

CATALAN HEALTH SERVICE PROVISION OF THE KIDNEY FAILURE CARE OUTPATIENT SERVICE 2022

Report 20/2024

PROVISION OF THE KIDNEY FAILURE CARE OUTPATIENT SERVICE

AUDIT DESIGN

- Reason
- Scope
- Audit planning and criteria
- Theory of change
- Audit objectives
- Incorporation of stakeholders

REPORT CONTENTS

- Conclusions
- Recommendations
- Subsequent events

COMMUNICATION

- Communicative elements
- Impact of the report in the press

ISSAI 100, Fundamental Principles of Public-Sector Auditing ISSAI 300, Fundamental Principles of Performance Auditing



AUDIT DESIGN: REASON

- Renal replacement therapy is for life, it has important consequences for the patient's quality of life and has a high cost.
- There are different systems for providing the service, with different agents involved, the election of which may result in differences in the cost and quality of the service.
- © CatSalut provides the outpatient dialysis service through **public procurement**. It is necessary for this procurement **to be subject to the general principles** of freedom of access to tenders, transparency, non-discrimination and equal treatment between bidders.



AUDIT DESIGN: SCOPE

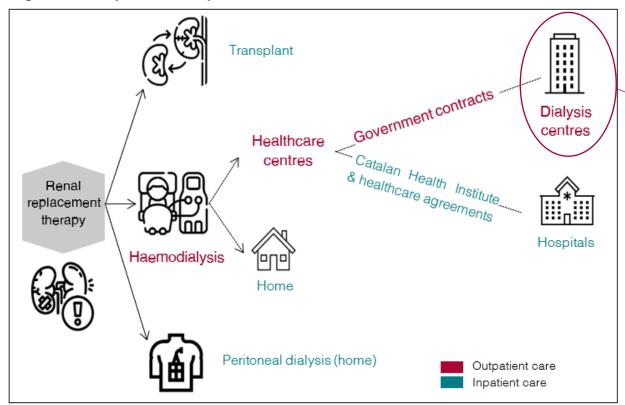
- Type of audit
 - Performance audit with an evaluative approach
- Scope of the audit
 - Audit the efficiency, efficacy and economy of the management carried out by the Catalan Health Service in the provision of the kidney failure care outpatient service
 - Some typical objectives of the evaluation of public policies and programmes have been incorporated: evaluation of the governance tools, internal and external coherence of the public intervention and the relevance and equity
- Subjective scope
 - Catalan Health Service
 - Temporal scope. The analysis of specific data corresponds to 2022, but other aspects have a broader scope



AUDIT DESIGN: SCOPE

Renal replacement therapy

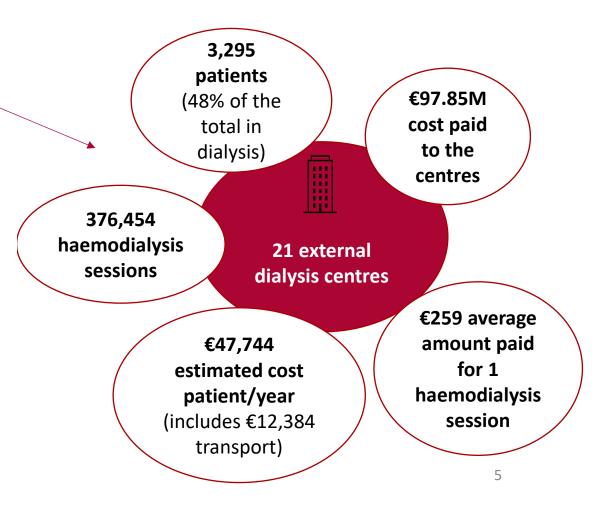
Figure 1. Renal replacement therapies



Source: Compiled by author.



