

MANAGEMENT OF WAITING LISTS FOR MAGNETIC RESONANCE PROCEDURES

(December 2019)

SUMMARY

The SAO conducted 21 performance audits of waiting lists management for magnetic resonance procedures.

The audit covers the Ministry of Health and the Croatian Health Insurance Fund and 20 health institutions.

The subject of the audit were the activities of the Ministry of Health and the Croatian Health Insurance Fund, as well as health institutions related to the maintenance and the management of waiting lists for magnetic resonance (MRI) procedures and the supervision of maintenance and managing waiting lists.

In this audit, the term *waiting list* implies a unique list of insured persons (patients) who have an appointment on the basis of which the health institution determines the order (term) of their admission to health services from compulsory health insurance (hereinafter referred to as the waiting list).

The objectives of the audit were to check whether health institutions maintain waiting lists in accordance with regulations and whether they have complete data on waiting time for magnetic resonance procedures, to verify the normative regulation of waiting lists management for magnetic resonance procedures, to check whether activities related to the reduction of Waiting lists are being undertaken, to verify whether healthcare institutions ensure equal treatment of patients in accessing magnetic resonance procedures and to evaluate the effectiveness of the monitoring system for maintenance and managing waiting lists.

The audit covers 20 health institutions (all five clinical hospital centres, three clinical hospitals, one clinic, ten general health institutions and one special health institution) which, according to the Institute's data, had magnetic resonance devices at the beginning of 2019. The contract on the implementation of hospital and specialist-conciliar health care concluded by the Institute with public health institutions regulates mutual rights and obligations related to the implementation of hospital and specialist-consultancy protection, which includes magnetic resonance procedures.

The above mentioned Ministry and the Fund started in August 2012 with the implementation of the waiting *eList* and *E-orders* project which are part of the Central Health information system of Croatia (hereinafter: CEZIH). The objectives of the waiting *eList* project are to combine data on hospital waiting lists at the level of the Republic of Croatia with a single list of services and a clearly defined dataset.

The goals of the *E-orders* project are to obtain the most favourable term from primary health care offices, to select the health care institution that suits the patient best according to the location, to better organise and utilize hospital resources, transparency and to significantly reduce in waiting times for specific specialist examinations and medical procedures.

The table below provides information on how to maintain waiting lists per health care facility and connection to the CEZIH system.

Table No. 1

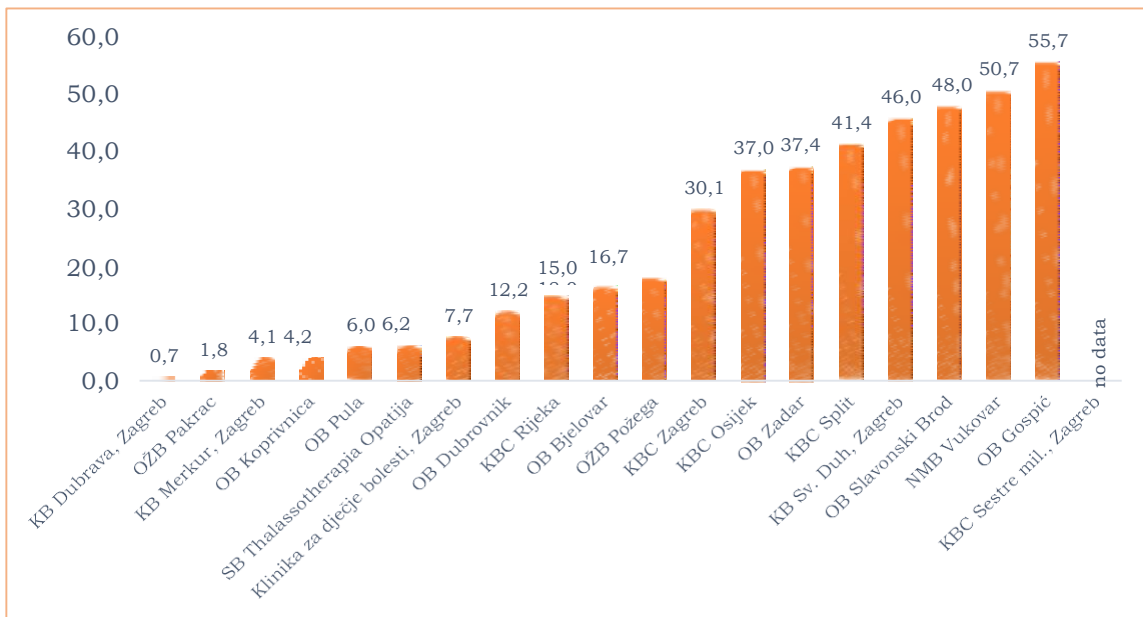
The method of keeping the waiting list in health care institutions
and link to CEZIH

