

New features for the French hospital Financial Incentive for Quality Improvement program (IFAQ)

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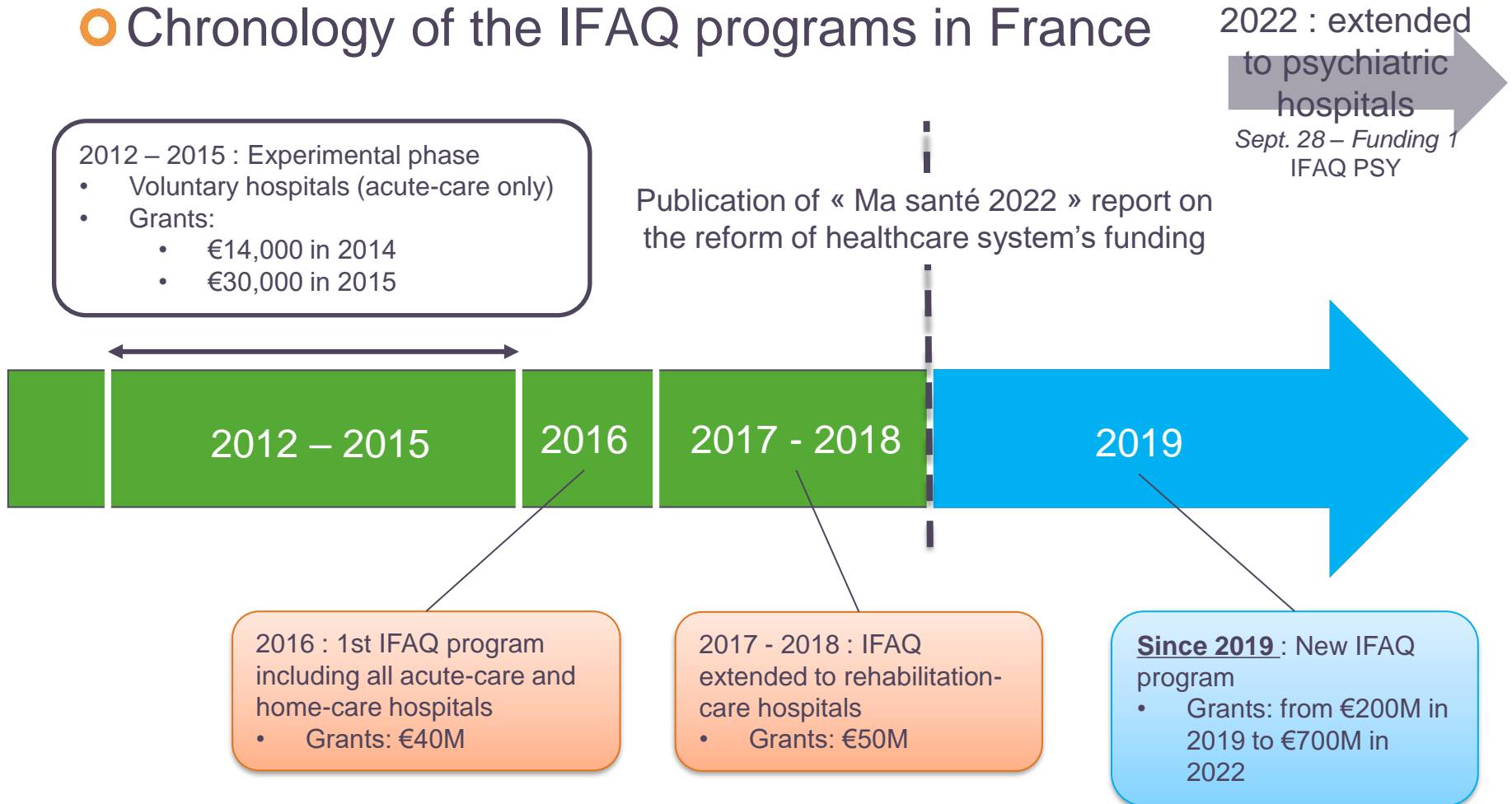
Introduction

