### Project funded in 2003 - Strand 1: Health Information

**Ben RHM II - Benchmarking Regional Health Management (Phase 2)**

<table>
<thead>
<tr>
<th>Description</th>
<th>Financing</th>
<th>Outcomes</th>
<th>More info</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Description</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Action</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Improving information and knowledge for the development of public health</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Area of activity</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&quot;Benchmarking Regional Health Management 2&quot; to identify best practice and support co-operation between member states</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Summary</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The project aims to achieve more transparency amongst the different regional health systems in Europe as well as to offer a platform on which regions can learn from each other using the variations of regional health care regulations and activities to improve health governance and public health.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Regions which took part in the first part of the Benchmarking project will form the core project group and will work together with an institute experienced in benchmarking and health policy (systems) research.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>More info...</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description</th>
<th>Financing</th>
<th>Outcomes</th>
<th>More info</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Financing</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Leader organisation</strong></td>
<td>Contact Person</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ministerium für Arbeit, Gesundheit und Soziales des Landes Nordrhein-Westfalen</td>
<td>Dr. Gertrud Bureick</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fürstenwall 25</td>
<td>Institute of Public Health NRW</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D - 40219 Düsseldorf</td>
<td>Westerfeldstraße 35-37</td>
<td></td>
<td></td>
</tr>
<tr>
<td>GERMANY</td>
<td>D - 33611 Bielefeld</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tel: +49.211.8553556</td>
<td>GERMANY</td>
<td>Tel: +49.521.8007250</td>
<td></td>
</tr>
<tr>
<td>Fax: +49.211.8553239</td>
<td>Fax: +49.521.8007297</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Web site: <a href="http://www.mgsff.nrw.de">www.mgsff.nrw.de</a></td>
<td>Email: <a href="mailto:gertrud.bureick@loegd.nrw.de">gertrud.bureick@loegd.nrw.de</a></td>
<td>Web site: <a href="http://www.ben-rhm.nrw.de">www.ben-rhm.nrw.de</a></td>
<td></td>
</tr>
<tr>
<td><strong>Associated beneficiaries</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• World Health Organization – Regional Office for Europe, Denmark</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Institute of Public Health North Rhine –Westphalia, Germany</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• University of Linz, Department of Health System research, Austria</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Health Boards Executive, Dublin Office, Ireland</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• University of Patras, Research Committee, Greece</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• University of Brighton, Faculty of Health, United Kingdom</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• National Institute of Health, Czech Republic</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Starting date and duration of project</strong></td>
<td><strong>Total cost</strong></td>
<td><strong>Subsidy from the Commission</strong></td>
<td></td>
</tr>
<tr>
<td>- 01/06/2004</td>
<td>1.066.027,00 €</td>
<td>639.616,00 €</td>
<td></td>
</tr>
<tr>
<td>- 39 months</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Outcomes</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The development of a set of performance indicators will not only be used to analyse governance and processes within the regional health systems, their policies and structures, but could also be utilised for health policy research on national and European level. The collection of data regarding the epidemiology of measles, breast cancer and diabetes in relation to programme performance and effectiveness of implementation will support other EU-projects dealing with indicators and data collection and give an input to</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Putting the different regions into clusters enables them to learn from regions similar to their own in structure and development. The project will also help to identify key contact persons or organisations and their responsibilities for various aspects of the health systems at different levels. A European Regional Network on health governance of prevention and health programs will be set up. The results will be made available to Member States and other EU projects and services following approval by appropriate Commission's services.

- **Interim Report**, July 2005 (377 KB)
- **Final Report**, September 2007 (377 KB)

Annexes of the final report:

- **Annex 1**: steering group and members from the regions for health network (rhn) (13KB)
- **Annex 2**: key-contacts (85KB)
- **Annex 3**: Minutes of the first BEN II-steering group meeting, Düsseldorf, 13 September 2004 (85KB)
- **Annex 4**: Minutes of the second BEN II-steering group meeting, Prague, 22 April 2005 (85KB)
- **Annex 5**: Minutes of the third BEN II-steering group meeting, Linz, 14 October 2004 (85KB)
- **Annex 6**: Minutes of the fourth BEN II-steering group meeting, Dublin, 19 May 2006 (85KB)
- **Annex 7**: Minutes of the fifth BEN II-steering group meeting, Copenhagen, 2 October 2006 (85KB)
- **Annex 8**: Minutes of the fifth BEN II-steering group meeting, Copenhagen, 18 May 2007 (85KB)
- **Annex 9**: Measles immunisation - Leading questions for indepth interviews (85KB)
- **Annex 10**: Breast cancer - Leading questions for indepth interviews (85KB)
- **Annex 11**: Diabetes type 2 - Leading questions for indepth interviews (85KB)
- **Annex 12**: Viewpoint Section Reference Frameworks for the Health Management of Measles, Breast Cancer and Diabetes (type II) (85KB)
- **Annex 13**: Health Performance Indicators (85KB)
- **Annex 14**: Flyer (85KB)
- **Annex 15**: Feedback Questionnaire "Ben II" (85KB)

**Statement of project aim(s) and objectives**

The project aims to encourage openness and co-operation at regional level amongst European countries and at the same time provide an opportunity for the regions to learn from each other. Focus will be on the structure and organisation of the regional health management systems: the different decision making levels and bodies, their respective responsibilities, the extent to which they can influence policy making, the degree of autonomy they possess, the co-ordination of events within the regional health system as well as the processes involved in the implementation of health programmes. Organigraphs depicting the relationship of the different decision making bodies/levels to each other as well as the flow of actions within the health management system will be constructed for each region participating in the project. Three tracers, measles immunisation programmes, breast cancer and diabetes screening and care programmes will be used to demonstrate the mechanism and functioning of each system. Using the concept of benchmarking, a gold-standard will be constructed to identify good practice models for different modules such as programme co-ordination or promotion campaigns. Relevant data will also be collected, thereby giving an insight into the operation of existing surveillance systems and their quality.

As the politico-cultural and epidemiological development of regions in the European countries differ, it is the aim of this project to involve many European countries such that they can be grouped according to their backgrounds and developmental stage. Good practice models will thus be identified for each group enabling regions to implement changes according to procedures most similar to theirs. Building on the work of other EU projects such as ECHI and ISARE, the results will help Regions and the Member States and Applicant Countries to improve the potentials of performance based governance.

**Methods**

Three tracers (measles, breast cancer and diabetes) have been chosen to look at the following aspects of the regional health systems: prevention, screening, and health care services. Based on current scientific literature and research results, structured instruments will be developed and used to collect information on the organisation and governance of processes in the different regional health care and prevention programmes. The collected information will be used to construct diagrammatic illustrations (organigraphs) showing not only the organisational structure, but also the flow of action in the health programmes. Visits to the regions including in-depth interviews with persons at strategic points in the health systems will be used to substantiate and check the reality of the processes described in the organigraphs. To be able to get an idea of the effectiveness of the governance of the processes, detailed epidemiological data will be collected from the regions using existing surveillance systems.

A reference framework for the analysis of management procedures will be developed. This will include different stages of intervention, e.g. early or late intervention, action levels aimed at e.g. from individual settings to social systems, financial sustainability and quality assurance.

The construction of gold-standards for health strategies and policies will allow identification of good practice modules within the regional health systems. To enable the building of clusters of different regions according to their political and socio-demographic backgrounds as well as their epidemiological development, as many European regions as possible will be involved.