

Priorities in health services research

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Health services research . . .

.... examines how people get access to health care, how much care costs, and what happens to patients as a result of this care.

The main goals of health services research are to identify the most effective ways to organize, manage, finance, and deliver high quality care

Agency for Healthcare Research and Quality

Health Services Research

- may focus on international, national or local issues, and on broad populations or on specific subgroups;
- Is multidisciplinary, e.g. clinical disciplines, statistics, psychology, epidemiology, sociology, social policy, economics, political science
- uses a range of approaches to data collection and analysis (e.g. systematic review, secondary data analysis, empirical data collection)

Health Services Research: a story

How to improve access to care in general practice

... or the “Ready, Fire, Aim” school of policy development

Discovery of the “Quality Chasm”

Demonstration of widespread variation in medical practice (1980s)

Development of systematic ways of reviewing evidence (Cochrane Collaboration 1993)

Development of systematic methods of measuring quality of care (1990s)

Demonstration of widespread variation in quality of medical care (1990s/2000s)

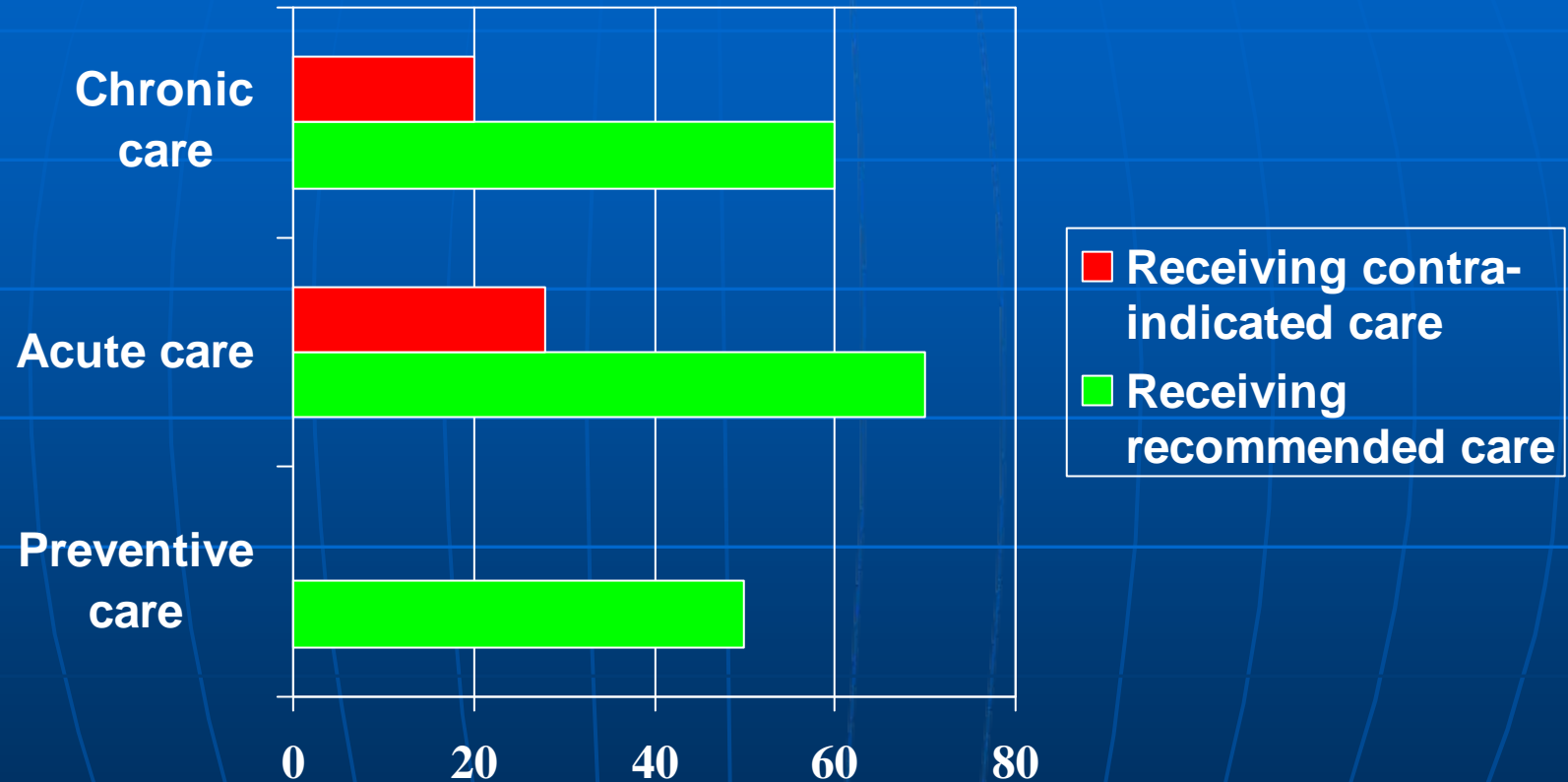
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**CROSSING THE
QUALITY CHASM**

