

Department for Knowledge Management in Health and
Medical Services
Unit for Patient Safety and Preparedness
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This document is a translation made by SHK of the original response in Swedish to the safety recommendation. In case of discrepancies between this translation and the Swedish original text, the Swedish text shall prevail in the interpretation of the response.

Response in case reference O-10/21

The National Board of Health and Welfare hereby submits its response to the Swedish Accident Investigation Authority's safety recommendations arising from Final Report SHK 2023:02, *Serious incident – delay in care relating to an indeterminate change in the pancreas, for which treatment was initiated on 23 March 2021*.

The National Board of Health and Welfare is recommended, within the scope of its remit as a knowledge authority, to examine whether the working method now introduced at Uppsala University Hospital—under which the healthcare provider requesting an examination is also responsible for ordering it—could usefully be implemented more widely across the health and medical services. If deemed appropriate, the Board should, in collaboration with relevant authorities and organisations, work towards such implementation (R3).

The National Board of Health and Welfare shares SHK's conclusion that efficient and reliable referral management is fundamental to safe healthcare, and that deficiencies in this area pose significant risks to patient safety, for example through delayed diagnosis and treatment, which may result in patients suffering harm as a consequence of care.

In response to the recommendation, the National Board of Health and Welfare has held discussions on this working method with the regions' knowledge management system through the National Collaboration Group (NSG) for Patient Safety¹, and has contacted Uppsala University Hospital in the Uppsala Region in order to learn about the revised working method.

There are advantages to the described working method, but there are also factors that may complicate its wider implementation, such as contractual and financial issues relating to responsibility. In addition, there are challenges associated with the transfer of responsibility for patients between different levels of care and between healthcare regions using different patient record systems. More extensive preparatory work and investigation would be required before any further

¹ See <https://kunskapsstyrningvard.se/kunskapsstyrningvard/programomradenochsamverkansgrupper/nationell-lasamver-kansgrupper/nsgpatientsakerhet.56482.html>

implementation of this working method across the health and medical services.

The recommendation concerns how healthcare services are organised. It is for individual responsible authorities and healthcare providers to determine which working methods and procedures are considered appropriate in order to meet the requirements set out in legislation and regulations.

The National Board of Health and Welfare considers that the need for revised referral management procedures should be investigated and addressed at regional level, and that decisions relating to such management should be taken by the regions. Based on the regions' needs, the National Board of Health and Welfare may provide support and disseminate knowledge concerning any revised working method.

In addition to the above, the National Board of Health and Welfare has reviewed the content of the website *Collective Support for Patient Safety*² and found that the areas highlighted by the investigation—including communication and information transfer, as well as collaboration and continuity as risk areas—are covered by the existing content. The website also links to the web-based resource *Legal Guidance on Documentation*.

The National Board of Health and Welfare plans to consider whether the content of the *Collective Support for Patient Safety* website can and should be clarified further.

Furthermore, SHK's investigation will be discussed at an upcoming meeting of the National Council for Patient Safety³, which includes representatives of the responsible authorities, national organisations and relevant agencies.

The National Board of Health and Welfare is recommended to clarify, as appropriate, what the regulatory framework provides regarding the sharing of diagnostic imaging produced by another healthcare provider, and how this may be done in a manner that ensures information security and patient safety (R4).

The National Board of Health and Welfare plans to publish guidance on the regulatory provisions governing healthcare providers' ability to share diagnostic images produced by other healthcare providers, and on how such information may be transferred in a manner that ensures information security and patient safety.

The texts are intended to be published in the existing web-based resource *Legal Guidance on Documentation*. *Legal Guidance on Documentation* forms part of the National Board of Health and Welfare's website and describes the regulatory framework for information management and documentation under current law.⁴

² See <https://patientsakerhet.socialstyrelsen.se/>

³ See <https://www.socialstyrelsen.se/om-socialstyrelsen/organisation/rad-och-namnder/nationellt-rad-for-patientsakerhet/>

⁴ See <https://www.socialstyrelsen.se/kunskapsstod-och-regler/regler-och-riktlinjer/juridiskt-stod-for-dokumentation/>.

The resource is aimed, among others, at staff working in health and medical services.

The National Board of Health and Welfare is recommended to examine whether the application of the regulatory framework governing the use of the National Patient Overview (NPÖ) can be simplified and clarified in order to facilitate good care (R5).

The National Board of Health and Welfare considers that an extensive and in-depth review would be required to address the recommendation concerning the simplification and clarification of the application of the regulatory framework governing the use of the National Patient Overview (NPÖ). Legislative and regulatory amendments would also likely be required and, before this could take place, a Government inquiry would be necessary.

Furthermore, NPÖ is one of several systems for shared health and social care documentation⁵. For that reason, should the matter be investigated, it would probably not be appropriate to focus solely on NPÖ.

In light of, among other things, the matters set out above, the National Board of Health and Welfare currently has no planned work that would address the recommendation.

The National Board of Health and Welfare would also like to point out that work is currently under way in this area in response to the European Commission's proposal for a Regulation of the European Parliament and of the Council on the European Health Data Space, COM (2022) 197. If the proposal is implemented, it would affect the conditions for the exchange of information within the health and medical services.

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⁵ See *Record-keeping and Processing of Personal Data in Health and Medical Services* – Handbook on the Application of the National Board of Health and Welfare's Regulations and General Advice (HSLF-FS 2016:40) on Record-keeping and the Processing of Personal Data in Health and Medical Services, pp. 40–41.