State of WICC 2018

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WICC-Meeting2018, Lviv / Ukraine

Online questionnaire about the use of ICPC

Answers from:

Finland	China
Norway	Australia
Belgium	Denmark
China	Slovenia
Nigeria	Romania
Brazil	Italy
France	South Africa
Croatia	Italy
Netherlands	United
Switzerland	Kingdom
Georgia	Germany

Q2: Does your country hold a national license for ICPC?
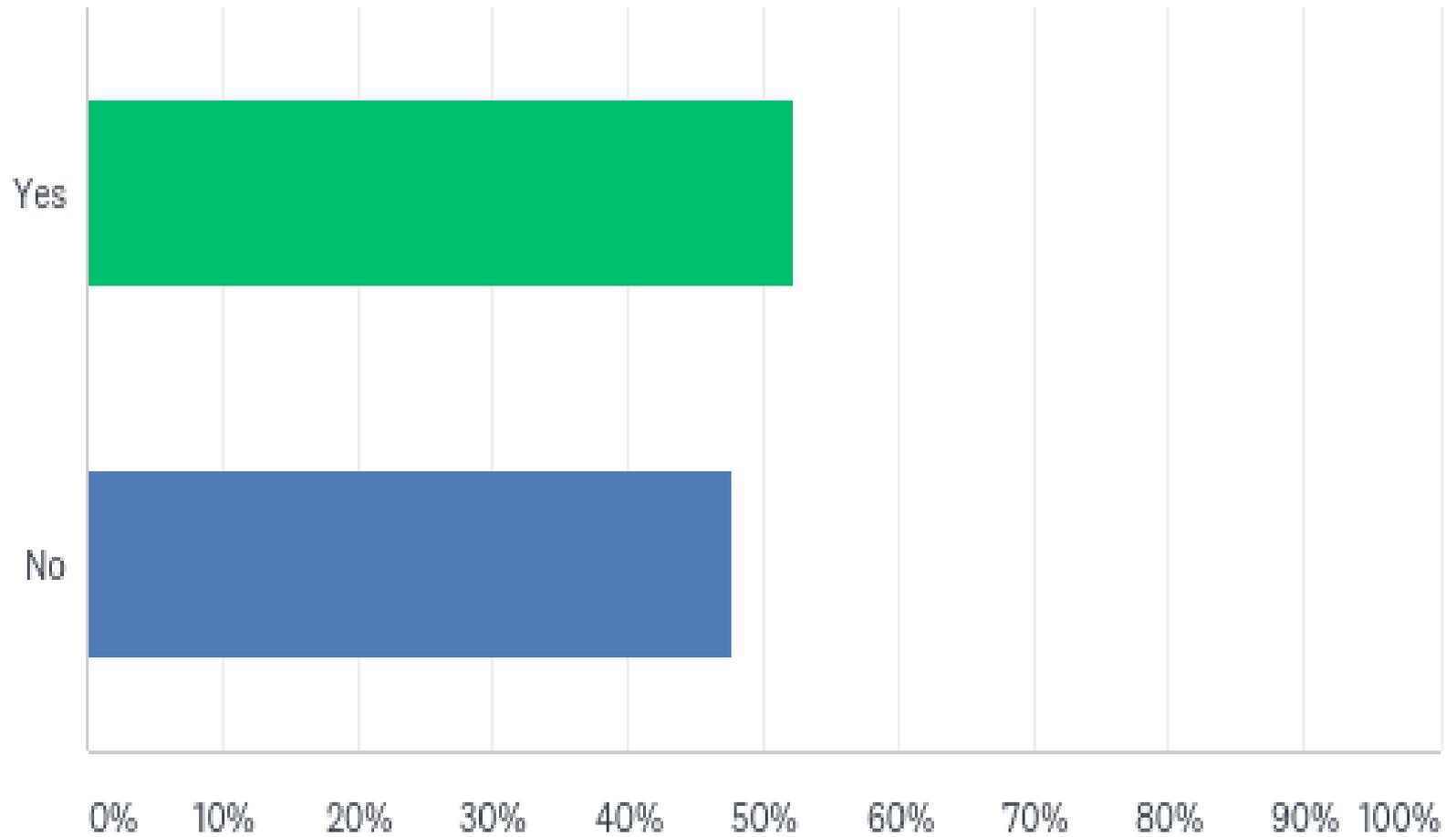
Q3: ICPC is used …? (more than one answer possible)