A New Health System for the 21st Century

Inappropriate over-treatment and inappropriate under-treatment co-exist



www.rand.org/publications/RB/RB4524/index.html

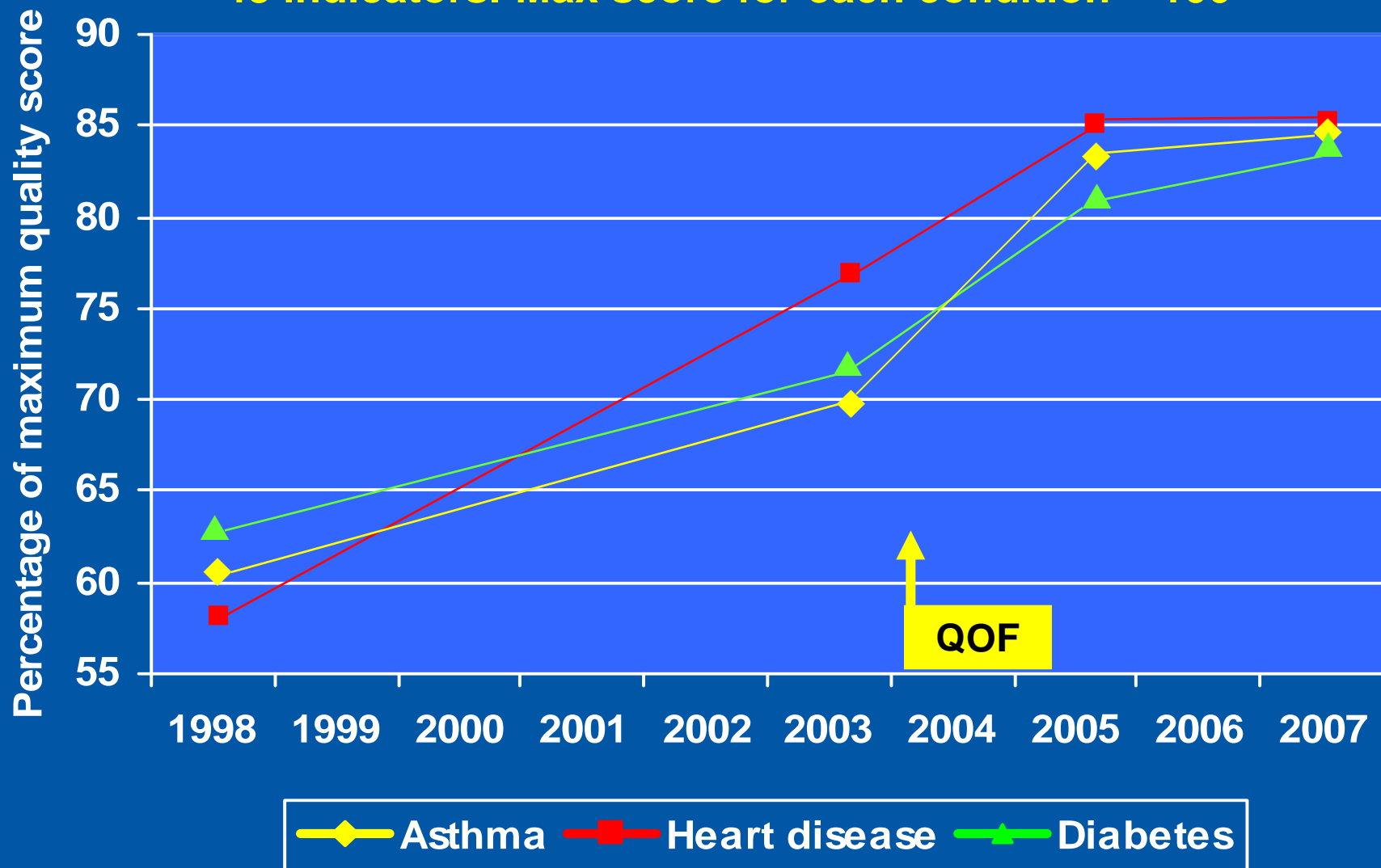
McGlynn et al New England Journal of Medicine 2003; 348: 2635

