

Associated Institute of the University of Basel

Swiss Centre for International Health Health Technology and Telemedicine Unit

Swiss TPH Spring Symposium 2017

Evidence Meets Decision Makers: Better Use of Evidence for Better Health

Improving Policy Planning through Information Systems Egypt case study

Martin Raab





Phase 1

2002 **-** 2006

Conventional Radiology

Phase 2

2007 -2011 Introducing
Digital Radiology

Phase 3

2012 -2016 Focus on **Digital and Teleradiology**

Radiology Information System in Egypt:



Towards improved data availability and policy planning

Figures, facts ...

-> 90 million population,.. 430+ hospitals (MoH), Population growth: 1.5 mio/a

Radiology: Second most expensive health care intervention area

-> substantial capital investments, substantial recurrent costs

High demand of radiology services

-> high Public Heath relevance

Technological transition

->challenging: moving from conventional to digital (incl. Information Systems)

Decision making complex and critical; reforms needed:

(Capital investments, quality of care, reducing radiation health hazards, ...

MoH Egypt Curative Care Directorate Radiology:



Typical policy items and policy formation questions..

Human Resources

a) types of staff, regional distribution, qualifications and licenses; b) over/under staffing?; configuration (HR) for teleradiolgy; Need for CE (planning of new US; CT, MRI, ...)

Capital Investment Planning

In which hospital/ governorate/ district to invest in new equipment? Impact analysis: Recurrent costs as part of total operational budget? Where can private clinics complement public health services?

Health Service information

number of examinations/ modality over time in particular hospitals/ governorates, etc.

Performance:

a) examinations per time; b) quality: poor quality examinations



Past reality of decision making: not only in Egypt ...

Decisons often based on ...

- demand from interest groups (local politicians, professional associations)
- Individuals opinions, values
- few site assessment reports

Strength of Evidence?



.. Plenty of policy work and descisions to be done ...

Public health decision-making is critically dependent on the timely availability of sound data.

(WHO Bulletin 2005, C AbouZahr, T.Boerma)

Where to find relevant, up to date information that supports decision making?

- **1. Quantitative Data** (Epidemiological data, studies (mainly foreign financed, ..)
- **2. Qualitative Information** (narrative accounts, .)
- **3. Reports** (Monitoring, case descriptions, .demand reports from interest groups, .)
- 4. Performance Monitoring and Management Information Systems



What evidence should be at hand for Decision Makers?

<u>Ideally</u>:

decision making based on relevant & reliable information, .

.. available in the right format , .. At the right time ..

Currently: emphasis on 'supply side' of information.

