



The NSW public health system is world class. It is the largest public health system in Australia

NSW Health's expenses budget for 2021-2022 is \$581 million per week/\$83 million per day

8.2 million

NSW residents on 809,444 sq. km

**228** 

Hospitals

351,309

Surgeries performed

\$30.2 billion

2021-22 budget

17

Local health districts and Specialty health networks

1.9 million

Inpatient episodes

127,156

Full-time equivalent staff

3.1 million

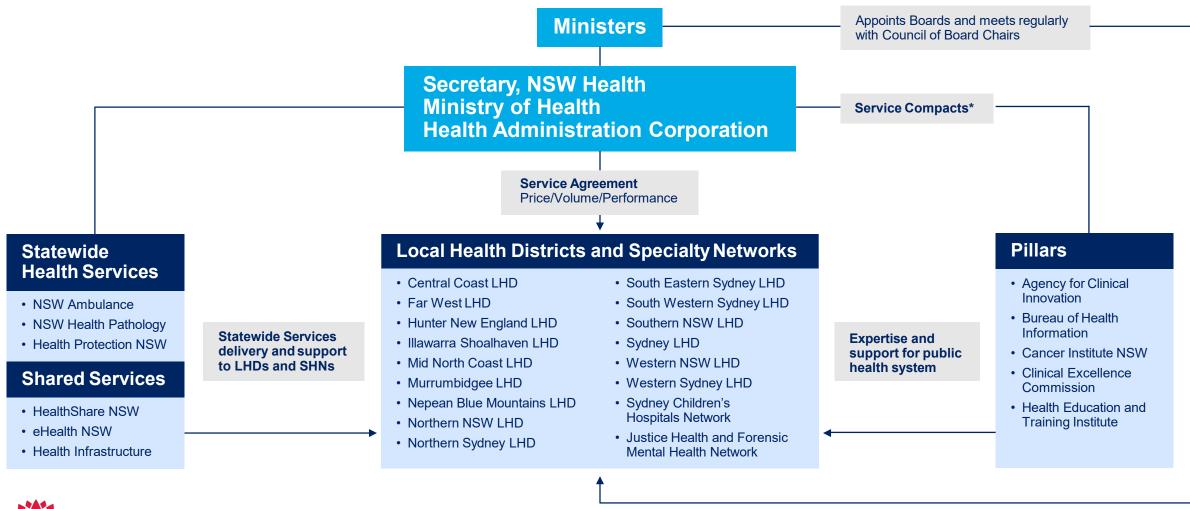
Emergency department attendances

1,265,142

Ambulance emergency responses



#### **Our structure – NSW Health system**





St Vincent's Health Network is an affiliated health organisation.

\* Service Compact — Instrument of engagement detailing service responsibilities and accountabilities.

### The NSW Health vision

A sustainable health system that delivers outcomes that matter to patients and the community, is personalised, invests in wellness and is digitally enabled





