

# Health Care Culture in the U.S.

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# Health Care Culture in the U.S.

- Ø Centers around individual experts
- Ø Is one of clash among competing forces
- Ø Faces disruptive change



# Origins of Health Professionals' Culture

- Ø **Education & training**
  - § Study scientific basis of health & disease
  - § Learn to practice through apprenticeship
  - § Learn through practice
- Ø **Decision making**
  - § Recognize patterns
  - § Reason under uncertainty
  - § Handle life & death situations
  - § Primum non nocere
- Ø **Coping with explosion of knowledge & technology**
  - § Specialization and sub-specialization
  - § Multi-tasking, interrupt-driven work
  - § Pay for technique-centric piece work



# Cultural Challenges for Health Professionals

- Ø Acceptance of variability in practice
- Ø Self confident & cynical
- Ø Fragmentation & loss of responsibility
- Ø Denial of individual contribution to the problem



# U.S. Health Care is a Clash among Competing Forces

Health Professionals	Payment for services, autonomy
Care facilities	High margin services, low supply cost
Suppliers	IP protection, volume
Consumers	Service, low out of pocket cost
Payers	Right to select risk, limit cost
Purchasers	More value, lowest cost

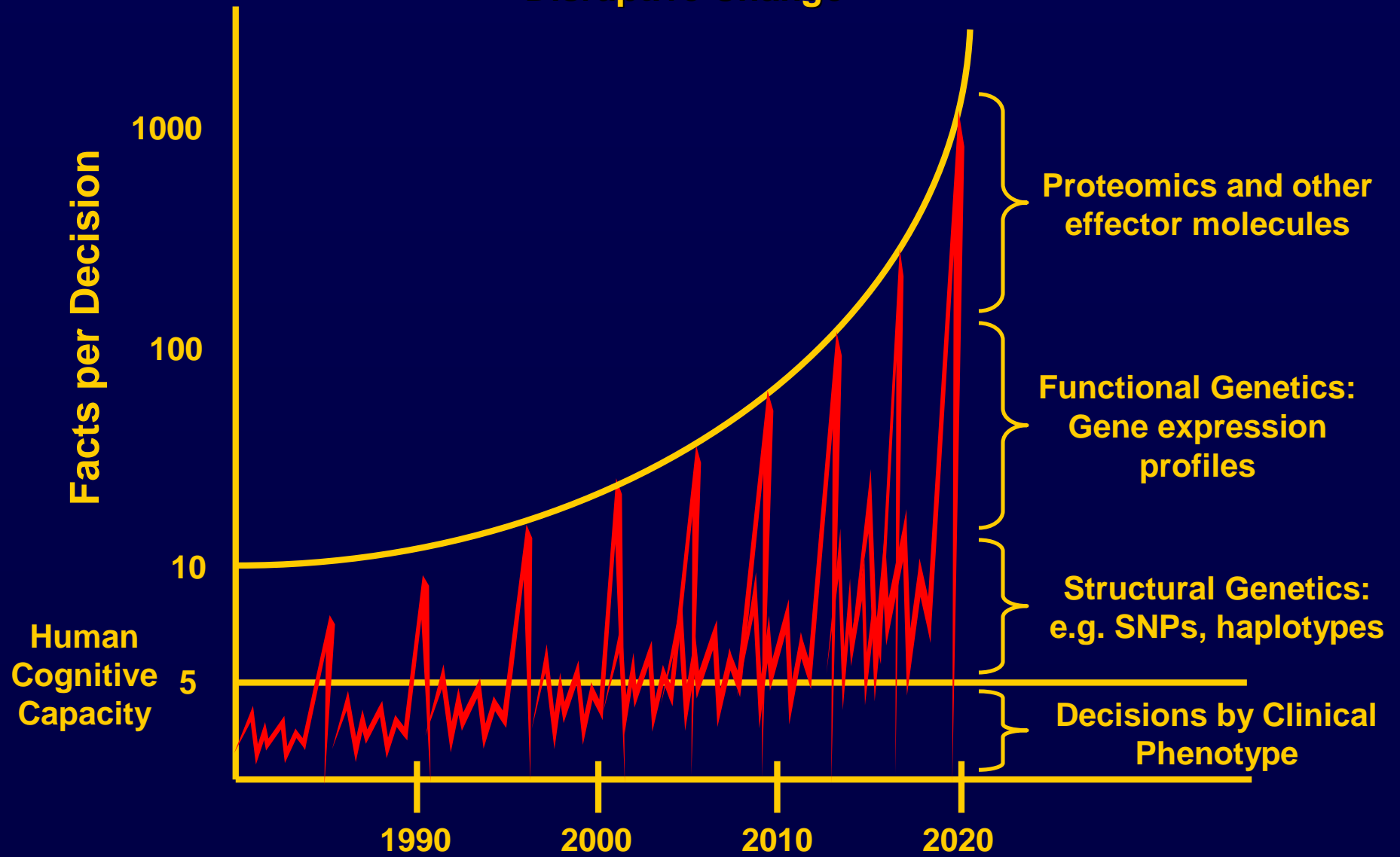


# Cultural Impact of the Clash among Forces

- ∅ Non-aligned incentives
- ∅ Distrust
- ∅ Limited power of the Provider CEO
- ∅ Waste
- ∅ Tension over cost of new technology
- ∅ Consumer “ping pong”
- ∅ Poor health outcomes



# Health Care Culture Faces Disruptive Change



## Current Culture

- Ø Layer fix on fix from the outside
- Ø Trust yourself, provide care despite the system
- Ø Manage episodes of care
- Ø Experience-mediated use of evidence
- Ø Each patient is an experiment with  $n=1$
- Ø Learn in disciplinary silos
- Ø Learn by applying science through practice
- Ø Pay for piece work & process steps

## Future Culture

- Ø Improve from the inside out
- Ø Know your limits, trust the system & your team
- Ø Care for patients and populations
- Ø Systematic use of evidence
- Ø Each patient is a data point in a population
- Ø Learn in teams
- Ø Learn from simulation & outcomes
- Ø Pay for coordination & outcomes

