

Primary Care Quality Sweden

Made by primary care, for primary care

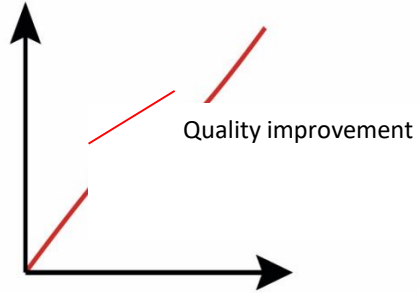


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Ulrika Elmroth, GP, MPH, project manager Primary Care Quality Sweden



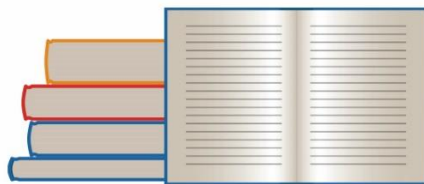
Why measure?



Find patients in need



Dialog and education



Research

Kvalitetsdata utan extrajobb



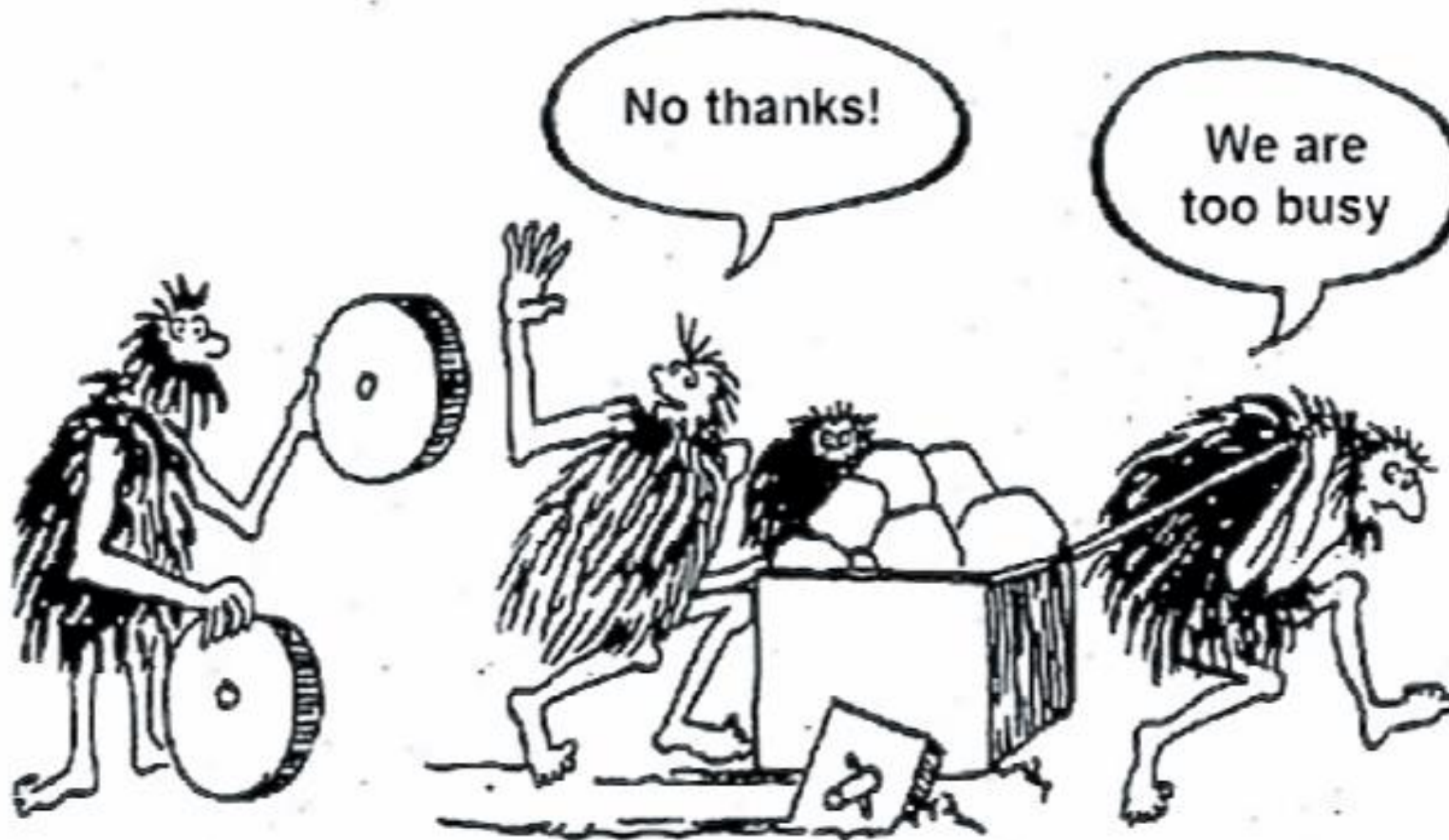
Av primärvården – för primärvården

Find areas for improvement



Follow your own results

What is lacking in Swedish primary care?



