# APPENDIX 1

INDICATORS

## Making the objectives tangible

The objectives and associated descriptions of the priority areas and interventions, which are described in the strategy documents, have served as a guide to the work of identifying indicators that will be able to show whether the development of eHealth is heading in the right direction. In order to make a clear link between objective and indicators, we have broken down the objectives into a number of underlying target areas.

## Objective 1 – The individual as co-creator

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| One prerequisite for person-centred activities is to use the needs and circumstances of patients and users as a starting point and make it possible for all of them to be active co-creators. |

**Target areas 1–3:**

1. **Welfare technology and digital support at home**
   Social services and the healthcare system offer patients, users and relatives new technology/welfare technology and digital support outside of traditional care environments. This shall contribute to increase security, independence and participation (*for example, support with measuring vital signs, support in the home in order to maintain health and live independently, adapted information about the support available*).

**Indicators:**

**Name of indicator:** Municipal welfare technology in different types of accommodation
**ID:** 1:1
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Welfare technology and digital support in the home
**Indicator:** Which municipalities have facilitated the use of various welfare technologies in homes, broken down by welfare technology (for example, night-time supervision, medication reminders, passive alarms/fall sensors) and type of accommodation (ordinary homes, sheltered accommodation for older people, accommodation for people with disabilities).

**Name of indicator:** Municipal care planning via video
**ID:** 1:2
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Welfare technology and digital support in the home
**Indicator:** Number of municipalities that offer care planning via video.

**Name of indicator:** Digital support for physical or cognitive training
**ID:** 1:3
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Welfare technology and digital support in the home
**Indicator:** Proportion of municipalities that offer digital support for physical or cognitive training.

**Name of indicator:** Digital support for activity
**ID:** 1:4
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Welfare technology and digital support in the home
**Indicator:** Proportion of municipalities that offer digital support for activity, for example games or virtual cycling.

2. **Digital services that facilitate the individual's contacts and information gathering**
   Social services and the healthcare system are available and present by offering digital services that facilitate the individual's contact with health and social care, make available relevant information and provide the opportunity to gain insight into and an overview of processes and contacts (*for example, services for applying for support or assistance, booking appointments, getting advice about self-care, reading documentation, gaining access to medical information and information about care providers and the range of services available*).

**Indicators:**

**Name of indicator:** Digital arrival registration
**ID:** 2:1
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Digital services that facilitate the individual's contacts and information gathering

**Indicator:** Regions that offer the opportunity to register arrival and/or make payment using an arrival terminal or app.

**Name of indicator:** Online appointment booking
**ID:** 2:2
**Source:** Inera
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Digital services that facilitate the individual's contacts and information gathering
**Indicator:** Number of appointments booked online.

**Name of indicator:** Digital contacts outside the region
**ID:** 2:3
**Source:** Swedish Association of Local Authorities and Regions (SALAR), Digital contacts outside the region
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Digital services that facilitate the individual's contacts and information gathering
**Indicator:** Number of digital contacts outside the region per month per private provider that is primarily focused on digital healthcare.

**Name of indicator:** Inhabitants who seek digital healthcare from private providers
**ID:** 2:4
**Source:** SALAR, Digital contacts outside the region
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Digital services that facilitate the individual's contacts and information gathering
**Indicator:** Age and sex of those who seek digital healthcare from the private providers that are primarily focused on digital healthcare.

**Name of indicator:** Digital healthcare contacts at private providers
**ID:** 2:5
**Source:** SALAR, Digital contacts outside the region
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Digital services that facilitate the individual's contacts and information gathering
**Indicator:** Applies to digital healthcare contacts at the private providers that are primarily focused on digital healthcare.

**Name of indicator:** Digital healthcare contacts per professional category
**ID:** 2:6
**Source:** SALAR, Digital contacts outside the region
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Digital services that facilitate the individual's contacts and information gathering

**Indicator:** Number of digital healthcare contacts per professional category at the private providers that are primarily focused on digital healthcare.

**Name of indicator:** Municipalities that allow appointments with case officers to be booked online
**ID:** 2:7
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Digital services that facilitate the individual's contacts and information gathering
**Indicator:** Number of municipalities that allow appointments with case officers to be booked online.

**Name of indicator:** Online services within social services
**ID:** 2:8
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Digital services that facilitate the individual's contacts and information gathering
**Indicator:** Proportion of municipalities that have at least one online service within social services, by operational area and type of online service, in per cent.

