


ISQUA Oct 2009
Dublin

Using Health Information Systems to Develop Accountability and Performance Improvement in Health Services



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Why Measure?

Are we delivering for the Irish public?

A. What do we need to know?

- Availability & access to Services
- Customer experience of Services
- Linkage of Services
- Use of Resources
- Quality of Services



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Why Measure? (continued)

Are we delivering for the Irish public?

B. Obstacles to knowing

- Not "profit"/bottom line
- "We're professionals"
- Resistance
- Too much data
- Fragmented information
- Not used
- No Follow up


C. Information is power to continuous improvement



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How to Measure ?

- Corporate Measurement: Progress against Strategic Objectives (3 year Corporate Plan)
- Contractual Measurement: Required Financial and Activity Deliverables (Annual Service Plan)
- Quality Measurement: Standards, Outcome and effectiveness of Services.
- Operational Measurement: How Services are Delivered: HealthStat (Monthly or more frequent)



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HealthStat

HealthStat – supporting high performance in the Irish Health Service

- HSE role – a finger on the pulse of our performance
- Continuous improvement in delivery of services to the Irish public



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HealthStat

A. Why HealthStat Model?

B. What came before HealthStat?

- Standalone stream of information, not joined up
- We needed uniform information to generate focus and actions

C. Follow Up – Follow Up – Follow Up




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The scope of HealthStat

- What it is
- What it is not

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A. HSE vision for Services to the Irish Public: (A-I-R)

- Access - At the Right time,
- Integration - the right services in the right place,
- Resources - with the right use of resources

B. Telling a Story


- Dashboards
- Available Monthly on Internet

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ENGINE FOR IMPROVEMENT: HealthStat forum monthly

- purpose
- attendees
- engagement process
- feedback


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HealthStat – how are targets set?


- Existing & New
- National & International


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Dashboards and Traffic Lights


- What is a dashboard?
- Showing results against targets
- Drawing focus to key areas

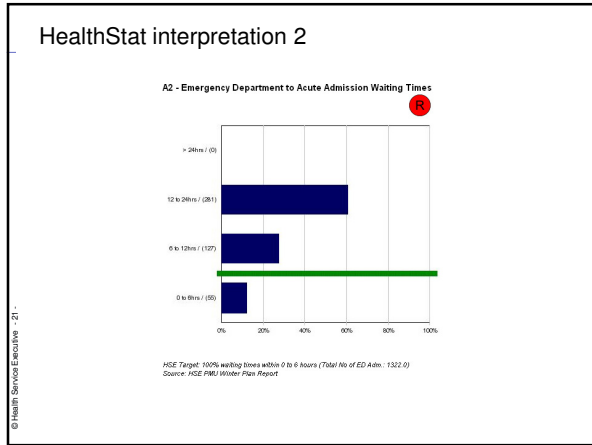
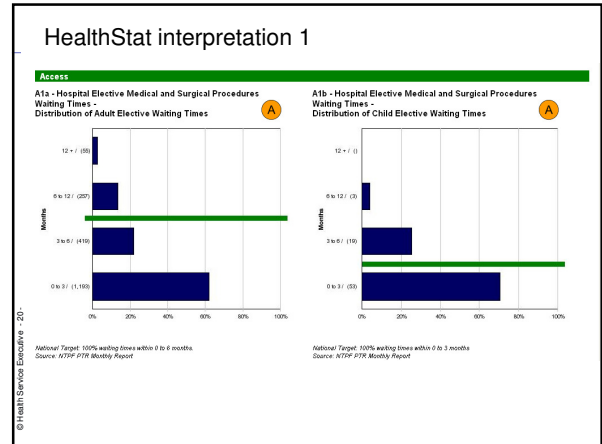
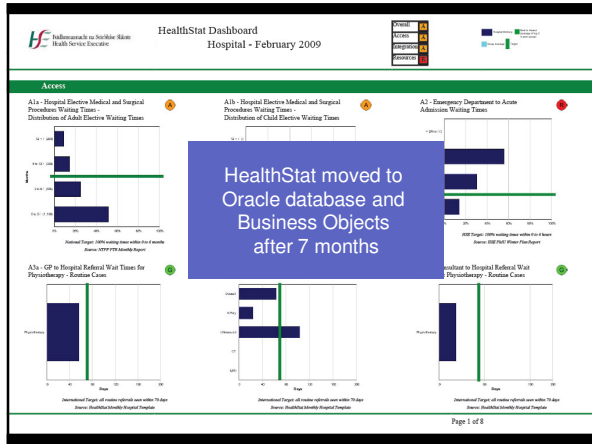
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And now to the technical details.....

- The analysis stage
- Developing a plan
- Implementation of HealthStat
- Interpretation of HealthStat dashboards

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HealthStat targets 2009

HEALTHSTAT - THE MEASURES AND THE TARGETS					
Access		Integration		Efficiency	
Metric	Target	Metric	Target	Metric	Target
A1a Adult Elective Procedures Wait Time	National target, less than 6 months	H Day Case Sales Procedures	International target, 75%	F1 Variance from Budget	Budget in target
A1b Child Elective Procedures Wait Time	National target, less than 3 months	H Day of Procedures Admission Rate for Outpatient Inpatients	International target, 75%	H4 Staff WTE Variance from Staff Ceiling	Staff waiting is target
A2 ED Acute Admission Wait Times	National target, less than 6 hours	H5 Inpatient ALOS adjusted for complexity and age	Individual hospital targets	H5 Percentage of Staff Hours Lost Due to Absenteeism	National target 3.5%
A3a GP to Hospital Referral Wait Times for Physio (Routine)	International target, less than 70 days	H6 Overall ALOS (prevalence and episodes)	Best in Ireland target*	H6a GP Hospital Referral Wait Times for Physio (Routine)	Best in Ireland target*
A3b GP to Hospital Referral Wait Times for Diagnostic (Inpatient)	International target, less than 70 days	H7 Percentage of Cases with Extended HPE	National target, 80%	H7a Number of New Patients per WTE Consultant	Best in Ireland target*
A4a Consultant to Hospital Referral Wait Times for Physio (Inpatient)	International target, less than 70 days	H7 Appointments of Admission and Care, whether same or other	National target, 60%	H7b Consultant Cases (DNA Rates)	National target 10%
A4b Consultant to Hospital Referral Wait Times for Diagnostic (Inpatient)	International target, less than 70 days	H8 Public vs Private Staff of Activity	H8 Public vs Private Staff of Activity	H8 Public vs Private Staff of Activity	National target 80 to 20 Public to Private Ratio
A5 Percentage of Cases with wait time over 90 days	International target, zero waits over 90 days				
A6 Average Wait Times for GP Consultant Call	International target, less than 48 days				

Note: Best in Ireland target is comparison against average of top three in peer group

HealthStat

Last Word

What Matters Most is

HOW PUBLIC SERVICES ARE DELIVERED

HealthStat

Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

To enable people to live healthier and more fulfilled lives