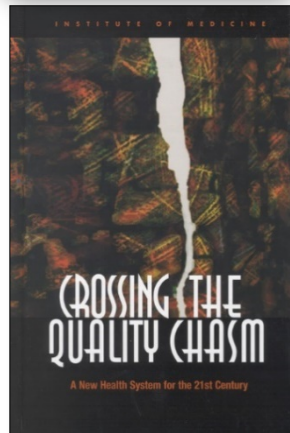
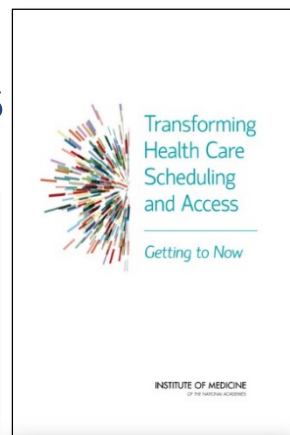
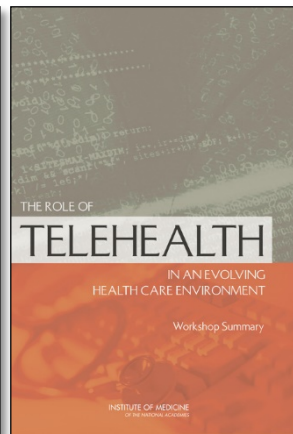
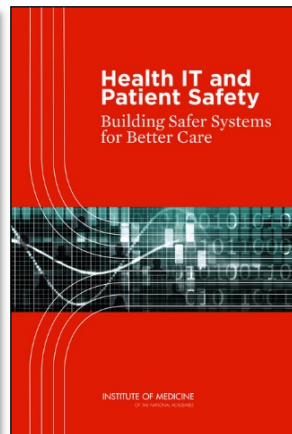
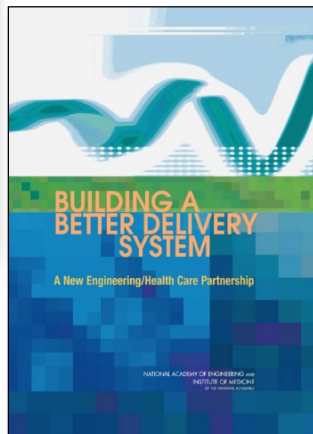
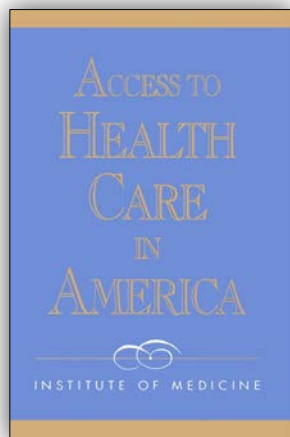


Access to High-Quality Health Care: Overview of Reports from the National Academies

Sharyl Nass, Ph.D.
Director, Board on Health Care Services
Health and Medicine Division
snass@nas.edu

