

EHMA 2024

Shaping and managing
innovative health ecosystems

Measuring performance of the health care pathway for Hepatitis C: a population-based analysis in an Italian Region

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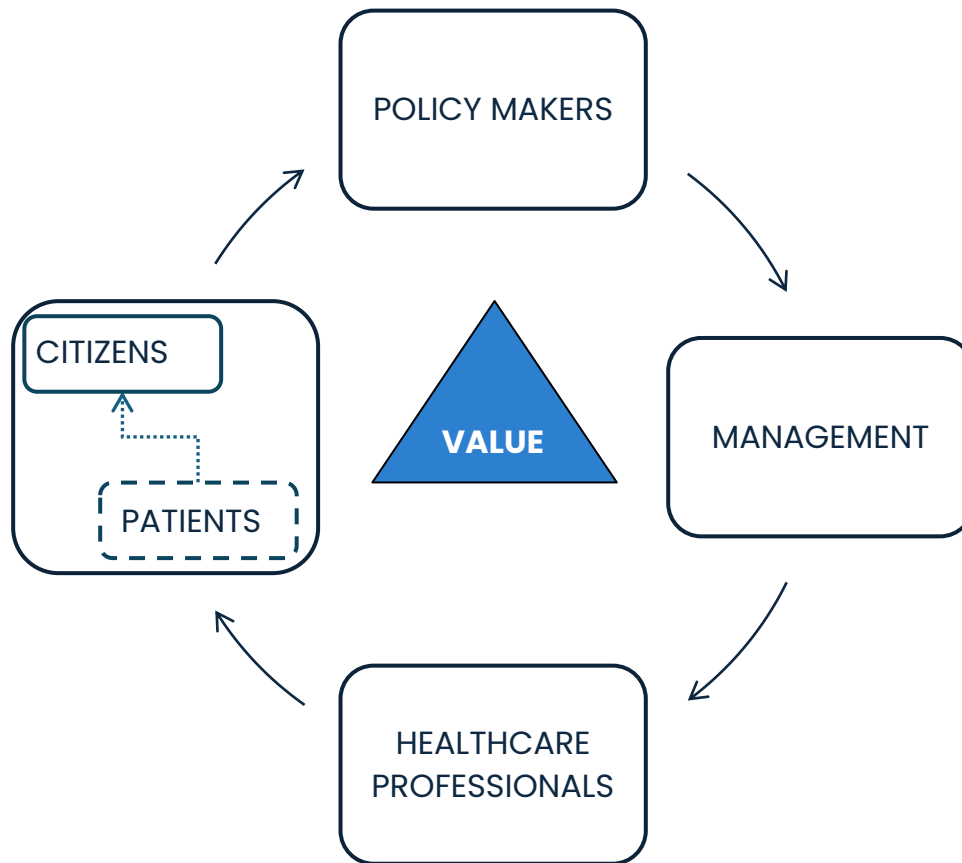
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#EHMA2024

Background

They represent citizens, define health system strategies, choose management



They elect policymakers, fund the health care system with their taxes

They are in information asymmetry and weaker position

Is responsible for empowering health care professionals to do their jobs, is accountable for the organization, performance, and financial sustainability of the health care organization

They are "professionals" and not mere employees; they define patient care

Background

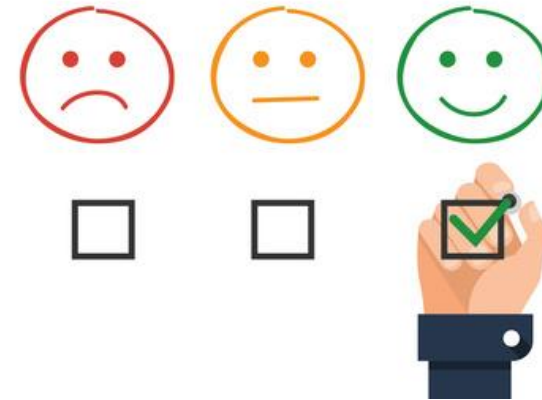
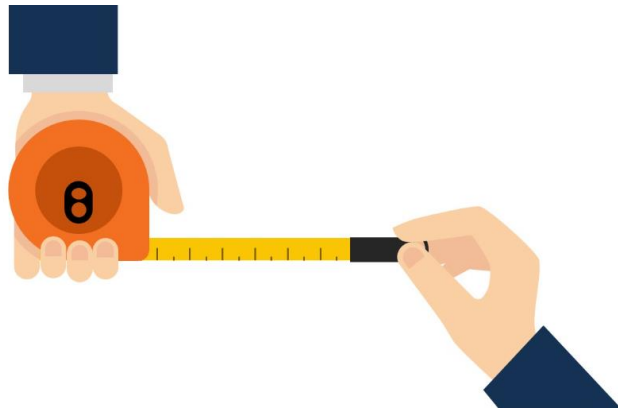
From measurement...

"Numbers to analyze and understand."



...to evaluation.

"Numbers to judge and hold accountable for results."