External haemodialysis, 2022



- The audit objective is situated within the framework of public service management contracts formalised in 2014 and extended annually until 2022. The Catalan Health Service justified the need to outsource part of the haemodialysis service, which began to be carried out in authorised dialysis centres managed by contractors.
- The Sindicatura does not question nor has an opinion on the political decision to outsource part of the dialysis service, which has not been subject to audit.
- In 2014, CatSalut issued a call for tenders and awarded, through 2 negotiated procedures, the management of the outpatient haemodialysis service with an estimated contract value of €1,165.77M VAT free, for a maximum period of 10 years.
 - Formalisation of the services management contract of the outpatient activity: 1 April 2014
 - Duration: 1 year + 9 annual extensions (maximum 10 years)
 - End of the contract: 1 April 2024



AUDIT DESIGN: PLANNING

INTERNAL REORGANISATION STRATEGY

- Multidisciplinary teams
- Work procedures:
 Statistics/risk analysis,
 Memorandums, Matrixes,
 Executive summary
- Analysis of the characteristics of the **information** (availability, integrity, authenticity, confidentiality, traceability)
- Access to primary data

KEY ASPECTS

- Control environment: Cybersecurity and Information Systems
- Continuous review
- **Governance**: involvement of the stakeholders
- Audit criteria
- **Holistic** vision of the intervention

EXPECTATIONS

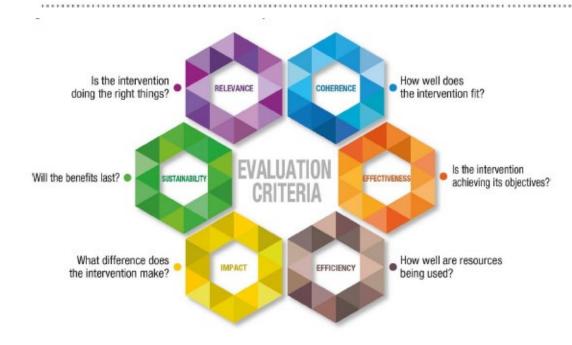
- Suitable and relevant methods: solid and reliable results
- **Results** of the public intervention
- Culture of learning and public responsibility
- **Improvement** in the management: optimisation of resources
- Dissemination and transparency
- Close, efficient and quality public care for citizens



AUDIT DESIGN: AUDIT CRITERIA

When undertaking an evaluation, all six criteria should be considered initially.

However, evaluations must carefully select which criteria to focus upon, dependent upon several factors including the objectives and limitations of the evaluation and the context of the intervention.



APPLYING EVALUATION CRITERIA THOUGHTFULLY © OECD 2021

- √ Standards/Principles
- ✓ Interdependence?
- ✓ Initial consideration
- ✓ Basis for evaluative judgements
- ✓ Purpose. Priorities. Scope.Context
- ✓ Useful and quality evaluation
- ✓ Standardisation, comparison and learning

