

Reducing work disability in the region of Skåne in southern Sweden

Ulf Hallgårde
MD



Skåne



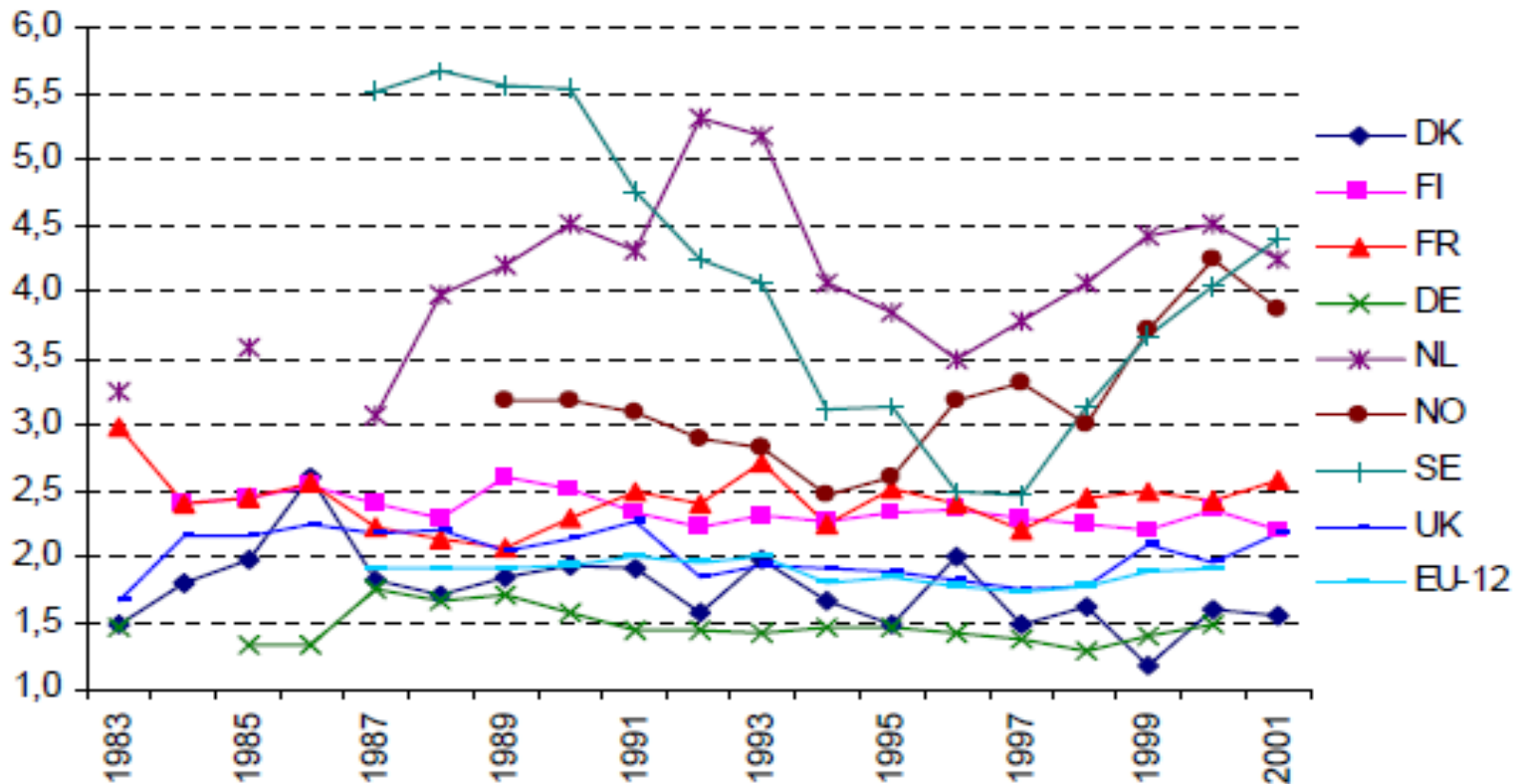
Headlines

- Political ambition to reduce work disability
- Incentive to start local quality improvement 2006
- New legislation 2008
- Incentives to increase rehabilitation 2008
- Local systematic improvement work within the medical paradigm
- New concepts outside the traditional framework
- Results so far



