

International Conference on Evidence-based Policy in Long-term Care  
London | 5 - 8 September 2012



# From public reporting to change? A map of quality management in LTC in Europe

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The research leading to these results has received funding from the European Community's Seventh Framework Programme FP7/2007-2013 under grant agreement No. 242058.

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# Overview

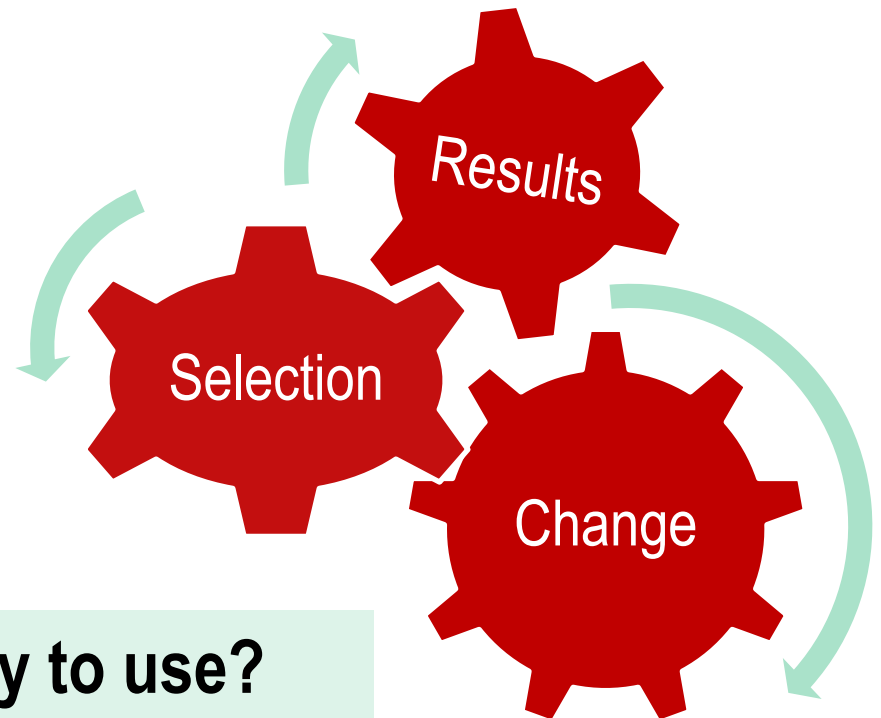
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- Why public reporting?
- Background: Measuring quality in LTC
- Overview of public reporting in six European countries
  - Aims
  - Scope and methodology
  - Findings
- Common trends in public reporting
- Impact of public reporting on quality of LTC
- Concluding remarks



# Consumerism as a driver for public reporting

- Vouchers, cash benefits, quasi-markets empower users/care managers to act as ,consumers of care' i.e. selecting providers
- Quality indicators are meant to
  - steer choices of users  
**(selection pathway)**
  - incentivize providers to improve their services **(change pathway)**  
>> cf. Berwick, 2003



**But: which measures for quality to use?**



# Measuring and displaying quality information in LTC

- ✓ Outcome indicators in LTC differ substantially from health care (including e.g. quality of life, dignity)
- ✓ Processes may matter more than actual outcomes
- ✓ Informal care makes families co-producers and co-financers of LTC
- ✓ LTC as an 'experience good'

Measurement is not sufficient to induce improvements. Rather, clear objectives, collaboration, and internal quality management systems in care homes are required.



# Different European pathways into public reporting

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**Aims:** Review existing public reporting of LTC quality in Austria, UK (England), Finland, Germany, the Netherlands and Spain (Catalonia) - describing and assessing:

- **Incentives for providers**
- **Dimensions of quality and data collection methodologies**
- **Impact on quality of LTC and user/provider behaviour**



# Scope and methodology

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## What are public reporting mechanisms?

“Initiatives in which intra- or inter-provider information on quality indicators is gathered on a regular and systematic basis and made available to users or their relatives, purchasers of care, general public and other relevant stakeholders.”

**Data** was collected via secondary data sources (e.g. peer-reviewed literature, grey literature, internet websites, national legislation) by national experts, describing existing public reporting mechanisms in residential care and their impact.



## LEGEND

- SCOPE AND VOLUNTARY/COMPULSORY
- HOW DATA IS COLLECTED
- TYPE OF INDICATORS
- DIMENSIONS COVERED
- DISPLAY OF INFORMATION

## Quality Framework for Responsible Care+Consumer Quality Index (CQI)

- Compulsory for residential + home care
- User survey, self-assessment by providers
- Structures, processes and outcomes.
- Quality of care, quality of life
- 5 'stars' in relation to the mean of all indicators

## www.palveluvaaka.fi

- Voluntary for residential care
- Internally collected data for RAI
- Structures and outcomes
- Quality of care, quality of life
- Numerical indicators: internet

## Essential Standards of Quality and Safety

- Compulsory for residential +home care
- Self-assessment by providers, user feedback and carers, inspections
- Structures, processes and outcomes
- Quality of care, quality of life, management
- Check-list: internet, detailed reports

