



Empirical Analysis of Hospital Quality Indicators: Cholecystectomy as a Model

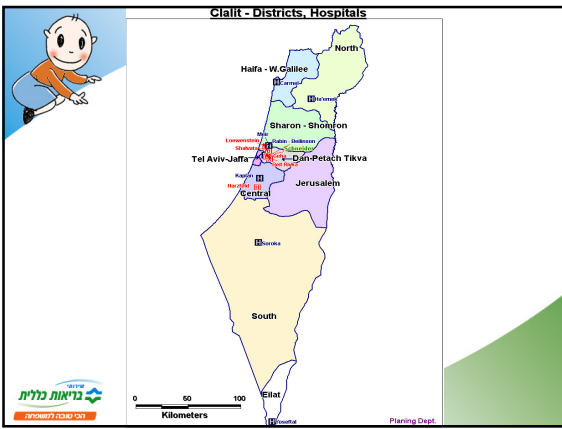

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Clalit Health Services

- Established in 1911
- Largest healthcare provider organization
- Members ~ 3,800,000 (53% market share of ~ 7,000,000)
- Annual budget ~ 4 billion dollars
- 8 districts/14 hospitals
- 1400 community primary care clinics
- 550 secondary care clinics
- Elderly (65+) - 70% market share , 0.5 million
- Arab population - 73% market share, 1 million

Introduction



- Quality indicators were developed in Clalit hospitals in the last decade
- We present an empirical analysis of hospital indicators for cholecystectomy

Methods

All patients undergoing laparoscopic or open cholecystectomy in 2007 in 7 general hospitals (14 surgical wards) included.

- QIs were analyzed in order to assess
 - How frequent is the event?
 - Is the data reliable?
 - Is there significant variability?
 - To what extent does the indicator depend on patient case-mix?
 - Is the event related to outcomes (e.g. morbidity, cost)?

Results

Excessive length of stay following laparoscopic cholecystectomy (3 days or longer)

- Highly variable (19±8%); independent of case-mix
- Associated with outcomes (e.g. cost)

