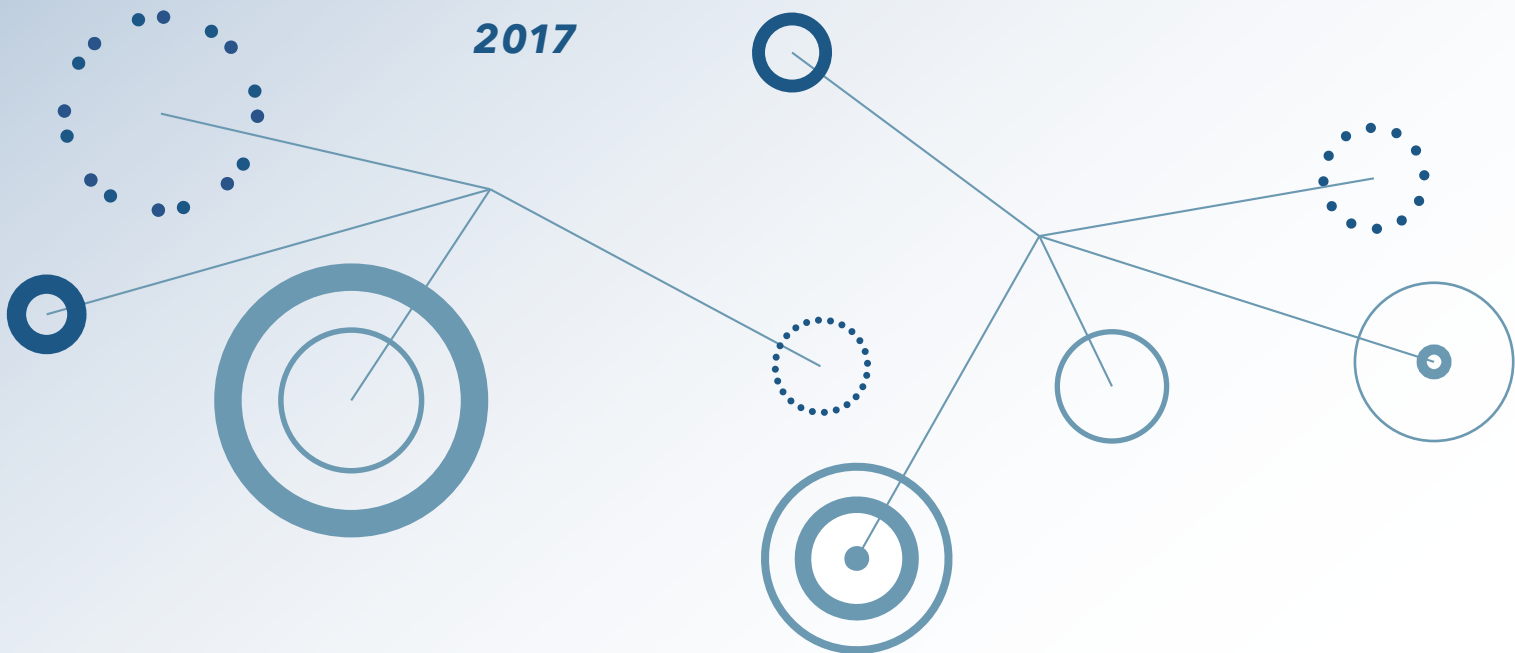




anq

Annual Report

2017



Milestones

26.1. / Practice-orientated

250 experts come together to participate in the 2017 Q-Day Workshop in Bern where they discuss actual projects and practical measures that deal with all aspects of ANQ reviews.

1.5. / Development

ANQ is developing a national training concept in collaboration with SW!SS Reha and Plateforme-Reha.ch. in order to promote standardised data collection.

15.6. / Construction

The first scientific evaluation of the 2012-2015 data collation has shown that the implant register SIRIS has become an indispensable source of information.

12.7. / Contribution

The ANQ, co-editor of the health register recommendations, is invited by the Federal Office of Public Health (FOPH) to comment on the draft of the cancer registration regulation (KRV).

15.8. / Interdisciplinary

ANQ patient satisfaction short questionnaire; the quality criteria have been successfully verified and the report on acute care and psychiatry is now available.

1.9. / Innovation

Psychiatric clinics start the first ever standardised national patient satisfaction survey in the month of September.

Editorial

The ANQ adjusted a number of aspects of its long-term planning during 2017. At association level it approved the amended statutes that allow the association to welcome curafutura as a new member. The board and administrative office undertook important groundwork to enable a critical review of the current range of services with regard to financial factors. This included a preliminary study of the potential expansion of the ANQ survey to include hospital outpatients. These insights build the basis for further discussions.

During the reporting year, the ANQ published transparent results of twelve ANQ quality reviews that include the names of the relevant hospitals and clinics. Next year's report will for the first time provide detailed results of sectoral rehabilitation reviews by hospital/clinic. Psychiatric clinics conducted the first ever patient satisfaction survey in the autumn. An interdisciplinary patient satisfaction survey will become a reality in 2018 thanks to the work accomplished in 2017. All ANQ departments will utilise the new questionnaire in the future.

In the year under review the ANQ again addressed the question of how the ANQ survey results are used by third parties. The administrative office intensified its efforts to raise awareness using the information brochure 'Benefits and limitations of ANQ reviews' through the media, at events, in public discussions and during personal conversations. The aim is to continue promoting an objective discussion and to underscore the good scientific practice to which the ANQ is committed.

The 2017 Q-Day Workshop offered an opportunity to engage in professional exchange at a high level. Numerous participants made use of the practice-orientated discussion and networking platform related to ANQ reviews. Continuing success and enthusiastic feedback mean that another Q-Day held in January 2018 was planned and organised by the administrative office.

The ANQ presented its view of the latest KVG (Swiss Health Insurance Act) revision to the Social Security and Health Committee of the National Council. It used the opportunity to advocate an amicable solution, similar to what is promoted by the ANQ. The demand for the expert knowledge of ANQ specialists is growing in the international arena. The ISQua invited the ANQ to London to present its pioneering Swiss model at one of the world's largest conferences on quality in the healthcare sector.

The fact that the ANQ is so widely recognised today, eight years after its foundation, is down to the hard work of everyone committed to improving the quality of care at Switzerland's hospitals and clinics. We would like to express our gratitude on behalf of the ANQ.