## Pflege-Transparenzvereinbarungen

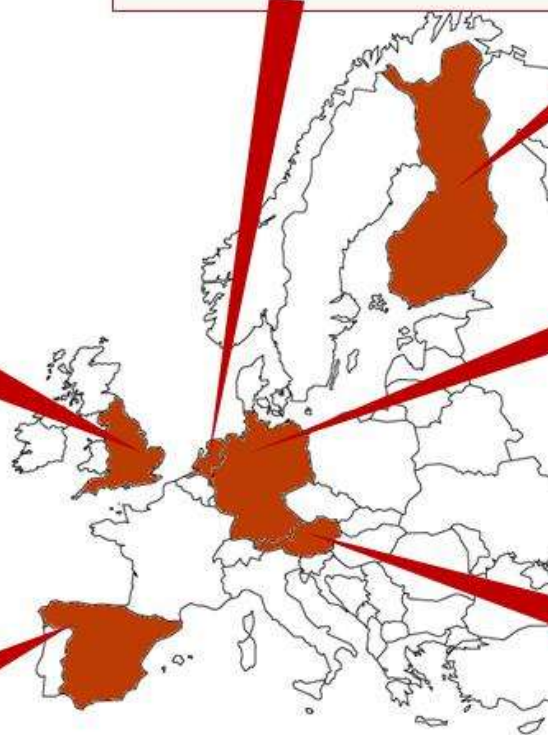
- Compulsory for residential + home care
- Inspections, user survey
- Structures, processes and outcomes.
- Quality of care, quality of life
- 5 unstandardised grades: internet, providers' facilities

## Pilot Benchmarking

- Pilot for nursing homes (health care)
- Internally collected data for Minimum Data Set
- Structures and outcomes.
- Quality of care
- Numerical indicators: presented at a conference












## National Quality Certificate (NQZ)




- Pilot – voluntary for residential care
- Inspection by 3rd party
- Structures, processes and outcomes.
- Quality of care, quality of life, economic sustainability
- Internet (future), providers' facilities, written reports





# Different approaches to a similar problem

	Austria	Finland	Germany	Spain	The Netherlands	UK
<b>Compulsory</b>	● ○ R H	● ○ R H	● ● R H	○ ○ R H	● ● R H	● ● R H
<b>Data collection</b>	third party	internal (RAI)	users, third party	internal (RAI/MDS)	users, providers	users, carers, providers, third party
<b>External inspections</b>	✓		✓			✓
<b>Dimensions</b>	S, P, O	S, O	S, P, O	S, O	S, P, O	S, P, O
<b>QoL</b>	✓	✓	✓		✓	✓
<b>Display</b>	  		 		  	 

**Legend:** ● compulsory; ● voluntary; ○ not specified; R- residential; H- home care; S, P, O – structural, process, outcome quality; QoL – quality of life;  - internet;  - reports;  - facilities



# Common trends in public reporting for LTC

- **Different levels** of statutory reporting mechanisms (UK vs. Spain)
- Public reporting mechanisms do not always go hand in hand with **user choice mechanisms** (see e.g. AT, DE)
- Public reporting more likely to be implemented in **residential care** – easier to measure?
- Going **beyond structural indicators** (e.g. staff ratios) towards including outcome indicators on quality of life (e.g. choice of meals)
- Public reporting as a **steering mechanism** for public authorities >> bring about changes in the way quality is assessed and measured (NL, AT, DE)
- **Top-down implementation** by public authorities (see e.g. NL, AT)



# Limited impact on quality of care (1)

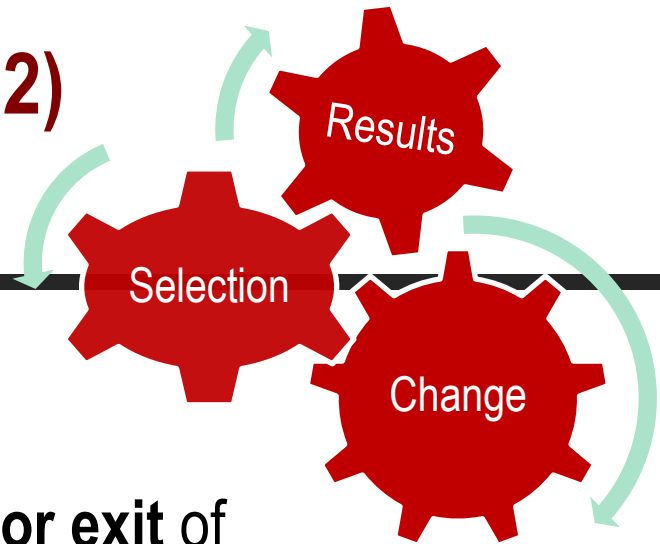


## Selection pathway

- Users as consumers of care? **Limited choice**, unwilling or unable to change provider
- **Little user awareness** (e.g. UK):  
Only 15% of users in the UK aware of public reporting, with only 1% using information displayed (as opposed to very high levels among local authorities/staff) (cf. CSCI, 2009).
- **Internet the best medium?** Only 25% of older people in the EU (65-74 ys) access the internet at least once a week.



## Limited impact on quality of care (2)



### Change pathway:

- Limited incentives and **barriers to entry or exit** of LTC providers
- **Limited incentive for signalling:** only 20% of German care homes adhered to voluntary public reporting; in Austria only 20% have certified quality management in place
- **Limited evidence-base for indicators** has caused litigation processes in Germany and the Netherlands



# Concluding remarks and outlook

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- Public reporting can be an important tool due to:
  - ✓ LTC being an experience good
  - ✓ Limited 'trial and error' by users – changing provider is ,costly'
- Public reporting in LTC is still in its early stages...

## Future relevance?

- ✓ Increasing LTC user demands
- ✓ Quality management being increasingly considered by regulators
- Remaining difficulties in measuring quality in LTC and lack of incentives



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Thank you very much for your attention.

For further information:

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