AHRQ Prevention Quality Indicators to assess the quality of primary care of local providers: a pilot study from Italy
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Background
Outside USA, AHRQ Prevention Quality Indicators (PQIs) have been used to compare the quality of primary care services only at a national or regional level. However, in several national health systems, primary care is not directly managed by the regions but is in charge of smaller territorial entities. We evaluated whether PQIs might be used to compare the performance of local providers such as Italian local health authorities (LHAs) and health districts.

Methods
We analyzed the hospital discharge abstracts of 44 LHAs (and 11 health districts) of five Italian Regions (including ≈18 million residents), in 2008-2010. Age-standardized PQI rates were computed following AHRQ specifications. Potential predictors were investigated using multilevel modeling.

Results
We analyzed 11,470,722 hospitalizations. The overall rates of preventable hospitalizations (composite PQI 90) were 1012, 889 and 745 (x100,000 inhabitants) in 2008, 2009 and 2010, respectively. With some exceptions, Italian PQI rates were much lower than USA. Composite PQIs were able to differentiate LHAs and health districts, and showed small variation in the performance ranking over years. A simplified composite PQI showed comparable face and predictive validity.

Conclusions
Although further research is required, our findings support the use of composite PQIs to evaluate the performance of relatively small primary healthcare providers (50,000-60,000 enrollees) in countries with universal health care coverage. Achieving high precision may be crucial for a structured quality assessment system to align hospitalization rate indicators with measures of other contexts of care (cost, clinical management, satisfaction/experience), that are typically computed at a local level.

Key messages
- Composite PQIs were able to differentiate local level providers such as Italian local health authorities or health districts, which showed small variation in the performance ranking across the years.
- In nations with universal health care coverage, composite PQIs appeared a valid set of indicators to evaluate the performance of relatively small primary health care providers.