*Dr. Petra Busch, Managing Director
Thomas Straubhaar, President*

Activities

4 – 5

Dialogue

Exchange of experience and expert insights

6 – 9

Q-Day Workshop

Dynamic programme

Major knowledge transfer

Joint development

10 – 12

Acute care

Patient satisfaction among adults and parents

Postoperative wound infections

Falls and pressure ulcers

Readmissions and reoperations

SIRIS implant register

Quality Committees and Expert Group

13

Interdisciplinary patient survey

Short questionnaire and concept

Quality Committee

14 – 15

Psychiatry

Patient satisfaction

Adult psychiatry

Child and adolescent psychiatry

Forensic psychiatry

Data collection, evaluation and publication

Training courses

Quality Committee and Expert Groups

16 – 17

Rehabilitation

Patient satisfaction

Sector-specific reviews

Training courses

Coordination ST Reha/SwissDRG

Quality Committee and Expert Groups

18 – 23

Professional Portrait

Acute Care

Rehabilitation

Psychiatry

Facts & Figures

26

The National Quality Agreement

Agreement

Review plan and review participants

27

Funding

Reviews in hospitals and clinics

ANQ services

ANQ association structure

28 – 30

Annual financial statement

Balance sheet

Income statement

Report of the statutory auditors

31 – 33

Organisation

General assembly of members

Board

Quality Committees and Expert Groups

Registered office

Auditors

Activities

Consistently transparent

Dialog



They practice an open culture of discussion: the members of the ANQ Patient Satisfaction Quality Committee and the participants of the training event dealing with measures that restrict the rights of patients in psychiatric care

Exchange of experience and expert insights

The ANQ continued to maintain and intensify discussions with its members, public authorities, partners and professional organisations at home and abroad during 2017. ANQ representatives were invited to play an active role in the following committees and to contribute their point of view:

- FOPH work group 'Evaluation of Hospital Funding'
- FOPH work group/project team 'NOSO Strategy'
- SFSO
- Interest group for the development of an inter-professional training programme on quality (SAQM)
- IIMHL International Initiative of Mental Health Leaders
- IQTIG Institut für Qualitätssicherung und Transparenz im Gesundheitswesen, Germany
- Patientensicherheit Schweiz
- SAQM Swiss Academy for Quality in Medicine
- SGK-NR, Social Security and Health Committee of the National Council
- SwissDRG AG (ST Reha, TARPSY)

ANQ's experts also made their specialist knowledge available for other purposes:

Lectures, presentations, podium discussions

- 26th Rehabilitationswissenschaftliches Kolloquium, Frankfurt a. Main
- ISQua's 34th International Conference, London
- Canton Jura, Journée de réflexion et d'échanges, Delémont
- LVR-Institut für Versorgungsforschung, Symposium, Cologne
- SGGP Schweiz. Gesellschaft für Gesundheitspolitik, Tagung, Bern
- Swissnoso Symposium, Bern
- WPA XVII World Congress of Psychiatry, Berlin
- Zentralschweizer Pflegesymposium Rehabilitation Care, Luzern

Specialist articles, book contributions

- Schweizerische Ärztezeitung (SÄZ), Edition 2017/37:
'Plädoyer für faire Spital- und Klinikvergleiche'
- SGGP publication series/vol. 132 '20 Jahre KVG: Rück- und Ausblick für die Rehabilitation', title: 'Die Umsetzung qualitätssichernder Massnahmen'

Degree programmes

- Bern University of Applied Sciences (BFH): Master's degree programme in Medical Informatics
- Bern University of Applied Sciences (BFH): Master's degree programme in Nursing
- H+ Bildung: various degree programmes
- ZHAW Zurich University of Applied Sciences: Master's degree programme, module: The healthcare system in Switzerland

Q-Day Workshop



The symposium was opened by Dr. Petra Busch (top left) of the ANQ and Dr. Irena Anna Frei (bottom right) of Unispital Basel. In discussion (bottom centre, from the left): Verena Riedo, Dr. Andre Della Casa and Prof. Dr. med. Paul Hoff.



Dynamic programme

Last year's success encouraged the ANQ to hold another expert symposium in 2017 in the form of a half-day workshop. The workshop offered a platform in particular to those who deal directly with collecting data in daily clinical practice and interpreting the results of ANQ reviews. Thus, the focus was on practical issues, projects and measures – alongside the exchange beyond the boundaries of ANQ departments.

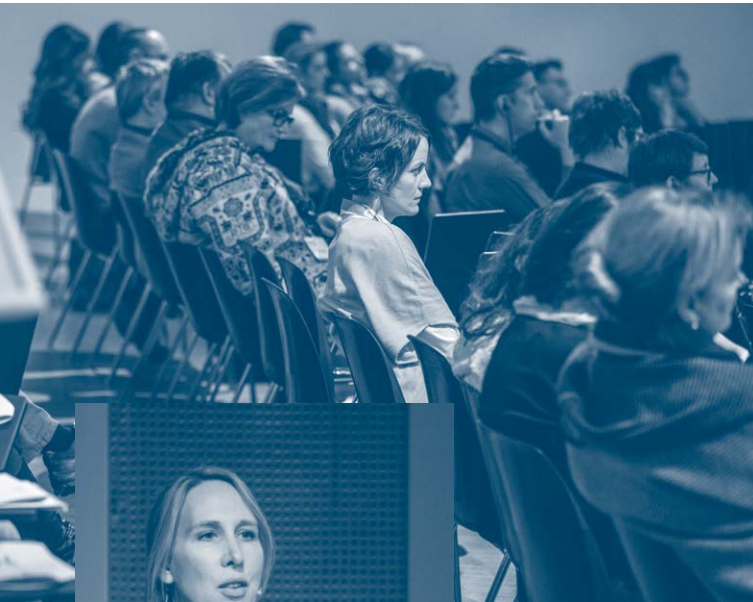
The kick-off lecture 'Is there such a thing as excellence in nursing?' provided interesting discussion material. It was followed by two workshops for each ANQ department. The ANQ had asked the hospitals and clinics in advance to submit topics and invited them to share their experiences. The result was a varied programme delivered by physicians, nurses, quality and process managers, scientists and researchers.

Major knowledge transfer

The two acute care workshops focused on the topic of quality development projects. A genuine realistic portrayal described how key figures from ANQ can play a decisive role in changing a hospital's strategy. Participants benefited directly from the hospital's insights and learned about every aspect of the change process – the highs and lows, successes, stumbling blocks and lessons learned.

The two contributions on the use of results from an ANQ review of potentially avoidable re-admissions in daily clinical practice added an additional dimension. First and foremost, they cast a new light on the SQLape evaluation method and its potential. A thorough analysis of patient records on the basis of SQLape results, for instance, resulted in the identification of marked improvements.

Regula Heller (top right) of ANQ chaired the Acute Care Workshop, which included presentations by, inter alia, Daniela Kaiser (bottom left) of Spital Männedorf and Prof. Dr. med. Jacques Donzé (bottom centre) of Inselspital Bern.



The first Psychiatry Workshop highlighted impressive examples of how ANQ results can be used in relation to treatment procedures in clinics. Using the example of a large university hospital, for instance, it was demonstrated how measures can be used to effectively increase data quality - not only that of ANQ reviews, but also of other basic data. Other innovative approaches and solutions were also presented during the workshop.

Joint development

The second Psychiatry Workshop was dedicated to the topic of rights-restricting measures (RRM). Following a visit to an acute care ward to see the changes ANQ review results can achieve in practical treatment, a group of experts then discussed their own ANQ results with regard to RRM together with the other participants.



Committed to the cause: Rehab Workshop speaker Stefanie Köhn (bottom left), Charité Berlin, and attendee Dr. med. Artur Bernardo (bottom right), Klinik Gais - chaired by Dr. Luise Menzi of ANQ (top left).



A discussion between experts chaired by Dr. Johanna Friedli of ANQ; participants included Prof. Dr. med. Paul Hoff (top left), PUK, consultant Urs Vogel and Andreas Werner (top right), PDGR. Bottom left: speaker Marc Aeberli of Hohenegg private hospital.