IFAQ : Financial Incentive for Quality Improvement

- What is it?
 - Hospital Pay For Performance program, based on a set of quality indicators
- Which organisation ?
 - Several institutions are involved in the program :
 - The Ministry of Health: gives political and strategical orientations and manages the program with hospitals stakeholders
 - The HAS (Haute autorité de santé): provides most of the quality indicators and recommandation on their use
 - The ATIH (Technical Agency for Information on Hospital Care): technical expertise on the funding model (build the model, ensure its consistency, calculate and communicate the results)
 - Hospitals stakeholders: hospital's point of view on the program
- How does it work?
 - Hospitals are brought together in comparison groups
 - Quality is assessed on a set of indicators
 - Hospitals are ranked and the credits are allocated according to the ranking

Introduction

○ Chronology of the IFAQ programs in France



New features for IFAQ program

New features for IFAQ program

Introduction

○ Introduction:

- 2019: Big change in the healthcare system's funding
 - Willingness to bring « quality » in every fields of the healthcare system
- Existing IFAQ program sees its grants increase from €50M to €200M in 2019
 - €50M from existing IFAQ + 150M€ from DRG's tariffs
 - Goal is to reach 2% or 3% of global funding (~€2Bn)
 - Plan to extend the program to psychiatric hospitals in 2022
- To accompany this evolution, the model has been redesigned
 - To make the model more readable
 - To improve hospital comparability within their groups

New features for IFAQ program

Contents



Which comparison groups
definition?



Which quality Indicators?



What kind of model?

