CONFERECE ABSTRACT

The “Results Centre” of the Catalan healthcare system: A tool for integrated care

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Introduction: Improving the quality and transparency of the healthcare government has an impact on the health of the population through policies, management of organizations, and clinical practice. Moreover, the comparison between healthcare centres or territories on a population basis, and the transparent and open feedback of results to policy makers, managers, professionals and citizens contributes directly to improve results.

Description of policy context and objective: The Results Centre of the Catalan healthcare system measures and disseminates the results achieved by the different healthcare centres in order to facilitate a co-responsible decision making process, to improve the quality of healthcare provided to the population of Catalonia. It favours the benchmarking between defined geographical local areas and healthcare centres and share best practices in a transparent way.

As a result of the development of a chronic care and an integrated health and social care strategy in Catalonia, there is an increasing need to introduce a population based shared outcome framework with objectives and indicators which could act as drivers for integration with an increasing “triple aim” orientation

Targeted population: For citizens, the Results Center promotes a wider and better understanding of the field of health, and allows them to interact with the healthcare system and participate in decisions that affect their health. For healthcare centres, it allows them to compare the results achieved, identify and share best practices, and look for opportunities for improvement and cooperation between institutions. For the health administration, the Results Centre respond to the demand for transparency in health policy decisions, as well as for accountability in the use of resources.

Highlights: Since 2012, an annual report has been produced for hospitals, primary care, long-term care, mental healthcare, public health activities, and territory with population based indicators. For each topic, around 60 quality indicators are measured, identifying the provider and the territory. Some of the indicators are especially relevant for integrated care such as prevalence of people with complex healthcare needs or in advanced chronic disease condition,
rate of avoidable emergency admissions related to a range of selected chronic conditions, readmission rates related to selected chronic conditions, and others.

The experiences of centres with better results, and the opinion of experts are incorporated, and a version for citizens is published. The “territory report” offers a picture of population-based health, and a tool to monitor changes due to integrated care policies. All detailed results are available in tables, together with technical definitions (http://observatorisalut.gencat.cat), and in open data format.

**Comments on transferability:** This project is possible due to the high level of development of health information systems in Catalonia, and to the maturity and compromise of the healthcare sector. The Chronic care Program and Integrated Health and Social care Plan is working in partnership with the Results Centre to continuously improve the project, incorporating new indicators significant for the evaluation of integrated care (i.e. “high needs, high cost”) and spread this vision of integrated care with a population based orientation.

**Conclusions:** Engaging healthcare professionals is essential to move towards better clinical practice by identifying and sharing best practices. These reports are used among managers and clinical and other professional leaders as a tool for benchmarking, and among commissioners to facilitate better understanding of the territorial performance. This is a pioneering initiative in Spain, and is aligned with the most advanced countries in terms of policies of transparency and accountability.

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**Keywords:** results centre; transparency; benchmarking; integrated care; population health