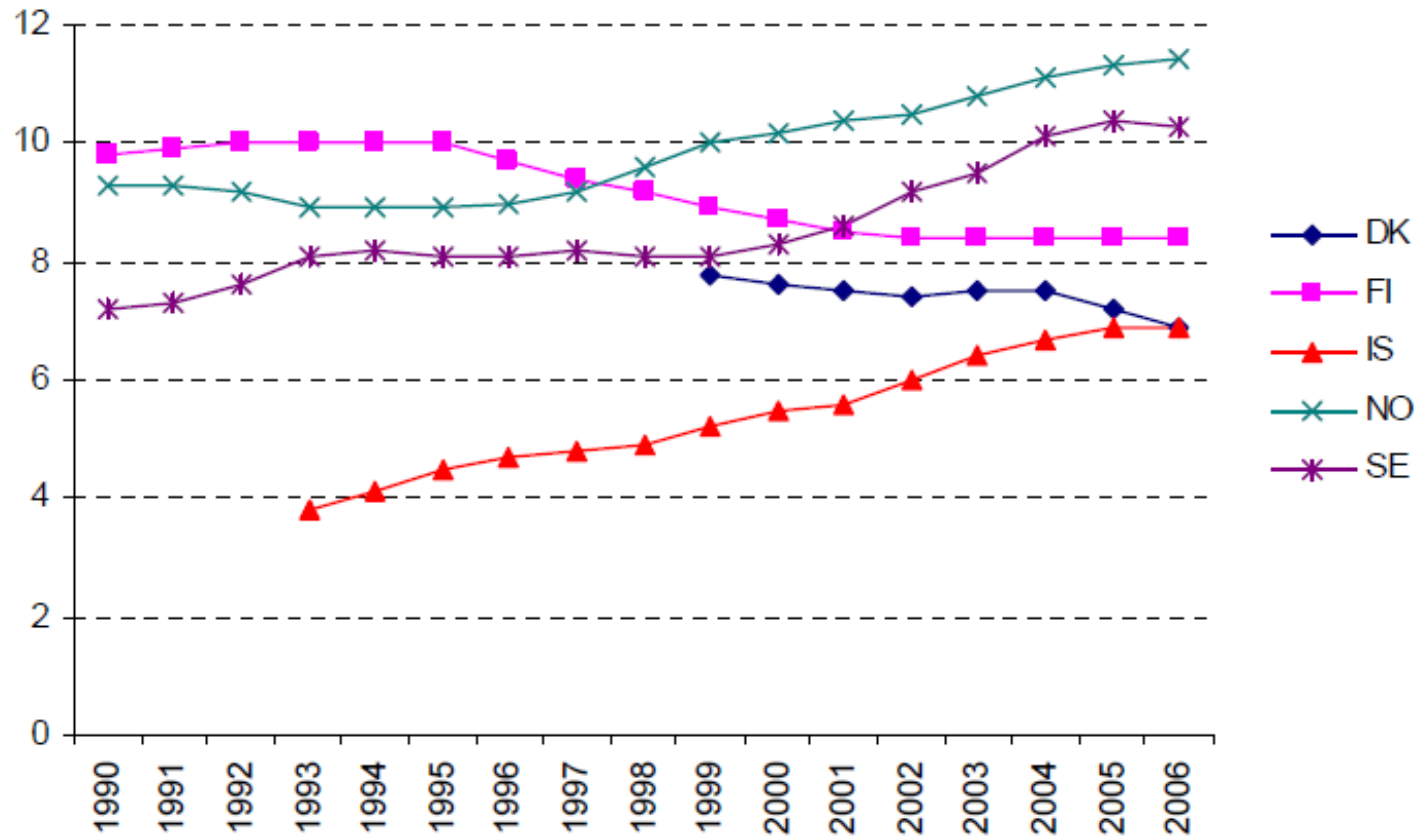
The work disability situation in the beginning of the 21th century