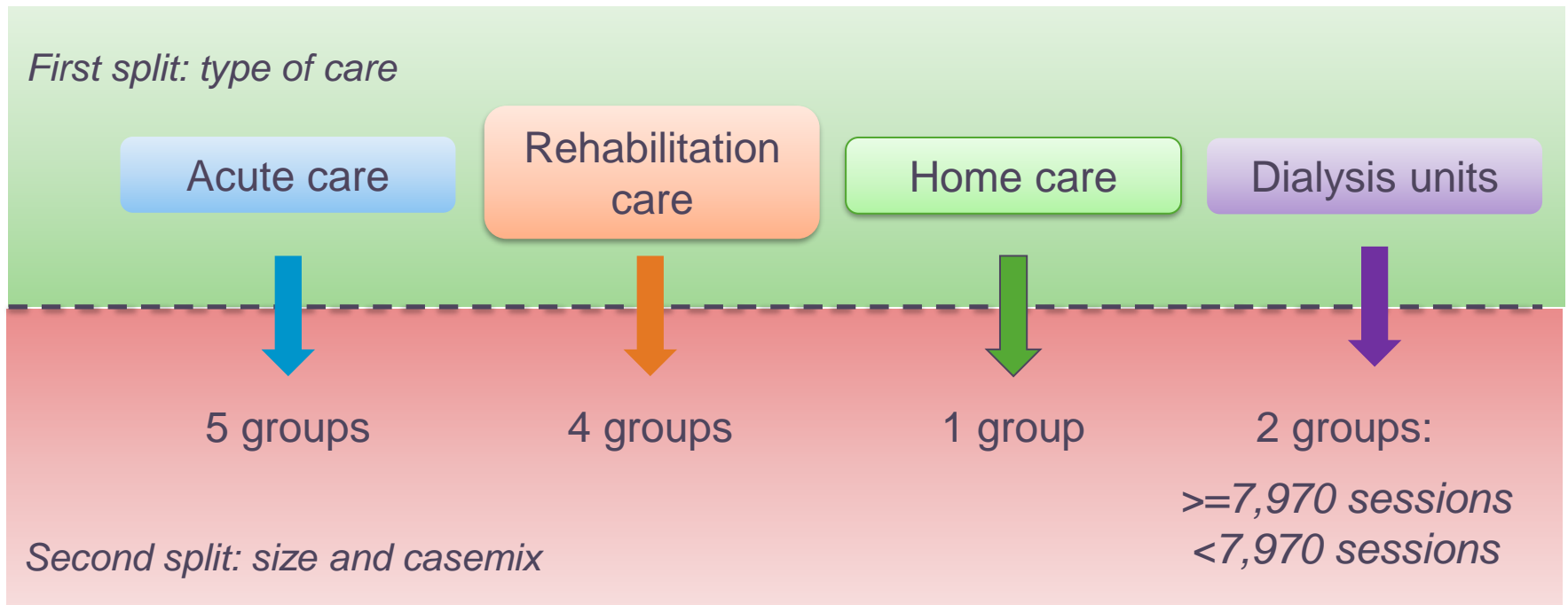
New features for IFAQ program

*Which comparison groups
definition?*

New features for IFAQ program

Which comparison groups definition?

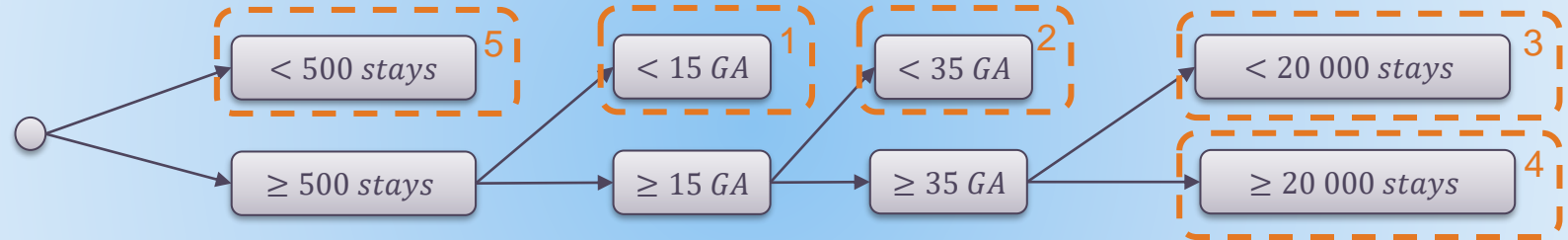
- Bring together hospitals with similar characteristics
- Keep the groups large enough for robust comparisons



New features for IFAQ program

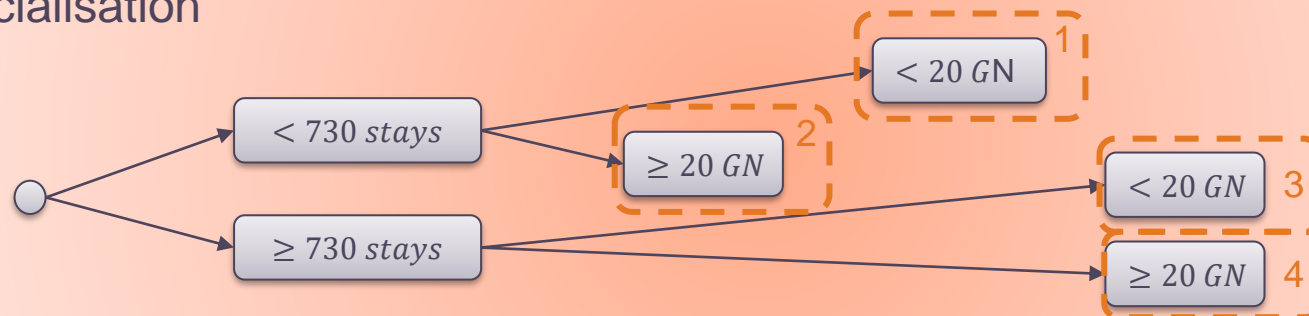
Which comparison groups definition?

Acute care: 5 comparison groups, split by volume and casemix specialisation



*GA = « Groupe d'activité » = aggregate of acute care's DRG

Rehabilitation care: 4 comparison groups, split by volume and casemix specialisation



*GN = « Groupe Nosologique » = aggregate of rehabilitation care's DRG

New features for IFAQ program

Which comparison groups definition?