Both workshops for professionals working in the field of rehabilitation focused on the benefits and use of ANQ reviews. The Charité explained to participants how to correctly read and interpret national comparison reports and institution-specific results reports. Highlights of the second workshop 'Facilitators and barriers affecting review implementation': The primary statement of one lecture on data collection, namely to 'collect it once, use it often', was accurate in many respects and broadly accepted. Participants will recall their experiences with process-supporting software and the monitoring system set up by REHA TICINO especially for the workshop alongside many other valuable contributions.

Acute care

Patient satisfaction among adults and parents

The review results for 2016 display a continuing high level of patient satisfaction across the country. ANQ communicated these values transparently in October 2017. The ESOPE institute of Lausanne University evaluated the results for the first time. ESOPE has a significant track record when it comes to reviewing patient satisfaction. The two national comparison reports featuring a new structure and enriched with new graphics were welcomed by the ANQ committees as well as hospitals and clinics.

ANQ's improved short questionnaire 2.0 was used for the first time during the survey among adults carried out in September 2016. In addition to new questions it also features a new response scale: 5 verbal responses instead of the previous 11 response levels. The manner in which the medical fraternity and nursing staff provide information and communicate with others was especially well-received; this question scored the highest satisfaction value among the adult respondents. Nearly all inpatients found the duration of their stay in hospital to be appropriate. The greatest potential for optimisation lies in organising a patient's discharge from the hospital and the quality of treatment.

The parents of hospitalised children were surveyed at the same time, albeit using the previous ANQ short questionnaire and a response scale from 1 to 10. They awarded the highest score to the question concerning respect and dignity.

Postoperative wound infection

The ANQ published the wound infection rates naming the hospital or clinic concerned for the fifth time at the end of November. The results of the review period 2015/2016 confirmed the trend towards declining rates. For the past five years they have been declining in relation to: appendectomy, hernia surgery, stomach bypass surgery and cardiac surgery. The rate after stomach bypass surgery fell significantly in comparison to the previous period. The review also clearly reflected the wound infection rates in relation to spinal surgery (with and without implants) for the first time.

ANQ again held a joint symposium with Swissnoso in May. The detection and prevention of post-operative wound infection were the main focal points. The symposium also addressed the 'Clean-Hands' campaign, the hygiene monitoring instrument for hand hygiene, the pilot programme 'Progress! Urinal catheter Safety' and the 2017 national point prevalence survey of healthcare-associated infections and use of antibiotics. The survey was sponsored by the Federal Office of Public Health FOPH. The ANQ intensified its cooperation with the federal government and will in future channel its expert knowledge into the NOSO strategy as a member of the FOPH project team.

Adult falls and pressure ulcers in adults, paediatric pressure ulcers

In early November 2016, acute care hospitals and paediatric clinics collected data on pressure sores and falls during hospitalisation as they do every year. The ANQ published the results exactly one year later. These showed a slight increase in the rate of incidence in comparison with the previous year. Bed sores (of all categories) affecting children and adolescents

were an exception to the rule as the rates for 2016 were lower than those recorded in 2015. These changes were, however, were not outside the range of statistical random variation.

The data collection manual was updated by Bern University of Applied Sciences (BFH) during the reporting year. Specifically, the notes relating to the care dependency scale were elaborated. The ANQ also revised the questionnaire on bed sores affecting children in cooperation with a group of neonatology experts; the specific situation in neonatological care needs to be mapped more accurately. The review of child bed sores again showed that infants of less than one year of age with many medical interventions are primarily affected. They are especially at risk because of their underdeveloped skin.

In conclusion, the BFH improved the training concept for falls and bed sores in cooperation with the ANQ. Its new, modular design takes the needs of experienced reviewers and newcomers alike into account.

Readmissions and reoperations

The evaluation of readmissions conducted in 2015 on the basis of BFS data collected in 2014 was published in encrypted form in May 2017. The ANQ also carefully prepared the first transparent report on readmission rates, which was published in the first quarter of 2018. The publication was based on the 2016 evaluation of BSF data collected in 2015. A new method of calculating statistical significance was applied to ensure a fair and meaningful comparison of hospitals and clinics. The occurrence of potential avoidable reoperations is not disclosed for methodical reasons.

The ANQ cooperated closely with the company SQLape and the SQLape quality committee during preparatory work. The basis for the publication concept that has been used since the spring of 2017 following a successful review by ANQ partners was a direct result of these efforts.

25 hospitals currently use the SQLape Monitor to produce detailed analyses of their own rates of avoidable readmissions and reoperations. The ANQ contributed 20% of the cost of the tool.

SIRIS implant register

The ANQ presented the first scientific report based on data collected from 2012 to 2015 together with a media release in June. Today, around 150 Swiss hospitals and clinics use a standardised approach to log hip and knee prostheses in the SIRIS register. More than 95% of implants sold had been registered by 2015. SIRIS serves hospitals, clinics, the medical fraternity and industry as an important source of information thanks to its high rate of coverage.

The extensive report covering the period from 2012 to 2015 was published in English; abridged versions were published in the three national languages of German, French and Italian. The members of the SIRIS group of experts showed a great deal of dedication to the publication of the first edition. They also expanded the team of authors in view of future reports so that clinical expertise on hip and knee implants will be given greater scope to further increase the benefit of the register to orthopaedic medicine.

Quality Committees (QC) and Expert Group (EG)

QC on Acute Care

The ANQ board assigned a task specifying the short to mid term goals for 2017 to 2019 to the QC. QC members held two meetings and two teleconferences through which they adopted the national comparison report on post-operative wound infections for 2015/16, discussed the evaluation of post-discharge surveillance, approved the first scientific SIRIS report and authorised its abridged version. They provided the board with a statement on their view of the planned spinal surgery register.

QC on Prevalence Review

The QC informed the board of its approval of the two national comparison reports on adults and children. It also appointed the BFH to revise the explanations on the characteristics of items listed in the care dependency scale (CDS) and bring them into greater alignment with acute care. The QC optimised the questionnaire on child bed sores in cooperation with the expert group on neonatology. It convened three times in 2017 to carry out these tasks. Silvia Zilioli of Spital Tiefenau/Insel Gruppe was elected to the committee for the first time in April. Dr. Christian Heering of the Felix Platter hospital in Basel resigned with effect from July.

QC on SQLape

The SQLape QC also received an assignment from the board detailing the short to mid term goals for 2017 to 2019. The committee members held three meetings and a teleconference during which they approved the publication concept, the revised evaluation concept and the national comparison reports on readmissions and reoperations. They also initiated efforts to determine the status of the indicator for reoperations as it still does not enable transparent reporting. The representative of the Hirslanden-Gruppe changed in September: Stefan Lippitsch has replaced Jessica Leichter.

EG on the SIRIS implant register

The group convened four times to adopt the first scientific report 2012-2015 and commence work on the next report. That's why the improvements to the register form were delayed as a result. The committee also focused on creating an implant library. It is intended to present and evaluate implants not only by product type but also by brand. The expert group welcomed Dr. Adrian Spörri, Head of SwissRDL ISPM Bern, as a new member in December.

