

to evaluate childcare, including the adoption of PREMs and PROMs. The results were analysed and classified according to the Donabedian framework of structure, process and outcomes. Additionally, the classification also considers measures related to health-related behaviour and socio-economic, cultural, and environmental determinants of health, that map the MOCHA conceptual model.

Results

The majority of EU/EEA countries have national and/or regional agencies responsible for the evaluation of the quality of care that includes in their assessment specific items related to childcare. The analysis confirms that the majority of indicators used across countries concerns process measures. Results of the quanti-qualitative country distribution of indicators will be presented as well as an analysis of the use of PROMs and PREMs adopted within the evaluation of childcare.

Conclusions

The analysis of quality measurements devoted to childcare allows us to map and gain a better insight into the core indicators most frequently used across countries, identifying best practices as well as gaps in national evaluation of the delivery of health services.

How do European countries assess childcare? A comparison of 30 EU and EEA countries in the MOCHA project

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Background

The assessment of childcare has to rely on a multidimensional perspective to capture all the components that influence child wellbeing, enriching the Donabedian framework with measurements pertaining socio-economic, cultural and environmental aspects. Moreover, the introduction of patient-centred evaluations based on standardised validated instruments, such as Patient Reported Outcome Measures (PROMs) and Patient Reported Experience Measures (PREMs) provides new ways of assessing quality of care.

Methods

A questionnaire was developed and submitted to the MOCHA country agents to gather information on agencies performing assessment of quality of care as well as on the indicators used