

THE CASE FOR NURSE LEADERSHIP IN VALUE-BASED HEALTH CARE

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The Australian College of Nursing (ACN) argues for models of care that provide the **right incentives** and the **right care** at the **right time** for the **right price**, in the **right place** by the **right provider** (as adapted from the Australian Commission on Safety and Quality in Health Care).

While Australia's health system ranks as one of the best in the world, there remains significant inequities to access and quality care provision for those marginalised and disadvantaged by age, geography, culture or poverty. Delayed or inadequate care for these populations over time can compound health conditions, causing increased pressure on the public health system.

WHAT IS VALUE-BASED HEALTH CARE?

Value-based health care (VBHC) is a person-centred approach that prioritises the outcomes that matter most for a patient in the care of their condition, relative to the costs and resources required over the full cycle of their care.

$$\text{Value-based health care} = \frac{\text{The health outcomes that matter most to patients}}{\text{The costs required over a full cycle of care}}$$

Adapted from: Porter ME (2016). Value Based Health Care and the Role of Outcomes: Opportunities for the OECD. Meeting with OECD Paris. 19 May 2016. Retrieved 5 August 2020, from <http://www.oecd.org/els/health-systems/Item-3b-Improving-Health-Care-Value-Porter.pdf>

WHY IS IT WORTH INVESTING IN VALUE-BASED HEALTH CARE?

Australia's health needs are changing fast, and pressures on our health budgets are mounting. Our ageing population and rise in chronic and complex conditions means changes to the way we deliver, and fund health care are sorely needed.

A more holistic, person-centred approach to health care would deliver better outcomes for patients, while reducing unnecessary costs to the health system, ensuring long-term sustainability.

HOW IS IT DIFFERENT FROM OTHER HEALTH CARE FUNDING APPROACHES?

Current health funding models include activity based bundling (ABF) and fee-for-service (FFS). While these models can incentivise accessibility, activity and cost reduction in some ways, they also disincentivise prevention, effective chronic disease management, and continuity of care. ABF and FFS models can discourage health promotion and early intervention in chronic conditions and can push patients out of primary care into the hospital system.

WHY ARE NURSES BEST PLACED TO LEAD VALUE-BASED HEALTH CARE APPROACHES?

Nursing is frequently ranked as the most trusted profession, with nurses providing trusted, expert and person-centred care. Nursing is also the largest single health profession, with the highest match to population across the country. The scale and spread of nursing care, along with the trust they engender in communities, means nurses are best-placed to deliver value-based health care.

In order to fulfill this promise, nurses require greater autonomy in developing and delivering nurse-led initiatives funded in both hospital and primary health care settings. Current trials of VBHC approaches are underway in dental services, cancer treatment, paediatric bronchiolitis and arthritis.