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### **2003 Annual Report**

## **INTERNATIONAL PROGRAM IN HEALTH POLICY AND PRACTICE**



During a candid discussion at the Fund's International Symposium in October, U.K. Secretary of State for Health John Reid, MP, shared his views on a range of pressing national issues, including health care quality, nursing shortages, and the media's impact on health policy. Seated next to him are Carolyn Clancy, M.D., director of the U.S. Agency for Healthcare Research and Quality, and Philip Davies, Deputy Secretary of the Australian Department of Health and Ageing.

The Fund's International Program in Health Policy and Practice is dedicated to building an international network of policy-oriented health care researchers. As part of that work, the program conducts high-level policy forums for international exchange, which foster creative thinking about health care problems common to the United States and other industrialized countries.

### **2003 International Symposium**

For the past six years, the Fund has hosted an annual international symposium in health care policy on a topic of common concern to the United States and other industrialized nations. This year's symposium, held in Washington, D.C., in October 2003, brought together leading policy thinkers to consider the theme "Hospitals and Health Care Delivery Systems: Spotlight on Innovation." Participants included health ministers or their designates from Australia, Canada, New Zealand, the United Kingdom, and the United States, other experts from each country, and leading U.S. policymakers and researchers.

At an opening dinner at historic Blair House, U.S. Secretary of Health and Human Services Tommy G. Thompson highlighted several challenges shared by the health care systems of the participating countries: reconciling rising health care costs with public demand for expensive new technologies and pharmaceuticals, meeting the needs of aging societies, and changing the population's lifestyle to combat growing epidemics of obesity and diabetes. He commended the efforts of the Global Fund for AIDS and underscored the value of forums such as the symposium for cross-national learning, emphasizing that collaboration for better health can be a bridge to peace between countries.

In the opening keynote address, New Zealand Minister of Health Annette King articulated a vision for the New Zealand health care system and outlined major reforms underway to improve quality and reduce disparities, re-focus the health care system on primary care and prevention, and control the growth in pharmaceutical costs. In subsequent plenary sessions, Martin McKee of the European Observatory drew on examples from many countries to illustrate the need to re-engineer 1960s models of health care delivery to serve growing numbers of chronically ill patients and shift care from the hospital to the community. Chris Ham, director of the strategy unit of the U.K. Department of Health, presented a comparison of utilization and organization in Kaiser Permanente and the National Health Service, provoking a discussion of the role of incentives and cultural context in health care systems.<sup>1</sup> The theme of organizational culture as a driver of change was continued in a dynamic exchange among Robert Roswell, M.D., undersecretary of health for the U.S. Veterans Health Administration, George Halvorson, chairman and CEO of Kaiser Foundation Health Plan, and Simon Stevens, senior health policy adviser to U.K. Prime Minister Tony Blair.



Simon Stevens  
1994-95 Harkness Fellow

A highlight of the meeting was the second John M. Eisenberg, M.D., International Lecture, delivered by David Naylor, M.D., dean of the faculty of medicine at the University of Toronto, on Toronto's experience with SARS and the need for international collaboration and investment in public health infrastructure.

The symposium was also the occasion for previewing the results of the Fund's 2003 International Health Policy Survey. This year's survey elicited the views of chief executive officers of larger hospitals in Australia, Canada, New Zealand, the United Kingdom, and the United States on efforts by their institutions to improve quality and patient safety and to cope with such diverse challenges as financial deficits, market competition, nursing and physician shortages, waiting lists, emergency room crises, rapid changes in medical and information technology, modernization of facilities, and preparedness for a terrorist event. The survey was designed to provide a cross-national perspective on the trade-offs hospitals face and opportunities for innovation.

In a roundtable discussion, Secretary of State for Health John Reid, MP (United Kingdom), Health Minister Annette King (New Zealand), Assistant Minister Ian Shugart (Canada), Deputy Secretary Philip Davies (Australia), Carolyn Clancy, M.D., Agency for Healthcare Research and Quality director (United States) had a candid exchange of views on national issues, including health care quality, health system sustainability and priorities, nursing shortages, and the impact of the media on health policy and consumer expectations. Scholars then introduced case studies illustrating country approaches to managing waiting lists, addressing nursing shortages, and improving emergency room care, as well as innovative chronic care models for coordinating the patient's journey across settings and disease stages. Several papers and survey results presented at the symposium will be submitted

