Value Transformation Framework

WHAT

Is the Value Transformation Framework?

For health centers, **Value Transformation** refers to changes undertaken by the organization to achieve value-based care. The value-based “Quadruple Aim” goals for health centers are:

- Improved health outcomes
- Improved patient experiences
- Improved staff experiences
- Reduced costs

The **Value Transformation Framework**, developed by NACHC’s Quality Center, gathers and organizes the evidence-base and promising practices in areas fundamental to transformation for the purpose of guiding and accelerating health center improvements in infrastructure, people, and care delivery systems toward achievement of the Quadruple Aim.

WHY

Is This Framework Important for Health Centers Now?

The transition towards value-based care requires health centers to simultaneously focus on improving quality, improving outcomes, and reducing costs as a business imperative. One of the greatest threats to health centers’ advancement toward value-based care is not the lack of solutions but, rather, the lack of a framework that organizes proven and promising solutions into a tangible set of action steps. Health centers, and the staff working within the centers, have reached a point of potentially diminished return given the overwhelming volume of information, recommendations and competing improvement efforts.

Leadership and staff need a succinct, evidenced-based framework to create action plans towards value transformation.

The **Value Transformation Framework** addresses these challenges by translating research, proven solutions and promising practices in three domains (infrastructure, human capital, and care delivery) into manageable steps health centers can apply to improve health outcomes, patient and provider experience, and lower costs.

Elements of the Value Transformation Framework

- **Domain**: An organizational area that can be enhanced to positively influence transformation goals. The Value Transformation Framework focuses on the key domains of: infrastructure, care delivery, and people (human capital).

- **Change Areas**: Sub-categories within each domain that, if addressed, contribute toward Quadruple Aim goals. Each change area of the Value Transformation Framework may have multiple Action Guides.

- **Action Guides**: Concrete, recommended actions to advance a specific Change Area.

- **Tools and resources**: Additional resources to support changes.

**Value Transformation Framework** resources are under development and available for download in the Quality Center learning community available in MyNACHC @ [www.nachc.org](http://www.nachc.org). New users will need to register.
Are the Domains and Change Areas of the Value Transformation Framework?

The Value Transformation Framework translates evidence, and guides action, across three organizational domains:

**Care Delivery**
- **Population Health Management** - The systematic process of utilizing data on patient populations to target interventions for better health outcomes at lower cost, with a better care experience.
- **Patient-Centered Medical Home (PCMH)** - A model of care that transforms the delivery of primary care into a comprehensive system where patients are more effectively managed and more actively engaged.
- **Evidence-Based Care** - The decision making process for patient care that integrates clinical expertise and best-practice research with patient values and self-care motivators.
- **Care Management** - A way to manage highest-risk patients with more targeted services, when and how they need it.
- **Social Determinants of Health (SDOH)** - The circumstances that influence a person’s health status and the care they receive—based on factors such as where a person is born, grows up, lives, and works.

**Infrastructure**
- **Improvement Strategy** - The process of measuring and communicating information about the quality, value and outcomes of the health care experience and using this information to drive improved performance.
- **Health Information Technology (HIT)** - Leveraging health information technology to track, improve and manage health outcomes and costs.
- **Policy** - Decisions, plans and actions that guide efforts toward improved health outcomes, improved patient and staff experience and reduced costs.
- **Payment** - Value-based and sustainable payment methods and models.

**People**
- **Patients** - Incorporating the patient perspective into governance, care system design and individual care.
- **Care Teams** - Groups of staff with different skills who work together to deliver and improve care, offering a wider range of services more efficiently than a provider alone.
- **Leadership** - How a leader or governing body uses their position, responsibility and knowledge to lead people, care delivery processes and infrastructure to reach transformational goals.
- **Workforce** - The staff, trained and engaged, to support the health center’s mission and goals.
- **Partnerships** - The collaborations and active relationships made by the health center in pursuit of the Quadruple Aim.