

A European Perspective on OR in Health

Jan Vissers

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INSTITUTE OF **HEALTH POLICY & MANAGEMENT**

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Introduction

Health OR – ORAHS

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Health OR

- Remarkable development of Health OR:
 - Major industry
 - Rising costs
 - Paradigm shift in service concept
- Increased popularity of Health OR
 - in numbers of applications
 - in scope of topics

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EWG ORAHS

- EURO Working Group on Operational Research Applied to Health Services
- Domain specific working group, under the umbrella of EURO
- Emphasis is on Applied OR

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ORAHS 1975: the start

- September 1975: First meeting in Exeter, UK
- Organized by Duncan Boldy
- 14 participants from 6 countries
- Mix of academics and practitioners
- Objectives
 - Coordination and dissemination on health OR work in Europe
 - Organisation of seminars on specific topics
 - Setting up joint projects

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ORAHS 1977: format meeting

- Separate meeting from EURO meetings
 - More informal discussion oriented setting, open to practitioners
 - Local organizer can tailor the meeting to health care system needs
- Arrangements for meetings
 - Limitation of attendees to about 30 to preserve informal nature of meeting
 - More time for presenting (20-30 minutes) and discussion (15 minutes)
 - Three working days with one break in the middle for social activities (site visit of a health service, outing)
- ORAHS as Research Family

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ORAHS: activities

- Books: Boldy 1990
 Operational Research Applied to Health Services
- Proceedings: first in 1991 (Wroclaw meeting, Marek Lubicz) From 1995 onwards standard proceedings
- Special Issue Numbers: EJOR (1987, 1997, 2003), JORS (2007), Health Care Management Science (2009) and others
- Workshops with healthcare managers Altavilla 1984: one day during the meeting Leeds 1987: 2 day stand-alone workshop Wroclaw 1990, Veldhoven NL 1991, Sydney 2000

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Review

Framework of analysis - ORAHS

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Review

- Questions to be answered
 - What are the developments in ORAHS as EWG?
 - What are the developments in papers presented at ORAHS meetings?
 - What are challenges for health OR?
- Papers presented 1975-2009
- Invited Review EJOR
- Co-author Sally Brailsford

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Criteria for analysis ORAHS papers

- Applied OR
 - Collaboration practitioners academics
 - Analysis not technique oriented but user (setting) oriented
- Dimensions of the framework
 - Stages in product / service life cycle
 - Level of process in health care system

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Stages service life cycle

- 1. Identifying consumer needs for a health service
- 2. Developing a new service
- 3. Forecasting the demand
- 4. Securing resources
- 5. Allocating resources
- 6. Developing programs and plans for deployment of resources
- 7. Developing criteria for delivery performance
- 8. Managing the performance of delivery
- 9. Evaluating the results of delivery