EVALUATION QUESTIONS

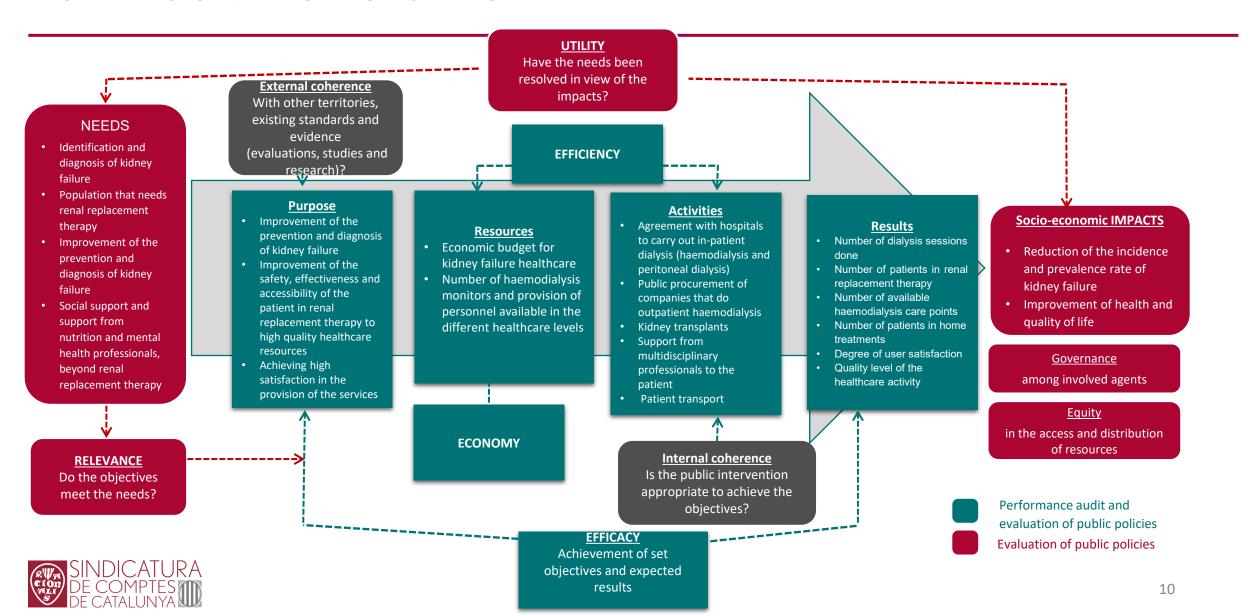


AUDIT DESIGN: PLANNING MATRIX

DI ANNUNO MATRIX OUESTION	<u></u>	
PLANNING MATRIX - QUESTION	5	
A I'M CHIRLEGE		
Audit SUBJECT	Provision of kidney failure care outpatient services by CatSalut, 2022	
Audit OBJECTIVE	Evaluate the efficiency, efficacy and economy in the ma	nagement by CatSalut of kidney failure care outpatient services
Question (b)	Subquestion (b)	Criteria (c)
1. Has the Government created a public	1.1 Has the Government designed the strategy around	> Government plan
healthcare policy that coherently meets	identified needs?	> Current Health Plan
the previously identified needs?		> Strategic Plan
		> RDL 3/2011 Consolidated Text of the Law on Public Sector Contracts, Law on Public Finances of Catalonia (chapter:
		Evaluation of Public Policies)
		> Relevance of the policy
	1.2 Do the legal framework and policies cover the needs of	
	groups identified as vulnerable with regard to the objective	> RDL 3/2011 Consolidated Text of the Law on Public Sector Contracts
	of kidney failure care outpatient services?	> Current Health Plan
		> SDG Agenda 2030
		> Specific administrative tender conditions - Annex 1
		> National and international experience (studies, audit reports of other external control bodies (OCEX), etc.)
		> Regulations that define the portfolio of services that includes the outpatient haemodialysis service
		> Regulations that define the portfolio of services that includes the home haemodialysis service
		> Strategic Plan
	1.3 Has the Government informed and involved the	
	stakeholders in the processes to plan, implement and	> Law on Transparency 19/2014 (groups of interest)
	supervise kidney failure care outpatient services?	> National/international experiences
	1.4 Is the current public health policy for the provision of	> Sustainable Development Goals - Agenda 2030:
	the service aligned with the Sustainable Development	3) Good health and well-being, 5) Gender equality, 8) Decent work and economic growth, 10) Reduced inequalities, 11
	Goals?	Sustainable cities and communities
		> National/international experiences
	ú 	- Hatteriae international experiences



AUDIT DESIGN: THEORY OF CHANGE



AUDIT DESIGN: AUDIT OBJECTIVES

OBJECTIVES

- Has the Government created a public healthcare policy for
- 1 kidney disease patients that meets the previously identified needs?
- Is the procurement of outpatient services suitable to meet health and social needs?
 - Have the most suitable provisions in quantity and quality
- 3 been acquired? and Has the coordination of healthcare resources been coherent and efficient?
- To what extent is there a control system that guarantees performance of the contract and quality of the service?

