

CORRELATION BETWEEN QUALITY OF CARE AND FINANCIAL RISK INDICATORS IN PUBLIC HOSPITALS

OP15

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OBJECTIVES

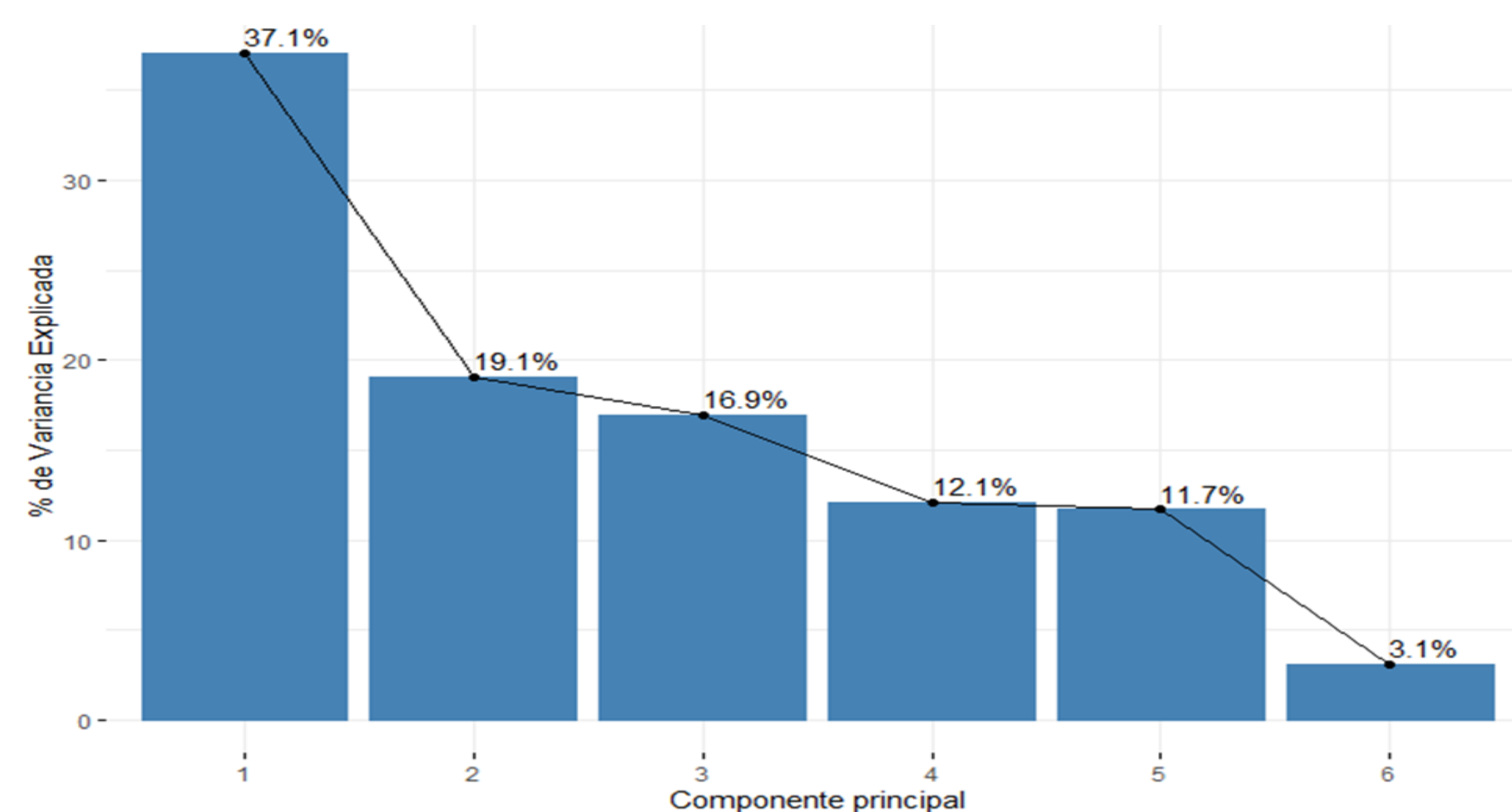
To evaluate the factors that explain why public hospitals subjected to the financial pressure of the market economy may have difficulties in maintaining the quality of care for the population in their area of influence and obtain worse results than those with better economic capacity.

METHODS

This cross-sectional study investigated the financial situation and quality of health care delivery in public hospitals located in the department of Atlántico, Colombia. Financial, health care quality, and productivity data were taken from the Hospital Information System (HOIS) and subsequently used to

develop a financial performance composite score using principal components analysis (PCA). The correlation between the financial performance composite score and the quality/safety performance composite score was calculated using linear regression adjusted for the characteristics of each hospital.

Figure 1. Components with eigenvalues greater than 1 for quality variables



AFILIATIONS

1. Hospital Local Santa María Magdalena, Malambo, Colombia. 2. Corporación Universitaria Americana, Barranquilla, Colombia. 3. Universidad de la Costa, Barranquilla, Colombia. 4. Organización Clínica General del Norte, Barranquilla, Colombia. 5. Alzak Foundation, Cartagena de Indias, Colombia

RESULTS

Among the 28 public hospitals in the department of Atlántico (Colombia) for which data were available, there is a clear relationship between their financial performance and the quality of patient care (Parameter: 4.439; p-value: 0.039). However, no

association could be demonstrated between a better financial situation of hospitals with their Real Value Units (RVU) equivalent productivity score (Parameter: 0.547; p-value: 0.462)

Table 1. Relationship between the categorization of the fiscal and financial risk of public hospitals in the department of Atlántico, Colombia, and the quality results, without adjusting for the percentage of income from the subsidized and contributory systems (model 1).

Main components of Hospital Quality Indicators	Risk Index		Budgetary Result (Surplus or Deficit)	
	Parameter	p Value	Parameter	p Value
Factor 1: Proportion of overall user satisfaction at the Hospital	0.0150	0.9030	0.0149	0.9033
Factor 2: Average waiting time for appointment assignment.	2.3742	0.1279	2.8252	0.0973
Factor 3: Timeliness of outpatient general medicine and general dentistry care	0.9576	0.3312	0.2232	0.6381
Factor 4: Average waiting time for care of a patient classified as Triage 2 in the emergency department.	2.3270	0.1316	1.0690	0.3047
Factor 5: Emergency Department Resolutivity	0.1703	0.6811	0.7546	0.3880

CONCLUSION

Reducing the costs of care by affecting the revenue budget of public hospitals could jeopardize the quality of care they provide to vulnerable populations. The

low predictive validity may explain why previous studies on the association between finances and quality have obtained inconclusive results.