Background – Our innovative approach



Administrative data

To measure Key
Performance Indicators



Patient Reported Experience Measures PREMs

To improve quality of
care



Patient Reported Outcome Measures PROMs

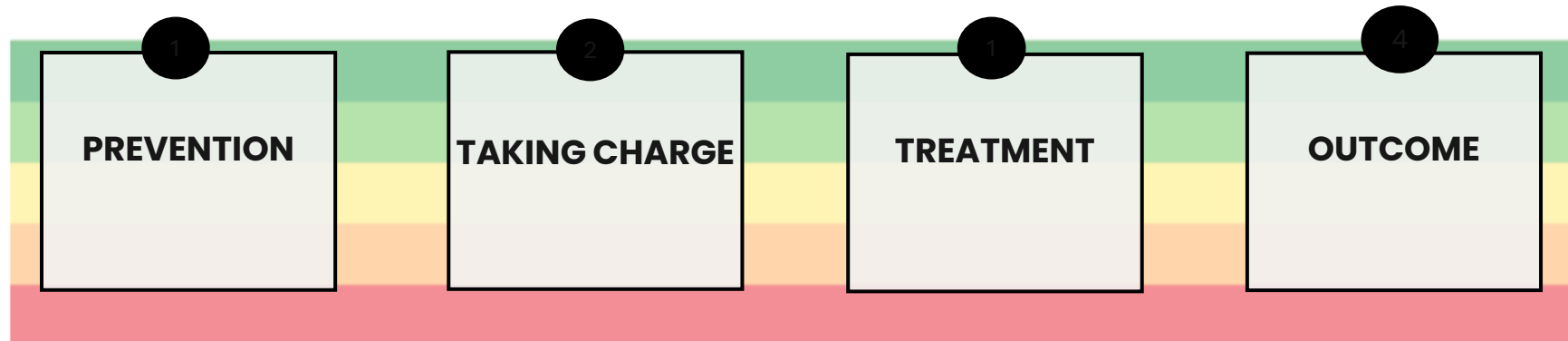
To measure effectiveness
or improve health status of
individual patients

Background – Why HCV?

- Less than 5% of people with chronic viral infections are aware of their condition
- In 2016, the WHO introduced the global health sector strategy on viral hepatitis for 2016–2021, aiming to eliminate viral hepatitis as a public health threat by 2030
- An estimated 398,610 Italians (1.7% of the country's population) have active HCV infection.
- The prevalence is highest in the central regions (0.88%), followed by the southern (0.72%) and insular areas (0.67%), and finally the northern regions (0.54%)

Aim

- To develop a methodology to measure and evaluate the care pathway for hepatitis C

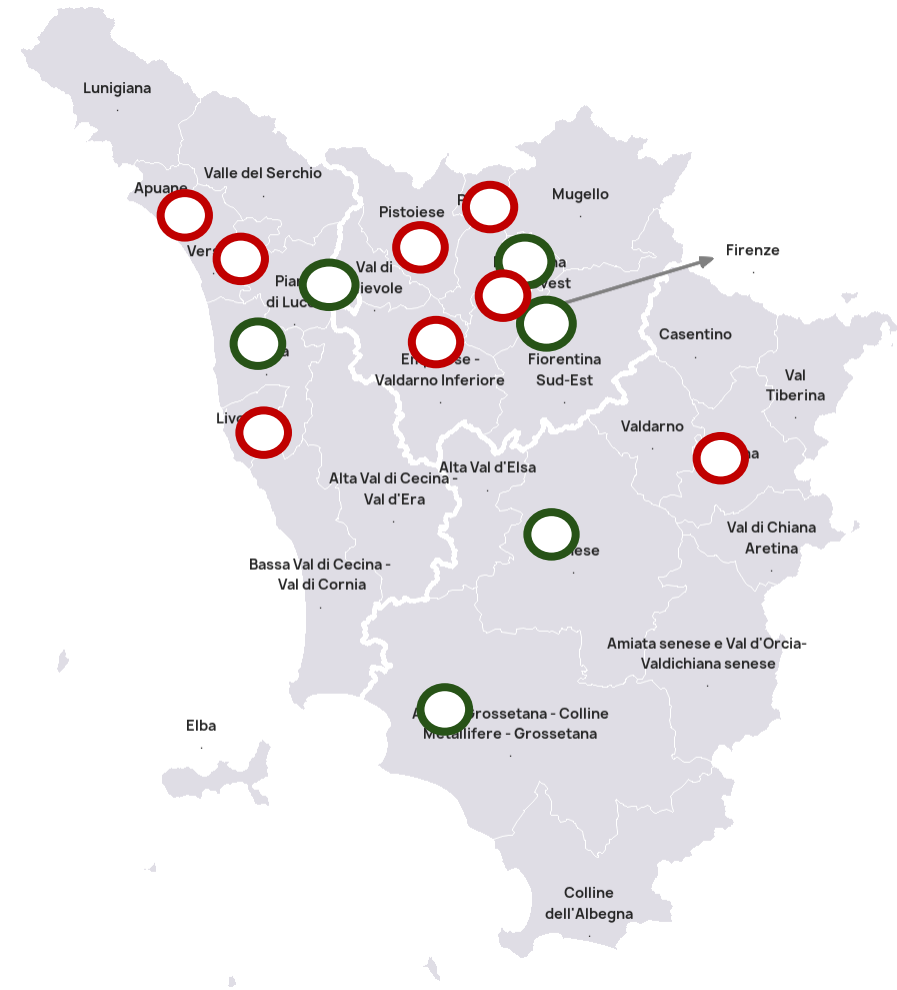


References :