Examples of National Academies Reports

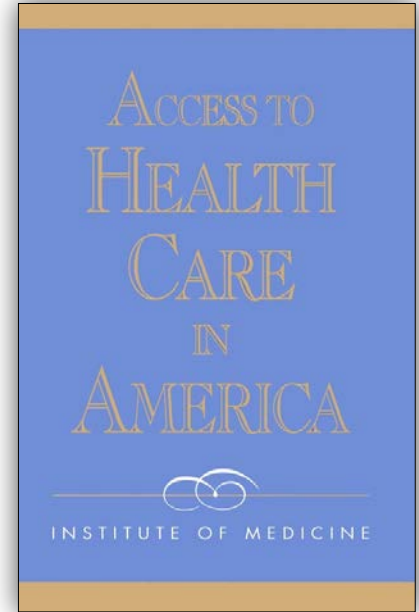


Available online from the
National Academies Press
www.nap.edu

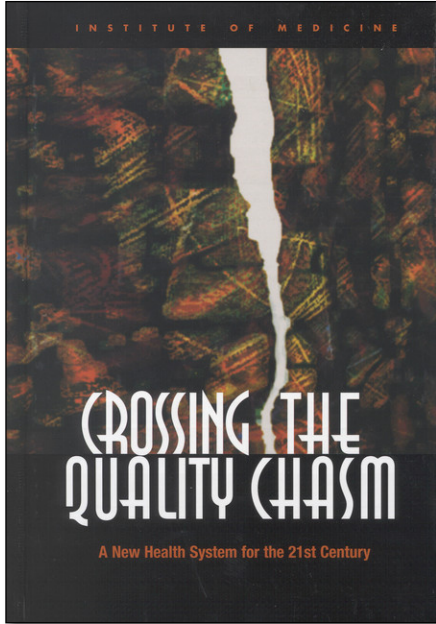
Access to Health Care in America (1993)

Recommended:

- monitoring access to personal health care services
- with central collection, analysis, improvement, and dissemination of information on changes in access



Crossing the Quality Chasm: A New Health System for the 21st Century (2001)



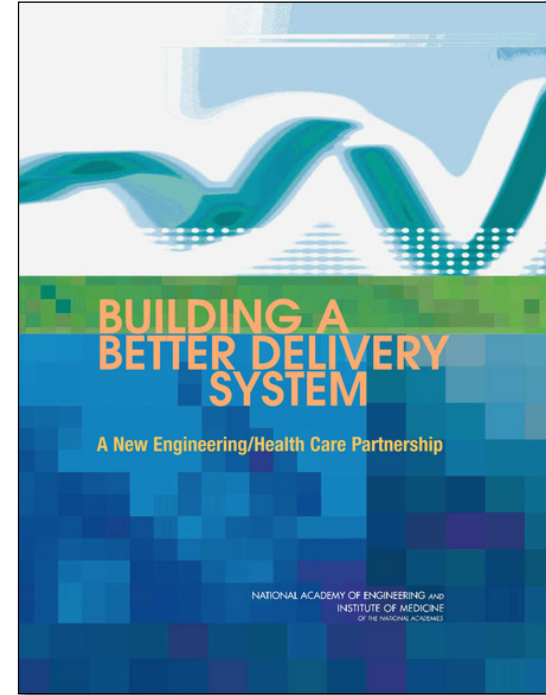
Six attributes of high-quality care:

- Safe
- Effective
- Patient-centered
- Timely
- Efficient
- Equitable

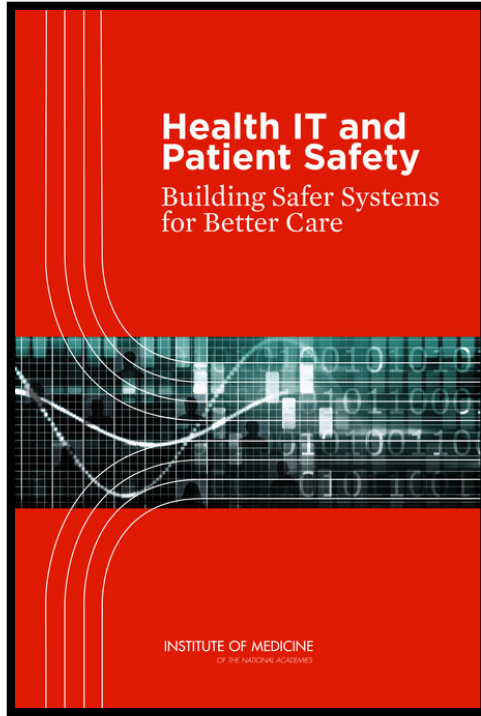
Building a Better Delivery System: A New Engineering/Health Care Partnership (2005)

Recommended research and development on:

- information/communications technology system interfaces
- voice-recognition systems
- software to improve interoperability and connectivity
- systems that spread costs among multiple users
- software dependability in systems critical to health care delivery
- databases that meet the needs of both clinicians and patients
- the impact on the quality and productivity of health care



