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## Assessing an Oncologic service's admission: an evaluation model

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IRST IRCCS, a cancer center in Meldola (Northern Italy), experimented a performance evaluation method to assess the effectiveness of its management actions into an oncology service, before and after the taking in charge of the service from a local public provider (2013-2014). The method has been applied to a radiotherapy service to estimates the value of care produced for citizens using as benchmark the same service in Meldola. The performance was expressed in terms of value produced, meaning the ratio between the quality/outcome, and the per capita cost for radiotherapy considering all expenses for the population, in an attempt to translate NHS principles into a single index. An expert panel selected the variables, indicators and their related weights of the most representative dimensions:

- Clinical Outcome
- Appropriateness
- Safety and Perceived Quality
- Accessibility

The results of this study is a composite indicator, called "superindex", that combines separate indicators into a unique measure at nominator, and accounts costs at denominator. The data shows as in 2013 the value assessed by the public provider was lower than the benchmark (0.35 and 0.78, respectively), translating into a higher per-capita cost ( $12 \in vs 9 \in$ ) and lower service level (4.2 vs. 7.0 quality points).

In 2014 the data, after IRST has taken in charge the management of the service, shows a significantly value improvement (0.47; + 34%) as a result of a quality points enhancement from 4.2 to 5.1 due to a better clinical outcome, perceived quality and shorter wait times.

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