

# National Specialised Medical Care in Sweden



European  
Reference  
Networks

Conference  
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# Background information

The population of Sweden is ~9.7 Million

The Swedish healthcare system is decentralized

The total health care expenditure is ~9.5 % of GNP

Public healthcare budget 2012 was ~260 Billion SEK

Distance north-south by ground transportation is >2000 km

**Central government**

**Ministry of Health and Social Affairs**

**National Board of Health and Welfare**

- Legislation
- Supervision

**Local government**

**21 county councils**

8 regional hospitals  
65 county/district hospitals  
≈ 1,000 primary health care centres

**290 municipalities**

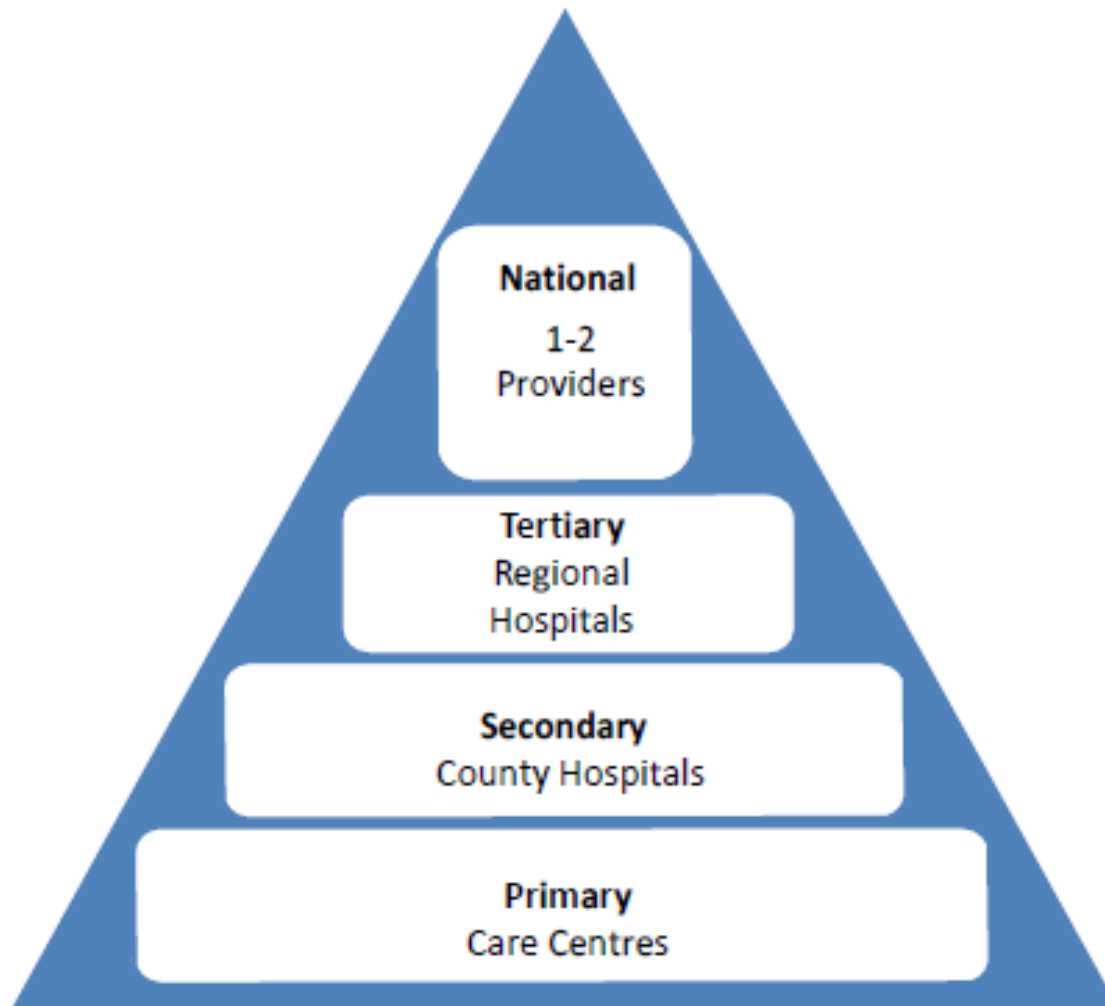
Housing, care and social support services for the elderly and disabled

- Finance
- Organisation

# Timeline of Commissioning

- **1960** - Delineation of *Specialised Care* on County level and *Highly Specialised Care* on Regional level
- **1975** - Definition by the National Board of Health and Welfare (NBHW)  
*"low numbers of patients that are particularly difficult to manage, requiring multidisciplinary cooperation between highly trained specialists and/or the use of advanced and costly equipment"*
- **1990** - The NBHW developed a catalogue describing the specialised services offered by the regions
- **2005** - Government proposition *National Coordination of Highly Specialised Care*, with the relevant law taking effect **2007**

