



EUROPEAN COMMISSION

HEALTH & FOOD SAFETY DIRECTORATE-GENERAL

Health systems, medical products and innovation

Performance of national health systems

EXPERT GROUP ON HEALTH SYSTEMS PERFORMANCE ASSESSMENT

15TH MEETING

11 SEPTEMBER 2018, 09:00-13:00

CONFERENCE CENTRE ALBERT BORSCHETTE

BRUSSELS, BE

MINUTES

Participants: Austria, Belgium, Croatia, the Czech Republic, Denmark, Estonia, France, Greece, Hungary, Ireland, Italy, Malta, Norway, Poland, Portugal, Romania Slovakia, Slovenia, Sweden, the European Observatory on Health Systems and Policies, the European Commission.

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1. OPENING OF THE MEETING

The Member State co-Chair of the Expert Group (Kenneth Grech) opened the meeting and proposed to have a discussion on the future of the Group at the next meeting (December 2018). Since the Expert Group has been working for four years it is possible that members of the Group may want to have a discussion about the Group's direction to date and propose changes to our working methods.

Sylvain Giraud (DG SANTE), representing the European Commission co-Chair, suggested a possible review of the Expert Group's mandate, with an increased focus on topical issues with the aim of fostering increased opportunities for mutual learning within the Group.

Some members of the Expert Group suggested that they would like to have the Group focus its work on exploring ways to better link the different dimensions of health systems performance assessment and strengthen co-operation with other organisations engaged in HSPA and related activities.

It was agreed that a position paper be put forward to serve as a basis for discussion in the Dublin meeting.

The minutes from 14th Expert Group meeting (June 28th, 2018 in Lisbon) and the agenda were approved.

2. REPORTING ON HSPA COUNTRY EXPERIENCES

David Balla (Ministry of Health of the Slovak Republic) presented a web portal developed by the Slovak Ministry of Health – "*Your Health Care*" – which will be launched in October 2018. The portal consists of three parts: *Your Health Care*, with information on health system's functioning; *Your Hospital*, which will be used for benchmarking hospitals as well as a tool enabling patients to choose the appropriate provider; and *Your Doctor*, to choose a doctor and to benchmark outpatient entities.

Developing a methodology to benchmark providers and a visualisation tool to present their performance constituted a significant part of the portal's preparation. Several indicators will be presented in the form of graphs – for instance, mortality, morbidity, health care spending in Slovakia overall and on selected goods and sectors (e.g. pharmaceuticals, inpatient care), age of the equipment used, hospital re-admissions etc. These efforts are important because Slovakia intends to join OECD's Patient-Reported Indicators Survey (PaRIS) initiative and develops its Patient-Reported Efficiency Measures (PREMs) as well as Patient-Reported Outcome Measures (PROMs).

The team in the Ministry working on this project is composed of ten people, therefore preparation of the very portal was outsourced to an IT company and algorithms used for data analysis were created by university experts.

The portal will not require registration so access to information will not be differentiated depending on type of user (e.g. patient, hospital manager, health professional) and information about the profile of platform users will be gathered only indirectly through, for instance, the use of website analytics tools. The issue of specifying information available for different target groups was discussed after the presentation as well as purposes for which the portal could be used (creating rankings of hospitals, guide for patients looking for providers, incentive for managers to improve functioning of their entities etc.). This reflected debates in the Expert Group in the past on ways of reporting HSPA results and their influence on policy making.

3. ASSESSMENT OF EFFICIENCY OF CARE

Jon Cylus (European Observatory on Health Systems and Policies) presented a debrief from the policy focus group on efficiency of acute care which took place the day before (September 10th). This reflection had three phases:

- Diagnosis – is focus on efficiency driven by performance of hospitals or by the external factors?
- Strategies used – a selection of activities was presented, relating not to the hospital care only but also to pre- and post-hospital services in outpatient care.

- Some of these strategies were analysed from point of view of their monitoring which should assess their efficiency.

The final messages from the discussion were the following: • spill overs between different segments of health systems exist but currently available data is not robust enough to describe them properly; • hospital data is the most comprehensive and thus may be used as a proxy for other sectors (e.g. A&E hospital departments for outpatient care delivery); • for assessing efficiency information on interventions (inputs) and on health outcomes is needed, these linkages are not well developed.

The Expert Group members agreed that the forthcoming report on efficiency of care should aim at presenting a multidimensional and exhaustive picture of health care systems. Similarly to the Report on Quality of care (published by the Expert Group in 2016), current measurement gaps in the monitoring of efficiency should be presented. This calls for better use of currently existing indicators and data at hand. The report should also cover the issue of intended and unintended consequences of various actions focused at improving efficiency (e.g. how shortening length of hospital stay impacts primary care volumes of utilisation).