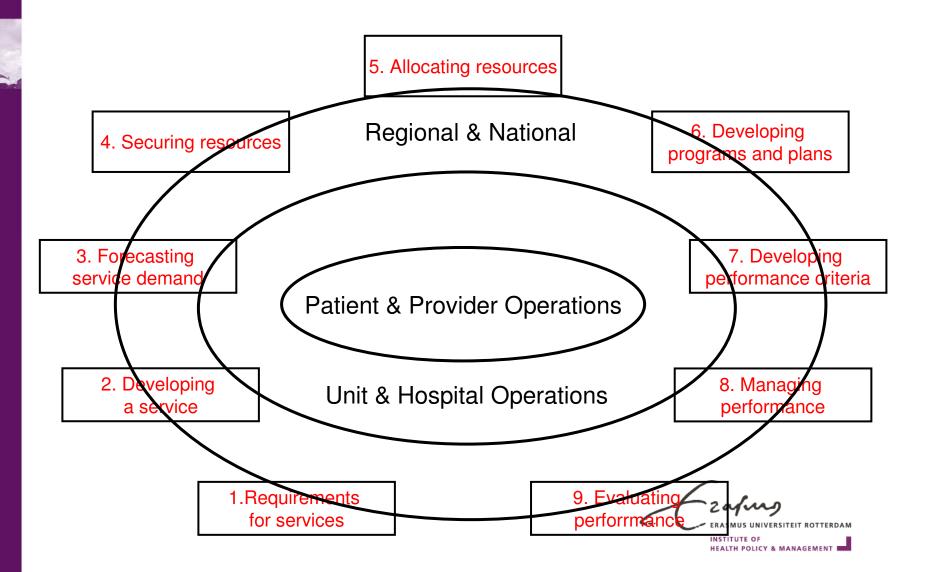
Levels of process in health care

- 1. Patient and Provider level
- 2. Unit and Hospital level
- 3. Region and National level

NB Not the same as operational-tactical-strategic

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Framework for analysis



Interpretation of papers

- More than 1000 papers presented
- Limited information
 - Oral presentations, not always in proceedings
 - No proceedings in the beginning years
- Interpretation difficulties
 - Patient survey: performance evaluation or consumer requirements ?
 - New way of scheduling: resource allocation or developing plans?
 - Benchmark: performance management or performance evaluation ?
 - Care pathways: always Patient & Provider?
- Interpretations checked by both authors

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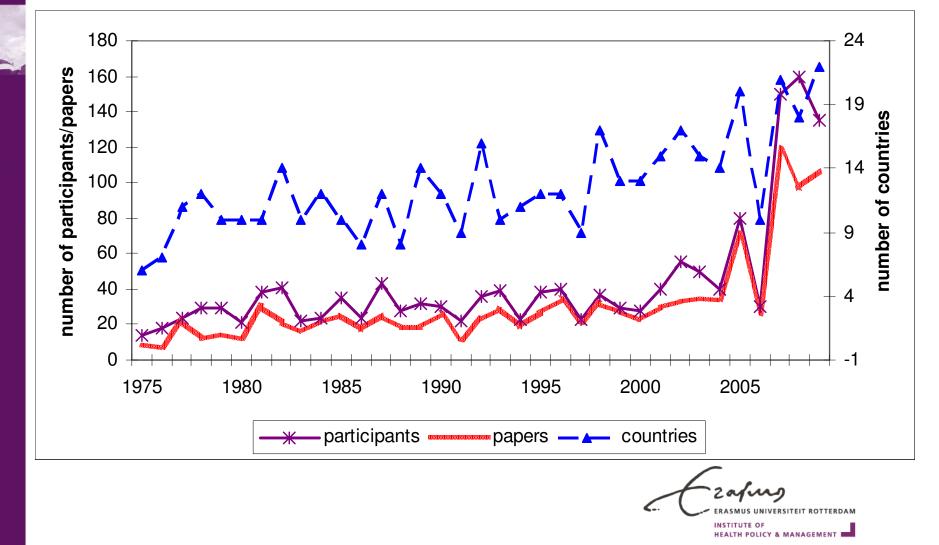
RESULTS

Development ORAHS Analysis of ORAHS papers

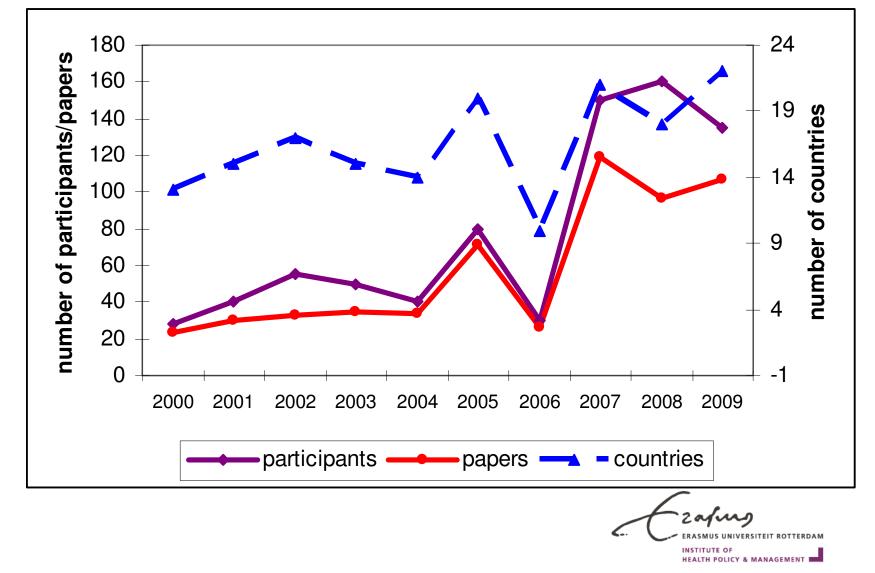
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Number of participants/countries/papers 1975-2009



