ON SOLID GROUND, LOOKING AHEAD

ver the last months, we have been crafting Vision 2020 to span the Catholic health ministry's next decade. In recent *Health Progress* columns, I have discussed the importance of effectively scanning the environment for key trends as well as ways of using scenarios to consider alternative future realities. These are techniques we have adopted for Vision 2020 to identify what we believe are the components of a plausible (believable) future scenario for health care in the United States.



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The consensus of several hundred persons in the ministry is that there are some things we can expect to happen that will affect the who, what and how of health care delivery by 2020:

■ The population of the United States is aging at an unprecedented rate. By 2020, 16 percent will be over 65 years of age.

■ Chronic conditions place a tremendous burden on the

health care delivery system. Sixty-five present of Americans are obese or overweight, and nearly half the population is estimated to have at least one chronic condition. Older persons are disproportionately affected.

- Absent meaningful reform, the cost of health care by 2018 will exceed 20 percent of the U.S. gross domestic product and represent 25 percent of the entire federal budget.
- Population aging is magnified in the health care workforce. Within 10 years, it is estimated that 55 percent of nurses plan to retire and 33 percent of primary care physicians will no longer practice medicine.

In our plausible scenario "Continued Evolution Bounded by Realities," the way these trends come together will catalyze these kinds of changes:

- Increasing focus on cost effectiveness, with payment becoming tied to quality and outcomes
- Movement toward more supportive, less costly care that includes more emphasis on quality of life, providing symptom control and palliative care in less costly, non-acute environments
 - Care that will be more about prevention and

become more personalized, improving each person's experience and outcome

■ Technology (both clinical and information) to improve quality and outcomes

Clinical technology will advance not only in the acute care setting but also will enable more care in home and community-based settings. Increased information connectivity will reduce redundancies and costs. People will be able to take charge of their own information and incorporate into their personal health record more of such commonly available data points as home scales, glucose and blood pressure readings, pedometers and fitness equipment, to name a few. However, despite increasing "smart" technology and familiarity with computers, people will continue to struggle with

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health care literacy.

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As the workforce ages, new health care professional

to help fill gaps. Universities already have begun new programs to graduate "hybrid practitioners" — nurses with skills similar to those of a primary-care physician. People will continue to value direct relationships with physicians and appreciate the emerging role of care coordinators.

These trends and their implications present unique challenges and many opportunities for Catholic providers. Care of older persons has been a ministry hallmark since its earliest days. Today, the converging forces of an aging population, limited economic growth and potential health policy changes yield a growing opportunity to meet the needs of our senior population not only in hospitals, but across the continuum of care. We have

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the tradition, the commitment and the capacity to provide care that addresses the physical, psychological, social and spiritual in a way that reverences each person's needs. Others will look to us as leaders in this changing landscape and we should be prepared to fulfill that expectation.

The founders of Catholic health ministries across the country laid down a solid, can-do foundation that today would be called innovation. Though they had very little in terms of resources, they didn't settle for anything less than excellence. They figured out how to do more with less while caring for the most vulnerable of society. High quality, efficient and cost-effective care will be essential for the health delivery system of the future. Being mindful of these roots will serve us well.

Finally, confronted with an aging workforce, not only should we be respectful and compassionate to those we serve, but also to those with whom we serve. Historically, the Catholic health ministry has provided a safe and respectful workplace environment, as evidenced by the significant longevity of our associates. Persons who minister with us are called to serve others in a compassionate, live-giving way; this makes Catholic health care unique. Our relationships with associates and physicians provide a solid foundation on which to forge an evolving and sustainable health care ministry into the next decade.

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HEALTH PROGRESS www.chausa.org MAY - JUNE 2010

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