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**An electronic workflow document to insure staff participation and accountability in the transition to value based care**

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**Statement of the Problem:** Healthcare is mandating a fundamental change from Volume Based to Value-Based Care. This transition requires the evaluation of a vast number of evidence-based care measures that have been identified as defining Value in the primary care setting. The number and complexity of measures warrant a team-based approach for this change. This shift is essential for all providers to ensure evidenced-based, patient-centered care. It will present a challenge for those practices accustomed to the traditional provider is driven, models. A successful strategy will require clear staff roles and defined value measures. An electronic process was created to serve as a checklist for evaluating the status of required care measures and assigned to staff commensurate with licensure. Clear workflow processes were established. The electronic document served as the data collection tool for the primary measure of staff accountability

**Methodology:** A comparative ratio was used to define staff accountability in the review of measures assigned and evaluated front office, nursing, and providers. It reviewed the numbers of measures evaluated as compared to those that required evaluation. Pre and post-study of Value-Based Care measures were obtained at a six-month interval.

**Findings:** Results revealed front office staff to be 92% accountable, nursing 91% and providers 76% accountable. Secondary measures demonstrated 30 of 45 measures were improved. The benefit of staff accountability and clearly defined staff roles was illuminated in attaining quality patient care. Implications for practice: The evolution of medicine to Value-Based Care models will require the ongoing development of strategies to meet Triple Aim objectives. Measures of staff accountability, clearly defined roles, and a checklist format can assist in the attainment of high quality, patient-centered care.

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