Interdisciplinary patient survey

Short questionnaire and concept

In 2017, the quality criteria for the improved ANQ short patient survey questionnaire were reviewed and Charité published its concluding report on the sectors acute care and psychiatry. The test results for rehabilitation will be available in the spring of 2018.

The ANQ published the interdisciplinary concept that will in future form the basis for surveys in all ANQ departments at the beginning of September. It contains important information concerning the questionnaire, the background to its creation, insights from test procedures and details of its organisation and review method. It will be supplemented with results from the rehabilitation pilot survey in spring 2018.

Quality Committee (QC)

The interdisciplinary QC addressed fundamental issues and topics relating to the ANQ review of patient satisfaction during four meetings and a teleconference held in 2017. It discussed and subsequently adopted the following documents for submission to the board: Charité's concluding report on review methods for acute care and psychiatry, ANQ's concept for patient satisfaction surveys, revised evaluation and publication concept.

How regional differences are handled was also on the agenda. The committee also addressed the abolition of the so-called cut-off, i.e. the minimum number of evaluable questionnaires required for transparent publication.

The agenda covered the following items by sector:

Acute care

The QC approved the multi-year analysis for 2011 - 2015 that was carried out by the ESOPE. It also approved the national comparison reports for adults and parents containing the results for 2016.

Psychiatry

In autumn the QC discussed a number of adjustments to the review procedure for the 2018 review year on account of feedback from institutions relating to the 2017 survey.

Rehabilitation

An updated questionnaire will be used for the 2018 rehabilitation patient survey. The QC supervised the related review methods during the reporting year. The analysis results were made available in January 2018.

Janick Gross of the Swiss Medical Network - Clinique Generale, Fribourg, and PD Dr. med. Daniel Uebelhart of the Hôpital du Valais, Crans-Montana, joined the committee. Anne Claussen of the University Hospital Basel and Norbert Rose of Kantonsspital St. Gallen resigned from the QC.

Psychiatry

Patient satisfaction

In spring the ANQ held informational events in Zurich, Lausanne and Mendrisio in preparation for the first national patient survey in adult psychiatry. The clinics surveyed patient satisfaction from September to November using the ANQ short questionnaire, making it the country's first standardised survey in this area. It contains six questions; verbal responses are logged on a scale of 1 to 5. The method and procedure are the same as for other ANQ departments.

Adult psychiatry (AP)

The data for 2016 was evaluated using the new method. The ANQ published all results transparently for the first time in December. The range of difference in symptom severity has increased since the start of the reviews. All institutions reported positive changes. The number of adults who were subjected to a rights-restricting measure (RRM) remained constant in comparison to the previous year.

Child and adolescent psychiatry (CAP)

The ANQ published the 2016 results for CAP and AP at the same time – also transparently for the second time following evaluation based on the new method. The difference in range of symptom severity has increased since the start of the reviews. A slightly larger number of children and adolescents were subjected to an RRM in comparison to the preceding year.

Forensic psychiatry (FP)

A low number of cases and inadequate data quality made it impossible to calculate a clinical comparison based on the data for 2016. The ANQ is continuing its work to find a solution. In 2017, the Swiss Society for Forensic Psychiatry (SGFP) evaluated the review tool HoNOS with regard to its fitness for use in FP and has found it to be suitable.

Data collection, evaluation and publication

The case definition used by the ANQ to date was the same as that employed by the Federal Statistical Office (BFS). TARPSY 1.0 will be introduced in AP on 1 January 2018. Thus, case definition is now based on that of the SwissDRG and includes case consolidation within 18 days after discharge. In 2017, the ANQ decided to adopt the definition of case consolidation – as a supplement to the BFS definition – to assist institutions with case documentation.

The newly joining institute 'w hoch 2' (W2), a spin-off of Bern University and successor to UPK Basel, began its work as a national evaluation institute in July. w hoch 2 now offers an upload function that will first be used to submit data in March 2018. It enables institutions to transmit data securely.

ANQ partners approved the revised evaluation and publication concepts in June following their adaptation to the new statistical evaluation technique.

Training courses

The ANQ commissioned two videos featuring actors as patients that were recorded in 2017 for the HoNOS Interrater training course. The videos are available in German and, as of 2018, in French; they should provide for a more standardised rating of symptom severity. They will be given to participants after training for use at their institutions.

The introduction of TARPSY increased the demand for training in HoNOS and HoNOS-CA. The ANQ responded by forming new CAP expert groups as per 2018 and in 2017 supplemented the HoNOS EG training programme in adult psychiatry for representatives from western Switzerland.

The ANQ board decided in 2017 to charge a fee of CHF 200 for half-day training events and CHF 300 for whole-day training events as of 2018.

Quality Committee (QC) and Expert Groups (EG)

QC on Psychiatry

The QC addressed the national comparison reports for 2016 and the new evaluation method during its daylong retreat. It discussed the results and options for improving FP mapping with the SGFP alongside other development topics. During an additional five meetings it selected the evaluation institute w hoch 2 and developed an implementation schedule for the new evaluation method. The QC welcomed its new member Bruno Dolci, Director of Nursing, Specialist Services and Informatics at Integrierte Psychiatrie Winterthur. He succeeds long-standing KPP representative Aline Schuway.

EG on Structural Variables

During its evaluation meeting on allocation criteria for the three types of institution, the EG's recommendation to the QC was not to make any changes to the institutions or their respective categories for the 2015 data year. The recommendation was adopted by the QC.

EG on Audits/Monitoring RRM

Following its annual meeting, the EG recommended the QC should not introduce any RRM auditing measures for 2016. It should instead continue to promote best practice processes.

EG on HoNOS training

In 2017, the EG drew up training documentation in French and held a training event. Two training events took place in German-speaking Switzerland. Silvia Aebischer of Réseau fribourgeois de Santé Mentale/Centre de soins hospitaliers Marsens, Prof. Dr. med. Yasser Khazaal of HUG Genf and Dr. André Michel of Gouvernance clinique CHUV Lausanne have joined the EG.

EG on RRM training in AP

As in every year, a training event was held in German-speaking Switzerland and in western Switzerland. Cantonal physician Dr. Stéphane Morandi of CHUV Lausanne will replace Marie-Claire Gillier who has retired.

Rehabilitation

Patient satisfaction

The results of the 2016 patient survey carried out in Swiss rehab clinics show a continuation of the positive trend observed in recent years. All responses were at the upper end of the evaluation scale, indicating a largely satisfied client base. More patients than ever before participated in the national survey for the year 2016. The ANQ published the results by institution in April.

The next satisfaction survey involving 104 rehab clinics (locations) took place in the spring of 2017. It was the first time the results were evaluated by the ESOPE institute at Lausanne University.

Sector-specific reviews

The approval process for the publication concept for modules 2 and 3 took place in June and was unanimously approved by the ANQ partners. The five national comparison reports for 2015 were published in mid-July in encrypted form. The review results for 2016 are going to be transparently published by institute for the first time at the end of 2018.

The ANQ published various recommendations of the expert group on 'FIM® Rules' in 2017 with regard to the collection and documentation of complex FIM® parameters in favour of standardised data collection. In addition, it updated its FIM® licence and took out a 'FIM® Trainer Licence' with the licence provider together with the training organisations H+ Bildung and Espace Compétences. The workshop for FIM® trainers will take place in the spring of 2018. On successful completion of the exam they will be officially licenced to teach FIM®.

