



The Sound and the Fury

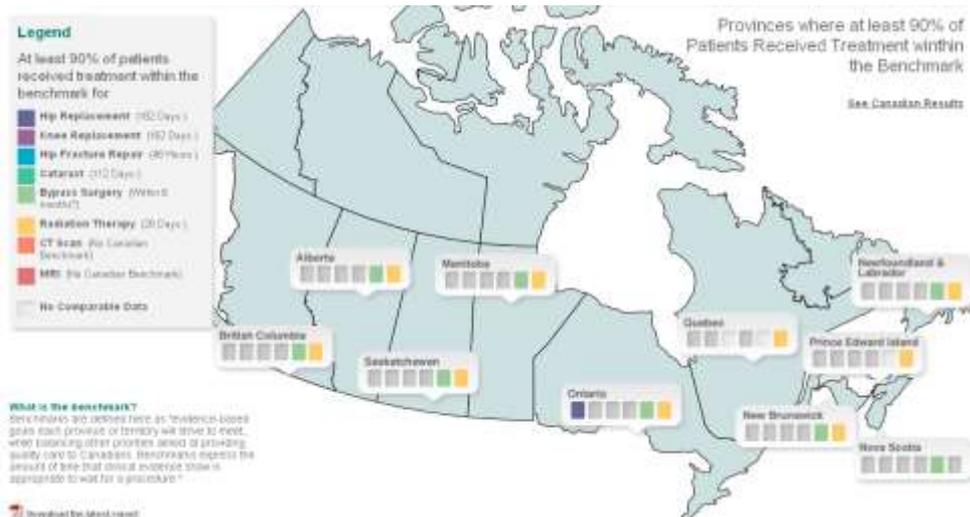
Public Reporting on Health System Performance (HSP)

CIHI's HSP Story....

- What we were doing
- What are doing
- What we're going to be doing soon
- Best Practices?

Not a new focus at CIHI

- Builds on more than 10-years of experience in indicator development and public reporting on HSP
- Health Care in Canada series of reports, sector specific reports, comparative reporting, Hospital Report series (Ontario only), etc...





Who is Reporting on Health System Performance in Canada Now?

Federal Government (PHAC, Statistics Canada, Health Canada)

Provincial/Territorial Governments

National/Provincial Health (Quality) Councils

Regional Health Authorities (outside Ontario) and acute care facilities

CIHI

Professional/Interest Advocacy Groups (Accreditation Canada, Conference Board of Canada, Fraser Inst etc)

Why is CIHI focused on HSP in Canada?

- Increasing awareness and interest by the public in information on health system performance (HSP)
- Much work going on, but uncoordinated and unstructured
 - Many entities reporting at all levels leading to indicator chaos/confusion
- Need to focus performance measurement on key metrics and meet information needs of general public and professionals
- Can be a powerful tool for improvement when done right
- Strong support from a variety of stakeholders

Vision for Hospital-Level Reporting



Respond to a need...

- Had been working on the Ontario hospital report card for years.
- No standardized pan-Canadian measures existed for peer comparisons
- Need for accompanying tools and resources to track, measure and interpret indicator results

Support health system performance measurement...

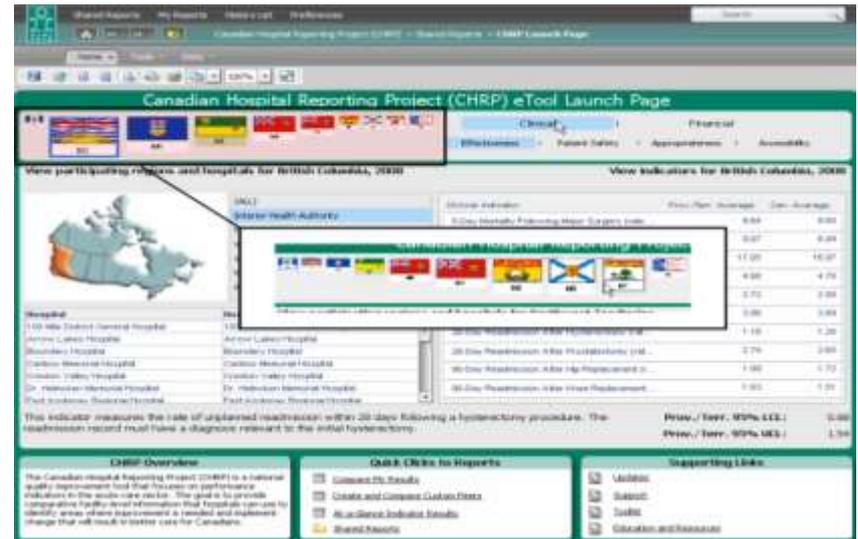
- Provide comparative information about the quality of hospital care
- Foster learning and best practice sharing

Provide more than just indicators...

