



Advancing & Integrating Care Across the Health System

Sean Looby, MHA

Director, Service Line & Network Integration, Musculoskeletal & Rheumatology

The Musculoskeletal and Rheumatology (MSKR) service line continues to evolve in driving advancements and integration across the health system. These efforts are pursued through the work of the multidisciplinary disease teams, other health system wide initiatives, and individual pursuits to improve care at each of the Penn Medicine acute care hospitals. As the health system continues to grow, the potential for focused efforts to drive integration among and between hospitals and physicians throughout the system grows with it. In proactive recognition of this opportunity, we held the Major Lower Joint (MLJ) System Integration Summit in March 2019.

As the first of its kind, the Summit brought together administrative and clinical leadership from the five system hospitals performing joint replacements to focus on opportunities for the advancement and integration of joint arthroplasty care throughout our hospitals and service areas. Representing the largest portion of total orthopedic surgical volume across Penn Medicine (over 6,000 cases annually), and facing various changing dynamics impacting where and how care is provided and paid for, joint arthroplasty offers opportunities and challenges ripe for this type of focused effort. The goals of the Summit were to bring stakeholders together to share information and provide education, gain insights into opportunities and challenges, and provide a forum for collaboration among teams across hospitals and markets.

The Summit was well attended, with over 75 total attendees, including 20 surgeons. In addition to a keynote speech, a panel discussion, and an update on clinical research opportunities, the bulk of the time was spent in breakout sessions focusing on four key areas:

It was a productive day with an abundance of both best practices and challenges shared. Given that each of our hospitals serve different patient populations, have different capacity and resource constraints, and have various other inherent differences, the discussions and opportunities identified were a mix of those impacting all system hospitals and those related to specific hospitals. This format allowed stakeholders to understand and appreciate the different obstacles faced by their peers at other hospitals, while recognizing the benefit and value of standardizing and integrating various aspects of care across the health system.

As with most efforts of this nature, the follow-up and action plan is where the rubber meets the road. MSKR service line leadership has taken the lead in setting a path forward and developing a framework for pursuing identified opportunities, with a mix of both system-level and hospital-level ownership of improvement initiatives. As the demand for joint replacement services continues to grow with the aging population, and payers and consumers increasingly seek and reward high quality, cost efficient care, it is these types of initiatives that will help position us for continued success.

As we think more broadly across the MSKR service line, we must continue to identify and create opportunities for collaboration to leverage and spread the novel work being done throughout the system, while allowing our hospitals and physicians to achieve the value and reap the benefits of being part of the MSKR service line and broader health system. We look forward to working closely with stakeholders across the health system to continue to identify and implement innovative approaches to improve care for the patients we serve.