The alternative reviews of paraplegiologic and psychosomatic rehabilitation continued in 2017. An additional institute participated in the review of psychosomatic rehabilitation. Data from the first survey of paraplegiology held in 2015 was evaluated.

The Charité concluded its study of the development and validation of an ADL score based on FIM® and EBI during the reporting year. It concluded that it is possible to conduct a fair comparison between musculoskeletal, neurological and other rehabilitation centres regardless of the instrument used. The QC on rehabilitation decided on this basis to use the translation algorithm for the evaluation and subsequent reporting for the data year 2016.

Training courses

The ANQ continued to extend its training programme throughout the reporting year. The basic training programme entitled 'Principles of rehabilitation and ANQ requirements' will be held in three regions of the country. They are open to all inpatient rehabilitation professions; the SIWF awards credits to participants. Participants will receive a detailed introduction to the purpose and context of ANQ reviews and will be shown the benefits these can have for their institute. They will learn how to best incorporate the reviews in daily clinical practice.

The latest training programme is part of the 'National Training Concept for Rehabilitation' published by the ANQ in early summer. The concept supports the coordination of training programmes with identical and aligned content across language barriers. Its aim is to standardise survey techniques as far as possible and to achieve a high quality of data. The concept is supported by SW!SS Reha and Plateforme-Reha.ch who actively contributed towards its development.

The ANQ has covered all of the costs since the training programme began. Experience shows that many participants cancel at short notice or fail to show up. The ANQ board decided to introduce a charge of CHF 200 for half-day training events and CHF 300 for whole-day or two half-day training events (FIM® case conferences for advanced participants and FIM®/MIF workshops) as of 2018 to underscore the binding nature of registering for a course. The decision applies to courses in all ANQ fields.

Coordination ST Reha/SwissDRG

The ANQ engaged in regular exchange with SwissDRG; specifications for the data survey were again coordinated in 2017.

Quality Committee (QC) and Expert Groups (EG)

QC on Rehabilitation

The QC focused on the five national comparison reports for 2015 during a one-day meeting. The topics of four further meetings were an ADL score study, improvements to the rehabilitation review plan, preparation of the online survey/evaluative status review. Pierre Combremont left the committee at the end of December after a long term in office.

EG FIM®

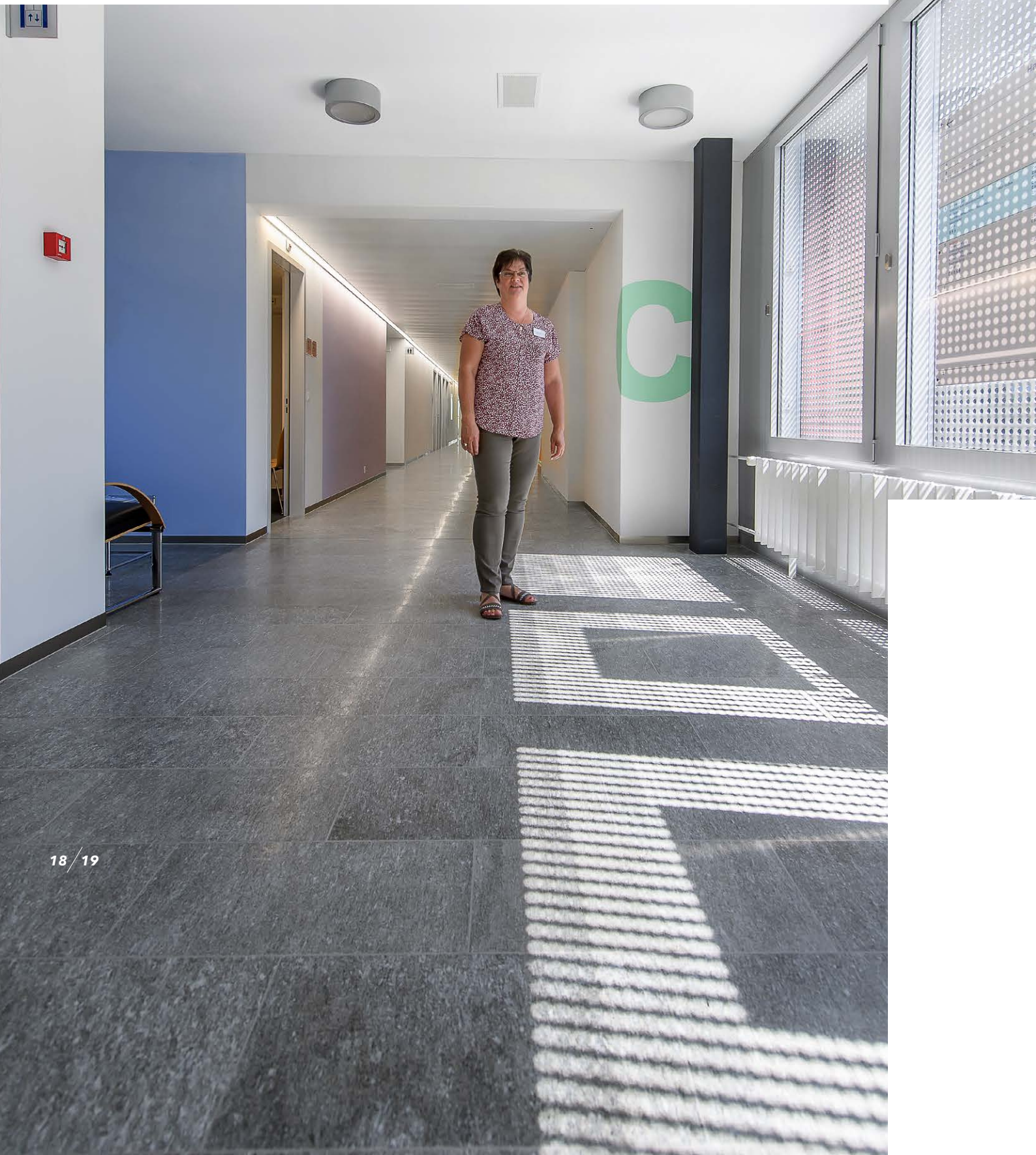
The EG developed and formulated seven recommendations on complex FIM items that were published during the course of the reporting year. Nadja Ammann of Rehaklinik Zihlschlacht joined as a new expert to represent Yvonne Filipponi during maternity leave.

EG EBI Rules

The EG reformed in 2017 will develop recommendations for reviewing and documenting EBI items in accordance with the EG FIM® assignment. The kick-off meeting took place in December. The EG consists of the following members: Christine Arrigoni, Bad Schinznach AG, Bert Lookamp, Oberwaid Kurhotel & Privatklinik, Helene Ruff, Salina Medizin AG, and Dr. med. Claude Vaney, HFR /Klinik Bethesda Tschugg.

Professional Portrait - Acute Care

Andrea Bürgi





Andrea Bürgi

Quality Manager, Project Coordinator/MAS Quality Leadership (FH), degree in Infection Protection Spital Schwyz

'Quality in daily life requires understanding. We all work together to achieve this.'

