
GPS' PERCEPTION OF THE PATIENT ORIENTED INTERVENTIONS AS KEY ELEMENTS OF PATIENT CENTRED CARE FOR PEOPLE WITH MULTIMORBIDITY

Radost Assenova

Dept Urology and General Medicine, Faculty of Medicine, Medical University of Plovdiv,
r_assenova@yahoo.com

Levena Kireva

Dept Urology and General Medicine, Faculty of Medicine, Medical University of Plovdiv,
levena_2005@abv.bg

Gergana Foreva

GP training practice, Brod AIPPMP Ltd, Plovdiv, gerganaforeva@gmail.com

Abstract:Background: Patients with multimorbidity represent a significant portion of the primary healthcare population. For healthcare providers, managing patients with multiple chronic conditions represents a challenge given the complexity and the intensity of interventions. Integrated and patient-centered care is considered an effective response to the needs of people who suffer from multiple chronic conditions. According to the literature providing patient-centered care is one of the most important interventions in terms of positive health-related outcomes for patients with multimorbidity.

Aim: The aim of the study is to evaluate the GPs' perception of patient oriented interventions as key elements of patient centred care for patients with multimorbidity.

Material and methods: A cross-sectional pilot study was conducted among randomly selected 73 GPs. A direct individual anonymous survey was performed to explore the opinion of respondents about the importance of two patient-oriented interventions, each one including specific elements of patient-centered care for patients with multimorbidity. The tool was developed as a result of the scoping review performed by Smith et al. (2012;2016). A 5-point Likert scale (0-not at all, 1-little, 2-rather, 3-much, 4-very strong) was used. The data were analysed using descriptive statistics. In processing the data, the software product for statistical analyses - SPSS version 17 was performed for Windows XP.

Results: Our results show that both categories - providing patient-oriented approach and self-management support interventions were highly accessed by the respondents. The most frequent categories of interventions identified in our study were Creating individualized and adapted interventions, Performing regular contacts and Reinforcing adherence. Less frequently reported elements such as Considering relatives' needs and Developing self-management plan are still underestimated by the Bulgarian GPs.

Conclusions: The acceptance and understanding of innovative patient-centered interventions adapted to patients with multimorbidity could be accepted as a good indicator for improving health-related outcomes and care for patients with multiple chronic conditions.

Keywords: GP, patient centred care, self-management, multimorbidity.

ПРЕДСТАВИ НА ОБЩОПРАКТИКУВАЩИТЕ ЛЕКАРИ ЗА ПАЦИЕНТ ОРИЕНТИРАНИТЕ ИНТЕРВЕНЦИИ КАТО КЛЮЧОВИ ЕЛЕМЕНТИ НА ПАЦИЕНТ ЦЕНТРИРАНИТЕ ГРИЖИ ЗА ПАЦИЕНТИ С ПОЛИМОРБИДНОСТ

Радост Асенова

Катедра Обща медицина, Медицински факултет, Медицински университет Пловдив,
r_assenova@yahoo.com

Левена Кирева

Катедра Обща медицина, Медицински факултет, Медицински университет Пловдив,
levena_2005@abv.bg

Гергана Форева

Акредитирана практика за обучение, АИППМП Брод ЕООД, Пловдив,
gerganaforeva@gmail.com

Резюме: Въведение: Полиморбидните пациенти представляват значителна част от пациентите в първичната здравна помощ. За тези, които осигуряват здравни грижи, управлението на пациенти с множество хронични заболявания представлява предизвикателство, като се има предвид сложността и интензивността на интервенциите. Интегрираната и насочена към пациента грижа се счита за ефективен отговор на нуждите на хората, страдащи от множество хронични заболявания. Данните от литературата показват, че предоставянето на пациент центрирана грижа е една от най-важните интервенции по отношение на положителните, свързани със здравето, резултати за пациенти с полиморбидност.

Цел: Целта на изследването е да се направи оценка на възприемането от страна на общопрактикуващите лекари на ориентирани към пациента интервенции като ключови елементи на пациент центрираната грижа при пациенти с полиморбидност.

Материал и методи: Проведено е пилотно проучване, сред 73 произволно избрани общопрактикуващи лекари. Използвана е пряка индивидуална анонимна анкета, с цел да се изследва мнението на анкетираните относно значението на ориентирани към пациента интервенции като елементи на пациент центрираната грижа за пациенти с полиморбидност. Разработен е оригинален инструмент, базиран на резултатите от проведено литературно търсене от Smith et al. (2012; 2016). Използвана е 5-точкова Ликертова скала (0 - изобщо не, 1 малко, 2 по-скоро да, 3 много, 4 много силно). Данните бяха анализирани с помощта на дескриптивна статистика. При обработката на данните, софтуерът за статистически анализи - SPSS версия 17 е извършен на Windows XP.

