Title of the course: PERFORMANCE, EVIDENCE, AND IMPROVEMENT IN HEALTH SYSTEMS

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Dates: October from 22th to 26th, 2012.

Goals: To provide students with an understanding of the relationships between performance measurement, evidence use, and improvement activities at the policy and institutional level in health systems and to allow students the opportunity to consider efficient policy design to improve health services performance at the Ministerially/Regional/Institutional level. Although the course draws heavily from examples in Canada, it will also cover examples from other jurisdictions and casework in class will focus on Italian examples to be developed by the students.

In particular the course focuses on the evolution of information use in health policy, whether population health data used for planning, performance data used as part of accountability systems, or clinical evidence integrated into decision-making. These trends in policy-making are positioned as part of the development of the New Public Management school of public administration and the emergence of stewardship as an organizing principle in health authorities and ministries of health. For each of these foci, the course builds off of fundamental theoretical literature and then provides insight into Canadian case studies in which the course developers have had direct experience as policy-makers.

The course starts with an overview of attributes of successful health services systems and the relationship between these systems and elements of New Public Management, Stewardship, and Value Analysis (session 1). This session touches on evaluations of stewardship functions at an Ontario Ministry, the development of cross-cutting performance management processes at the Ontario Cancer Agency, and the introduction of value-based principles into payment reform in Ontario. Session 2 considers the growth of use of data for planning and performance management
at health systems, cancer system, hospital system, and disease site levels in Ontario and includes evaluations of performance measurement efforts. Session 3 reviews efforts to introduce evidence into policy at the system and institutional level including efforts at a macro-level (evidence standards at an Ontario ministry), the meso-level (the creation of a link between evidence development and coverage of services in Ontario), and efforts to improve evidence uptake by providers through Cochrane collaboration and other efforts based at Ottawa and McMaster Universities. Session 4 reviews the role of different bodies in promoting quality including boards, clinicians and alignment across organizations seeking to promote quality based on important studies from Ontario and Quebec.

**Session Outline**

**Session 1**

Session 1 provides an overview of the major determinants of health system performance including those noted in recent cross-national studies by Baker, Ham, and others. This session will explore the role of a number of hard and soft factors in supporting high performance in health services and relate these factors to broad trends in the organization of the public sector such as New Public Management, Stewardship, and Value Chain Analysis.

At the end of this session, students should be able to identify the impact of broad trends in health system management, their relationship to different types of evidence, and the relative importance of different health policy levers in their own health systems.

**Readings on high performance health systems**


**Readings on the growing importance of evidence in managing health systems**

1. Golden B. The Integrated Client Care Project and Value in Healthcare [FULL REFERENCE]

**Session 2**

Session 2 provides a more detailed examination of the policy levers that governments and agencies may deploy to improve health system performance including health system performance
measurement, performance management, and incentives. Students will have the opportunity to model the impact of a suite of policies and consider the challenges in implementing and managing policies to improve performance. This session will consider the administrative, policy, and political issues in implementing these systems and compare then against the growing trend in health policy to shift risk away from providers.

At the end of the session, students should be able to identify the goals behind different performance measurement systems in their own health systems, describe the relationship between these goals and performance measurement frameworks, and describe the pitfalls and successes of performance measurement frameworks.

Readings on health system accountability and incentives

Readings on health system performance measurement and management
3. Tu J FULL REFERENCE The CCORT Project.
5. Ten AsbroekFULL REFERENCE

Session 3
Session 3 reviews practical issues in developing quality measures, the reliability and usefulness of these measures, and the relationship between measurement and quality improvement efforts from the governance level to the clinical frontline. This session will also touch on critical issues in the sustainability and scalability of quality improvement systems.
At the close of this session, students should be able to describe and apply common techniques in indicator development and understand and develop strategies to mitigate gaming of performance measures. They should also be able to develop institutional policies to increase the uptake and value from performance measures.

Readings on the development and management of indicators
5. Current RAND report on performance measures FULL REFERENCE
6. Smith P. Gaming and indicators review. FULL REFERENCE

Readings on the integration of measurement and quality improvement
3. Baker GR and Denis JL. Governance for Safety FULL REFERENCE
4. Scalability FULL REFERENCE

Session 4
Session 4 provides a more detailed look at how evidence may be introduced into policy at several levels, including broad policy design in government, coverage and reimbursement decisions, and institutional management. In each case, the focus is linking evidence to better decision-making and better performance.

At the close of this session, students should be able to describe the state of evidence on introducing evidence into policy and administrative decisions in health systems and to choose an appropriate set of tools to increase evidence use in their current positions.

Readings
2. Lavis J. Perceptions of evidence FULL REFERENCE
3. Lavis J. Different mechanisms to increase evidence use
evidence development. The Ontario Experience. International Journal of Technology
Assessment in Health Care, 2011;27:159-68.

5. Dobrow et al. Evidence based health policy FULL REFERENCE

6. Browman and Brouwers. PEBC. FULL REFERENCE

7. Grimshaw J. Systematic Review of Evidence on Interventions to improve quality. FULL
REFERENCE

Session 5
Session 5 provides the opportunity for students to consider additional issues in performance
measurement and management and will include case presentations from students. This final
session will cover the defining role of strategy in performance measurement, the importance (and
limits on) innovation, and the ability of performance measurement to stimulate new policy
development. This integrative session will allow students the opportunity to bring together a
number of the issues raised during the class.

Session five will also provide students the opportunity to present a case on better use of
performance data from their health systems or current employment.

Readings
1. Yap C, Siu E, Baker GR, and Brown AD. A Comparison of System-Wide and Hospital-
Specific Performance Measurement Using the Balanced Scorecard Model. Journal of
Healthcare Management, 2005;50:251-263
2. Siu E, Levinton C, Brown AD. The value of performance measurement in promoting
Strategy with Shared System Priorities in Ontario, Canada. Health Care Management
Review, 2006;3:34-44
5. Fisher E, Goodman D, Skinner J, Bronner K. Health Care Spending, Quality and
Dartmouth Institute for Health Policy and Clinical Practice. 2009.