Number of participants/countries/papers 2000-2009





Summarizing

- Size of meetings: from 25-40 to 80-150 participants
- Countries: from 10-14 to 17-22 countries
- Papers: from 15-25 to 70-100 papers
- Explanations:
 - Popularity health OR
 - Rapid increase in PhD student numbers
- Pressure on format meetings ORAHS
- Challenge: how to handle the growth of OFAHS while maintaining its charmes

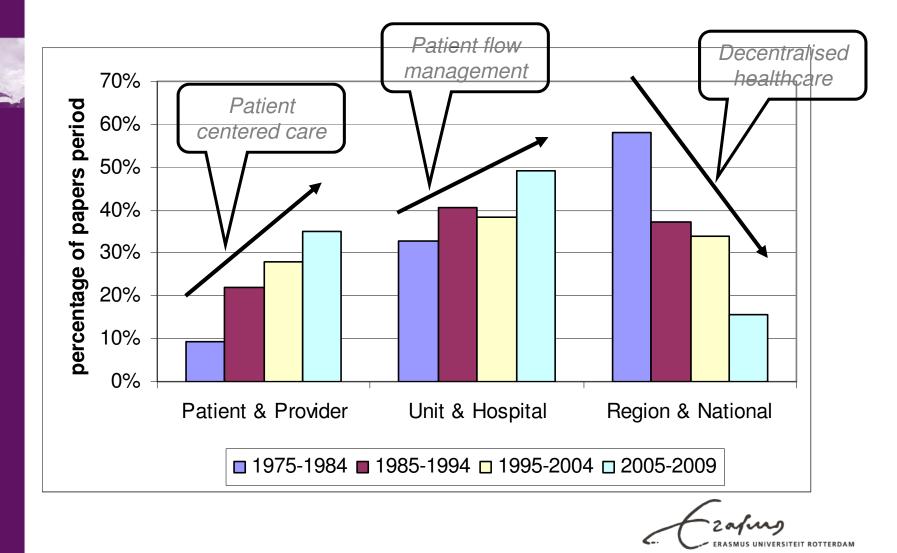
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Patient & Unit & Level **Region &** Total Percentages Stage **Provider** Hospital **National** 2% 1. Identifying consumer requirements 9 6 16 1 2. Developing a new service 13 4 17 2% 0 16 23 3. Forecasting the demand of services 5 44 5% 0 21 2% 4. Securing resources for service delivery 3 18 5. Allocating resources for service delivery 9 26 32 67 8% 6. Developing programs and plans for 46 110 60 216 250 using resources 7. Criteria for service delivery performance 3 6 10 1 63 331 38% 8. Managing the performance of delivery 178 90 9. Evaluating the performance of delivery 63 33 53 149 17% 225 Total 359 287 871 26% 41% **Percentages** 33% 100%