What is your driving force to improve?



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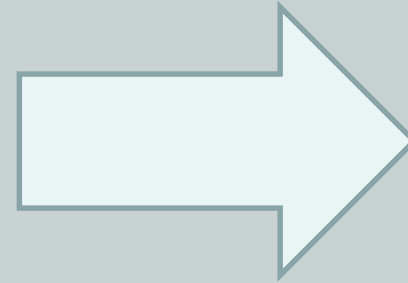
A starting point for development

Best
available
knowledge

Leadership

Data/
evaluation

Quality
improvement
know-how



Better care and
health!

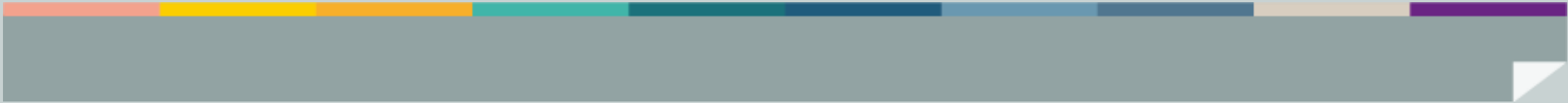


What is Primary Care Quality Sweden?

Primary Care Quality Sweden is a quality improvement system, containing some 150 quality indicators (measures) and the technical solutions for collecting data automatically and making it available both at the local and the national level.

A cooperation project





Movie time!



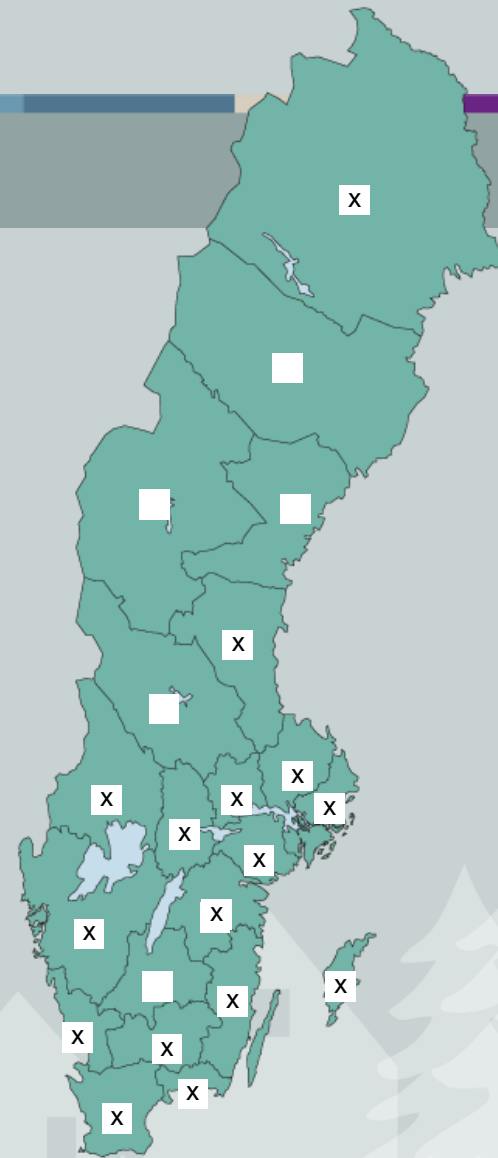
In brief

- A quality improvement system adapted to the PC setting
- Easy to use
- Automatic data collection – no extra documentation
- Real time data
- Evidence based, multiprofessional indicators
- Yearly updates of indicators



How far along are we?

