ASSESSMENT OF PATIENT'S AND HEALTH PROFESSIONAL'S EXPERIENCE OF INTEGRATED CARE:
PRELIMINARY RESULTS FROM A PILOT SURVEY IN VENETO REGION-ITALY.

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Introduction
Population ageing is associated with an increased co-prevalence of chronic diseases. For persons with multimorbidity, care fragmentation may lead to adverse outcomes and patient dissatisfaction while care management programs can improve quality of care. In 2015, Veneto Region started an integrated care-program in the whole region, involving older persons with Congestive Heart Failure (CHF) and multimorbidity in a primary care setting, to reduce the risk of inappropriate hospitalization. The purpose of the present pilot survey was to assess the experience of integrated care among patients, general practitioners (GPs) and nurses involved in the project. Surveillance data on hospitalization and outcomes will be available 12 months after enrollment.

Care management program

Nurses and GPs (40 in each group) received specific training on Care Management using a collaborative team-based approach. To identify the patients with CHF, co-morbidities and complexity we used the case-finding tool of the Adjusted Clinical Groups (ACG) System that generates high risk case management lists. The Care management program was applied to 164 patients of the 525 identified by the ACG System.

To assess the “experience” of integrated care we developed a 10-items questionnaire focused on difficulties, utility and comprehension of the tools, and on communication, timing and self-satisfaction. 29 nurses (72,5%) and 28 GPs (70,0%) answered to the questionnaire and the questionnaire was administered to 74 patients (35,1%) by the nurses 2 months after the first home assessment.

Methods

Results

Some results are shown in the figures and others are described as follows. Patients consider the Integrated Care program "very useful" (34%) or "useful" (28%). They report that the tools have an average utility (32,1%), being clear (32.1%) and having an appropriate length (34.2%); the majority of GPs and nurses report that the tools are too long and time-consuming. Most patients (95%) would like to continue participating because they report being supported, protected, very satisfied with the time the nurse dedicated to them (64%) and with the information received (76%). 24% of nurses is quite unsatisfied of the relationship with GPs. While the overall satisfaction of patients and nurses is "very high" and "high" and above 95%, it is negative for 5%. 82.1% of GPs would like to continue participating because they have improved their patients knowledge.

Conclusions

Patients’ and nurses’ experience of integrated care is very positive in areas such as communication, comprehension, utility and satisfaction. For GPs and nurses however, the assessment tool was considered not easy to use due to its length and complexity; a redesign of the assessment instruments used in the program is probably required.

Integrated care can improve communication and satisfaction of health professionals but it is necessary to reduce the reporting burden and to provide GPs and nurses with additional team-building assets: increasing multidisciplinary group meetings is a way to facilitate integrated care and overcome barriers; furthermore actively involving GPs in the change process, sharing goals and objectives, would enhance their engagement in the program. Data on the effects of Veneto Region’s program in terms of hospitalization, ER access and mortality will be available 12 months after enrollment.

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