

Re: Improving the Health System with Performance Reporting – Real Gains or Unnecessary Work? GE Day and LA South. *Asia Pacific Journal of Health Management*. 2016;11(1): 8-13.

Day and South [1] put forward some excellent arguments about the challenges of performance reporting in healthcare. There is no doubt that reporting can be a burden, more real time data is required and improvements in reporting need to be made.

However, the authors did not provide a strong argument of their claim that performance reporting will not prevent another major healthcare scandal, such as those at the Bundaberg Hospital or NHS Mid Staffordshire Trust, and that a changed culture is more of a driving factor.

A common finding in the inquiries of the health scandals of the late 1990s and early 2000s was that whilst reporting was in place, [2] and in much sentinel event reporting, the reports failed to highlight the compromised patient safety. [2] However, what was also common in all of these cases is that staff concerns were ignored. [2,3] This would suggest that those in authority did not want to acknowledge or address the issue, and as with any tool, performance reports are only as good as the user allows them to be. Further, the Bristol inquiry leaves the reader without a doubt that the lack of defined clinical performance reports contributed to the sentinel events not being identified earlier. [4]

Whilst I agree that a change to culture is also key to driving a better and safer healthcare, Day and South as well as Russell and Dawda failed to recognise that reporting will facilitate 'driving a system of care that is open to learning, capable of identifying and admitting its problems and acting to correct them'. After all, the fundamentals of successful reporting are identification and action. I also believe that there is no greater tool to learning than being able to quantify where we are going right and where we are going wrong.

I would suggest that there should be more focus on what reporting has achieved. Without performance reporting there would not be an awareness of many issues within the healthcare system. For example, it is a result of reporting that the extent hospital acquired infections (HAI) is known, and subsequently causation and prevention addressed. However, what is not transparent are the catastrophic

events that have been prevented as a result of actions taken in response to results highlighted in performance reports. Whilst this would be a contentious issue, maybe more disclosure in this area would give greater validation to reporting benefits.

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Response from the Authors to the Letter to the Editor:

On behalf of the authors I would firstly like to thank the reader for continuing the discussion and debate around the value of performance reporting. We are encouraged to see that others are taking a keen interest in this growing topic. We certainly agree where the writer says '...what is not transparent are the catastrophic events that have been prevented as a result of actions taken in response to results highlighted in performance reports.' This paper did not set out to look at what has been individually achieved by performance reporting, rather question the inconsistencies in the current system and to raise possible solutions.

The main aim of the paper was to argue that collecting data itself will not prevent another major health scandal such as Bundaberg Hospital or the NHS Mid Staffordshire Trust. However, prevention is highly reliant on what clinicians and hospital managers deduce from that data and have the courage to put remedies into action that prevent these tragic circumstances repeating themselves. Equally, simply reporting data will not create systems or culture change: staff create that change, data supports the decision. What this paper endeavours to portray is that with the dearth of data available, health services need to be clear about what they will collect, analyse, report on and use to improve their local health services. Health services need to develop a culture of safety and accountability if performance reporting is to be an important tool in driving systems improvement.

The Australian health system is still challenged by a lack of consistent health measures, approaches to data analysis, standardised reporting frameworks and technical ability to analyse and understand the myriad of data available. This paper has raised these issues with a view to continuing to

create discussion and debate so that the quality and safety of patient care can be improved right across Australia, rather than where individual health services or hospitals have the financial and technical resources to improve their own outcomes.

Dr G E Day

for the authors

Editor's Note: Readers are welcome to make further contributions in response to the matters raised in the article and this initial response.

References

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