Procent



Disability retirement

Procent



Political ambition to reduce work disability

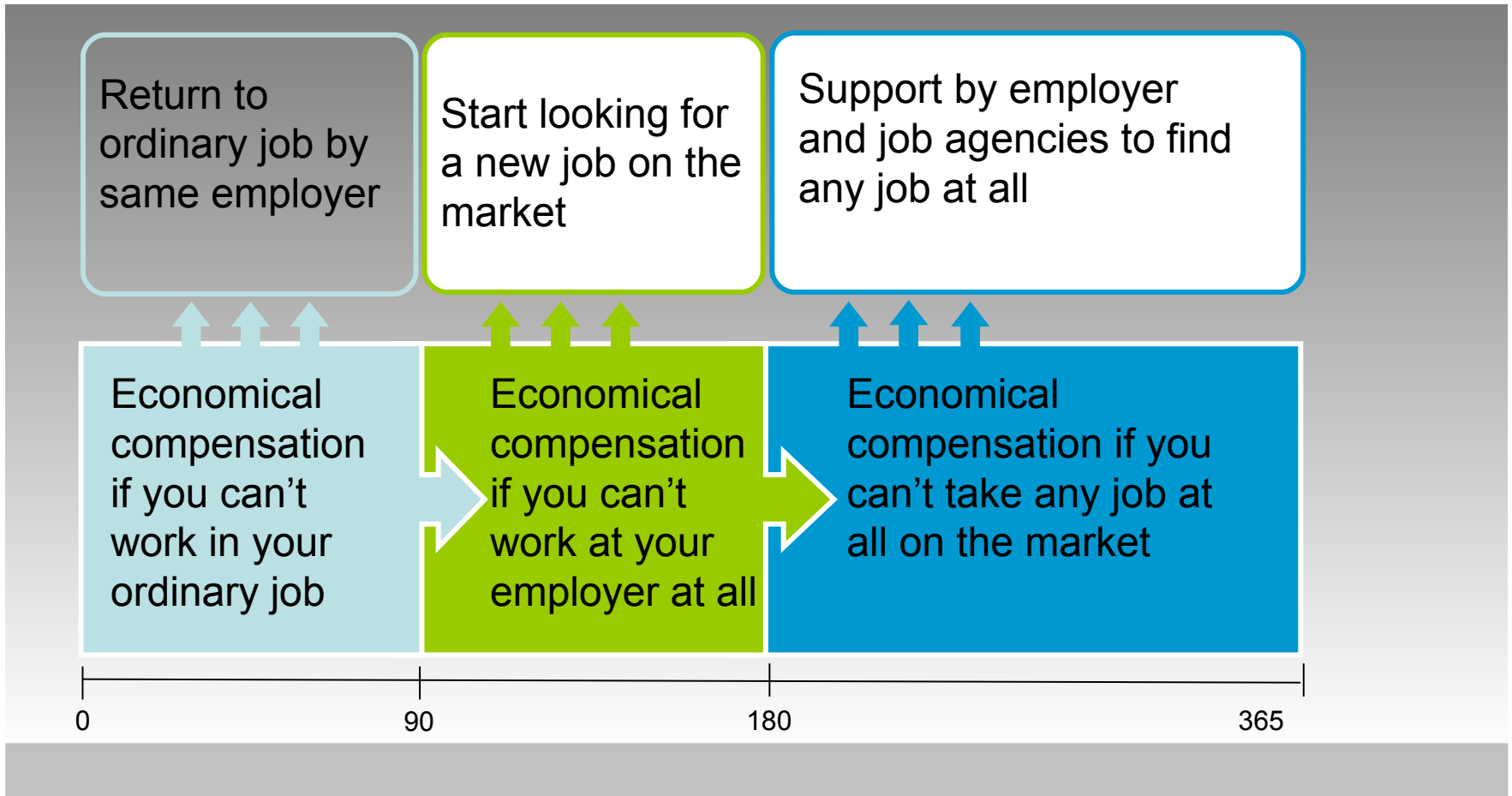


Incentives to start local quality improvement 2006

- € 100 million to be divided by the 21 county councils 50% by size and 50% by improvement results
- Skåne received € 14 million 2007



New legislation 2008



Incentives to increase rehabilitation 2008

- € 100 million to be divided by the 21 county councils to increase Cognitive Behavioral Therapy and Pain Rehabilitation
- € 1000 per new individual CBT series
- € 3000 per new individual Pain Rehabilitation program



Local systematic improvement work within the medical paradigm

- Lower back pain identified as the leading diagnose for longtime work disability
- Pilot project at five healthcare centers with a "new" flowchart and simplified MR protocol in selected cases
- Next step 29 centers
- Now all 150 centers in the Region