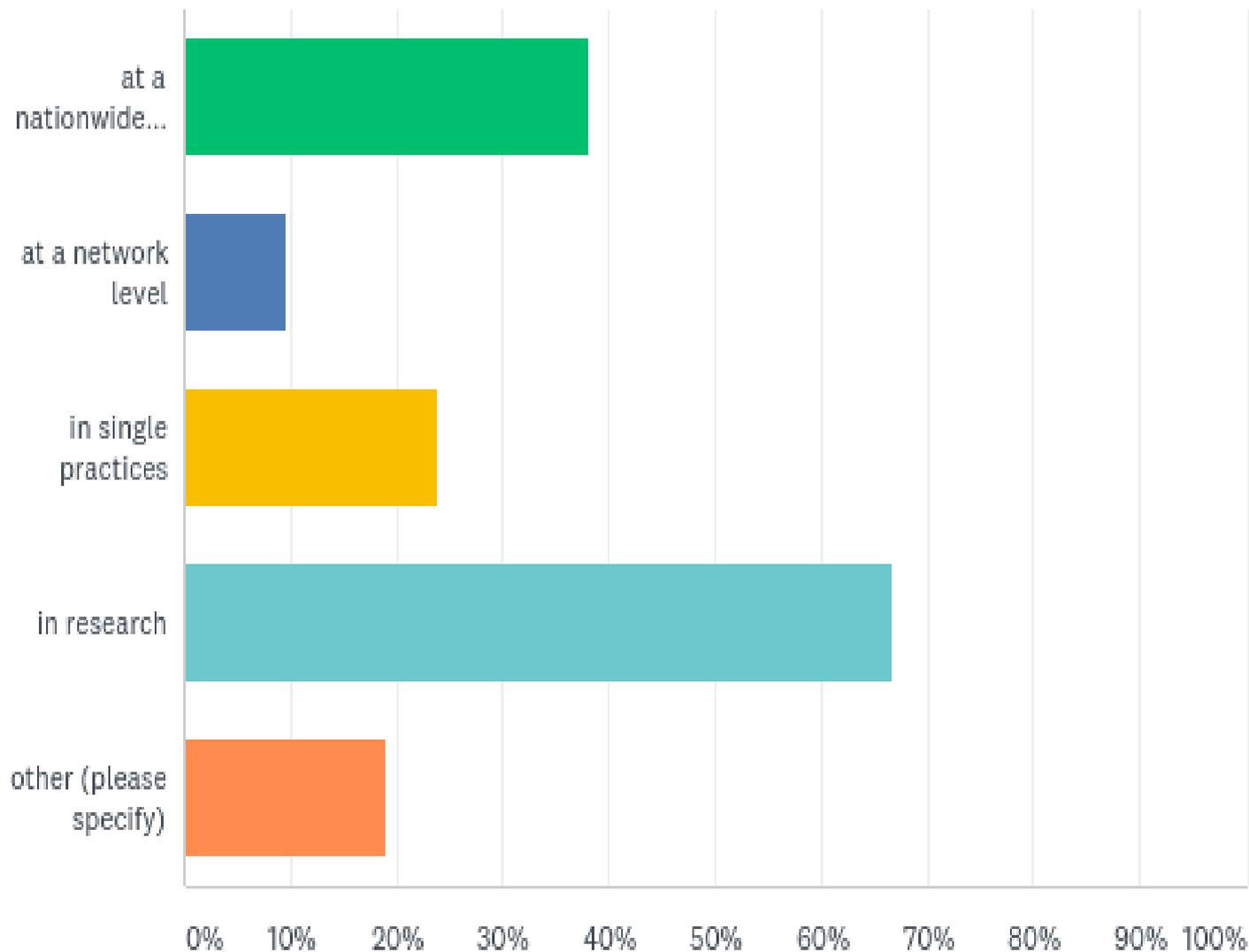
Q4: The ICPC is used …? (more than one answer is possible)
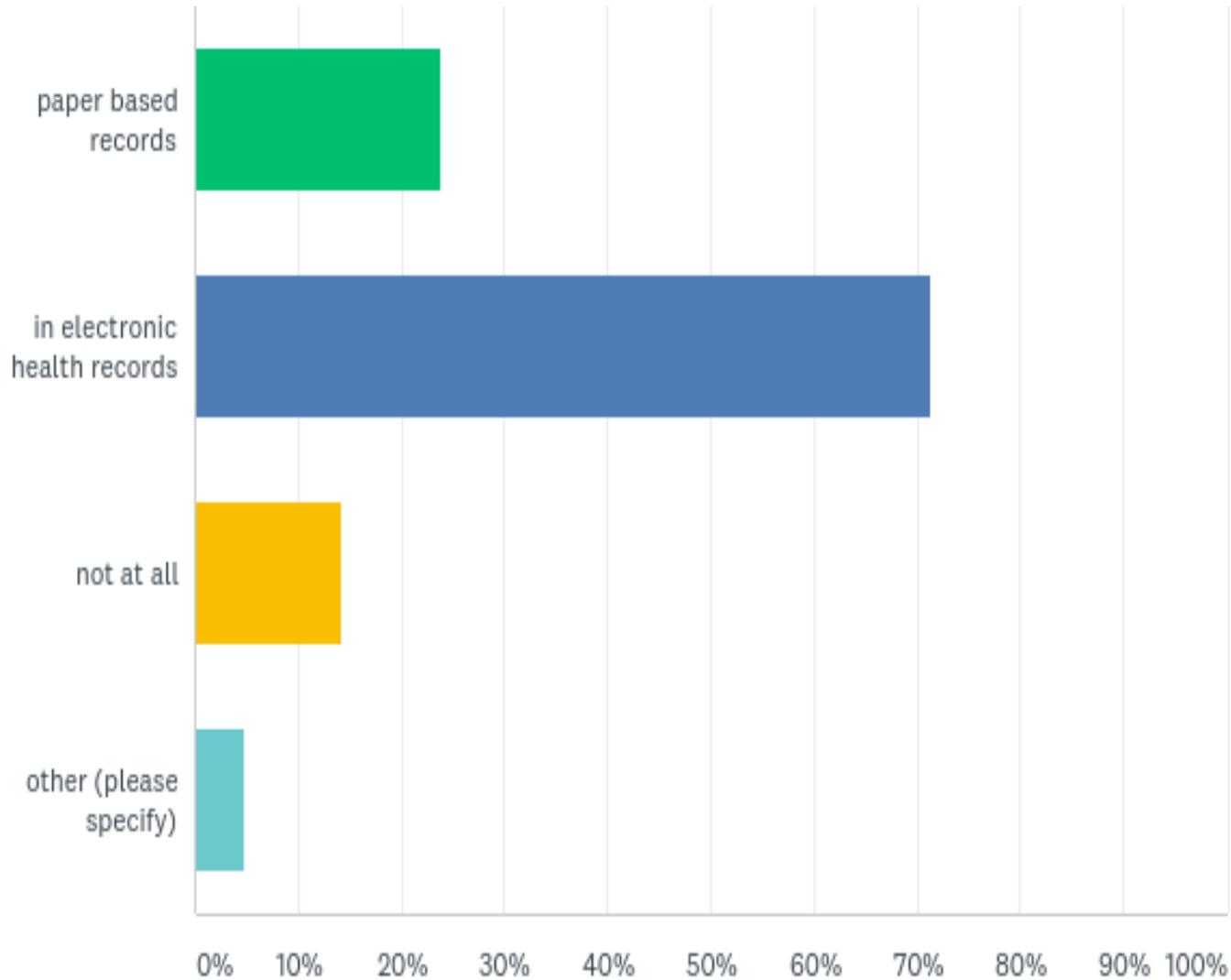
Q5: Who does the coding? (more than one answer possible)
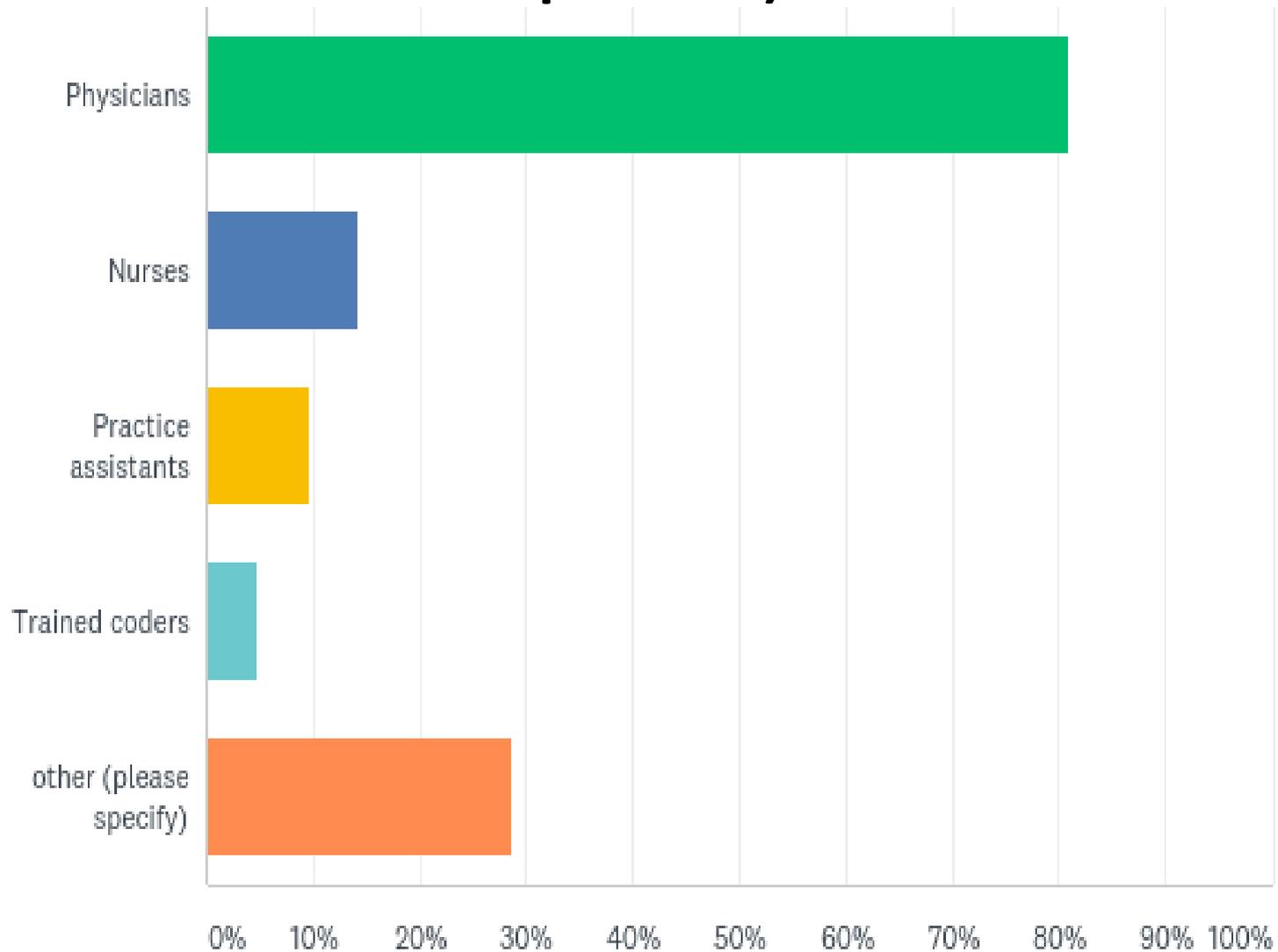