- One hospital can be included in several groups

Example



1 500 stays for acute care, distributed in 10 GA → Group 1 for acute care' services

+

300 stays for rehabilitation cares, distributed in 15 GN → Group 1 for rehabilitation care services

- Depending on its results, it can receive a grant for its acute care activities + a grant for its rehabilitation care activities

New features for IFAQ program

Which comparison groups definition?



Comparison groups in 2019

Comparison groups	Acute care services						Rehabilitation care services					Home care	Dialysis units			TOTAL
	1	2	3	4	5	Total	1	2	3	4	Total		1	2	Total	
Nb services	231	504	267	267	254	1 523	495	326	705	304	1 830	289	499	333	832	4 474
Economic volume (Bn€, %)	2,5	9,9	7,5	27,1	0,3	47,3	1,3	2,7	2,1	2,7	8,8	1,2	0,4	1,6	2	59,3
	4.2%	16.7%	12.6%	45.9%	0.5%	79.9%	2.2%	4.5%	3.5%	4.5%	14.7%	2.0%	0.7%	2.7%	3.4%	1

*Economic volume
 = activity x DRG tariff*

New features for IFAQ program

Which quality indicators?

New features for IFAQ program

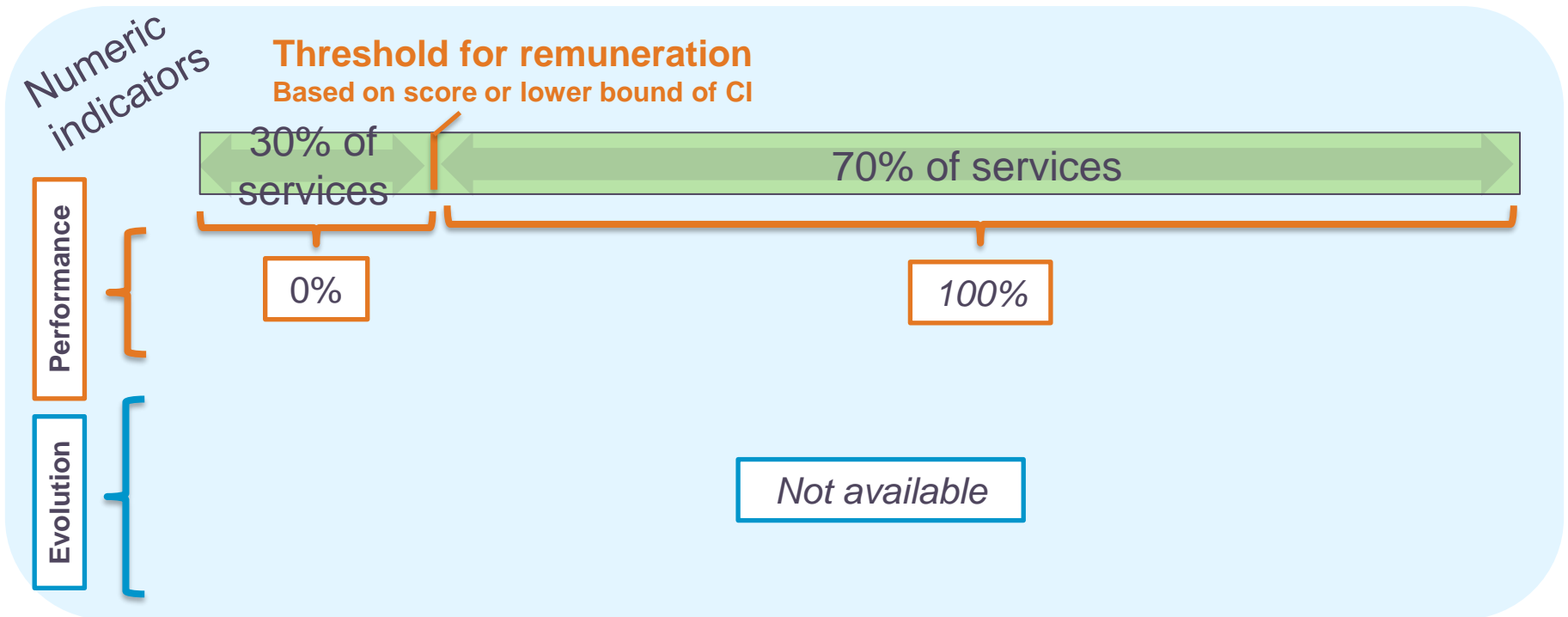
Which quality indicators?