**Name of indicator:** Chat conversations via 1177 Vårdguiden
**ID:** 2:9
**Source:** Inera
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Digital services that facilitate the individual's contacts and information gathering
**Indicator:** Number of conversations via Inera's national chat function in 1177 Vårdguiden.

**Name of indicator:** Log-ins to 1177 Vårdguiden
**ID:** 02:10
**Source:** Inera
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Digital services that facilitate the individual's contacts and information gathering
**Indicator:** Number of visits and log-ins to 1177 Vårdguiden per inhabitant, broken down by sex and age.

**Name of indicator:** Information sets in 1177 Journalen
**ID:** 02:11
**Source:** Inera

**Follow-up area:** A – Need for and use of eHealth
**Target area:** Digital services that facilitate the individual's contacts and information gathering
**Indicator:** Number of information sets that are made available by regions in 1177 Journalen per region.

**Name of indicator:** Use of the support and treatment platform
**ID:** 02:12
**Source:** Inera
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Digital services that facilitate the individual's contacts and information gathering
**Indicator:** Number of started and ended elements and number of treatment providers per county for the support and treatment platform. Also broken down by month.

**Name of indicator:** Digital healthcare appointments
**ID:** 02:13
**Source:** Swedish eHealth Agency, population survey
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Digital services that facilitate the individual's contacts and information gathering
**Indicator:** Number of inhabitants who have had one or more digital healthcare appointments.

### 3. Attitudes to, trust in and experiences of eHealth

Inhabitants, patients, users and relatives have a positive attitude towards and positive experiences of eHealth and are confident that data, for example about health and life situation, is being processed securely and protected from unauthorised access.

**Indicators:**

**Name of indicator:** Trust in digital healthcare appointments
**ID:** 3:1
**Source:** SALAR, Hälso- och sjukvårdsbarometern [The Healthcare Barometer]
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Attitudes to, trust in and experiences of eHealth
**Indicator:** Proportion of the population who have a high or quite high degree of trust in digital healthcare appointments.

**Name of indicator:** Trust in 1177 Vårdguiden
**ID:** 3:2

**Source:** SALAR, Hälso- och sjukvårdsbarometern [The Healthcare Barometer]
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Attitudes to, trust in and experiences of eHealth
**Indicator:** Proportion of the population who have a high degree or very high degree of trust in 1177 Vårdguiden via telephone, its online services and the information and advice it provides about health online via 1177.se.

## Objective 2 – The right information and knowledge

One prerequisite for the provision of equitable and gender-equal healthcare and social services of a good quality is ensuring that members of staff have the right information and knowledge when interacting with patients and users.

**Target areas 4–6:**

4. **Information processing and accessible information**
   Appropriate and efficient information processing in organisations' processes is promoted in order to give healthcare and social services staff favourable conditions in which to work (*for example, appropriate healthcare information systems, the prerequisites for documenting work in a structured way, digital access to national catalogues and registers of organisation and the services they offer, digital access to relevant information in meetings with patients and users*).

**Indicators:**

**Name of indicator:** Producer calls in Nationell Patientöversikt [National Patient Overview] (NPÖ)
**ID:** 4:1
**Source:** Inera
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Number of producer calls in NPÖ.

**Name of indicator:** Information sets shown in NPÖ
**ID:** 4:2
**Source:** Inera
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Information sets shown in NPÖ by region.

**Name of indicator:** Information sets that are technically possible to show in NPÖ
**ID:** 4:3
**Source:** Inera

**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Number of information sets that are technically possible to show in NPÖ.

**Name of indicator:** Private healthcare providers' connection to NPÖ as consumers
**ID:** 4:4
**Source:** Inera
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Number of private healthcare providers that are connected to NPÖ as consumers.

**Name of indicator:** Log-ins to 1177 Vårdguiden's online services
**ID:** 4:5
**Source:** Inera
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Number of staff log-ins to 1177 Vårdguiden's online services per year.

**Name of indicator:** Coherent record-keeping
**ID:** 4:6
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** The extent to which the regions are applying coherent record-keeping with other healthcare providers.

**Name of indicator:** Digital appointment reminders
**ID:** 4:7
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Number of regions that have introduced digital notices to attend.

**Name of indicator:** National service for electronic referral
**ID:** 4:8
**Source:** Inera
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Number of regions that are using Inera's service for electronic referral.