Number of papers per stage & level

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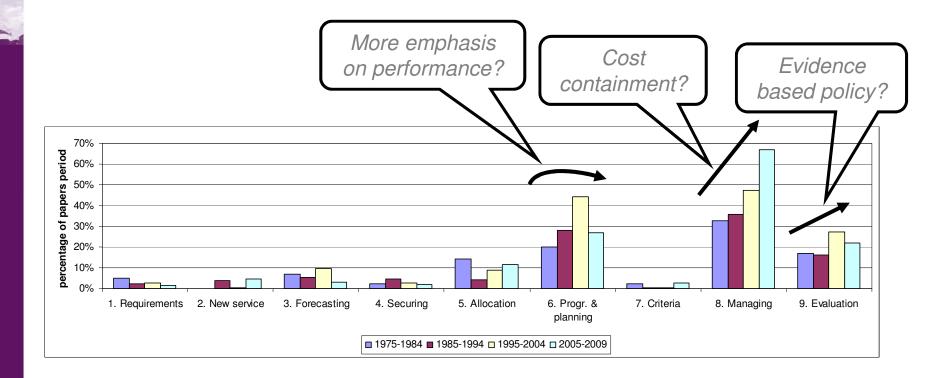
Percentage of papers per level, over time



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Proportion of papers per stage, over time