Q4: The ICPC is used ...? (more than one answer is possible)
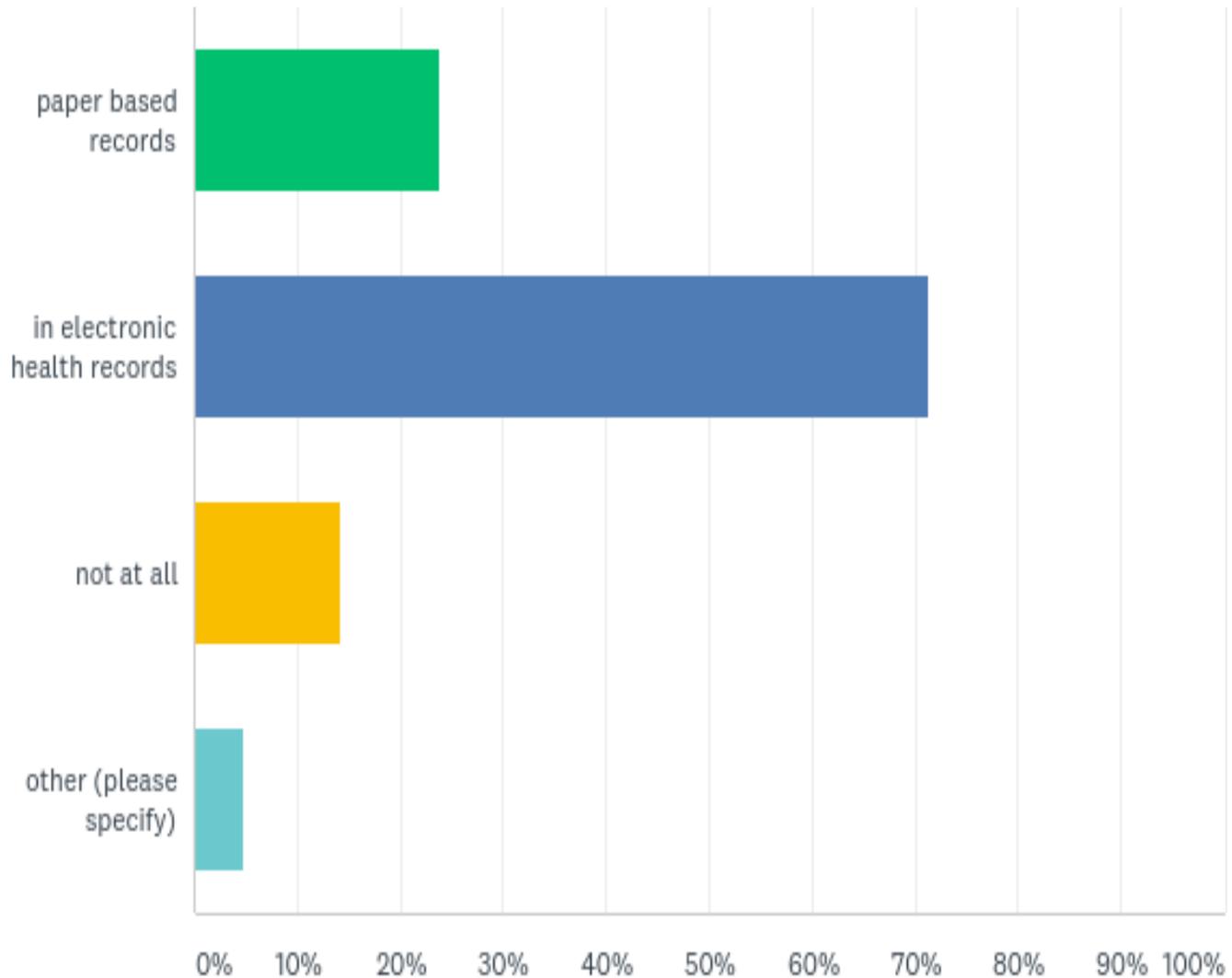
Q6: ICPC is used to code …? (more than one answer possible)
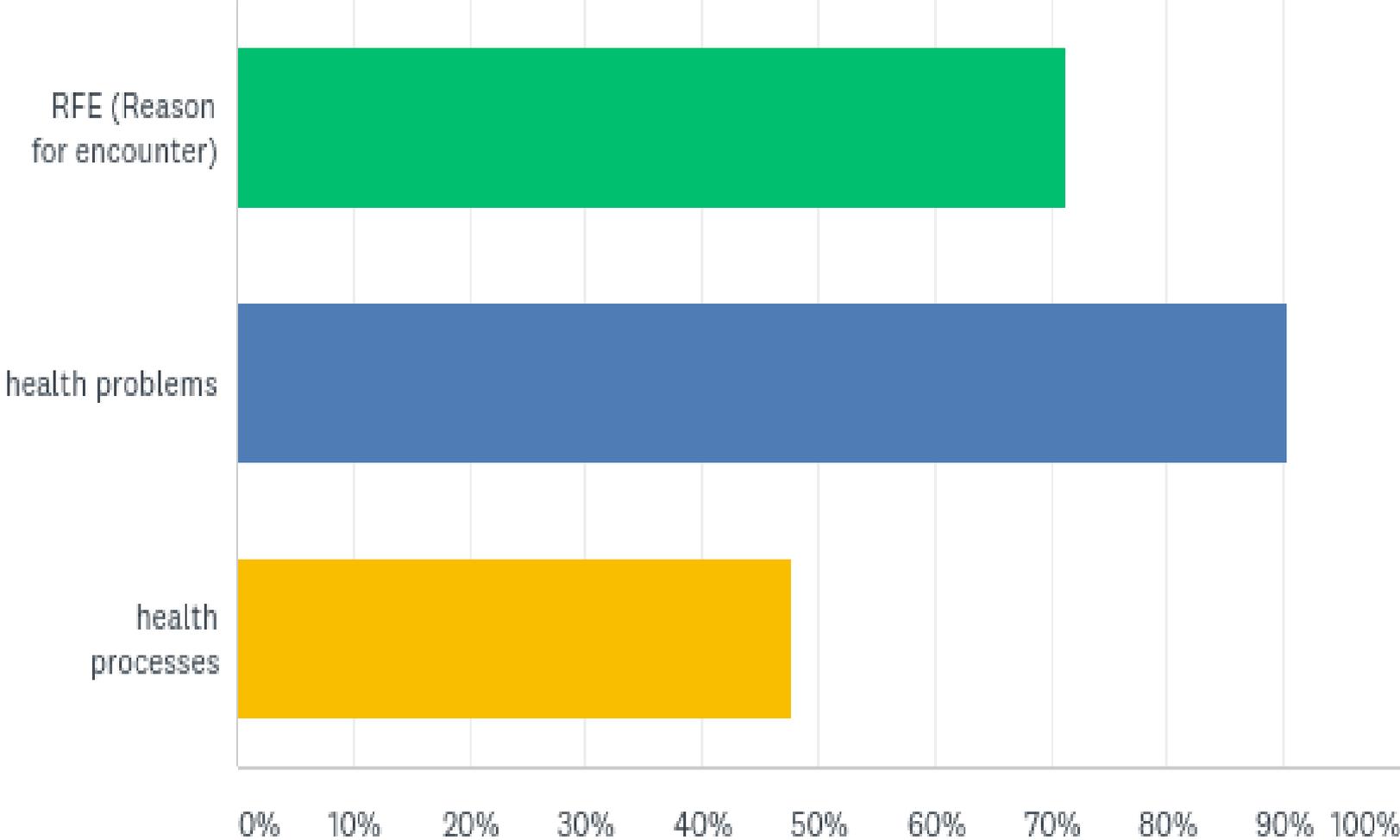
Q7: Is the documentation organized in Episodes of Care?