**Name of indicator:** Electronic management of free passes
**ID:** 4:9

**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Number of regions that have electronic management of free passes.

**Name of indicator:** Digital dictation and voice recognition
**ID:** 04:10
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Number of regions that use digital dictation and voice recognition in various activities.

**Name of indicator:** Attitudes of staff to the use of digital technology
**ID:** 04:11
**Source:** SALAR, Digitalisering i välfärden – Attityder och erfarenheter bland medarbetare och studenter [Digitalisation in welfare – Attitudes and experiences among staff and students]
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Proportion of staff members within healthcare who have a positive attitude towards the use of digital technology as an aid during care, consultations and treatment.

**Name of indicator:** Attitudes of staff and students to digitalisation
**ID:** 04:12
**Source:** SALAR, Digitalisering i välfärden – Attityder och erfarenheter bland medarbetare och studenter [Digitalisation in welfare – Attitudes and experiences among staff and students]
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Proportion of staff members within healthcare and students within the field of healthcare who have a positive attitude towards increased digitalisation in the workplace.

**Name of indicator:** Municipal healthcare units' connection to NPÖ as consumers
**ID:** 04:13
**Source:** Inera
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Number of municipalities that have connected one or more healthcare units to NPÖ as consumers.

**Name of indicator:** Municipal healthcare units' connection to NPÖ as producers

**ID:** 04:14
**Source:** Inera
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Number of municipalities that have connected one or more healthcare units to NPÖ as producers.

**Name of indicator:** Access to NPÖ for licensed healthcare personnel in the municipalities
**ID:** 04:15
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Number of municipalities where all licensed healthcare personnel have access to NPÖ as consumers.

**Name of indicator:** Guidelines for the use of NPÖ by licensed healthcare personnel
**ID:** 04:16
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Number of municipalities that have guidelines for the use of NPÖ by licensed healthcare personnel as consumers.

**Name of indicator:** Information sets in NPÖ accessible to the municipality's healthcare units.
**ID:** 04:17
**Source:** Inera
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Information sets that municipalities make accessible in NPÖ.

**Name of indicator:** Use of structured documentation in municipalities
**ID:** 04:18
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Proportion of municipalities that use structured documentation.

**Name of indicator:** Staff use of ICF (International Classification of Functioning, Disability and Health) when exercising public authority.
**ID:** 04:19

**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Percentage of municipalities where staff exercising public authority within social services use ICF in the digital individual documentation.

**Name of indicator:** Staff use of ICF in the delivery phase
**ID:** 04:20
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Percentage of municipalities where social services staff use ICF in the digital individual documentation in the delivery phase.

**Name of indicator:** Staff use of KSI (classification of social services' interventions and activities) when exercising public authority
**ID:** 04:21
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Percentage of municipalities where staff exercising public authority within social services use KSI in the digital individual documentation.

**Name of indicator:** Staff use of KSI in the delivery phase
**ID:** 04:22
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Percentage of municipalities where social services staff use KSI in the digital individual documentation in the delivery phase.

**Name of indicator:** Use of welfare technology by social care providers and municipal staff.
**ID:** 04:23
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Proportion of municipalities where staff and social care providers use welfare technology as an aid.

**Name of indicator:** Attitudes of staff and students to digital technology for support and social care in the home
**ID:** 04:24
**Source:** SALAR, Digitalisering i välfärden – Attityder och erfarenheter bland medarbetare och studenter [Digitalisation in welfare – Attitudes and experiences among staff and students]
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Proportion of staff and students within health and social care who have a positive attitude towards the use of digital technology for support and social care in the home.

**Name of indicator:** Social services staff are able to read the documentation while mobile
**ID:** 04:25
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Proportion of municipalities where social services staff are able to read information from the municipality's IT systems while mobile (in various operational areas).

**Name of indicator:** Licensed healthcare personnel in the municipality are able to read documentation while mobile
**ID:** 04:26
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Proportion of municipalities where licensed healthcare personnel are able to read healthcare documentation in the municipality's IT system while mobile.

**Name of indicator:** Licensed healthcare personnel in the municipality are able to read national systems while mobile
**ID:** 04:27
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Proportion of municipalities where the mobile licensed healthcare personnel are able to read healthcare documentation in national systems, e.g. NPÖ and Pascal, while mobile.

