



European Practice Assessment - results from the evaluation studies

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Sara Willms, Björn Broge, Katja Götz, Joachim Szecsenyi

Dept. of General Practice and Health Services Research University Hospital Heidelberg, Germany

AQUA – Institute for Applied Quality Improvement and Research in Health Care Goettingen, Germany

Outline

- Introduction / European Practice Assessment
- Indicators for organisation/practice management (EPA – processes and role of the visitor)
- Results from evaluation studies in Germany



European Practice Assessment (EPA) -aims-

Self-explanatory to doctors, Usable without specific training on quality management, High impact on change of performance, Scientific methods and instruments.

One key concept: Quality Indicators
 developed 2002-2005 by an international collaboration of research groups



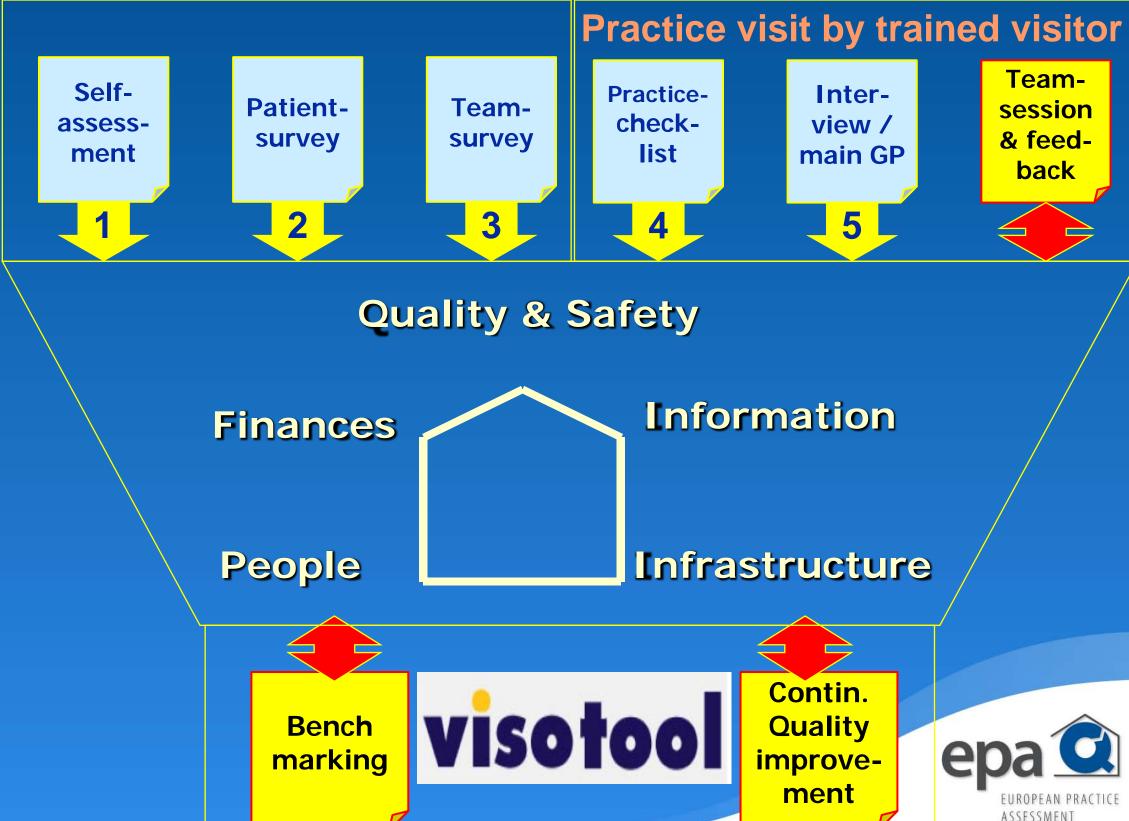
Main functions of Quality Indicators in EPA

Close the gap between expert knowledge and routine daily practice (e.g. what does a quality policy mean for a practice?)