When did you begin using ANQ reviews?

Before ANQ even existed, I suggested that we should take part in quality reviews, such as the Swissnoso programme. From the outset, I disseminated the results in-house; we analysed them, introduced measures, actively lived and continue to live the improvement process. I subsequently managed the transition to ANQ. This resulted in major progress although the concept was initially met with scepticism. Yet I managed to get everyone on board. Today, I am also a member of the ANQ Quality Committee for Acute Care and the specialist commissions Quality Acute Care H+ and Central Swiss Hospitals.

What effect have the reviews had in your institution?

Let's take the example of Swissnoso; in the past our results were good - now they are very good. We ask a lot of ourselves and we record in detail the aspects that have a positive influence. The results of ANQ reviews are a standard part of our quality monitoring plan and enable us to record changes over years. Our objectives are actively defined on the basis of these results and thus reinforce our continuous improvement process.

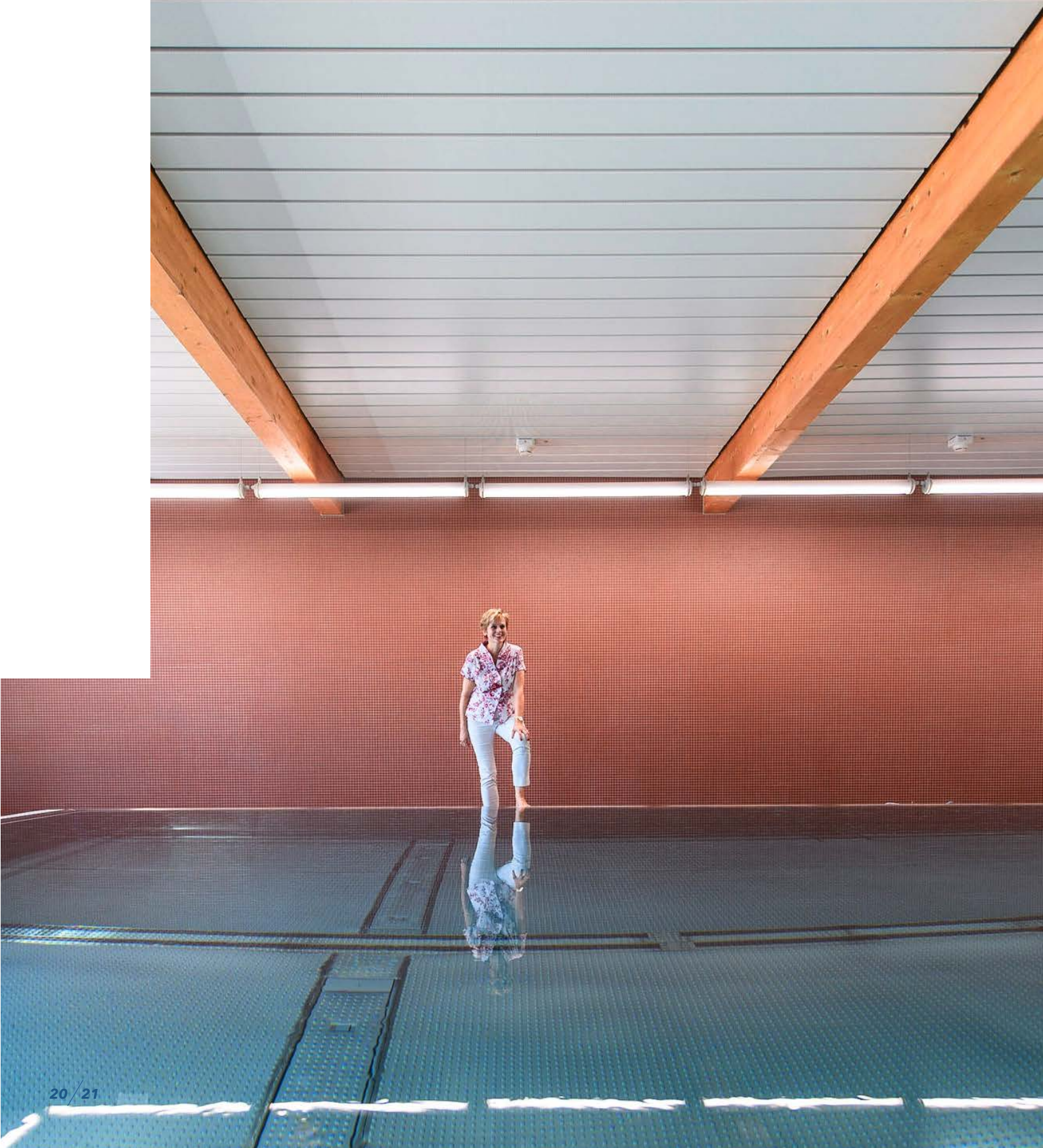
"Our motivation are the ANQ review results. We always want to be as good as, if not better than, the benchmark."

Where do you see potential for improvement?

We need to learn how to use routine data. We all need to deal with this. The data we record as standard is simply not sufficient for almost all ANQ reviews. We need to collect more data, and this requires additional resources. However, the costs are not always balanced out by the benefits. Nowadays, there is major pressure on hospitals and as a result we can hardly perform complex reviews, even though we aim to be transparent in terms of quality.

How could this be resolved in practice?

In our hospital, we strive everywhere to use real treatment quality data derived from routine data. This is ambitious but this is what we need for the future as the quality of treatment we provide for patients is for me the primary concern. I want our actual results to show how good we are. Current patient records held by hospitals (electronic HISs) contain large amounts of routine data that could be evaluated in real time.



Professional Portrait - Rehabilitation
Rita Althaus

How have ANQ reviews changed your daily routine?

The FIM® instrument for recording achievement of objectives is an important tool for us. It also makes the progress made by individual patients visible in graphic form. We base our work on this. According to ANQ, centres providing musculoskeletal and neurological rehab achieved their goals in 2015 with a success rate of more than 96%. Rehabilitation centres across the country are therefore doing a great job!

"We live data management. It's great to see how our patient data continually improves."

Rita Althaus
Head of Data Management, Quality/MPA
freiburger spital, HFR Meyriez-Murten



What is the most important aspect for you?

The key thing for me is that we don't focus too much on statistics only and lose sight of the human element, namely our clients and hospital personnel. I am passionate about this and managed to change people's mindset in this respect. My fault-finding with regard to incomplete or incorrectly recorded data is no longer seen as pesky criticism but as a valuable help. I also train all new doctors in quality reviews as my experience has shown that it is better for such skills to be taught at first-hand.

What is the biggest challenge you face?

Integrating the reviews into our HIS; a process whereby I provide active support to the IT specialists. Data export is a major issue with regard to ANQ because data must meet requirements and we must also be able to record it. I ultimately developed effective control mechanisms that can be used in practice.

"I really look forward to the ANQ reviews. They give me feedback on aspects of my job and show how well we all work."

Do you have any requests for ANQ?

These have already been met! I criticised the fact that the manner in which drop-outs (unplanned discharges or hospitalisation for less than the minimum duration) were dealt with was misleading when it came to data quality and I thought distorted the result. And my concerns were heard: drop-outs are now presented as fully documented data sets.

