

# Internal Hospital Accountability

Nancy Kraetschmer, PhD MBA

Approaches to Accountability

November 15, 2012

# Acknowledgements

Research team:

- Raisa Deber
- Janak Jass
- Cheryl Woodman\*
- Irene Koo\*
- Andrea Thompson\*
- Seija Kromm

\* Students who worked on the research project

# Purpose of Research

- Examine internal hospital accountability approaches and requirements reporting across hospitals within Ontario
- Examine the nature of the relationship between accountability and performance

# Methods

- Literature review
- Key informant interviews
  - 3 hospitals
- Survey of the strategic priorities of Ontario acute care hospitals
  - Section on performance and accountability reporting

# Population Surveyed

- Characteristics
  - Number of CEOs: 116
  - Number of respondents: 53 (45.7%)
  - Response rate by type of hospital:
    - Teaching: 71.4% (10/14)
    - Large Community: 54.4% (31/57)
    - Small Community: 26.7% (12/45)

# Results

## Themes:

1. Focus
2. Duplication of Requirements
3. Capacity and Capability
4. Quality and Use of Data

# Theme: Focus

- Many organizations found accountability/performance reporting requirements to be burdensome and in need of coordination with other providers, more consistency from year-to-year, and prioritization
- 53% indicated that there are accountability or performance measures that would be valuable but are not captured by current requirements e.g., cross-system measures
- Focus needs to be put on the “vital few” measures rather than the broader focus that is currently occurring

*“Measurement and reporting is not well coordinated and handled on an organization-wide basis....needs to be more focused and selective”*

*“Ontario needs to articulate the responsibilities of MOHLTC, CCO, HQO, LHINs in a coherent way.... excessive structure and no coherent agenda. Consequence is multiple siloed information requests to hospitals”*

# Theme: Duplication of Requirements

- 85.7% of respondents indicated that there are performance measures that their organization is required to report to two or more agencies (e.g., MOHLTC, LHINs, HQO, CCO)
- Overlapping reporting requirements can have varying levels of impact, with responses including “minor impact”, “burdensome”, and “confusing due to lack of clarity and coordination”

*“Increasing reporting requirements is necessary but there is a complete lack of integration of systems and requirements”*

*“Subtle and not so subtle differences in data definitions results in a completely inefficient system”*



# Theme: Capability and Capacity

- 58% of respondents indicated that their hospital does not have sufficient resources dedicated to capturing, analyzing and reporting performance data
- 75% do not use any type of business intelligence system to capture and report performance data.
- As the system moves to increased reporting requirements, the resource constraint will become even more acute

*“Performance and accountability reporting requirements are increasing rapidly without a corresponding increase in budgets to allow for this”*

*“Data extrapolation can be arduous - our systems are not fully integrated - organization size impacts analysis and extrapolation of small IS/IT, Health Records”*

*“Funding only permits us to capture and report the data, we don't have staff with the needed time and knowledge to analyze the data”*

# Theme: Quality and Use of Data

- Data should be used to drive quality improvement
- There needs to be enhanced data quality, efficiency, and collection
- Recognize that sudden improvements in performance with respect to certain indicators may not be a true improvement but just an improvement in how the data is collected and reported
- Reference was also made to “gaming” indicators

*“Key is not in collecting and reporting on indicators but using the information to drive quality improvement”*

*“Funding structures do not necessarily support a systems quality approach/incentive”*

*“Struggle with ‘old’ data being in the public domain when more recent/real time data that demonstrates a different picture and is more meaningful internally“*

# In Summary

- Hospitals are required to report on a significant number of measures, some of which overlap or are reported to multiple organizations
- Most hospitals do not have sophisticated reporting tools capture and report performance data
- General consensus that the system should move to streamline the current performance measures and look to introducing measures that focus on system integration and support the goals of the system