

KEY PRINCIPLES FOR EFFECTIVE HEALTH CARE REFORM

This document presents key principles that should underlie all efforts to reform health care. The basis for these proposals may be found in the accompanying PowerPoint presentation, including the speaker notes.

LH column = Recommended principles underlying reform strategies

RH column = Summary of rationale for those positions

Principles	Rationale
Cohesive Strategies	
- There must be <i>biologically sound public policy</i> to guide health care reform.	- All social institutions and public policy must reflect and respect underlying biology. - It is essential to understand and respect the realities of human biology and function in order to provide sensible health care.
- More public and private dialogue is needed to <i>understand what we are trying to reform</i> , focusing on clarifying the issues and their underlying causes.	- There are many myths and misconceptions about health and illness, about reasonable and prudent expectations of health care, and about appropriate solutions.
- There should be a <i>better understanding of the three key human dimensions</i> (physical, functional, and psychosocial), and their relevance to the provision of all health, rehabilitative, and social services.	- The health of all human beings is intertwined with their personal and psychosocial function.
- There should be a <i>realistic perspective on what health care can accomplish</i> .	- There are limits to the capacity for health care to help individuals attain health, especially when the term is understood in its broadest sense.
- There should be an emphasis on <i>thoughtful problem definition and cause identification</i> in trying to correct problems in the health care system.	- In any complex situation, good problem definition and cause identification are needed before attempted problem solving. Otherwise, the situation may be made worse, not improved.
- There should be a more balanced and appropriate <i>understanding of the role of regulatory agencies</i> in providing oversight and helping attain high quality care in all settings.	- Oversight of performance is critical, for various reasons. - The effectiveness of regulatory agencies depends heavily on the understanding and performance of all social institutions and on biologically sound, rational public policy.
- There should be a <i>rethinking about trying to distinguish “medical” and “social” models</i> of care.	- It is not biologically sound to split care or oversight of care into strict “medical” and “social” model constructs. - Such splits are artificial, biologically unsound, and hazardous to high quality care and effective reform. - It is important to coordinate interventions related to addressing impairments and risks with those related to treating causes (e.g., medical care).

Principles	Rationale
<p>- There should be a consistent foundation for <i>oversight and accountability</i>, including laws and regulations that facilitate—and do not impede—attainment of accountability in all settings.</p>	<p>- Accountability is a critical prerequisite for effective social institutions, including health care. - Attaining meaningful accountability requires a balanced approach, based on a clear understanding of reasonable expectations and a process to distinguish legitimate from unwarranted defenses against attempted accountability.</p>
<p>Appropriate Interventions to Improve and Reform</p>	
<p><i>Provision of Care</i></p>	
<p>- There should be vigorous promotion of <i>basic care principles and processes</i>, including the full care delivery process, in all settings.</p>	<p>- Effective, biologically sound health care must follow reliable, enduring principles and processes. - Proper use of the care delivery process in all settings is essential to effective health care.</p>
<p>- There should be support for the notion of care being given in the <i>proper context</i>.</p>	<p>- Health care should serve a purpose and have a proper context. - Proper context requires consideration of the impact of care on function and quality of life, a balance between providing interventions and recognizing the limits of medical care, and the recognition that interventions may be helpful or problematic, depending on the context.</p>
<p>- There should be suppression of <i>reductionism and jurisdiction</i> in health care.</p>	<p>- Excessive reductionism and jurisdiction are not biologically sound and contribute substantially to fragmented, costly, and problematic care.</p>
<p>- There should be reconsideration of the notions of <i>competency and expertise</i>, for all disciplines and in all settings. - There should be a much more balanced and broader understanding of what constitutes “expertise” and how to identify it.</p>	<p>- Competency and expertise must be related more to the ability to perform specific functions and tasks; for example, related to the care delivery process. - Knowledge does not necessarily imply the ability to apply it to specific situations in the proper context. - Many of those who operate and oversee care are too often deceived by unwarranted claimants to expertise.</p>
<p>- There should be a balanced and coordinated approach to the notion of <i>person-centered or individualized care</i>.</p>	<p>- Promoting “individualized” care means much more than just functional and psychosocial interventions - Quality of life and quality of care are closely related and are inseparable in all settings. - Social programs have a responsibility to provide and ensure good quality of care and predominantly health care settings have a responsibility to consider quality of life issues.</p>
<p>- There should be support for the vigorous promotion of <i>genuine evidence-based care</i> and a much better understanding of what it means and how it is attained.</p>	<p>- Genuine evidence-based care requires combining adequately detailed and organized evidence about the patient with pertinent evidence about managing the issues identified in a patient, all applied in the proper context for each individual (phronesis). - Treatment out of context may be inadequate, if not dangerous. It may fail to resolve causes, and may be irrelevant, cause additional problems, and impede attainment of desired goals.</p>

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<ul style="list-style-type: none"> - There should be <i>biologically sound reimbursement</i> that reflects and promotes essential approaches, and inhibits inappropriate care. 	<ul style="list-style-type: none"> - Reimbursement has great potential to either support or inhibit desired approaches and systems.
<i>Effective Oversight of Care</i>	
<ul style="list-style-type: none"> - There should be a thoughtful, evidence-based, <i>biologically sound approach to using legislation and regulation</i> to address health care issues. 	<ul style="list-style-type: none"> - Legislation and regulation intended to address health care issues needs to be evidence-based, biologically sound, and have a clear focus on exactly what it is intending to address or fix. - The big picture (a cohesive, comprehensive plan) must be kept in mind when trying to address many small pieces of a big puzzle.
<ul style="list-style-type: none"> - There should be more emphasis on <i>assessing and trying to improve quality based on reasonable expectations</i> for results and performance. 	<ul style="list-style-type: none"> - Quality measurement must have meaningful criteria for review and measurement, and recognize the limits of measuring quality on improving performance.
<ul style="list-style-type: none"> - There should be efforts to <i>strengthen the capacity of regulatory agencies and survey staff</i> to perform competent and comprehensive reviews of care. 	<ul style="list-style-type: none"> - Oversight of performance (including surveying) require strong problem solving ability and effective detective work, including thorough, detailed, and balanced investigations and reviews using biologically sound principles and information.
<ul style="list-style-type: none"> - There should be a <i>shift in quality oversight towards a much more balanced emphasis on care process</i> as well as results. 	<ul style="list-style-type: none"> - Care process is not to be confused with “paper compliance.” - Scrutiny of adequate clinical problem solving and decision making is a key route to improving performance and results. - Shortchanging review of clinical care process leads to speculative conclusions about the validity of outcomes.
<ul style="list-style-type: none"> - There should be <i>comparable expectations for comparable care process</i> in diverse settings. 	<ul style="list-style-type: none"> - Many individuals—especially the chronically ill and elderly—have complex conditions and need the same thoughtful, competent care in every setting. - Although knowledge and skills of individuals may vary within and across care settings, biology and physiology do not.
<ul style="list-style-type: none"> - There should be additional emphasis on expecting clinical decision makers to provide a <i>clinically pertinent rationale</i> for their decisions and interventions. 	<ul style="list-style-type: none"> - Capable clinicians can and will provide such explanations, while less effective clinicians either cannot or will not do so. - Failure to seek or to understand a plausible rationale for clinical decisions is a major reason for ineffective, irrelevant, and problematic oversight of care.