Ordinal number	Health care institution	Electronically	Publication on webpage	Link to CEZIH
	1	2	3	4
1.	OŽB Pakrac	yes	yes	yes
2.	KB Merkur, Zagreb	yes	yes	yes
3.	OB Koprivnica	yes	yes	yes
4.	SB Thalassotherapia Opatija	yes	yes	yes
5.	Clinic for children's diseases, Zagreb	yes	yes	yes
6.	KB Dubrava, Zagreb	yes	yes	no
7.	OB Pula	yes	yes	no
8.	OB Bjelovar	yes	yes	no
9.	KBC Zagreb	yes	yes	no
10.	KBC Osijek	yes	yes	no
11.	OB Zadar	yes	yes	no
12.	KB Sv. Duh, Zagreb	yes	yes	no
13.	NMB Vukovar	yes	yes	no
14.	OB Gospić	yes	yes	no
15.	KBC Rijeka	yes	no	yes
16.	OŽB Pozega	yes	no	yes
17.	KBC Split	yes	no	yes
18.	OB Slavonski Brod	yes	no	yes
19.	OB Dubrovnik	yes	no	no
20.	KBC Sestre milosrdnice, Zagreb	yes	no	no

Magnetic resonance procedures in health care institutions, where the audit was performed, were performed on a total of 30 devices, and during 2019 a total of 136 746 magnetic resonance procedures were performed, out of which 116 257 or 85.0% referred to outpatients, while 20 489 or 15.0% referred to hospital patients. From the audit was concluded that in October 2019, a total of 8 551 patients were examined in health care facilities, of which 2 111 or 24.7% did not enrol on the waiting list. The number of unenrolled patients on waiting lists in health care institutions ranged from 0.7% to 55.7% of the total number of outpatient patients examined.

The graph below provides data on the number of patients who have not been enrolled on the waiting lists, by health care institutions.

Number of patients who have not been enrolled on waiting lists by health care institutions (%)



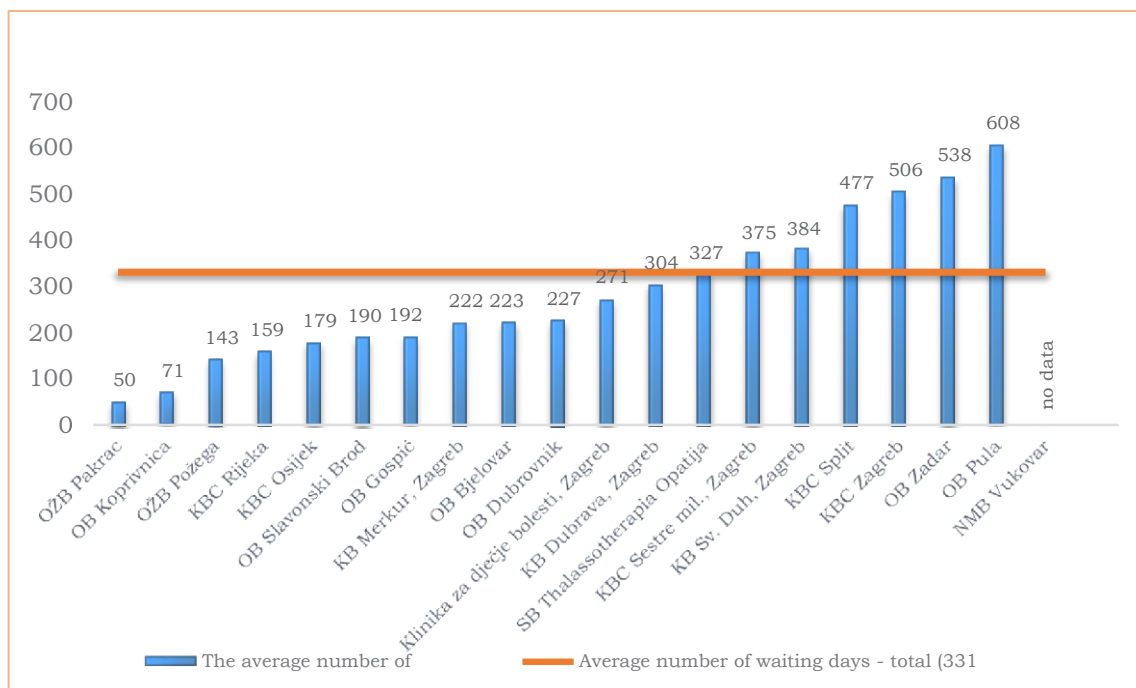
Graph No. 1

In the hospital information system, when getting an appointment for magnetic resonance procedure, not all predicted indicators are marked, such as cases involving a minor, an urgent case for patients with malignant and haematological diseases and pre-transplantation processes, which is why it is not evident in the system that a patient had priority when getting an appointment for a magnetic resonance procedure. Also, it doesn't indicate whether patients are getting an appointment for the first or control examination by magnetic resonance. This is particularly important for achieving equal treatment of patients in access to health services and providing healthcare services to patients in the shortest possible waiting time.