Start with the **demand side!**

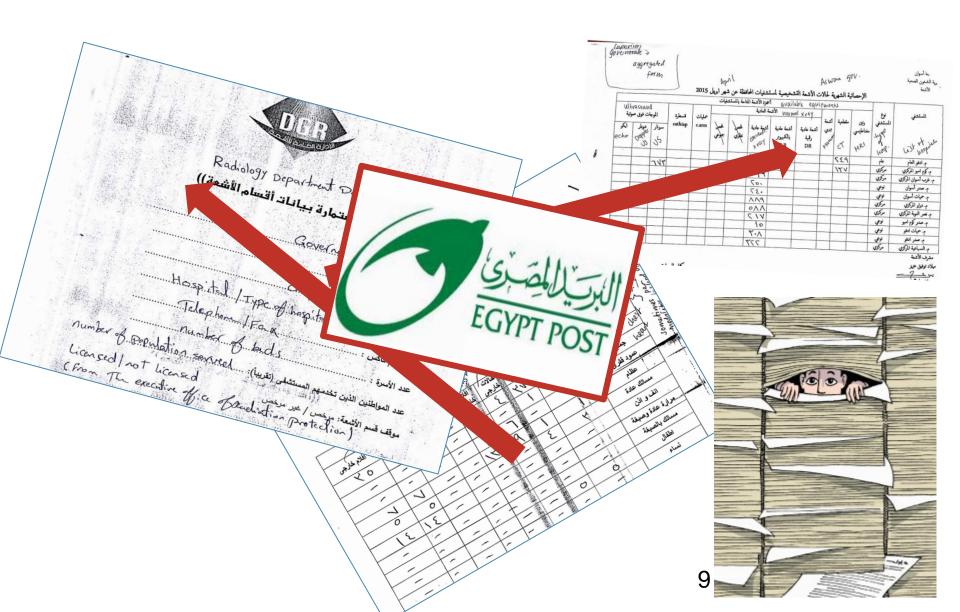


"Who needs the data and what do they need them for"





-> how to start? who and what to include?





Designing a new Information System

-> Conclusion: a computerised Information System is required because of ..

- volume of data
- 2. number of sites
- flexible analysis and reporting (as input to descision making)

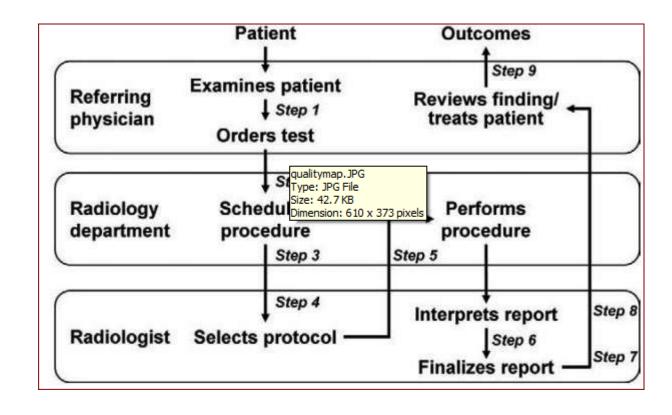


Management Information System



Groundwork to be done ...

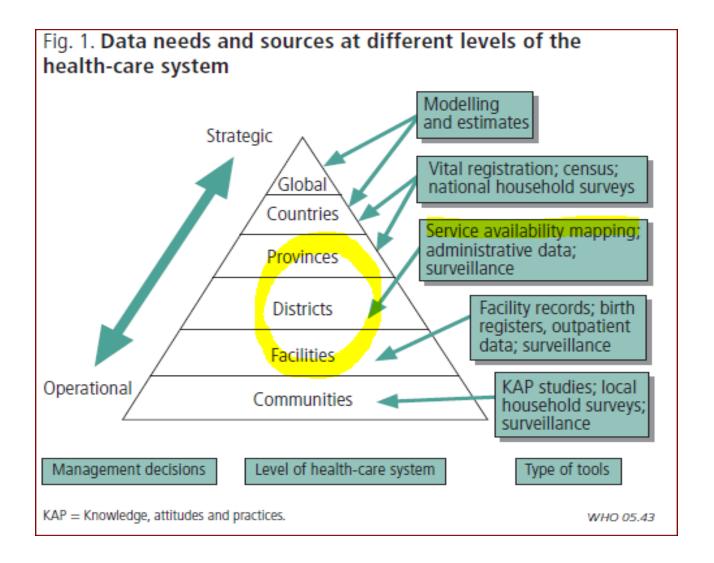
- Content Analysis (e.g. IT readiness assessment, .)
- Mapping processes, ...



Designing a new Information System



- -> how to start? who and what to include?
 - -> System architecture: levels of governance ..