Identify fields where improvement is possible

Show results of quality improvement projects

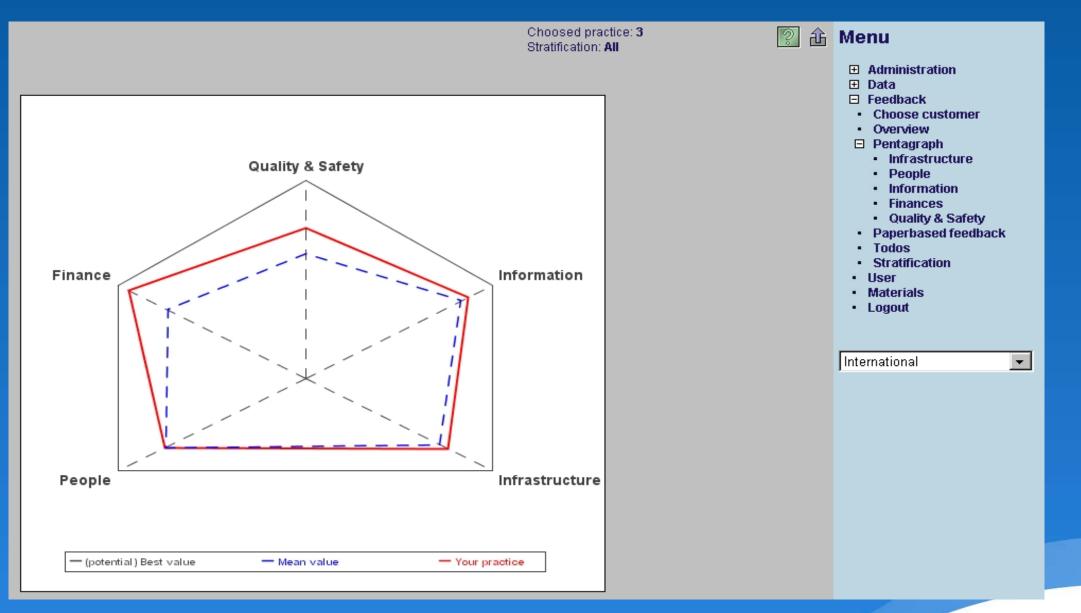




Practice visit by trained visitor (peer or nurse)



Feedback with Visotool





Dimension Domain People "Perspective of patients"

No. Dimension	Results in %		Details		
NO. DIMENSION	Your practice	Mean	Graphic	To-do	Indicators
	AV	▲ ▼			
1 patient perspective	86%	86%			25
2 Perspective of staff (non-GPs) on working conditions	89%	79%			14
3 Perspective of GPs on working conditions	74%	72%			10
4 staff management	72%	51%			9
5 education and training	75%	63%			9
Total	81%	75%			67





Results "Perspective of patients": single indicators

No	Indicator	Results in %		Details		
	Indicator	Your practice	Mean	Graphic	To-do	ltems
▲ ▼	▲▼	▲▼	AV			
1	The patients are satisfied with their ability to get through to the practice on the telephone	89%	88%			1
2	The patients are satisfied with the opportunities to speak to the general practitioner on the telephone	59%	80%			1
3	The patients are satisfied that available appointments suit their needs	92%	90%			1
4	The patients are satisfied with the waiting time in the waiting room	71%	67%			1
5	The patients feel that their patient records is confidential	82%	90%			1
6	The patients are satisfied with the helpfulness of staff (not including the GP)	90%	91%			1
7	The patients feel that they remember advice from previous consultations	75%	84%			1
8	The patients consider that the GP listens to them	88%	92%			1
9	The patients feel that their GP is interested in their personal situation	82%	90%			1
10	The patients consider that they can talk easiliy about their problems to the GP	82%	90%			1

EUROPEAN PRACTICE

ASSESSMENT



One GP from Bavaria...

"Well, I have to say our work is getting more structured, there is more structure in it. Responsibilites are clearer now than they were before. Before, it was like everbody does something or so..".



"... I must admit, my doctors bag, that was always a mess. Sometimes, when I wanted to give an injection, and I looked on the label: Oh, that's expired. Really embarassing. I always had to look twice to be sure...."



"... things run more continuous, more thought-out and better quality, I must admit. There was some change in our practice. Well, we haven't been too bad before. We always paid attention to certain things. Now we are aware of some processes we really had to improve."



Evaluation study (after 3 years)

Study design:
Before-after study with comparative group
(T0 = first assessment)
(T1 = second assessment after 3 years)
>102 practices were included in the before-after study
>Full quality cycle including patient survey, GP and staff work satisfaction survey and practice visit

Comparative group: Practices which had their first assessment (n= 102) at the same time as practices had their second assessment (T1)



Characteristics of primary care practices

	Second assessment	Comparative group	Comparative group after matching
Number of GPs	174	314	167
	from 102 practices	from 209 practices	from 102 practices
Mean age of GPs, (range)	50.6 (35-65)	50.7 (34-67)	50.5 (34-67)
Practice type, solo (%)	49.0	58.4	52.9
Practice location, rural (%)	57.8	42.1	59.8
Quarterly contact group	1775	1367	1704



