




Institute *for*
Healthcare
Improvement

IHI Whole System Measures 2.0

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One more measurement framework: Why now?

- WSM 1.0 developed in 2007...needed to be updated to reflect current thinking around system performance
 - New policy
 - New payment structures
 - New knowledge
- Need for rationalization
 - Measurement congestion
 - Too much complexity
- Expanded scope into the community
- Addition of “Joy in Work”



WSM 2.0 for Boards + Senior Leaders

- Health system leaders need a ***small set of measures*** that reflected a health system's overall performance on core dimensions of quality and reflected the health of the population, the experience of the individual, and the cost per capita.
- Push for view of expanded view accountability and influence beyond traditional inpatient and ambulatory view
- Designed for Board of Directors and Senior Leaders looking at whole system performance to inform strategy and link to operational measures that are actionable



Principles used

- Balance
- Parsimony
- Alignment
- Immediate Usefulness
- Consensus
- Adaptability



Methods used to develop WSM 2.0

- Development of subdomains (using the Triple Aim as a guide)
- Review of existing measure sets
- Modified Delphi method using iterative rounds of voting, measure discussion, and recommendation
- Additional consultations with IHI's Senior Fellows, executive leaders, and IHI's Scientific Advisory Group

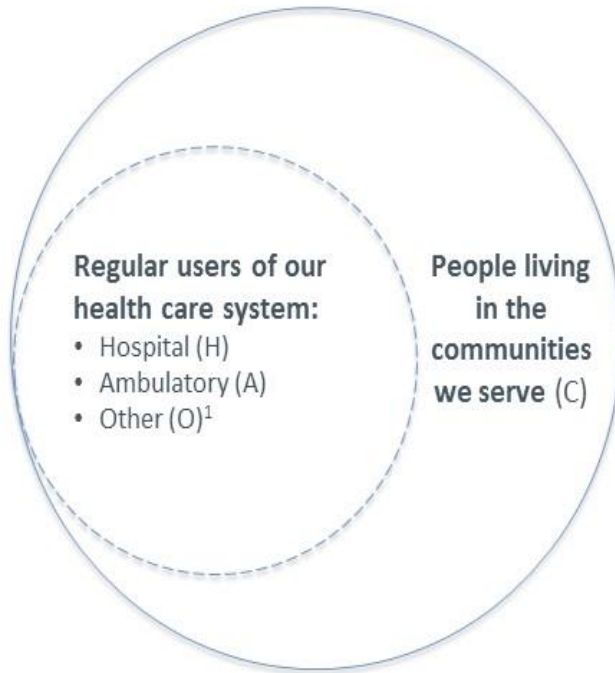


Domains

- Population Health Domain
 - Individual Health
 - Healthy Behaviors
 - Community Wellbeing and Health Equity
 - Workforce (of the health care system) Wellbeing
- Experience of Care Domain
 - Access
 - Prevention
 - Safety
 - Appropriateness and Effectiveness
 - Patient-Centeredness
- Per Capita Cost of Care Domain
 - Affordability
 - Socio-Fiscal Burden



Suggested Scope of Measures



1) E.g., long term care facilities, ambulatory surgery centers, retail clinics

<http://www.ihl.org/resources/Pages/IHIWhitePapers/Whole-System-Measures-Compass-for-Health-System-Leaders.aspx>

Domains & Subdomains

Health

- *Individual wellbeing*.....
- *Healthy behaviors*.....
- *Community wellbeing and equity*.....
- *Workforce wellbeing*.....

Measures & Likely Scope

- General health (H,A,O,C)
- Overweight/obesity (H,A,O,C)
- Optimal Lifestyle Metric (H,A,O)
- Social support (H,A,O,C)
- Disparities in infant mortality (H,A,C)
- Disparities in high school graduation rates (A,C)
- Job satisfaction (H,A,O)

Experience

- *Access*.....
- *Prevention*.....
- *Safety*.....
- *Appropriateness & Effectiveness*.....
- *Patient-centeredness*.....

- Timely ambulatory care (A)
- Childhood immunizations (H,A,O,C)
- Hospital-acquired infections (H)
- Serious reportable events (H,A,O)
- Preventable hospitalizations (H,A,O)
- Hypertension control (H,A,O)
- Patient-clinician communication satisfaction (H,A,O)

Per Capita Cost

- *Affordability*.....
- *Societal Footprint*.....

- Unmet healthcare needs (H,A,O,C)
- Per capita healthcare expenditures (H,A,O,C)



Challenges

- Lack of adequate measures for subdomains
- Desire for clear, readily understandable composite measures:
- Resistance to include measures that are outside of the health care delivery system's control
- Broadening WSM's while retaining parsimony
- Measuring Joy in Work
- Needed vs available measures
- Frequency of data collection
- Outcomes vs process measures
- Identifying impactful measures of health equity
- Application to Specialty health care system



Discussion

