EPOC Taxonomy – topics list

Delivery Arrangements

Changes in how, when and where healthcare is organized and delivered, and who delivers healthcare.

Category:

How and when care is delivered

Subcategory	Definition	Notes
Group versus individual care	Comparisons of providing care to groups versus individual patients, for example intensive group therapy, group vs individual antenatal care.	
Queuing strategies	A reduction or increase in time to access a healthcare intervention, for example managed waiting lists, managing ER wait time.	
Coordination of care amongst different provider	Organizing different providers and services to ensure timely and efficient delivery of healthcare.	See Category 'Coordination of care and management of care processes' page 2
Quality and safety systems	Essential standards for quality of healthcare, and reduction of poor outcomes related to unsafe healthcare.	
Triage	Management of patients attending a healthcare facility, or contacting a healthcare professional by phone, and receiving advice or being referral to an appropriate service	

Category:

Where care is provided and changes to the healthcare environment

Subcategory	Definition	Notes
Environment	Changes to the physical or sensory healthcare environment, by adding or altering equipment or layout, providing music, art.	
Outreach services	Visits by health workers to different locations, for example involving specialists, generalists, mobile units	
Site of service delivery	Changes in where care is provided, for example home vs. healthcare facility, inpatient vs outpatient, specialized vs. non-specialized facility, walk in clinics, medical day hospital, mobile units	

Size of organizations	Increasing or decreasing the size of health service provider units	
Transportation services	Arrangements for transporting patients from one site to another	

Who provides care and how the healthcare workforce is managed

Changes in who provides care, to include the qualifications of who provides care; and the recruitment, distribution and retention of health workers

Definition	Notes
Expanding tasks undertaken by a cadre of health workers or shifting tasks from one cadre to another, to include tasks not previously part of their scope of practice.	This may include substituting one cadre of healthcare work for another.
Shifting or promoting the responsibility for healthcare or disease management to the patient and/or their family.	
Changes in the length of consultations	
Interventions to achieve an appropriate level and mix of staff, recruitment and retention of staff, and transitioning of healthcare workers from one environment to another, for example interventions to increase the proportion of healthcare workers in underserved areas.	
A verbal exchange or written questionnaire between employees' resignation and last working day	
Strategies for managing the movement of health workers between public and private organizations	
Changes in pre-licensure education of health professionals	
Strategies for recruiting and retaining health workers in underserved areas	
Interventions for hiring, retaining and training district health systems managers in LMIC	
	Expanding tasks undertaken by a cadre of health workers or shifting tasks from one cadre to another, to include tasks not previously part of their scope of practice. Shifting or promoting the responsibility for healthcare or disease management to the patient and/or their family. Changes in the length of consultations Interventions to achieve an appropriate level and mix of staff, recruitment and retention of staff, and transitioning of healthcare workers from one environment to another, for example interventions to increase the proportion of healthcare workers in underserved areas. A verbal exchange or written questionnaire between employees' resignation and last working day Strategies for managing the movement of health workers between public and private organizations Changes in pre-licensure education of health professionals Strategies for recruiting and retaining health workers in underserved areas

Category:

Coordination of care and management of care processes

Changes in how health workers interact with each other or patients to ensure timely and efficient delivery of healthcare.

Subcategory	Definition	Notes
Care pathways	Aim to link evidence to practice for specific health conditions and local arrangements for delivering care.	
Case management	Introduction, modification or removal of strategies to improve the coordination and continuity of delivery of services i.e. improving the management of one "case" (patient)	
Communication between providers	Systems or strategies for improving the communication between health care providers, for example systems to improve immunization coverage in LMIC	
Comprehensive geriatric assessment	A multidimensional interdisciplinary diagnostic process focused on determining a frail older person's medical, psychological and functional capability to ensure that problems are identified, quantified and managed appropriately	
Continuity of care	Interventions to reduce fragmented care and undesirable consequences of fragmented care, for example by ensuring the responsibility of care is passed from one facility to another so the patient perceives their needs and circumstances are known to the provider.	
Discharge planning	An individualized plan of discharge to facilitate the transfer of a patient from hospital to a post-discharge setting.	
Disease management	Programs designed to manage or prevent a chronic condition using a systematic approach to care and potentially employing multiple ways of influencing patients, providers or the process of care	
Integration	Consolidating the provision of different healthcare services to one (or simply fewer) facilities.	
Packages of care	Introduction, modification, or removal of packages of services designed to be implemented together for a particular diagnosis/disease, e.g. tuberculosis management guidelines, newborn care protocols.	
Patient-initiated appointment systems	Systems that enable patients to make urgent appointments when they feel they cannot manage their condition or where something has changed unexpectedly	
Procurement and distribution of supplies	Systems for procuring and distributing drugs or other supplies	
Referral systems	Systems for managing referrals of patients between health care providers	

Suggested citation: Effective Practice and Organisation of Care (EPOC). EPOC Taxonomy; 2015. Available at: https://epoc.cochrane.org/epoc-taxonomy

Shared care	Continuing collaborative clinical care between primary and specialist care physicians	
Shared decision-making	Sharing healthcare decision making responsibilities among different individuals, potentially including the patient.	
Teams	Creating and delivering care through a multidisciplinary team of healthcare workers.	
Transition of Care	Interventions to improve transition from one care provider to another, for example adolescents moving from child to adult health services.	