According to health care institutions, at the end of September 2019 there were 47 397 patients on waiting lists for magnetic resonance procedures with an average of 331 waiting days. The lowest number of patients enrolled was 174 and the highest was 9 619. The average number of waiting days for MRI procedures ranges from 50 to 608 days.

The graph below gives the average number of days waiting for magnetic resonance procedures per health care facility.

The average number of days waiting for magnetic resonance procedures



Graph No. 2

The criteria for expressing the evaluation of effectiveness were:

- whether the above mentioned Fund collects data on waiting lists in accordance with regulations and whether it has complete waiting data for magnetic resonance procedures per health care institution
- do health institutions maintain waiting list in accordance with regulations and do they have complete data on waiting for magnetic resonance procedures
- whether patients are provided with accessible and equal treatment
- whether health care institutions have put in place an effective monitoring system for maintaining and managing waiting lists.

Based on an audit evidence and the established facts and by applying the established criteria, the SAO assessed that the management of waiting lists for magnetic resonance procedures in **seven health institutions is effective, requiring some improvements**, as certain omissions have been identified that do not significantly affect the management of waiting lists for magnetic resonance procedures. It has been assessed that the management of waiting lists for MRI procedures at **the Ministry, Fund and 13 health institutions are partially effective**, as significant irregularities and omissions were found regarding the maintenance of waiting lists and recording of waiting data for MRI procedures, ensuring equal treatment of patients in access to MRI procedures and the functioning of the monitoring system for maintenance and managing waiting lists.

Audit findings

The audit identified shortcomings in maintenance of Waiting lists, managing waiting lists and monitoring the maintenance and management of waiting lists for magnetic resonance procedures, for which 232 recommendations were made.

Among other things, the following recommendations were made:

- Update the content of the CEZIH website to focus the link on the waiting list of a healthcare institution.
- On the websites of health institutions provide a link with the CEZIH website and the *eLista* system on the websites of the Institute, in accordance with the General conditions of the contract on the implementation of specialist-consultancy health care from mandatory health insurance, which would refer insured persons to access data on available terms for appointment with other health institutions providing the same health service.
- On the websites of health care institutions regularly update data on waiting lists.
- On the websites of health care institutions, publish data on available terms for appointment, so that patients have complete information on the availability of health services provided by the health care institution.
- Check the update of the List of orders on the web site of the Fund, check whether all health institutions are providing magnetic resonance procedures submit up-to-date data and, if they are not updated, ask health care institutions to do so urgently.
- Ensure the harmonisation of data on the Waiting list in the hospital information system, CEZIH and the *eLista* system on the web pages of the Fund.
- Enable health care institutions to have insight into free terms for the same health procedure in all public institutions and with IT solutions prevent the simultaneous entry of appointments for a particular patient for the same procedure in several health care institutions, which would reduce the possibility of patient to have appointments in two or more health institutions, i.e. increase waiting days.
- Adopt an Ordinance on determining the medically justified deadline within which the necessary health care prescribed by the provisions of the Act on mandatory Health Insurance must be provided.
- Accelerate the work on adopting clinical guidelines with the participation of professional medical societies, professional chambers and other interested institutions, organisations, groups and individuals, for the purpose of rational use of all medical devices.
- To conduct an analysis of the causes of the increase in waiting days for MRI procedures prior to contracting or additional contracting of these procedures with private health institutions.

- All outpatients entitled to the healthcare services under the compulsory health insurance, which the health institution carries out, shall be included on the waiting list and for each patient included on the list published on the health care institution's website and in the hospital information system, indicate whether it is a child, first check, check-out, emergency situation/term in relation to malignant and haematological disease and pre-transplant process or medical conditioned term, in order to ensure full transparency of the management of the lists and equal treatment of all patients.
- Develop and implement written procedures to ensure transparent maintaining of the waiting list, in accordance with action plans accompanying the Anti-Corruption Strategy for the period 2015- 2020.
- Carry out regular control of the performance of contractual obligations of health care institutions, especially supervision of waiting lists, given that exceptional controls in a large number of health care institutions have detected irregularities.
- Analyse the causes of the occurrence and growth of the waiting list in health care institutions and undertake activities to reduce or eliminate the causes of its occurrence.
- Develop and publish on the website of the Ministry of Health an analysis of the work of the Committee for the waiting list and complaints received by citizens on the waiting list, in accordance with the Action plans accompanying the Anti-Corruption Strategy for the period 2015- 2020.

The SAO is of the opinion that the implementation of the above recommendations would achieved improvements regarding the management of the waiting list and the recording of data on waiting time for health services, ensuring equal treatment of patients in access to health services and the functioning of the control system for maintaining and managing waiting lists, which would increase the effectiveness of waiting list management in the Ministry of Health, the Croatian Health Insurance Fund and Health institutions.