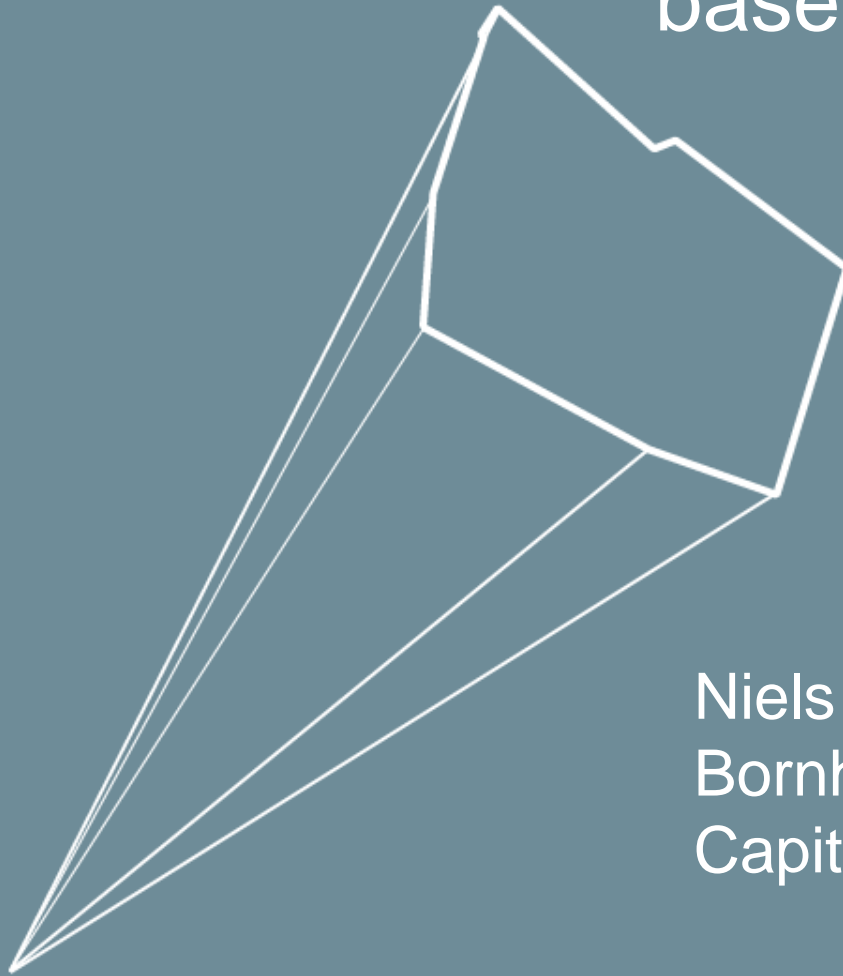


How to move to a value based healthcare system



Niels Reichstein Larsen, CEO
Bornholm Hospital
Capital Region of Denmark

Capital Region of Denmark

Provides healthcare, mental healthcare, regional development and research for 1.6 mio. inhabitants – approx 30% of the population in Denmark

Employs approx. 40.000 people – mainly health care professionals – making the Capital Region one of the largest employers in Denmark

Bornholms Hospital is the smallest hospital in the Capital Region of Denmark, situated in the Baltic Sea 120 km from Copenhagen.



BORNHOLM HOSPITAL REGIONAL DEVELOPMENT HOSPITAL

- Bornholm Hospital is exempted from the region's activity based reimbursement model since 2016.
- Bornholm Hospital must instead work with different aspects of value for patients / Value Based Healthcare
- A wide variety of initiatives were tested and most of them implemented



Examples of projects

- To reduce admissions to the hospital
- Outpatient visits and telephone consultations
- Video conferences incl. Patient and/or relatives
- Medical gate-keeper before admission
- Coordinated care for patients with multimorbidity

Considerations and paradoxes

Necessary to have many initiatives to reach many types of staff

Difficult to reach doctors (hospital and GPs) and engage them in the process

Staff want improvements and less focus on reimbursement

Municipality key collaborating part- but only hospital had funding for the change work