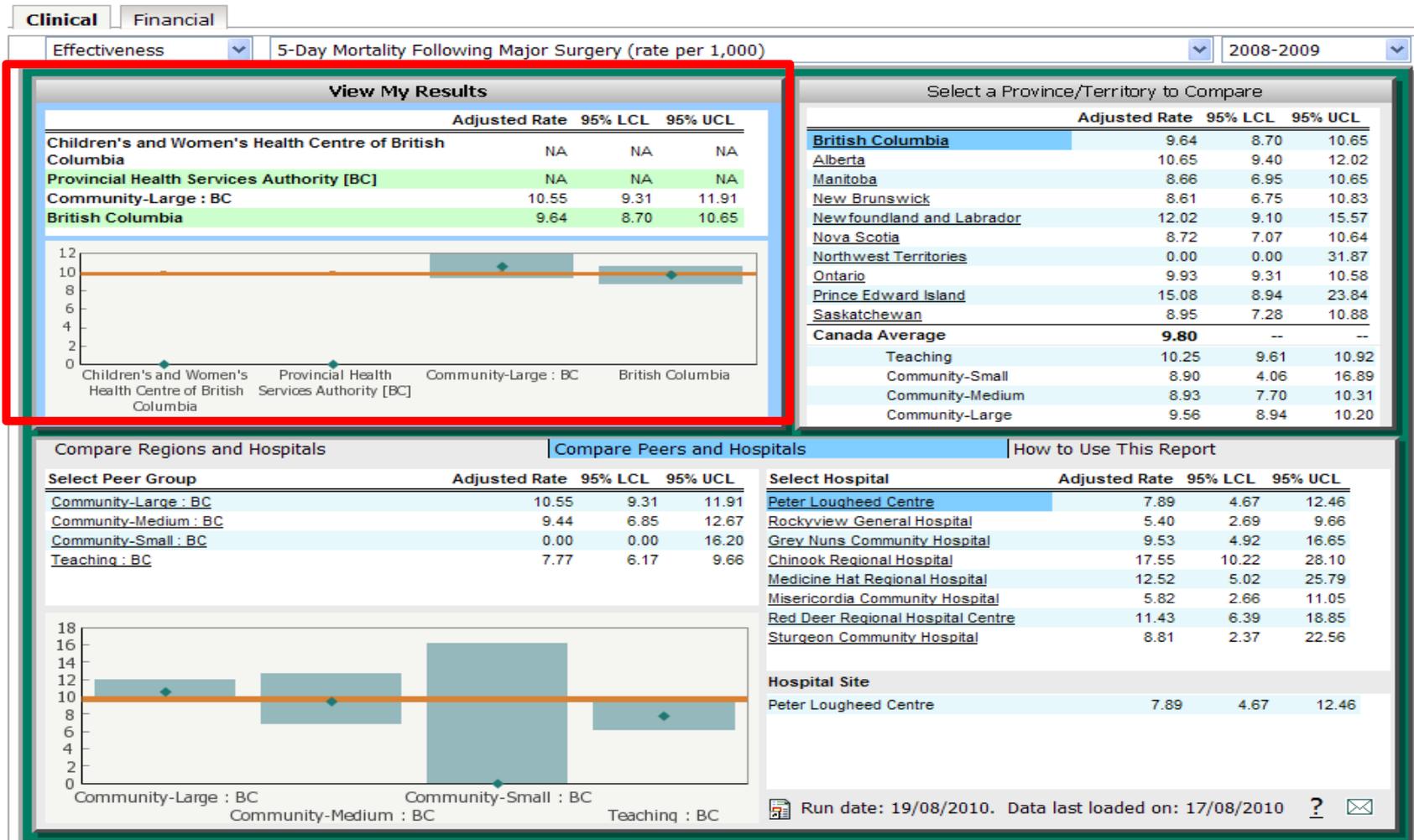
- Offer leading edge performance management tools
- Provide additional information necessary to understand indicator results

CHRP prototype tool - 2010

- Results for 35 clinical and financial indicators
- 580 hospitals participating
- Hospitals assigned to 4 standard peer groups



Participating Hospitals Able to Compare Their Results



CHRP's Public Web Tool



Interactive web-based tool...