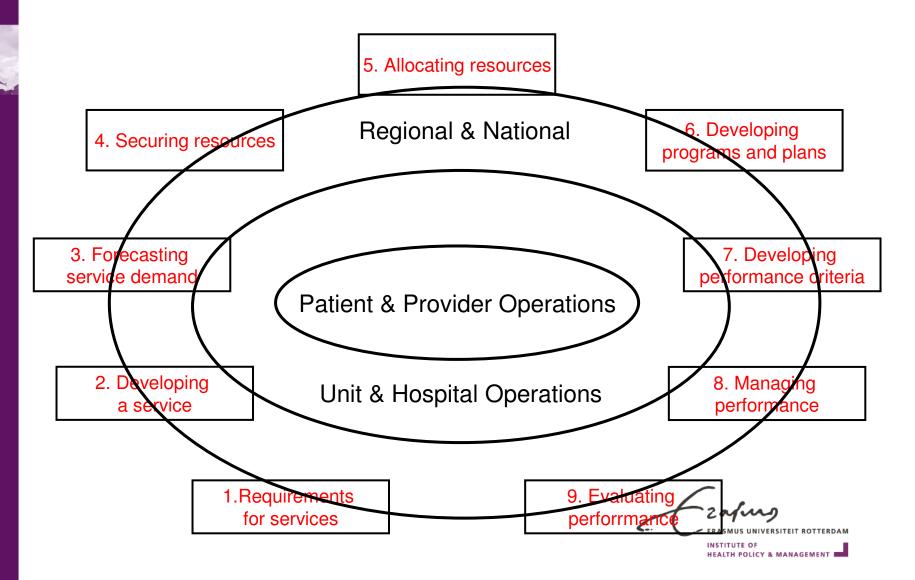
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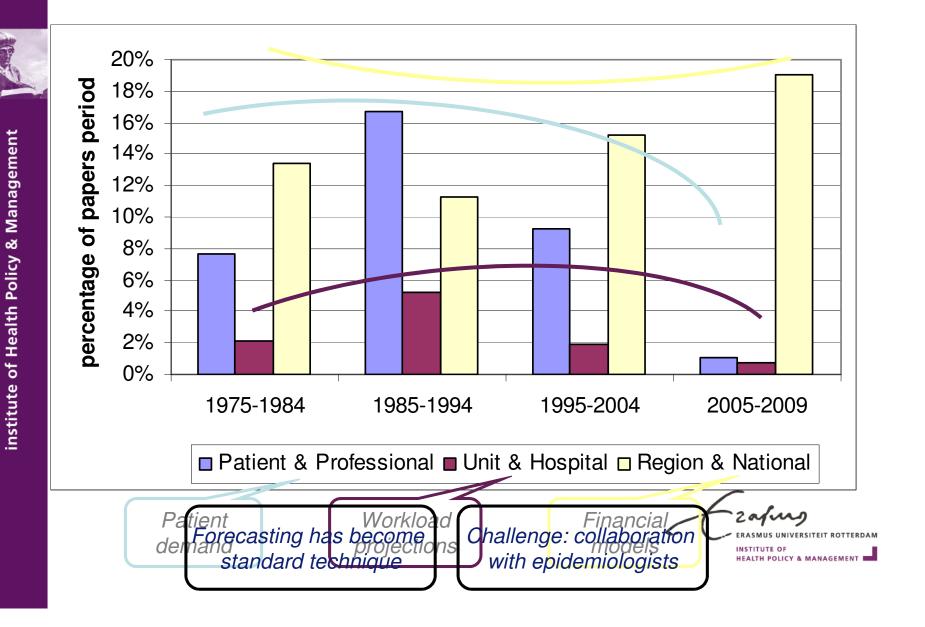
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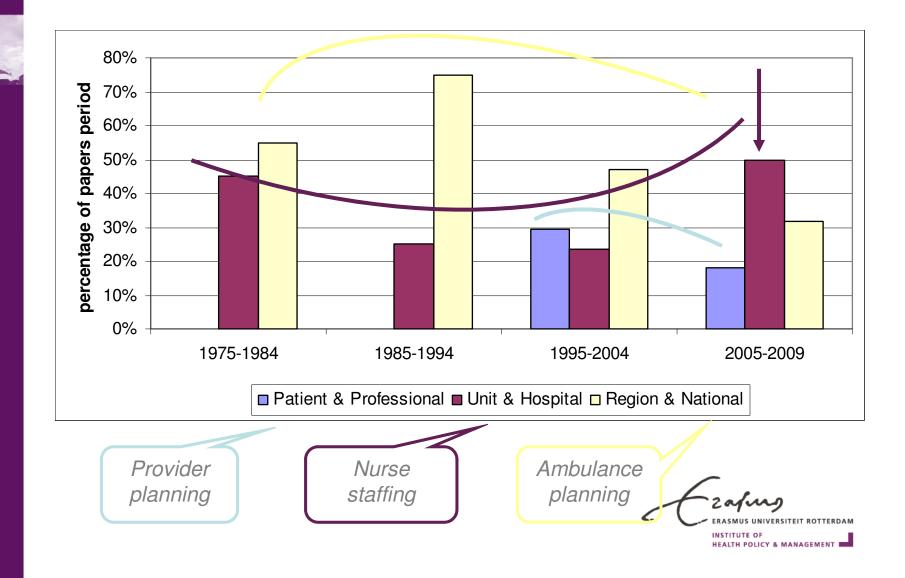
Results per service stage