>50% of Sweden's 1200 health centers



Using existing structured EMR documentation

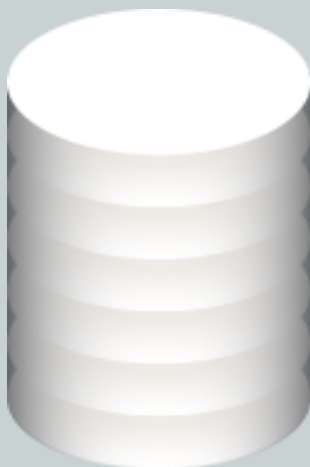
Kontakttyp

Tobak

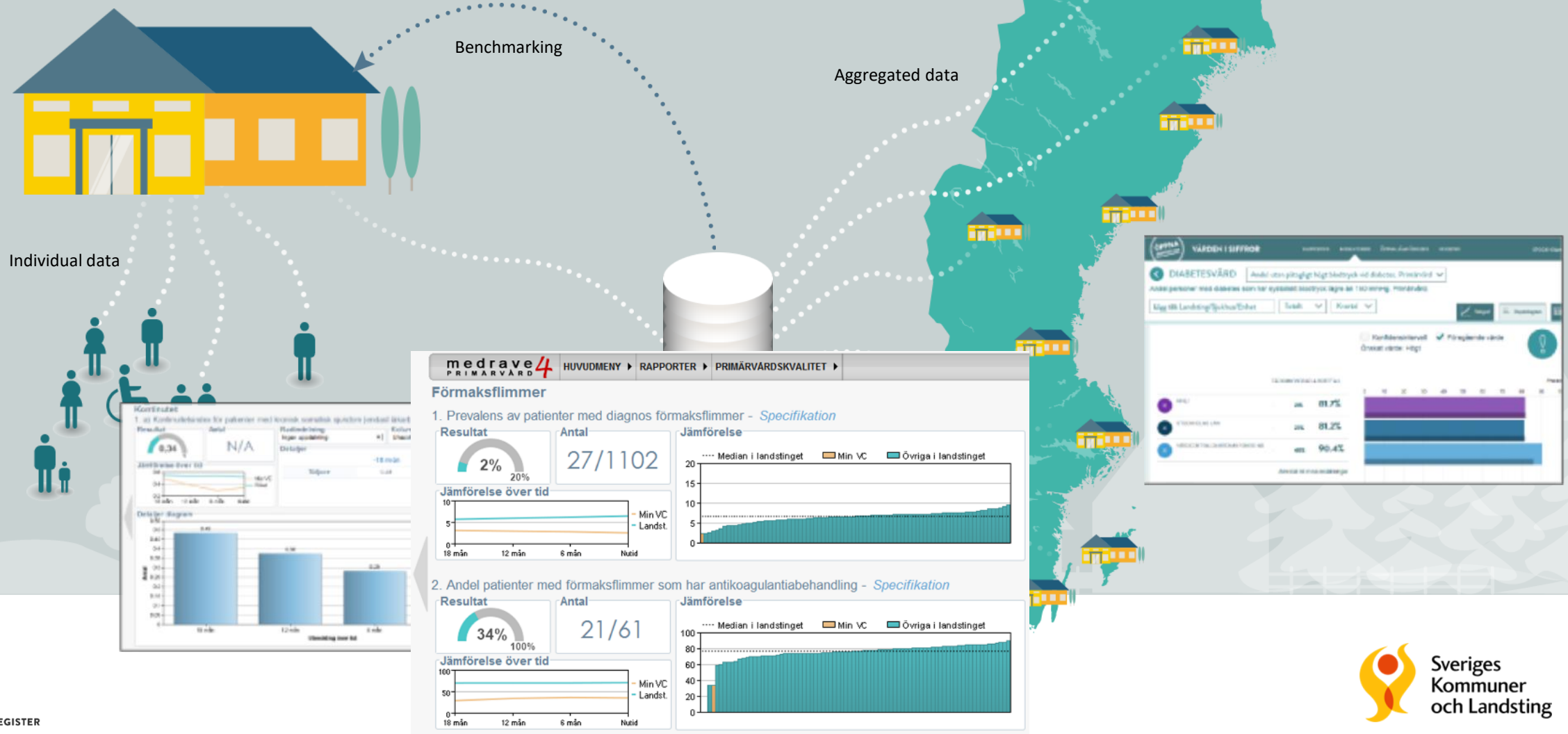
Blodtryck 140/85

Diagnos / 48.9

Recept



Dataflow



Primary Care Quality Sweden

KOL
Depression
Diabetes
Hjärtsvikt
Demens
Förmaksflimmer
Infektioner



Primary Care Quality Sweden gives an image of the broad spectrum of care offered at the health center.



Indicator areas

Primary care-specific indicators

- Continuity
- Comorbidity
- Prioritization
- Life style habits
- Rehabilitation
- Cooperation
- Pharmaceutical treatment
- Elderly

Diagnosis-specific indicators

- Ischemic heart disease
- TIA/Stroke
- Diabetes
- Atrial fibrillation
- Arthrosis
- COPD
- Asthma
- Dementia
- Depression
- Anxiety
- Leg ulcers
- Infections

Patient-reported data

- The PROMIS-project



Some examples:

- How large proportion (and which!) of our patients with atrial fibrillation are not treated with anticoagulants?
- Which of our patients with chronic disease who are smoking have not yet been offered smoking cessation aid?
- Which of our patients with chronic disease have not had a check-up in the last 18 months?



