POLICY FORUM

Keeping the End in Mind

Introduction

Paying for quality, outcomes, and performance is not new, but how we measure and score quality, outcomes, and performance is. Now, health professionals are being compelled to reflect on what we have done well and what we must do better. We are being goaded to let go of old roles and to embrace new ones. And yet, how and why we make these changes is as important as the changes themselves.

Thirty years ago I wrote a commentary titled "The Physician as Captain of the Ship." How things change. Or not. There is something so Hermann Melville about it all. We have been hunting whales for so long that we have forgotten why. Now we seek an elusive white whale.

Call me Ishmael. Or Ahab? We build new whalers, recruit new crews, and invent new tools to change how we do what we do. But rearranging the furniture on the deck will not keep us from sinking. We do not need to do old things better, even with new people, new skills, and new roles. Instead, we need to do new things better for different reasons.

The transformation we need to undertake is not simply about training old health care professions (and professionals) to give them new skills. It is not just about reshaping or inventing new roles. Yes, we need to recruit new faces and perspectives to our professions. And, yes, we need to teach and socialize our new peers—not in the same way that we were taught and socialized, but how we *ought* to have been taught and socialized. These changes are necessary, although perhaps not for the reasons most believe—it is not because payers, outcomes, and performance measures have changed; it's because we haven't.

It's not just new seas that we sail; we now have a new destination. If we cannot adjust our heading, then we are still hunting whales, even though the goal was never the blubber itself. Rather, the goal was oil to fuel our lamps to pierce the darkness. NCMJ

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