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Successes and Challenges in Developing and Operating a National Clinical Measurement System: The Case of Primary Health Care in Israel

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Objective:
Organizing and leading a national clinical measurements system in Israel.

Methods:
The project has initiated as a voluntary joined effort of the four Israeli HMOs (2001 – 2003) with an academic research team, and evolved to a national project (2004).

To develop and maintain the national measurement system means having to face several major challenges such as: estimating the complexity of the context, establishing cooperation between competitors, locating the shared capabilities and linking the national system to the internal HMO systems. These issues should be discussed in relation to the context complexity that affects the system environment, including: world trends, the relationship between the HMOs, the Health Ministry and the public, HMO administrations' interest, gaps between the HMOs inner organizational measurement systems and the change in the role of the Health Ministry in the project. The greatest challenge of the project was the creation of cooperation between competitors. At the beginning the HMOs were ambivalent. On one hand, they have *concerns* regarding their own performance levels in comparison to others, concerns of not being involved in setting the standards and of not being ready when the measurements will be requested. On the other hand, the project incorporates several *opportunities* for its participants, including learning from experts, colleagues and from the process itself, receiving information on business competitors, motivating the internal organizational process and advancement of joint interests, e.g. improvement of data transfer from the hospitals to the HMOs. Another challenge is locating shared abilities of the different HMOs for uniform measurement production. This is achieved by auditing the information systems, identifying the main causes for the lack of uniformity, reaching consensus on uniformity standards and using the criterion of the lack of uniformity to reject important measurements and refrain from information sources. An additional challenge is establishing links between the national system and the internal HMOs measurement systems, in order to minimize overlap and maximize efficiency and effectiveness of the system for all participants. This link is achieved in different ways, such as by developing dynamic tools for different users and selecting measurements that represent the HMOs strategic interests.

Results:
The main achievements of the project are the production of a measurement set at the national level and the development of methodologies and tools, for example: Measurements selection, information systems audit and standard reports. The data source is the entire Israeli population, computerized data only. The data was provided voluntarily by the HMOs (in 2001-2003) and at the request of the Ministry of Health (in 2004). The 2004 measurement domains includes: Flu vaccination, breast cancer screening, asthma, diabetes and preventable hospitalization. The main trends found were high performance levels and continuous improvement between the years 2001-2003. In the low socio-economic status group it was found: Morbidity levels were relatively high, prevention and treatment were relatively equal to the high socio-economic status and control was found to be lower. The additional domains, proposed for 2005, are cardiovascular, hypertension, osteoporosis and colon cancer. The additional methodologies and tools under development are dynamic reporting, measurement revision process and assessment of measurement errors. The project is now facing two additional investigation challenges: The publication of comparative data and its effect on the public, the HMOs and the Health Ministry triangle and the effect of rewarding for performance: encouraging benchmarking or triggering manipulations.

Conclusions:
Developing and maintaining a successful national measurement system depends on defining consensual working principles and developing the interests of the stakeholders involved. Hence, we employed an academic cross sectional leading team, continued development of supporting methods and tools, detailed project management, on-going context evaluation and a wide range of representatives.