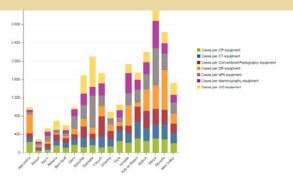


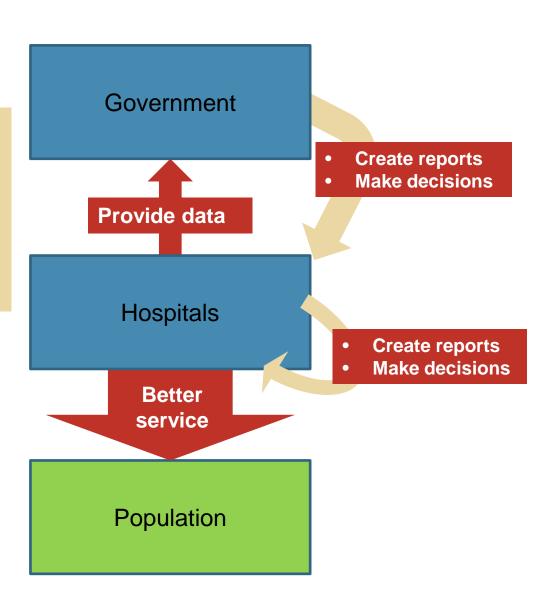
New Management Information System Repolicion and data flows



Beneficiaries and data flows ..

- ✓ Evaluation and improvement can be based on real data
- Export to images, PDF, Excel
- ✓ Data viewable over months and years

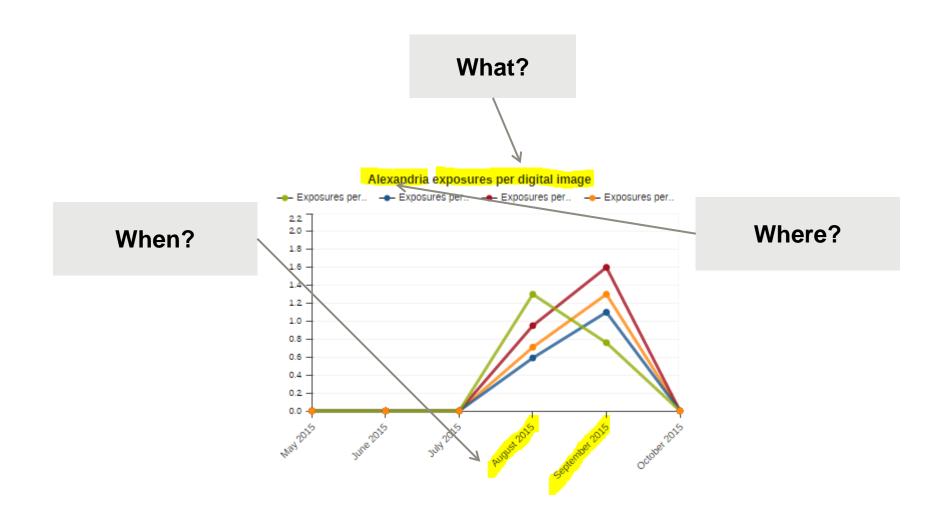




Management Information System



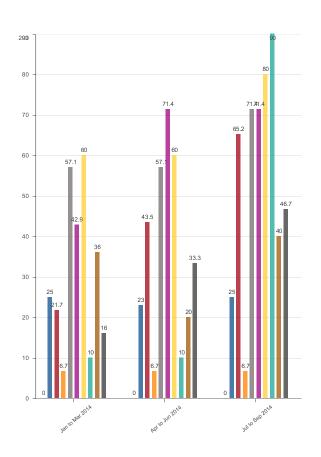
What to measure for which purpose?



INDICATORS!!

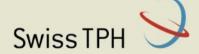


How to define data fields / How to calculate indicators



Indicator name	Short description	า		
Indicator ID	Unique Identifier: (IP PR OP OI) - ## example : IP-03			
Definition of important terms	Clarify terms if possibly ambiguous			
Purpose	What is the high	er-level goal	to serve by monitoring t	his indicator?
Numerator	Data element that (AC = already co			
Denominator	Data element that constitutes the denominator (AC = already collected in paper forms)			
Unit of measure	(rate ratio per	centage num	nber)	
System component	(Input Process	Output Ou	tcome and Impact)	
Frequency	Reporting			
	Utilization			
Data source	Numerator			
	Denominator			
Data management	Calculation	(nominator)	(denominator)*(factor o	r constant)
	Validation	(e.g. only po Denominato numerator (sitive whole integers <	oply for data entry of the integers < 2000)
Data visualization	appropriate type see: <u>Data visuali</u>		on(s)	
Level of	DGR		Governorate	Hospital
measurement	see: Level of me and the indicato		х	х
Target	Target value for	the indicator:	what is the goal to rea	ch

