## **COUNTRY REPORT 2012**

## **Use of ICPC in FINLAND**

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The 2-pager was published in 2006 both in Finnish and Swedish, which are the two official languages in Finland. In 2007, the national license for ICPC-2 was bought from Wonca . The book was translated into Finnish in 2010. From 2011 onwards, the use of ICPC-2 has been accepted as a standard classification in primary health care next to ICD-10 and it is available for downloading on the national codeserver for health classifications.

ICPC has been used in an increasingly number of health centres and it has been introduced in most f the electronic software programs for health records. The recommendation until now has been to use only Component 1 (Symptoms and complaints) and Component 7 (Diagnosis) for recording health problems/diagnosis for each contact. Process codes have been piloted, but are not yet in wider use. For payment purposes the procedures have been coded according to a national list of procedures.

In 2010 nearly 40 % of healthcare centers reported to use ICPC-2 in clinical work (versus less than 20 % in 2007. Some cities using ICPC achieved the coverage of face-to-face contacts coded in ICPC in nearly 90 % of the visits. These cities were a minority though, the average coverage of coding staying very low.

Finnish GPs have been able to use evidence-based decision support systems using ICPC. It has proven successful. There are also mappings between ICPC-2 and ICD-10.

In 2009, a Steering committee for the use of ICPC in Finland was established for a period of four years, and it is hosted by Kuntaliitto (the owner of ICPC-license). Members are GP-s and other health professionals as well as IT-specialists from the bigger municipalities in Finland and the meetings are also attended by the representatives of the national health authorities. Yearly, national seminars about the use of classifications in primary health care have been organized.

A new Steering Committee will be elected in a near future. It will continue with the promotion of ICPC-2 as a classification. It will respond to requests from the field and it will make decisions about the uniform coding. The episode concept has been discussed constructively, but is not yet approved. A major challenge for development of the health records in the public sector, will be the stepwise introduction of a national earchive, which is supposed to be joined by the health care providers at latest on 1<sup>st</sup> of September 2014.