



# Health Systems and Hospital Improvement

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# Introductory:

- 1.Performance
- 2. Health Systems Performance
- 3. Hospital Performance
- 4. Improving Hospital Performance

#### **Definition of Performance**

- Performance is the achievement of desired goals based on:
- Competences in application of present knowledge available technologies and resources
- Efficiency in the use of resources
- Minimal risk to the patients
- Satisfaction of the patient
- Health outcomes

#### Steps in performance assessment:

1. Establish goals





2. Adopt performance indications







4. Data reporting

5.Interventions



# Purpose of Assessing Health Systems Performance:

1.To empower decision makers in policy and system development

2.To empower the public with information relevant to their well-being

# How to Assess Health Systems Performance?

- 1. Measure health system's contribution
- 2.Measure health system and non-health system **resources** and the **efficiency** of their use
- 3. Evaluate the **impact of the functions** of the system
- 4.Implement policies to improve attainment and efficiency
- 5. Monitor the effect of the new policies

# WHO Health System Performance Framework

Health system boundaries

Health system goals

Health system efficiency or overall performance

Health system functions

# **Health System Boundaries**

A health system includes:

Resources, Actors & Institutions related to the financing, regulation, and provision of health actions

**Health Action:** 

Any set of activities, primary intent is to improve health.

# **Health System Goals**

Three goals are defined in the WHO framework:

**Health Outcomes** 

Responsiveness to Consumers

Fairness in Financing

To assess their level of Quality, Efficiency and Accessibility and Distribution of Equity

# **Health System Efficiency (Overall Performance)**

To examine how well a health system is doing, given the resources available to it.

# **Health System Functions**

The level of efficiency can have an impact on the health system to carry out 4 core functions:

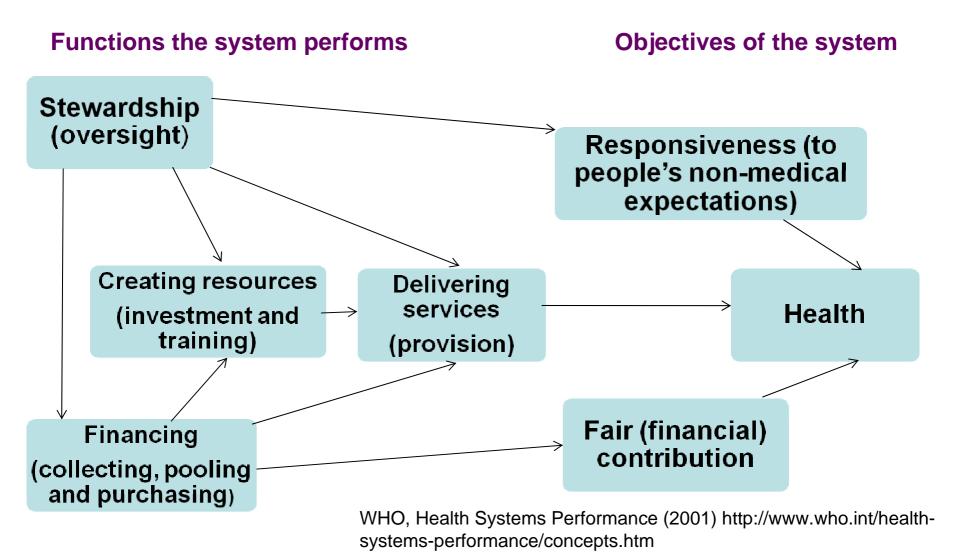
**Provision** 

Financing

**Resource Generation** 

Stewardship

# Relationships between functions and objectives of health systems



Goals of Hospital Performance need to be

related to the health system in order to

improve Health System Performance

# Hospital performance

- Responsiveness to community needs
- Integration of services
- Commitment to health promotion

# **Key Dimensions of Hospital Performance**

| Dimension                 | Including  |
|---------------------------|--|
| 1. Clinical effectiveness | Technical quality, evidence-based practice and organization, health gain, outcome (individual and population)  |
| 2. Patient centeredness   | Responsiveness to patients: client orientation (prompt attention, access to social support, quality basic amenities, choice of provider), patient satisfaction, patient experience (dignity, confidentiality, autonomy, communication) |

# **Key Dimensions of Hospital Performance**

| Dimension                | Including   |
|--------------------------|---|
| 3. Product efficiency    | Resources, financial (financial systems, continuity, wasted resources), staffing ratios, technology   |
| 4. Safety                | Patients and providers, structure, process  |
| 5. Staff                 | Health, welfare, satisfaction, development (e.g. turnover, vacancy, absence)  |
| 6. Responsive governance | Community orientation (answer to needs and demands), access, continuity, health promotion, equity, adaption abilities to the evolution of the population's demands (strategy fit) |

# Performance Measurement and Reporting Cycle:

- Establish goals
- Adopt specific measures and indicators
- Performance analysis
- Reporting of data publicly and confidentially
- Systematic implementation/improvement interventions
- Monitoring and feedback

OECD. "Measuring Up" Improving Health Systems Performance in OECD Countries. Applying Performance Indicators to Health Systems Improvement.

