



CENTER

FOR THE HEALTH PROFESSIONS

The Coming Transition in Health, Nursing and the Promise of its Leadership

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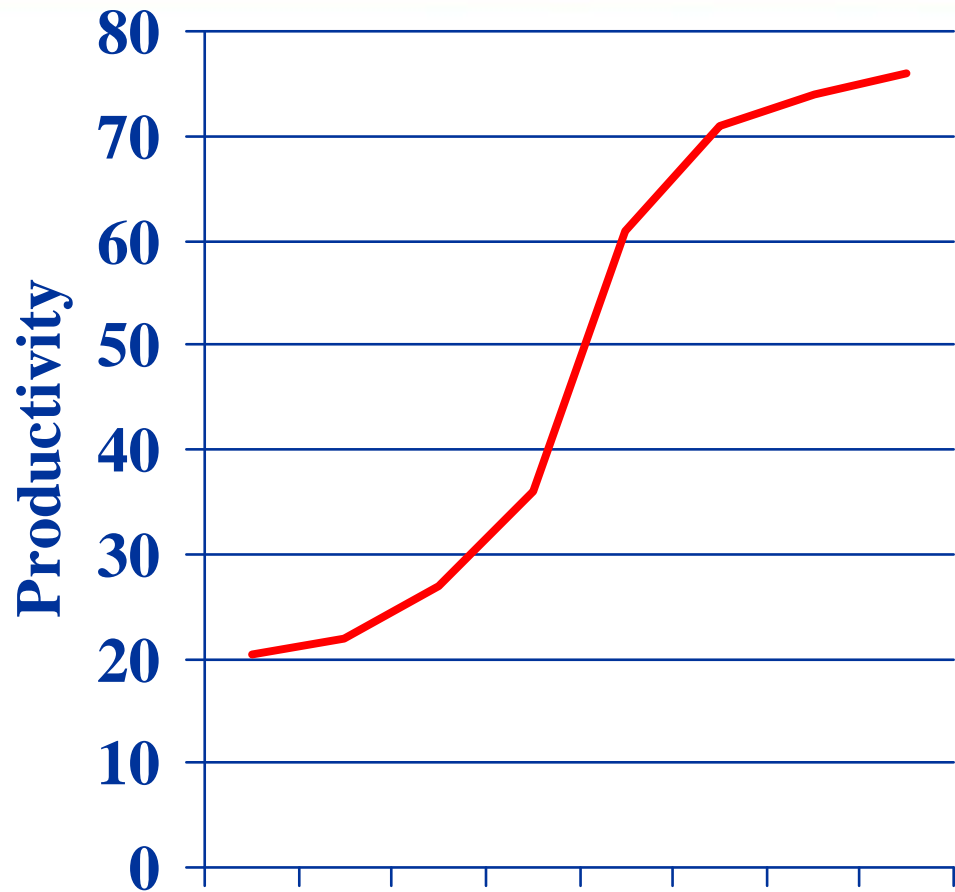
Nursing and Paradigms





Paradigms

- Effective tools
- Make things work
- Provide coherence
- Eventually, limit what we think we can do
- Fail



Inputs

What does it take to keep the paradigm going?



Add These Numbers

Add These Numbers

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Add These Numbers

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Add These Numbers

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10

The Paradigm and Benefits of the SQ

Nursing has provided:

- Worthy, fulfilling work
- Social meaning
- High social status
- Prestige
- Independence
- Good Incomes

