



Highlights from the project

The importance of outcome research has become evident as a means to promote best practice and control health expenditure. Monitoring efficiency and efficacy in the health field is acknowledged by most of the EU countries as a guarantee of quality care and outcome measurement. It is a tool to evaluate health care quality, which represents one of the most important areas of interest both at a national and international level. Initiatives have started at the European level to regulate and promote patient circulation as clearly stated in the Patient Rights Charters. These actions require objective and reliable indicators. To this purpose the use of common methodologies is imperative.

In agreement with the ideas that foster the Community action programme for public health, the Euphoric project has developed standardized methodologies in order to calculate outcome indicators for individual pathology areas. Euphoric has gathered previously existing outcome indicators from various European countries and from experience and commitment evolved at the national level. Hence, it has verified the possibility of producing common indicators for all Europe with the continual and final aim of providing shared data in order to measure the quality of health services.

Concerning some selected indicators, Euphoric provided useful inputs to integrate the indicators previously developed by other European projects, such as ECHI (European Community Health Indicators), ECHI-2 and ECHIM (European Community Health Indicators Monitoring).

General and specific objectives

Euphoric was a multidisciplinary project oriented to policy authorities and policy makers that aimed at building a consortium of participating countries in order to:

- cooperate on benchmarking the outcomes of selected health performances
- exchange information on quality standards, best practice and effectiveness in public health by developing and maintaining EU networks
- verify the hypothesis that the possibility of developing common outcome indicators in Europe exists
- identify common EU elements that are suitable for a political EU platform oriented at best practice guarantees for EU citizens.

Specific aims of the proposed project were to:

- set up a high quality framework - consortium
- collect detailed information on health outcome indicators
- develop a standardized methodology
- assess quality of care of selected health procedures
- provide objective, transparent, high quality and standardized information that is easily accessible to users (doctors, health staff, health administration, decision makers, policy makers, EU people)

- provide assistance to EU countries for the development and implementation of a common monitoring system of standardized outcome indicators with a view to eventually creating common public health planning in Europe
- investigate the validity of routinely collected data.

Organization and phases

The project was guided by a network of 15 institutions from 10 European countries (Austria, Bulgaria, Finland, France, Germany, Greece, Italy, Slovak, Spain, and Sweden) and Israel. The network played a crucial role in the development of a joint effort to provide a valuable source of information.

Euphoric was organized in three phases (survey, pilot, dissemination) and structured in the following six work packages (WP), each one being linked to specific objectives and activities:

1. project management
2. dissemination strategy
3. liaison with other EU projects, EU programmes and health stakeholders
4. indicators development
5. indicators testing in currently running register databases
 - a. cardiovascular pilot
 - b. orthopaedic pilot
 - c. risk adjustment and statistics pilot
6. setting up and maintaining an indicators database.

Survey

The first phase regarded the creation of a shared inventory of the studies on outcome research and outcome indicators available worldwide that resulted in a list of 54 indicators. The analysis of the operative conditions available in the participating countries paved the way to the second phase of the project, the pilot.

Pilot

Aim of the pilot was to define a standardized methodology to test some selected indicators so as to allow a comparison of the outcomes of the selected pathologies and procedures. The work was based on the results obtained in the survey and the most recent available population registries were used. Cardiovascular and orthopaedic areas were chosen for their high clinical interest and impact on public health. Furthermore, a specific “Risk Adjustment and Statistics” work group was formed to support the two pilot studies and to evaluate the sources of information available in the participating countries.

Dissemination

Euphoric’s history and results have been described in a set of technical and communication products. To widespread the dissemination some of them were translated in the 10 languages spoken in the participating countries. They are accessible for the public, patients, public health authorities, institutions and health care workers in the project’s website: www.euphoric-project.eu. Euphoric’s research agenda was made known and will be further disseminated to the scientific community by means of published articles in specialized journals, workshops and participation in international conferences.

Outcome indicators of the Euphoric project

The work carried out by all the partners of the Euphoric project led to the creation of a list of 54 outcome indicators, divided in 9 categories (Cardiovascular disease and surgery, Cancer, Infectious diseases, Other chronic diseases, Orthopaedics, Transplantations, Emergency, Neonatal/Maternal,

Miscellanea). The compiling of the list was based on evaluation criteria, such as data availability, clinical relevance of the indicator and its importance to the international scientific community. The indicators were identified on the basis of the data available in the first phase of the project, in particular covering 2004-2005.

Identifying outcome indicators, which can be applied in different health contexts, requires constant updating. Only in this way can it be guaranteed that the differences among countries are not underestimated but rather they are included and codified so as to improve the evaluation tools and compare the results. Neither can the most recent terminology be omitted as it is in continual evolution in relation to the new procedures and standards being introduced. Therefore, the list of indicators identified by the Euphoric project is not the definitive end point but the starting point of a path to constantly improve the quality of health assistance offered to European citizens.

Public, health workers and decision makers

Outcome indicators allow the comparison between medical institutions and the measurement of the effectiveness of treatments and procedures. The experiences gained from this sector in the last fifteen years show how the main effect of this type of comparison is to help medical personnel, at every level, improve their services. Euphoric's contribution was to make a reliable and objective tool for self evaluation available to personnel and medical institutions.

Data collected by Euphoric and from other similar projects also provide valid tools for institutional decision makers to make choices in planning and using the available resources. In line with the European Union's general idea, the effort made by Euphoric's partners lies in providing an objective basis to be able to make knowledgeable choices and promote an homogeneous improvement in health care services to all European citizens.

The information that emerges from the Euphoric project is freely accessible to all European citizens from the website: www.euphoric-project.eu. Especially hospitals and medical institutions can obtain the most benefit from the website, thanks to the possibility of adopting tools that allow them to compare their performance with other quality institutions and the reference values for each medical procedure. Self assessment on the part of health care world allows to simply and clearly improve health services to all European citizens.

The future of the Euphoric project

The Euphoric experience ended in December 2008 after four years of networking. The hope of those who have worked on this project is that Euphoric can be a starting point for other research projects in this sector that are aware of the necessity of continual monitoring of the results and of the constant need to update procedures, methodologies and the public health requirements. Euphoric has above all been a cultural and political challenge. For this reason, the many contacts with other projects promoted by the European Union must be taken into account. Furthermore, the value of this project lies in its dimension at the Community level, though often obstacles were encountered due to the differences among the Member States. However, it is precisely this point that the European Union and projects such as Euphoric can and must insist on in order to create a homogeneous health service for all EU citizens.

A first example of putting the objective of a homogenous EU-wide health service into practice is the European project Eurhobop (European Hospital Benchmarking by Outcomes in acute coronary syndrome Processes) (www.eurhobop.eu). This project was launched in September 2009 to validate the results of the Euphoric [cardiovascular pilot study](#). Funded by the EU Commission under the second Public Health Programme 2008-2013, Eurhobop seeks to provide European hospitals with a validated set of statistical functions to assess their performance in the general management of acute

myocardial infarction or unstable angina patients and in the use of the treatments aimed at removing the coronary artery occlusion. Eurhobop is intended to provide the European Community with valid standardized and adjusted benchmarking tools that permit European hospitals to monitor their outcomes in key procedures used in coronary artery disease.