



CROSS BORDER CARE EU How to choose the **best** hospital

A study of hospital information portals in five European countries

Report summary 2010-11-18 www.healthpowerhouse.com

Introduction

It seems as if the movement for cross-border healthcare in EU – eventually - will open borders and – reluctantly - deliver information to support informed choice among patients and consumers.

Here the care consumer can become a powerful player – when aware of the performance gaps in healthcare and if ready to act to get the best out of the stressed industry called healthcare. In this study we have portrayed five EU countries looking for major Internet portals of hospital information. In Europe these portals are the state of the art, most likely to be followed by many more as the healthcare integration of the EU advances.

Benchmarking of hospitals and doctors is a matter that engages care consumers. When the Health Consumer Powerhouse for this report asked patient groups to give us their view of this kind of information systems we got massive response around Europe. More than

1 000 answers – all time high for a Patient View survey– indicate that people take an interest but still do not really know how to use these tools and how to interpret the answers.

But still there is a long way to go, as not even these top notch portals, built for years with a lot of money, seem to deliver what consumers and Internet visitors really look for. The new EU cross-border care directive steps up the information requirements. The implementation of the new Directive will mean everything: empowerment to patients, assisted by dedicated governments and engaged partnerships - or disillusion and fragmentation, as today's opaque situation mostly remains, satisfying reluctant bureaucracies?

Building from this vivid interest HCP will try to make this study a social media project with a longer life span, inviting follow up comments to the initial study on our HCP blog (http://blog.healthpowerhouse.com).

This study is funded through an unrestricted educational grant by MSD Europe Inc.

Please read the full report at <u>www.healthpowerhouse.com</u>.

Brussels in November, 2010 Johan Hjertqvist Founder, CEO Health Consumer Powerhouse



Study aim and design

In this report the Health Consumer Powerhouse presents the results from the study "*How to choose the best hospital?*" During the investigative work, the HCP team conducted a research on hospital information portals in five European countries: the Netherlands, Denmark, Germany, the United Kingdom and Sweden. These IT portals were analysed on aspects such as user-friendliness and *quality of care information* (QCI). Furthermore, a questionnaire about the use and effectiveness of such hospital information portals from the patients' point of view was distributed in 32 European countries and evaluated afterwards. The survey indicates huge patient interest in issues of information and choice in healthcare.

Hospital information portals – still a rare breed

There are, according to the Euro Health Consumer Index (2009), three EU countries offering this kind of layperson adopted websites, comprehensively benchmarking healthcare services, aiming to facilitate an active choice among consumers and patients: UK, Denmark, and Germany. Since then, the Netherlands have undergone a development of healthcare Internet portals and qualify in the top group of countries as well.

In another group of countries there are websites providing regional comparisons or information about the performance within a disease area. Some initiatives are public, others are private, often arranged by a newspaper or consumer organisation.

In most countries though, there are no structured provider benchmarks at all. Here the doctor is the only source (if you cannot search for information in other languages, which might offer additional options).



Easily accessible and comprehensive hospital catalogues with medical results



Good examples

How can I get the best treatment (example: hip replacement on <u>www.weisse-liste.de</u>)?

This information portal shows a large list when it comes to indicators that tell the patient something about the quality of the treatment. The patient has the option to go through an individual search process with the help of a search assistant (*Suchassistent*). This method is time-demanding but fruitful for a layperson's knowhow. More experienced users can skip the search assistant and get to their result within three steps.

The search results show how often a hospital has been chosen by the user as a favourite on following criteria:

- Secondary disorders
- Main care of hospital
- Treatment specialty
- Doctors with specialist qualification
- Number of medical personnel vs. number of patients
- Availability of special therapeutic personnel
- Medical equipment
- Nursing care, such as physiotherapy
- Frequency of treatment/operation at hospital
- Quality performance according to BQS
- Ambulant staff capacity (e.g. for after treatment)
- Non-medical criteria: accessibility, equipment of hospital and rooms, catering and other service offers

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Klinikum Dritter Orden München	4	•				•				•			•	٠	
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WolfartKlinik Gräfelfing	12						٠		•	•	٠			•	
<u>Isar Kliniken GmbH</u> München	3	•							•	•				•	



Where can I get a quick treatment (example: kidney stone removal on <u>www.sundhedskvalitet.dk</u>)?

Assume that you suffer from kidney stone and want the smoothest possible procedure, i.e. to "blast" the stone through an ultra sound treatment (does not require an operation, though you need to stay in the hospital for a few days). The <u>www.sundhedskvalitet.dk</u> lists the available clinics for such a procedure, with a star rating (1-5 stars), indicating an overall quality performance.

From the group of around 15 Danish providers of this kind of un-bloody kidney treatment (listed by the portal) you can look deeper into the structure and learn about the timely access conditions. How large a percentage of the patients treated for this diagnosis at the clinic had to wait more than 30 days (which is the Danish guaranteed maximum waiting)?



Nedenfor ser du en liste over behandlingssteder, der tager sig af nyresten - knusning.

