WHO-FIC NETWORK MEETING

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Report of the Hospital Data Working Group

Björn Smedby, Chair of the Working Group
WHO Collaborating Centre for the
Family of International Classifications in the Nordic Countries

Abstract

Progress report 2005 of the Hospital Data Working Group

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Background

The Hospital Data Working Group of the Family Development Committee of the WHO-FIC Network was set up at the Brisbane Meeting in 2002. The aim was to further test the data collection process and the shortlists for hospital diagnoses and surgical procedures that had been proposed by the European Union Hospital Data Project (HDP) which presented its final report in June 2003. The Working Group has reported back to the WHO-FIC Network at subsequent Network Meetings. At the Reykjavik Meeting in 2004 the Working Group was asked to continue a dialogue with the Eurostat, OECD and WHO on a possible harmonised shortlist of diagnoses for international reporting

The Eurostat / OECD / WHO shortlist of diagnoses for hospital statistics

A meeting initiated by Eurostat was held in Luxembourg on 31 January, 2005 to which the WHO-FIC group was invited. The group was represented by its chair joined by Martti Virtanen and André L'Hours. Extensive tabulations of the HDP pilot data including Canadian data, prepared by the chair of the WHO-FIC group, were used as a basis for the discussions.

We were successful in convincing the participants that the shortlist of diagnoses proposed by the Hospital Data Project is not too long and that the principles behind the list are sound and that the groups are meaningful. Thus, the participants agreed to it in principle. There were a few suggestions for minor changes of the list, however. Two of the suggestions were about the content of groups for malignant neoplasms and one was a request for further investigation about the need for a new group for multiple sclerosis. These changes were agreed on after consulting with members of the WHO-FIC Working Group.

The final shortlist can be found as an Appendix to this report (in a separate Excel file).

Eurostat has already used the new shortlist for their annual data request which was sent out in March 2005. OECD needs to get the formal agreement with its health data national correspondents, which they hopefully will get at their meeting on 28-29 September, 2005 to which the WHO-FIC Working Group chair has been invited. The result of this meeting will be reported at the Tokyo Meeting.

The European Office of WHO has published the shortlist on their website, but they are currently also testing collection of pilot data on a more detailed level. NOMESCO has decided to use the shortlist for their annual statistics for the Nordic countries from 2005. The Netherlands are already producing national statistics according to the earlier HDP shortlist.

The second phase of the EU Hospital Data Project (HDP-2) is expected to get started in 2005 with The Netherlands as coordinating country. The HDP-2 will continue the work of HDP. One of its tasks will be to work on a shortlist of procedures to be used in hospital discharge statistics. Hopefully, the WHO-FIC Working Group could collaborate with HDP-2 on this and other aspects of comparability of international hospital discharge statistics.

In short, we seem to be very close to a situation where all major producers of international hospital discharge statistics have agreed on a common shortlist of diagnoses. I think that the WHO-FIC Working Group can be proud of this major contribution to comparative hospital statistics.

At this stage it may be appropriate for the WHO-FIC Network Meeting

- to consider recommending WHO to formally adopt the common list as a recommended shortlist of diagnoses for hospital statistics,
- to discuss and agree upon a name for the shortlist. Preferably, the name should include the international organizations which have agreed to use the list (Eurostat, OECD, WHO).

Further analysis of pilot hospital discharge data

At the Reykjavik meeting examples were given of international comparisons based on the pilot data provided by the Hospital Data Project on 15 European countries to which had been added corresponding data for Canada. This database was also used for the Eurostat-OECD-WHO meeting in Luxembourg on 31 January, 2005 as mentioned above.

Australia has since then provided similar pilot data that has been added to the existing database. Due to technical difficulties it has taken quite some time to handle the Australian dataset, but a CD-ROM has been prepared with combined data that is now being analyzed. Results from these analyses will be presented at the Tokyo Meeting.

Only Canada and Australia have so far been able to provide pilot data. It seems unrealistic to get data from other countries at this stage. It would probably be better to try to extend the future data collection of the HDP-2 to include some interested non-European countries for broader international comparison.

The Reykjavik meeting agreed that it is of special importance to study the influence of national diagnostic habits and recording practices on international comparability. The WHO-FIC Network should consider ways to increase the comparability through identifying differences in national practices and possibilities for WHO to provide international guidelines further to what is given in ICD.

It may be appropriate for the WHO-FIC to include items about national rules and guidelines in its information collection for the ICD revision process.

Appendix:
Eurostat-OECD-WHO morbidity shortlist for hospital discharge statistics
(separate Excel file)