SCOPE

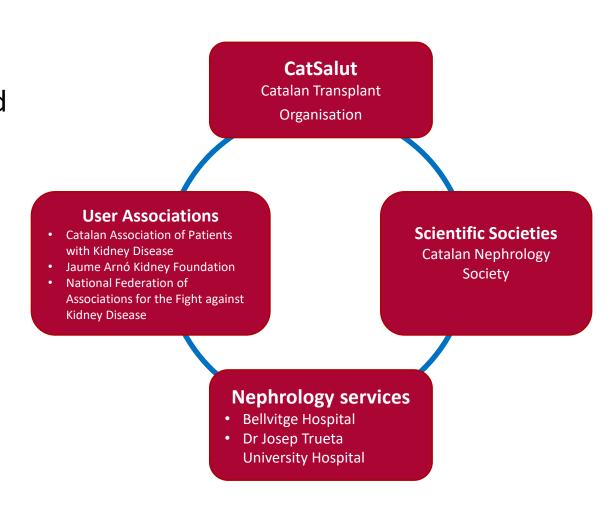
- **Planning and objectives**
- **Procurement of provision**

- Suitability of the provisions in quantity, quality and cost
- **Control system**



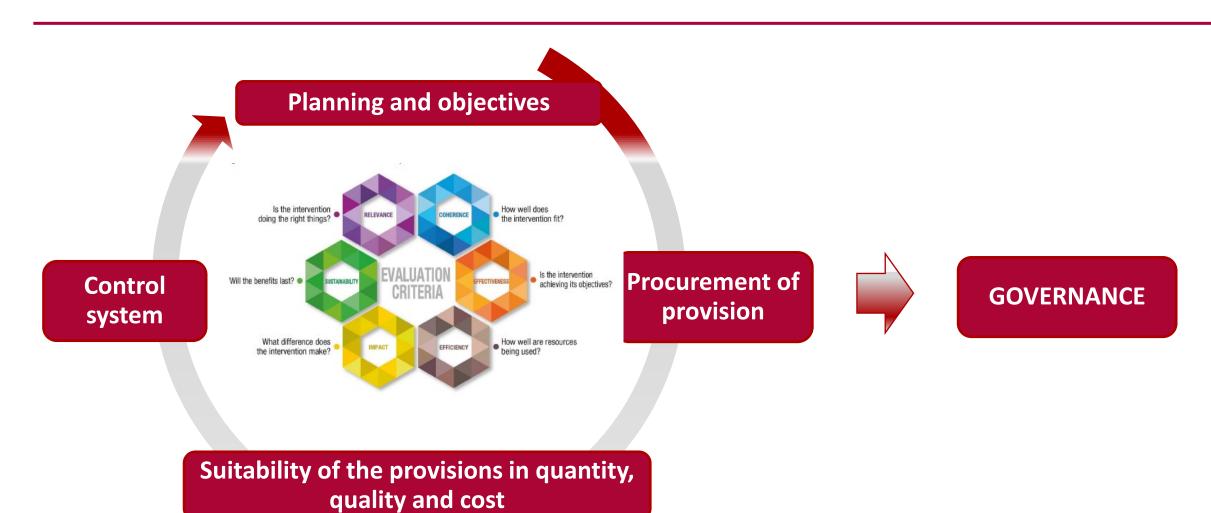
AUDIT DESIGN: INCORPORATION of STAKEHOLDERS

- ✓ The following has been combined to obtain the audit results: documentary, analytical, physical and testimonial evidence, the latter through interviews with stakeholders (technical and legal experts, audited entities and other stakeholders).
- ✓ In this report, the **preliminary conclusions** and **recommendations** have been verified and shared with the managers of the audited entity and with the stakeholders, before definitive approval of the report.





