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PRELIMINARY ASSESSMENT OF GPS' KNOWLEDGE AND ATTITUDE ABOUT PERSON CENTRED CARE

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Abstract: Introduction: The European definition of WONCA of general practice introduces the determinant elements of person-centered care regarding four important, interrelated characteristics: continuity of care, patient "empowerment", patient-centred approach, and doctor-patient relationship.

The application of person-centred care in general practice refers to the GP's ability to master the patient-centered approach when working with patients and their problems in the respective context; use the general practice consultation to develop an effective doctor—patient relationship, with respect to patient's autonomy; communicate, set priorities and establish a partnership when solving health problems; provide long-lasting care tailored to the needs of the patient and coordinate overall patient care.

This means that GPs are expected to develop their knowledge and skills to use this key competence.

Aim: The aim of this study is to make a preliminary assessment of the knowledge and attitudes of general practitioners regarding person-centered care.

Material and methods: The opinion of 54 GPs was investigated through an original questionnaire, including closed questions, with more than one answer. The study involved each GP who has agreed to take part in organised training in person-centered care. The results were processed through the SPSS 17.0 version using descriptive statistics.

Results: The distribution of respondents according to their sex is predominantly female - 34 (62.9%).

It was found that GPs investigated by us highly appreciate the patient's ability to take responsibility, noting that it is important for them to communicate and establish a partnership with the patient - 37 (68.5%). One third of the respondents 34 (62.9%) stated the need to use the GP consultation to establish an effective doctor-patient relationship. The adoption of the patient-centered approach at work is important to 24 (44.4%) GPs. Provision of long-term care has been considered by 19 (35,2%).

From the possible benefits of implementing person-centered care, GPs have indicated achieving more effective health outcomes in the first place - 46 (85.2%).

Conclusion: Family doctors are aware of the elements of person-centered care, but in order to validate and fully implement this competence model, targeted GP training is required.

Keywords: GP, person centred care, patient-centred approach, doctor-patient relationship.

ПРЕДВАРИТЕЛНА ОЦЕНКА НА ЗНАНИЯ И ОТНОШЕНИЕ НА ОБЩОПРАКТИКУВАЩИТЕ ЛЕКАРИ ОТНОСТНО ЛИЧНОСТ ЦЕНТРИРАНИТЕ ГРИЖИ

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Резюме: Въведение: Европейската дефиниция за общата медицинска практика (ОМП) на WONCA представя определящите елементи на личност центрираните грижи, които се отнасят до четири важни, взаимносвързани характеристики на общата медицина, а именно: продължителност и дългосрочност, "овластяване" на пациентите, пациент-центриран подход и взаимовръзка лекар-пациент.

Прилагането на личност центрирани грижи в ОМП се отнасят до способността на общопрактикуващия лекар (ОПЛ) да усвои пациент-центрирания начин на работа с пациентите и техните проблеми в съответния им контекст; да използва консултацията в ОМП за осъществяване на ефективна връзка между лекар-пациент, в унисон със зачитане на автономността на пациента; да общува, приоритизира проблемите и си партнира с пациента при разрешаване на здравните проблеми; да предоставя продължителна грижа, съобразена с потребностите на пациента и координира цялостно грижите за пациента.

Това означава, че от ОПЛ се очаква добре да познава и развива своите знания и умения за прилагане на тази ключова компетенция на ОПЛ.

Цел: Целта на настоящото проучване е да се направи предварителна оценка на знания и отношение на общопрактикуващи лекари по отношение на личност центрирани грижи.

Материал и методи: Изследвано е мнението на 54 ОПЛ, посредством оригинален въпросник, включващ затворени въпроси, с възможност за повече от един отговор. Логически единици на проучването са всеки ОПЛ, съгласил се да вземе участие в организирано обучение за личност центрирани грижи. Резултатите са обработени посредством SPSS 17.0 версия, използвайки дескрептивна статистика.

Резултати: Разпределението на респондентите по пол е с превес на жените (63,0%). Установи се, че изследваните от нас ОПЛ оценяват високо възможността пациента да поема отговорност, като отбелязват, че за тях е важно да общуват и партнират с пациента – 37 (68,5%). Една трета от респондентите 34 (62,9%) са заявили необходимостта да се използва консултацията в ОМП за установяването на ефективната взаимовръзка лекар-пациент. Усвояването на пациент-центрирания подход на работа е отразено от 24 (44,4%) ОПЛ. Да предоставя продължителна грижа са посочили 19 (35,2%). От възможните ползи от прилагането на личност центрирани грижи, на първо място ОПЛ са посочили постигане на по-ефективни здравни резултати – 46 (85,2%).

Заключение: Семейните лекари познават елементите на личност центрираните грижи, но с цел утвърждаване и по-пълно прилагане на тази компетенция се изисква целенасочено обучение на ОПЛ.

Ключови думи: общопрактикуващ лекар, личност центрирани грижи, пациент-центриран подход, връзка лекар-пациент.