- Several kinds of indicators:
 - Certification
 - Patient-reported experience measure (PREMs)
 - Assess « welcome », « quality of care », « accomodation and catering », « discharge »
 - Indicators based on a sample of patients' records → proportion or score (accompanied by a CI)
 - « Pain assessment »
 - « Quality of hospital discharge summary »
 - Indicators based on a questionnaire issued to healthcare organisation
 - Measurement of hydroalcoholic solution consumption
- To keep the model readable, max. 10 indicators per comparison group

New features for IFAQ program

What kind of model?

- In IFAQ program, a % of success is computed for each indicator
 - Using the score and, if available, the evolution between 2 collections



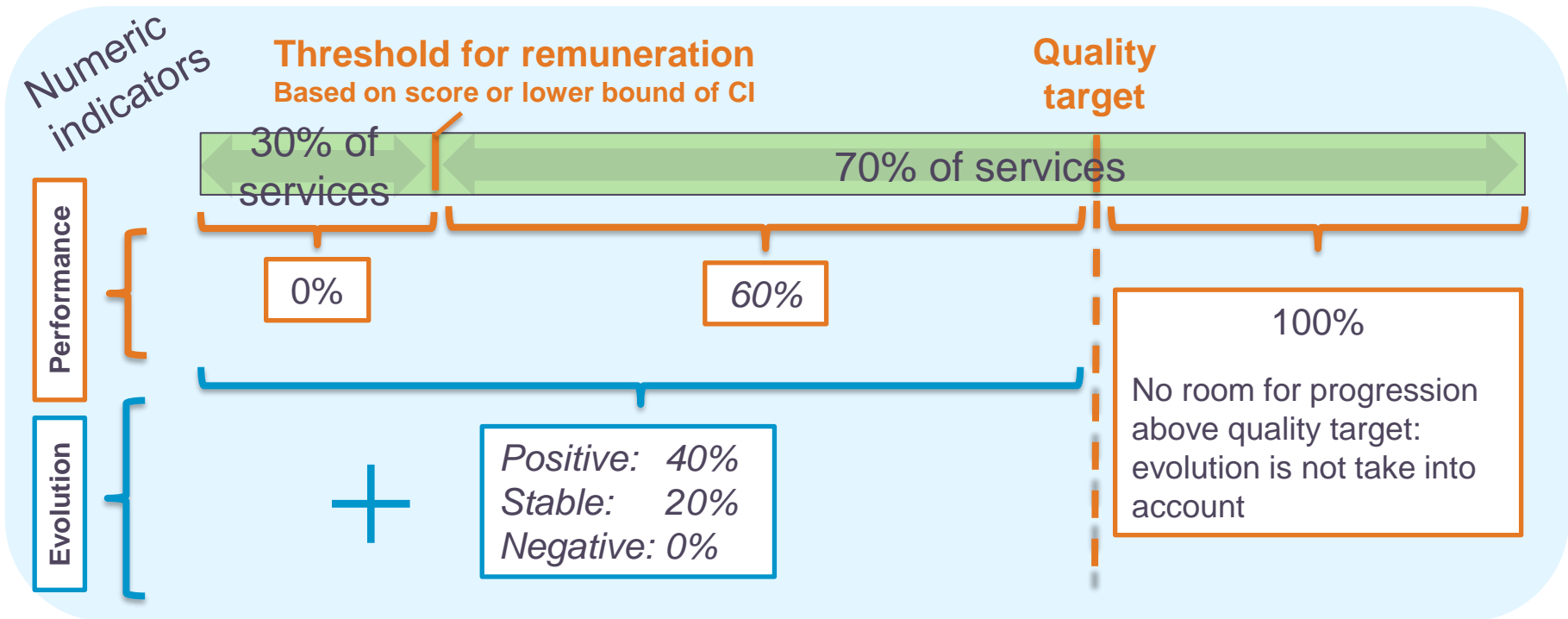
Class indicators

Only one class indicator : Certification
 A: 100%; B: 66.6%; C&D: 0%

New features for IFAQ program

What kind of model?

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Class indicators

Only one class indicator : Certification
 A: 100%; B: 66.6%; C&D: 0%

New features for IFAQ program

What kind of model?


New features for IFAQ program

Which comparison groups definition?

○ In 2019, €200M allocated on 4,474 services

① Allocation per comparison groups according to the economic volume produced out of their activity

Comparison groups	Acute care services						Rehabilitation care services					Home care	Dialysis units		
	1	2	3	4	5	Total	1	2	3	4	Total		1	2	Total
Nb services	231	504	267	267	254	1,523	495	326	705	304	1,830	289	499	333	832
Economic volume (Bn€, %)	2.5 4.2%	9.9 16.7%	7.5 12.6%	27.1 45.9%	0.3 0.5%	47.3 79.9%	1.3 2.2%	2.7 4.5%	2.1 3.5%	2.7 4.5%	8.8 14.7%	1.2 2.0%	0.4 0.7%	1.6 2.7%	2 3.4%



€200M

↓

€8.4M

...

↓

€91.4M




...

New features for IFAQ program

What kind of model?

2


Allocation per hospital according to their economic volume and their **average % of success** on quality indicator

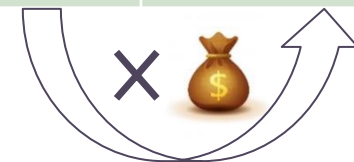
 Economic volume \times  **Success rate on indicators** ^{*} =  Weight

Example


 Acute care –
 group 1
 (€8.4M)

Services	Economic volume	Success rate	Weight	Grant
	€200M	100%	0.625	€5.25M
	€200M	40%	0.25	€2.1M
	€50M	80%	0.125	€1.05M

^{*}  Success Rate = $\frac{\sum \text{(% of success)}}{\text{number of indicators}}$