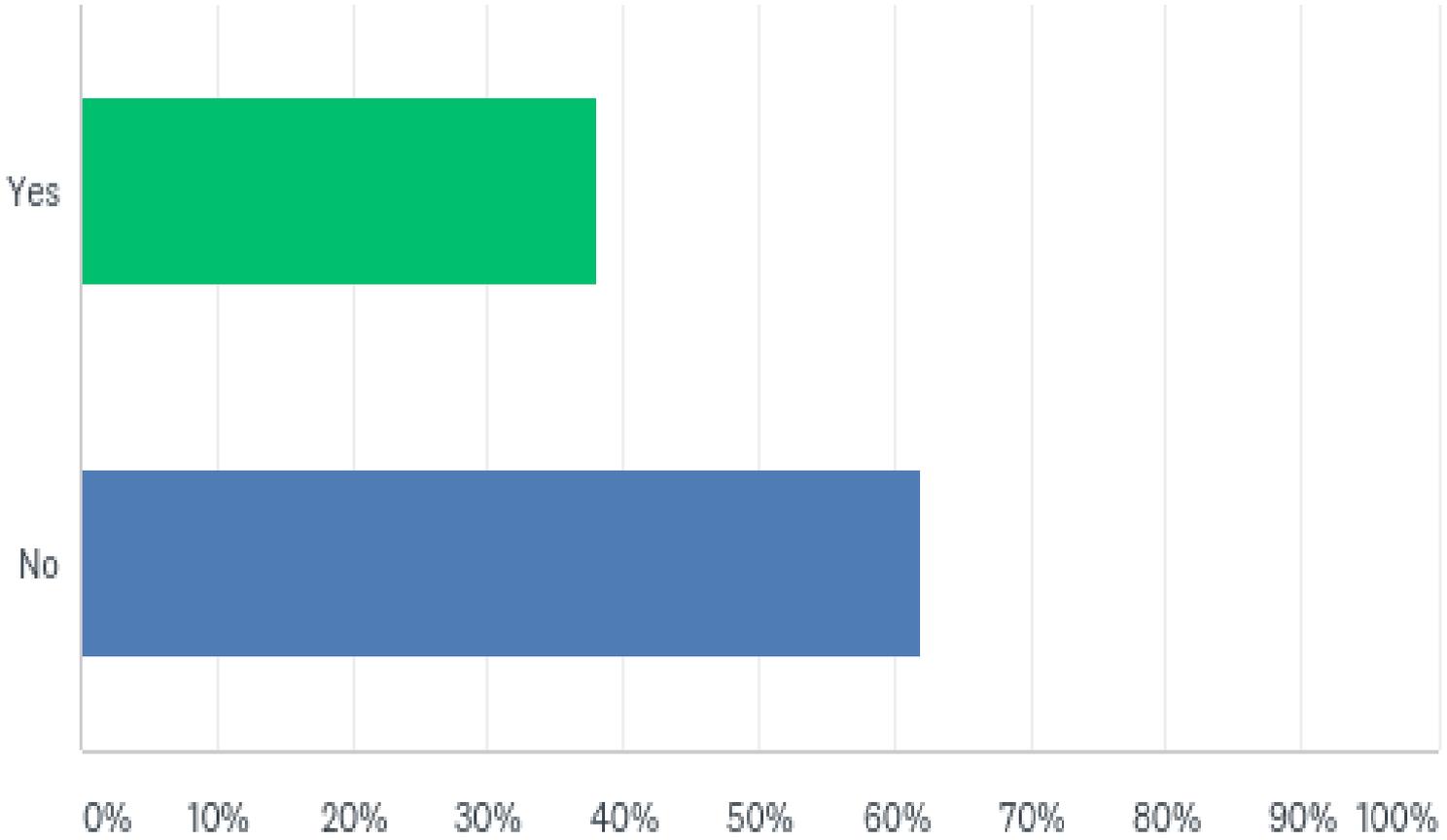
Q8: Is the ICPC used together with ICD?

Q9: Is the coding process supported by a thesaurus (interface terminology)?

Q10: Who is working with/analyzing the resulting data? (more than one answer possible)

Q11: What are the resulting data used for? (more than one answer possible)

Q12 How do you stimulate (or plan to stimulate) your colleagues to use ICPC?