#### In NSW we focus on four essentials of value



Experiences of receiving care

Experiences of **providing care** 

Health outcomes that matter to patients

Effectiveness and efficiency of care



#### **Enablers help to build capacity and system change**



Patient and community engagement



Measurement and evaluation



Research and innovation



Delivery organisations



People, culture, governance and capability



Digital health and analytics



Funding and purchasing



Clinical leadership and engagement



#### What do we mean by human experience?







Staff experience



#### **Guide to action**

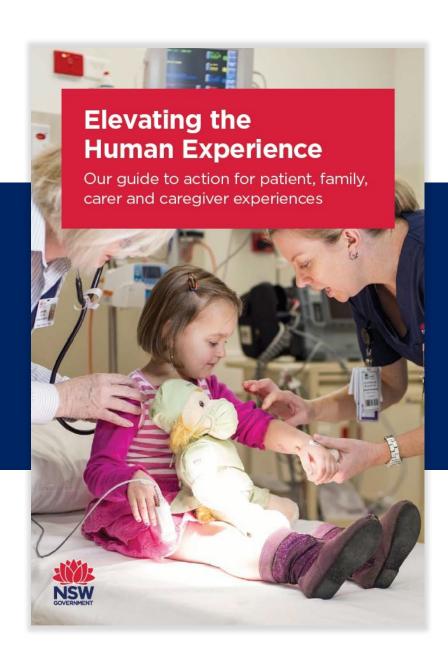
**Statement of intent for NSW Health** 

**Our commitment** to patients, consumers, clients, carers, family and staff

Starting point for a **strategic approach** 

**Education** on what is human experience

Manual for change and innovation





engagement

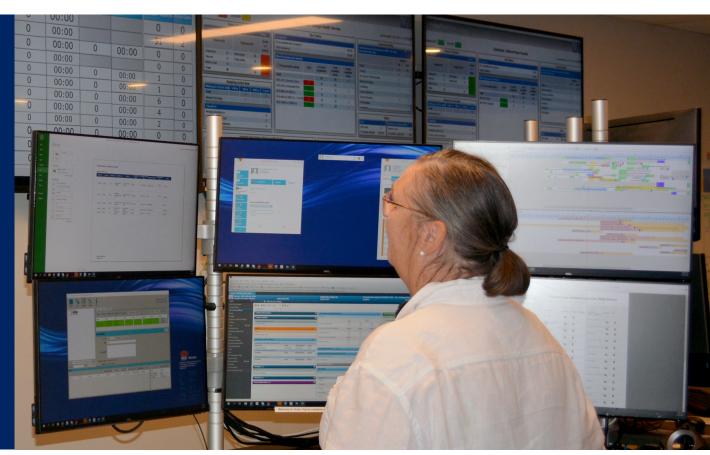




#### We are measuring outcomes and experiences



- The Health Outcomes and Patient Experience (HOPE) system collects Patient reported measures (PRMs)
- The Register of Outcomes, Value and Experiences (ROVE) brings together multiple data sets to provide complete picture of patient journey
- Lumos links data from general practices to other health data





#### Clinician leadership and engagement





#### **Clinical initiatives**



Chronic heart failure

Renal

supportive care



**COPD** 



**Diabetes** 



Diabetic foot



**Breast** radiotherapy hypofractionation



Hip fracture



Direct access colonoscopy



Falls



Osteoarthritis



Osteoporosis re-fracture prevention



Wound management



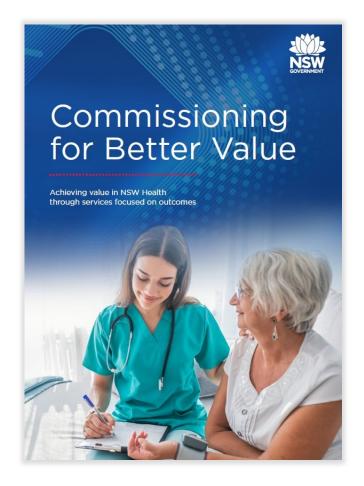
**Bronchiolitis** 

**Developed by** clinicians and evidence-based Supporting care in appropriate settings Scalable and being implemented across all health districts and networks

Identifying opportunities to reduce unwarranted clinical variation



# **Embedding value in commissioning and procurement**



Value based healthcare provided a framework for a redesign of medical imaging services in Northern NSW local health district

The new service contract includes:

- Annual patient and clinician experience surveys
- KPIs informed by measurable outcomes
- Designed in partnership with the service provider





"

Our medical officers are providing positive feedback about the high quality of the services.

"

Northern NSW Local Health District



#### **Collaborative Commissioning**



## **Purpose:** Delivering value-based care across hospital and community settings

- Joint responsibility between providers and organisations
- Strong consumer engagement accountability to the community served
- Local design of care pathways for improved outcomes for patients
- Funding reform; flexible purchasing and provider arrangements, realignment of resources and outcomes-based payments
- Data analytics, business analytics, implementation support and digital technologies supported by Lumos
- Continuous learning to support improvement and innovation





#### **LBVC Economic Appraisals – preliminary benefits**



**Renal Supportive** Care



**Chronic Wound** Management



**Direct Access** Colonoscopy



Breast Radiotherapy Hypofractionation

- 4 Cohorts will generate around \$300M in NET benefit over next 10 years
- Higher if monetarised patient benefits taken into account
- Provide key findings to system with suggested approach
- Include monitoring against BaU in RAA/Treasury reporting (eval & EB)

- SI A incremental targets to reach 20% coverage
- ensure optimal balance between eco & patient benefits
- Expand to other cohorts eg CHF and COPD
- 10% shift over time from acute to non-acute settings
- Combination of strategies
- Incremental targets in SI As?

- Monitor economic benefits
- Supported by DAC strategies
- Monitor economic benefits
- Consider Discrete Choice Experiment approach for EAs of other cohorts
- Consider expansion of HF to other cohorts

#### Find out more on the NSW Health website



www.health.nsw.gov.au/value