**Name of indicator:** Licensed healthcare personnel in the municipality are able to document healthcare data in the municipality's IT system while mobile
**ID:** 04:28
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Proportion of municipalities where licensed healthcare personnel are able to document healthcare data in the municipality's IT system while mobile.

**Name of indicator:** Licensed healthcare personnel in the municipality are able to add healthcare data to national systems while mobile
**ID:** 04:29
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Proportion of municipalities where the mobile licensed healthcare personnel are able to add healthcare data to national systems, e.g. Pascal and quality registers, while mobile.

**Name of indicator:** Social services staff are able to read social services documentation in the municipality's IT system while mobile
**ID:** 04:30
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Information processing and accessible information
**Indicator:** Proportion of municipalities where mobile social services staff are able to read social services documentation in the municipality's IT system while mobile.

### 5. Decision support and the best available knowledge in every meeting

Knowledge-based governance of activities is supported so that members of staff have situation-specific access to the best available knowledge at all times so that every patient and user receives care and support based on the best available knowledge (*for example, integrated knowledge-based support/decision support and AI in the systems*).

**Indicators:**

**Name of indicator:** Analyses with the aid of electronic expert support (EES)

**ID:** 5:1
**Source:** Swedish eHealth Agency
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Decision support and the best available knowledge in every meeting **Indicator:** Number of analyses with the aid of electronic expert support (EES) per year.

**Name of indicator:** IT support for medical services in the regions
**ID:** 5:2
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Decision support and the best available knowledge in every meeting
**Indicator:** Number of regions with IT support for medical services (support for laboratories and imaging and functional diagnostics).

**Name of indicator:** IT support for documentation in the regions
**ID:** 5:3
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Decision support and the best available knowledge in every meeting
**Indicator:** Number of regions with IT support for documentation (for example, IT support for triage, ambulance records).

**Name of indicator:** Insurance medical decision support in the regions
**ID:** 5:4
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Decision support and the best available knowledge in every meeting
**Indicator:** Number of regions that use insurance medical decision support.

**Name of indicator:** National source for prescribing reasons in the regions
**ID:** 5:5
**Source:** National Board of Health and Welfare
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Decision support and the best available knowledge in every meeting
**Indicator:** Number of regions that have implemented/are implementing the national source for prescribing reasons.

**Name of indicator:** Code system for contact reasons in the regions
**ID:** 5:6
**Source:** National Board of Health and Welfare
**Follow-up area:** A – Need for and use of eHealth

**Target area:** Decision support and the best available knowledge in every meeting
**Indicator:** Number of regions that have implemented/are implementing the code system for contact reasons.

**Name of indicator:** IT support for handling medication in the regions
**ID:** 5:7
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** A – Need for and use of eHealth
**Target area:** Decision support and the best available knowledge in every meeting
**Indicator:** Proportion with access to IT support for handling medication in the regions (pharmacopoeia/list of medications).

6. **Data processing that creates new knowledge**
   Data is translated to a greater extent to information and knowledge that can be used to develop new working methods and smart services. The capacity to put the results of data processing into practice is being improved in organisations so that new knowledge is created with the potential to change processes, organisations and systems for the better.

**Indicators:**

## Objective 3 – Safe and secure information processing

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| The capacity to handle and protect information in an appropriate manner needs to be developed continually to keep pace with external changes. |

**Target areas 7–8:**

7. **Resources and expertise for information security management**
   The resources and expertise for information security management are in place in regions and municipalities and this work has been enhanced.

**Indicators:**

**Name of indicator:** Responsibility for information security in the municipalities
**ID:** 7:1
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** Area B – Structures that facilitate eHealth
**Target area:** Resources and expertise for information security management

**Indicator:** Proportion of municipalities that have a person with responsibility for information security in the municipalities.

**Name of indicator:** Follow-up of information security in social services
**ID:** 7:2
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** Area B – Structures that facilitate eHealth
**Target area:** Resources and expertise for information security management
**Indicator:** Whether the municipality regularly (at least once a year) follows up risks and the need to develop information security in social services.

**Name of indicator:** Information security classification in the municipalities
**ID:** 7:3
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** Area B – Structures that facilitate eHealth
**Target area:** Resources and expertise for information security management
**Indicator:** Proportion of municipalities that perform information security classification, and which model is used.

