

HSCC 311

Systems and Trends in Health Care Delivery

Disease Treatment System

Objectives

- Upon completion of this section, the student should be able to:
 - identify the variables of pathogenesis
 - discuss the prevalence of each disease indicator
 - discuss the intervention process of the system
 - identify each of the components of the system

National Health Care Delivery System

- Myth or Misnomer?
 - National
 - Health Care
 - Delivery
 - System
- We are a quasi or pseudo system

Context of Disease Treatment System

- Context: Medicine
- Pathogenesis
 - Dependent variable
 - Disease
 - Independent variables
 - Endogenous
 - Exogenous pathogens
 - Microbiological
 - Chemical
 - Physical
 - Psychosocial

Utility

- Prevalence of Disease
 - Political-Legal
 - Economic
 - Socio-cultural

Process of Disease Treatment System

- Intervention or reparation
- Medical model:
 - Diagnose/Treat/Support
- Systems model:
 - Inputs/process/outputs
- Process
 - Focus
 - Initiator
 - Organizer
 - Mode
 - Orientation
 - Range of actions

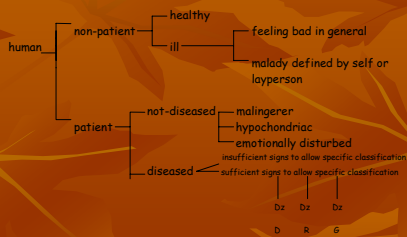
Focus

- Individual instances
- Singular medical events

Initiator

- Problem presentation
- Problem-oriented

Organizer: Dichotomous Classification



Mode

- Reactive
 - signs, symptoms, conditions
- Diagnose, sub-classify, treat until asymptomatic

Orientation

- Quantity of life
- Volume

Range of Actions

- Complex, Spectral, Ordinal
 - primary care
 - secondary care
 - tertiary care
- Range of Care
 - Preventive
 - Restorative

Disease Treatment System

- Health care system is complex and uncoordinated
- Components form an organized anarchy
 - Services
 - Recipients
 - Providers
 - Payers
 - Regulators
 - Others

Services

- Intangible
- Value laden
- Profound
- Complex
- Ambiguous
- Evolving

Recipients (1st Party)

- Singular in nature
- Previously:
 - Imperfect Knowledge
 - Passive
 - Entitled
- Currently:
 - Internet and knowledge savvy
 - Shared responsibility

Providers (2nd Party)

- Providers are animate and inanimate
 - Occupations
 - physicians, nurses, allied health
 - Organizations
 - institutional
 - non-institutional

Payers

- Those Who Actually Pay for Services
 - recipients
 - employers (4th party)
- Those Who DO NOT Really Pay for Services
 - providers
 - insurance companies (3rd Party)

Regulators (5th Party)

- Rule-makers
 - Private
 - JCAHO
 - Public
 - judicial

Others

- Suppliers
 - Goods and services
- “Players”
 - thinkers
 - media
 - representers of special interests
- Outside Forces

Component Connection

- Cost
- Access
- Quality

Cost: Funding

- Purchaser
 - Provider
 - Recipient
- Payer
- Organizer of Funding
- Method of Financing
- Receiver of Funds

Access

- Inequitable
- Expensive
- Tiered System
see handout

Quality

- Primary causes of unnecessarily premature deaths:
 - 33% cardiovascular disease
 - 24% cancers
 - 7% CVA
 - 4% accidents and violence
- Lifestyles and behaviors cause

In Conclusion . . .