- Six financial and 21 clinical indicators
- Hospital and Community Profile information
- GIS/Mapping visualizations for facility-based indicators, community and hospital profile visualizations

The screenshot displays the CHRP Public Web Tool interface. The top navigation bar includes links for 'Home', 'Media', 'Press', 'Contact Us', and 'Feedback'. Below this, there are tabs for 'Types of Care', 'Health System Performance', 'Spending and Health Workforce', 'Factors Influencing Health', 'Quick Stats', 'Standards and Data Submission', 'Events and Education', and 'About CHRP'. The main content area is titled '2008-2010 Health System Characteristics & 2010-2011 Health System Performance'. On the left, a list of indicators is shown, including '30-Day Readmission - Death', '30-Day Readmission - Post-Op', '30-Day Readmission - Surgical', '90-Day Mortality - Major Surg', '90-Day Reads - Non-Operat', '90-Day Reads - Hip/Knee', 'Patient Safety', 'Hospital Hip Fracture (HIF)', 'Nursing Home Falls Rate - Med', 'Nursing Home Falls Rate - Non-Med', '30-Day Trauma - 90% Ind', '30-Day Trauma - 90% Ind', 'Health System Characteristics', 'Efficiency', and 'Productivity'. The right side of the interface features a map of Canada with a search bar and a 'Map' button. Below the map, there are three numbered instructions: 1. Select an indicator, 2. Zoom To Area Of Interest, and 3. View Details.

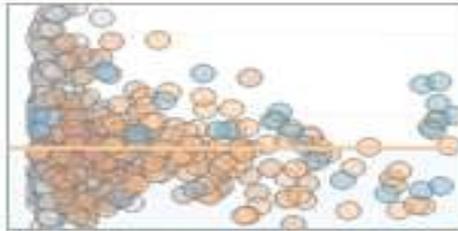
- 1 Select an indicator**
 - The indicators are listed along the left margin.
 - To view data values, hover over Health Regions.
 - Facility values will appear upon hovering in.
- 2 Zoom To Area Of Interest**
 - Use zoom in/out buttons.
 - Click and hold, then drag to pan the map.
 - Or
 - Use the Google Maps search tool (search by city or postal code) to find a...
- 3 View Details**
 - To view data details, hover over a facility point.
 - Click a facility point to view its facility and community profile information below.

Features of CHRP's Public Web Tool



Hospital Results

- Geographical display of Clinical & Financial Indicators
- Facility & Community Profiles
- Peer comparison report
- Facility snapshot (all indicators for a selected facility)



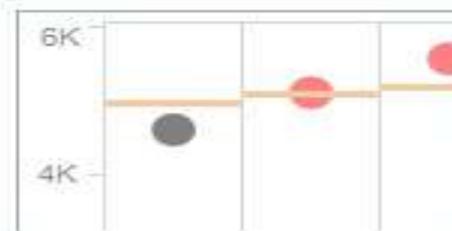
Key Findings

- Summary of results for two clinical and two financial indicators
- Highlights notable trends and interesting results



Performance Allocation

- Intended to help hospitals identify other others from whom they can learn
- Assignment of performance categories (above, within, below) to seven clinical indicators



Financial Trending

- Allows users to explore a selection of financial indicator results for a hospital, region or province,
- Examination of trends over time

Reporting in CHRP included Hospitals of all Sizes

- Over 600 Canadian facilities included in CHRP
- About 50% to 60% of Canadian acute care hospitals are classified as small

Mitigating the Challenges

- Suppression
 - When denominator < 5
 - Privacy considerations
- “Low-volume rates” (unstable) are defined as
 - Denominator between 5 and 49;
 - Or expected value less than 1 with a numerator > 0
- Low-volume rates are highlighted and identified in CHRP tool with cautions
 - Rare events (i.e. low event rate indicators) may be associated with greater variability

CHRP – Public tool



Home > Health System Performance > Indicators > Performance > Hospital Results

How To?
Key Findings
Health System Performance Data
Health System Characteristics Data