And, at its very heart,

**Meaning,
Self-definition and Identity**

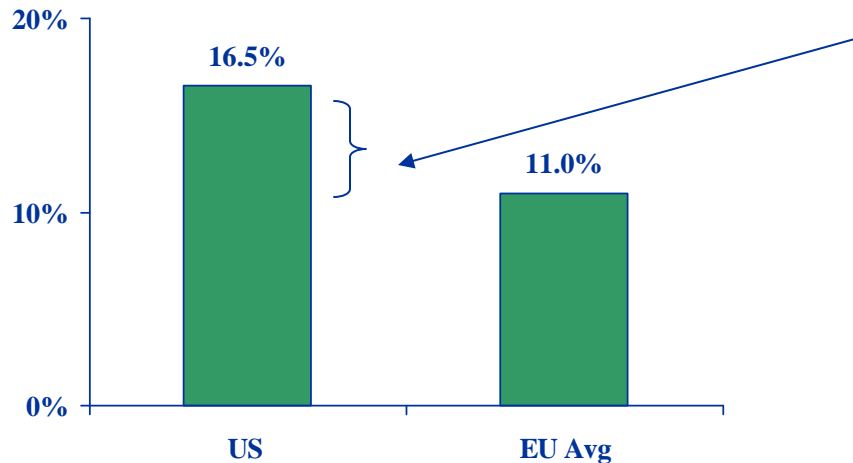


Why the Paradigm is not Sustainable

- 17.5%
- \$2.5T
- 16%
- 100,000/25,000/10,000
- 4th
- 2011

Current Drivers- Cost

2006 Percent GDP to Health Care



- US spends 1/3 more than Euro zone to deliver care of comparable quality.
- All Euro nations have universal access

Current US Health Expenditures = \$2.3 Trillion

X .33 savings if at Euro rate = \$690 Billion

Annual excess health care payment (\$690 Billion) =

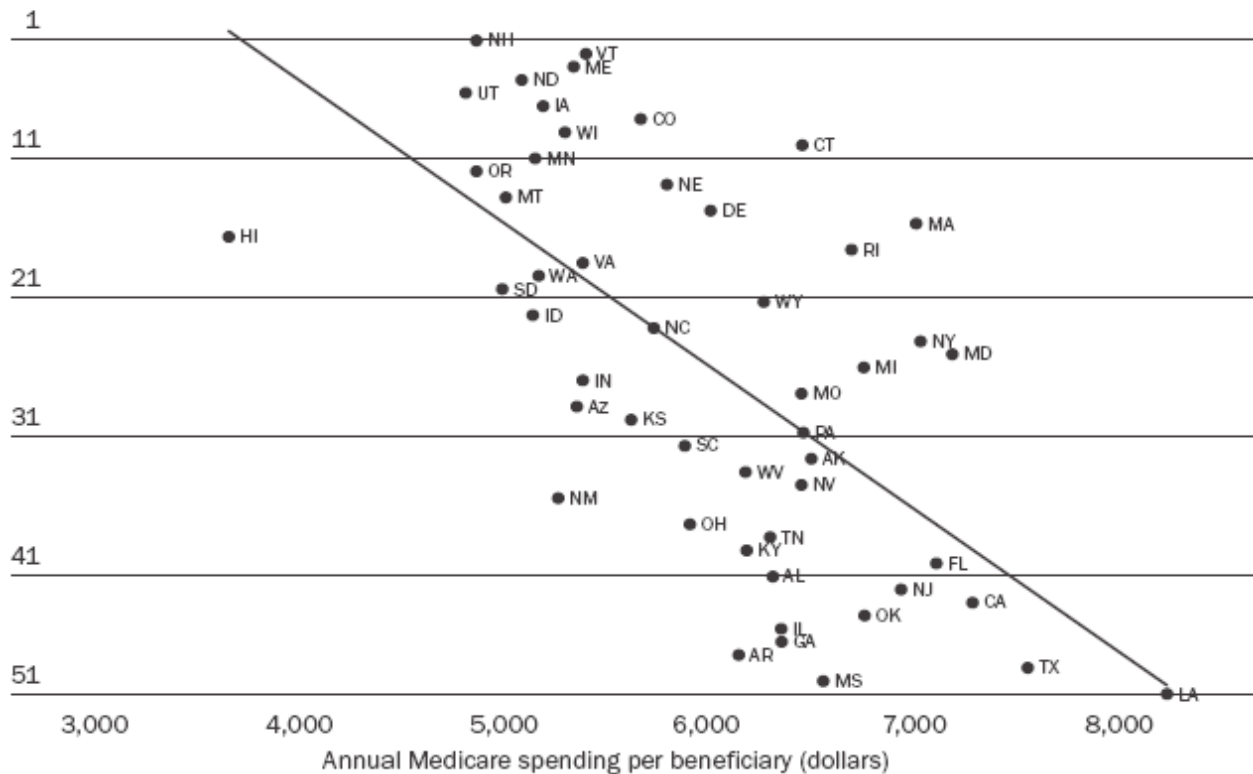
Current estimates (\$750 Billion) to clean up sub-prime mess

