

Agenda

- The need to embrace our complex health care system and learning to do so. Christian von Plessen
- Contributors to healthcare services in Denmark
 - Colitis and Crohn's association Denmark. Charlotte Nielsen
 - Danish clinical registries (RKKP). Katrine Abiltrup
 - Danish national quality program and learning and quality teams. Helle Bak, Anne Lyngberg
 - Health care professionals
 - Researchers...
- Bringing contributors together: Learning collaboratives/patient centered registries supported by Cincinnati Children's. Carole Lannon.
- Groups at tables:
 - How do the elements of quality improvement in Denmark interact? What works? What does not?
 - What do we need to move learning networks in Denmark to the next level?
- Report out from tables and comments/questions from Carole (and others)
- 5 take home points for our colleagues at the conference

Combining healthcare learning networks and patient centered registries – Inspiration for quality improvement in Denmark?

- Carole Lannon, MD MPH, Senior Faculty Lead, Learning Networks Program
- Katrine A. Nielsen, afdelingsleder, RKKP
- Charlotte Lindgaard Nielsen, formand Colitis Crohn forening
- Helle Bak, projektleder, LKT antibiotika
- Ann Lyngberg, projektleder LKT antibiotika
- Bodil Bjerg, seniorkonsulent, Danske regioner
- Christian von Plessen, centerchef, Center for Kvalitet

Amazing
outputs

Great
challenges

Constant innovation

Highly effective
treatments

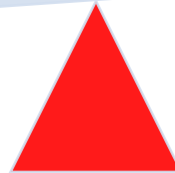
Elimination of
diseases

...

Fragmented care

Safety problems

Insufficient
communication



Amazing
outputs

Great
challenges

Leaps of innovation

Highly effective
treatments

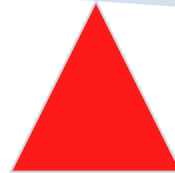
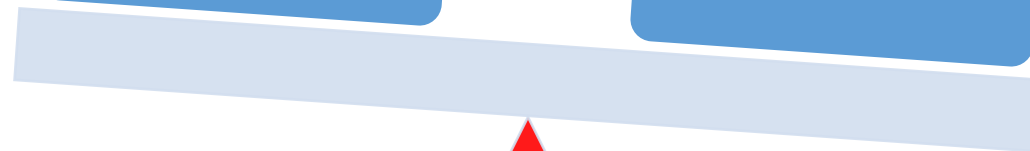
Elimination of
diseases