New Management Information System



Key Interfaces: Data Akquisition Forms

Data collection/consolidation sheet	Reports
Sovernorate :	Number of reports of Computed Radiography (CR) Number of reports of Computed Tomography (CT)
Hospital:	Number of reports of Computed Tomography (CT) Number of reports of Conventional Radiography
The state of the s	(Made Sp)
Month / Year:	Number of reports of Direct Digital Radiography (DR)
	Number of reports of Magnetic Resonance Imaging (MRI)
Cases Number of cases of Computed Tomography (CR)	Number of reports of Mammography
	Number of reports of Ultrasound (U/S)
Number of cases of Computed Tomography (CT)	Staff abilities
Number of cases of Conventional Radiography	Number of radiographers who are able to image with Computed Radiography (CR)
Number of cases of Direct Digital Radiography (DR)	Number of radiographers who are able to image with Computed Tomography (CT)
Number of cases of Magnetic Resonance Imaging (MRI)	Number of radiographers who are able to image with Conventional Radiography
Number of cases of Mammography	Number of radiographers who are able to image with Direct Digital Radiography (DR)
Number of cases of Ultrasound (U/S)	Number of radiographers who are able to image with Magnetic Resonance Imaging (MRI)
Exposures	Number of radiographers who are able to image with Mammography
Number of exposures of Computed Tomography (CT)	Number of radiographers who are able to image with Ultrasound (U/S)
Number of exposures of Direct Digital Radiography (DR)	Number of radiology consultants who are able to image with Computed Radiography (CR)
Number of exposures of Magnetic Resonance Imaging (MRI)	Number of radiology consultants who are able to image with Computed Tomography (CT)
Number of exposures of Mammography	Number of radiology consultants who are able to image with Conventional Radiography
File	Number of radiology consultants who are able to image with Direct Digital Radiography (DR)
Films Number of all raw/new films of Conventional Radiography	Number of radiology consultants who are able to image with Magnetic Resonance Imaging (MRI)
Number of bad quality films of Conventional Radiography	Number of radiology consultants who are able to image with Mammography
reuniber of bad quality films of Conventional Radiography	Number of radiology consultants who are able to image with Ultrasound (U/S)
Functional equipment	Number of radiology specialists who are able to image with Computed Radiography (CR)
Functional pieces of Computed Radiography (CR)	Number of radiology specialists who are able to image with Computed Tomography (CT)
Functional pieces of Computed Tomography (CT)	Number of radiology specialists who are able to image with Conventional Radiography
Functional pieces of Conventional Radiography	Number of radiology specialists who are able to image with Direct Digital Radiography (DR)
Functional pieces of Direct Digital Radiography (DR)	Number of radiology specialists who are able to image with Magnetic Resonance Imaging (MRI)
Functional pieces of Magnetic Resonance Imaging (MRI)	Number of radiology specialists who are able to image with Mammography
Functional pieces of Mammography	Number of radiology specialists who are able to image with Ultrasound (U/S)
Functional pieces of Ultrasound (U/S)	realises of realising specialisis with are able to image with ordasound (ord)
Images	Staff numbers
Number of images of Computed Radiography (CR)	Number of radiographers FTE
Number of images of Computed Tomography (CT)	Number of radiology consultants FTE
Number of images of Conventional Radiography	Number of radiology residents FTE
Number of images of Direct Digital Radiography (DR)	Number of radiology specialists FTE
Number of images of Magnetic Resonance Imaging (MRI)	
Number of images of Magnetic Nesonance imaging (MNI)	Date when completely submitted to DGR Information System (dd / MM / YY) : / /
Number of images of Ultrasound (U/S)	-
Number of images of Oldasound (O/S)	

