CONNECTING PEOPLE TO THEIR POTENTIAL
TIME FOR A NEW DATA MINDSET FOR HEALTH AND HUMAN SERVICES
As agencies work to serve the whole person—to move up the Health and Human Services Value Curve toward generative service delivery—converting data to actionable insights is critical.¹ Yet to succeed, agencies must use data and analytics in entirely new ways.
Health and human services is shifting to a holistic approach to serve people. The shift is slow, complex and happening only in pockets for now. However, practitioners recognize the need for policies and programs that are more person-centered—for a coordinated health and social care system that addresses interrelated behavioral and social determinants of health and wellbeing. People also see value here. Accenture Citizen Pulse Survey results reveal that 63 percent of US citizens think their family’s needs would be better met if publically funded healthcare and human services programs were more coordinated.

Agencies must look beyond their four walls to deliver this value. They must break down organizational and sector silos to collaborate with traditional and unconventional partners—from mental health and housing to the education and justice systems. Data insight and analytics are essentials for collaboration that truly blurs boundaries. By unlocking and sharing actionable data insights, organizations can become more agile. They can optimize decision processes, prioritize actions, align finite resources, measure performance and speed outcomes. This requires a new data mindset.

Breaking away from a compliance mindset opens doors to new opportunities to reinvent service delivery and build a stronger network of care in the process. Too few of the world’s social services and welfare agencies are actively doing this today. Consider that just 29 percent of them use advanced analytics for measuring performance and 21 percent use it to modernize and digitize processes to meet people’s technology expectations. The biggest surprise is that a mere 15 percent of agencies use advanced analytics to improve service delivery and meet expectations.

This is unfortunate considering the power of analytics insights to improve service delivery. The story of the Community Services Division in Dakota County, Minnesota is one example. The agency’s disciplined approach shows how health and human services agencies can expand their use of existing data in a measured and cost effective way.
Rather than go “all in” on analytics, Dakota County focused on a return on taxpayer investment initiative to evaluate the impact of an inmate re-entry assistance program. Working to assess possible program expansion, the County identified $1.4 million in cost avoidance from reductions in criminal activity. Using data analytics to quantify impact helped the agency align resources with a promising program.

With advances in data tools and platforms, agencies can start small using advanced techniques and get results faster. So instead of putting time and money immediately into infrastructure, agencies should focus on the data they have, using fast, innovative methods to extract value from it.

With this narrow focus, agencies can apply methods like rapid prototyping or rapid cycle evaluation to reduce delivery time and improve services faster. These methods take weeks, not years, speeding insight to action. They are also highly adaptive, giving agencies newfound freedom to take risks and experiment with analytics. Agencies finally have room to “fail fast and fail small,” making near real-time course corrections to program approaches to manage risk while supporting a continuous focus on outcomes.

Consider an ongoing initiative in Massachusetts. In partnership with the Massachusetts Executive Office of Elder Affairs, the University of Massachusetts Medical School developed TrendFinder LTSS™, a data analytics platform designed to get data in the hands of policymakers to address new demands on publicly funded long-term services and supports. The solution addresses capacity planning, quality reporting, expenditures and utilization, and program integrity. It aggregates disparate data from multiple systems and provides easily accessed, user-friendly, web-based intelligence tools.
EVOLVE TO ECOSYSTEMS

With a new data mindset that expands beyond compliance and the tools and methods to uncover analytics insight faster, health and human services can pursue a new level of data sharing to drive outcomes. This goes beyond occasional, ad-hoc information exchanges between specific partners for specific purposes.

Thanks to analytics approaches and digital platforms, rich data insight from multiple sources can be continuously and proactively shared across an entire ecosystem of organizations across sectors to improve levels of service and care. Ecosystems connect disparate organizations in a network of care to address the whole person through complementary strengths and resources.

Connected by shared data, ecosystems are the future of health and human services delivery. Policy makers acknowledge the “network effect” of ecosystems to multiply outcomes. The OMB A-87 Cost Allocation Exception offers funding incentives that encourage states to build enterprise ecosystem data management approaches that make data available across systems. What’s more, 71 percent of 2016 Health and Human Services Summit attendees believe it is critically important to build new ecosystems.

The key is to use a business lens, identifying a specific business problem or question to address and then “work backwards” to determine the data insight needed to solve it.
One of the agencies that shared its transformation story at this Summit is evolving toward an ecosystem mindset. Ohio’s Office of Health Transformation (OHT) is on a journey to reinvent health and human services delivery statewide. The implementation of an integrated eligibility system for Medicaid, SNAP and TANF was the centerpiece of these efforts. With the system in place, OHT is now exploring opportunities to harvest and share system data. As part of its move to pay-for-value, OHT has begun to share data across payer sources to get buy-in from providers and to generate better patient outcomes.

Sharing data across an ecosystem is not without challenges for most agencies. Even those with good intentions often run across legislative, process, cultural and confidentiality barriers. Making progress will take adaptive leadership approaches and creative strategies. A critical part of this will be educating people about the value of sharing their data and prioritizing security and confidentiality measures. Consider that survey results show that only half of US citizens are open to agencies sharing their personal data to get a better level of service.

Health and human services agencies have the potential to access endless data about the people they serve and the programs they develop. Yet data is just data unless agencies know how to act on it. This demands a steady focus on outcomes, an ability to use technology rather than be limited by it, and a willingness to connect with stakeholders in new ways. The real game changer in converting analytics into outcomes in health and human services is getting data quickly into the hands of the people doing the work.
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NOTES

1 The Health and Human Services Value Curve is a practical framework that tracks business model development across four levels. The generative level is the most advanced. Leadership, operations, technologies and processes are adaptive and innovation is continuous. Visit https://lnwprogram.org/hsvc to learn more.

2 Accenture Public Service Emerging Technologies Research, June 2016

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