



FOLKETINGET
STATSREVISORERNE



FOLKETINGET
RIGSREVISIONEN

November 2018
– 3/2018

Extract from Rigsrevisionen's report
submitted to the Public Accounts Committee

Patients' right to prompt investigation

1. Introduction and conclusion

1.1. Purpose and conclusion

1. This report concerns patients' right to prompt diagnostic investigation (investigation right). A diagnostic investigation is a medical assessment of what is wrong with a patient and what treatment the patient should be offered. The purpose of the investigation right is to avoid unnecessary waiting time and ensure that all patients are offered diagnostic investigation within 30 days, if medically possible. For the patients, prompt diagnostic investigation means that they will be diagnosed and offered treatment without delay.

According to the investigation right, the regions are required to ensure that patients receive a diagnosis within 30 days after receipt of their referral. If the region is unable to offer the patients diagnostic investigation within 30 days, they will be referred to full or partial diagnostic investigation either at another public hospital or at a private hospital. If lack of capacity prevents the region from offering the patients diagnostic investigation within the 30 day waiting time target at its own hospitals, other public hospitals or private hospitals, the rule of the extended free choice of hospital will be applicable and the patients will be entitled to exercise their right to choose a private hospital for the diagnostic investigation.

2. The investigation right has been part of the financial agreements between the government and the regions since its introduction in 2013. The Ministry of Health and the Danish Regions evaluated the investigation right in 2015. The evaluation showed, among other things, that the number of patients that were investigated for a diagnosis within 30 days was constant and had not improved. The Danish parliament wanted more patients to be promptly investigated and therefore extended the investigation right in 2016; now patients would be entitled to exercise their right to extended free choice of hospital, if the region could not offer investigation within 30 days due to lack of capacity.

3. In 2016, the Ministry of Health, together with the regions, revised the guideline on compliance with the investigation right. Additionally, the ministry and regions defined a set of five principles of effective information about patients' rights that are intended to improve the uniformity of the information provided to the patients and at the same time make it easier to understand. It appears from the financial agreement for 2019 that prompt investigation and treatment of patients are essential factors in health care. Prompt investigation in combination with a consistent high quality of treatment and cohesion across sectors will become one of the forward-looking objectives in

Investigation right

All patients referred for diagnostic investigation have a right to prompt investigation. Specific regulations apply to patients with suspected life-threatening cancer or heart disease. Emergency patients arriving at the hospital without being referred do not have a right to prompt investigation.

Evaluation of the investigation right

It appears from the financial agreement for 2013 that the effect of the investigation right and need for adjustments was to be evaluated 12 months after it came into force.

managing the health care sector. The ministry and regions agree that the regions' obligation to provide the patients with uniform and clear information on their rights is essential for the compliance with patients' rights.

4. Rigsrevisionen initiated the study in November 2017. The background for the study is the fact that the number of patients under medical investigation has been increasing since the introduction of the investigation right. However, according to the Ministry of Health, 10 to 20% of the 500,000 to 600,000 diagnostic investigations registered annually by the regions are not conducted in compliance with the investigation right. Compliance with the investigation right varies considerably between the regions, yet the ministry's monitoring shows that in spite of the parliament's wish to ensure prompt investigation for more patients, the number of patients who have been offered investigation within 30 days, on a national basis, has remained the same since the right was extended in 2016.

5. The purpose of the study is to assess whether the regions ensure and the Ministry of Health supports patients' equal access to prompt investigation. The study answers the following questions:

- Are the regions conducting the diagnostic investigation of the patients in compliance with the law?
- Is guidance and information supporting prompt investigation of the patients?



Conclusion

It is Rigsrevisionen's assessment that the regions are not adequately ensuring patients' equal access to prompt investigation, and that the Ministry of Health could do more to support the regions in their efforts to implement the investigation right correctly. The regions have not implemented the legislation concerning the right to prompt investigation in the same way. The consequence is uncertainty concerning the extent to which the patients get the rights they are entitled to and whether they will be able to exercise their rights.

In 2016, the Danish parliament extended the investigation right to ensure prompt diagnosis and treatment of more patients. The Ministry of Health's monitoring shows that compliance with the investigation right has not improved since then, as 10 to 20% of the patients are not investigated for a diagnosis in compliance with the investigation right. Rigsrevisionen's study shows that compliance could in reality be lower than the monitoring results indicate.

It is Rigsrevisionen's assessment that the regions, in many cases, fail to conduct the diagnostic investigation of the patients in compliance with the law. The study shows that the regions interpret compliance differently, and they have therefore implemented the right differently. Several hospital departments continue the diagnostic investigation of patients although the process has been registered as completed. The study shows that the departments find some of the medical specialities particularly challenging to handle in terms of determining when a diagnostic investigation can be considered closed.

The result is that the extent to which the patients get their right to diagnostic investigation cannot be exactly determined. At the same time, the study shows that often the regions only have focus on whether the patients' have their first appointment within 30 days and fail to consider whether the total investigation pathway is expected to exceed 30 days. As a result, not all patients with the right to prompt investigation are offered diagnostic investigation at another hospital. The study shows that the regions would like to have more guidance on compliance with the investigation right from the Ministry of Health, whereas the ministry is of the opinion that the current set of rules is sufficient to allow the regions to implement the investigation right correctly.

It is Rigsrevisionen's assessment that the guidance and information provided to the patients could support prompt investigation more effectively. It is important that the patients know their rights and know how to exercise them. The study shows that the regions provide the patients with general information on their rights in notice letters. Overall, the regions' notice letters meet the requirements laid down by the Ministry of Health concerning, for instance, information on time and place of the diagnostic investigation and treatment. However, two of the regions fail to inform the patients which other hospital they can go to for prompt investigation, if the hospital to which they have been referred is unable to meet the waiting time target of 30 days. The study also shows that the ministry's principles of effective information about patients' rights could be reflected more adequately in the notice letters. Rigsrevisionen's user study shows that most patients understand - from the notice letters - that they have the option to go to another hospital for prompt investigation, but that they often mix up the various patients' rights. It is therefore not always clear to the patients which specific options they have to be investigated within the waiting time target of 30 days.

It is Rigsrevisionen's assessment that the regions and the Ministry of Health together should organise the continued implementation of the investigation right to ensure that the regions are capable of offering patients in all regions prompt diagnostic investigation within all medical specialities, in compliance with the legislation.