New Management Information System



Key Interfaces: Data Akquisition Forms





ستمارة جمع بيانات نظام معلومات الأشع

المحافظة
المستشفى
السنة/الشهر

الحالات (Cases)
عدد حالات التصوير بالاشعة الرقمية(CR)
عدد حالات التصوير بالاشعة االمقطعية(CT)
عدد حالات التصوير بالأشعة العادية
عدد حالات التصوير بالأشعة الرقمية(DR)
عدد حالات التصوير بالرنين المغناطيسي(MRI)
عدد حالات فحص الثدي بالأشعة
عدد حالات الموجات فوق الصوتية(U / S)

التعرض (Exposures)
عدد حالات التعرض لتصوير الاشعة المقطعية(CT)
عدد حالات التعرض لتصوير الاشعة الرقمية(DR)
عدد حالات التعرض لتصوير الاشعة الرنين المغناطيسي(MRI)
عدد حالات التعرض لتصوير اشعة فحص الثدى

(Films) کم	
	عدد جميع الأفلام الخام أو الجديدة من الأشعة العادية
	عدد الأفلام ذات الجودة السيئة من الأشعة العادية

الاجهزة (Functional equipment)
عدد اجهزة الاشعة الرقمية (CR) التي تعمل
عدد اجهزة الاشعة المقطعية (CT) التي تعمل
عدد اجهزة الاشعة العادية التي تعمل
عدد اجهزة الاشعة الرقمية (DR) التي تعمل
عدد اجهزة اشعة الرنين المغناطيسي (MRI) التي تعمل
عدد اجهزة اشعة فحص الثدى التي تعمل
عدد اجهزة الموجات فوق الصوتية التي تعمل

الصور (Images)
عدد افلام(صور) الاشعة الرقمية(CR)
عدد افلام(صور) الاشعة المقطعية(CT)
عدد افلام(صور) الاشعة العادية
عدد افلام(صور) الاشعة الرقمية(DR)
عدد افلام(صور) اشعة الرنين المغناطيسي(MRI)
عدد افلام(صور) اشعة فحص الثدي

تقاریر (Reports)
عدد تقارير الاشعة الرقمية(CR)
عدد تقارير الاشعة المقطعية(CT)
عدد تقارير الاشعة العادية
عدد تقارير الاشعة الرقمية(DR)
عدد تقارير اشعة الرنين المغناطيسي(MRI)
عدد تقارير اشعة فحص الثدى
عدد تقارير اشعة الموجات فوق الصوتية