Porter

Many initiatives at the same time is confusing the staff and difficult to manage

The same doctors make noise when the don't feel involved

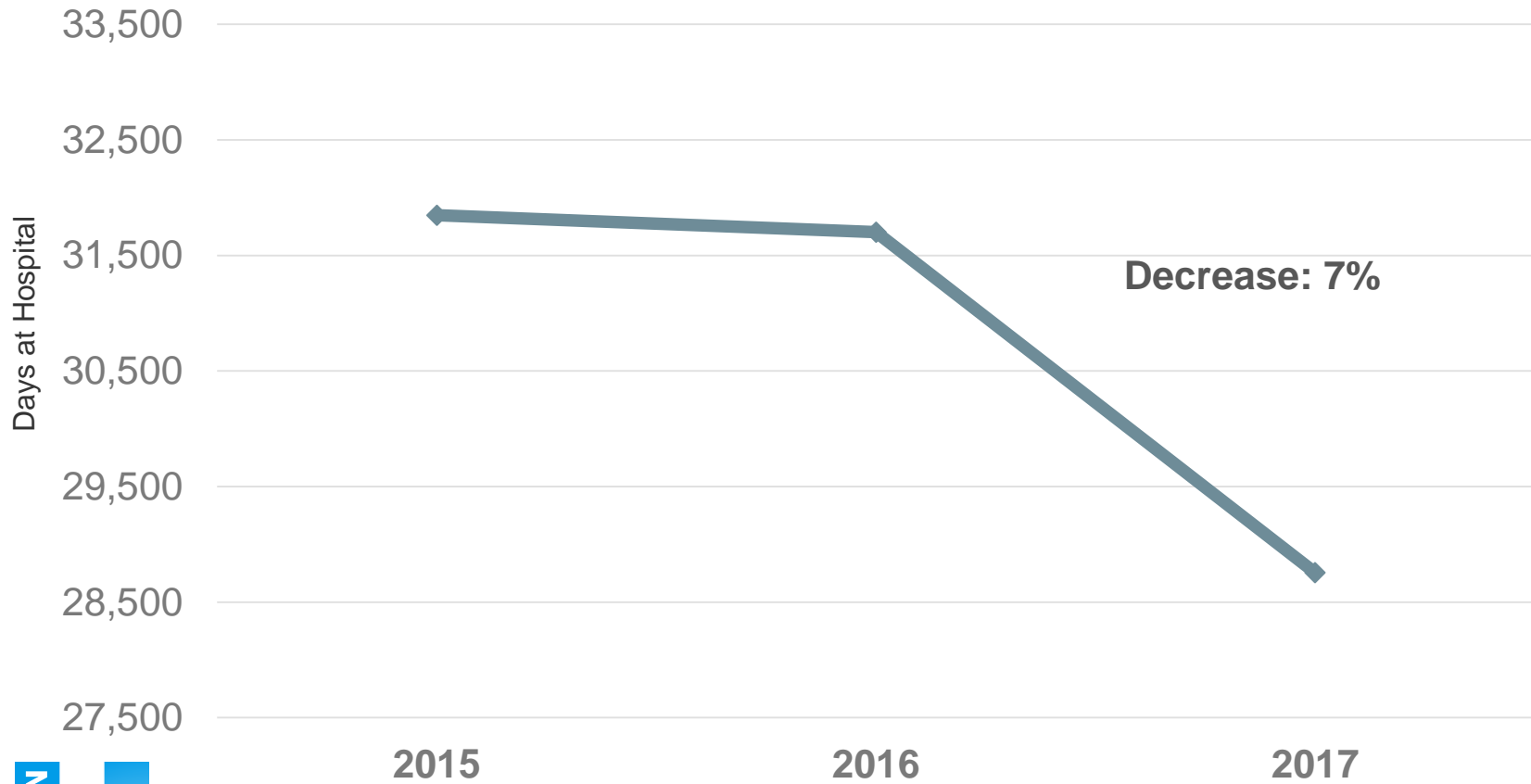
Staff tired of projects and cultural changes

