Title of Project:  Organization of publicly funded cataract surgery in western Sweden

In December 2013, the board of the Västra Götaland region (VGR) decided on a new strategy for steering of health care production. The aim was to have a joint production plan for all health care providers in the region for a number of specified surgical procedures, among them cataract surgery. The purpose was to improve availability, to ensure high and equal quality and to gain a better control of health care production, especially in view of the growing number of elderly.

In VGR, which has 1.6 million inhabitants, the number of cataract surgeries in 2013 was 16,900, half of which (8,880) was performed in Göteborg-Möllndal, the largest city area in the region. Of the cataract procedures conducted in Göteborg-Möllndal, only a minor part (2,100) was done in public hospitals, the rest was performed in several private clinics with patients being reimbursed by the public health care system.

The hospital director of the Sahlgrenska university hospital in Göteborg was commissioned by the board of the VGR to work out a proposal on how cataract surgery in the Göteborg area should be organized in the future. The proposal should comprise a solution on how to concentrate all standard cataract surgery, currently executed both at private and public clinics, into only one high-volume production unit that should be separate from the university clinic. A working group with this mission was formed in spring 2014. I have been a member of this group from the start with particular responsibility for aspects concerning research and education in this future high-volume cataract clinic.

In my EuLDP project, I will describe and present several models of cataract surgery units with different types of ownership/management. Issues with these different models concerning organization, production, costs, quality control, recruitment of staff, research and education will be addressed.