**Hospital chief executives' views on disclosing quality information to the public**

Percent saying a particular type of information should not be released to the public:	AUS	CAN	NZ	UK	US
Mortality rates for specific conditions	34	26	18	16	31
Frequency of specific procedures	16	5	4	13	15
Medical error rate	31	18	25	15	40
Patient satisfaction ratings	5	2	0	1	17
Average waiting times for elective procedures	6	1	0	1	29
Nosocomial infection rates	25	10	25	9	29

2003 Commonwealth Fund International Health Policy Survey  
Commonwealth Fund/Harvard/Harris Interactive

for consideration for a May/June 2004 special international issue of *Health Affairs*. The symposium is directed by Robin Osborn, assistant vice president and director of the Fund's International Program in Health Policy and Practice, and cosponsored by *Health Affairs*, in collaboration with founding editor John Iglehart.

### **U.S.–U.K. Meeting on Health Care Quality**

In July 2003, the Fund and the London-based Nuffield Trust cosponsored “Improving Quality of Health Care in the United States and United Kingdom: Strategies for Change and Action, 2003,” the fifth in a series of meetings for senior U.S. and U.K. policymakers and quality experts. The gathering was further enriched by representatives from Australia and New Zealand. Held at Pennyhill Park in Bagshot, England, the meeting addressed four topics: the use of contractual agreements and incentives to improve quality and efficiency, patient engagement and decision making, implementation of electronic medical records and expansion of their use, and the implications of publishing provider performance data for regulation, reporting, and consumer choice.

The results of U.S., U.K., and Australian quality improvement collaboratives, which demonstrated impressive results in reducing waiting times for doctor appointments, improving outcomes for patients with coronary heart disease, and ensuring fast access to pain relief for patients in emergency rooms, provided a substantive starting point for a dynamic and provocative cross-national exchange on the sustainability of quality improvement efforts, provider incentives, and patient satisfaction. During the conference, Carolyn Clancy, M.D., director of the U.S. Agency for Healthcare Research and Quality, and Sir Liam Donaldson, M.D., chief medical officer of the Department of Health in England, reported on the progress of the 2001 bilateral

agreement between the United States and United Kingdom for collaboration on quality improvement and proposed an agenda for future efforts.

### **International Working Group on Quality Indicators**

The Commonwealth Fund's International Working Group on Quality Indicators, directed by Gerard F. Anderson of Johns Hopkins University and Robin Osborn, was organized in 1999 to develop a common set of minimum quality indicators for use in cross-national comparisons of health systems. Recognizing that national indicators such as life expectancy and infant mortality are greatly influenced by factors outside a country's health system, the working group seeks to recommend measures that will provide greater insight into how a national health sector performs relative to those of other countries, and how policy and delivery system organization affect quality. An initial list of disease-specific indicators for cancer, diabetes, cardiovascular disease, organ transplants, mental health, and asthma has been developed, and work on broader measures of disparities and health system responsiveness are currently underway. A report to health ministers and senior government officials is scheduled for release in May 2004.

The working group is a unique model for collaboration and technical exchange in health policy between industrialized countries. The five countries represented are Australia, Canada, New Zealand, the United Kingdom, and the United States; also participating are the Organization for Economic Cooperation and Development (OECD) and the World Health Organization. In 2003, the OECD expanded the collaboration to include 20 countries through its International Healthcare Quality Indicators Project, cosponsored by The Commonwealth Fund and chaired by Arnold Epstein, M.D., of Harvard University School of Public Health, chair of the Fund's working group. Building on the working group's initial

indicator set, the OECD project has identified five areas for additional indicator development: coronary heart disease, diabetes, mental health, primary/preventive care, and patient safety.

### **Harkness Fellows in Health Care Policy**

Aimed at developing promising health care policy researchers and practitioners in the United Kingdom, Australia, and New Zealand, the Harkness fellowships provide a unique opportunity to spend up to 12 months in the United States, conduct a policy-oriented research study, gain firsthand exposure to managed care and other models of health care delivery, enhance methodological skills, and work with leading health policy experts. Selection committees in each country interview candidates and recommend fellows. Nicole Lurie, M.D., senior natural scientist and Paul O'Neill Alcoa Professor of Health Policy at the RAND Corporation, serves as the Fund's senior fellowships advisor.

