

# Case study

## Adopting a VBHC approach in providing radiation therapy to adolescent and young adults

While the health system reorients to incentivise and support person-centred and sustainable care that focuses on outcomes over activity, and value over volume, health services are already demonstrating such shifts.

This case study was developed in collaboration with the Allied Health Professions' Office of Queensland (AHPOQ) as part of the Queensland Health Allied Health Framework for Value-Based Health Care (visually represented in figure 1). It has

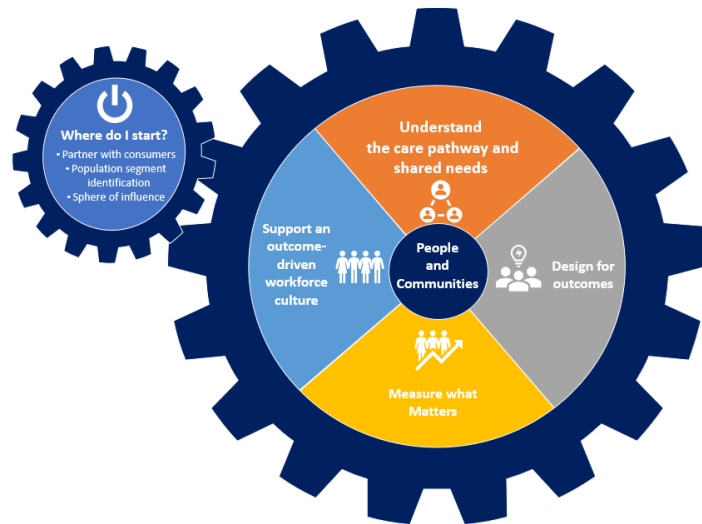


Figure 1

been presented to demonstrate how a shift towards Value-Based Health Care (VBHC) was achieved against the domains of the Framework, and particularly highlights the important role of clinician leadership.

Framework domain	Adopting a VBHC approach
<b>Where do I start?</b> <b>Identifying the population and sphere of influence</b>	<p>The construction of a new children's hospital resulted in the cessation of paediatric radiation therapy at a nearby Brisbane-based hospital. Previously, a specialised model of care was provided at this service to all children and adolescents under 18 years. A logical decision was made that any models or formal support structures offered to paediatrics were no longer needed and that an adult model of care was to be provided.</p> <p>However, despite no longer receiving paediatric patients, the service still delivered care to adolescents and young adults (AYA) aged 15-25 years.</p> <p>A small group of health professionals, who specialised in paediatric radiation therapy, soon identified that the adult model of care was not delivering the outcomes that mattered to the AYA patient cohort and their families.</p>
<b>Understand the care pathway and shared needs</b>	<p>These health professionals identified that the adult model did not allow sufficient time for radiation therapists to respond to the unique psychosocial, emotional, and physical needs of young people and their families.</p>

<p><b>Design for outcomes</b></p>	<p>The radiation therapists identified that through the delivery of an AYA model of care, including elements of the paediatric model, they could improve the outcomes that mattered for the person and the service. One example of this altered service delivery included allowing an additional 20 minutes of clinical time during pre-treatment for education with AYA accessing radiation therapy. This extra time led to increased compliance and reduced complications, improving the care experiences of young people and their families.</p>
<p><b>Measure what matters</b></p>	<p>The outcomes that mattered were observed as the experience of the young person and their family, in addition to adherence to treatment regimes. The additional 20 minutes allowed health professionals to deliver healthcare education that was developmentally appropriate for the young person, building rapport and answering questions, reducing the emotional distress experienced by AYA and their families. It increased the young persons and families' knowledge, which translated to better treatment adherence, improving an AYA's disease treatment experience.</p> <p>Financial savings were also highlighted as a potential benefit, as decreasing anxiety meant that young people could comply with the requirements of radiation therapy without the need for medical sedation (a service provider cost).</p>
<p><b>Support an outcome driven workforce culture</b></p>	<p>A person-centred outcome-driven workforce culture involves pivoting the perspective of health services from the organisation of care around service providers, towards care structured around the identified shared needs of people and communities. This not only has demonstrated benefits for people and communities but helps to reduce workforce disengagement and burnout, enabling health professionals to reconnect to their sense of purpose and intrinsic motivations for providing care.</p> <p>Despite some initial hesitation, the act of embedding the AYA model in standard practice demonstrates that this service listened and trusted the feedback of its workforce, a critical element in the creation of an outcome drive workforce culture.</p>

<p><b>Challenges and enablers</b></p>	<p>Within Queensland, adult health services consider people aged 15 years and older as adults. This standard of care translates to adolescents being offered standardised adult treatment models, which have been proven to not deliver care that considers a young person's developmental capacity.</p> <p>To ensure optimal outcomes for people and communities within radiation therapy, spending more time with patients who require care has been shown to lead to positive health and wellbeing outcomes. The management team supports this approach on a case-by-case patient basis but embedding this as a standard for the AYA population could be viewed as an unnecessary, non-cost-effective use of the clinician's time.</p> <p>However, strong support from management and clinicians championing quality healthcare outcomes for young people led to a coalition of support within the radiation therapy department backing and adopting this approach more consistently.</p> <p>The achievement of executive buy-in was a critical enabler in the delivery of the AYA model of care, which was achieved through aligning the goals of the approach with the desires of executives to deliver person-centred value-based healthcare. Securing executive support for models of care that incorporate "soft" approaches can be difficult, as they can come at a cost due to funding structures that support activity over the quality that is of value to the person.</p> <p>Ongoing management and executive support allows these model to be scaled and become embedded into care for AYAs as a standard.</p>
<p><b>Lessons learned</b></p>	<p>The importance of stakeholder engagement and feedback. Often it is not just about adopting a process; you need to consider all the moving parts that accompany it, including billing and administrative tasks that will benefit from adopting a new standard of care delivery.</p>