

Pay-for-Performance and Pay-for-Quality models for hospitals: Preliminary results from an environmental scan



Damir Ivanković MD MBA PhD
WHO Athens Office on Quality of Care and Patient Safety

Paying hospitals for performance and quality?

Financially **rewarding hospitals** for providing high (or higher) quality of care.

Different approaches employed.

A worldwide **increase in use** of P4P/P4Q models.

Rooted in the use of performance **data and indicators**.

Usually result in **modest improvements** to performance and quality.

Why an environmental scan?

*Within a health services delivery context, an ES is a type of inquiry that involves the collection and synthesis of existing information and/or the pursuit of new evidence **to inform decision-making** and help shape future response(s) to existing and emerging policy and service delivery issues and opportunities.*

Use of environmental scans in health services delivery research: a scoping review
by Charlton et al (2021; [BMJ Open](#))

*Performing a comprehensive environmental scan will **improve the likelihood of project success.***

Conduct an environmental scan
by Centers for Medicare & Medicaid Services (2024; [Source](#))

Context

Motivated by

WHO/QoC Office work in Romania

 *“QoC indicators for Romanian hospitals: development and piloting” -> tomorrow!*

Focused on

Commonly used **approaches** to P4P/P4Q models

Considerations for developing and implementing P4P/P4Q models

Use for

Future WHO/QoC Office work in other Member States

Methods

Search keywords included “hospital(s)”, “pay for performance”, “pay for quality”, “models”, “implementation” and certain variations of these. Additional keywords included “Romania” “data” “gaming” and certain variations of these. Focus was on peer-reviewed literature published from 2004 to 2023, with some grey literature documents used, those from trusted sources, such as OECD, RAND and CMS. PubMed and Google Scholar were used for primary search, expanded through reference-list snowballing. Analysis was conducted through abstract screening and full-text review including detailed note taking, as well as contrasting and comparing notes made. The analysis focused on producing an overview of commonly used P4P/P4Q approaches used and development and implementation considerations.

Results: Approaches or rather dichotomies

Rewards
Penalties

Modest
Generous

Absolute
Relative

Summative
Formative

Individual
Organisational

Short-term
Long-term

Volume
Value

Risk-adjusted
Unadjusted

Gaming
Feedback
Benchmarking
Public reporting

...

Results: Design **considerations** that matter

Agreed definition of *performance* and/or *quality*.

Clearly defined and clinically relevant performance measures.

Meaningful financial incentives.

Effective measurement and feedback systems.

Supportive organisational culture.

Addressing unintended consequences.

Agreed definition of performance and/or quality.

Clearly defined and clinically **relevant** performance measures.

Patient safety

Central line associated bloodstream infections rate
Ventilator-associated events rate
Percentage of in-hospital patients assessed for fall risk through applied protocols
Incidence rate of patients' falls during hospitalization
Percentage of in-hospital patients assessed for pressure ulcers' risk through applied protocols
Incidence rate of pressure ulcers acquired during hospitalization
Percentage of patients undergoing surgery where the Surgical Safety Checklist was applied
Post-operative bleeding rate requiring surgical re-intervention
Surgical site infections rate

Healthcare workforce training and safety

Percentage of healthcare workers participating in training activities
Percentage of healthcare workers that followed standard protocol for occupational health upon a sharp injury during working hours
Percentage of healthcare workers with updated influenza vaccination schedule

Patient experience

Patient experience questionnaires' completion rate
Patient experience after hospital discharge rate

Care effectiveness

In-hospital mortality by heart failure
In-hospital mortality by acute myocardial infarction
In-hospital mortality by pneumonia
Percentage of patients readmitted to the Intensive Care Units after 48 hours after transfer
Unscheduled readmission to hospital within 30 days of discharge for heart failure through the emergency room heart failure
Average length of hospitalisation
Percentage of surgeries with a perioperative hospital length of stay less than 48 hours
Pre-operative hospital length of stay
Percentage of cancer patients whose nutritional status was assessed through applied protocols
In-hospital mortality by ischaemic stroke
Time from admission to treatment for ischaemic stroke (door-to-needle time)



Meaningful financial incentives.

Effective measurement and feedback systems.

Supportive organisational culture.

Addressing unintended consequences.



MONITORUL OFICIAL
AL
ROMÂNIEI

PARTEA I
LEGI, DECRETE, HOTĂRĂRI ȘI ALTE ACTE

Anul 191 (XXXXV) — Nr. 711

Miercuri, 2 august 2023

SUMAR

| Nr. | Pagina | Nr. | Pagina |
|---|--------|---|--------|
| DECIZII ALE CURȚII CONSTITUȚIONALE | | 324 | |
| Decizia nr. 272 din 9 mai 2023 referitoare la excepția de neconstituționalitate a dispozițiilor art. 91 alin. (2) din Ordonanța Guvernului nr. 82/2003 privind Codul de procedură fiscală | 2-3 | — Decizie privind încetarea eserorării, cu caracter temporar, de către doamna Diana-Ioana Florea a funcției publice-vicente din categoria înaltelor funcționari publici de secretar general adjuncți al Ministerului Energiei | 11 |
| Decizia nr. 274 din 9 mai 2023 referitoare la excepția de neconstituționalitate a dispozițiilor art. 22 alin. (2) din Legea nr. 85/2008 privind procedura insolvenței | 4-5 | 326 | |
| Decizia nr. 275 din 9 mai 2023 referitoare la excepția de neconstituționalitate a dispozițiilor art. 319 alin. 2 din Codul de procedură civilă din 1965 | 6-7 | — Decizie privind acordarea autorizației pentru A10 NETWORKS, INC. privind utilizarea echipamentelor de infrastructură 5G | 11 |
| DECIZII ALE PRIM-MINISTRULUI | | 327 | |
| 318. — Decizie privind numirea domnului Feriand Negu în funcția de comisar general al Secțiunii Române pentru Expoziția mondială 2025 „Designing Future Society for Our Lives” | 8 | — Decizie privind numirea domnului Thomas-Răzvan Mălăvian în funcția de vicepreședinte, cu rang de subsecretar de stat, al Agenției Naționale pentru Sport | 12 |
| | | 328 | |
| | | — Decizie privind numirea domnului Sebastian-Gabriel Toncean în funcția de vicepreședinte, cu rang de subsecretar de stat, al Agenției Naționale pentru Sport | 12 |



Future: Plans

Focus next scanning on what is needed for the QoC Office work.
Expand sources with interviews and focus groups.
Involve more researchers. Publish. Use.

An idea.

Develop a **P4P/P4Q design considerations checklist** for in-country QoC assessment and improvement work.
Collaboratively developed, used in various settings and iteratively improved.

Muțumesc! Thank you!