Vis tal I forhold til gennemsnit 💌

Placer øverst	-, -, -,,,	¢	Til indlagt behandling	⇔	Til forundersøgelse	⇔
	Aalborg Sygehus		ingen data		20 uger	
	Brønderslev Neurorehabiliteringscenter		ingen data		15 uger	
	Fredericia Sygehus		2 uger		3 uger	
V	Frederiksberg Hospital		3 uger		6 uger	
1	Landsgennemsnit		ingen data		ingen data	



How satisfied were other patients? (general practitioners' and patient reports on <u>www.independer.nl</u>)

General practitioners' reports offer information on hospitals that were chosen by GP's for further treatment of patients. Here Independer.nl offers numerous criteria for comparison, such as:

- Medical expertise
- Readiness for cooperation
- Communication during treatment
- Logistics and organization
- Patient friendliness
- Overall impression

Since May 2005, the Consumer Monitor Independer started collecting data from users of Independer.nl about their hospital experience (if the treatment was not longer than two years ago). The data collection in these patient reports includes valuable information, such as:

- Respect for the patient
- Medical expertise of doctors
- Communication of information to patient during treatment
- Quality of treatment
- Quality of hospital release procedure and after-care

Algeheel oordeel over medisch specialisme	***
Medische deskundigheid m.b.t. specialisme	***
Logistiek & organisatie (servicegerichtheid)	★★ <u>\$</u> \$\$
Patiëntvriendelijkheid	★★★ ☆
Samenwerking met de huisarts	★★★☆
Communicatie met huisarts gedurende opname	★★ <u>↓</u> ☆
Oordeel van patiënten over deze instelling: ICI	4 🛛
Polikliniek bezoek	
Respect voor de patiënten	7,9
Deskundigheid van de arts(en)	7,8
Informatieverstrekking aan de patiënt	7,4
(Dag)opname	
Deskundigheid van de arts(en)	7,9
Kwaliteit van de verzorging	7,7
Kwaliteit ontslagprocedure en nazorg	7



Can I leave comments about my own experiences? (www.nhs.uk)

The nhs.uk information portal gives the patient an opportunity to leave comments about a previous treatment at a hospital on questions such as:

- Hygiene
- Hospital staff
- Respect for the patient
- Involvement of patient in decisions

Further comments on "What I liked" and "What could be improved" are also possible.

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helena.cordasev@healthpowerhouse.com	
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Helena Cordasev	
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Patient opinions from patient survey

In April 2010 we invited activists and groups in 32 European countries to participate in a survey on patient information (managed by PatientView, <u>www.patient-view.com</u>). The objective was to assess the extent to which the healthcare consumers in the different countries of Europe are able to make key choices about hospitals and medicines in 2010.

The impressions we got from the survey added to a great extent to our knowledge. The realistic picture of today's patient is, that he/she wants to be better informed about his/her own health and wishes to make more independent decisions when it comes to healthcare providers. So far, high quality hospital information portals only exist in four European countries, and the information they provide is not always user-friendly and accurate. The rest of the countries are lagging behind when it comes to digital data on healthcare. This is definitely a future challenge for the governments.

The conclusions we could draw from the patient survey show general trends, as we are not talking about absolute numbers:

- Public knowledge around the EU about the existence of hospital information websites is very low (all countries are under the 50% mark)
- The estimated use of such websites is higher than expected (patients in almost all countries would welcome such a website)
- The majority of countries thinks that such a website would affect patients' choice
- Ironically, the closer you are to already existing portals (DK, UK) the less enthusiastic you seem to be while in countries without a trace of such portals you are welcoming (PL, CZ)!





Some conclusions

The main conclusions that we draw together in this report reflect today's picture of *Quality of care information* (QCI) in all major European countries. The Internet as an information source, which is available 24/7, plays a leading role in all areas of a consumer's life. In healthcare however, it is still in its baby shoes and QCI on the Internet has a long way to go before it can become a serious alternative to other information sources.

Throughout our survey we've come to see that the impact of hospital IT-portals as a source of information for patients remains low. In healthcare, people still tend to make their choices based on other grounds, such as the traditional family GP or the hospital around the corner. One possible explanation for this might be that the consumer is generally in doubt about the reliability and credibility of Internet information in healthcare. Also the question remains unanswered, on what ground patients are ready to make active decisions about an often complicated question such as hospital treatments: independently or in close dialogue with healthcare professionals, peers and relatives? Emotional barriers from a lay-person's perspective, as fear and a general feeling of powerlessness, seem to be one of the reasons why patients tend to stick to their traditional choices.

The type of information presented on hospital information portals should evolve around at least four pillars: quality of treatment, waiting times, patient experience and patient satisfaction. None of the portrayed IT portals performs well in all four aspects. Treatment quality seems to be the main focus, but it is rarely communicated in a user-friendly way. In some cases it is displayed in an over-simplified way, where vital consumer information is missing. In others, consumers face a long list of indicators, which seems overwhelming for a lay-person's know-how. So in the end, the consumer's approach is missing in all of these portals.

There is no doubt however, that there is a need for a development of hospital/healthcare information portals, which could go hand in hand with the *new EU directive on cross-border healthcare*. Patient mobility requires information to patients, and there will be a demand for each Member State to maintain national contact points, which will inform patients about the availability of healthcare, quality outcomes, safety standards, access to medication, administrative procedures, complaints and appeals etc. Even price information might evolve from this new directive. Hospital information portals naturally will become another information source for patients. In this evolving information landscape there should be room for large many different kinds of service providers, as in other fields of consumer information.

But if then patients start making choices for hospitals, which are delivering better quality for the least price, the interesting question comes up: will this drive hospitals to better quality outcomes? In maternity and pediatric care, consumers in many countries already have a strong tendency to compare the services offered by the diverse hospitals. As a matter of fact hospitals are increasingly adapting to the consumer's preferences. In the increasing hunt for value for money healthcare open benchmarks will have the potential to drive quality and productivity, an essential future leverage of the EU healthcare integration. But choice and transparency as such will not be enough to get the best out of healthcare; for that it will take significantly better systems governance and hospital management.

But that is, as you say, a different story (worth coming back to)!