Harkness Fellows in Health Care Policy continue to generate articles based on their fellowship work. For example, U.K. Harkness Fellow Panos Kanavos (2001-02) coauthored the lead article<sup>2</sup> in the May/June 2003 issue of *Health Affairs*, on reference drug pricing, with Uwe Reinhardt, Princeton health economist and chair of the Fund's international coordinating committee. In the same issue, an article<sup>3</sup> by Canadian Harkness Associate Steven Morgan (2001-02) assessed prescription drug coverage for seniors in Canada, and a paper<sup>4</sup> coauthored by U.K. fellows Martin Marshall, M.D., and Huw T. O. Davies (1998-99) surveyed the status of quality reporting in the U.S. and the U.K. An article<sup>5</sup> by New Zealand fellow and journalist Rae Lamb (2001-02) on hospital practices in disclosing medical errors appeared in *Health Affairs* just prior to a vote in the House of Representatives on legislation to cap medical malpractice awards, providing timely evidence to

inform the debate. Australian fellow Jane Pirkis (2001-02) was lead author of a paper,<sup>6</sup> prepared with U.S. mentors Charles Irwin and Claire Brindis, on counseling for suicidal adolescents that appeared in *Journal of Adolescent Health*. Another Australian fellow, Russell Gruen, M.B., B.S. (2002-03), coauthored the American College of Surgeons Code of Professional Practice,<sup>7</sup> published in the *Journal of the American College of Surgeons*.

Fellows who have returned to their home countries continue to receive national recognition and assume influential posts in health care policy. In the United Kingdom, Nicholas Steele, M.B., Ch.B. (2002-03), received the U.K. National Primary Care Researcher Development Award; and Ronald Gray, M.B., Ch.B. (2002-03) was promoted to senior clinical research fellow in epidemiology at Oxford University. In Australia, Alan Cass, M.B., B.S., FRACP (2002-03) received the *Medical Journal of Australia*—Wyeth Award for the best article of the year; and, in New Zealand, Colin Tukuitonga, D.S.M. (2000-01), director of public health, was named director of global research on obesity at the World Health Organization in Geneva, and Sue Crengle, M.B., Ch.B., FRNZCGP (1999-00) was made Maori health adviser to the New Zealand National Health Committee.

The fourth class of fellows (2002-03) completed a productive year, ending with a final reporting seminar in Nashville, Tennessee, in June 2003. The year included several opportunities for fellows to meet with leading U.S. and international policy experts. In October, fellows attended the Fund's International Symposium on Health Care Policy and participated in a visit to the Agency for Healthcare Research and Quality. A Washington policy briefing in February gave the fellows exposure to the political process and the views of a wide range of senior policymakers and stakeholders. In March, the fellows spent a day at the RAND Corporation in Santa Monica,

where experts reviewed the state of quality in the U.S. health care system. Joining the Harkness fellows were two U.S. journalists from the Kaiser Media Fellowships in Health.

In May, the fellows traveled to Ottawa and Montreal for briefings with senior government officials and health care leaders and a closer look at the Canadian health care system. Also, two Canadian Harkness Associates, selected in collaboration with the Canadian Health Services Research Foundation, participated throughout the year in the fellowship seminars, adding a valuable Canadian perspective.

The 2003–04 Harkness Fellows in Health Care Policy arrived in the United States beginning in July to undertake research projects under the guidance of a distinguished roster of U.S. and home country mentors. Their topics are highly synergistic with the Fund’s national program areas, and most include comparisons between the United States and the United Kingdom, Australia, or New Zealand. A publishable paper or report for senior policymakers is the end product expected for each fellowship.

- **Malcolm Battersby**, M.B., B.S., FRANZCP, Ph.D. (Australia)  
Senior Lecturer in Psychiatry, Flinders University  
Project Title: *Chronic Disease Self-Management Programs: Scope of Programs and What Works for Whom in the U.S.*  
Placement: Center for Health Studies, Group Health Cooperative, Seattle  
Mentors: Michael Von Korff, Sc.D., and Ed Wagner, M.D., M.P.H.
- **Dale Bramley**, M.B. Ch.B., M.P.H., FAFPHM (New Zealand)  
Public Health Physician, Waitamata District Health Board, and Senior Lecturer, School of Population Health, University of Auckland  
Project Title: *A Comparative Review of Health Status Outcomes for Ethnic Minorities in New Zealand, Australia, Canada, and the United States*  
Placement: Mount Sinai School of Medicine, New York  
Mentor: Mark Chassin, M.D., M.P.P., M.P.H.