Fragmented care

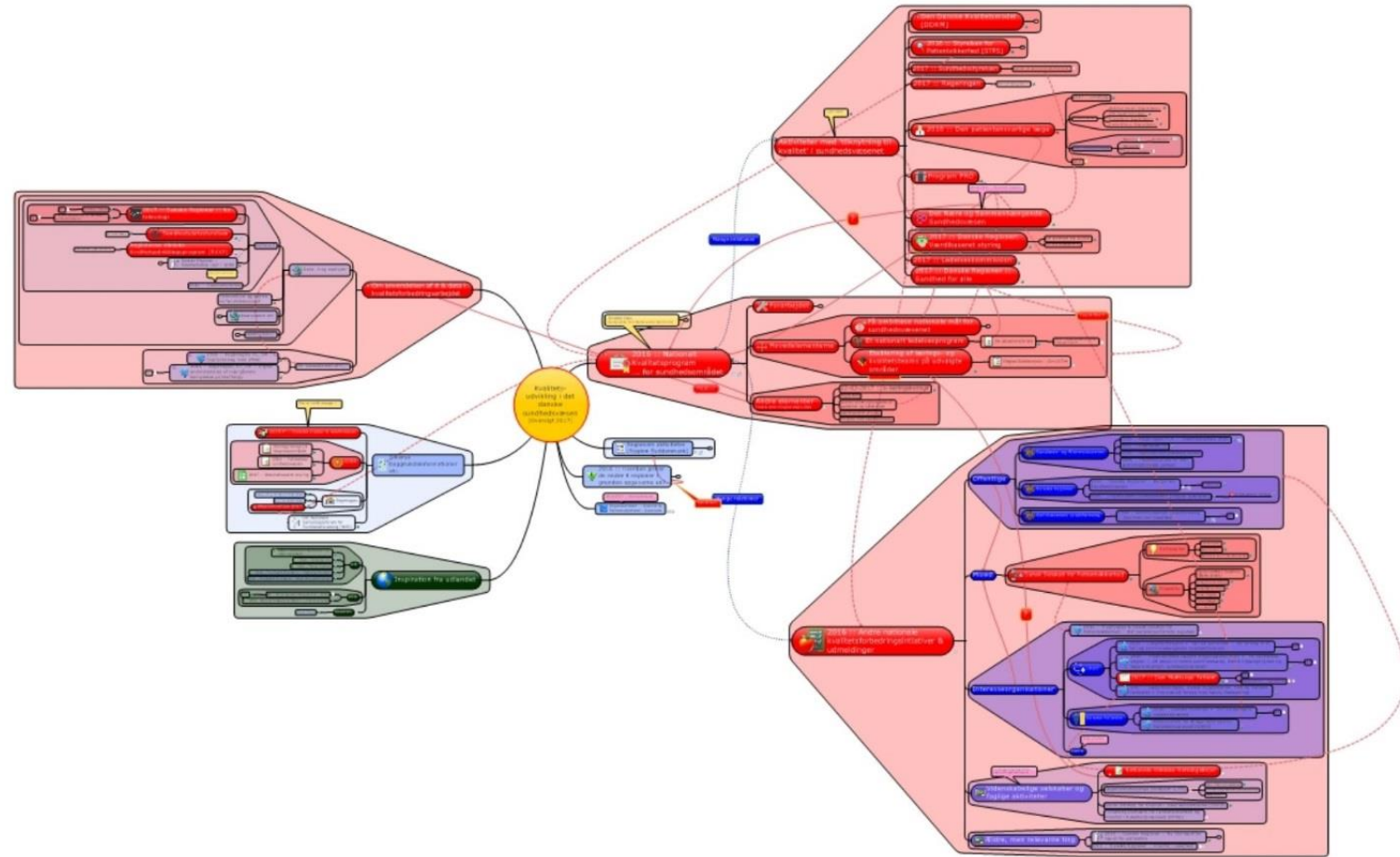
Safety problems

Insufficient
communication

...



Many contributions—increasing complexity



Formula of team interactions:

$$I = n(n-1)/2$$

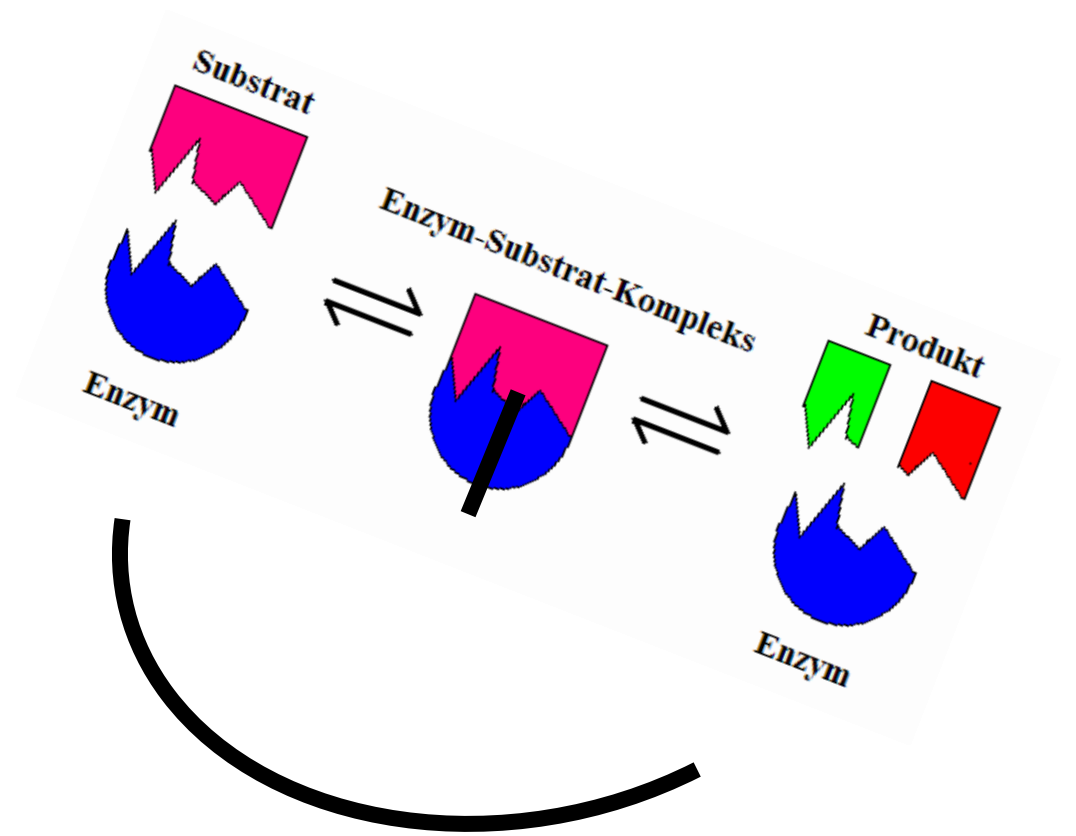
If $n = 3$; $I = 3$

If $n = 4$; $I = 6$

If $n = 10$; $I = 45!$

Reform to improve coordination of health and social care (Sammenhængsreform)





Many contribute to improving health care—working together is not easy

Let's hear from some contributors in Denmark, hear an example of collaboration and talk about how we can work across silos in Denmark!

Agenda

- The need to embrace our complex health care system and learning to do so. Christian von Plessen
- Contributors to healthcare services in Denmark
 - Colitis and Crohn's association Denmark. Charlotte Nielsen
 - Danish clinical registries (RKKP). Katrine Abiltrup
 - Danish national quality program and learning and quality teams. Helle Bak, Anne Lyngberg
 - Health care professionals
 - Researchers
 - ...
- Bringing contributors together: Learning collaboratives/patient centered registries supported by Cincinnati Children's. Carole Lannon.
- Groups at tables:
 - How do the elements of quality improvement in Denmark interact? What works? What does not?
 - What do we need to move learning networks in Denmark to the next level?
- Report out from tables and comments/questions from Carole (and others)
- 5 take home points for our colleagues at the conference

More ideas for questions for group work: Danish

- Hvordan kan vi tage næste trin i DK inspireret af Learning networks?
- Hvordan kan vi anvende de eksisterende indsatser, som fx de nationale LKT'er?
- Hvordan arbejder vi bedst med vores «HVORDAN»?
- Hvordan får den enkelte patient indflydelse på «HVORDAN» og personligt gavn af resultaterne?
- Hvordan kan patienten være en ligeværdig medspiller i LKT teamet – og skal patienten være en ligeværdig medspiller i LKT teamet?
- Hvilke organisatoriske, økonomiske, personlige, praktiske etc. barrierer skal nedbrydes således at patienten kan deltage i LKT teamet?
- Hvordan og hvornår vil vi som borgere gerne have adgang til viden og sparring, og med hvem?

More ideas for questions for group work: Engl.

- How can we use the inspiration from Cincinatti to move to the next level in DK?
- How can we use existing activities, such as learning and quality teams?
- How can we best work with our approaches to QI (the how)?
- How can patients gain influence on approaches to QI and experience positive results?
- How can patients become partners in learning and quality teams? Should they?
- Which organisational, economic, personal, practical barriers need we overcome to allow patients to participate in learning and quality teams?
- How and when do we as citizens want access to knowledge and sparring and with whom?

Charlotte from the Colitis Crohn association will talk about:

- Complexity of having IBD AND other diseases and lack of a coherent health system to support patients with multiple diseases
- Is the patient a human being or a case? Do physicians see the world through patients' eyes?
- Who/which physician is responsible for patients who need help from different specialties? How can adverse events be avoided?