Professional Portrait - Psychiatry
Nathalie Clerici



What do the review instruments provide for your routine work?

Patients' problems are recorded in a more structured way when they enter and leave our clinic. Collecting this data and recording rights-restricting measures give us a more differentiated understanding of clinical pathologies. We can also analyse the development of the data over a longer period. The results are discussed by management and nursing staff and provide us with important indicators for ongoing quality improvement measures.

What do you see as the main benefits?

Results of ANQ review are recorded in our quality system as indicators so we can compare them with other key statistics. As in the case of HoNOS, they provide important information on patients' clinical and social profiles. Analysing the differences between results on admission and discharge helps us to recognise the effectiveness of treatments and relevance to internal clinical aspects.

What are the disadvantages?

Undertaking reviews is a very time-consuming process for the review management team and nursing personnel. To achieve the required data quality, we must regularly review data and present it to the responsible managers and nursing team. Furthermore, the response rate for the BSCL patient self-evaluation questionnaire is a problem. This is particularly due to the fact that the questionnaire is very comprehensive and patients must repeatedly answer the same questions.

"More streamlined reports would make life easier for the nursing team."

What would you like to see in the future?

The clinical reports need to be streamlined and made available to the nursing teams more quickly. It would be helpful to summarise results in an article as part of the national comparison report. In addition, there should be a general introduction on psychiatric disorders and their incidence among the population, the current situation of psychiatry in the cantons and on the use of psychiatric services.

"ANQ reviews play an important role in planning therapy schedules and evaluating their effectiveness."



Nathalie Clerici

lic. soc., Research Associate, Quality Manager Organizzazione sociopsichiatrica cantonale (OSC) Psychiatric Clinic of the Canton of Ticino (CPC), Mendrisio TI

Facts & Figures

Taking a new direction

The National Quality Agreement

Agreement

To date, the National Quality Agreement of 2011 has been signed by all Swiss hospitals and clinics, all insurance organisations and cantons. The agreement based on a partnership concept represents a groundbreaking model for implementing national reviews. It regulates the funding and implementation of ANQ reviews in addition to tasks, rights and obligations.

Review plan and review participants

The ANQ review plan specifies quality indicators as a part of the national quality agreement. As of 2018 it will be valid indefinitely and therefore provide greater flexibility. This decision was reached by the board in 2016. The decision on which indicators should be integrated in or excluded from the review plan is based on clearly communicated and defined criteria and a defined approach. Corresponding applications can be submitted by ANQ committees and external organisations.

Reviews are obligatory for hospitals and clinics that have signed the quality agreement. However, the ANQ can release institutions from this obligation if there is sufficient justification. The number of review participants was pleasingly high in 2017. The ANQ publishes the reviews in which hospitals and clinics participate once a year on its website.

Participation in 2017 by review topic and number of clinics and hospitals:

Acute care	Number
Patient satisfaction	203
Postoperative wound infection	178
Falls and pressure ulcers	209
Potentially preventable readmissions (BFS data 2016)	198
Potentially preventable reoperations (BFS data 2016)	182
SIRIS implant register	158

Psychiatrie	Number
Patient satisfaction	76
Adults	68
Children and adolescents	23
Forensic psychiatry	7

Rehabilitation	Number
Patient satisfaction (module 1)	100
Musculoskeletal rehabilitation (module 2a)	62
Neurological rehabilitation (module 2b)	37
Other rehab. (module 2)	57
Cardiac rehab. (module 3a)	16
Pulmonary rehab. (module 3b)	13

Funding

Reviews in hospitals and clinics

The National Quality Agreement obligates insurers and cantons to include ANQ reviews in their performance mandate and collective agreements and to contribute start-up funding. During the initial phase of a review, participating hospitals and clinics receive a separate premium for every discharge from a ward, in each case during a transition period of two years. The premium subsequently counts as a creditable cost.

The first national survey of satisfaction among psychiatric patients was held in 2017. The insurers of psychiatric clinics will pay a premium of CHF 1.30 for this new review for every patient discharged between 1 July 2017 until 30 June 2019 while the cantons will contribute CHF 1.60 per discharge.

ANQ services

ANQ's review and evaluation costs are funded via the annual contributions paid by clinics and hospitals. The contributions paid to ANQ by psychiatric clinics increased by CHF 2.90 in 2017 as the patient satisfaction survey represents a new review.

2017 contributions

The annual contributions are calculated on the basis of the number of inpatient stays as recorded in the Swiss Federal Statistics Office's hospital statistics for the previous year. 2017 contributions per discharge (incl. VAT):

Acute care	CHF	2.70
Psychiatry	CHF	9.88
Rehabilitation	CHF	11.30

ANQ association structure

The cost of the administrative office, committees and member administration are covered by the members in accordance with the association's statutes. The corresponding amounts are defined by the general assembly of members.

Member contributions 2017

Cantons/Principality of Liechtenstein: CHF 0.02 per citizen	CHF	167'295
Insurers (santésuisse and MTK)	CHF	167'295
H+ the Swiss Hospital Association	CHF	167'295
Other hospitals and clinics	CHF	200
Observers	CHF	200

Annual financial statement

Balance sheet as of 31 December 2017

	Current year 31/12/2017	Previous year 31/12/2016
Assets		
<i>Current assets</i>		
Liquid assets	3'728'629	3'692'551
Accounts receivable	174'297	93'179
Other short-term receivables	146'846	164'769
Accruals and deferrals	7'289	25'319
Current assets	4'057'060	3'975'817
<i>Fixed assets</i>		
Tangible assets	46'900	11'701
Fixed assets	46'900	11'701
Total assets	4'103'960	3'987'518
Liabilities		
<i>Short-term borrowed capital</i>		
Accounts payable	996'191	969'704
Deferred income	253'148	144'025
Short-term borrowed capital	1'249'339	1'113'730
<i>Long-term borrowed capital</i>		
Provisions	980'800	815'000
Long-term borrowed capital	980'800	815'000
<i>Equity capital</i>		
Free capital	2'058'788	2'033'421
Loss for the year	-184'968	25'368
Equity capital	1'873'821	2'058'788
Total liabilities	4'103'960	3'987'518

Income statement with previous year and budget
1 January 2017 – 31 December 2017

	Current year 1/1/2017 to 31/12/2017	Pervious year 1/1/2016 to 31/12/2016	Budget 1/1/2017 to 31/12/2017
Membership contributions H+	167'295	165'500	167'295
Membership contr. santésuisse/MTK	167'295	165'500	167'295
Membership contr. cantons/GDK	167'295	165'501	167'295
Membership contributions observers	5'600	5'800	5'400
Contr. National Quality Agreement	5'090'933	4'885'868	4'963'200
Income from reviews	44'308	39'404	41'750
Additional income	64'227	53'741	0
Total operating income	5'706'953	5'481'314	5'512'235
Third-party services	3'168'300	3'027'158	3'257'500
Personnel expenses	1'637'073	1'507'553	1'430'000
Work performed by third parties	511'911	395'117	498'000
Other operating expenses	201'892	155'755	173'000
Administrative and selling expenses	362'203	352'378	320'000
Depreciation	19'581	11'798	0
Operating expenses	5'900'960	5'449'759	5'678'500
Operating result before interest	-194'007	31'555	-166'265
Financial expenses/financial income	-9'040	6'187	3'000
Loss for the year	-184'968	25'368	-169'265

Report of the statutory auditors

LEHMANN
Treuhand Wirtschaftsprüfung Steuern

Report of the statutory auditor on the limited statutory examination to the General Meeting of Swiss National Association for Quality Development in Hospitals and Clinics, Bern

As statutory auditor, we have examined the financial statements (balance sheet, income statement and notes) of Swiss National Association for Quality Development in Hospitals and Clinics for the year ended December 31, 2017.