- **Elizabeth Davies**, M.B., B.S., Ph.D., MFPH (United Kingdom)  
 Senior Clinical Research Fellow, Department of Palliative Care and Policy, Guy's, King's and St. Thomas' School of Medicine, London  
 Project Title: *Making Cancer and Palliative Care Services More Patient-Centered: Use of Patient Surveys in the U.S. and U.K. to Improve Quality*  
 Placement: Harvard Medical School  
 Mentor: Paul Cleary, Ph.D.
- **Stephen P. Dunn**, Ph.D., M.A. (United Kingdom)  
 Senior Policy Advisor, Department of Health  
 Project Title: *Hospital Ownership: What Difference Does It Make?*  
 Placement: Institute for Health Policy Studies, University of California, San Francisco  
 Mentors: Harold Luft, Ph.D., and Alain Enthoven, Ph.D.
- **Vikki Entwistle**, M.A., M.Sc., Ph.D. (United Kingdom)  
 Reader/Programme Director, Delivery of Care, Health Services Research Unit, University of Aberdeen  
 Project Title: *Patients' Roles in Patient Safety Initiatives: An Analysis of Current Practice and Exploration of Patients' Views*  
 Placement: Harvard School of Public Health  
 Mentor: Troyen Brennan, M.D., J.D., Ph.D.
- **Martin Hefford**, P.G.dip, M.A. (New Zealand)  
 General Manager of Planning & Funding, Hutt Valley District Health Board  
 Project Title: *Case Studies in Promoting Evidence Based Interventions in Primary Health Care*  
 Placement: Kaiser Institute of Health Policy  
 Mentors: Robert Crane, M.P.A., and Paul Wallace, M.D.
- **Tom Marshall**, M.B. Ch.B., M.Sc., MFPHM, MRCP (United Kingdom)  
 Lecturer in Public Health, Department of Public Health and Epidemiology, University of Birmingham  
 Project Title: *What Key Factors Contribute to Quality Improvement in Ambulatory Care of Cardiovascular Conditions?*  
 Placement: Brigham and Women's Hospital, Boston  
 Mentors: Thomas J. Lee, M.D., M.Sc., and David Bates, M.D., M.Sc.
- **Gareth Parry**, B.S., M.S., Ph.D. (United Kingdom)

Senior Research Fellow, University of Sheffield  
Project Title: *Patient Safety Interventions in Neonatal ICUs: Assessment of Collaborative Improvement Strategies*  
Placement: Harvard School of Public Health  
Mentors: Donald Goldmann, M.D., and Marie McCormick, M.D., Sc.D.

- **Elizabeth Roughead**, Ph.D. (Australia)  
Senior Lecturer, University of South Australia  
Project Title: *Evaluating Policies to Encourage Quality Use of Medicines in Australia and the U.S.*  
Placement: Harvard Medical School  
Mentor: Stephen Soumerai, Ph.D.
- **Alexandre Sirois** (Canada)  
Newspaper Reporter, *La Presse*  
Project Title: *The Roles of the Public and Private Sectors in the U.S. Health Care System: Lessons to Be Learned for Canada*
- **Jack Ven Tu**, M.D., Ph.D., FRCPC (Canada)  
Canada Research Chair in Health Services Research, Institute for Clinical Evaluative Sciences, University of Toronto  
Project Title: *International Variation in Rates of High-Tech Procedures*

### **Australian-American Health Policy Fellowship**

Announced by Jane Halton, secretary of the Australian Department for Health and Ageing, at the Fund's October 2002 International Symposium in Health Policy, a new health policy fellowship was launched by the Fund to enable two mid-career U.S. policy researchers or practitioners to spend up to 10 months in Australia conducting research and gaining an understanding of the Australian health policy context and issues relevant to the United States. Chaired by Andrew Bindman, M.D., the selection committee met in October 2003 and selected the first round of fellows. Administered in conjunction with The Commonwealth Fund and the Harkness Fellowships, the initiative opens further opportunities for cross-national health policy thinking and collaboration.