# Levels of care

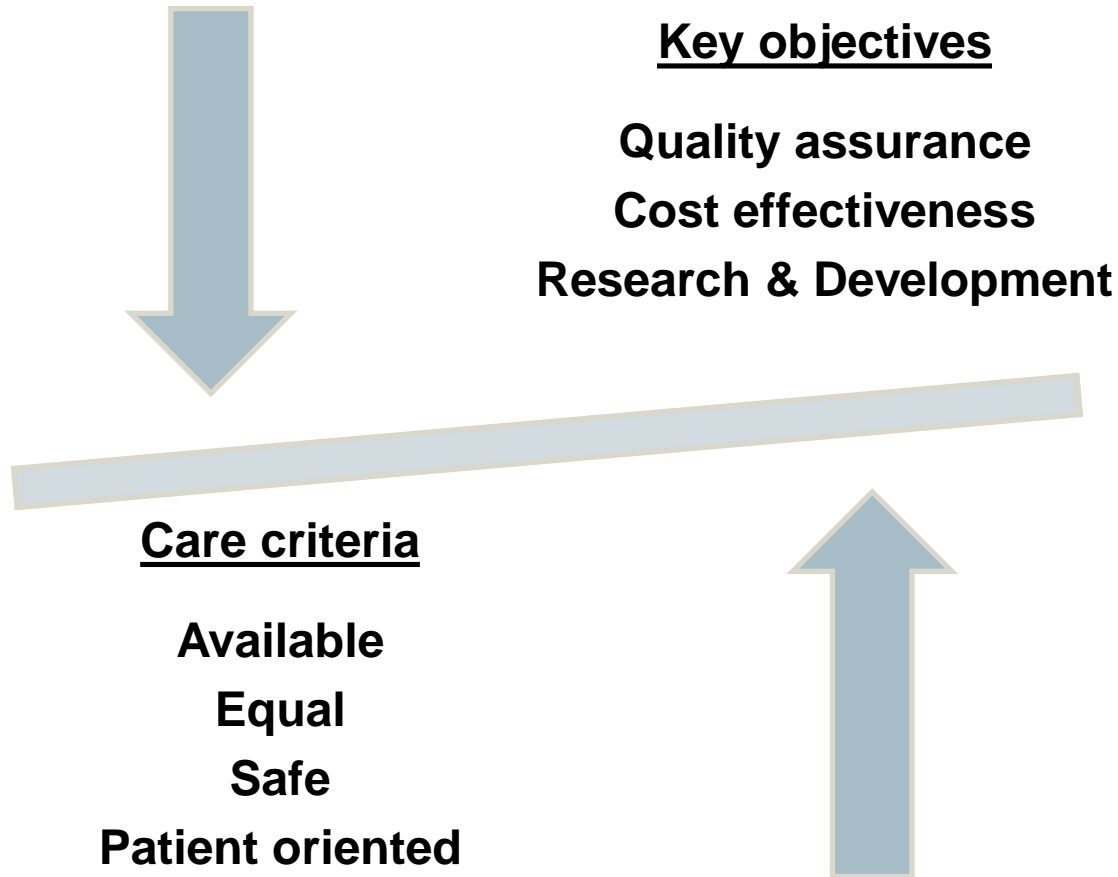


# Levels of highly specialised care

## Models for delineation

- **Severity of medical condition**
- **Selected diagnosis and intervention**
  - Management of rare conditions
  - Complex interventions and/or multidisciplinary requirements
  - Costly and advanced equipment for diagnostics and treatment
- **Knowledge or expertise**