Local systematic improvement work within the medical paradigm

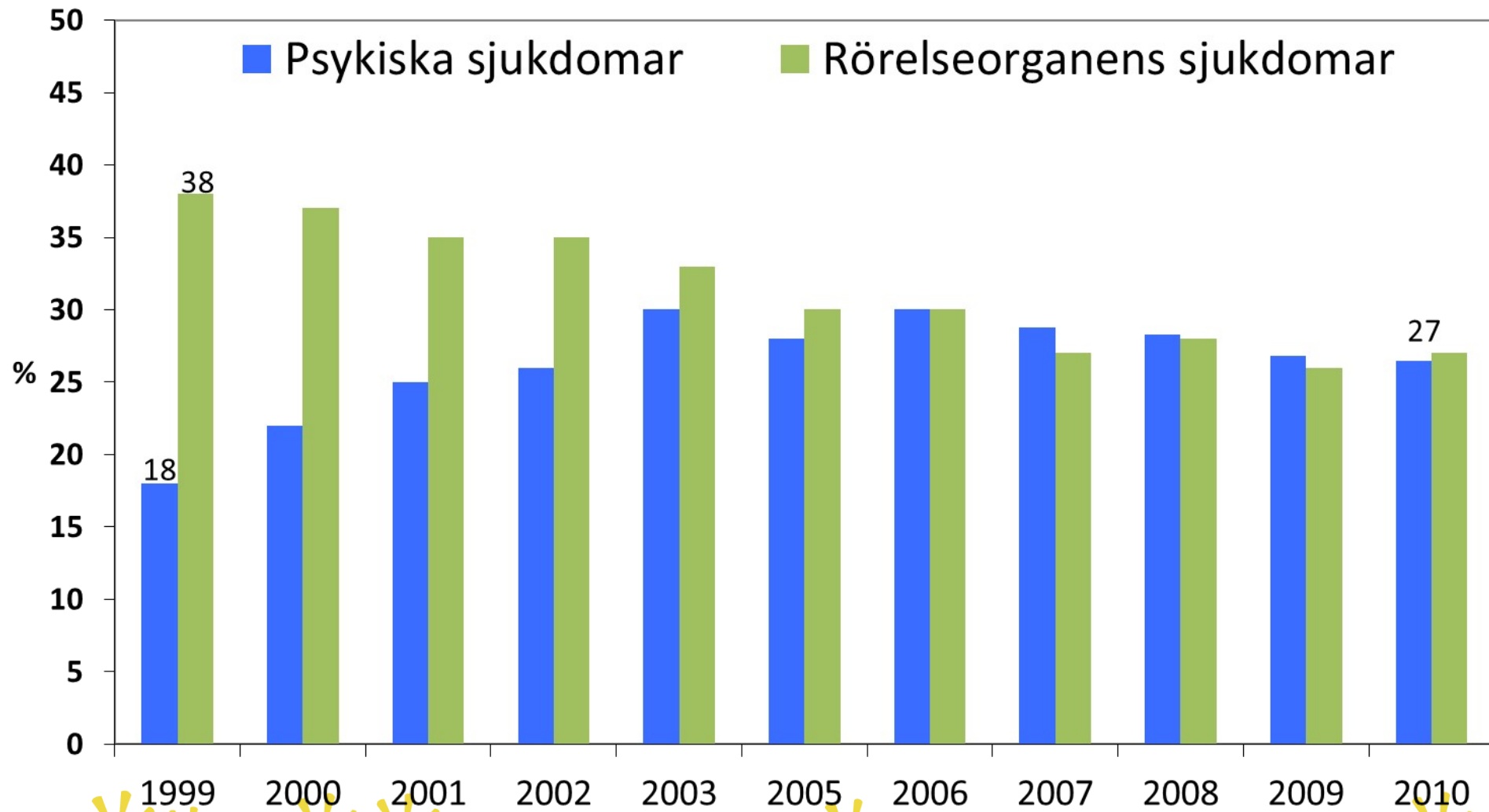
- Identify medical units with large number of patients on sick leave and offer them support to analyze and improve the process
- Orthopedic and oncology units were very successful
- Improved process in rheumatology neurology and psychiatry

Local systematic improvement work within the medical paradigm

- Implementing rehabilitation coordinators (case managers usually paramedics) in 200 units to help doctor to speed up the return to work process



Long time work disability 1999-2010 (>59 days)



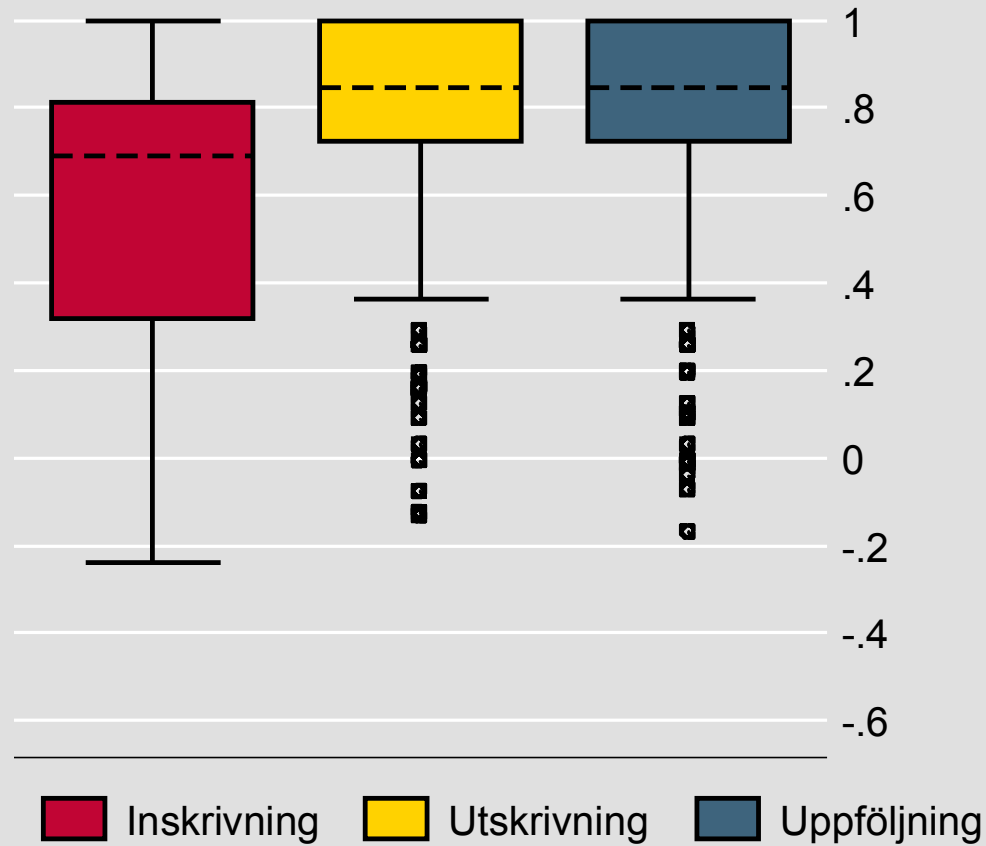
Källa: LS-databasen (1999-2006), MiDAS-databasen (2007-2010)