- **Kate Vanden Broek**, executive director of the Idaho State Planning Grant on the Uninsured at Saint Alphonsus Regional Medical Center
- **Joan Stieber**, senior policy analyst with the Office of Legislation/Medicare Part B Analysis Group at the Centers for Medicare and Medicaid Services

### **Partnerships with International Foundations**

The Commonwealth Fund continues to seek and nurture partnerships with international foundations in order to expand and enrich its current programs. In 2003, the Fund established a partnership with the Health Foundation<sup>8</sup> that will expand the Harkness Fellowships in Health Care Policy to include two additional fellows from the United Kingdom, bringing the total number of U.K. Harkness Fellows to seven. Geared toward health care practitioners, such as senior clinicians and managers in the health service, as well as senior civil servants involved directly in policy, the Harkness/Health Foundation Fellowships should help to enrich health policy development and leadership in the U.K.

In the fall of 2002, the Fund joined the Bertelsmann International Network for Health Policy and Reform<sup>9</sup> in forming a collaboration among 15 countries to share information on policy reforms, innovations, and best practices. Composed of independent experts from foundations and research institutions in Australia, Austria, Canada, Denmark, Finland, France, Germany, Japan, Netherlands, New Zealand, Singapore, Spain, Switzerland, the United Kingdom, and the United States, the network describes, analyzes, and reports on health sector reforms and trends in industrialized nations on a “real-time” basis. Reports are produced twice each year and disseminated to policymakers and, through the Internet, to a broader international policy audience. The second meeting of the collaboration was held in Vienna, Austria, in September 2003.

An ongoing collaboration with the Canadian Health Services Research Foundation<sup>10</sup> has enabled two Canadian Harkness Associates to participate in the fellowship program each year since 2001. In addition, the Fund continues to build on its partnership with the U.K.'s Nuffield Trust,<sup>11</sup> with which it has cosponsored the annual U.S.-U.K. Meeting on Health Care Quality since 1999.

#### **Ian Axford Fellows, 2003–04**

A further dimension of the international program is the Fund's administration of the Ian Axford (New Zealand) Fellowships in Public Policy. Established by the New Zealand government in conjunction with the private sector, the program provides opportunities for outstanding U.S. professionals working in a range of public policy areas—including health care, education, welfare reform, criminal justice, employment, race relations, the environment, science and technology, and tax policy—to take policy sabbaticals in New Zealand. Complementary to the Harkness Fellowships in Health Care Policy, the program strengthens a growing network of international exchange on health and social policy issues. The Ian Axford Fellowships selection committee, chaired by Robert D. Reischauer, president of the Urban Institute, met in January and selected the 2003 and 2004 fellows, who began their tenure in New Zealand in July 2003 and February 2004, respectively.

- **John Smith**, trial attorney with the Federal Programs Branch of the Civil Division in the U.S. Department of Justice
- **Daniel Pollak**, senior policy analyst in the Environment and Natural Resources Division at the California Research Bureau in Sacramento
- **Carlton Eley**, environmental protection specialist at the U.S. Environmental Protection Agency
- **Jennifer Gootman**, study director at the National Academy of Sciences in Washington, D.C.

- **Richard Newell**, fellow at Resources for the Future in Washington, D.C.
- **Jodie Levin-Epstein**, deputy director and senior policy analyst at the Center for Law and Social Policy (CLASP) in Washington, D.C.

### **Research Projects and Other Activities**

Building on the success of prior Australia-New Zealand Health Services Research Conferences, held in 1999 and 2001, the Fund cosponsored a third conference in Melbourne, Australia, in November 2003. Attended by 375 participants, the gathering was a valuable opportunity to promote the Harkness Fellowships in Health Care Policy and showcase the work of the Fund and its grantees.

Through its Small Grants Program, the Fund supports efforts to learn from other countries' innovations. Projects in 2003-04 included work by Harkness Canadian Associate Steven Morgan at the University of British Columbia to assess Canadian experiences with evidence-based purchasing of pharmaceuticals and the implications for Medicaid demonstration projects in the United States. A grant to Linda Aiken, Ph.D., of the University of Pennsylvania will support analysis of international nursing shortages and demand, trends in nurse migration among OECD member countries, and country policies to attract nurses and improve retention.

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- <sup>10</sup> [www.chsrf.ca/index.php](http://www.chsrf.ca/index.php)
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