NHS quality improvement initiatives 1996-

- **Clinical governance**
- **National guidelines (NICE, NSFs)**
- **Opinion leaders (e.g. czars)**
- **Audit (cross-practice / hospital)**
- **Public release of information on quality of care**
- **Financial incentives**
- **Systematic performance procedures**
- **National system of inspection (CHI, HCC, CQC)**
- **Annual appraisal of all doctors in the NHS**

Quality of care in a nationally representative sample of 42 GP practices for asthma, heart disease and diabetes

48 indicators. Max score for each condition = 100



Example of an unintended outcome

Indicator: Patients should be able to make an appointment to see a doctor within 48 hours

Response: Advanced Access – offer unlimited appointments ‘on the day’

Consequence: Patients are unable to book ahead, and can only book on the day

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Solution: Refine the indicator

New access indicator

- **Percentage of people able to book a same day appointment (of those who had tried)**
- **Percentage of people able to book ahead (of those who had tried)**

Required new annual survey of 5.5 million NHS patients

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GPs set to lose thousands under new access survey

21 May 09

By Gareth Iacobucci

GP practices across the UK could lose thousands of pounds in QOF payments as a result of the new GP access survey, even if they perform well, GP leaders have warned.

It comes after it emerged that GPs in Scotland – where results have just been published – faced cuts of up to £16,000, despite scoring positively overall.

The [BMA](#) warned that low response rates to the new postal survey have skewed the results to 'devastating' effect against some practices, heightening fears that practices in the rest of the UK will face big hits to their income.

GPs in England are set to receive the first results of the revised survey at the



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Patient survey losses to hit almost all GP practices

03 Jun 09 By Gareth Iacobucci

The full scale of the losses faced by GPs through changes to the GP Patient Survey became clear this week, with warnings that almost every practice was likely to be hit.

GP leaders predict only a handful will escape without losses, with 15% to 20% of funding allocated to the most controversial question, asking if patients can get an appointment more than two days in advance.

Practices' losses have resulted from a combination of tough new payment thresholds in the QOF and low postal response rates in some areas - and patient satisfaction scores apparently increasing compared with last year.

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This flawed survey is sucking cash from most-neediest practices

10 Jun 09

Practices in deprived areas need extra support and funding to help them cope with the complex needs of their patients, yet the GP Patient Survey is draining resource away from them, warns Dr Zara Aziz