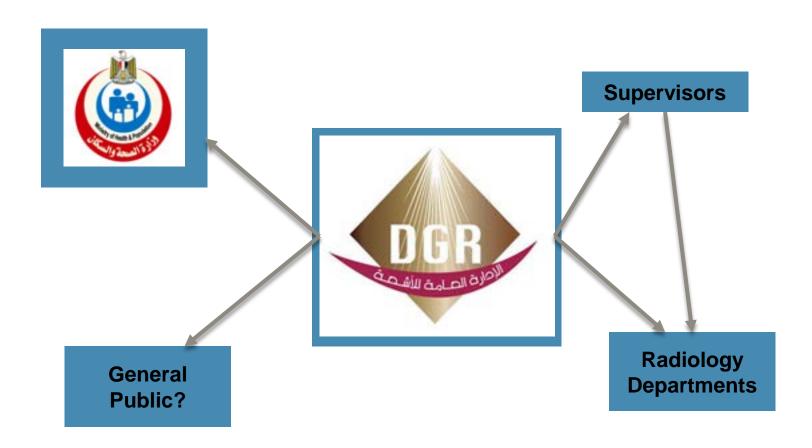
قدرات الموظفين (Staff abilities)
عدد اخصائي الاشعة (دوام كامل - كل الوقت)
عدد فنيي الاشعة القادرين على التصوير بالاشعة المقطعية(CT)
عدد فنيي الاشعة القادرين على التصوير بالاشعة العادية
عدد فنيي الاشعة القادرين على التصوير بالاشعة الرقمية(DR)
عدد فنيي الاشعة القادرين على التصوير باشعة الرنين المغتاطيسي(MRI)
عدد فنيي الاشعة القادرين على التصوير باشعة فحص الثدى
عدد فنيي الاشعة القادرين على التصوير باشعة الموجات فوق الصوتية
عدد الاطباء المقيمين اشعة القادرين على كتابة تقارير افلام الاشعة الرقمية (CR)
عدد الاطباء المقيمين اشعة القادرين على كتابة تقارير افلام الاشعة المقطعية (CT)
عدد الاطباء المقيمين اشعة القادرين على كتابة تقارير افلام الاشعة العادية
عدد الاطباء المقيمين اشعة القادرين على كتابة تقارير افلام الاشعة الرقمية (DR)
عدد الاطباء المقيمين اشعة القادرين على كتابة تقارير افلام اشعة الرنين المغناطيسي (MRI)
عدد الاطباء المقيمين اشعة القادرين على كتابة تقارير افلام اشعة فحص الثدى
عدد الاطباء المقيمين اشعة القادرين على كتابة تقارير افلام اشعة الموجات فوق الصوتية
عدد استشاريي الاشعة القادرين على كتابة تقارير افلام الاشعة الرقمية(CR)
عدد استشاريي الاشعة القلارين على كتابة تقارير افلام الاشعة المقطعية(CT)
عدد استشاريي الاشعة القلارين على كتابة تقارير افلام الاشعة العادية
عدد استشاريي الاشعة القادرين على كتابة تقارير افلام الاشعة الرقمية(DR)
عدد استشاريي الاشعة القادرين على كتابة تقارير افلام اشعة الرنين المغناطيسي(MRI)
عدد استشاريي الاشعة القادرين على كتابة تقارير افلام اشعة فحص الثدى
عدد استشاريي الاشعة القادرين على كتابة تقارير افلام اشعة الموجات فوق الصوتية
عدد اخصائي الاشعة القادرين على كتابة تقارير افلام الاشعة الرقمية(CR)
عدد اخصائي الاشعة القادرين على كتابة تقارير افلام الاشعة المقطعية(CT)
عدد اخصائي الاشعة القادرين على كتابة تقارير افلام الاشعة العادية
عدد اخصائى الاشعة القادرين على كتابة تقارير افلام الاشعة الرقمية(DR)
عدد اخصائي الاشعة القادرين على كتابة تقارير افلام اشعة الرنين المغناطيسي(MRI)
عدد اخصائي الاشعة القادرين على كتابة تقارير افلام اشعة فحص الثدى
عدد اخصائي الاشعة القادرين على كتابة تقارير افلام اشعة الموجات فوق الصوتية

عدد الموظفين (Staff numbers)
عدد فنيي الاشعة (دوام كامل - كل الوقت)
عدد استشاريي الاشعة (دوام كامل - كل الوقت)
عدد الاطباء المقيمين اشعة (دوام كامل - كل الوقت)
عدد اخصائي الاشعة (دوام كامل - كل الوقت)





Who has access to what information in which format?

