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The Value-based perspective

$$\text{Value} = \frac{\text{Health outcomes that matter to patients}}{\text{Cost of delivering these outcomes}}$$



$$\text{Value} = \frac{\text{Set of outcomes that matter to patients for the condition}}{\text{Total costs of delivering them over the full care cycle}}$$

- Value cannot be understood at the level of hospital, specialty or intervention
- Value is created in caring for a patient's medical condition overall a **full cycle of care**
- In primary and preventive care, value is created in serving segments of patients with similar primary and preventive needs
- The most powerful single lever for reducing cost and improving value is improving outcomes

Value-based perspective: implications

- Outcome research
- Patient-centredness
- Process perspective (cycle of care, value-chain...)
- Collaboration (vertical integration, mergers, etc.) and networks (alliances, partnerships, etc.)
- Cost-effectiveness interventions
- Multidisciplinary approach

Which Competencies

- What we know
 - We need multiple competencies (e.g. dictionaries...)
 - Competencies are both “technical” and “behavioural”
 - The “right” mix changes depending on the roles/positions
- Future challenges
 - Current dictionaries are old
 - New scenarios, new strategies, new org models, novel competencies (for either new or existing positions)
 - Digital transformation in health: big data, technostress etc.
 - Patient-centredness: operation management, resilience, etc.
 - ???

Competencies as «knowledge flows»

- What we know
 - Competencies are typically seen as a “stock” of knowledge/skills (static perspective)
- Future challenges
 - Competencies are built over time (e.g. leadership skills may take up to years to be fully developed!)
 - Is there any sequence for the accumulation of competencies which is more effective? (e.g. first clinical then managerial, first teamwork then leadership...)
 - Which “places” are of utmost importance for the accumulation of key competencies? (e.g. Mascia & Piconi, 2013 HCMR)
 - Careers and training programs as «trajectories»: “when” and “where” individuals have to gather certain experiences during their working life

Competencies as a “context-based” and «multilevel» construct

- What we know
 - How formal training programs contribute to develop new knowledge and skills at the individual level
- Future challenges
 - Competencies are related to how individuals socialize in their organizational environment:
 - Supervisor-subordinate relationship (mentorship programs, etc.)
 - Knowledge-sharing with colleagues in teams or organizational units (trust, climate of cooperation, psychological safety etc.)
 - Does the organization encourage the development of new competencies (onboarding initiatives, etc.)?

Development of competencies in health care