Map
Peer Group Report

Select an Indicator

- ▼ Appropriateness
 - C-Section Rate: Exclusions
 - Coronary Angio Following AMI
 - VBAC
- ▼ Effectiveness
 - 28-Day Readmission - AMI
 - 28-Day Readmission - Stroke
 - 30-Day Mortality - AMI
 - 30-Day Mortality - Stroke
 - 30-Day Readmission - Medical
 - 30-Day Readmission - Obstetric
 - 30-Day Readmission - Overall
 - 30-Day Readmission - Pediatric
 - 30-Day Readmission - Surgical
 - 5-Day Mortality - Major Surg
 - 90-Day Readm - Knee Rplcmnt

Peer Group: Community-Small

Province / Territory: New Brunswick

2009-2010

Facility (select one):	Peer Comparison	Adjusted Rate	LCL	UCL
NB Charlotte County Hospital		10.35	8.22	12.87
NB Grand Falls General Hospital		15.10	12.04	18.69
NB Grand Manan Hospital		15.41	8.43	25.86
NB Hotel-Dieu of St. Joseph		11.61	8.90	14.89
NB Hôtel-Dieu Saint-Joseph de Saint-Quentin		12.20	7.74	18.31
NB Lamèque Hospital and Community Health Centre		6.21	0.16	34.58
NB Oromocto Public Hospital		8.48	5.93	11.71
NB Sackville Memorial Hospital		11.64	8.55	15.48
NB Stella-Maris-de-Kent Hospital		9.56	5.57	15.30
NB Sussex Health Centre		7.58	4.41	12.13

About this Indicator

30-Day Medical Readmission (rate per 100)

This facility-level indicator measures the rate of unplanned readmissions within 30 days of discharge for medical episode of care.

Details for Charlotte County Hospital **Facility Snapshot**

Fiscal Year	Adjusted Rate	LCL	UCL
2009-2010	10.35	8.22	12.87

30-Day Readmission - Medical

Legend

Low Volume Rate

Canada Average

Confidence Limit

CHRP media pick up

News (in the first 2 weeks post release):

- Print and Web news articles on CHRP: **61**

Web (in the first 3.5wks post release)

- Visits to the CHRP webTool and pages: **73,425**
- Number of visitors viewing CHRP pages: **68,190**
- CHRP PDF downloads: **5,441**

Context

- CIHI Home Page: average visits per quarter: **86,000**
- Quick Stats average visits per quarter: **9,400**

An absolutely necessary step toward real productive change

Why did it take so long?

Tool increases patient awareness

Hospital performance tool gets a lot of attention

It speaks to transparency and accountability

More info is always better

Hospital CEO has explaining to do

The road map to better hospitals

Reaction from Stakeholders – key themes

- ❖ Support for public reporting on hospital performance
- ❖ The CHRP tool – its design
- ❖ The CHRP tool – its usability
- ❖ The release of CHRP
- ❖ CHRP going forward