- World Health Organization. (2016). Monitoring and evaluation for viral hepatitis B and C: recommended indicators and framework.
- Tavoschi, L., Belardi, P., Mazzilli, S., Manenti, F., Pellizzer, G., Abebe, D., ... & Vainieri, M. (2022). An integrated hospital-district performance evaluation for communicable diseases in low-and middle-income countries: Evidence from a pilot in three sub-Saharan countries. *PloS one*, 17(3), e0266225.

Method

- Six out of the fourteen centres were enrolled
- Literature review to identify KPIs and evaluation standards
- Semi-structured interviews with clinicians and physicians to co-design the PREMs survey
- SF-12 scale for the PROMs Survey



Method

DIMENSION	INDICATOR	SOURCE
Prevention	Number of services providing screenings	Administrative data
	Population screening coverage	Administrative data
	Genotyping	Administrative data
Taking charge	Time to treatment	Administrative data
	Timeliness of take-over (%)	Patient-reported experiences
	Time between the first telephone contact and the visit with the specialist	Patient-reported experiences
	Ease of access	Patient-reported experiences
Treatment	Communication with the specialist	Patient-reported experiences
	Appropriateness of the treatment pathway	Administrative data
Outcome	Percentage of completed treatments	Administrative data
	Percentage of patients reporting improved outcomes at 6 months	Patient-reported outcomes
	Health gain regarding the social domain at 6 months	Patient-reported outcomes
	Percentage of patients reporting improved outcomes at 12 months	Patient-reported outcomes
	Health gain regarding the social domain at 12 months	Patient-reported outcomes

References :

- World Health Organization. (2016). Monitoring and evaluation for viral hepatitis B and C: recommended indicators and framework.
- Tavošchi, L., Belardi, P., Mazzilli, S., Manenti, F., Pellizzer, G., Abebe, D., ... & Vainieri, M. (2022). An integrated hospital-district performance evaluation for communicable diseases in low-and middle-income countries: Evidence from a pilot in three sub-Saharan countries. *PLoS one*, 17(3), e0266225.

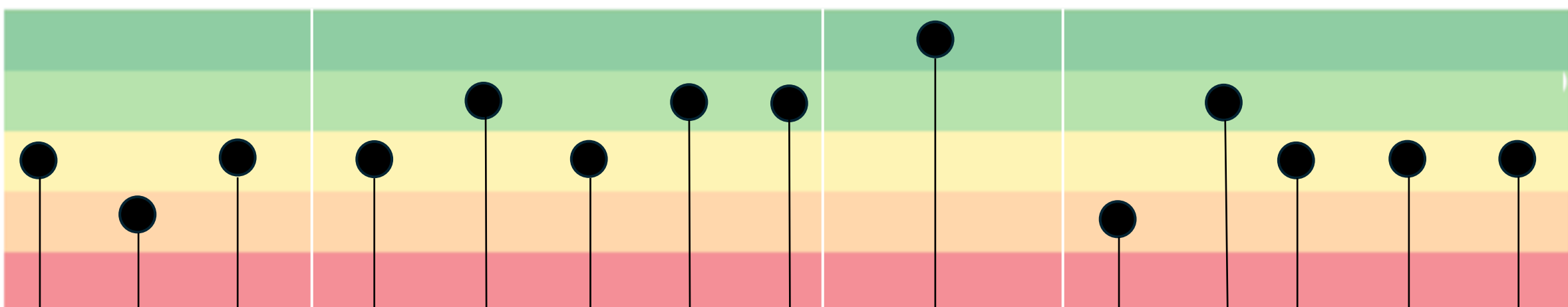
Results

Prevention

Linkage to care

Treatment

Outcome



Number of services providing screening

Genotyping

Time to treatment

Time to first visit

Treatments appropriateness

Treatments completed

Health gains 6 months

Health gains 12 months

Population screening coverage

Timeliness of takeover

Ease of access

Communication with specialist

Improved Outcomes 6 months

Improved Outcomes 12 months

Conclusions and future research

- This is a first attempt in Italy to design and develop an infectious disease pathway integrating KPIs from both patient-reported measures and administrative data
- The graphic representations allows for a quick identification of shortcomings of the healthcare services for chronic HCV patients
- Useful to inform allocation of resources to accelerate HCV elimination in Tuscany
- Investigate potential applications of infectious pathway model to address other public health issues related to infectious diseases



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Thank you

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