Regional Variation in Health Care

Content English

Title: From health care atlas to policy and governance towards reduced variations

Abstract text: Within the semi-decentralized universal Norwegian health care system, four regional health authorities (RHA) are responsible for the provision of adequate and appropriate specialist health services to the population living in their respective regions. Hospital trusts (HT) are subordinate units performing service provision. Regional variations in health care utilization may indicate unequal health services, whereas variations measured by quality indicators may express inequality and point towards challenges related to the responsibility for providing appropriate health services.

Inspired by the regional variations described in the first two Norwegian health care atlases published, the 2016 commissioning document from the Ministry of Health and Care Services (HOD) tasked the RHAs to identify indicators for measuring unwarranted variation. The indicators were given managerial priority from 2017. This assignment resulted in a report from Center for Clinical Documentation and Evaluation (SKDE), recommending nine indicators within five clinical fields for governance towards reduced variation. These indicators included both quality and quantity aspects.

In 2017, HOD tasked the RHAs to apply information on unwarranted variation in their HT-governance, using variations presented in health care atlases and the indicators identified and quantified in the SKDE-report mentioned above. However, the extent to which the RHAs have applied the indicators in their further HT-governance varies. One RHA has explicitly stated this issue in their annual commissioning document to the HTs, another indirectly through other governing documents.

During a discussion between a representative for SKDE (analysts making health atlas and performance indicators) and a representative from a Norwegian RHA the challenges of governing the quantity and quality clinical practice based on clinical variation data will be elucidated. Challenges imposed by systems for financial compensation will be addressed.