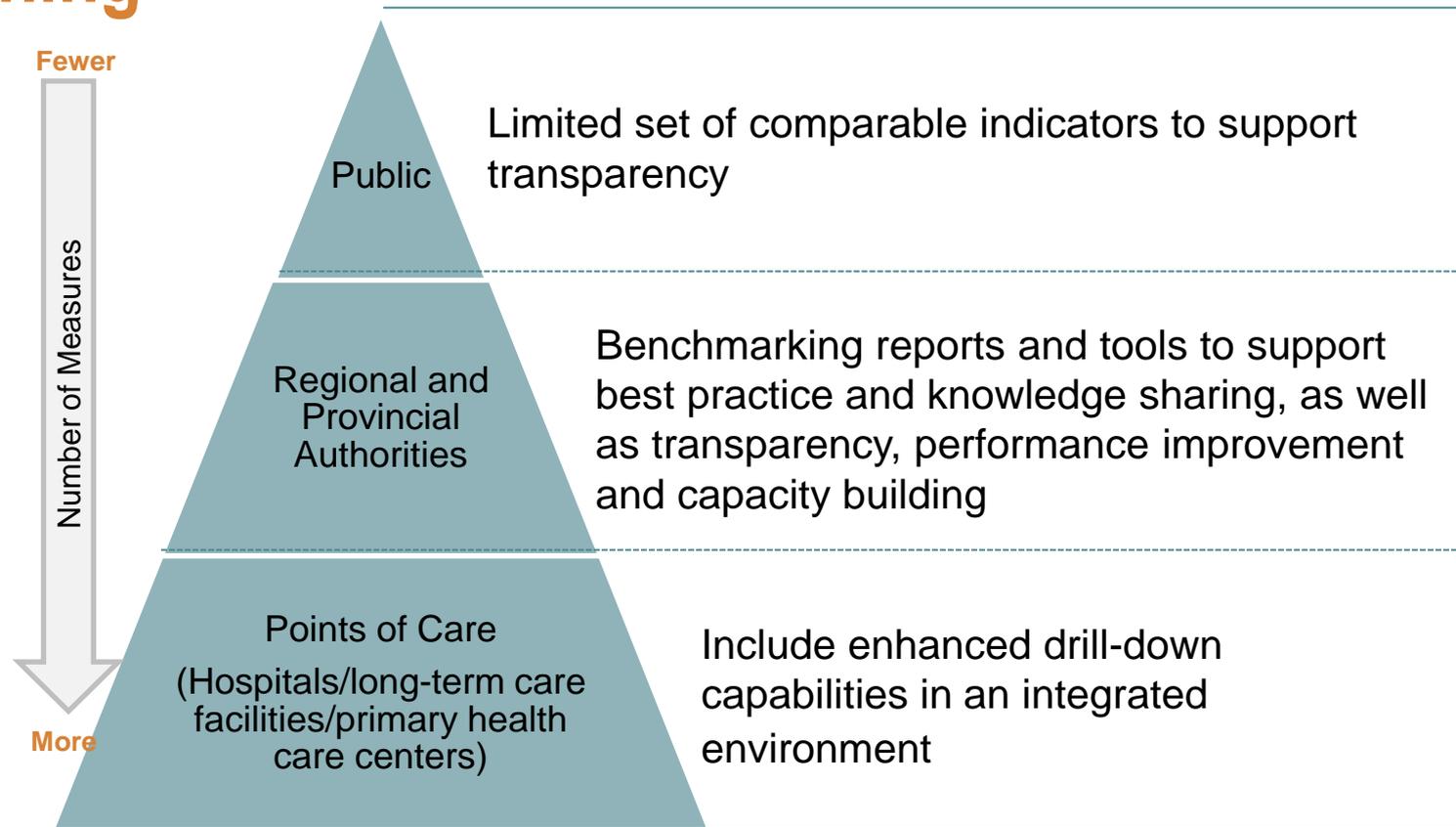


Reaction = Learnings

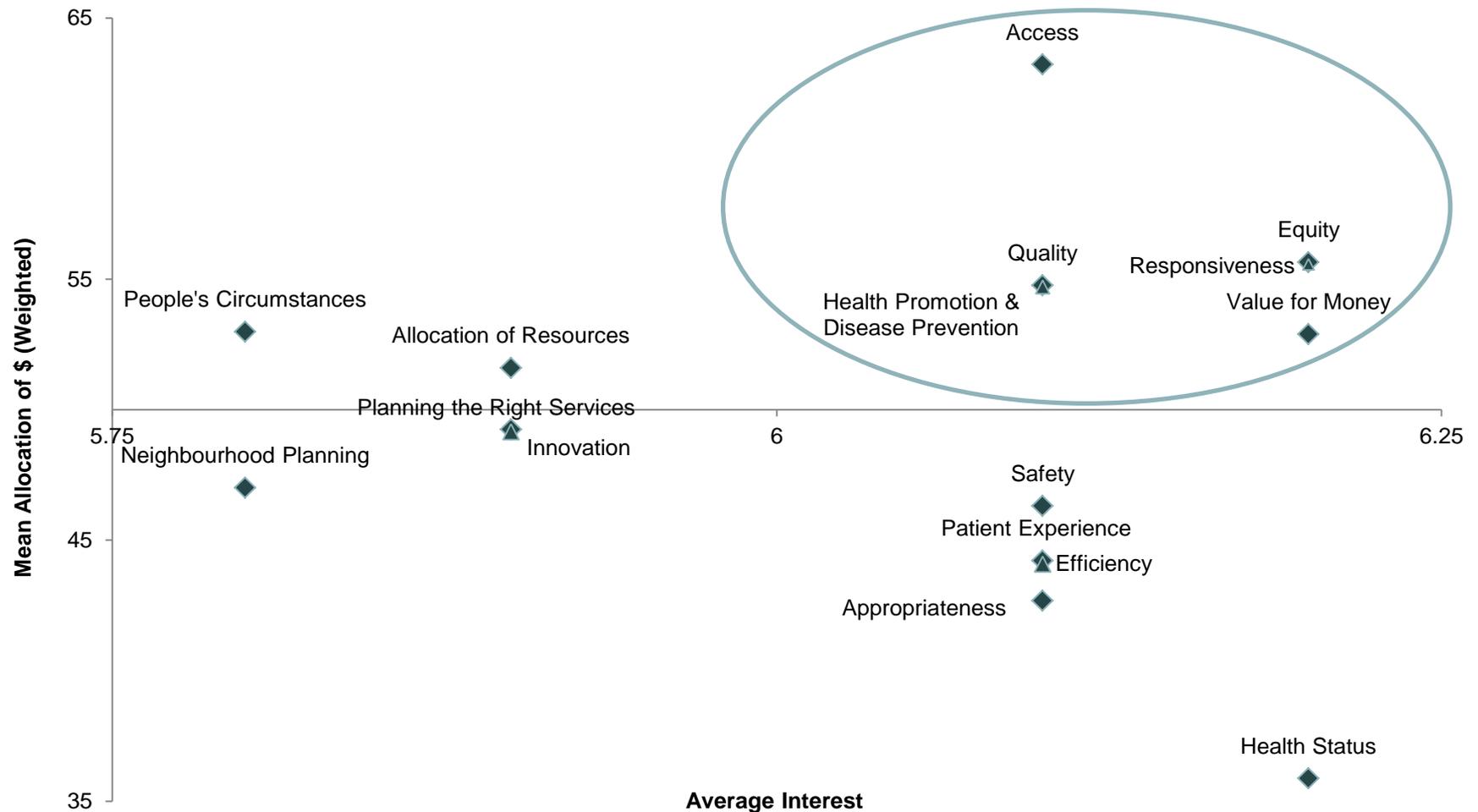
2012 Health System Performance Vision

- Rethinking our health system performance measurement framework
- Building an integrated set of public performance reports supported by an enhanced analytical environment (business intelligence)
 - Will meet information and analytical needs of different audiences in a coordinated and structured way
 - Developing an inventory of indicators to contribute to reducing “indicator chaos”
- Pursuing an analytical agenda - coordinated with partners - supporting HSP improvement efforts
- Initiating activities supporting capacity building of system managers

Our Approach: Integration of HSP Measurement and Peer Learning



Public Consultations: Category Average Interest v. \$ Allocation



Notes: Caution is advised when considering this figure. All allocations were based on within group comparison. The Interest level is the average “post” interest measure for the category.

For the “mean allocation of \$ (weighted) any \$ value above \$50 represents a tendency to give more weight to that indicator. 19

Indicator Selection Process

- CIHI staff inventoried all CIHI's HSP indicators (350) and categorized the indicators according to new HSP Framework dimensions – a short list was developed of 150 indicators