Category:

Information and communication technology (ICT)

ICT used by healthcare organizations to manage the delivery of healthcare, and to deliver healthcare

Subcategory	Definition	Notes
Health information systems	Health record and health management systems to store and manage patient health information, for example electronic patient records, or systems for recalling patients for follow-up or prevention e.g., immunization.	
The use of information and communication technology	Technology based methods to transfer healthcare information and support the delivery of care.	
Smart home technologies	Electronic assistive technologies	
Telemedicine	Exchange of healthcare information from one site to another via electronic communication	

Financial Arrangements

Changes in how funds are collected, insurance schemes, how services are purchased, and the use of targeted financial incentives or disincentives

Category:

Collection of funds

Mechanisms by which financial resources to pay for health care are obtained

Subcategory	Definition	Notes
User fees or out of pocket	Charges levied on any aspect of health services at the	
payments	point of delivery	

Caps and co-payments for drugs of health services	Direct patient payments for part of the cost of drugs or health services	
Prepaid funding	Collection of funds through general tax revenues versus earmarked tax revenues versus employer payments versus direct payments	
Community loan funds	Funds generated from contributions of community members that families can borrow to pay for emergency transportation and hospital costs	
Health savings accounts	Prepayment schemes for individuals or families without risk pooling	
External funding	Financial contributions such as donations, loans, etc. from public or private entities from outside the national or local health financing system	

Insurance schemes

Risk pooling to cover all or part of the costs of health care services

Subcategory	Definition	Notes
Social health insurance	Compulsory insurance that aims to provide universal coverage	
Community based health insurance	A scheme managed and operated by an organization, other than a government or private for-profit company, that provides risk pooling to cover all or part of the costs of health care services	
Private health insurance	Private for-profit health insurance	

Category:

Mechanisms for the payment of health services

NB Pay for Performance mentioned in more than one category

Subcategory	Definition	Notes
Method of paying healthcare organisations	Global budgets, employer based insurance schemes, line- item budgets; case-based reimbursement; pay for performance; mixed payment	
Payment methods for health workers	Fee for services, capitation, salary	
Contracting out health services	Contracting is a strategy to use public sector funds to finance the provision of healthcare services.	
Voucher schemes	Provision of vouchers that can be redeemed for health	

	services at specified facilities	
Conditional cash transfers	Monetary transfers to households on the condition that they comply with pre-defined requirements for healthcare	
Pricing and purchasing policies	Policies that determine the price that is paid or how commercial products are purchased, for example health technologies, drugs.	

Targeted financial incentives for health professionals and healthcare organisations.

NB Pay for Performance is mentioned in more than one category

Subcategory	Definition	Notes
Pay for performance – target payments	Transfer of money or material goods to healthcare providers conditional on taking a measurable action or achieving a predetermined performance target, for example incentives for lay health workers.	
Fund holding	Budgets allocated to a group or individual providers to purchase services with financial rewards for underspending or penalties for overspending (includes indicative budgets)	
Incentives for career choices	Financial or material rewards for career choices; e.g. choice of profession or primary care	

Governance Arrangements

Rules or processes that affect the way in which powers are exercised, particularly with regard to authority, accountability, openness, participation, and coherence

Category:

Authority and accountability for health policies

Subcategory	Definition	Notes
Decentralisation and centralisation	Decentralised versus centralised authority for health services. For example government regulation of health insurance; regional vs. national management of health budgets on efficiency and effectiveness of healthcare.	
Stakeholder involvement in policy decisions	Policies and procedures for involving stakeholders in decision-making	
Community mobilization	Processes that enable people to organize themselves	

Patients' rights	Policies that regulate patients' rights, including access to care and information (includes regulation of information provided to patients)	
Stewardship of private health services	Policies that regulate health services provided by the private sector	
Decision-making about what or who is covered	Processes for deciding what is reimbursed and who is covered by health insurance Policies that regulate what drugs are reimbursed Policies that regulate what services are reimbursed Restrictions on reimbursement for health insurance Strategies for expanding health insurance coverage	
Policies to reduce corruption	Regulations that are intended to reduce corruption in the health sector	
Policies to manage absenteeism	Regulations for managing absenteeism	

