Open comparisons of health care performance

OECD Workshop on Health Data Governance
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NBHW
National Board of Health and Welfare

Ensure good health, social welfare and care on equal terms

- Activities within social services, health and medicine
- Main focus on decision-makers and staff
- Support and influence in several ways:
  - Performs follow-ups, evaluations and regional comparisons
  - Develop regulations and national guidelines
  - Issues licenses
  - Manage national registers
Good health care and social services
Public Reporting – why?

• Since most of the health care in Sweden is decentralized and publically financed we need to find ways to continuously evaluate the quality in the health care system.

• Report on the achievement of the counties and hospitals in terms of quality and efficiency, for increased transparence.

• To encourage providers and managements to improve their performance.

• To stimulate public debate on good quality of care on national, regional and local level.
Access to data
Health Data Registers and Health Care Quality Registers
Health Data Registers at NBHW

• National Patient Register (1987)
• Prescribed Drug Register (2005)
• Cancer Register (1958)
• Medical Birth Register (1973)
• Dental Health Register (2008)

Another important register is:
• Cause of Death Register (1951)
Health Care Quality Registers

108 registers are nationally funded and managed by professional groups. More than 80 registers collect data.

- **Cardiovascular diseases** (Cardio Intensive Care, Stroke, Heart failure, PCI, Heart surgery)
- **Children** (Perinatal, Childhood obesity)
- **Diabetes**
- **Musculoskeletal** (Hip fracture, Knee arthroplasty, Hip arthroplasty, Rheumatoid arthritis)
- **Cancer**, 21 registers and specific sites
- **Psychiatric diseases** (Bipolar, Psychosis, Eating disorders, ADHD)
Indicator based Comparisons of Health Care Performance
Public reporting in Sweden – Performance Assessments and Regional Comparisons

Performance Assessments
Compliance to important recommendations in the National Guidelines.

Regional Comparisons
Health Care, Cancer, Prescribed Drugs, Equal care.
Public reporting in Sweden – Performance Assessments and Regional Comparisons

Performance Assessments
Evaluate the county councils compliance to guidelines
Give recommendations for future development
Uses target levels where it is possible

Regional Comparisons
Descriptive approach – not judging.
Broad annual reporting of more than 200 process and outcome indicators

A common model and indicator library
More than 1000 indicators for the health care and social sector.
Uses more than 50 national data sources.
### National guidelines and evaluations

<table>
<thead>
<tr>
<th>Diagnostic area</th>
<th>Guidelines</th>
<th>Evaluation</th>
<th>Target Levels</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asthma and COPD-Care</td>
<td>2015</td>
<td>2015</td>
<td>2015</td>
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<tr>
<td>Breast, Colorectal and Prostate Cancer Care</td>
<td>2013</td>
<td>2013</td>
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<tr>
<td>Depression and Anxiety Disorders</td>
<td>2010/2016</td>
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<td>Dementia Care</td>
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<td>Abuse and Dependency</td>
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<td>Parkinson and MS</td>
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<td>Schizophrenia Care</td>
<td>2011/2015</td>
<td>2013/2017</td>
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<td>Musculoskeletal Diseases</td>
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<tr>
<td>Methods of Preventing Disease</td>
<td>2012</td>
<td>2015</td>
<td>-</td>
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<tr>
<td>Adult Dental Care</td>
<td>2011</td>
<td>2013</td>
<td>-</td>
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</tbody>
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**Approximately 2 800 recommendations**
How we use target levels in our evaluations
Anti-coagulants among patients with atrial fibrillation

Treatment with anti-coagulants for patients with AF has the highest priority in the National Guidelines for Cardiac Care. The County Councils should increase their efforts in identifying and treating patients with AF in order to reduce stroke and other cardio-vascular diseases.
Patients with acute stroke directly admitted to a stroke unit 2009-2013


Källa: Riksstroke.
Patients with acute stroke admitted to a stroke unit 2012 and 2013

<table>
<thead>
<tr>
<th>Region</th>
<th>2013</th>
<th>2012</th>
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<tr>
<td>Östergötland</td>
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<td>Västerbotten</td>
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<tr>
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<td>Dalarna</td>
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<td>Gävleborg</td>
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<td>Jönköping</td>
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<td>Kalmar</td>
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<td>Västra Götaland</td>
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<td>Skåne</td>
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<tr>
<td>Uppsala</td>
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<td>Västmanland</td>
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<td>Blekinge</td>
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<tr>
<td>Örebro</td>
<td>34.2</td>
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</tbody>
</table>

Källa: Riksstroke.
Patients with acute stroke admitted to a stroke unit 2013

Target 90%

23,000 patients at 71 hospitals. Data source: The Health Care Quality Register RiksStroke
Has the work had any impact?

- Yes, most of the measured indicators have improved over time!
- The professionals want to be a part of the reporting, a change of thinking – has improved transparency in Swedish health care.
- Focus on quality - Quality issues are more discussed and debated on all political levels and in the media.
- All counties have a local organization for working with regional comparisons and how to use the results.
- Focus on guidelines, evidence based medicine, equity and improvement work.
Success factors

• Regional comparisons are published in cooperation with regional authorities

• National guidelines and the evaluations are carried out in cooperation with the professionals

• Access to high-quality data

• Linkages between data sources are possible

• Analysis may be done at the authority which is both the main data custodian and the authority responsible for the follow-up of the health care quality
Thank you!

For more information: www.socialstyrelsen.se
Content of guidelines

- Recommendations developed from evidence-based reviews of medicine and health economics.

- Each recommendation has been prioritized (rank order 1-10) depending on its medical effect and cost efficiency.

- Interventions that should not be part of routine health care.

- Indicators (and target levels).
Evaluation of Compliance to National Guidelines

• Evaluate the county councils and municipalities compliance to the most important recommendations in the National Guidelines.

• Visualise differences in structures, processes, results between regional health authorities, hospitals and municipalities.

• Visualise the costs of the healthcare and social services' systems, and their efficiency.

• Give recommendations for future development.
Healthcare related avoidable deaths

Diagram 3 – Total: Hospital-related deaths – deaths per 100,000 inhabitants 1–79 years, 2009–2012. Age-standardized values.

Källa: Dödsorsaksregistret, Socialstyrelsen.
4. Åtgärdbar dödlighet i ischemisk hjärtsjukdom - dödsfall per 100 000 invånare 1-79 år. Åldersstandardiserade värden.

Källa: Dödsorsaksregistret, Socialstyrelsen

5. Antal självmord och dödsfall med oklart uppsätt per 100 000 invånare. Åldersstandardiserade värden.

Källa: Dödsorsaksregistret, Socialstyrelsen
Are the indicators and targets used in the Health Care?

"In the county Skåne we are now very close to reach the target that 80 percent of the patients with atrial fibrillation and risk factors should be treated with anti-coagulants."

"We are proud... our efforts have produced results as the county reaches the targets of the NBHW, 80 percent of the patients are now treated..."