Variability of Cost and Quality

EXHIBIT 1

Relationship Between Quality And Medicare Spending, As Expressed By Overall Quality Ranking, 2000–2001

Overall quality ranking

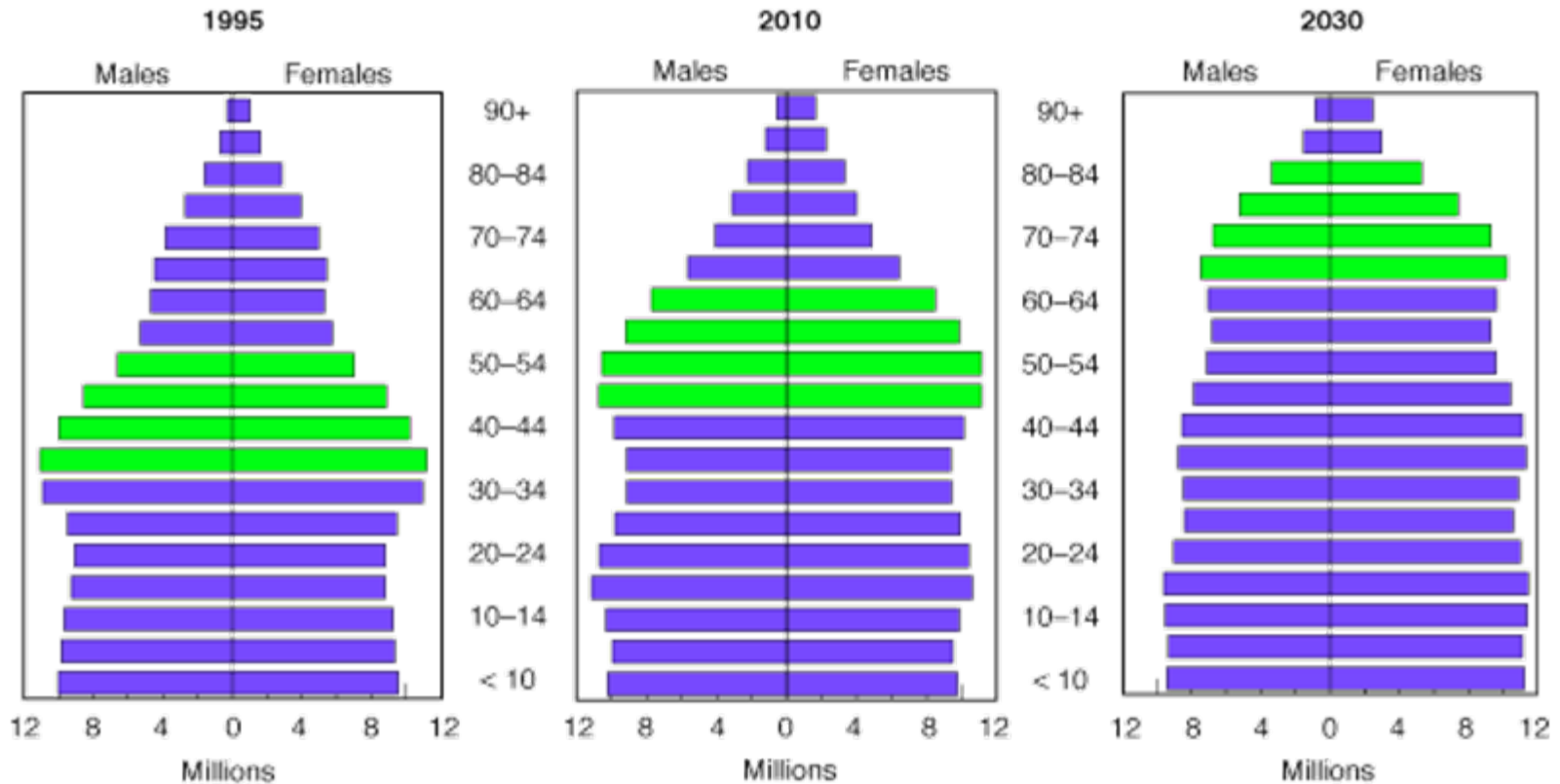


Source: Baicker and Chandra, Health Affairs, April, 2004

SOURCES: Medicare claims data; and S.F. Jencks et al., "Change in the Quality of Care Delivered to Medicare Beneficiaries, 1998–1999 to 2000–2001," *Journal of the American Medical Association* 289, no. 3 (2003): 305–312.

NOTE: For quality ranking, smaller values equal higher quality.