How can we support the micro level?

Micro

- Use data
- Continuous learning -> improved care
- Spread of experiences

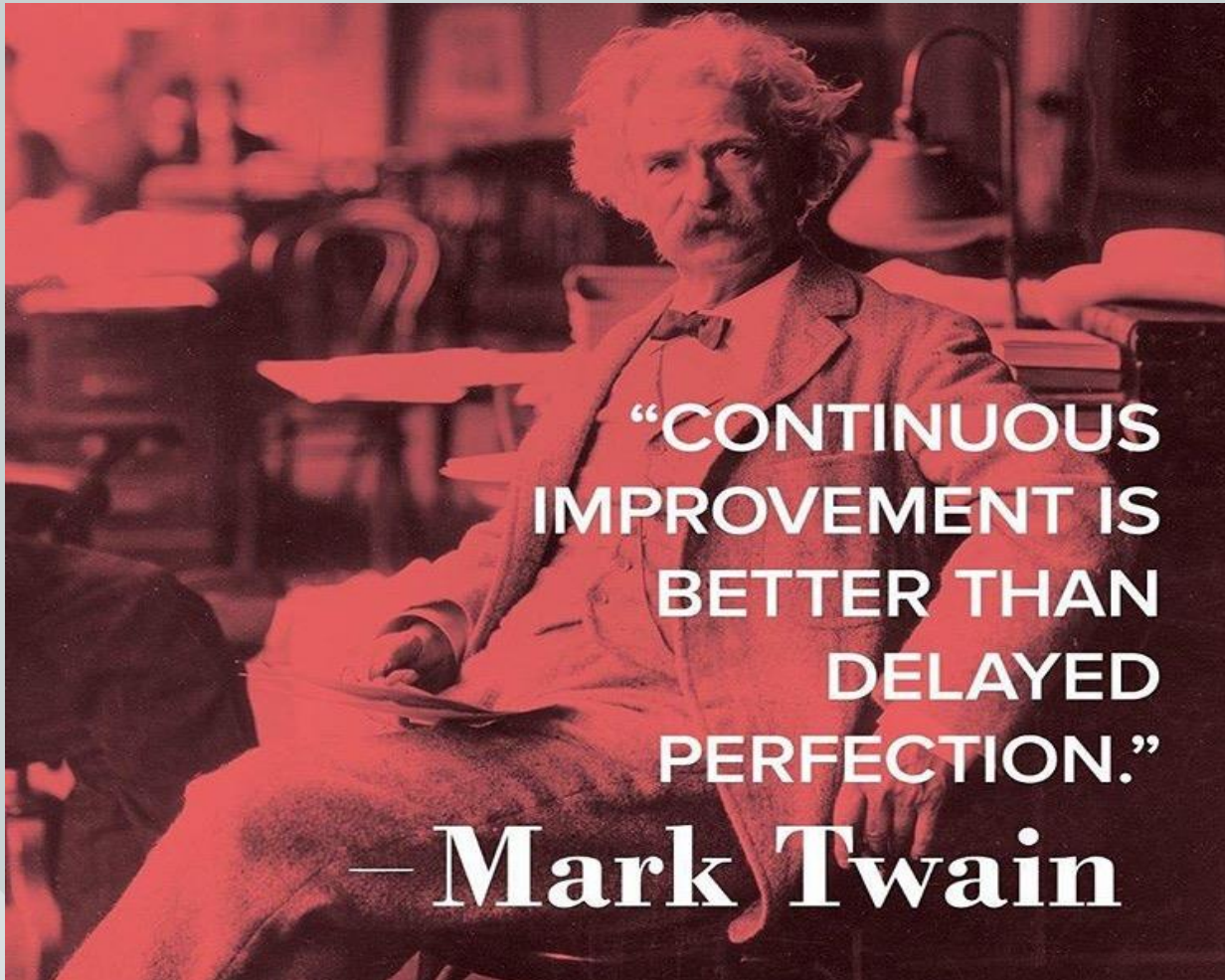
Meso

- Technology for local data and feedback/benchmarking
- Regional support to HC
 - QI methods and support
 - Local leadership
 - Arenas for spreading experiences

Macro

- Management and updates of indicators
- National common collection of quality data
- Technology for aggregating data and benchmarking
- National validation/interpretation/analys





Thank you!

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