Only hospital had funding for the change work

Schein



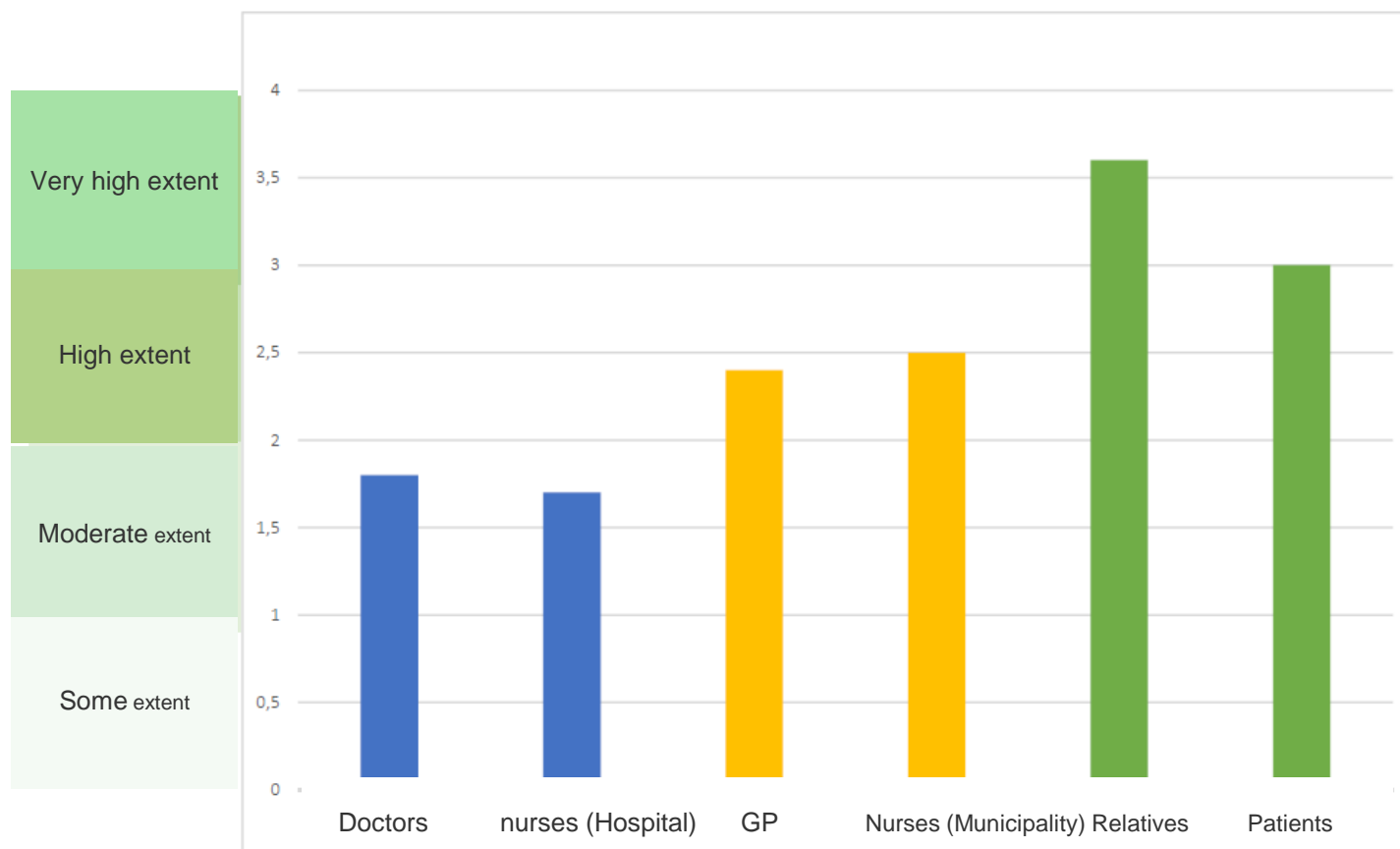
Reduced days of admission



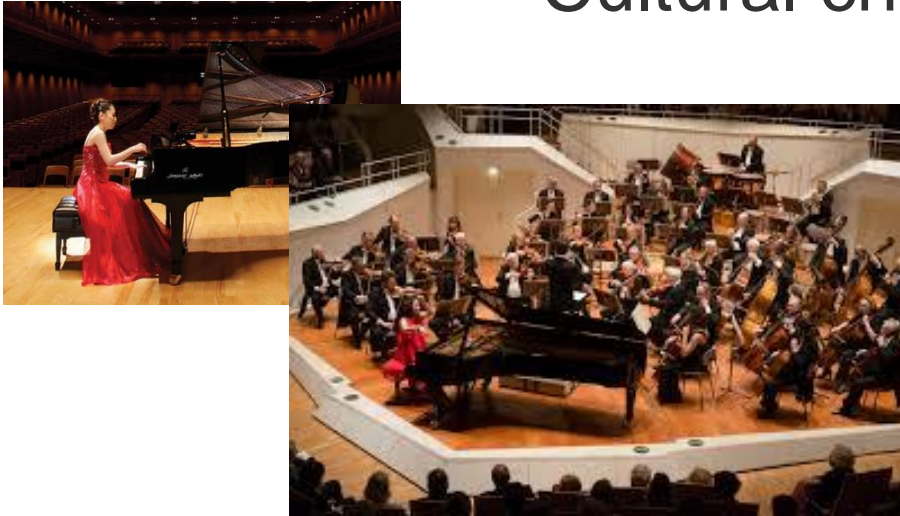
Telephone-consultations and outpatient visits