Based on the policy focus group discussion the European Observatory will draft one of the chapters of the report. The next HSPA meeting in December 2018 will provide an opportunity for members of the Expert Group to discuss its content and present suggestions for improvement.

The Secretariat of the Expert Group (Federico Pratellesi, DG SANTE) presented an update to the analysis of replies to the survey conducted by the Expert Group on tools and methodologies to assess efficiency of care. A substantial amount of responses had been received over the course of the summer, which increased the survey response rate to 72%. As a follow-up to the presentation from the last meeting of the Expert Group in Lisbon, The Secretariat's presentation provided an update of the survey's findings in light of the new replies received, with a specific focus on the horizontal findings from the "*data quality and availability*" section of the survey.

The presentation started with a brief account of the structure of the survey, the process that led to its design and the method used to 'cluster' results for the sake of presenting horizontal findings. A recap of the baseline definition of efficiency of care that should be used for the purpose of filling out the survey was provided, and a set of interim conclusions was presented for each section.

The focus on the "*data quality and availability*" section of the survey saw the Secretariat present an account of replies provided by countries to the section's three main queries, which asked respondents to provide information on 1) their country's key set of indicators used to assess efficiency of care, 2) their country's methodological approach to measuring and assessing efficiency (e.g. how indicators and benchmarks are developed, how unwarranted variations and their possible causes are detected, what risk adjustment methods are used, etc.), and on 3) whether a common data collection methodology is adopted across all reporting

units, and what kind of quality assurance mechanisms are put in place to ensure that the data feeding the efficiency assessment are reliable.

Members of the Expert Group generally welcomed the analysis' findings and provided some comments and reflections on how the survey results seem to correctly reflect the perceived need by countries to 1) develop a more sophisticated understanding of how existing efficiency indicators for specific care settings (e.g. hospital care) are interrelated and how they may reflect the impact of interventions that take place outside of that specific setting, and to 2) develop a more exhaustive set of efficiency metrics to ensure that efficiency-enhancing interventions in one setting do not lead to unintended stresses on other areas of the care system which happen to escape detection and measurement due to 'measurement gaps' in the efficiency assessment framework utilised.

Jon Cylus (European Observatory on Health Systems and Policies) provided an introduction to the discussion topic of the next agenda item, which aimed at scrutinising motivations for measuring and improving efficiency and the policy relevance of current monitoring approaches.

Generally it is acknowledged that pursuing efficiency aims at freeing up fiscal space which could also be understood differently as enabling cutting costs, limiting spending or re-allocating funds within the sector. Members of the Group were asked if this indeed was the case or maybe improving efficiency should rather be used to demonstrate good stewardship of health systems.

The experts agreed that efficiency in health is difficult to explain since health services have many intangible consequences which are visible in long-term. That was the reason why in many instances policy makers opt for short-term solutions i.e. limiting expenditure. Efficiency in health care is possible thanks to innovations which are available but need considerable investments. If efficiency is understood as an objective that should be attained principally via reducing expenditure levels, innovation in the long run will be stifled, and higher efficiency levels will not materialize.

The report prepared by the Expert Group will include a part on motivations for measuring and efficiency since these motivations shape the actions taken in this regard.

Lastly, the Secretariat of the Expert Group (Federico Pratellesi, DG SANTE) presented a proposal for the outline and project timeline for the forthcoming Annual report by the Expert Group on tools and methods to assess efficiency of care.

With regard to the former, Members of the Expert Group endorsed the 'modular' structure of the report proposed by the Secretariat and proposed to develop the summary (final) chapter of the report along themes as a means to present a comprehensive overview of how all the findings from the (six) chapters of the report come together organically. After some discussion, members of the Expert Group agreed that the Secretariat would send out to the panel a short addendum to the efficiency questionnaire prepared by the European Observatory on Health System and Policies. The additional questions in the addendum will focus exclusively on the topic discussed by the Expert Group under agenda item 3C – "Motivations

for measuring and improving efficiency and policy relevance of current monitoring approaches". Information provided by members of the Expert Group in this context will be used to prepare the related section of the Annual report.

The proposed deadline for replies to the questionnaire's addendum was set for October 18th. For those members who have not submitted their responses to the efficiency survey yet or wish to revise the responses they have already submitted, the Secretariat asked members to submit their responses no later than end of October 26th, after which new responses will not be taken into account.

With regard to the project timeline for the forthcoming Annual report, the Expert Group endorsed the timeline proposed by the Secretariat, which foresees the publication of the report at the beginning of 2019.

4. AOB

Carina Bjurklint (DG SANTE) informed that from the end of 2018 a new IT tool called AGM will be used by the Secretariat to organise meetings of the Expert Group. A leaflet with information on actions needed from the delegates was circulated.

5. CONCLUSIONS OF THE MEETING

The next HSPA Expert Group meeting will take place on December 5th, 2018 in Dublin, Ireland.