based decision making through the health boards and clinical networks.

# We are now developing a plan to scale VBHC across the NHS in Wales from 2019-2022

4

Continue to build on Wales' reputation as a leader in this field through strengthening of international partnerships.

5

Place outcomes at the heart of the procurement decision-making process.

6

Develop an approach to evaluating progress across Wales and an inventory of case studies.



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- Finalise the work programmes to support the delivery of the goals
- Finalise the evolved VBHC Steering Group
- Finalise the structure of the Central VBHC Team