	Aug. 2017 Jan. 2018	Aug. 2018 Jan. 2019	Change
Number of telephone consultations	859	986	15%
Number of outpatient visits (ex. telephone.cons.)	1.479	1.614	9%

Are You more clarified with the course of care after the video conference?



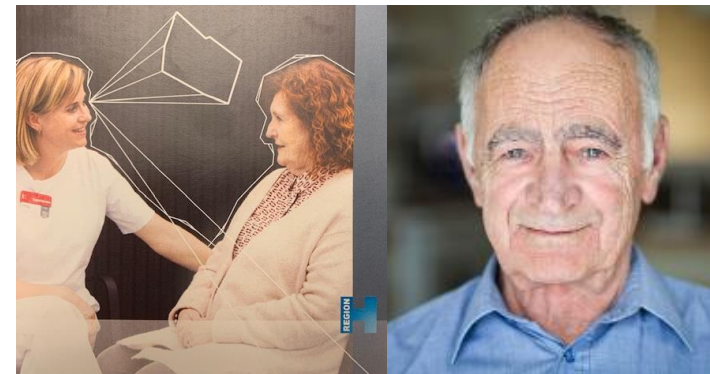
Cultural changes come hard



What matters to Esther?

Examples of cultural changes:

- Establishment of a patient council
- Changing the mindset of health care providers
- CEO within a radius of 3 meters



Working with cultural changes

CEO within a radius of 3 meters:

- Workshops (about every day challenges, service culture, inspiration from the hotel industry) with participation of more than 120 employees
- More than 100 improvements has been identified

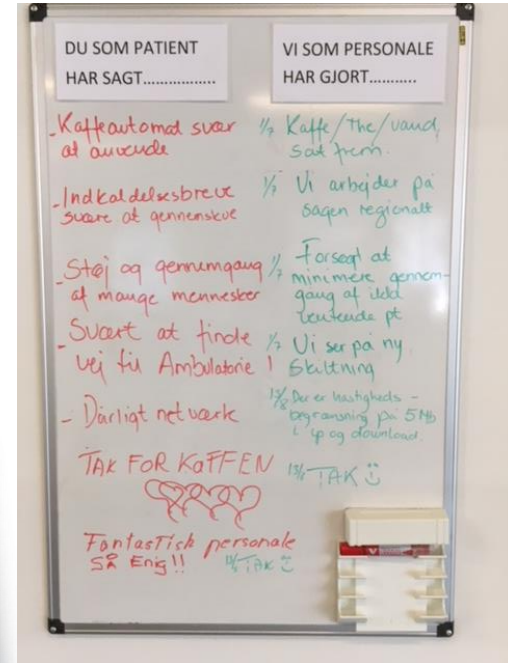
Professional skills:

- Training courses for nurses: aprox. 50% of our nurses participated

Inspiration from other health care services:

- Collaboration with Qulturum in Jönköping
- Collaboration with other national multimorbidity clinics
- Tivoli Gardens service culture

Satisfaction	
Patient satisfaction	4,6
Employee satisfaction	4,0
Scale from 1 to 5: 5 is very good and 1 is poor.	



Example of whiteboard in outpatient clinic – suggestions from patients and actions from staff

Lessons learned / recommendations

- 1) Cultural changes requires change in our own perception of patient needs. Patient involvement and patient persona (Esther) is extremely helpful
- 2) Improvements and processes – not a project
- 3) Top management of the hospital must be 100 % engaged.
- 4) The changes must be facilitated by a senior project manager, who is clinically and academically respected.
- 5) Value for patients is increased via cross-sectoral collaboration with GPs and Municipality.
- 6) Strong correlation between leadership, improvement proceses and value for patients / “what is best for Esther” seems to have an effect on admissions