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Facilitators for use of quality registry data in cardiac rehabilitation – a survey study

Presenter: *Cecilie Lindstrøm Egholm, Region Zealand, Denmark*

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Background

In several countries, quality registries have been applied within the field of cardiac rehabilitation to improve quality of care. To achieve this aim, a thorough implementation of registries is required including high quality data entry and subsequent use of data for systematic follow-up and learning opportunities. Studies in other clinical fields indicate that such use of data is not widespread.

Project aim

To investigate a) to which degree data from cardiac rehabilitation registries are used in quality improvement work, and b) what aspects of the registries and stakeholder organizations that facilitate use of registry data in improvement work. To explore possible country specific determinants, we focused on two strategically chosen cases: The relatively new Danish Cardiac Rehabilitation Database and the more mature British National Audit of Cardiac Rehabilitation.

Project methods

The study is in preparation. We will perform a quantitative survey, using a validated Swedish questionnaire on use of data from national quality registries. The questionnaire, encompassing 50 items regarding the registry, processes and context, will be translated into Danish and English using recommended methods. The questionnaire will be sent to managers, clinicians and administrative staff involved in using the national cardiac rehabilitation registries in hospitals in DK and the UK respectively. Data will be analysed descriptively and through multiple linear regression.

Project results

The survey will be completed by February 2018. Expected results include a) descriptive data on the participants´ use of registry data for quality improvement work and b) results from the regression analyses, indicating which aspects, according to the respondents, that facilitates use of registry data in cardiac rehabilitation quality improvement. In these analyses, a variable (index) depicting the healthcare unit´s use of registry data will serve as the dependent variable.

Preliminary or final conclusions/discussion

We expect for the study to provide new perspectives on the responsibilities and collaborations regarding use of cardiac rehabilitation registry data in complex healthcare settings involving multiple stakeholders. The findings will be linked to relevant implementation and/or improvement theories, and finally, methodological considerations will be discussed. Findings will be relevant to health care policy makers, managers and administrators at national, regional and local level.