



# National Center for FIC in Chile Establishment, Goals and Challenges

12 – 18 October 2013  
Beijing, China

Carrasco X<sup>1</sup>, Piedra D<sup>1</sup>, Guerra E<sup>1</sup>, Iribarne J<sup>1</sup>, Cid D<sup>2</sup>

Poster Number  
WHO/CTS to insert

<sup>1</sup>Health Statistics and Information Department, Ministry of Health

**Abstract** The National Center for FIC was formally established in December 2012 with the aim to contribute to the improvement of mortality, morbidity, health interventions and disability statistics for evidence-based decisions making. The Center is composed of a technical interdisciplinary team, responsible for providing recommendations for proper use of the FIC in the country. Throughout 2013, the team has developed the work plan including objectives, activities and products. This poster presents the main activities carried out to this process and the challenges it faces.

## Introduction

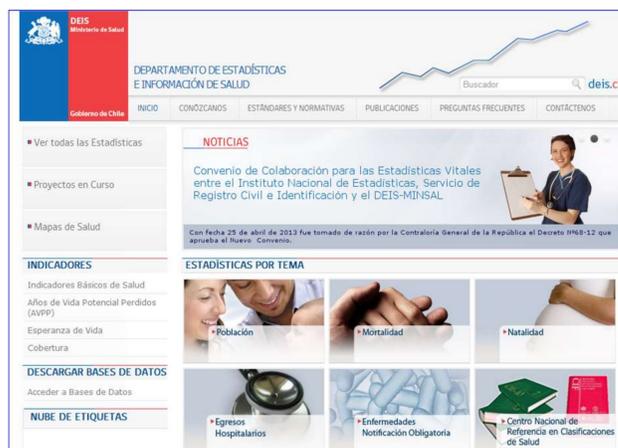
### Background

- The importance of the systematic and correct use of the classification for high quality data, the PAHO/WHO recommendation that every country should establish a National FIC Center and that Chile would benefit from being part of the larger regional WHO FIC Network, led to initial consultations on how to establish the Center in 2011.
- The national representative assumed the commitment to establish the Center in the second meeting of the FIC Collaborating Center Network of the Americas in Cuba in 2012.

### Establishment process

- The Center was established on December 13, 2012 by resolution of the Ministry of Health (MINSAL).
- The official name is: Chilean Reference Center for FIC (Centro Chileno de Referencia en Clasificaciones de Salud (FIC)). Its located at the Health Statistics and Information Department (DEIS).
- The first official meeting took place in Santiago de Chile on March 27, 2013.
- In this meeting the annual work plan proposal was presenting to the members. An important point for developing this proposal was the current situation of FIC implementation in the country.
- The ICD use has a long history in Chile in generating the health statistics and information of clinical records too. The high quality of data are recognized internationally. However, the work plan focused on the weak topics in this field.
- One important challenge is the proper ICF implementation. The technical group are interested in using the ICF not only in specific disability areas but in generating functioning statistics too. It is important to move forward the dissemination process in the country.

### National Center Web site



<http://www.deis.cl/centro-nacional-de-referencia-de-la-fci/>

## Work plan

The Center is composed by experts of different Departments of Ministry of Health and the others institutions. The Center will continue to play a key role in convening and coordinating the work of multiple stakeholders working on various aspects and components of the FIC.

Ministry of Health

Experts

- Health Statistics and Information Department (DEIS)
- Epidemiology Department
- Disability and Rehabilitation Department
- Preventive Medicine and Handicap Committee

Other institutions

Experts

- Private Hospitals Associations
- Public Health School, University of Chile
- Pontifical Catholic University
- Talca University
- National Institute of Statistics
- Health statistics consultant
- ICF consultant
- Civil Register Service
- Chilean Health Informatics Association

The experts of others institutions belong to the public and private sector. Academic Institutions are involved too. This is a essential point in terms of composition to ensure that the very limited skills and other resources are used effectively, especially by strengthening the work of individuals or very small groups. Working in a national collaborative effort constitutes the key point for Center consolidation.

### Annual Work Plan

Work items	Annual Work Plan		
	<ul style="list-style-type: none"> <li>•Quality of health information automated systems</li> <li>•Education and technical assistance</li> <li>•Dissemination</li> <li>•Analysis and Research</li> <li>•Leadership</li> </ul>		
Groups	Mortality	Morbidity	Functioning & Disability
	<ul style="list-style-type: none"> <li>-Death Certificate</li> <li>-Quality of data base</li> <li>-Vital statistics</li> <li>-Maternal mortality</li> <li>-ICD-10 revision</li> </ul>	<ul style="list-style-type: none"> <li>-Hospital discharge</li> <li>-DRGs</li> <li>-SNOMED</li> <li>-ICD-O</li> <li>-Quality</li> </ul>	<ul style="list-style-type: none"> <li>-Qualification of disability IVADEC</li> <li>-Functioning indicators in hospital settings (test pilot)</li> <li>-Quality</li> </ul>

During the first meeting it was decided that the work plan include strategic activities. Due to practical and logistical reasons three works groups were defined. Each of them is discussing their terms of reference and priorities.

## Mortality Group

The main activities are focused on improving the quality of mortality information through to update the death certificate according to international recommendations; train physicians on how to fill out the death certificate; implement the automated coding system of the Underlying Cause of Death and analyses the whole integration process of mortality information

## Morbidity Group

The first priority is the national project to assessment of the level of knowledge of morbidity coders. In addition, a set of indicators will be developed to measure the quality of information. Also, a set of indicators of quality of hospitalizations will be proposed. The training activities are included too.

## Functioning and Disability Group

ICF implementation progress is a priority. A instrument of Performance Assessment in the Community (IVADEC - ICF) was created by the Disability Department and it constitutes an important experience at national and regional level. Besides this experience the challenge is to developing a ICF project to measure the functioning level of patients in hospitals. A pilot test will be developing in order to move forward in its implementation.

Three members of Center were trained as ICF instructors in May in Mexico. The instructors will be preparing education materials and courses as a part of national plan of training.

## Conclusions

- After few months of its establishment, the Center has carried out essential activities for its consolidation. It is recognized as National Reference for FIC.

- The ministerial resolution provides to the Center the legal support to coordinate the work plan in collaboration with others institutions.

- The training activities will be tailored based on the needs assessment of the FIC implementation in the country.

- The role of Center is key in facing the new challenges of its implementation in the national health information system.

- As an active member of the FIC CC Network of the Americas, will enrich the Network and facilitate the implementation of regional and national FIC related projects



Further information:  
[xcarrasco@minsal.cl](mailto:xcarrasco@minsal.cl)  
[centroficc@minsal.cl](mailto:centroficc@minsal.cl)