

Decision making in health care



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Although these numbers are slightly under the national average, they are daunting when broken down by total population of the state that figure comes out to about 4. 488. 188 people receiving Medicaid health care benefits (Kaiser State Health Facts, 2013). Harris county clinic provides care to a large Medicaid population, and the department budget for clinic has been recently cut by 15%. This paper will describe, and examine tools to best address accountability, knowledge transfer, and a questioning organization by utilizing the six steps developed in Rundell, Martelli, Arroyo, McCurdy, Neuwirth, 2007 informed decision toolbox.

The great crash or economic recession of 2008 will continue to affect budgets, and policy-making for years to come in every aspect of health care. It is not a surprise to management when the Harris county clinic becomes affected by budgetary cuts. The manager must decide what clinical service should be eliminated or introduced to best address health care needs of the dense Medicaid population. The idea of patient care, coordinated through primary care physicians has been proposed. Under this model, a primary care doctor is the point person for all of a patient's medical needs, organizing care with specialists, pharmacists, and physical therapists and sharing electronic medical records with all" (Arnst, 2009). This proposed idea could avoid costly overlap of diagnostic testing and other mismanaged treatment, possibly reducing excessive spending. According to Rundall et al; there are six tools a manager can utilize to rationale, and best address the organizations needs. These are described as tools to develop informed and evidence-based decision-making.

The steps include; “(1) framing the management question, (2) finding sources of information, (3) assessing the accuracy of the information, (4) assessing the applicability of the information, (5) assessing the actionability of the evidence, and (6) determining if the information is adequate” (Rundall et al. , 2007. p. 325). Under step one of framing questions; management must be able to make the best decisions, and framing a question correctly will state a precise template for the manager to pinpoint all relevant information.

Properly framed questions include specific setting, the outcome of interest, state of intervention, a time frame, and who will be affected. For this matter, the proposed change will be a 15% budget cut in a clinic that serves Medicaid patients. The outcome of interest is elimination or addition of services to provide the best patient care within the budget constraints. The setting of the change is Harris County, Texas, clinic serving Medicaid patients, and the time frame for the managerial changes, and for the outcomes is the beginning of fiscal year 2014. What are the relevant populations?

The clinic serves Medicaid patients, and Texas has three categories of Medicaid recipients (Texas Health and Human Services Commission, 2013); families and children -based on income level, depending on age or pregnancy, cash assistance recipients-based on receipt of Temporary Assistance for Needy Families (TANF) or Supplemental Security Income (SSI), and aged and disabled-based on income level, age, and physical or mental disability. 2013 (May), Harris County Medicaid enrollment is 568. 122 of county population (Texas Health and Human Services Commission, 2013).

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The question formulated from the information gathered is “ How will 15% budget reduction affect services provided to Medicaid recipients in Harris County during fiscal year 2014? ” Step two, finding sources helps the manager confirm sources of information or dismiss so called “ sources”. This step is useful in either performing the research done by him or herself or verifying staff has correctly researched the information. The information could come from a variety of sources that primarily involves use of internet. Research skills are useful when attempting to formulate an evidence-based answer to a question.

The search for information in relation to the study is based on the Texas Health and Human Services 2013-2017 strategic plan plus other various online sources. Step three, assessing the accuracy speaks clearly in the title. Not all research is equal; some is biased, misleading, or haphazard. The manager must determine the quality of the evidence presented, this should be conflict free, and credible. For this study, Texas Health and Human Services provides information deemed valid, and reliable. The strategic plan is comprehensive in scope.

Parts of the plan describe potential reduction of services to Medicaid recipients along with potential revisions in services available. In step four, applicability of information, the material must meet within the criteria of the question. “ Increasingly, academic journals are requesting that authors include a section on the practical implications of their results; this section is particularly useful to decision makers” (Rundall et al. , 2007). This practical implication helps to apply the scenario to actual situations, and this is an important element.

The strategic plan timeframe is in line with the county clinic timeframe of fiscal year 2014. In regard to step five, actionability of evidence, the step examines the information dealing with revenue, cost implications, perception of the user, specific, and relevant information. The strategic plan is written by the Texas Health and Human Commission, it directly affects Harris county clinic providing Medicaid services. The plan describes Medicaid cost containment initiatives and therefore helpful in decision-making.

Careful review of the information can also prevent bad decisions in the future. Last in step six, is determining if the information is adequate. The manager must understand each decision is a trade off. The decisions must be reviewed, options weighed, outcomes of possible scenarios also need to be considered. With all the data available, a decision can be formulated to answer the question stated in step one “ How will 15% budget reduction affect services provided to Medicaid recipients in Harris County during fiscal year 2014? Accountability, Knowledge Transfer, and Questioning “ Decision makers would like tools to help them gather, and use evidence, but they also believe that no single tool can address all of his or her needs. The toolbox was created to help bridge the gap between research evidence, and organizational decision-making” (U. S. Department of Health and Human Services, 2008). Based upon the proposed idea of coordinating all patient care through his or her primary care; the best tool to choose is the last one.

Under the sixth tool of adequate information, the manager determines if all the gathered information, and research is adequate, weighing all options given, and playing out any scenarios needing to be considered. The manager is responding to the growing concerns, and responding by demanding

accountability from all staff within the organization. Knowledge transfer via electronic medical records is important, as well as any other form of communication to prevent excessive spending on duplicate care.

This communication is a continual process by staff at Harris county clinic to the patient's primary physicians. The manager is also proactively engaging the staff by building a questioning culture, forcing staff to reach out, and dig for more information prior to moving forward with diagnostics, and treatment. Managing in healthcare is a challenge. Adding in such elements to the equation, such as budget cuts allows a manager ways to think outside the box to come up with new ideas or solutions ot best address the situation or challenges.

The best decisions are made when information, and research is true, and complete. Application of the toolbox to the case study provided a research question that resulted in an evidence-based answer. “ Health management, and policy decisions can be informed by research evidence, offering decision makers the ability to better estimate the effects of their operational, and strategic decisions” (Rundall et al. , 2007). Once a plan of action has is in place; the execution of the plan should be ideal. Reference Arnst, C. (2009, November).

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