Setting targets for health care performance: lessons from a case study of the English NHS

4th NI ESR Public Service Performance Conference
Friday 20th January 2006
British Academy
Gwyn Bevan
4th NIESR Public Service Performance Conference

- What does / ought public sector do?
- Performance assessment
  - Which measures?
  - How used?
  - Fit for purpose?
  - Side-effects?

- Health care

- Star ratings of Primary Care Trusts (PCTs) in England
  - Rationale
  - Model
  - Assumptions
  - Alternative
What does / ought public sector do for health care?

Finance

state pluralism
monopoly

Provide

state monopoly
pluralism
What does / ought public sector do for health care?

Finance
- state monopoly
- pluralism

Provide
- state
- monopoly
- pluralism
- Beveridge
- Provider
- Bismarck
- market
Performance assessment by star rating PCTs

- Rationale: system & case study
- Model: priorities → targets?
- Assumptions justified?
- Alternative?
Why regulate NHS performance by targets?

- Hierarchy → provider market 1991-97
  - Purchaser / provider
  - Money follows the patient

- NHS logic?
  - Ministerial accountability
  - Decision-making by doctors

- Market → regulation 2001-05
  - Targets in star ratings
  - ‘Naming & shaming’
Targets in star ratings

9 Key Targets

‘balanced scorecard’
3 focus areas
40 targets
Did star ratings work? Waiting time targets elective admission

Numbers waiting elective admissions ('000s)

Did star ratings work? Waiting time targets elective admission

Numbers waiting elective admissions ('000s)

Independent regulation of NHS performance

CHI’s new Office for Information on Health Care Performance rather than Department of Health will be responsible for assessing clinical & organisational performance of each part of the NHS … moves towards regulation that is in hands of independent regulators rather than Ministers or health service.

Secretary of State for Health (2002)
Why choose Primary Care Trusts (PCTs) for 2003?

- PCTs capture what public sector does
  - primary care
  - public health
  - commissioning secondary care

- Why ratings for 2003?
  - central to initial development
  - expert commentary by CHI
Planning & Priorities Framework

‘Balanced scorecard’?
Performance assessment by star rating PCTs

- Rationale: system & case study
- Model: priorities → targets?
  - Develop prioritised targets
  - Select accountable targets
- Assumptions justified?
- Alternative?
Develop prioritised targets

- Residual domain
- Prioritised domain for which no measures exist
- Prioritised domain for which good measures exist
- Prioritised domain for which imperfect measures exist
Select accountable targets

50 accountable targets defined on prioritised domain for which good & imperfect measures exist
Performance assessment by star rating PCTs

- Rationale: system & case study
- Model: priorities → targets?
- Assumptions justified?
  - System prioritise what matters
  - Failures outside system do not matter
  - Benefits outweigh gaming
- Alternative?
## System prioritise what matters?

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<th>Treasury Public Service Agreement (PSA) targets</th>
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Scoring system prioritises what matters?

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<th>Key target PCT</th>
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- PSA: Public Service Agreement
- DH: Department of Health
- PPF: Performance Payment Framework
- NHS: National Health Service
- BS: Board of Supervisors
Scoring system prioritises what matters? Inverse care law?

Low income supplement index

Standardisation ➔ inequity?

2003 star rating
Failures outside scoring system do not matter?

\( T_p \) targets \textit{not} \( T_a \) targets

- ↑ value for money
- ↓ health inequalities
- ↓ waiting cancer times from urgent referral
- ↑ rates of thrombolysis for heart attacks
- people with stroke in stroke units
- ↓ duration of untreated psychosis

the killing fields

Britain’s worst serial killer
Benefits outweigh gaming?

- GP appointment < 2 days
  - 30% cannot make > 2 days
- in-patients waiting > target
  - 12 trusts ‘inappropriately’ adjusted lists
- out-patients waiting > target
  - cancellation & delay follow-up appointments → 25 patients lost vision over two years
- time in A&E < 4 hours
  - extra staff & cancelling operations when performance measured
  - patients waiting in queues of ambulances
Performance assessment by star rating PCTs

- Rationale: system & case study
- Model: priorities \(\rightarrow\) targets?
- Assumptions justified?
- Alternative?
Alternative?

- National targets
  - National priorities & good measures
- Local targets
  - Local priorities & variety of measures
  - Counter gaming?
- Omissions
  - Monitoring
- Requires hierarchy
  - Regional governance & analytic capacity
- Regulation ➔ market
  - Patient choice
  - Money follows the patient
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Thank you