- 3 independent experts reviewed the short list to identify 40-50 key indicators
- Health System Performance Expert Advisory Group
 - CEOs of Health Regions and Health System researchers plus international representation
 - Guided by information from the public consultations
 - Participated in Delphi Panel to select indicators for public website
 - Met face to face to further select a maximum of 15 indicators as well as a limited set of contextual measures to be included in the public HSP website.



Health System Performance Infographic Maker

How well is our health system actually working?



Look at the "big picture" across Canada to see how health systems perform in different provinces, territories, your city or even your local hospital.

Explore the five areas of performance measurement that Canadians told us were most important to them...

Access



Can you get the health services **you need** when you need them? >

Quality of Care



How good is the care you are receiving and **is it safe?** >

Spending



How much do the health services you use cost the system? >

Health Promotion & Disease Prevention



How well is the system working **to help you stay healthy** and avoid getting sick? >

Health Outcomes



Are Canadians actually getting **healthier?** >

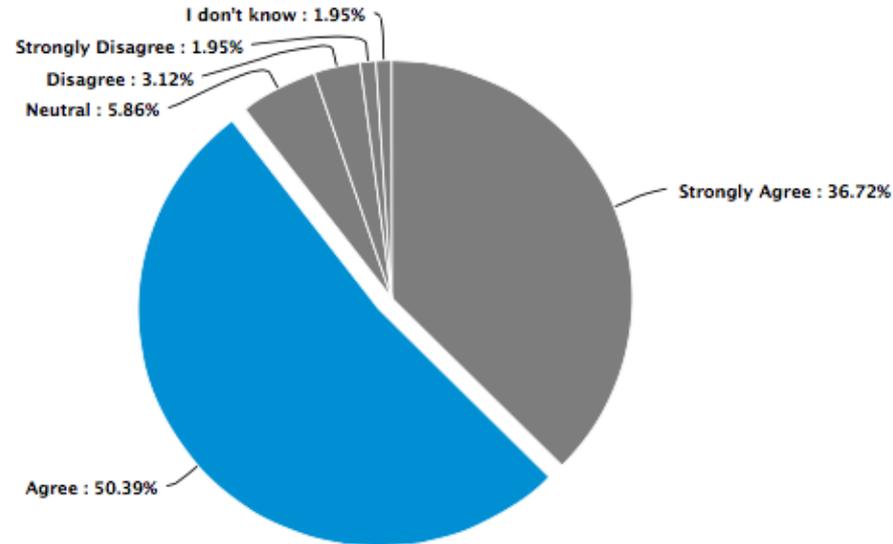
- Province
- City
- Hospital
- Province ▾

