# Appendix 1 – Performance measures used by Region Skåne

Region Skåne operationalise the “Good care” framework (six domains) in primary care through performance measures, based on data from their administrative systems, electronic patient records and national surveys. The performance measures used have changed over time. In 2019, the measures in the table below were used. Some of these measures were used already in 2010, while others have changed.

|  |  |  |  |
| --- | --- | --- | --- |
| **Domain in “Good care” framework** | **Type of measure** | **Included in analysis?** | **Data source** |
| **Preventive** |
| Health examinations for patients with psychiatric illness, absolute number | Process  | No, data not complete |  |
| Proportion of all individuals >65 years receiving seasonal flu vaccination | Process | Yes, 2019 (data n.a. for 2010) | Region Skåne database |
| **Evidence-based** |
| Proportion of type 2 diabetes aged >18 with HBa1c >70 at last visit | PROM | No, data n.a. |  |
| **Patient-centred** |
| Overall impression, proportion positive answers in survey | PREM | Yes, 2010 and 2019 | NPS 2010 and 2019 |
| Emotional support, proportion positive answers in survey | PREM | No  |  |
| Patient involvement, proportion positive answers in survey | PREM | No |  |
| Respect and responsiveness, proportion positive answers in survey | PREM | Yes, 2010 and 2019 | NPS 2010 and 2019 |
| Continuity and coordination, proportion positive answers in survey | PREM | Yes, 2010 and 2019 | NPS 2010 and 2019 |
| Information, proportion positive answers in survey | PREM | No  |  |
| Accessibility, proportion positive answers in survey | PREM | Yes, 2010 and 2019 | NPS 2010 and 2019 |
| **Safe** |
| Proportion of individuals with >3 visits during 6 months who see the same doctor in at least 50% of the visits | Process | Yes, 2012 (earliest year with data available) and 2019 | Region Skåne database |
| Number of drug reviews for elderly with >5 medicines and/or home-based care | Process | No, data n.a. |  |
| Number of harmful daily drug doses (DDD) per 1000 patients aged >75 | Process  | Yes, 2019 (data n.a. for 2010) | Region Skåne database |
| Number of prescriptions of antibiotics per enrolled individual | Process | No, data n.a. |  |
| Proportion quinolones of all penicillin prescribed to women with lower UTI | Process | Yes, 2019 (data n.a. for 2010) | Region Skåne database |
| Proportion penicillin V of all penicillin prescribed to children with respiratory illness | Process | Yes, 2019 (data n.a. for 2010) | Region Skåne database |
| **Accessible** |
| Proportion of calls answered with 0 days delay | Process | No, data not complete |  |
| **Efficient** |
| Number of coordinated care plans | Process | No, data n.a. |  |

PROM=Patient Reported Outcome Measure, PREM=Patient Reported Experience Measure, RS=Region Skåne.

Source: Region Skåne 2018. Definitioner och beskrivningar av kvalitetsindikatorer för vårdcentral i Hälsoval Skåne 2019.