Local systematic improvement work within the medical paradigm

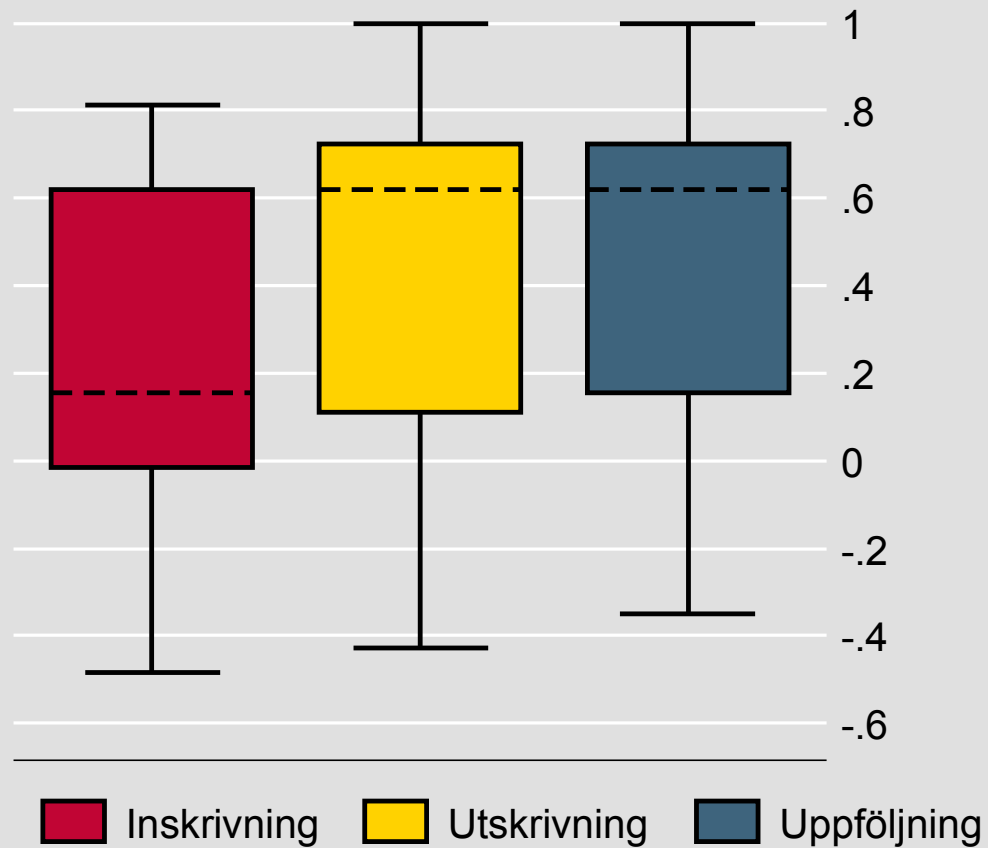
- Introducing a new system for accreditation of CBT and Pain Rehabilitation
- Mandatory reports of Individual results for EQ5D and 3 ICF factors each patient