### 8. Exchanging information securely

Large quantities of sensitive personal data are processed within social services and the healthcare system. There is a 'good capacity' in these organisations' systems that enables information to be exchanged securely within and between social services and the healthcare system, but also with other organisations in the public sector. There are common principles for controlling identification and authorisation (joint identification and authorisation federation).

**Indicators:**

**Name of indicator:** Use of strong authentication in systems that process personal data in the municipalities.
**ID:** 8:1
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** Area B – Structures that facilitate eHealth
**Target area:** Exchanging information securely
**Indicator:** Proportion of municipalities that use strong authentication in systems that process personal data in social services and healthcare.

**Name of indicator:** IT systems/other digital systems that require strong authentication for log-in, in the municipalities
**ID:** 8:2

**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** Area B – Structures that facilitate eHealth
**Target area:** Exchanging information securely
**Indicator:** Percentage of municipalities where IT systems and other digital systems that process personal data require strong authentication for log-in.

**Name of indicator:** Social services staff use strong authentication when exercising public authority
**ID:** 8:3
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** Area B – Structures that facilitate eHealth
**Target area:** Exchanging information securely
**Indicator:** Percentage of municipalities where social services staff use strong authentication when exercising public authority, by organisation, 2020.

**Name of indicator:** Social services staff that use strong authentication for log-in when providing services
**ID:** 8:4
**Source:** National Board of Health and Welfare, *E-hälsa och välfärdsteknik i kommunerna* [eHealth and Welfare Technology in the Municipalities] (2020)
**Follow-up area:** Area B – Structures that facilitate eHealth
**Target area:** Exchanging information securely
**Indicator:** Percentage of municipalities where social services staff use strong authentication for log-in when providing services.

**Name of indicator:** Legal basis of information security
**ID:** 8:5
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** Area B – Structures that facilitate eHealth
**Target area:** Exchanging information securely
**Indicator:** Number of regions which state that the legal basis of information security is clear.

**Name of indicator:** Application of the Patient Data Act
**ID:** 8:6
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** Area B – Structures that facilitate eHealth
**Target area:** Exchanging information securely
**Indicator:** Regions' application of the Patient Data Act, for example restricted and cancel restrictions, log review in the regions.

**Name of indicator:** Application of GDPR
**ID:** 8:7
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** Area B – Structures that facilitate eHealth

**Target area:** Exchanging information securely
**Indicator:** Number of regions which state that they have implemented GDPR.

**Name of indicator:** The federation SAMBI
**ID:** 8:8
**Source:** SAMBI
**Follow-up area:** Area B – Structures that facilitate eHealth
**Target area:** Exchanging information securely
**Indicator:** Number of actors that are members of SAMBI.

## Objective 4 – Development and digital transformation hand in hand

Digitalisation is changing the conditions for organisations in all sectors. Sustained effort is required in order to support the capacity for organisational development and to equip individuals and organisations with the capacity and skills required.

**Target areas 9–13:**

9. **Enhanced leadership, governance and organisation**
   The prerequisites for leadership, governance and organisation have been enhanced at all levels so that organisations are able to take advantage of the opportunities presented by digitalisation and deal with its challenges.

**Indicators**

**Name of indicator:** Person responsible for informatics in the regions
**ID:** 9:1
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** B – Structures that facilitate eHealth
**Target area:** Enhanced leadership, governance and organisation
**Indicator** There is information concerning person responsible for informatics in each region.

**Name of indicator:** Strategy for mobile working
**ID:** 9:2
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** B – Structures that facilitate eHealth
**Target area:** Enhanced leadership, governance and organisation
**Indicator:** There is information about a strategy for mobile working in each region.

**Name of indicator:** Budget for IT development and innovation

**ID:** 9:3
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** B – Structures that facilitate eHealth
**Target area:** Enhanced leadership, governance and organisation
**Indicator:** Proportion of the budget that is spent on development, innovation and new digital solutions.

### 10. Enhanced digital competence at all levels

Continuous professional development relating to the renewal of social services and the healthcare system through digitalisation is prioritised. Organisations are able to transform new knowledge, and the capability and ability of professionals to take on new ways of working has been developed.

**Indicators:**

**Name of indicator:** Staff trained in the Patient Data Act in the regions
**ID:** 10:1
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** A – Need for and use of eHealth. The member of staff. B – Structures that facilitate eHealth.
**Target area:** Enhanced digital competence at all levels
**Indicator:** Proportion of staff who have been trained in the Patient Data Act.