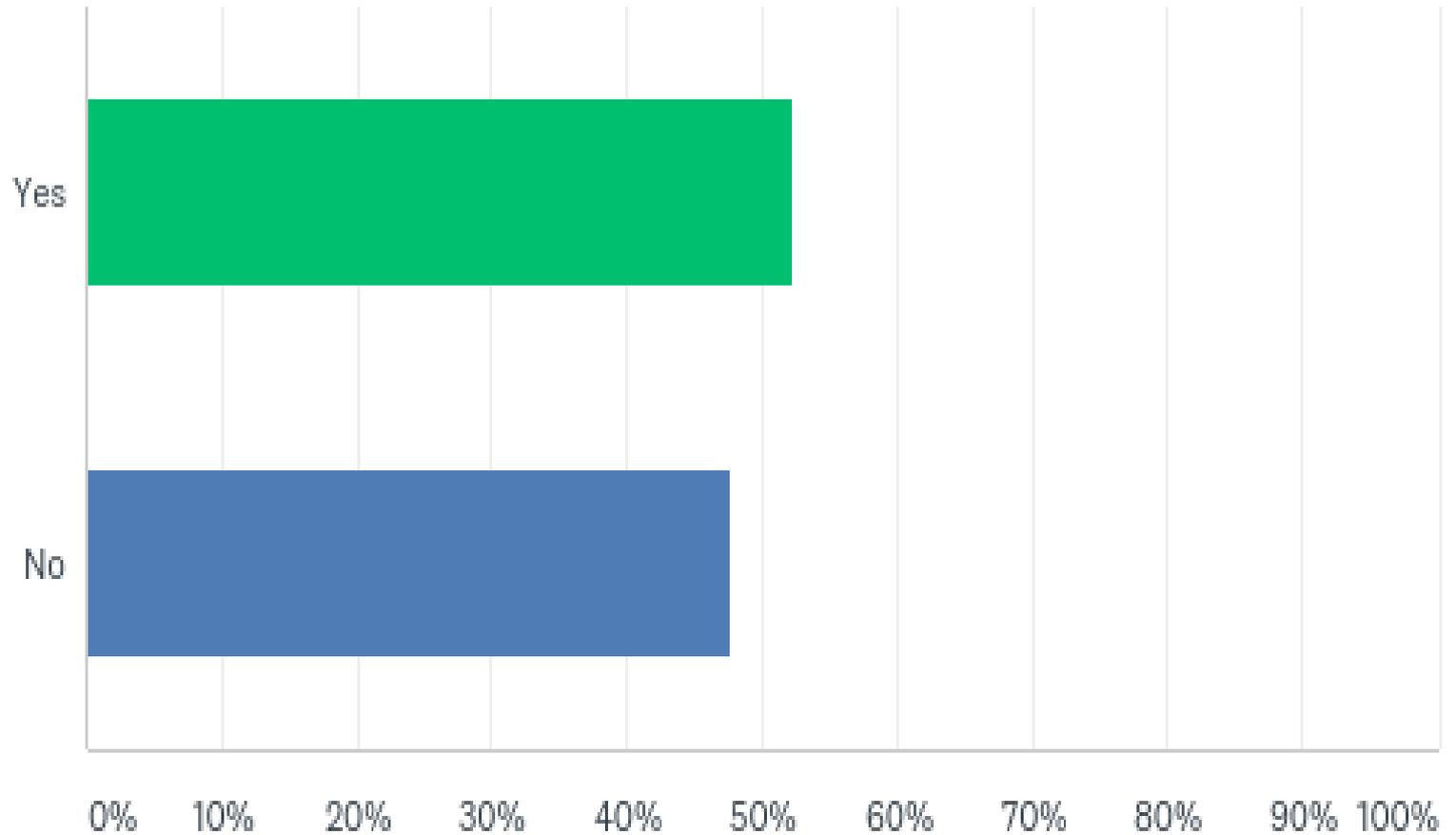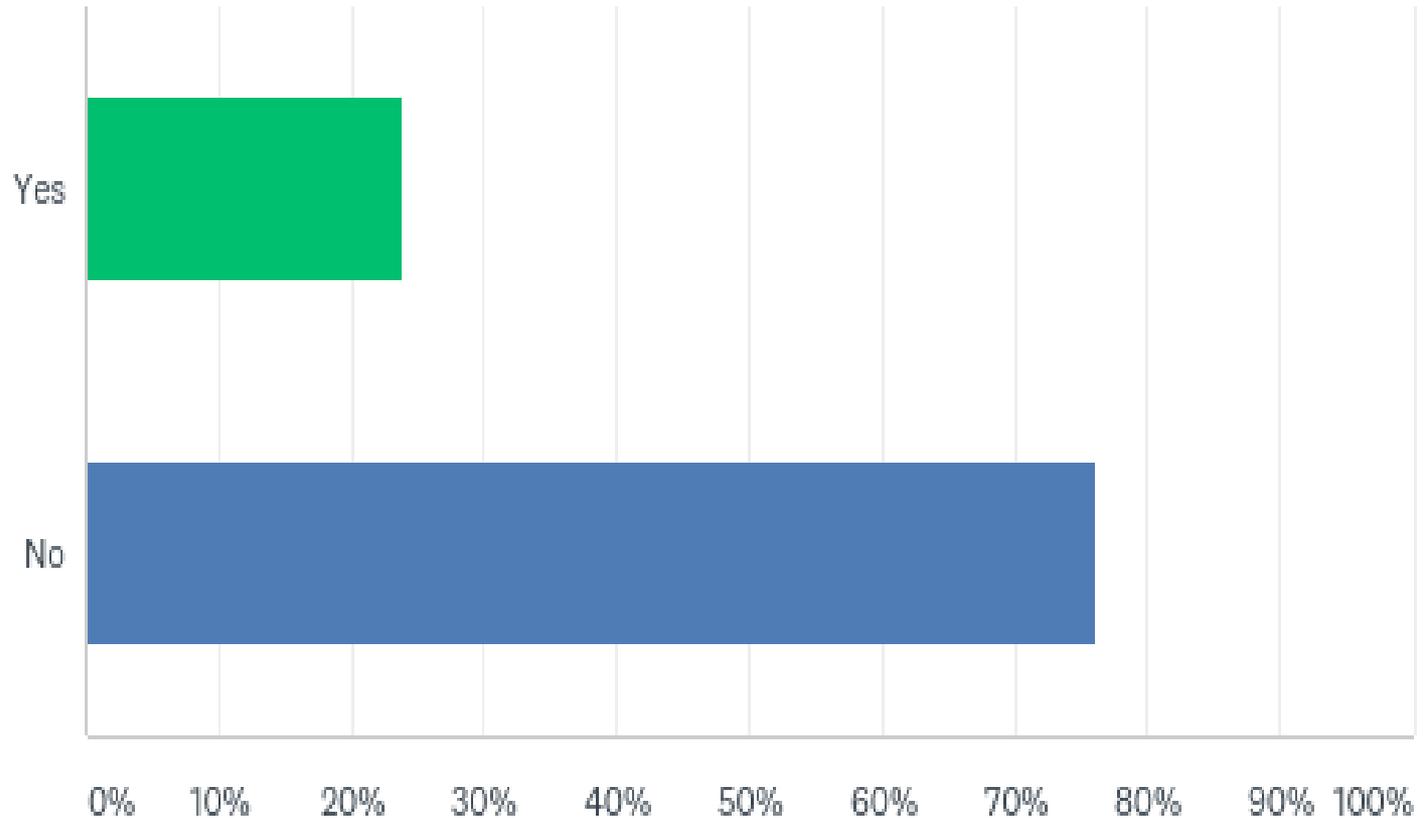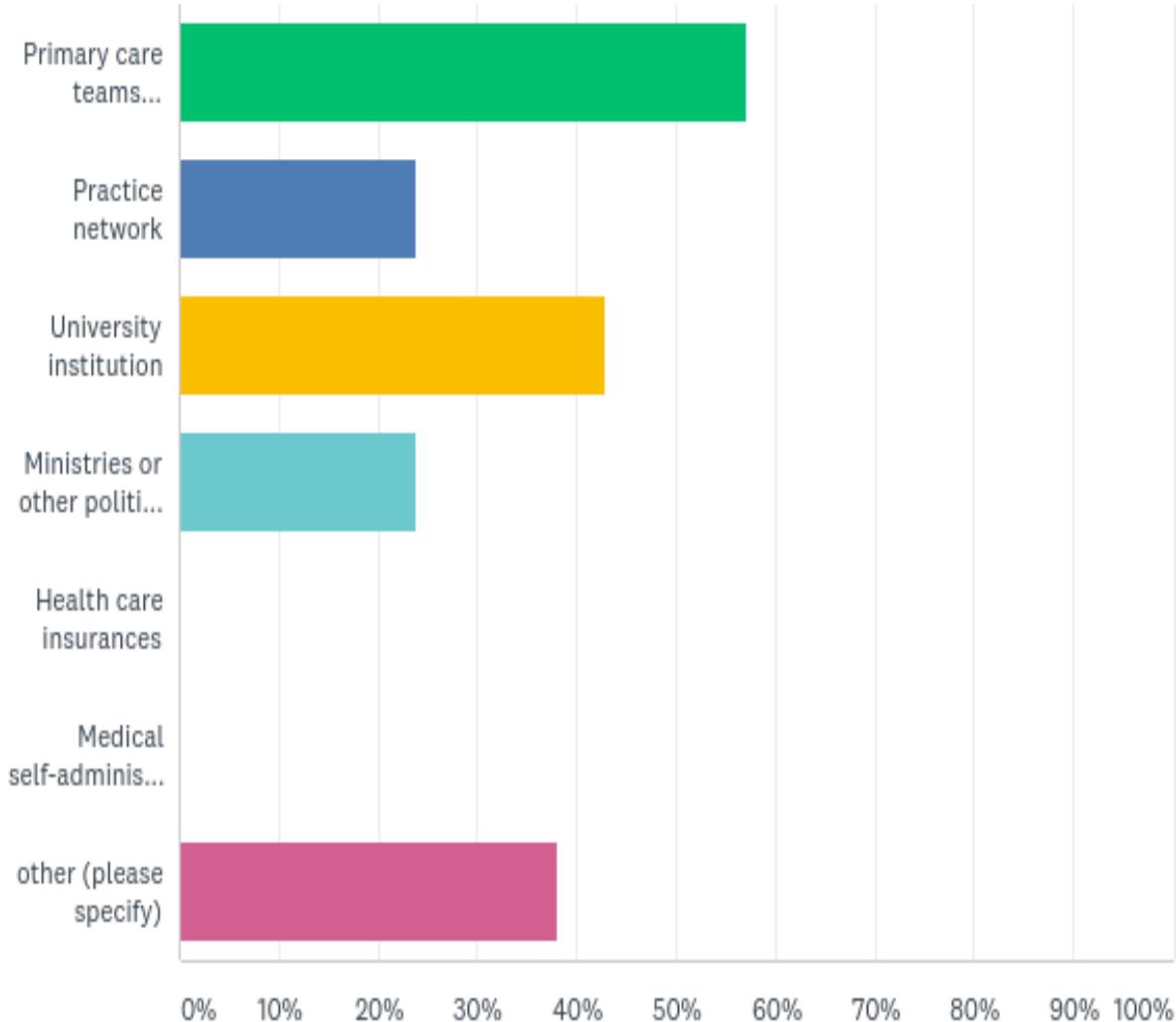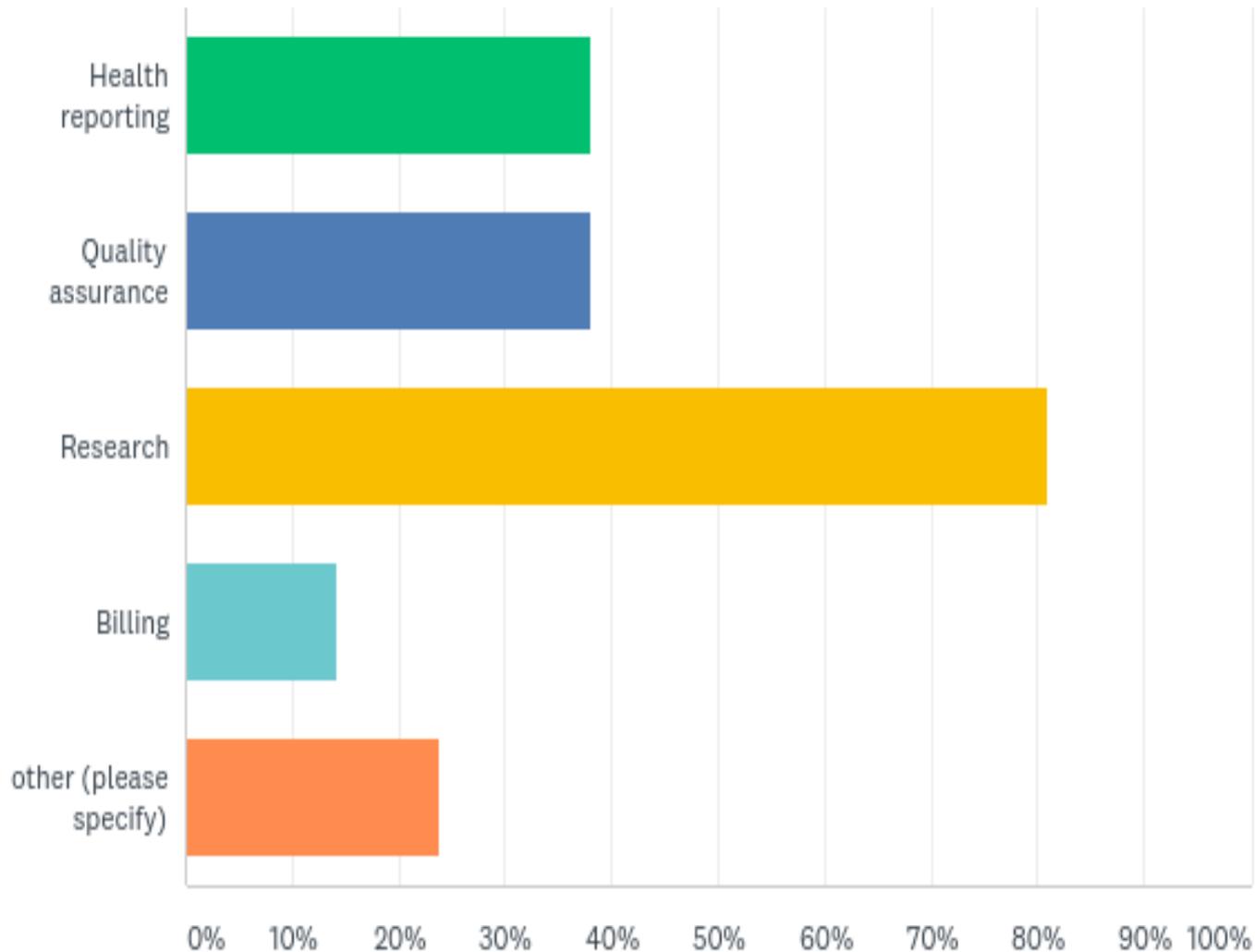| #	RESPONSES
1	Coding diagnosis/health problems using either ICPC, ICD or both is mandatory. THL (the National Institute of Welfare and Health) collects data from public service providers based on legislation. The results are reported and the database / aggregated data / statistics is open for public, service providers etc. The usage of ICPC and other classifications is followed up locally as well and reported back to individual GPs etc. Providers, the management, national authorities are interested in health burden, patient flow, the ways to organize services in multidisciplinary teams etc. etc. When data are used for several purposes, this will stimulate health professionals to code. My Kanta -services enable patients to see their own data and information entered in patient records, diagnosis etc. and this may stimulate coding as well. A national thesaurus would help in entering the data and also using ICPC. Interface terminologies etc. may be used/provided in some