Change within 3 years (N=102 practices)

Domains (Number of indicators)	First assess ment (T0)%	Second assessment (T1)%	Diff. (%)	Comparative group (%)
Infrastructure (38)	74.9	84.9	10.0*	77.8*
People (62)	73.9	79.0	5.1	75.7
Information (45)	80.1	85.8	5.8	81.1
Financial planning (6)	82.8	86.9	4.1	79.1*
Quality and Safety (35)	72.3	82.4	10.1*	73.9*

*p ≤ 0.05

Szecsenyi J. et al. Benchmarking in ambulatory care practices – The European Practice Assessment (EPA). Z Evid Fortbild Qual Gesundhwesen 2011; 105: 404-407 (in German)



Domain: Quality and Safety

Dimension (Number of indicators)	First assess ment (T0), %	Second assessment (T1), %	Diff. (%)	Comparative group (%)
Complaint management (6)	51.2	80.7	29.5*	66.5*
Analysis of critical incidents (5)	79.1	89.6	10.5*	83.9*
Safety of staff and patients, hygiene, infections control (12)	85.8	89.1	3.3	89.0
Quality development, quality policy (7)	40.7	55.6	14.9*	40.8*
Detection of quality and safety problems (5)	86.4	89.6	3.2	77.8*

*p ≤ 0.05

Szecsenyi J. et al. Effectiveness of a quality-improvement program in improving management of primary care practices. CMAJ 2011. DOI: 10.1503/cmaj.110412



Examples for improvement

Indicator	First (%)	Re- (%)
Procedure for patient complaints	69,6	91,7
Quality-improvement targets have been set in the last year	80,0	92,8
Recall-System for chronically ill patients	53,5	82,5
Critical incident register	30,7	58,8
Available written hygiene protocol	75,9	81,4
Regular team meeetings	55,8	77,3



Certification -Germany-

- Independent, not-forprofit foundation (Stiftung Praxissiegel e.V.)
- minimal standard (especially patient safety) plus 50% of indicators
- Re-certification after
 3 years:
 improvements must be
 visible



Zertifikat

Eine Initiative von Bertelsmann Stiftung und Topas Germany e. V.

Hiermit wird bestätigt, dass die Praxis

Max Mustermann

in 12345 Musterstadt

ein Qualitätsmanagement-System gemäß den Kriterien von Stiftung Praxissiegel e.V. erfolgreich eingeführt hat.

Stiftung Praxissiegel e. V. bestätigt:

die erfolgreiche Teilnahme am Qualitätsmanagement-System "Europäisches Praxisassessment (EPA) – Hausarzt" mit den Elementen Selbstbewertung der Praxis, Patientenbefragung, Mitarbeiterbefragung, Begehung eines externen Visitors, Fremdbewertung und Teambesprechung sowie die vollständige Erfüllung von Kernanforderungen in den Bereichen Sicherheit und Infrastruktur.

Gültigkeitsdauer: Januar 0000 Registrier-Nr.: 0000000 Datum der Ausstellung: 10. Januar 0000

Thin - Beyith Ucher

Prof. Dr. med. Eckart Fiedler

Dr. med. Stefa

Stiftung Praxissiegel e. V. Carl-Bertelsmann-Straße 256 · 33311 Gütersloh Internet: www.praxissiegel.de · e-mail: info@praxissiegel.de

Stiftung Praxissiegel e. V. fördert Qualität und Transparenz im Gesundheitswesen und ist unabhängig von Verbänden, Kostenträgern, Körperschaften und Industrie.

Dr. Brigitte Mohn MB

Take home messages

Improvement starts with measuring (indicators), practices learn from each other

EPA is an easy to use tool, for different types of practices

Assessment and practice visits motivate GPs and nurses for <u>measurable</u> change and improvement

Systems like EPA can demonstrate the practices own positive qualities show what requires improvement



EPA language versions of indicators and Visotool

- Arabic
- English
- Dutch
- French
- German
- Romanian
- Slovenian
- Greek



Thank you!

www.equip.ch
www.topaseurope.eu (list of indicators in english)
www.praxissiegel.de (download english presentations international EPA conference 2005)
www.epa-qm.de: book in German, info about visotool International publications:



Quality Management in Primary Care

I same more surround the second

Szecsenyi J et al: CMAJ 2011 (online first) Engels Y et al: Fam Pract 2005;22:215-22 Engels Y et al: Fam Pract 2006;23:137-47 Grol et al. (Eds). Quality Management in Primary Care. Download at: http://www.praxissiegel.de/239.0.html