# **Organizing & Integrating Performance**



#### **Performance Domains**

# Individual and Population Level

- Effectiveness
- Efficiency
- Equity
- Responsiveness
- Appropriateness
- Safety

# Quality

# Theoretical Purposes: Public Reporting

- Regulation
- Purchasing or commissioning decisions
- Facilitating of consumer selection
- Provider / systems behavior change
- Accountability

# Performance Reporting

- National Quality Reports
- "Report Cards"
- League Tables
- Provider profiling
- Popular press: mass media
- Commercial initiatives

#### **Evidence of Effectiveness of Performance Reporting**

#### Evidence from the USA

- Public
- Provider
- Purchaser / Payers
- Policymakers

#### The Public

#### Evidence from the USA:

- Performance data used minimally
- Most data designed for other purposes
- Not easily comprehended or actionable
- Not salient
- Unmotivated-believe individual care is good

#### The Providers

#### Evidence from the USA:

- Institutions (eg, hospitals and systems) pay attention and use:
- 1.To improve appropriateness of care
- 2.To identify poor performers
- 3.To alter processes responsive to complaints
- Individual providers less responsive to data

### A Case study in New York

# Reporting of Performance Data

- Publicly reported risk-adjusted mortality past CABG
- New York had the lowest risk-adjusted mortality rate in the USA after 4 years
- Mortality rate decrease 41% in the first 3 years
- Rate of decline 2x national rate of decline in 5 years

# Case Study in New York:

- Improvement driven through actions taken by hospital staff
- 1. Changes in leadership
- 2. Curtailment of operating privileges
- 3.Intensive peer review
- Consumer or market force: minimal action

# **Purchasers/Payers/Commissioners**

#### Evidence from the USA:

- Little evidence of performance to exercise "market clout"
- Two large studies with 15,000 employers nationwide
  - Data used minimally
  - Price still the main selection factor
  - Data suffers as not designed for buyer decisionmakers
- Reliance on purchasers and payers to use performance data not a reliable strategy

# Policymakers:

 Some evidence that policymakers use comparative performance indicators

 New national initiatives in Canada, Australia, UK and USA for national performance reporting

### Methods of performance measurement:

- Regulatory inspection
- Surveys of consumers' experiences
- Third-party assessments
- Statistical indicators
- Internal assessments

# **Regulatory Inspection**

- Statutory inspectorates to monitor compliance
- Inspection standards to address the minimal legal requirements
- Does not foster innovation

# **Consumer Surveys**

 Standardized surveys to measure hospital performance at a national level

 Identifies what is valued by patients and the general public

# **Consumer Surveys**

#### Picker Questionnaire:

 Favorable Picker scores: associated with reduced complications and unexpected deaths in Michigan hospitals

(Bechel et al. Joint Commission journal on quality improvement 2000, 26:400-409)

 Low Picker scores: associated with lower health status in New Hampshire

(Fremont et al. Journal of general internal medicine 2001, 16:800-808)

- ISO Standards
- Peer review
- Accreditation

#### **ISO Standards**

- Internationally recognized
- Test compliance with standards, but not for organizational development
- ISO 9000 standards for quality systems were adapted in 2000. It is more easily applied to health care.

#### Peer Review

 A closed system for professional selfassessment and development

- Limitations:
  - Basis in specialties
  - Confidentiality of results

#### Accreditation

- Aimed at organizational development
- Independent, voluntary programmes for multidisciplinary assessments of health care functions
- Evidence shows that hospitals rapidly increase compliance with standards and improve organizational processes
- Less evidence that this brings benefits in clinical process and outcome

#### **Statistical Indicators**

- Suggest issues for performance management and further scrutiny
- Designed to measure achievement of predetermined objectives
- In practice, they are selected on the basis of data routinely available.

#### **Internal Assessments**

Management or organization initiatives

Methodological differences

Question of objectivity

Improve Health Systems and Hospital Performance:

Organizational reform

Financial incentives

Purchasing

Knowledge and skills enhancement of providers

Patient engagement and empowerment

Improve health systems and hospital performance:

- Goal definition critical
- Consistent and congruent combinations needed
- Sustaining improvement a challenge

# Thank You!