**Name of indicator:** Informatics expertise in the regions
**ID:** 10:2
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** B – Structures that facilitate eHealth
**Target area:** Enhanced digital competence at all levels
**Indicator:** Proportion of regions that deem there to be sufficient informatics expertise in their region.

**Name of indicator:** Measurement of perceived IT benefit in the regions
**ID:** 10:3
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** B – Structures that facilitate eHealth
**Target area:** Enhanced digital competence at all levels
**Indicator:** Regions that state they regularly measure the perceived benefit of IT.

### 11. Coordinated national support for the introduction of new technologies

Coordinated national shared support is offered in order to create the prerequisites for the introduction and integration of new working

methods and new technologies into organisations (*for example, support in questions concerning law, ethics, safety, support with automation and the testing of artificial intelligence, block-chain technology and precision medicine*).

**Indicators:**

### 12. Regulations and technical and semantic standards

The right conditions have been created with regard to law/regulations, information security and standards (semantic and technical) such that organisations know what they have to take into account. Conditions are created regionally and locally through the implementation of regulations and standards.

**Indicators:**

**Name of indicator:** Information security policy in the regions
**ID:** 12:1
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** B – Structures that facilitate eHealth
**Target area:** Regulations and technical and semantic standards
**Indicator:** Which regions have adopted an information security policy, information security plan and have fully introduced and implemented GDPR.

**Name of indicator:** Barriers to the introduction of online services
**ID:** 12:2
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** B – Structures that facilitate eHealth
**Target area:** Regulations and technical and semantic standards
**Indicator:** Barriers that regions perceive during the introduction of new online services.

### 13. New forms of collaboration and coordination

New forms of collaboration and coordination have been established between central government agencies, regions, municipalities, private providers and the enterprise sector for the purpose of increasing the pace of development and the implementation of new services.

**Indicators:**

**Name of indicator:** Electronic referrals across organisational boundaries
**ID:** 13:1
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** B – Structures that facilitate eHealth
**Target area:** New forms of collaboration and coordination

**Indicator:** Which regions and other organisations have implemented the possibility of sending electronic referrals across organisational boundaries, and which types of referrals does this involve.

**Name of indicator:** Regional care planning via video
**ID:** 13:2
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** B – Structures that facilitate eHealth
**Target area:** New forms of collaboration and coordination
**Indicator:** Number of regions with the possibility of conducting care planning with the municipality using video conferencing.

**Name of indicator:** IT cooperation municipalities and regions
**ID:** 13:3
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** B – Structures that facilitate eHealth
**Target area:** New forms of collaboration and coordination
**Indicator:** Number of regions that conduct IT cooperation with one or more municipalities within a certain area.

**Name of indicator:** Digital agenda at the county level
**ID:** 13:4
**Source:** *eHälsa och IT i regionerna* [eHealth and IT in the Regions]
**Follow-up area:** B – Structures that facilitate eHealth
**Target area:** New forms of collaboration and coordination
**Indicator:** Number of counties (region + municipalities) with a joint digital agenda.

## International indicators

**Name of indicator:** Digitalisation index
**ID:** INT:1
**Source:** UN report, E-Government Survey (Full Report) 2020
DESI, The Digital Economy and Society Index
**Follow-up area:** B – Structures that facilitate eHealth
C – Societal prerequisites for eHealth
**Objectives:** Not relevant
**Indicator:** The UN's and DESI's respective digitalisation indices.

**Name of indicator:** Healthcare data across national borders
**ID:** INT:2
**Source:** European Commission
**Follow-up area:** B – Structures that facilitate eHealth
C – Societal prerequisites for eHealth

**Objectives:** The right information and knowledge; Development and digital transformation hand in hand
**Indicator:** Which countries are able to send and receive patient data from other countries.

**Name of indicator:** Visits to Nordic health portals
**ID:** INT:3
**Source:** Norway, *Utviklingstrekk 2020 - Drivere og trende for e-helseutvikling* [Development Trends 2020 - Drivers and Trends in eHealth Development]
**Follow-up area:** A – Need for and use of eHealth
**Objectives:** The individual as co-creator
**Indicator:** Number of visits and log-ins to helsenorge.no.