INTRODUCTION

The European definition of WONCA of general practice introduces the determinant elements of person-centered care regarding four important, interrelated characteristics: continuity of care, patient "empowerment", patient-centred approach, and doctor-patient relationship. [10,11]

The application of person-centred care in general practice refers to the GP's ability to master the patient-centered approach when working with patients and their problems in the respective context; use the general practice consultation to develop an effective doctor-patient relationship, with respect to patient's autonomy; communicate, set priorities and establish a partnership when solving health problems; provide long-lasting care tailored to the needs of the patient and coordinate overall patient care. [8,10,11]

The solid knowledge and skills that make up the core competence are crucial to applying person-centred care in the daily practice. [3,5,9]

This means that GPs are expected to develop their knowledge and skills to use this key competence. [2,4,7]

Aim: The aim of this study is to make a preliminary assessment of the knowledge and attitudes of general practitioners regarding person-centered care.

MATERIAL AND METHODS

The opinion of 54 GPs was investigated through an original questionnaire, including closed questions, with more than one answer. The study involved each GP who has agreed to take part in organised training in person-centered care. The results were processed through the SPSS 17.0 version using descriptive statistics.

RESULTS

The distribution of respondents according to their sex is predominantly female - 34 (62.9%).

52 (96.3%) of the GPs have categorically replied that person-centered care (PCC) is a key competence of GPs. Interestingly, 26 (48.1%) of them believe that the PPC concept stems from the limitations of the traditional

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biomedical model. 24 (44.4%) of the colleagues are convinced that the concept is a complement to the traditional approach, 3 (5.6%) do not make a connection between the two options and only 1 (1.9%) cannot make a decision.

The results of our study show to a great extent that the patient-centered approach involves establishing a partnership with the patient and assisting him, his family and the medical specialists - 43 (79.6%) and providing care, while putting the patient at the centre of the health system - 35 (64.8%). A little over a third, 20 (37.0%) have put an emphasis on showing respect to people, their values, needs and preferences.

It was found that GPs investigated by us highly appreciate the patient's ability to take responsibility, noting that it is important for them to communicate and establish a partnership with the patient - 37 (68.5%). One third of the respondents 34 (62.9%) stated the need to use the GP consultation to establish an effective doctor-patient relationship. The adoption of the patient-centered approach at work is important to 24 (44.4%) GPs. Provision of long-term care has been considered by 19 (35,2%).

Table 1 presents the GPs' opinions on the purpose of patient-centred consultations.

Table 1. Distribution of GPs according to their understanding of the purpose of patient-centred consultations

To put into consideration the patient's ideas, concerns and expectations and make them part of his duties as a doctor

To find a common language and draw up a common plan on working with the patient in the future

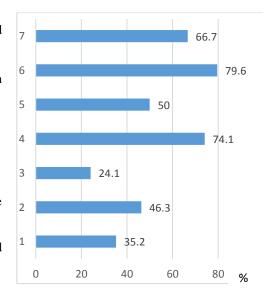
To share the results in an accessible language

To make decisions respecting the will of the patient

To avoid subjectivity in doctor-patient relationships

To use his skills and attitude to establish a good rapport with the patient

To achieve a balance between the emotional distance and closeness to the patient



From the possible benefits of implementing person-centered care, GPs have indicated achieving more effective health outcomes in the first place - 46 (85.2%), followed by satisfaction of both the patient and the doctor - 44 (81.5%), increased confidence - 35 (64.8%) and more appropriate prescription of medications - 17 (31.5%). The data we received on how to measure the patient-centred approach (PCA) is presented in Table 2.

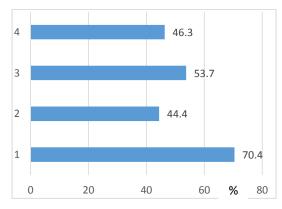
Table 2. Distribution of GPs according to the methods of measuring the PCA

Examining how patients or professionals define the components of person-centred care (definitions)

Examining the type of care that patients want or professionals' attitudes and values (preferences)

Examining the extent to which care is regarded as personcentred (experiences)

Examining what happens as a result of person-centred care (outcomes)



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DISCUSSION

Our research data show that nearly twenty years after the introduction of the healthcare system reform, GPs have been well acquainted with person-centered care and appreciate the specific competence in general medical practice. Taking into account the long-term relationship with patients, GPs realise the importance of the peculiar characteristics of PCC. Establishing a partnership with the patient is therefore the key to achieving a shared solution for managing the patient's health problems, especially at a primary care level. This is also related to the active attitude and assuming responsibility on the part of the patients, which is seen in the answers given by our GPs.

To date, the largest proportion of studies on person-centred care has been conducted in a hospital setting. [1] The fact that more and more studies are carried out in primary care and community services is considered favourable. Studies of person-centred care tend to focus on one of four main issues. [6] In our case, GPs have considered the outcomes of person-centred care in the first place.

This result also correlates with their opinion on the benefits of implementing the approach and this statement has received the highest number of answers.

Conclusion: Family doctors are aware of the elements of person-centered care, but in order to validate and fully implement this competence model, targeted GP training is required.

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