RETHINKING HEALTH

Most health systems in the U.S. deliver disappointing results, with worsening trends expected in the future. Faced with this predicament, a common response is to repeat or intensify prior actions. The instinct is to work harder, but not necessarily smarter, more strategically, or differently. ReActing in this way may be sufficient for certain short-term difficulties. But the most significant challenges that confront health systems defy simple solutions and rarely yield to more of the same approach. Indeed, those may make matters worse.

Serious innovators have begun to challenge the thinking that leads to more of the same action and outcomes. They are ReThinking the situation and asking the kind of questions that can spark breakthroughs.

- What are we really trying to accomplish?
- Why do we care?
- Who is the “we” and who ought to be involved?
- How can diverse, often competing actors set priorities and weigh trade-offs?
- Where is the system headed and what are our roles as change agents within it?

ReThinking is a poignant and potentially powerful state. It combines sincere inquiry with insights from experience and a firm commitment to act in pursuit of shared aspirations. But it does not come easily. Rethinking requires discipline, data, drive, and a commitment to engagement with other stakeholders. It rarely occurs when individuals work alone. Rather, it flourishes when practiced with passionate, principled partners -- both old and new. That is why innovators from across the health landscape are working with ReThink Health colleagues to refresh and realign their efforts.

Goals for ReThink Health

ReThinkers are committed to reviving health systems across the U.S. Together with a growing group of allies, our team of more than 20 experienced innovators are learning what it takes to move regional health systems in new, sustainable directions. We are also assembling a suite of catalytic methods that bring greater structure, evidence, creativity, and power to this work. Our goals are to:

- Catalyze effective action in regional health systems
- Refine practical tools based on proven processes for large-scale system change
- Learn about the conditions for effective action, track changes over time, and share insights
- Strengthen individual, group, and institutional capacities in others – and in ourselves
### Rethink Health Logic Framework

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### Context
- **Drivers**
- **Motivated leaders testing new infrastructures and care**
- **New measures for regional health and care**
- **Emerging place-based system view**
- **Alignment with Triple Aim**

### Inputs
- **Rethinking**
- **Alignment with Triple Aim**
- **Payment models**
- **Effective innovation**
- **Enabling conditions**
- **New governance structures**

### Output
- **Local innovations**
- **New payment models**
- **New system designs**
- **New narratives spread through stories, evidence, and experiences**

### Outcomes
- **Short Term**
  - **Enhanced performance**
  - **Strengthen capacity**
  - **Reinforce rethinking and outcomes measures**
  - **Lessons in and across regions**
- **Medium Term**
  - **Progress and adjust strategy**
  - **Stewardship teams use process and outcomes measures to chart progress and adjust strategy**
- **Long Term**
  - **Scale & sustainability**
  - **New narratives spread through stories, evidence, and experiences**
  - **New governance structures begin to form around shared goals and sustainability**
  - **A vibrant community of practice forms among ReThinkers**

### Impact
- **Growing Movement for Reform**
- **New Policy Environment**
- **New System Designs**
- **Social and Economic Impact**
- **Revised health logic framework**

### Opportunities
- **New payment and regulatory policies**
- **New health information infrastructures**
- **New measures for regional health and care**
- **Motivated leaders testing new approaches**

### Urgency
- **Growing consensus to advance the Triple Aim**
- **Disagreement about strategies and competing interests**
- **Complex challenges require multi-stakeholder action**
- **Need to balance short-term needs with long-term goals**
- **Deficits, demographic trends, disease burden, and market conditions create pressure to act**
- **Leaders in new roles challenged to be effective change agents**

### Allies
- **Innovators willing to rethink and reengage in diverse contexts**
- **Entrepreneurial stance open to partners and allies**
- **Far-sighted investments from foundations and others**
- **Guidance from veteran change-makers within and beyond the health sector**
- **Committed team members with wide-ranging experience**

### Approach
- **Drive results by continually questioning and reshaping the thinking that guides action**
- **Regional system-oriented approach to Triple Aim**
- **Learn with allies and build capacities in each other**
- **Tailor tools for rethinking (narrative, dynamic modeling, teamwork, campaign coaching, gaming)**
- **Practice stewardship skills (leadership, relationships, system insight, collective action, governance)**
- **Employ meaningful measures**
- **Align financial incentives and payment models**

### Diffusion
- **Capture learning and share evidence**
- **Communicate via many channels (meetings, stories, evaluation results, research)**
- **Open access to knowledge, tools, and experience**

### Collaboration
- **Stewardship teams pursue compelling purposes, with right people, and clear norms**
- **Data sharing on system performance (health status, risks, utilization, costs, etc.)**
- **Silos and interests situated in a broader system strategy**
- **Diverse allies work together to build trust, exchange ideas, and pool resources**

### Planning
- **Strategic dialogues probe system performance and alternate paths**
- **Leaders see and understand their common health system**
- **Open processes identify priorities, anticipate pitfalls, and overcome resistance**

### Action
- **Engaged stakeholders make public commitments and covenants**
- **Power builds through collective action**
- **Pilot test new initiatives and approaches**
- **New narratives spread through stories, evidence, and experiences**

### Sustainability
- **New governance structures begin to form around shared goals and sustainability**
- **A vibrant community of practice forms among ReThinkers**

### Regional System Impacts
- **New payment models, with shared savings, drive changes in care delivery and prevention**
- **Quality improvement processes continuously assure high-value care**
- **Upstream investments safeguard health and reduce demand for care**
- **Primary care access expands and chronic illness management improves**
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### New Policy Environment
- **Innovative payment and financing schemes are institutionalized**
- **Policy and practice changes spread across contexts**

### New System Designs
- **Systems are redesigned and coordinated to meet health needs**
- **Health agencies become high-performing, learning organizations**
- **Care moves out of institutions into communities**
- **Hospitals reduce in size, and a larger community-based health workforce emerges**
- **Upstream investments, health promotion, and self-care play key roles in assuring healthier, more equitable conditions**

### Social and Economic Impact
- **Population health, equity, and productivity all improve, contributing to lower costs over time**
- **Reduced health costs for employers and individuals spurs local economic growth and prosperity**