



We cannot, after 68 years answer questions such as

**Is the service for people with epilepsy in Manchester of higher value than the service in Liverpool?**

**Which service for people at the end of life in London provides the best value?**

**Is the service for people with asthma in Somerset better than the service Devon?**

The NHS has now adopted the Triple Value paradigm developed by the NHS Right Care programme which a team in Oxford helped to create

Allocative value, determined by how well the assets are distributed to different sub groups in the population. Not only in the programme for people with cancer or the programme for people with mental health problems, but also within each programme to the principle subgroups of that population

Technical value , determined not only by the efficiency of the service treating patients but also by how well resources are used for all the people in need in the population

Personalised value, determined by how well the outcome relates to the values of each individual

**join us on January 12-13 at the University of Oxford to learn from and interact with healthcare professionals who have faced problems similar to yours and have used a variety of innovative approaches and strategies to make their Hellish Decisions.**

### **Key sessions to include:**

- ❖ Producing evidence in the value era
- ❖ Developing value-based programmes & systems
- ❖ Optimising system value by innovation & redundancy
- ❖ Optimising system value by reallocation of resources for a single condition
- ❖ The future of hospitals and what needs to be done to optimize the value of the service
- ❖ Creating public & social value
- ❖ Decisions for payers
- ❖ Commissioning for value



<https://www.phc.ox.ac.uk/events/hellish-decisions-in-healthcare-2017>

Hosted by the Value Based Healthcare Programme, within University of Oxford's Nuffield Department of Primary Care Health Sciences, in partnership with Better Value HealthCare and the Oxford Health Experiences Institute.