Резултати: Нашите резултати показаха, че и двете категории - осигуряване на пациент ориентиран подход и интервенции за подпомагане на пациента в самоуправлението на заболяванията са високо оценени от анкетираните. Най-често срещаните категории интервенции, идентифицирани в нашето изследване, са: Създаване на индивидуализирани и адаптирани интервенции, Провеждане на редовни контакти, срещи, консултации и последваща оценка и Подпомагане за придържане към терапията. По-рядко докладвани елементи като Отчитане на потребностите на близките и Разработване на план за самоуправление все още са подценявани от българските общопрактикуващи лекари.

Заключение: Приемането и разбирането на иновативните пациент-центрирани интервенции, адаптирани към пациенти с полиморбидност, може да се приеме като добър показател за подобряване на свързаните със здравето резултати и грижи за пациенти с множество хронични заболявания.

Ключови думи: общопрактикуващ лекар, личност центрирани грижи, самоуправление на заболяването, полиморбидност.

BACKGROUND

An increasing number of people are living with multimorbidity. [5] Patients with multimorbidity represent a significant portion of the primary healthcare population. [2]. The coexistence of two or more long-term conditions in one patient, is increasingly the norm in primary care chronic disease management. [3,13]

The patients with multiple chronic conditions present unique challenges to healthcare providers given the complexity and the intensity of interventions, and there is evidence that patients with multimorbidity receive a lower quality of care than those with single diseases. [1,4,10,14,15]

Integrated and patient-centered care is considered an effective response to the needs of people who suffer from multiple chronic conditions. According to the literature data, providing patient-centered care is one of the most important interventions in terms of positive health-related outcomes in patients with multimorbidity.

There is a broad international consensus [12,6] that multimorbidity is best addressed in primary care settings by means of a patient-centred approach, including regular appointments for comprehensive problem review and management options tailored to individual patient preferences. This care should be provided by a multi-disciplinary team, and should be based on effective coordination of care at all levels of the health care system. [7]

Given the complexity of managing people with multiple chronic conditions, potential interventions are likely to be complex and multifaceted if they are to address the varied needs of these individuals. Data from the literature indicates that a variety of intervention types could work to improve outcomes in people with multimorbidity. [11]

The reviews provide interesting insights into the types of intervention components that are being examined. However, the majority of interventions had multiple components incorporating different elements. [8,9,11]

Multimorbidity is common in clinical practice and is an important problem in most healthcare systems, Bulgaria in particular. Despite that fact, evidence supporting specific intervention types is limited.

The recommendations suggest that physicians and policy makers should prioritise interventions that target specific problems experienced by people with multimorbidity. [11]

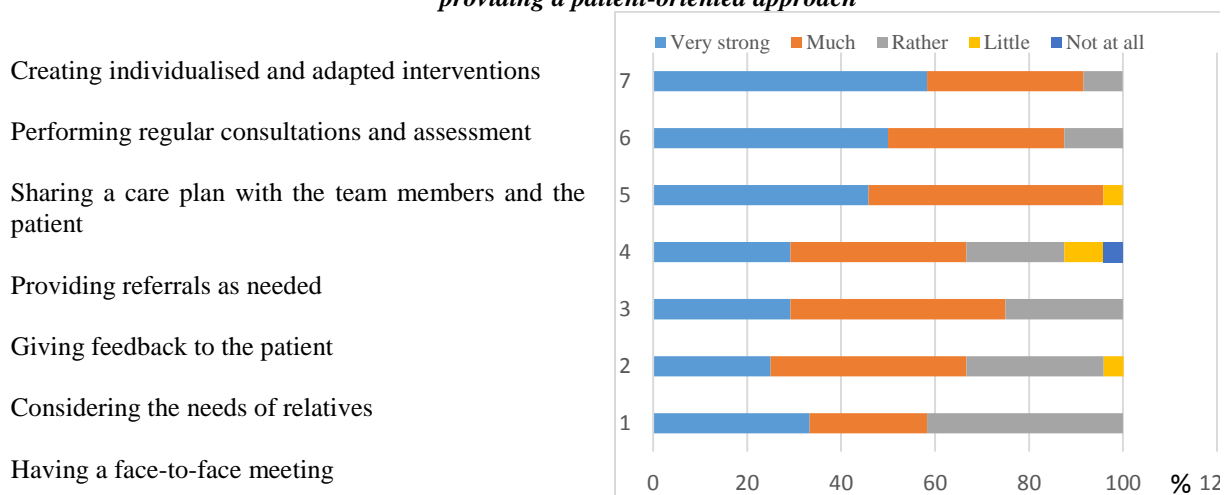
Aim: The aim of the study is to evaluate the GPs’ perception of patient-oriented interventions as key elements of patient-centred care for patients with multimorbidity.