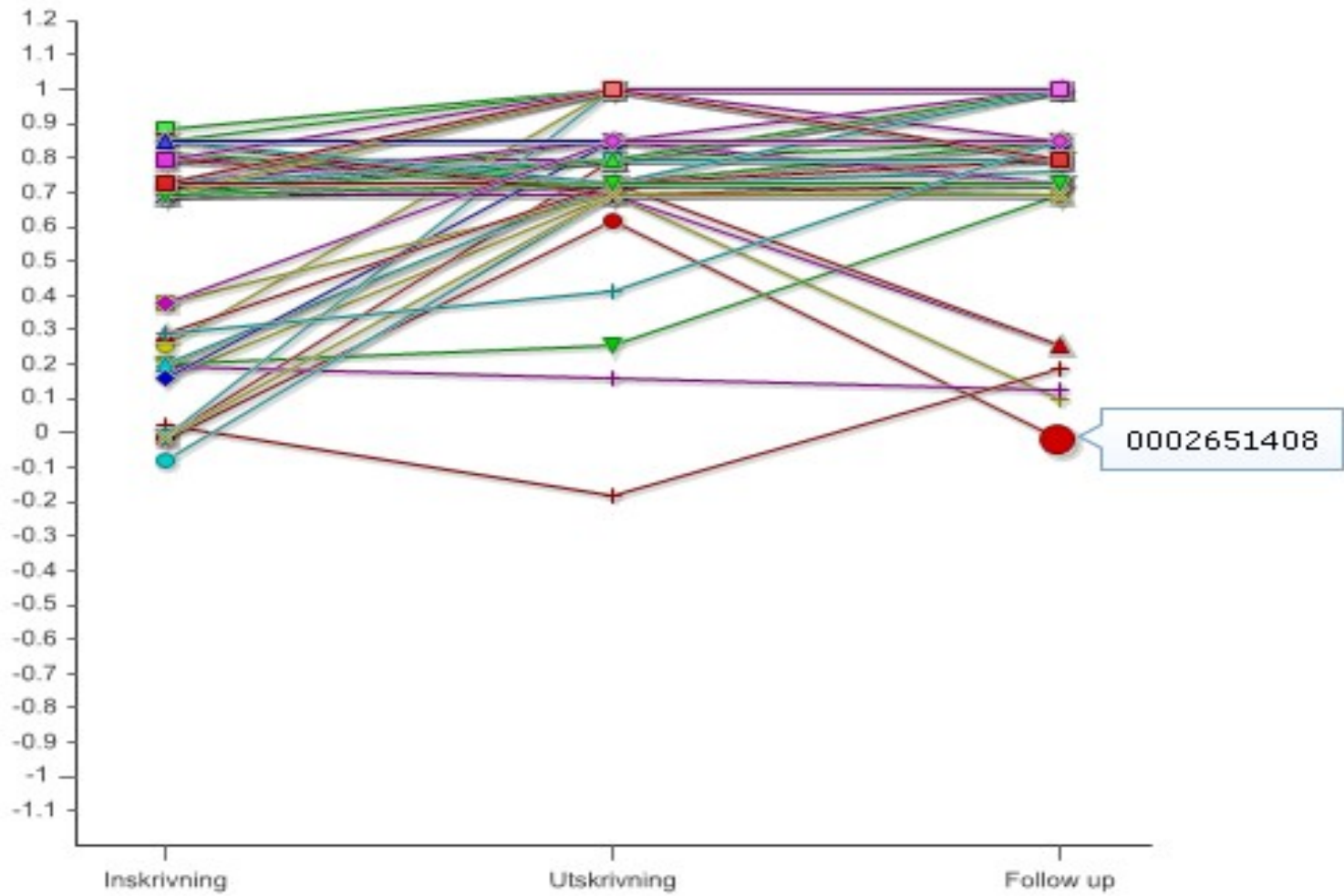


EQ-5D index, KBT



EQ-5D index, MMS

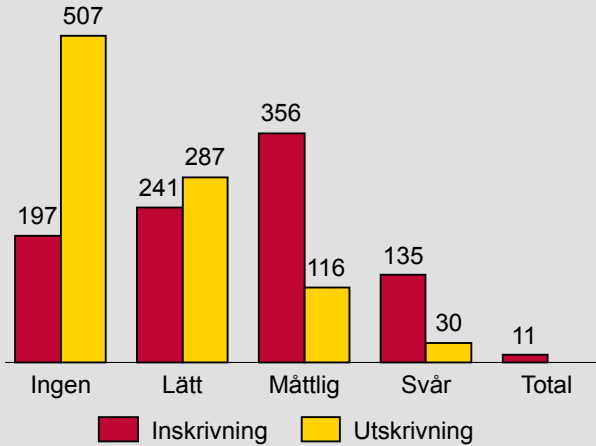




ICF CBT

KBT: b134

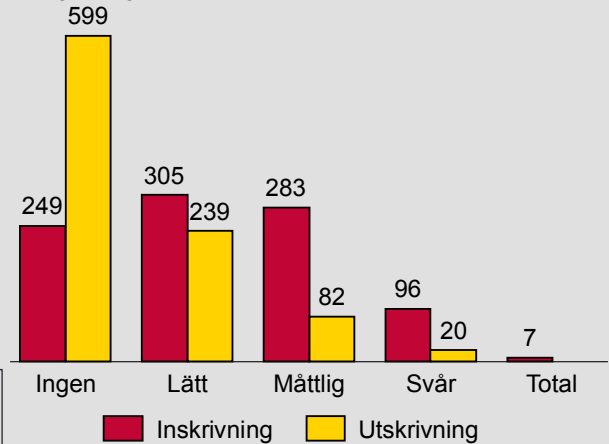
Sömnfunktioner



Grad av funktionsnedsättning eller aktivitetsbegränsning

KBT: b164

