

Introducing, applying, and evaluating hospital performance measures in Asia and Europe

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Objective:

The Quality Indicator Project, a large performance measurement system for hospitals, has introduced clinical and organizational performance measures in nine countries in partnership with local organizations. The presentation describes the local application, implementation, and evaluation of the system.

Methods:

The presentation is both qualitative and quantitative. The qualitative part analyzes the process of performance measure implementation, concepts of data analysis and reporting. The quantitative part presents data from local, regional, and international comparative analysis of clinical performance data, and critically assesses the usefulness of comparative and non-comparative analyses including statistical process control and control charts.

First, the presentation focuses on the implementation strategies of a performance measurement system in different health care settings by considering the local internal and external accountability, often through the accreditation process. The challenges including setting up local support, convincing hospital leadership, assuring physician buy in, expert support, and adjusting to the local culture are specifically mentioned. Second, the presentation summarizes approaches to data analysis including internal data analysis, comparative reporting – local, regional, and international – and statistical process control as they relate to internal improvement efforts. The presentation selects key indicators such as readmissions, returns to the intensive care unit, patient falls, and surgical prophylaxis to illustrate the challenges of definitions' translation, data collection, submission, and data quality assurance in the different health care systems. Different approaches to data analysis presenting comparative data on these indicators and discussing the strengths and weaknesses of these approaches are also presented. Finally, benchmarking initiatives in the field of patient falls and care in the intensive care units are used to show how a clinical performance measurement system can serve as a catalyst for local and regional collaboration for quality improvement and accountability efforts.

Results:

The paper presents concrete data for patient falls and intensive care and describes how these data have been used for accountability efforts as well as for regional benchmarking efforts.

Conclusions:

Performance indicators have been successful for accountability and benchmarking efforts in different health care system. Key factors for success are adaptation to local needs and culture and sensitive and appropriate approaches to data analysis. On this benchmarking and accountability efforts can build and serve as a catalyst for regional collaboration for performance improvement.