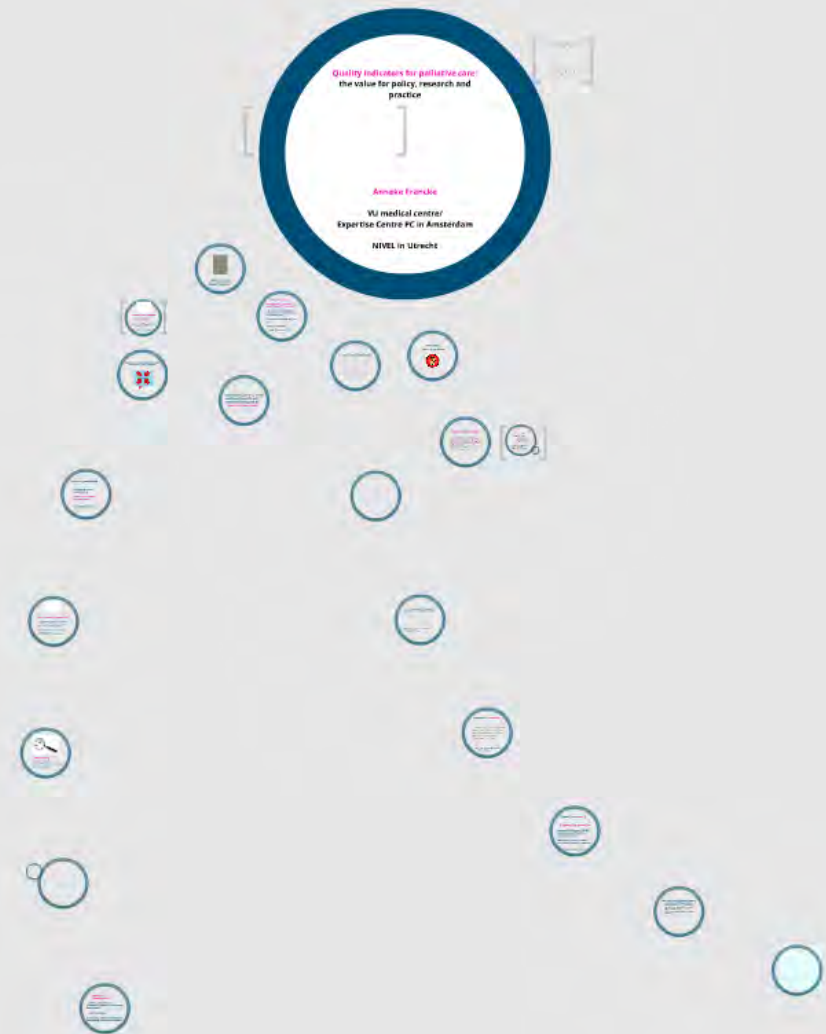


Objective 4: to compare the QoC

- > over periods
- > between care organizations or care networks
- > between countries

research chain: QI measurements-
analysis-remaining questions-
additional (qualitative) research



**Quality indicators for palliative care:
the value for policy, research and
practice**

Anneke Francke

**VU medical centre/
Expertise Centre PC in Amsterdam**

NIVEL in Utrecht



Did you ever see a list of best scoring care providers?



Example of a process DQ

Rank	Hospital Name	Score
1	Atrium Medisch Centrum Heerlen/Brunssum/Kerkrade	22
2	Canisius-Wilhelmina Ziekenhuis Nijmegen	30
3	Wilhelmina Ziekenhuis Assen	84
4	Slingeland Ziekenhuis Doetinchem	7
5	Diakonessenhuis Utrecht/Zeist/Doorn	1
6	Ziekenhuis Rijnstate (Alysis Zorggroep) Arnhem (Velp)	54
7	Franciscus Ziekenhuis Roosendaal	77
8	Zorgsaam Ziekenhuis Terneuzen/Dordrecht/Hulst	21
9	Ziekenhuis Zevenaar (Alysis Zorggroep) Zevenaar	68
10	TweeSteden Ziekenhuis Tilburg/Waalwijk	27
11	Onze Lieve Vrouwe Gasthuis Amsterdam	5
12	St. Elisabeth Ziekenhuis Tilburg	37
13	St. Annaziekenhuis Geldrop	14
14	Ikazia Ziekenhuis Rotterdam	42
15	Rode Kruis Ziekenhuis Beverwijk	26

Did you ever see a list of 'best scoring care providers' in journals or news papers?

**Did you ever consult a public website with
'choice information' for patients?**



**DID YOU REALIZE THAT THESE
BEST PRACTICE LISTS AND
WEBSITES WERE BASED ON
QUALITY INDICATORS??**

FOCUS of my PRESENTATION

**Definition and main
objectives of QI**

**Value of QI for practice,
policy and research**

Some examples of use of QI



What is a quality indicator (QI)?

An explicitly defined, measurable item referring to quality of outcomes, processes or structures of care

QIs are analyzed and reported at an aggregated level
(e.g. level of care organizations)

Example of an outcome QI:

% of patients who feel depressed

**Numerator: N of patients with NRS
depression score of 4 or above
(average over 3 days)**

**Denominator: total N of patients
for whom this indicator is measured**

(from Dutch set QI for PC)

Example of a process QI:

Proportion with more than one hospitalization in the last 30 days of life

Numerator: Patients who died from cancer and had > 1 hospitalization in the last 30 days of life

Denominator: Patients who died from cancer

Performance standard: < 4%

(from QI set of Earle et al.)

Example of a **structure QI**:

The organisational unit can show that a doctor can be called 24 hours/7 days a week and that the doctor will react within 10 minutes and be on location within 30 minutes

(from Dutch national quality framework for long-term care)



Objectives of QI

- > To improve the QoC
- > To control the QoC
- > To enhance transparency of the QoC
- > To compare the QoC

Objective 1: To improve the QoC

Fasen Indicatorenproject

**> OI help to set priorities for:
governments, managers, professionals,
client councils**

> OI are 'eye openers'

**cyclic process: measurements-analysis-
dialogue-improvement-measurements**

Objective 2: to control the QoC

'Controlling' parties, like:

- * supervisory councils of care organizations
- * Health care inspectorate

Cyclic process: measurements-
analysis-control-advises-
improvements-measurements

Objective 3: to improve
transparency of QoC

E.g. important for:

- > Ministry of Health
- > health care users
- > health care insurers

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CONCLUSIONS + challenges

Much to gain by using QI:
for research, policy and practice

Challenges:

Combining QI measurements with complementary
ways of measuring QoC

Choosing an international minimum set



CONCLUSIONS + challenges

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MORE INFO?

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