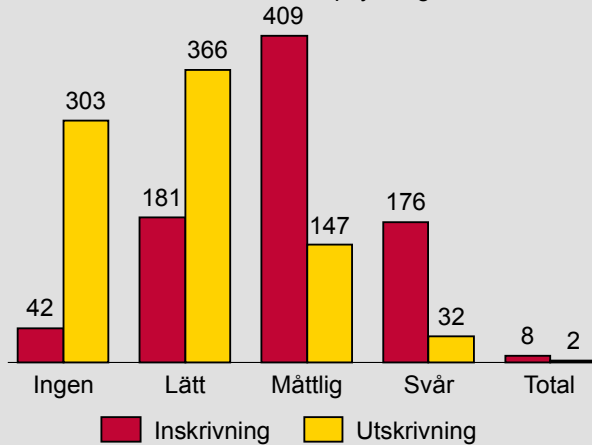
Högre kognitiva funktioner



Grad av funktionsnedsättning eller aktivitetsbegränsning

KBT: d240

Att hantera stress och andra psykologiska krav



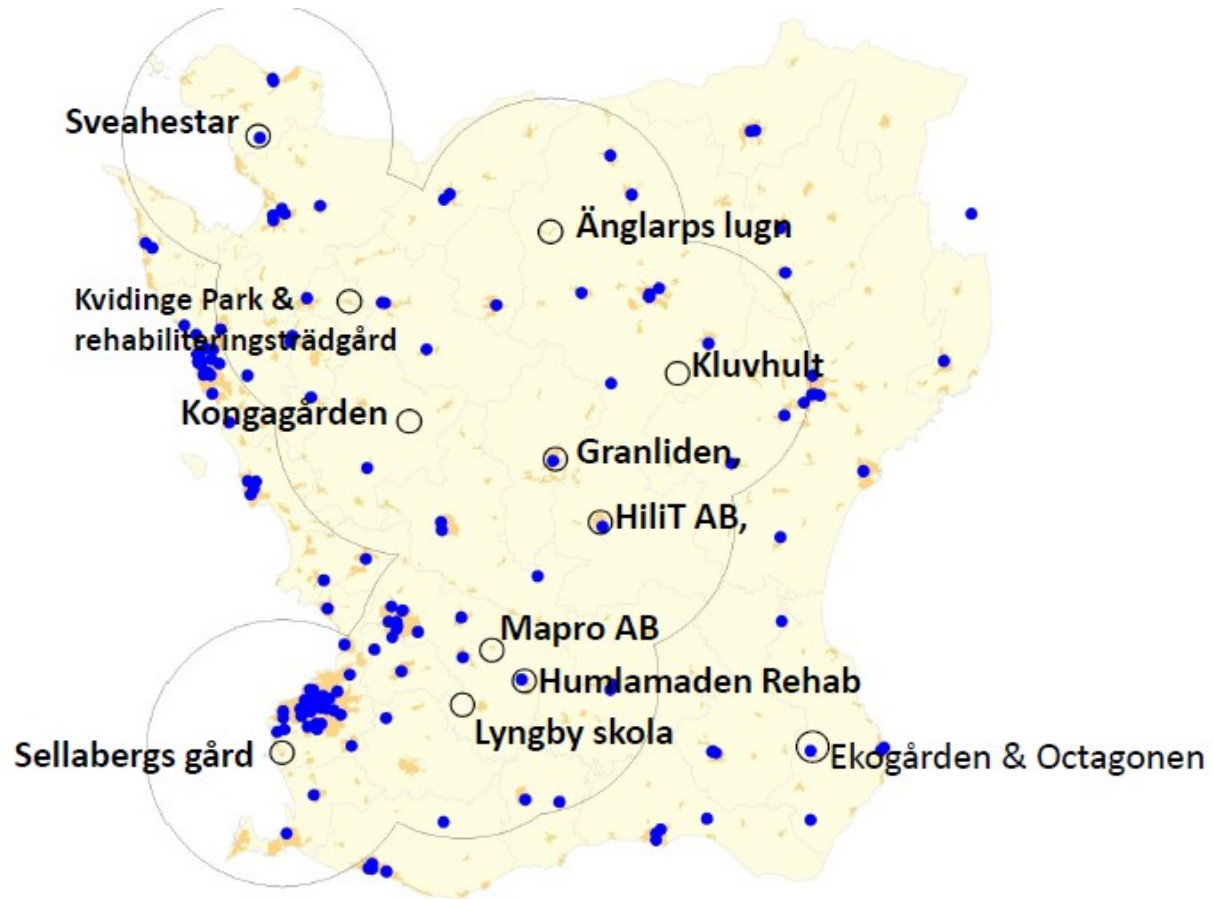
Grad av funktionsnedsättning eller aktivitetsbegränsning