Health IT and Patient Safety: Building Safer Systems for Better Care (2012)



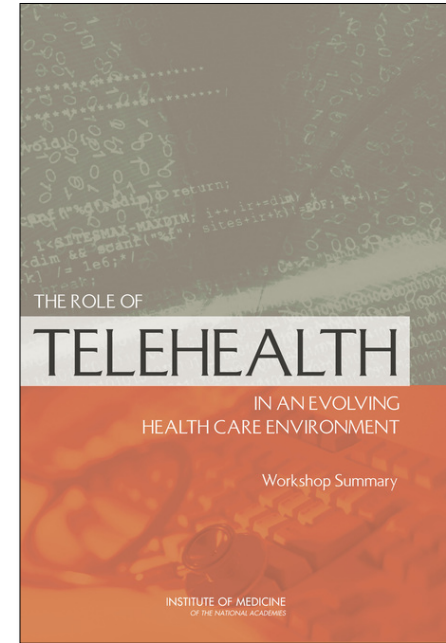
Recommended support for cross-disciplinary research on use of health IT as part of a learning health care system, including:

- User-centered design and human factors
- Safe implementation and use of health IT by all users
- Sociotechnical systems associated with health IT
- Impact of policies on health IT use in clinical practice

The Role of Telehealth in an Evolving Health Care Environment: Workshop Summary (2012)

Discussion Topics:

- Evidence base for telehealth
- Technologies
(mobile telehealth, electronic intensive care units, remote monitoring, social networking, wearable devices)
- Evolving care delivery in rural and urban settings



Vital Signs: Core Metrics for Health and Health Care Progress (2015)



Identified ***care access*** as a core measure for care quality.

Priority measures related to care access include:

- unmet care need
- usual source of care
- delay of needed care

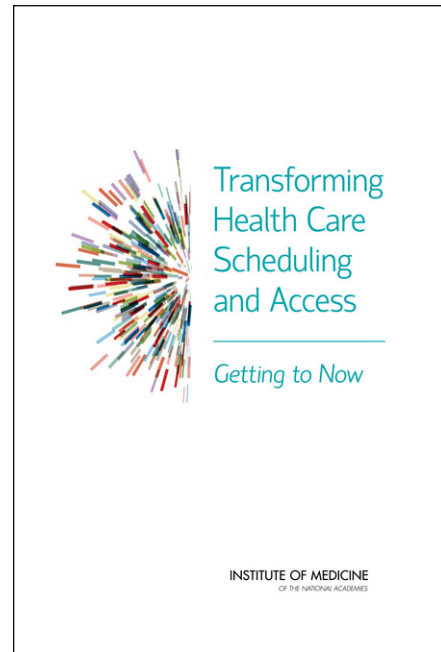
Transforming Health Care Scheduling and Access: Getting to Now (2015)

Recommended National Leadership for:

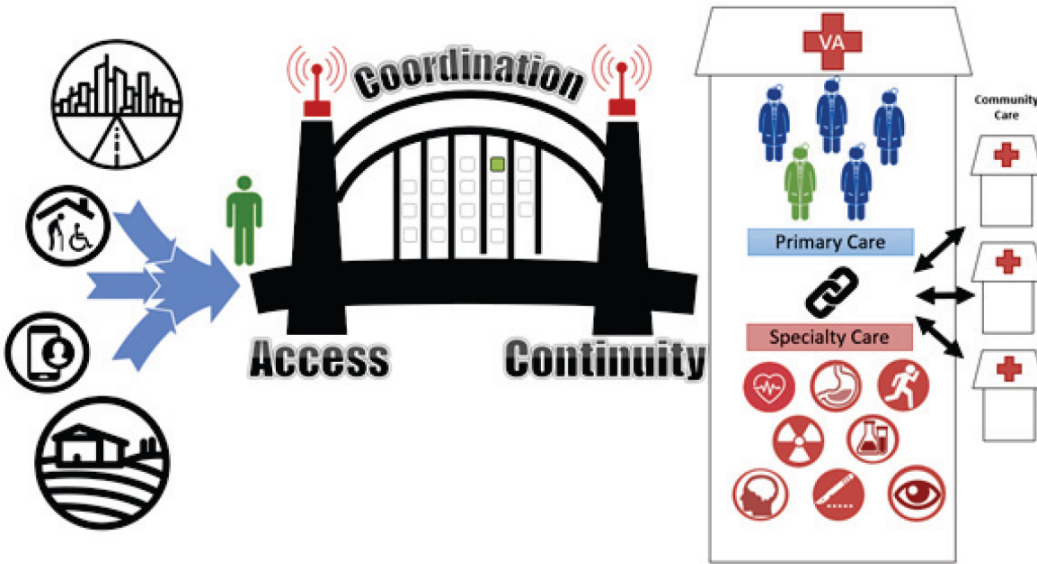
- Implementation of basic access principles
- Federal implementation initiatives
- Systems strategies broadly promoted in health care
- Standards development
- Professional societies leading application of systems approaches
- Public and private payers providing financial incentives and other tools

Recommended Health Care Facility Leadership to develop:

- Front-line scheduling practices anchored in basic access principles
- Governance commitment to leadership on basic access principles
- Patient and family participation in designing and leading change
- Continuous assessment and adjustment at every care site



Key Operational Characteristics and Functionalities of a State-of-the-Art Patient Scheduling System: Proceedings of a Workshop—in Brief (2019)

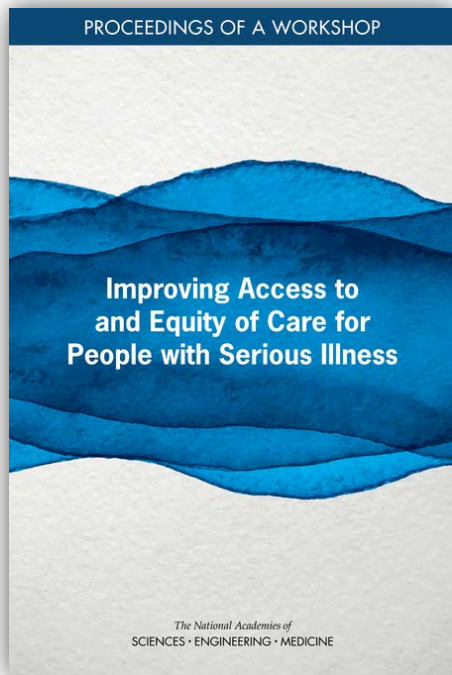


Discussed experiences with technologies from the perspective of the health care system, patient, clinician, and scheduler.

Highlighted the importance of the design, implementation, and adaptability of scheduling systems.

Sponsored by VHA

Improving Access to and Equity of Care for People with Serious Illness: Proceedings of a Workshop (2019)

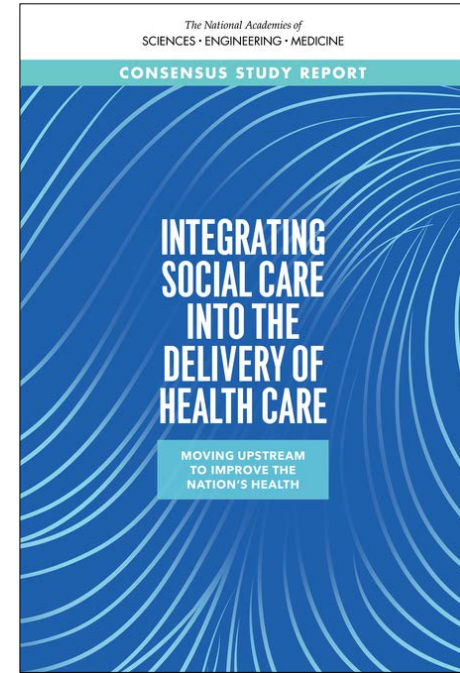


Discussion Topics:
Barriers, policy initiatives, and opportunities for improving access to and equity of care for people living with a serious illness.