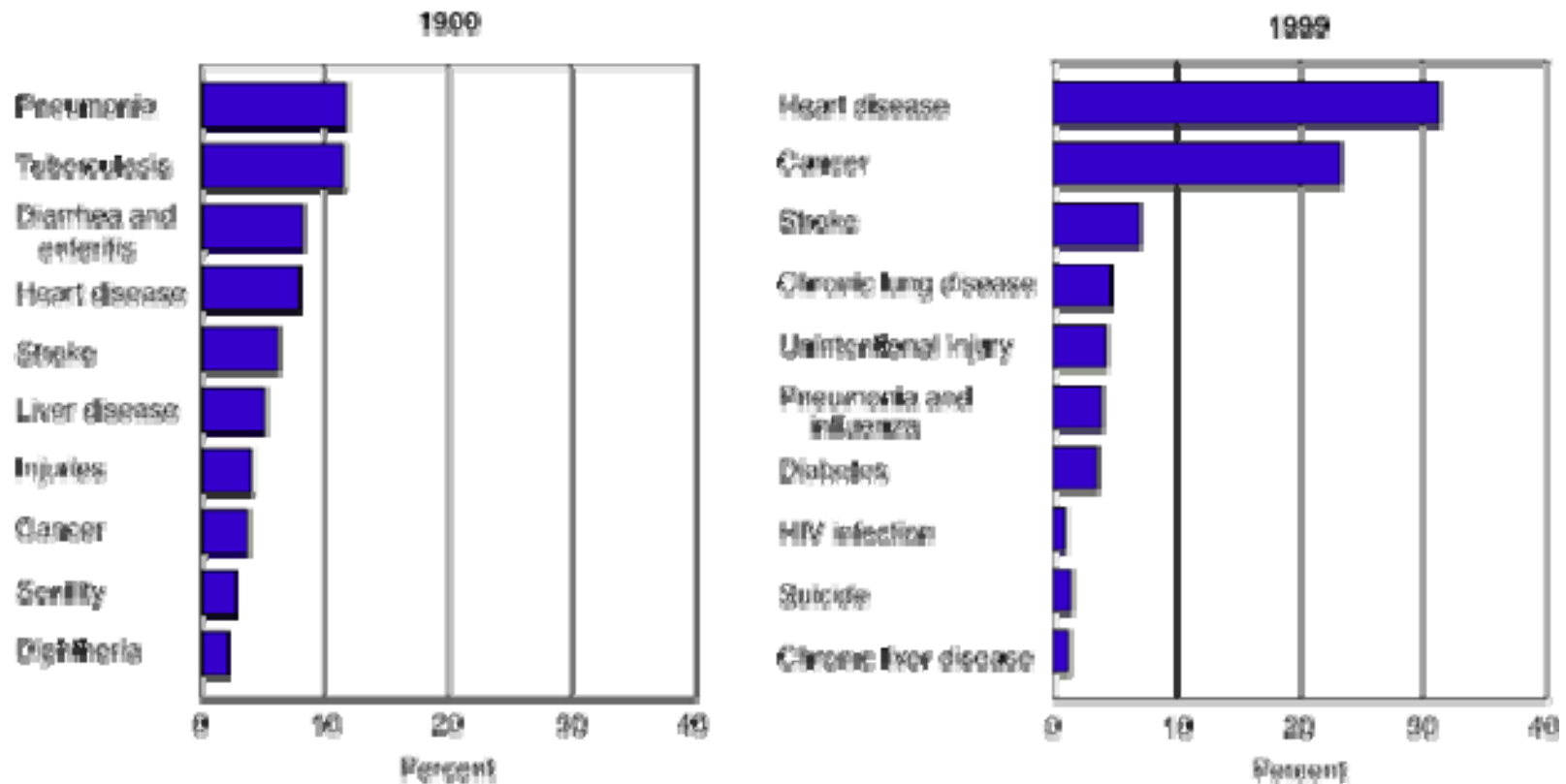
Aging



Source: U.S. Census Bureau

Epidemiology

Changes in Cause of Death, 1900–1999



Source: Centers for Disease Control and Prevention. Control of infectious diseases, 1900–1999. *Morbidity and Mortality Weekly Report* 1999; 48:621–629.

Connecting the Dots or Rose's Story

- Demographics
- Technology
- Epidemiology
- Workforce
- Values
- Costs
- Practice Model



How Did We Get Here?

Mid-1960s led to.....

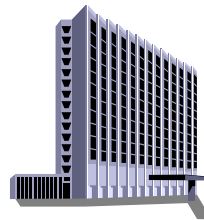
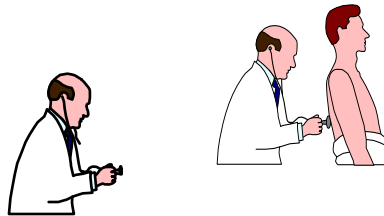
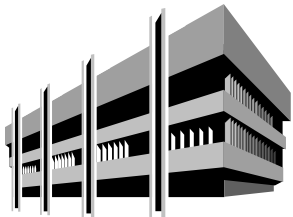