Authority and accountability for organisations

Subcategory	Definition	Notes
Ownership	Policies that regulate who can own health service organizations, for example for-profit vs not-for-profit; public vs private	
Insurance	Policies that regulate the provision of insurance, for example insurance coverage of essential drugs	
Accreditation	Processes for accrediting healthcare providers	
Multi-institutional arrangements	 Policies for how multiple organizations work together Policies that regulate interactions between donors and governments Social Franchising Governance arrangements for coordinating care across multiple providers Mergers Collaborations between local health and local government agencies for health improvement 	
Liability of healthcare organisations	Policies that limit liability of healthcare organisations, for example risk management.	
Category:		

	Authority and accountability for commercial products		
Subcategory	Definition	Notes	
Registration	Procedures for registering or licensing commercial products, for example medical devices, drugs.		
Patents and profits	Policies that regulate patents and profits, for example medical devices, drugs.		
Marketing regulations	Policies that regulate marketing of commercial products, for example medical devices, drugs, the private provision of healthcare.		
Sales and dispensing	Policies that regulate sales and dispensing of commercial products, for example over the counter and prescription drugs.		
Liability for commercial products	Policies that regulate liability for commercial products		
Authority and accountability for h	ealth professionals		
Authority and accountability for h	ealth professionals Definition	Notes	
Subcategory	Definition Policies that regulate training, specialty certification and licensure	Notes	
Subcategory	Definition Policies that regulate training, specialty	Notes	
Subcategory Training and licensing	Policies that regulate training, specialty certification and licensure requirements for health professionals Selection of a drug, by a suitably qualified healthcare worker, to treat a	Notes	
Subcategory Training and licensing Prescribing	Policies that regulate training, specialty certification and licensure requirements for health professionals Selection of a drug, by a suitably qualified healthcare worker, to treat a patient's health condition. Policies that regulate what health	Notes	

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Authority and accountability for quality of practice	Policies that regulate authority and accountability for the quality of care or safety, for example implementation of clinical guidelines.	
Professional competence	Policies or procedures for assuring professional competence	
Professional liability	Policies that regulate liability for health professionals	

Implementation Strategies

Interventions designed to bring about changes in healthcare organizations, the behaviour of healthcare professionals or the use of health services by healthcare recipients

Category:

Interventions targeted at healthcare organisations

Subcategory	Definition	Notes
Organisational culture	Strategies to change organisational culture	

Category:

Interventions targeted at healthcare workers

Subcategory	Definition	Notes
Audit and feedback	A summary of health workers' performance over a specified period of time, given to them in a written,	

	electronic or verbal format. The summary may include recommendations for clinical action.	
Clinical incident reporting	System for reporting critical incidents,	
Monitoring the performance of the delivery of healthcare	Monitoring of health services by individuals or healthcare organisations, for example by comparing with an external standard.	
Communities of practice	Groups of people with a common interest who deepen their knowledge and expertise in this area by interacting on an ongoing basis	
Continuous quality improvement	An iterative process to review and improve care that includes involvement of healthcare teams, analysis of a process or system, a structured process improvement method or problem solving approach, and use of data analysis to assess changes	
Educational games	The use of games as an educational strategy to improve standards of care.	
Educational materials	Distribution to individuals, or groups, of educational materials to support clinical care, i.e., any intervention in which knowledge is distributed. For example this may be facilitated by the internet, learning critical appraisal skills; skills for electronic retrieval of information, diagnostic formulation; question formulation	
Educational meetings	Courses, workshops, conferences or other educational meetings	
Educational outreach visits, or academic detailing.	Personal visits by a trained person to health workers in their own settings, to provide information with the aim of changing practice.	
Clinical Practice Guidelines	Clinical guidelines are systematically developed statements to assist healthcare providers and patients to decide on appropriate health care for specific clinical circumstances' (US IOM).	
Inter-professional education	Continuing education for health professionals that involves more than one profession in joint, interactive learning	
Local consensus processes	Formal or informal local consensus processes, for example agreeing a clinical protocol to manage a patient group, adapting a guideline for a local health system or promoting the implementation of guidelines.	

Local opinion leaders	The identification and use of identifiable local opinion leaders to promote good clinical practice.	
Managerial supervision	Routine supervision visits by health staff.	
Patient-mediated interventions	The use of patients, for example by providing patient outcomes, to change professional practice	
Public release of performance data	Informing the public about healthcare providers by the release of performance data in written or electronic form.	
Reminders	Manual or computerised interventions that prompt health workers to perform an action during a consultation with a patient, for example computer decision support systems.	
Routine patient-reported outcome measures	Routine administration and reporting of patient- reported outcome measures to providers and/or patients	
Tailored interventions	Interventions to change practice that are selected based on an assessment of barriers to change, for example through interviews or surveys.	
Category: Interventions targeted at sp	ecific types of practice, conditions or settings	
Health conditions	Acute strokeAcute surgeryAlcohol	
 Practice and setting 	Health promotion in dental settings	