

# Stimulate professional driven initiatives for quality improvement

Professionals / individuals

Different professions: GPs, nurses, ~~#~~ physiotherapists...

Cooperate around the patient

Management : positivity, curiosity, inspirational  
open-minded culture  
put your foot down when necessary

Common / shared goals for the health centre

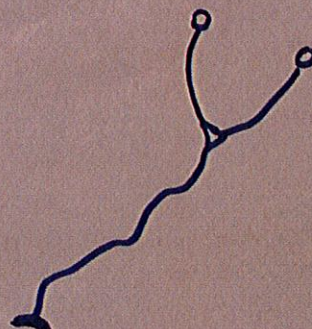
Work satisfaction

Continuity of employees

The number of days on sick-leave

Time for reflection → initiatives!

How do you measure the above?





# CONTINUITY of CARE

- patient - doctor
- listing on individual doctor
- maintaining patients' choice
- accessibility of care / doctor
- financial incentives (reimbursement)
- provision of competence (# of dr)
- personal commitment of doctor
- measures:
  - patients' experience
  - continuity index
  - care seeking behaviour



# \*VALID QUALITY IO\*

\*CONTINUITY OF CARE

\*MEDICATION REVIEW

\*OVERVIEW OF THE PATIENTS  
WHO NEED FOLLOW UP

\*ACCESSIBILITY

\*PATIENT SATISFACTION



- Develop/provide primary care that meets patients'/inhabitants needs
- Use tools (e.g. PVRQ) at the local level, close to the patient
- Avoid micro-management
- Stimulate profession-driven initiatives for quality improvement
- Reflection - transparency



HOW TO IMPROVE ~~QUAL~~  
QUALITY OF  
- EMR DATA?

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- NORDIC STATEMENT  
ON QUALITY IMPROVEMENT?

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HOW TO CHOOSE  
- ~~CHOICE OF~~  
QUALITY INDICATORS?

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WHICH INCENTIVES  
SHOULD BE USED TO  
ENCOURAGE CME?

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HOW TO MEASURE  
QUALITY OF  
SELF CARE IN PRIMARY CARE?  
HEALTH



# ① Collecting data

- a) Has to be the right info going in <sup>Relevant!  
usable!</sup>  
R... in... R... out
- b) Tools EMR important!
- c) Security - Patient issues

# ② Analysing data

- a) Time
- b) Relevance to EDM
- c) PCP  $\leftrightarrow$  Institutions

# ③ Improving quality

- ① Person - Patient first!
- ③ Doctor and staff.
- ② Society - Community

HOW ??

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Quality Manual



1. New better, modern  
EMR

2. Systems working  
with the doctors,  
not against.

3. Integrate with external  
sources.