Moral Hazard #1
No Skin in Game



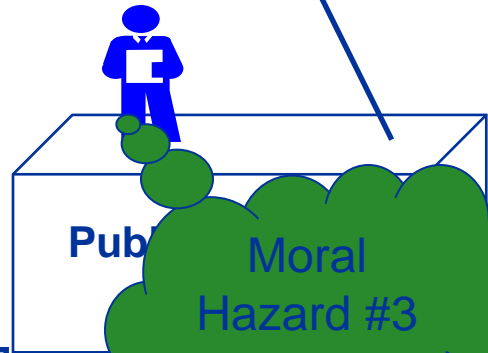
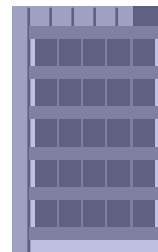
Unlimited Choice

Moral Hazard #4
Unaware we had a wheel
\$\$\$

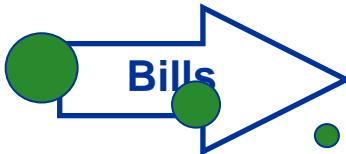


Incumbents Define Rules of the System

Moral Hazard #2
Do Well By Doing Good



Moral Hazard #3
Asleep at Wheel



HCR in One Slide



- All in
- Insurance regulation
- Integration – ACOs
- Primary care – prevention and mgm.
- Centers of excellence
- P 4 P
- Strategic investments

Now that we've caught the car

What will we do with it?



