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LIMITS OF THE PERFORMANCE EVALUATION SYSTEM FOR THE ROMANIAN PUBLIC HOSPITALS

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Introduction

1.

- The Health System Reform in Romania began in 2001.

2.

- In order to join the European Union, the main challenges were the decentralization and restructure of public hospitals.

3.

- There were two novelty elements: The DRG-based (Diagnosis Related Group) payment system (2005) and the manager evaluating system (2008)

2005

- DRG reimbursement system for hospitals
- DRG = Diagnosis Related Group - Classification of cases discharged into diagnostic groups on the basis of clinical similarity and similar resource consumption
- ICM – Case-Mix Index: the final outcome of DRG classification system is a determining factor for distributing the budget

2008

- Hospital Manager Performance Assessment System - Set of 4 categories of performance indicators:
 - *indicators of the human resource*
 - *economic and financial indicators*
 - *service usage indicators (including ICM)*
 - *quality indicators for patient safety and satisfaction*

Aim of the study

To explore the articles published in the last 10 years (2008-2018) regarding the performance in public hospitals in Romania

Objectives

1. To identify the main directions of the articles

2. To highlight common points and differences

3. To identify positive or negative connotations regarding the approached themes

Material and Method

1. Material: 10 scientific articles (open-source) published in the last 10 years (2008 - 2018), resulting from searches on the Web of Science.

Key words or collocations used on Web of Science:

- hospitals performance indicators in Romania – 8 results;**
- hospital quality in Romania - 87 results;**
- hospital effectiveness in Romania – 11 results;**
- hospital efficiency in Romania – 19 results.**

2. It was applied a descriptive – interpretative approach, using analysis content techniques (thematic categories, codes for frequent major ideas and assignation of connotations to the codes)

Tabel 1. List of the articles used

Authors	Title of the article	Year of publishing
Voinea L., Pamfilie R.	Considerations regarding the performance improvement of the hospitals healthcare services from Romania by the implementation of an integrated management system	2009
Boldureanu D., Boldureanu G.	The performance evaluation of managers in romanian public hospitals	2010
Radu C.P., Chiriac D. N., Vlădescu C.	Changing Patient Classification System for Hospital Reimbursement in Romania	2010
Ștefănescu A., Țurlea E., Calu D. A.	Performance measurement in Romanian public hospitals	2011
Bârliba I., Nestian A.S., Tiță S.M.	Relevance of Key Performance Indicators (KPIs) in a Hospital Performance Management Model	2012
Bârliba I., Tiță S.M.	Important bioindicators for health management in Romania	2014
Beșciu C.D.	Efficiency of the management practiced in twenty emergency hospitals in Romania reflected by the web performance and the indicators used	2016
Antoși V.M.	Romanian Healthcare Financing Based on the Diagnosis - Related Group Payment System (DRG)	2017
Talaghir L.G., Gheonea V., Rus C.M., Crețu C.M., Iconomescu T.M.	Statistical Analysis of Hospitalized Morbidity Indicators Based on DRG in Romanian Public Hospitals	2018
Rotea C.S, Logofătu M., Ploscaru C.C.	Quantitative model for assessing the impact of reward system elements on hospital efficiency	2018

Results

Tabel 2. Articles classification on thematic categories

Thematic categories based on abstract and key-words mentioned in the abstract	Frequency of items corresponding to the category	Publication period
Performance in relation to health management	3 of 10 items	2008-2011
Indicators in relation to hospital performance management	3 of 10 items	2011-2016
The DRG patient classification system in relation to hospital funding	2 of 10 items	2010-2017
Indicators in relation to hospital funding	1 of 10 items	2018
Reward in relation to hospital efficiency	1 of 10 articles	2018

Tabel 3. List of dominant ideas in the articles

Main ideas in the articles	Number of Papers	References	Connotation
compliance with EU standards	3	3	Positive
the concept of constrained performance	1	1	ambivalent
statistical confirmation of the indicators	3	3	positive
the effects of DRG implementation and also for the hospital ICM	3	4	negative
the limits of the indicators	5	7	negative
limits of the DRG reimbursement system for hospitals (weighted costs vs. real costs)	2	4	negative
unorthodox practices at the hospital level as an effect of DRG	2	5	negative
the specialized human resource, the strength of hospitals	2	2	positive

Tabel 4. Summary of methods used in the articles

Approach	Number of papers	Period of publishing	Method
Qualitative approach, secondary data	3	2008-2011	<ol style="list-style-type: none">1. deduction, induction, interpretative research,2. documentary study
Quantitative approach, using numeric data	6	2011-2018	<ol style="list-style-type: none">1. Descriptive and exploratory statistical methods;2. Inferential statistical methods
Qualitative approach, primary data	1	2016	Quantification of the presence / absence of certain web indicators

Discussion

❑ The main ideas, with high frequency in the articles content, are related to the limits of the evaluation system of hospital management and, implicitly, of the indicators (7 references) and to the poor management of implementation process of DRG system and its overall effects in hospitals (13 references).

❑ There is a dominant negative connotation regarding the major themes treated in the articles:

-The limits of indicators used for hospital management evaluation;

-The negative effects of DRG system used for patient classification and hospital reimbursement, due to the absence of a romanian base of calculation for the tariffs associated to the DRG classification.

❑ The positive connotations are related to:

-the statistical confirmation of the indicators (3 references) ;

-the major strength of the hospitals, relying on the human resource (2 references)

Conclusions

- ❑ A gradual widening of research interests on hospital management performance since the introduction of the evaluation system in 2008 and up till now.
- ❑ The dominance of quantitative approaches after 2011, due to the fact that it was created a large data base at national level with hospitals reportings.
- ❑ The dominance of preoccupation for DRG system of patient classification, used in hospital reimbursement, influencing hospital efficiency and also reflecting hospital performance.
- ❑ The proposal for well defined and standardized categories of indicators for hospital performance and also for new sources for performance appreciation.