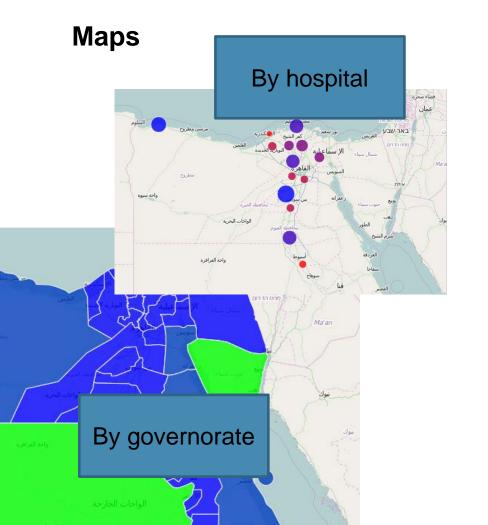


Data Analysis and Information Visualisation

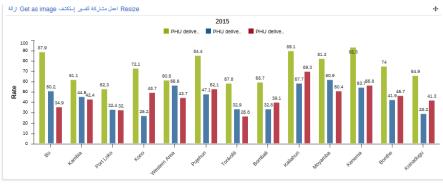


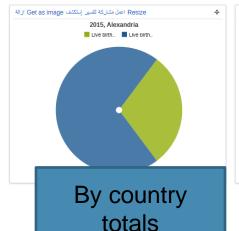
Response to Decision Makers needs

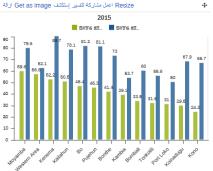
Aggregated data for analysis



Charts







OUTCOMES



What changed?

Do we have 'better evidence for decision making now??



Human Resources:

Staff Regional Allocation Plans and Standards

Continuous Education Policy

HR Strategy Planning for Telemedicine concept

Infrastructure Reform Planning:

Capital Investment Strategies

Impact Analysis (recurrent cost versus modalities)

Services Mix Policy: public health services versus private

Service Profile Analysis:

Services coverage per region

Performance Analysis

Number and type of examinations per hospital / governorate

Quality of Care Analysis, e.g. re-takes



«It's not about control – it's about improving healthcare through better information»





Parking Lot

Swiss TPH

Appropriate Information Systems:

Reliable and timely suppliers of evidence for decision making

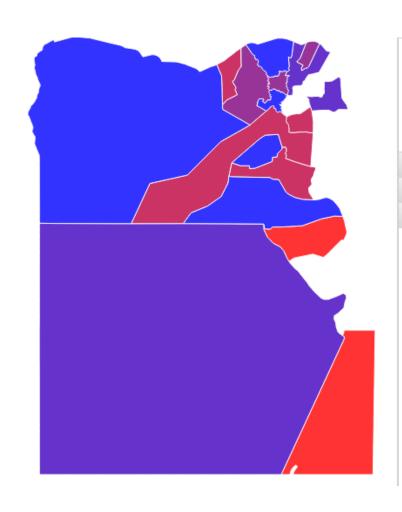
Typical Domains that HIS should address

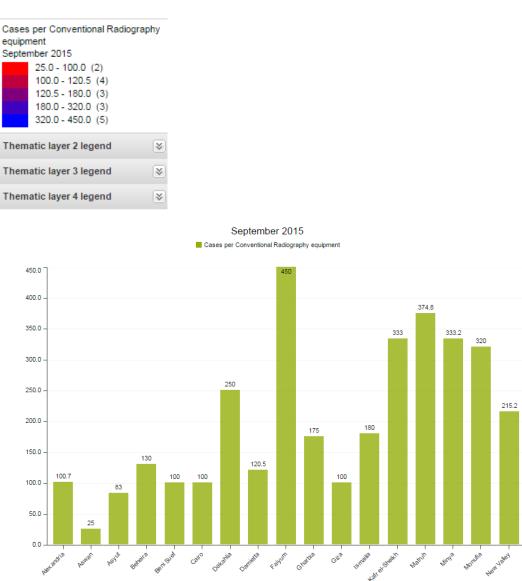
- 1. Health determinants (socioeconomic, environmental, ..)
- 2. <u>Input to the health system</u>, and related processes, . health infrastructure, facilities and equipment, costs, human and financial resources
- 3. the performance of the health system such availability, quality and use of health services;
- 4. **health outcomes** (mortality, morbidity, disability, well-being, disease outbreaks and health status);
- 5. health inequities in determinants, coverage and use of services, and outcomes, including key stratifiers such as sex, socioeconomic status, ethnic group and geographical location

Data Analysis and Information Visualisation Swiss TPH



Response to Decision Makers needs





Data Analysis and Information Visualisation Swiss TPH

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Response to Decision Makers needs (2)