AUDIT DESIGN: HOLISTIC VISION





AUDIT DESIGN: AUDIT CRITERIA - RESULTS

Criterion	Result
RELEVANCE	 The current Strategic Plan is deemed obsolete. The volume of the contracted activity does not vary depending on the needs. In 10 centres, the billed amount exceeds that contracted.
EFFICACY	 The <i>objectives</i> set out in the Strategic Plan were not met. User <i>satisfaction</i> has not been evaluated. In particular, dissatisfaction with the medical transport. There are areas for improvement in the <i>identification</i>, <i>recording and prevention</i> of chronic kidney disease.
EFFICIENCY	 The report on needs for the procurement was not sufficiently justified and there are facts that could constitute evidence of collusive behaviour.
ECONOMY	 The cost of providing the service is not supported with cost studies that justify the tariffs. There is no robust billing validation system. There are potential duplications. Signing of the annual clauses that regulate the service provision should not be late.
COHERENCE (internal and external)	 The definition and functions of the healthcare levels that form the map of resources do not correspond with the distribution and real functioning of some centres. Although home techniques have been recommended by different organisms for years, peritoneal dialysis is being underused.
EQUITY SINDICATURA	 Patients' access to professionals (nutritionists, psychologists) depends on the centre where the patient is seen, or on their ability to search. A significant territorial variation and a clear socio-economic component has been observed in access to home treatments.

REPORT CONTENTS: RECOMMENDATIONS

For improvement of the efficiency, efficacy and economy of the management by the Catalan Health Service of the provision of the kidney failure care outpatient service.

- Planning of resources
- Patients in a situation of *social vulnerability* (definition of reference and identification)
- Participation of the stakeholders
- Procurement of the service (promoting competition)
- **Cost** of providing the service (estimate the cost of providing the different dialysis services and update tariffs to facilitate hospitals to offer home techniques)
- Human and technological resources
- **Quality** of the outpatient haemodialysis service
- Monitoring and *control* of the activity



REPORT CONTENTS: SUBSEQUENT EVENTS

2022

Subsequent events included in the report

For information: Not audited

01/04/2014 Start of contract

01/04/2024: Deadline (initial duration of the contract plus the extensions: 10 years)

01/04/2024 to 01/10/2024 Extension for continuity of the contracted service 01/10/24 to 31/12/24 Emergency contracting

01/01/25 to 31/12/25 maximum Emergency contracting

18/01/24 Publication of notice of future tender



13/01/25
Publication of the new tender

Filing of appeals before the TCCSP

REPORT CONTENTS: SUBSEQUENT EVENTS - NEW TENDER

Haemodialysis session price: 220.12 euros

Award procedure: open

Duration of the contract: 5 years

In-person availability of psychologists, nutritionists and physiotherapists

User satisfaction: indicator of quality in provision of the service

Medical transport: incidents and coordination

Service provision control: monitoring committees



COMMUNICATION – COMMUNICATIVE ELEMENTS

Informe 20/2024, Servei Català de la Salut:

El Govern ha planteiat una política pública d'atenció al

La contractació de la prestació del servei extrahospitalari ha estat adequada per donar resposta a les necessitats samánies is ociciás?

Shan adquint les prestacions en la quantitat i qualitat més adequades la coordinació dels recursos assistencials ha estat coherent i eficaç?

