

CONFERENCE ABSTRACT

Fostering a chronic care strategy in the basque country through the evaluation of health care providers

17th International Conference on Integrated Care, Dublin, 08-10 May 2017

Eva Lamiquiz-Linares¹, Jose Luis Quintas-Diez¹, Eduardo Garate-Guisasola¹, Jose Ramón Guinea-Uriarte¹, Iñaki Carrera-Arrieta¹, Uxue Bilbao-Ibarrola², Jose Luis Elempuru-Marcada¹

1: Department of Health. Basque Government, Spain;

2: EUSKALIT, Advanced management. Bizkaia, Spain

The Health Regulation Act of the Basque Country establishes the Contract - Program (CP) as a regulation tool between the commissioner (Department of Health) and health providers (Osakidetza/Basque Health Service, etc.).

In order to meet the objectives of the Health Plan (that has a clear focus on chronicity) the CP is adapted in 2014 with the objective of transforming it into a planning tool to run and regulate the design and organisation of the Health System, the type and volume of activity and its levels of efficiency, quality and equity. By using the Kelley & Hurst framework (<https://www.oecd.org/els/health-systems/36262363.pdf>), a performance evaluation manual was designed and a set of outcomes measures from suppliers were introduced in the 2014 CP to show the development of the Health Department's policies and allowing comparison between similar providers (i.e. Integrated Care Organisations- ICOs) and with other health providers from different countries and / or regions. Moreover, it allows to identify best practices (benchmarking).

The manual is structured in 9 dimensions (1.Resources, 2.Services, 3.Integrated Care, 4. Clinical Safety, 5.Effectiveness, 6.Equity, 7.Patient centered care, 8.Accessibility, 9.Efficiency), with indicators to measure the implementation and deployment of: new professional roles (hospital liaison nurses, referral internists, ...), integrated care, coordination with social, mental and long term care; Patients/caregivers empowerment, Multimorbidity, Palliative care strategy, chronic diseases (Diabetes, Hypertension, COPD, CHF), Acute heart attack and Stroke, comprehensive pain management, Clinical safety, Efficiency in prescription, patients/users and interest groups participation in the design of care processes, Equity, etc. But it also keeps the more traditional metrics such as delays, mean length of hospital stay and other indicators of Efficiency.

Each indicator follows the following structure: FOCUS (Definition and revision of strategy), DEPLOYMENT (strategy development, analysis) and RESULTS.

Evaluations have been carried out in two phases: 1) Self-evaluation, 2) External contrast by multidisciplinary teams of professionals from the Basque Health Service and from the Department of Health (60 professionals). The evaluation is complemented by scoring the Bottom-Up / Top-Down projects.

Evaluation criteria, required standards and methodology used are reviewed and adjusted annually.

Results: 3 evaluations (2014, 2015 and 2016). Overall compliance: 64.7%, 72.22% and 78.6%. Integrated Care Organisations' Satisfaction: 7.1; Evaluators Satisfaction: 7.9 and 7.4 out of 10. There has been a clear progress in the development of the Health Plan action lines and an improvement in health outcomes.

Keywords: chronicity; integrated care organisation; evaluation; quality management