Transition

Tomorrow

Today

- Acute treatment
- Cost unaware
- Professional prerogative
- In-patient
- Individual professions
- Traditional practice
- Information as record
- Patient passivity



Strategic Success



- Chronic prevention and management
- Price competitive
- Consumer responsive
- Ambulatory - Home and Community
- Team Evidence based practice
- Information as tool
- Consumer engagement and accountability

Emergency





Do hospitals have the DNA
to respond to this challenge?

What is in your DNA ?



got value?



- care management
- population - systems context
- teams
- psycho-social-behavioral
- service orientation
- use of resources
- adaptive and innovative

Improvement: It is what you do



- RN at point of care
- Commitment to patient
- See continuum of care
- Need:
 - Skills
 - Recognition
 - Savvy

Efficiency: Its your practice



- If not you; then who?
- Right priority
- Pound wise
- Need:
 - Financial skills
 - Willingness to be critical

Safety: Your professional obligation



- Broad interest of patients
- Know what needs to be done
- Have the skills
- Need:
 - Get organized

Satisfaction: Because you are joyous



- Most trusted
- Best positioned
- Best at adding value to consumer
- Need:
 - Professional support
 - Professional recognition
 - Ability to make the case

The Myth of Sisyphus

We tend to think of Sisyphus as a tragic hero, condemned by the gods to shoulder his rock sweatily up the mountain, and again up the mountain.

The truth is that Sisyphus is in love with the rock. He cherishes every roughness and every ounce of it. He talks to it, sings to it. It has become the mysterious Other. He even dreams of it as he sleepwalks upward. Life is unimaginable without it, looming always above him like a huge gray moon.

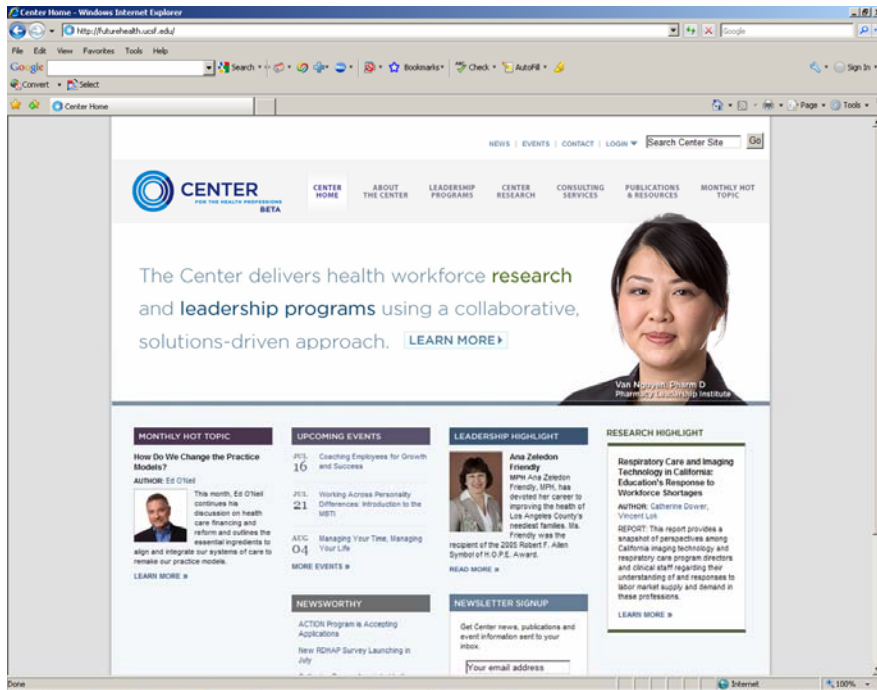
The Myth of Sisyphus

He doesn't realize that at any moment is permitted to step aside, let the rock hurtle to the bottom, and go home.

Tragedy is the inertial force of the mind.

Stephen Mitchell, Parables and Portraits

More Help At:



- Leadership
- Research
- Data
- Policy analysis
- Opinion

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