New concepts outside the traditional framework

- Nature assisted rehabilitation
- Culture on prescription









Helsingborgs library



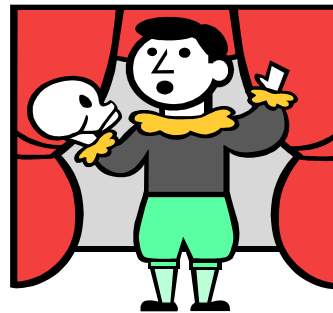
Singing



Dunkers museum and cultural activity house



Sofiero former Royal summer castle



Drama



Fredriksdal museum and gardens

V 1



V 10



The participant attends 2 - 3 session per week for 10 weeks on her/his own free will and personal risk. (We have an accident insurance)

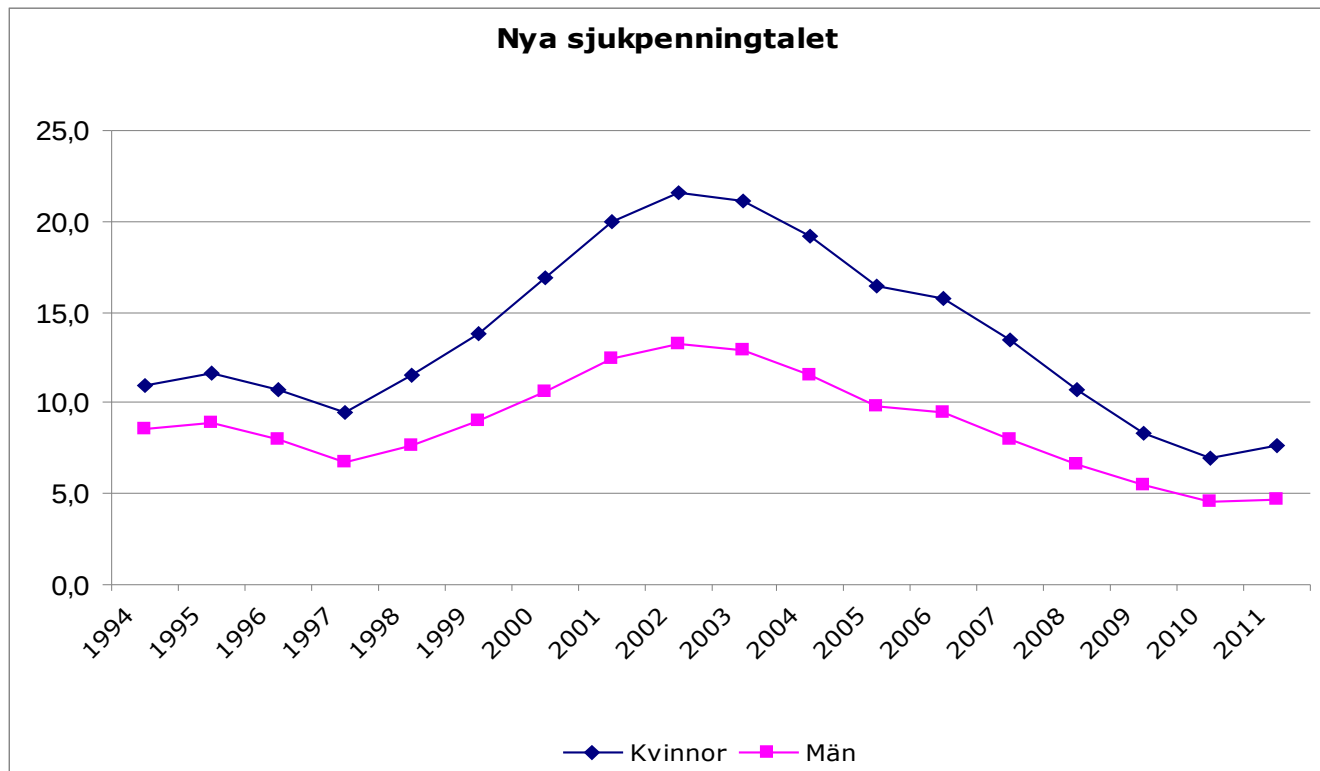


Results so far

- Reduction of days of temporary work disability from 12,7 to 6,1 days per person in the age group 16-67
- A ten fold increase in the number of CBT psychotherapists from 40 to 408!
- A ten fold increase in the number of pain rehabilitation teams from 5 to 50!



Work disability in days per person in the workforce/year in Skåne



The new challenge

- The gender perspective:
- Why 63% female vs. 37% male ???



Thank you!

