**WHAT**

Is the Value Transformation Framework?

*Value Transformation* refers to organizational changes that lead health centers toward the important Quadruple Aim goals of:

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

The *Value Transformation Framework*, developed by NACHC's Quality Center, is a conceptual model designed to help health centers transform from a volume-based, to a value-driven, model of care. It distills research and evidence-based practices into clear pathways for change. The Framework organizes health center systems into three domains – infrastructure, care delivery, and people—and 15 change areas. Action guides for the change areas outline manageable actions steps for improvement designed to be readily implemented by health centers.

**WHY**

Is This Framework Important for Health Centers Now?

With the transition towards value-based care, health centers have a business imperative to simultaneously focus on improved health outcomes, improved patient and staff experience, and reduced costs. Balancing the complex task of systems change in the face of overwhelming volumes of information and best practices requires individuals and systems to gather, synthesize, and translate information into action. The Quality Center developed the Value Transformation Framework to guide systems change by translating research, proven solutions, and promising practices into tangible action steps that build the foundation for delivering high-quality health care.

The *Value Transformation Framework* organizes health center systems change into 15 change areas across 3 domains:

**Infrastructure:** the components that build the foundation for delivering reliable, high-quality health care.

**Care Delivery:** the processes and proven approaches used to provide care and services to individuals and target populations.

**People:** the individuals who receive, provide, and lead care at the health center and partner organizations to support the goals of high-value care.

# Value Transformation Framework

## People
- **Patients**: Intentionally and actively incorporate the patient perspective into governance, care system design, and individual care.
- **CARE TEAMs**: Utilize groups of staff with different skills to work together to deliver and improve care, offering a wider range of services more efficiently than a provider alone.
- **LEADERSHIP**: Apply position, authority, and knowledge of leaders and governing bodies (boards) to support and advance the center's people, care delivery processes, and infrastructure to reach transformational goals.
- **WORKFORCE**: Leverage a trained and fully engaged staff to successfully address the health center's mission and goals, with optimal joy in work.
- **PARTNERSHIPS**: Collaborate and partner with external stakeholders to pursue the Quadruple Aim.

## Care Delivery
- **Population Health Management**: Use a systematic process for utilizing data on patient populations to target interventions for better health outcomes, with a better care experience, at a lower cost.
- **Patient-Centered Medical Home**: Employ a model of care that transforms the delivery of primary care into a comprehensive, patient-centered system focused on high quality, accessible, and coordinated care.
- **Evidence-Based Care**: Make patient care decisions using a process that integrates clinical expertise and best-practice research with patient values and self-care motivators.
- **Care Coordination and Care Management**: Facilitate the delivery and coordination of care and manage high-risk and other subgroups of patients with more targeted services, when and how they need it.
- **Social Determinants of Health**: Address the social and environmental circumstances that influence patients' health and the care they receive.

## Infrastructure
- **Improvement Strategy**: Effectively and routinely measure and communicate information about the quality, value, and outcomes of the health care experience and use this information to drive improved performance.
- **Health Information Technology**: Leverage health information technology to track, improve, and manage health outcomes and costs.
- **Policy**: Pursue decisions, plans, and actions that help secure support and resources for health centers and expand access for underserved populations.
- **Payment**: Utilize value-based and sustainable payment methods and models to facilitate care transformation.
- **Cost**: Effectively address the direct and indirect expense of delivering comprehensive primary care to health center patients while considering the total cost of care for attributed patients.

## Health Center

<table>
<thead>
<tr>
<th>People</th>
<th>Care Delivery</th>
<th>Infrastructure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improved Patient Experience</td>
<td>Improved Care Delivery Experience</td>
<td>Improved Infrastructure Experience</td>
</tr>
<tr>
<td>Reduced Costs</td>
<td>Reduced Care Delivery Costs</td>
<td>Reduced Infrastructure Costs</td>
</tr>
<tr>
<td>Improved Staff Experience</td>
<td>Improved Health Outcomes</td>
<td>Improved Health Technology Costs</td>
</tr>
<tr>
<td>Improved Health Outcomes</td>
<td>Improved Workforce</td>
<td>Improved Policy</td>
</tr>
</tbody>
</table>

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