# Balancing centralisation



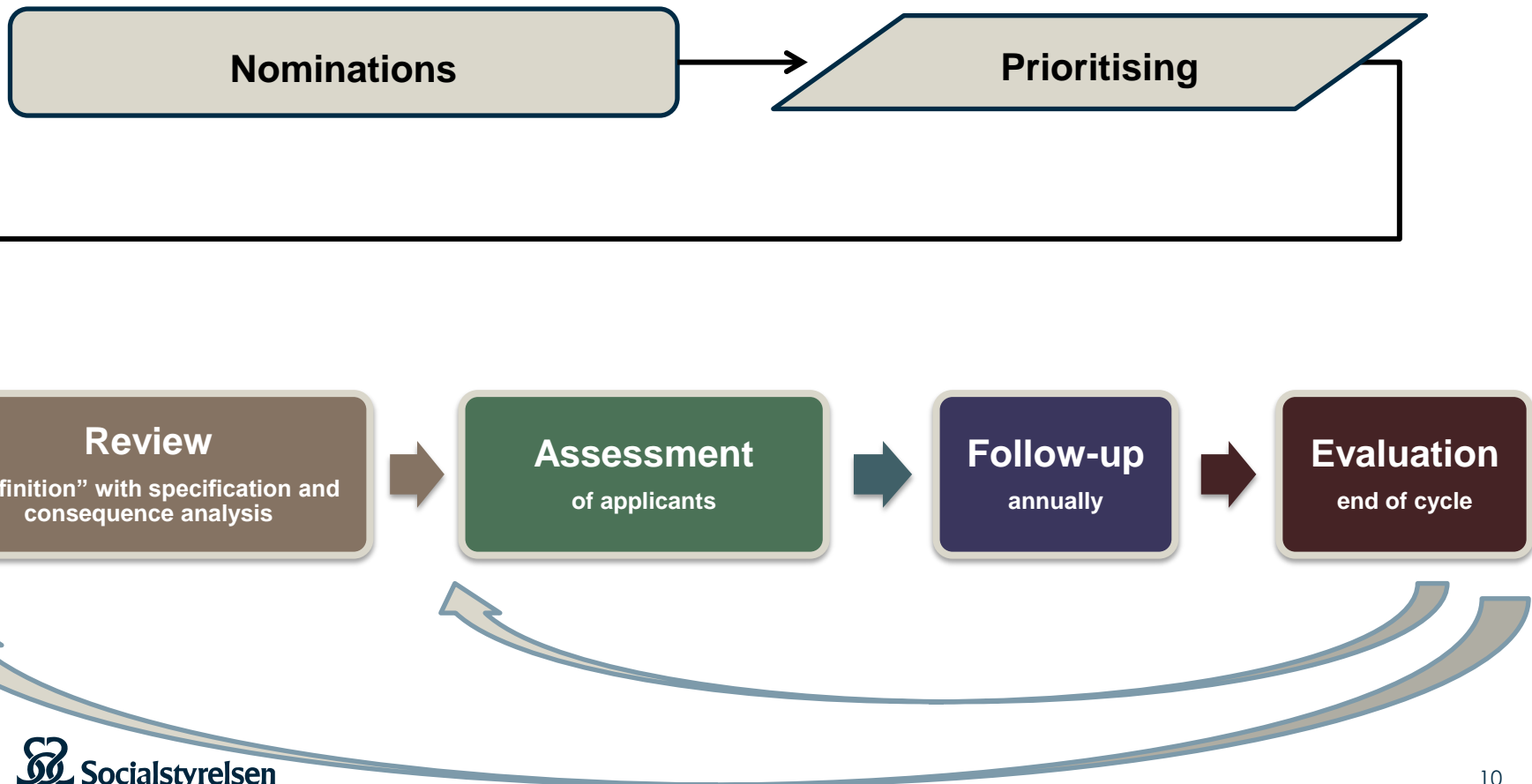


# Highly specialised services - national licenses

- Paediatric heart surgery
- Adult congenital heart surgery
- Ocular oncology
- Severe burns
- Craniofacial surgery
- Lung transplantation
- Liver transplantation
- Heart transplantation
- Cochlear implants in infants
- Intrauterine treatments
- Glaucoma and cataract in children
- Brachial plexus injuries

# The commissioning process

## <The 5 year cycle>



# The commissioning process

- Review (“Definition”)
  - Resources and critical competencies, caseload, referral patterns
  - Specification of inclusion criteria, indicators and follow-up parameters
  - Consequence analysis of R & D, education and patient perspective
- **Assessment** (“Licencing Accreditation”)
- Follow-up
  - General clinical governance criteria
  - Indicators and targets
  - Compliance with terms and conditions
- **Evaluation**

# Components of Assessment

- Structure
- Process
- Experience, results and development
- General criteria

# Assessment - Structure

- Competencies
  - Specific skills
  - Team competencies
  - Availability of resources
- Research
  - Organisation and strategies
  - Research groups
  - Projects and grants

# Assessment - Process

- Competence strategies
  - Competence development
  - Provision of competence long-term
  - Multidisciplinary collaboration
  - Transfer of competence
- Strategies for National cooperation
  - Continuity of care planning
  - Managing workload fluctuations
  - Contingency planning
- International collaboration

# Assessment - Achievements

- Experience
  - Clinical caseload and relevant experience
  - Clinical experience on an individual level
  - International collaboration
- Results
  - Clinical outcomes
  - Research, education and development

# Assessment – General care criteria

- Knowledge-based
- Patient oriented
- Safety
- Equality
- Availability



# Assessment outcome

## Levels of requirements:

- **Mandatory** (compliance non-negotiable)
- **Important** (will be conditioned on designation)
- **Envisioned** (voluntary but might count when comparing centres)

## Overall assessment:

- capability to provide high quality national services
- flexible adaptation of resources
- long-term sustainability

# Evaluation – General

- Definition (functionality and relevance of inclusion criteria)
- Care chain (waiting times and patients' pathways)
- Patient and family perspective
- Children's and gender perspective
- Implementation of clinical governance
- Compliance with terms and conditions

# Evaluation – Tools for benchmarking

- Self-assessment
- Quality registry data
- Indicators and targets
- Outcome data (comparison of risk-stratified data a/o defined subsets)
- Review by international experts

# Evaluation – Critical functions

- Competencies (recruitment and training)
- Developments (advancements in diagnostics and treatment)
- Practice guidelines (incl. care chain aspects)
- Support to referring hospitals
- Continuity and contingency planning



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