

Chapter 13

Accountability and Public Reporting: Publication of Performance to Improve Quality

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ABSTRACT

Patient engagement is based on the assumption that making patients co-producers of their health might enhance their satisfaction and responsibility with the healthcare system and it is strictly linked with the health provider choice. Making patients active participants in their healthcare is considered a crucial component of high-quality healthcare services. Quality of care is a central concern for health systems: accountability, transparency, and public reporting are some key factors in promoting healthcare improvement. In the healthcare field, public reporting is one of the major tools in supporting patients' decisions making process, by providing structure, process and outcome measures. We performed a web-based analysis of the major initiatives of public reporting in order to highlight their main characteristics: properties (public or private), data source (health providers, ad hoc surveys, etc.), general information reported (i.e. size, language spoken, amenities), doctors' information, patients' ratings (satisfaction / experience), clinical indicators.

INTRODUCTION

In this chapter, moving from the link between quality in healthcare and patient/consumer engagement, as driving concept, we deeply explain interactions between some challenging topics in the healthcare sector: quality of health care, accountability, transparency and public reporting.

In the first part of the chapter, more theoretical, we provide a synthesis of the literature about the topics.

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Patient engagement – borrowed from the marketing conceptualization of consumer engagement – is based on the assumption that making patients/clients co-producers of their health might enhance their satisfaction and responsibility with the healthcare system, by improving positive clinical outcomes and reducing health delivery costs (Graffigna, Barelo, & Triberti, 2015).

A recent report on patient engagement in health care, identifies an Engagement Behavior Framework, as a qualitative description of the behaviors that individuals must perform to optimally benefit from their care, based on ten types of tasks, that deals with the healthcare process as a whole, from the choice to the payment of providers, from health promotion and prevention to the end of life planning (Center for Advancing Health, 2010).

Making patients active participants in their healthcare is considered a crucial component of high-quality healthcare services. Since 2001, the Institute of Medicine's report "Crossing the Quality Chasm" (2001) has been recognizing patient-centered care as an essential dimension of high-quality care (Clancy, 2011). In 2006, the World Health Organization indicates patients and the population engagement as one of the six domains of quality interventions (World Health Organization [WHO], 2006).

Wide definition of quality and quality improvement and a focus on quality measurement are proposed.

Several formulations of quality definition are both possible and legitimate: all the stakeholders involved in the healthcare sector consider different aspects of quality of care depending on where they are located in the systems of care and on the nature of their responsibilities.

Avedis Donabedian, known as the founder of the theory of quality in healthcare stated that "quality of care is the kind of care that is expected to maximize an inclusive measure of patient welfare after one has taken into account the balance of expected gains and losses that attend the process of care in all its parts" (Donabedian, 1980). His definition can be synthesized by this quote: "Do only what is useful (effective theory), in the best way (effectiveness) with the least cost (efficiency), for who (accessibility), and only to those who really need (appropriateness), making do care who is competent to do it (competence), obtaining the best results considered (satisfaction)" (Donabedian, 1980).

Quality of healthcare has been one of the most challenging issues for researchers for many years. Taking part from quality of healthcare definition, other streams of research emerged: quality assessment or measurement, quality improvement, measurement of quality improvement approaches, and many other still appears. Furthermore, quality of healthcare dominates and leads public policy agenda, so that it has been defined as a process for making strategic choices in health systems, as World Health Organization stated in the subheading of a report published in 2006 (WHO, 2006). Thus, quality of healthcare connects with one of the most important Public Health movement of the last decades, the Clinical Governance, that promotes continuous quality improvement by creating an environment in which excellence in clinical care will flourish (Sally & Donaldson, 1998) and many other current concept, such as accountability and transparency, that encompasses procedures and processes by which healthcare organizations try to reach their goals in terms of quality improvement.

On the patient side, this reflects on better clinical experiences, greater appropriateness of care, increased trust in the patient-physician relationship. Moreover, patients own more information that make them able to choose the providers that better meet their needs, aware about the care they receive and involved in their health plans, becoming engaged in their health and care. Public reporting has a great role in this frame, as it refers to the publication of information and reports on the quality of care delivered by providers, that could support patient choices.

Patients have to decide whether and when to seek care, which plans and providers meet their needs, how to manage their health (Clancy, 2011). Provider choice is one of the most important patient engage-

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