A National Interdisciplinary Terminology for Health and Social Care in Sweden

The interdisciplinary terminology should be available and used on a national level and is expected to contribute to good quality health and social care services that are safe and secure. The interdisciplinary terminology is also expected to facilitate follow-ups and comparisons of health and social care activities in order to provide more efficient methods for assessing care quality and results.

To achieve this goal, reliable resources of uniform concepts and terms need to be accessible and used as a basis for care documentation, transfer of information, knowledge development, research, regional comparisons and for statistical purposes. The National Board of Health and Welfare has identified five integral parts of the national interdisciplinary terminology:

- concepts and terms that have been agreed on a national basis and published in the Board’s terminology database
- statistical classifications and coding systems that have been agreed on a national and international basis
- the clinical terminology SNOMED CT
- methods for developing, managing and administering the interdisciplinary terminology
- rules for use of the interdisciplinary terminology.

Introduction, Management and Administration of the Project

Results

A stable and well-functioning organisation for managing and administering SNOMED CT is a prerequisite of the introduction of the interdisciplinary terminology on a national level. Easy access to the content of the interdisciplinary terminology will also be necessary. The first release of the Swedish version of SNOMED CT in a standardised format has been scheduled for October 2011.

Each step of the introduction process requires user training, development of applications connected to the common information structure and additions to the contents of SNOMED CT. The initial responsibil-
ity for the dissemination of knowledge to the responsible organisations on local and regional levels will probably lie with the National Board of Health and Welfare.

It has been suggested that all decisions related to the national interdisciplinary terminology will be made by the line organisation at the National Board of Health and Welfare.

Presently, the clinical terminology SNOMED CT mainly contains concepts and terms from the clinical health care area. When Sweden joined IHTSDO, the international association that develops and promotes use of SNOMED CT, it was established that a new focus area for the terminology content development should be the concepts and terms used in the social care area, and it was also decided that this should be a focus area on an international level, within IHTSDO.

Management and Co-operation

The work to be done within the national strategy for eHealth has been grouped into six action areas. The tasks within the action area for creating a common information structure has been jointly undertaken by the National Board of Health and Welfare, the Centre for eHealth in Sweden (CeHis) and the Swedish Association of Local Authorities and Regions (SALAR).

The management and administration of the interdisciplinary terminology requires efficient and effective governance, co-operation and co-ordination, and the development of the action area should preferably be governed collectively by the different parties. It is important to clarify the responsibility for the development between the parties.

The plans for managing the national interdisciplinary terminology and the national information structure include, for example, contents, plans for realisation, descriptions of competencies and resources needed, rules for use and descriptions of necessary co-operations.

The common information structure will be implemented gradually, and a broad-based implementation won’t be possible for many years. A complete connection between SNOMED CT and the applied information structure will be done in parallel with the implementation, on a national basis and in selected projects.

Clarification of Responsibilities

With a few exceptions, it is the National Board of Health and Welfare that holds the responsibility for the content in the Swedish version of SNOMED CT. The exceptions are related to areas in which several parties have an interest. For these areas it’s not clear which organisation will take the responsibility for the quality of the concepts and terms in SNOMED CT or for the financing of the administration and development of the work. It would be appropriate if the National Board of
Health and Welfare was given the task to co-ordinate all activities related to SNOMED CT that will be performed on a national level.

**Knowledge Management and Rules for Use**

It is important that SNOMED CT, as well as the other parts of the interdisciplinary terminology, is used internally at the National Board of Health and Welfare as well as nationally. This means that the Board has to adjust all the knowledge-based policies, guidelines, health data registers and regulations it produces to comply with the developments of electronic information management currently taking place in the health and social care services.

Together with the national information structure, the national interdisciplinary terminology should form an integral part of the quality management system used in health and social care processes.

The main goal of the national interdisciplinary terminology is to increase patient and client safety and to contribute to reliable comparisons of health and social care processes. For this goal to be reached, use of the terminology needs to be regulated since, at this point, regulation is judged to be the best method to guarantee implementation in Sweden on a broad scale.