What's the story in your

Q11. Design Concept Clear



I understood that the website was designed to help me see how well the health system is performing in my local hospital, city, or province

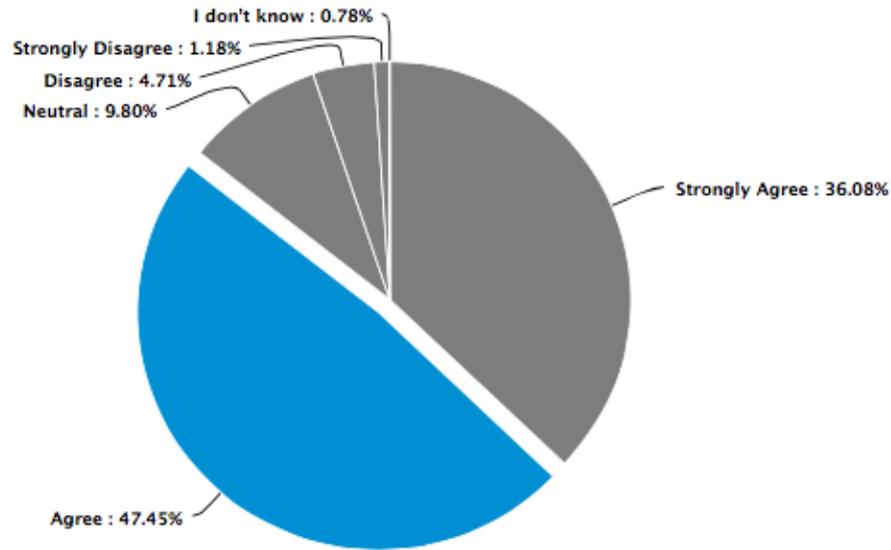


Answer	Count	Percent	20%	40%	60%	80%	100%
1. Strongly Agree	<u>94</u>	<u>36.72%</u>					
2. Agree	<u>129</u>	<u>50.39%</u>					
3. Neutral	<u>15</u>	<u>5.86%</u>					
4. Disagree	<u>8</u>	<u>3.12%</u>					
5. Strongly Disagree	<u>5</u>	<u>1.95%</u>					
6. I don't know	<u>5</u>	<u>1.95%</u>					
Total	256	100%					