**Name of indicator:** Online appointment bookings 1
**ID:** INT:4
**Source:** Eurostat
**Follow-up area:** A – Need for and use of eHealth
**Objectives:** The individual as co-creator
**Indicator:** Proportion of individuals that used the internet to book an appointment with a doctor using a website.

**Name of indicator:** Online appointment bookings 2
**ID:** INT:5
**Source:** Finland, E-health and e-welfare of Finland, Check Point 2018
**Follow-up area:** A – Need for and use of eHealth
**Objectives:** The individual as co-creator
**Indicator:** Number of organisations that have made it possible to book appointments online.

**Name of indicator:** Online appointment bookings 3
**ID:** INT:6
**Source:** Nordic eHealth benchmarking, 2015
**Follow-up area:** A – Need for and use of eHealth
**Objectives:** The individual as co-creator
**Indicator:** Proportion of all primary care appointments that are booked online.

**Name of indicator:** Asynchronous communication in primary care
**ID:** INT:7
**Source:** Nordic eHealth benchmarking, 2015
**Follow-up area:** A – Need for and use of eHealth
**Objectives:** The individual as co-creator
**Indicator:** Proportion of publicly run healthcare organisations where it is possible for patients and employees to communicate asynchronously. Number of messages from patients to doctors at primary care centres per year based on

the total number of appointments with doctors per year at primary care centres.

**Name of indicator:** Video appointments in primary care
**ID:** INT:8
**Source:** Canada Health Infoway, Annual Report 2019-2020
**Follow-up area:** A – Need for and use of eHealth
**Objectives:** The individual as co-creator
**Indicator:** Proportion of primary care appointments via video.

**Name of indicator:** The use of electronic medical records
**ID:** INT:9
**Source:** Canada Health Infoway, Annual Report 2019-2020
**Follow-up area:** A – Need for and use of eHealth
**Objectives:** The right information and knowledge
**Indicator:** Proportion of general practitioners who are using electronic medical records.

**Name of indicator:** Proportion of ePrescriptions.
**ID:** INT:10
**Source:** Finland, E-health and e-welfare of Finland, Check Point 2018
Norway, *Utviklingstrekk 2020 - Drivere og trende for e-helseutvikling* [Development Trends 2020 - Drivers and Trends in eHealth Development]
Nordic eHealth benchmarking, 2015
**Follow-up area:** A – Need for and use of eHealth
**Objectives:** The individual as co-creator, The right information and knowledge
**Indicator:** Proportion of ePrescriptions, of all prescriptions.

**Name of indicator:** Electronic renewal of prescriptions
**ID:** INT:11
**Source:** Nordic eHealth benchmarking, 2015
**Follow-up area:** A – Need for and use of eHealth
**Objectives:** The individual as co-creator
**Indicator:** Proportion of public healthcare organisations that allow electronic requests for renewal of prescriptions and proportion of all requests for renewal of prescriptions that are done digitally.

**Name of indicator:** Log-ins to the pharmacopoeia
**ID:** INT:12
**Source:** Nordic eHealth benchmarking, 2015
**Follow-up area:** A – Need for and use of eHealth
**Objectives:** The individual as co-creator
**Indicator:** Number of log-ins by patients in the pharmacopoeia/number of prescriptions per year. Number of log-ins by patients in the pharmacopoeia/number of ePrescriptions per year.

**Name of indicator:** ePrescriptions possible
**ID:** INT:13
**Source:** Nordic eHealth benchmarking, 2015
**Follow-up area:** A – Need for and use of eHealth
**Objectives:** The individual as co-creator
**Indicator:** Proportion of public healthcare organisation that are able to send ePrescriptions.

**Name of indicator:** Voice recognition
**ID:** INT:14
**Source:** Finland, E-health and e-welfare of Finland, Check Point 2018
**Follow-up area:** A – Need for and use of eHealth, B – Structures that facilitate eHealth
**Objectives:** The right information and knowledge
**Indicator:** Proportion of healthcare organisations that have introduced voice recognition within at least one activity.

**Name of indicator:** Patient access to medical records
**ID:** INT:15
**Source:** Canada Health Infoway, Annual Report 2019-2020
Nordic eHealth benchmarking, 2015
**Follow-up area:** A – Need for and use of eHealth
**Objectives:** The individual as co-creator
**Indicator:** Proportion of the population that have digital access to a patient portal or other virtual healthcare solution and number of views of medical records data, lab results and vaccination information based on the country's population.