EMR-systems but not coordinated enough. Adopting SnomedCT / subsets of Snomed may bring some improvement in this. Using ICPC in EMS may/will stimulate the overall usage of ICPC through the episode of care/services. Naming episode of care by using ICPC as a title (in the future) might stimulate the usage of ICPC.
2	Aiming for better support in the EHR: terminology and automatic coding. Implement descion making tools. Give better qualitiy reporting to the individual doctor. Introduce ICPC in medical school and the educations. Demonstrate value in health data.
3	Teach about it
4	Unique data for primary care
5	By organizing training to improve awareness. By engaging with the Health ministry's division of health data and statistics through continuous advocacy.
6	By now they find better than ICD but the government need to send data back

7	We have contact with EHRsystems' developers, to make use of ICPC easier. We are developping training for those who are motivated.
8	very hard
9	By showing data, especially RFE data
10	To participate in the FIRE and OPTICA-Project
11	By discussions and training showing them the importance of ICPC. Showing them that knowing reason for encounter gives you a chance be more prepared (technically and educated)
12	Lost cause
13	By embedding it in GP EHR systems, with an interface terminolgy, so it is easier and faster to enter a keyword (e.g. oa), get a pick list of terms linked to that keyword, select problem label from list; and have it automatically classified than it is to type the name. System saves selected term in record + classifies it for later analysis. Also provide hotline for help, and guidelines for use of terminology and use of ICPC-2. Also publish widely on data from national GP activity study, using ICPC-2, published articles in GP journals in Aus, to educate value of classification; presented at GP conferences.
14	Mandatory use for chronic diseases
15	It is so hard, I didn't succed till now
16	No plan
17	Personally I give annual seminar on ICPC to young future GPs during their vocational training.
18	Teaching / Research
19	I try to make them understand the importance of this classification il promary care compared to ICD
20	Presentations at conferences and workshops

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