3 Forecasting demand / 4 Securing resources

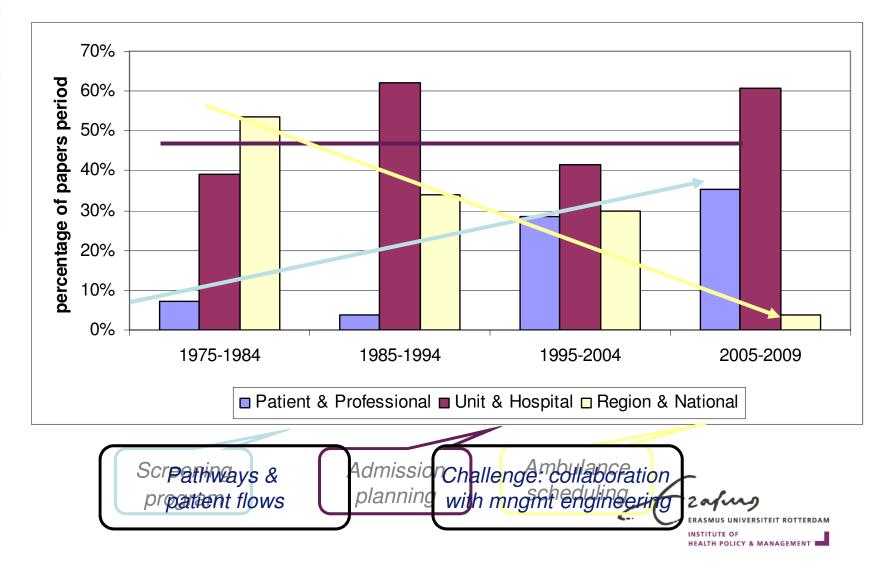


5 Allocating resources



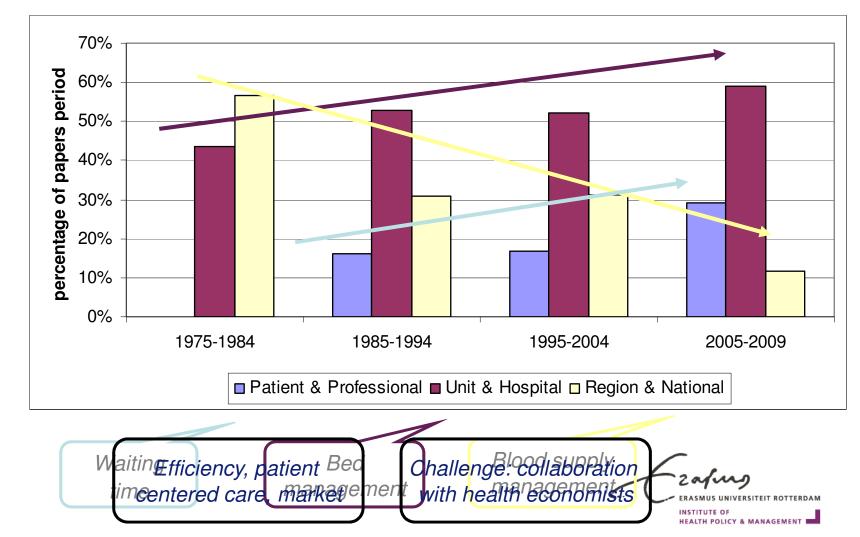


6 Plans and programmes



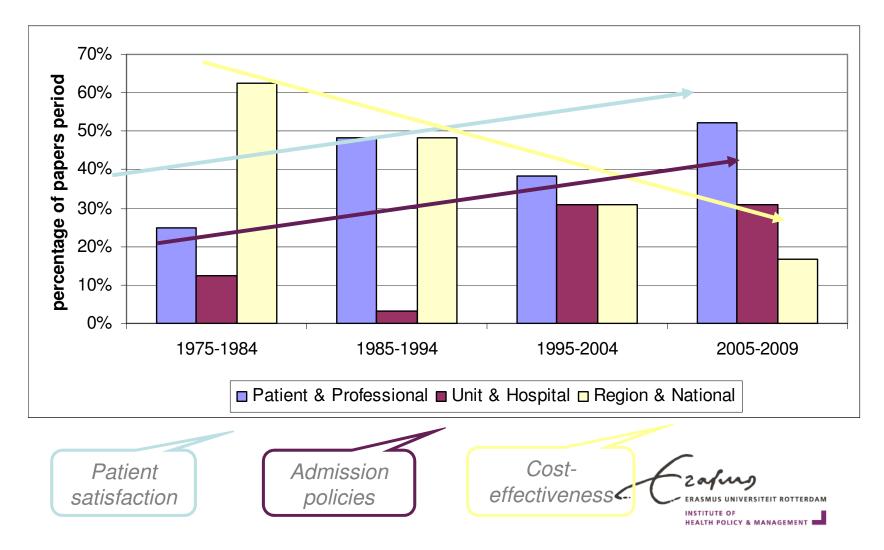


8 Performance management





9 Performance evaluation



Discussion

• Challenges in every stage:

1/2 New service: participative soft modelling approaches (SSM, SOD, 2/4 Foregoeting, collaboration with apidemiologists

3/4 Forecasting: collaboration with epidemiologists

- 5/6 Allocation & planning: whole systems perspective, patient flow modelling, collaboration with management engineering
- 7/8 Performance management: rules of thumb, collaboration with health economists
- 9 Performance evaluation: patient and provider focus
- Conclusions
 - Health OR increasingly popularity in numbers and in scope
 - Many challenges ahead
 - Focus on actual use requires close collaboration with practitioners

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ORAHS 2010

- Genova/Italy: July 18-23 2010
- Organizer: Angela Testi (<u>Testi@economia.unige.it</u>)
- Theme: OR for patient-centered healthcare delivery
- Website: http://orahs2010.diem.unige.it

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