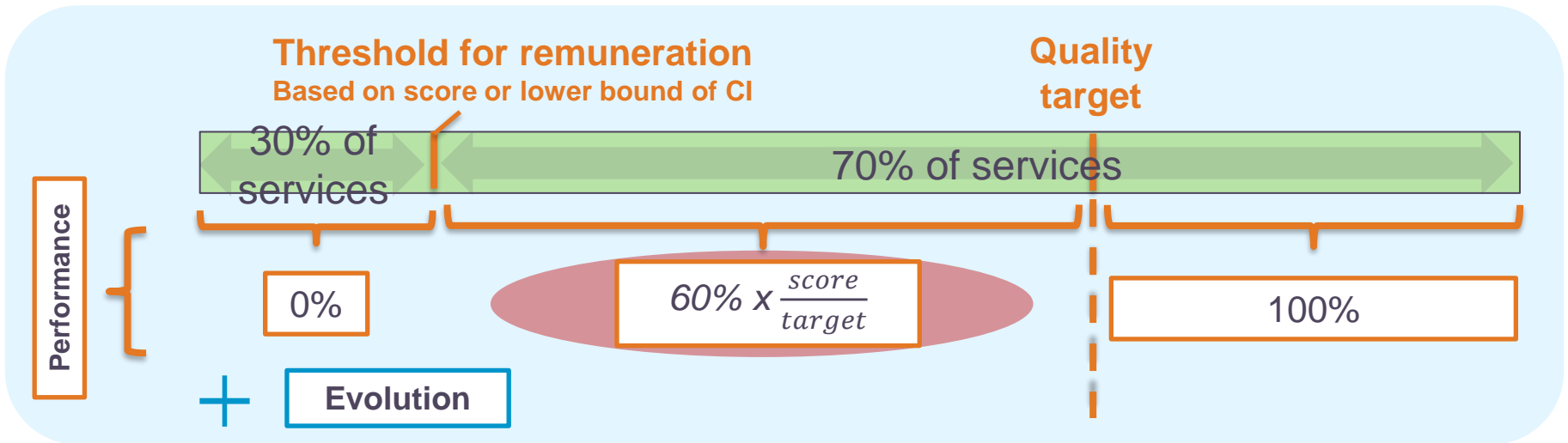


Next steps

New features for IFAQ program

Next steps

- Gradient in the % of success



- Willingness to
 - Tend to indicators based on administrative databases, rather than based on patient's record
 - Tend to standardized indicators (see next presentation)
- Extend program to psychiatric hospitals

Links

New features for IFAQ program

Links

- IFAQ on ATIH website (FR):
 - <https://www.atih.sante.fr/ifaq>
- Quality indicators on HAS website (EN):
 - https://www.has-sante.fr/jcms/c_2044563/en/healthcare-quality-and-safety-indicators
 - https://www.has-sante.fr/jcms/c_2044304/en/the-certification-of-hospitals-for-quality-of-care
- IFAQ on ministry of health website (FR):
 - <https://solidarites-sante.gouv.fr/professionnels/gerer-un-etablissement-de-sante-medico-social/qualite-dans-les-etablissements-de-sante-sociaux-et-medico-sociaux/article/incitation-financiere-a-l-amelioration-de-la-qualite-ifaq>

Annex

New features for IFAQ program

Pros and cons of former program (2016-2018)

○ A first program with pros and cons :



- Grant is a bonus
- Grant is delivered according to performance **and** evolution between two indicator's collections



- A lot of indicators
- Global score with non standardized indicators
 - Ex. Average score on indicator 1 > Average score on indicator 2
- Comparison groups not efficient enough
 - ✓ ○ Tend to group services collecting the same set of indicators
 - ✗ ○ But doesn't split on hospitals characteristic (size, activity)

New features for IFAQ program

Which quality indicators?

○ Main indicator : Certification

Certification is an assessment of the quality and safety of care.

Conducted every 4 years by surveyor from the HAS and compulsory for all hospitals

It results in certification class: A, B, C, D

Class A and B gather certified hospitals.

Class C, D gather non certified hospital or hospitals certified under conditions.



New features for IFAQ program

Which quality indicators?

○ Patient-reported experience measure

- Experience and satisfaction of patient hospitalized more than 24h in acute cares' service
- Experience and satisfaction of outpatient surgery

Assess :

- Welcome
- Quality of care
- Accomodation and catering
- Discharge

- Not compulsory for services with <500 patients or >75% of patients with age >75
- When compulsory, services must collect patients' email.
- Questionnaire is sent to patient within 2 weeks after discharge
 - If not enough answers, indicator will not be used in IFAQ for the service
 - Otherwise, a score between 0 and 100 is computed

New features for IFAQ program

Which quality indicators?

- Indicators based on patients' records :
 - Proportion of satisfying patients' record on a sample of 80 records
 - A score between 0 and 100 + a confidence interval (CI)
 - Exemple: Pain assessment in patient's record (for acute cares, rehabilitation cares, home cares)
 - Criteria : Is there a score measured by an assessment scale in the record ?
 - Score computed on a sample of 80 patient's records
 - A score between 0 and 100 + a confidence interval (CI)
 - Exemple: Quality of hospital discharge summary or follow-up care
 - 14 criterion → for each report proportion of satisfying criterion
 - Score = average over 80 patients' records