Integrating Social Care into the Delivery of Health Care: Moving Upstream to Improve the Nation's Health (2019)

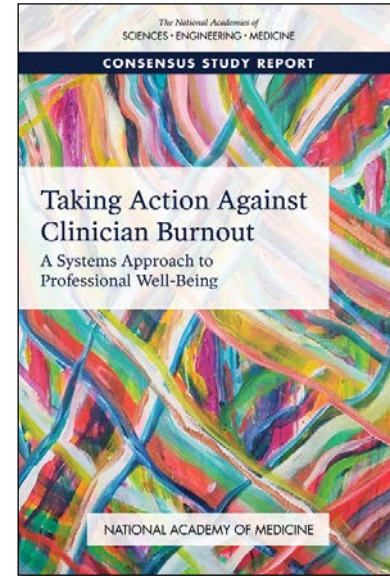
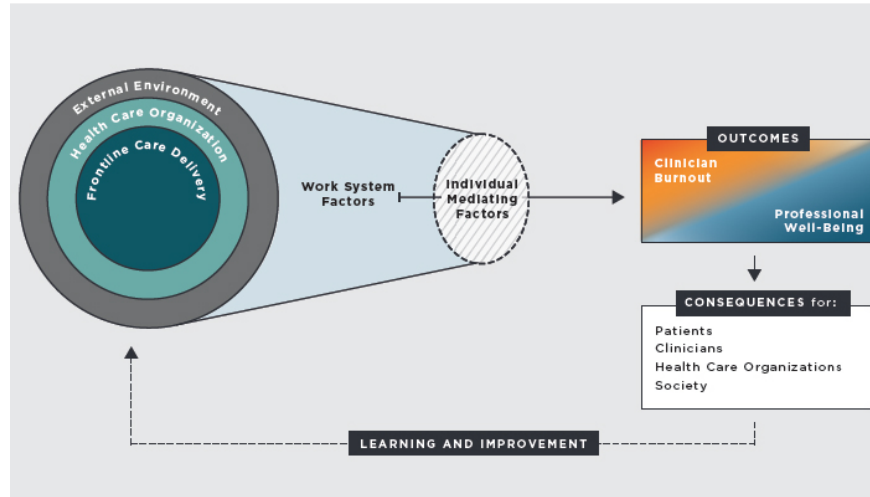
Five goals:

1. Design health care delivery to integrate social care, via 5 activities — awareness, adjustment, assistance, alignment, and advocacy.
2. Build a workforce to integrate social care into health care delivery.
3. Develop a digital infrastructure that is interoperable between health care and social care organizations.
4. Finance the integration of health care and social care.
5. Expand research and evaluation on the effectiveness and implementation of social care practices in health care settings.



Taking Action Against Clinician Burnout: A Systems Approach to Professional Well-Being (2019)

A SYSTEMS MODEL OF CLINICIAN BURNOUT AND PROFESSIONAL WELL-BEING



Proposed a **framework** to identify and address the work system factors that influence burnout and professional well-being.

Ongoing Consensus Study on Implementing High-Quality Primary Care

To develop an **implementation plan** to strengthen primary care services, especially for underserved populations, considering factors such as:

- enablers of innovation to achieve high-quality, high-value primary care;
- primary care needs and access of different patient populations;
- the increasing demands and stresses on the primary care system.

[Nationalacademies.org/primarycare](https://nationalacademies.org/primarycare)

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The National Academies of
SCIENCES • ENGINEERING • MEDICINE

Key Themes across Decades of IOM/NASEM Reports

- Focus on the system first, not individual clinicians or clinics
 - make it easier for clinicians to do the right thing
- ‘Access’ should be patient-centered and personalized
 - not ‘one-size-fits-all’
- Care for the whole patient
 - including addressing the social determinants of health