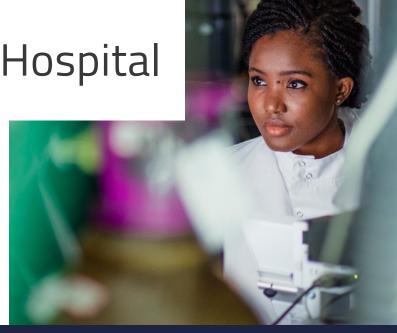# eit Health

Implementing High Value Care in Europe

Public hospital
Basel University Hospital

Context

As one of five Swiss university hospitals in the country, Basel University Hospital (USB) was the first to implement HVC in 2016. With a staff of 7,200 employees and a budget of €1 billion in 2018, USB treats nearly 38,000 inpatients and one million outpatients every year. As a tertiary care facility, USB offers prolific translational research activities in partnership with leading life science companies.
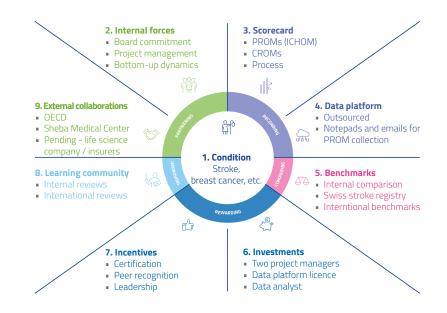
Achievements

Only one year after implementing a HVC pilot, the USB stroke department improved by 14% the median time from symptom to treatment onset, which is of particular importance for stroke patient outcomes[1]. For breast cancer, PROMs are routinely assessed and discussed with patients during consultations, leading to improved patient engagement and satisfaction. Two years after PROM implementation, the OECD Health at a Glance Report 2019 ranked USB third out of nine leading university hospitals across seven countries for crude PROM scores for reconstruction following mastectomy[2].

Implementation

To achieve these results, USB organised its HVC implementation around three key strategies. First, top management clearly endorsed the value-based approach and offered strong support to clinical teams. Second, USB invested in a dedicated HVC project management team coordinating the implementation across departments. Finally, USB was strategic in choosing conditions with motivated clinical champions where quick wins could mobilise teams and scale HVC programmes in nine other conditions. USB's Implementation Matrix is presented here.

2. Internal forces
- Board commitment
- Project management
- Bottom-up dynamics

3. Scorecard
- PROMs (ICHOM)
- CROMs
- Process

9. External collaborations
- OECD
- Sheba Medical Center
- Pending – life science company / insurers

4. Data platform
- Outsourced
- Notepads and emails for PROM collection

1. Condition
Stroke, breast cancer, etc.

5. Benchmarks
- Internal comparison
- Swiss stroke registry
- Interntional benchmarks

8. Learning community
- Internal reviews
- International reviews

7. Incentives
- Certification
- Peer recognition
- Leadership

6. Investments
- Two project managers
- Data platform licence
- Data analyst

PARTNERING — RECORDING — COMPARING — REWARDING — IMPROVING

- HVC Implementation Matrix

Internal forces

From the outset, the board's endorsement was clear. *"We do not only want to preach excellence, but demonstrate it,"* asserted Professor Christoph Meier, Chief Medical Officer. The first challenge to implement HVC successfully is to co-create this vision and roadmap with clinical champions and medical teams. *"We succeeded to some degree to not be perceived as pure top-down management imposing yet another strategy on our medical staff, but as an ally trying to foster best medical care",* stated Meier.

Data platform

USB outsourced the development of a data platform to an IT supplier, while involving clinical teams directly, and in 2017, USB introduced outcome measurement for breast cancer. Since then, patients have entered PROMs on notepads at the clinic or via automated e-mails. The data platform provides a graphical display of PROM results. The scorecard features CROMs and PROMs, including the Breast Q suite of tools for breast cancer surgery[3]. Clinicians have real-time access to PROMs during consultations to support decision-making with patients. *"We can identify problems of each patient early on through these discussions and treat in a more targeted way. What the patient reports has direct consequences on the care pathway",* explains Professor Walter Weber, Head of Breast Surgery at USB. Patients perceive an immediate benefit. "I would not have dared to speak about my sexuality to my treating clinician", a patient noted. *"Now, the discussion has become more empathic and insightful because clinicians are actively addressing these topics."*

University Hospital Basel

⚖ Benchmarks

Every year, Swiss health authorities require all stroke centres to submit standardised clinical outcomes data to the national stroke registry in order to be certified and therefore able to treat stroke patients. Each hospital receives a report on its benchmarked results on an annual basis. Data that are significantly below average may trigger a review process that could lead to certification withdrawal. With a below average score of 162 minutes from symptom to treatment in 2017, USB improved its performance by 14% in just one year, reaching the national average. USB pioneered PROMs collection for stroke, leading the way among the 22 certified stroke hospitals in Switzerland[1]. In time, median PROM scores will be publicly reported and trigger a constructive outcome-based competition among certified stroke units. Being ahead of the game will create a competitive edge, improving visibility, attractiveness and eventually cement USB's outcome-based reputation.

🐷 Investments

In 2016, USB invested in a dedicated HVC team. This team included a project manager, a quality and patient-centred manager, a data analyst and an information and communication technology coordinator. For cost measurement, the finance department created a TDABC working group with two clinicians and an economist. By 2017, USB implemented the first ICHOM standard set for breast cancer in daily clinical practice. Based on a successful use case, USB adopted a clear road map for implementing HVC in nine additional conditions. Working in close collaboration with medical teams, the project manager oversaw data quality and inclusion rates. Following a series of quarterly review meetings, the department appointed a leader to coordinate PROM collection.

🤝 External collaborations

As few hospitals in Switzerland measure outcomes as of 2019, USB is benchmarked against leaders abroad such as Sheba Medical Center in Israel. Insurers have shown interest in entering into outcome- and value-based payment contracts with USB. In addition, world-class life science companies have also shown interest in value-based programmes that evaluate patient outcomes associated with their drugs and devices.

Highlights

Through combined top-down and bottom-up efforts, USB medical teams began their HVC journey with two conditions and expanded to nine within two years. They are pioneering outcome-based competition among Swiss providers. Being ahead of the game creates opportunities to demonstrate excellence at national and international levels, as well as fostering collective pride.

This case report was written in collaboration with Bilger S, Gaensbacher S, Mueller A, Wyss A, Ernst S, and Rueter F from Basel University Hospital.

References:
1. Swiss Stroke Registry, Annual Report 2018.
2. OECD, Health at a Glance. 2019.
3. Tevis S., et al., Patient-Reported Outcomes for Breast Cancer. Ann Surg Oncol, 2018. 25(10): p. 2839-2845.

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