En quina mesura existeix un sistema de control que granteix il accomplement del control que granteix il acquintat del control que gra

Quines són les dades i xifres clau

El tractament substitutiu renal pot ser la diàlisi o el trasplantament de ronyó.
 A Catalunya la diàlisi es presta en hospitals i extrahospitalàriament, en centres de diàlisi
 Els hospitals també poden oferi diàlisi gentrònea al domicili del pacient.

nalalt renal que respon a unes necessitats préviament

prestació del servei extrahospitalari de l'atenció a

Anàlisi quantitativa de les dades

 Análisi qualitativa: revisió documental, entrevistes ami següents parts interessades



Infograph



- Report and 2-minute report
- Press release













Video and presentation in Parliament



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COMMUNICATION - IMPACT IN THE PRESS



POLÍTICA Y NORMATIVA I Informe

Sanidad pública en Catalun La Sindicatura

Laborales

La Sindicatura de Comptes carrega contra el desgavell del servei públic de diàlisi

Contundent informe sobre els costos i l'eficàcia del servei

La Sindicatura de Cuentas ve infrautilizada la diálisis domiciliada en la exter Metges de servicio del CatSalut

En 2022 el CatSalut pagó 98 millones de euros extrahospitalario, para 3.295 pacientes, con un euros anuales por paciente.

Catalunya

Estatuarios y funcionarios

La Sindicatura de Cuentas de Cataluña al CatSalut: problemas de gobernanza

Imagen de archivo de un paciente de diálisis

BUSINESS

Un megacontrato de 400 millones desata una batalla por el servicio catalán de diálisis

control

liderazgo "escaso" en la promoción de los tratamientos domiciliarios

La Sindicatura de Co problemes en la plan servei de diàlisi cont CatSalut

La Sindicatur "irregularida concertado d

auditoría operativa

POR ANTONIO ARIAS RODRIGUEZ / EN AUDITORÍA, SANIDAD



Los informes de auditoría operativa son complejos por naturaleza. Decíamos hace 13 años -en Cataluña precisamente- que frente a los métodos "estándar" de la auditoría de cumplimiento, cada

auditoría operativa es distinta e incorpora una mayor libertad de criterio para el auditor. El reto del folio en blanco que nos recordaba Eduardo Ruiz en el fantástico CCIL'21. Por cierto, que el CCIL'25 ya está asignado a Córdoba (16 y 17 de octubre de 2025) y promete ser una de las grandes reuniones del año.

Hoy traemos a la comunidad fiscalizadora el informe 20/2024 de la Sindicatura de Cuentas de Cataluña, relativo al Servicio Catalán de la Salud: prestación del servicio extrahospitalario para la atención a la insuficiencia renal, ejercicio 2022.

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Cuentas ve infrautilizada la a en la externalización del lut

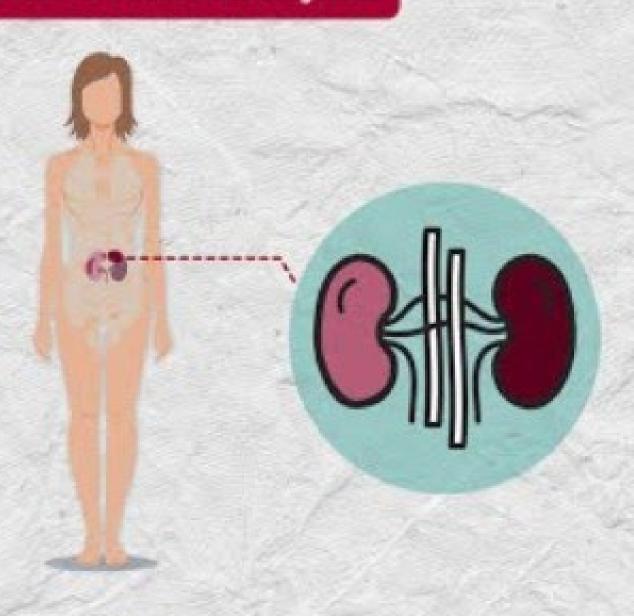
millones de euros por el servicio de diálisis pacientes, con un coste estimado de 48.000 ctan a la planificación encia de la ernalización.

enfermedad renal acceso vascular de al v el control v os descritos en ahospitalario de cacia y eficiencia".

Insuficiència renal crònica avançada

Tractament de per vida

Alt impacte en la qualitat de vida





www.sindicatura.cat