These financial statements are the responsibility of the executive committee. Our responsibility is to perform a limited statutory examination on these financial statements. We confirm that we meet the licensing and independence requirements as stipulated by Swiss law. An employee of our company assisted in the bookkeeping during the reporting year. This individual was not involved in the limited statutory examination.

We conducted our examination in accordance with the Swiss Standard on the Limited Statutory Examination. This standard requires that we plan and perform a limited statutory examination to identify material misstatements in the financial statements. A limited statutory examination consists primarily of inquiries of company personnel and analytical procedures as well as detailed tests of company documents as considered necessary in the circumstances. However, the testing of operational processes and the internal control system, as well as inquiries and further testing procedures to detect fraud or other legal violations, are not within the scope of this examination.

Based on our limited statutory examination, nothing has come to our attention that causes us to believe that the financial statements do not comply with Swiss law and the bylaws of the association.

Bern, April 25, 2018

Treuhand Lehmann AG



Urs Feierabend
Auditor in Charge
Licensed Audit Expert

Enclosure: Financial statements

Treuhand Lehmann AG | Mezenerweg 8a | Postfach | 3000 Bern 22 | Telefon 0 31 3 400 313 | info@tlag.ch | www.tlag.ch



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Organisation

General assembly of members

Voting members approved the annual financial statement for 2016 and discharged the board and auditors at the general assembly of members held on 30 May 2017. Elections were also held; the president, vice president and all members of the board were reelected for a further term in office. Newly elected were Dr. Ivo Spicher, Medical Director HFR, as successor to Dr. Thomas Kaufman (service provider) and the St. Gallen Cantonal Physician Dr. Danuta Reinholz, as successor to Dr. Markus Betschart (canton).

The budget for 2018 and the revised articles of association were adopted at the extraordinary general assembly of members of 28 November. The first modification of the statutes since the founding of the association in 2009 concerns in particular the renaming of the member category of 'Insurer' and the corresponding eligibility to vote. This will enable curafutura to join the association as a new member in May 2018. The association of health insurers CSS, Helsana, Sanitas and KPT had to date held a seat on the board but was not an ANQ partner.

Members →

Board

During the reporting year the board addressed various issues relating to ANQ reviews and review methods during five ordinary meetings. It approved various national comparison reports and the associated evaluation and publication concepts. The agenda also covered the following points.

The committee focused on the aspect of 'Use of ANQ data by hospital search engines and comparison portals' during the first quarter. It came to the conclusion based on a legal opinion that misuse cannot be prevented as long as the review results are publicly accessible via the ANQ website. For this reason the administrative office compiled the information brochure entitled 'The benefits and limitations of ANQ reviews' that was well-received on all fronts.

The board ordered a multi-year analysis (2011–2015) for the review of patient satisfaction in acute care that has been running since 2011 and adopted it after deliberation. The analysis covers results for various regions. The spinal surgery register has been a part of the ANQ review plan since 2016. Various discussions with professional associations with regard to its implementation have since taken place. The board decided not to reinvent the wheel for another register but rather to take what is already available into due consideration. Negotiations with professional associations will continue in 2018. The ANQ continues to cooperate with the organisations FMH, SAMW, H+ and unimeduisse with regard to register recommendations. The board was able to approve the concept for implementing joint recommendations on the development and operation of health-related registers.

The board gave the go-ahead for the use of the new ANQ questionnaire in psychiatric facilities, enabling the first nationwide survey to take place in September. Its results will not be published transparently as it is the first year under review – this decision was reached by the board. It approved the new evaluation method for further reviews in the field of psychiatry.

Dispensations for alternative reviews of paraplegiologic and psychosomatic rehabilitation have been allowed since 2015. According to the board, this will be retained in order to establish an approach based on data as to how these rehab areas should be reviewed in future. Additionally, the board adopted the basic concept for the further development of the review plan and training concept in the field of psychiatry.

The quality committees on acute care, psychiatry and SQLape received clear instructions from the board for the next two years.

The evaluation of the Argus annual analysis of the ANQ's presence in the media during 2016 showed that ANQ's communication objectives were viable. This was duly acknowledged by the committee. In June it reached an agreement to relocate the head office to larger premises in Bern in March 2018.

The board extended its discussion of the statutes and the budget for 2018 during two extraordinary meetings. It used the summer retreat to focus at length on the implementation of patient-orientated outcome reviews and the expansion of ANQ activities in the outpatient sector of hospitals and clinics. The board commissioned socialdesign to undertake a preliminary study of the latter subject for use as a basis for discussion and approved the study during the November meeting. The study's contents serve as an important basis for additional clarifications among the ANQ committees.

Board →

Quality Committees and Expert Groups

Quality Committees →

Expert Groups →

Registered office

In addition to its core activities the administrative office also engaged in supervising or implementing a number of projects in 2017. The first quarter was defined by various activities concerning hospital search and comparison portals, while the third focused on implementing the recommendations for developing and operating registers. Throughout the year the administrative office worked at creating a better network between the various interest groups and intensified public relations with regard to ANQ reviews and lessons learned at both a national and international level. Resources were also dedicated to preparing the 2018 Q-Day, the content and design of the new advertising concept and the search for suitable office premises.

There were also a number of personnel changes. The ANQ bade farewell to Isabelle Zimmermann, Deputy Managing Director and Head of Services, after 14 years employment. The new deputy is Regula Heller, Head of the Acute Care Division. Stephanie Fasnacht took on the role as head of the secretariat and assistant to management in April. Marianne Beerli of Acute Care retired at the end of year. The vacant post was assigned to Andrea Henneke, who began as a Research Assistant in Acute Care on 1 October, to ensure an ideal transfer of knowledge. Anina Siegenthaler, an employee of the secretariat, left ANQ at the end of December.

Team →

Auditors

Treuhand-, Revisions- und Steuerberatungsbüro Lehmann AG, Bern

Legal notice

Published by

ANQ - Swiss National Association for Quality Development in Clinics and Hospitals, Bern

Date of publication

June 2018

Concept and editing

mau.kommunikation, Zurich

Design

SetNet GmbH, Bern

Translation

French: Béatrice Petit, Luz-Saint-Sauveur/France

Italian: Joël Rey - Traduzioni e redazioni, Losone

English: Purefluent, Berlin

Photo gallery

Seiten 4, 6 – 9: Hans Kobi, Münchenbuchsee

Seiten 18 – 23: Geri Krischker, Zurich

*Nationaler Verein für Qualitätsentwicklung in Spitälern und Kliniken
Association nationale pour le développement de la qualité dans les hôpitaux et les cliniques
Associazione nazionale per lo sviluppo della qualità in ospedali e cliniche*