Q13. Website Ease of Use



Overall, the website was easy to use

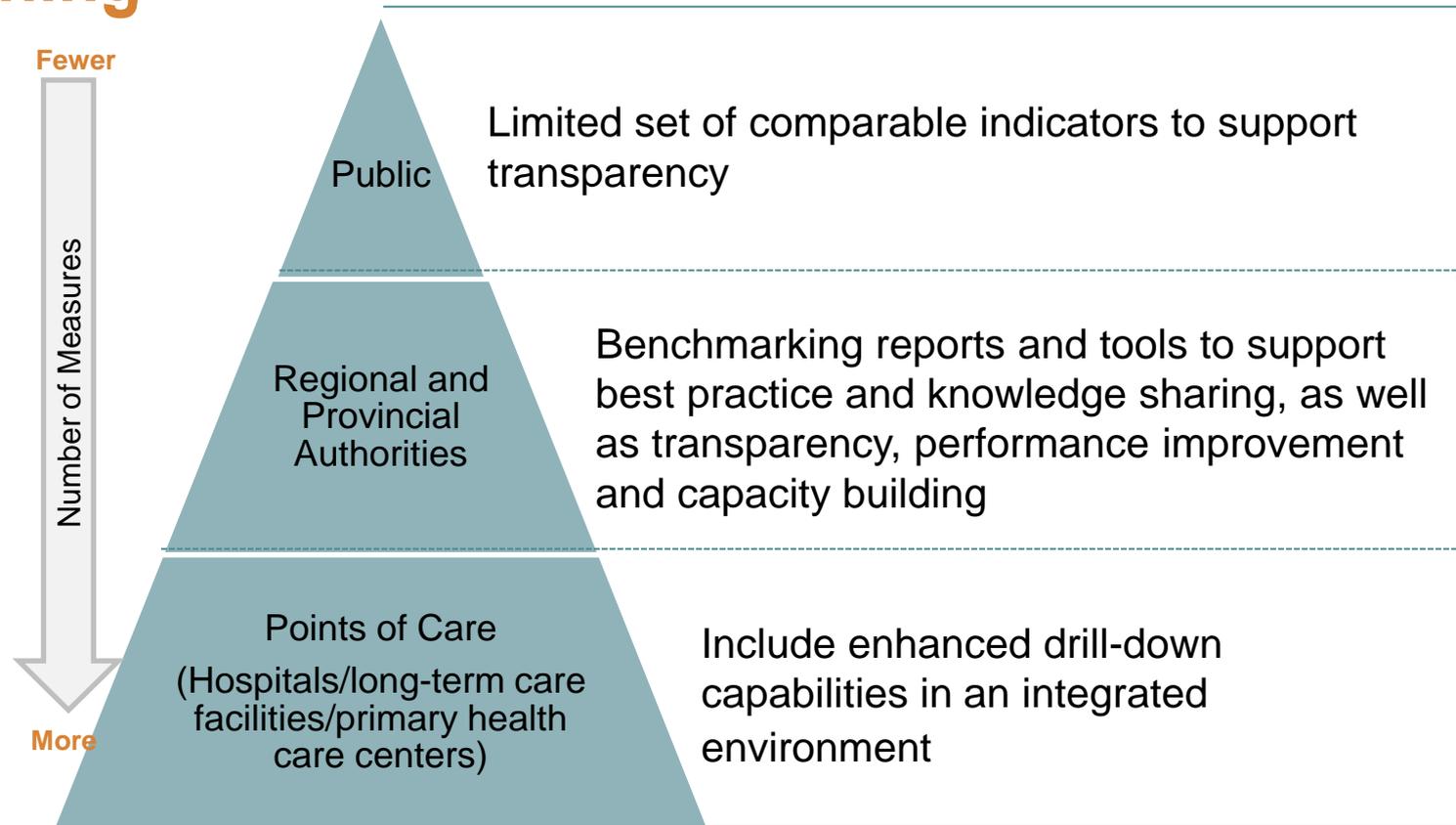


Answer	Count	Percent	20%	40%	60%	80%	100%
1. Strongly Agree	<u>92</u>	<u>36.08%</u>					
2. Agree	<u>121</u>	<u>47.45%</u>					
3. Neutral	<u>25</u>	<u>9.80%</u>					
4. Disagree	<u>12</u>	<u>4.71%</u>					
5. Strongly Disagree	<u>3</u>	<u>1.18%</u>					
6. I don't know	<u>2</u>	<u>0.78%</u>					
Total	255	100%					

Public Website Feedback

- **Stakeholders say it's a brilliant way to communicate with the public**
- **Students have used the website for projects**
- **Decision-makers believe it provides useful and useable information**
- **Easy to navigate and understand**
- **Used to communicate to boards**

Our Approach: Integration of HSP Measurement and Peer Learning



Indicator Selection Process Similar



- CIHI staff inventoried all CIHI's HSP indicators (350) and categorized the indicators according to new HSP Framework dimensions – a short list was developed of 150 indicators
- Health System Performance Expert Advisory Group
- Hospital CEOs and Health Region Representatives
 - Participated in Delphi Panel to select indicators
 - Met face to face to further select a maximum of 35 (+15) indicators as well as a limited set of contextual measures to be included in the Facility/Regional Website.



**Is public reporting
important?**



Yes

*“It does what every good indicator should do.
It makes you ask questions.”*

Hospital CEO

*“The interactive tool is a great way to communicate with the
public on our Health System.”*

Member of general public

*“I have been briefing our Executive Team on the CHRP project
and have pulled several reports to help them understand our
region’s performance versus province/nation. This has proven
to be a useful exercise...”*

RHA Quality and Decision Support Consultant



Public Reporting on Health System Performance....

*And then is heard no more: it is a tale
Told by an idiot, full of sound and fury,
Signifying nothing.*

Or

*...it is a powerful tool, that creates
trust, transparency and change*

HSP Framework