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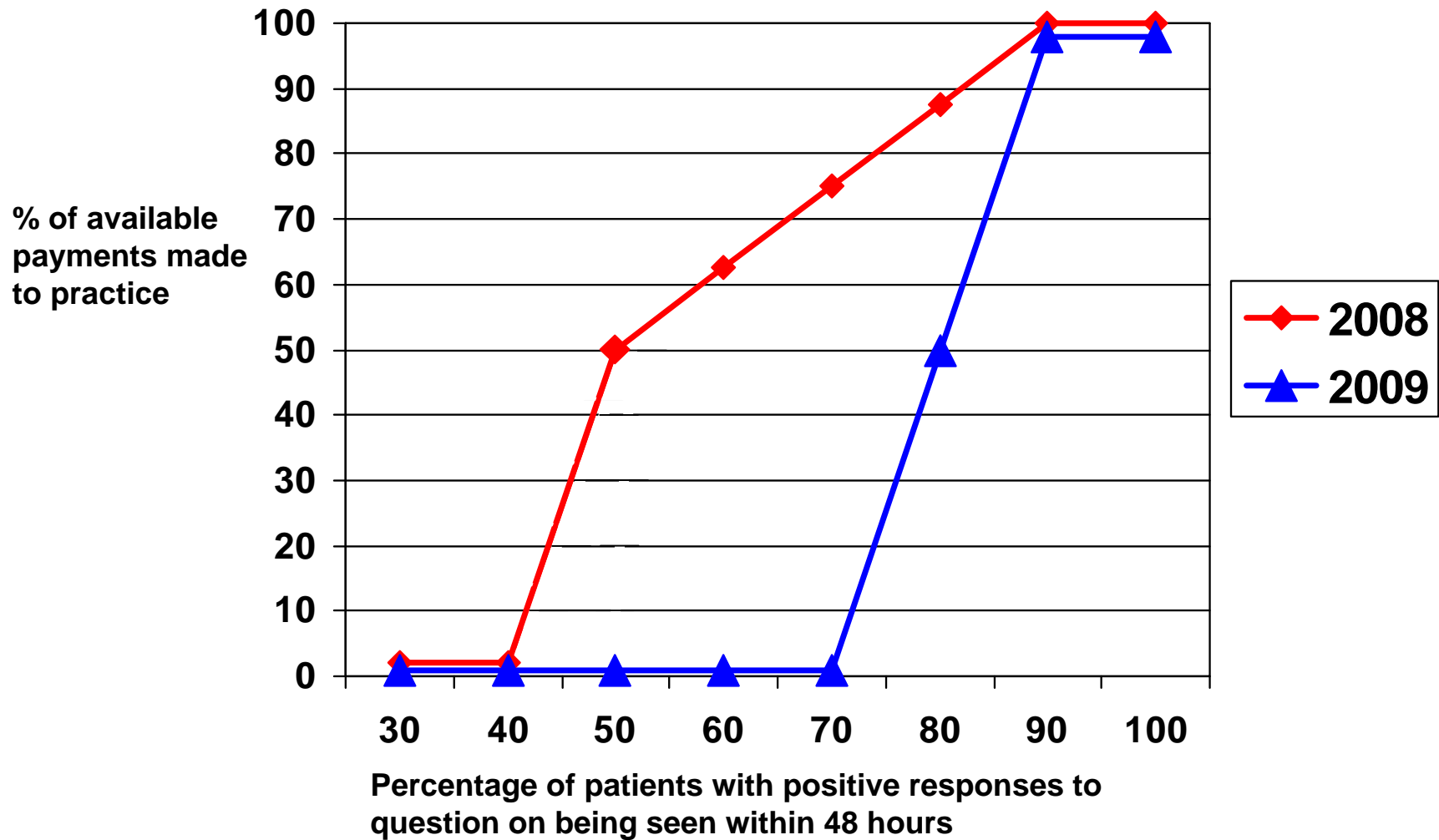
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- **Analysis shows number of responses gave statistically reliable results for 97% of practices**
- **Non-response did not unfairly bias results in practices with low response rates**
- **Main problem was change in payment formula**

Roland et al British Medical Journal 2009;339:b3851



So what does this tell us about health services research?

- **The examples show how health services research underpins initiatives to improve health care**
- **Knowledge is built up through an interactive cycle of research and development**
- **Engagement with the policy world is a messy business**

The priorities of Health Services Research include

- **How health care should be funded (e.g. PbR)**
- **Identifying where care needs to be improved**
- **Identifying how care can be improved (e.g. organisation, measurement, incentives, patient choice)**
- **Measuring relevant outcomes**
- **Tackling inequalities in health and health care**

The priorities of Health Services Research are....

..... your priorities

- Issues of international importance**
- Issues of national importance**
- Issues of local importance**

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about Health Services Research?**

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