Material and methods: A cross-sectional pilot study was conducted among randomly selected 73 GPs. A direct individual anonymous survey was performed to explore the opinion of respondents about the importance of two patient-oriented interventions, each one including specific elements of patient-centered care for patients with multimorbidity. The tool was developed as a result of the scoping review performed by Smith et al. (2012;2016). A 5-point Likert scale (0-not at all, 1-little, 2-rather, 3-much, 4-very strong) was used. The data were analysed using descriptive statistics. In processing the data, the software product for statistical analyses - SPSS version 17 was performed for Windows XP.

RESULTS

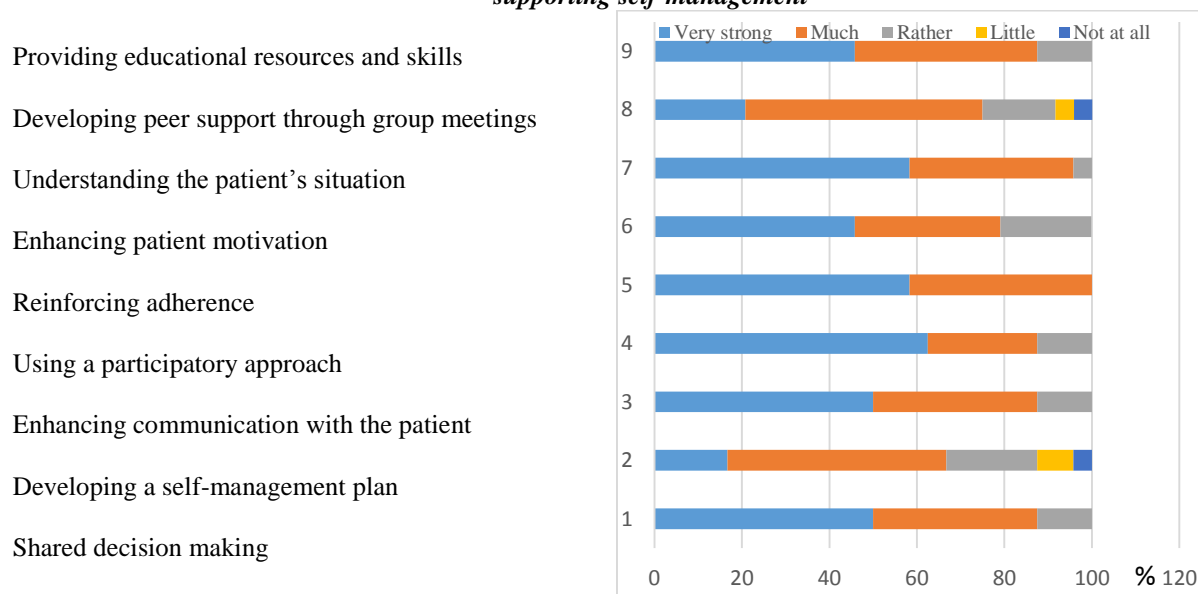
The results about the intervention elements „Providing patient-oriented approach”, grouped into seven sub-categories are presented in Table 1.

Table 1. Distribution of GPs according to their perception and attitude toward the patient-oriented intervention – providing a patient-oriented approach



GPs are responsible for the management of patients with multiple chronic conditions. Putting patients at the heart of the medical process is essential, and it has been shown to work. GPs also ensure that patients receive holistic, person-centred care, where the patient is involved in the decision making process which enables self-management. It is clear that self-management is not simply a matter of providing information to patients. It is a comprehensive approach to dealing with multimorbidity. Table 2 presents the results of the supporting self-management intervention elements.

Table 2. Distribution of GPs according to their perception and attitude towards the patient-oriented intervention - supporting self-management



DISCUSSION

The intervention elements „Providing patient-oriented approach“ are recognisable and evaluated as important in multimorbidity patient care. Of the sub-categories associated with the intervention, three were more prevalent: “Creating individualized and adapted interventions”, “Performing regular consultations and assessment” and “Sharing a care plan with the team members and the patient”. It is important to note that, even to an insignificant extent one of the elements has been assessed negatively, namely “Providing referrals as needed”.

The importance of the element “Reinforcing adherence”, related to the second patient-oriented intervention „Supporting self-management”, was assessed to a great extent by 100% of the GPs as much more important. Although the relative share of GPs who reported unsatisfactory assessment of the elements (such as “Developing self-management plan” and “Developing peer support through group meetings”) was low, it is important to put an emphasis on the need for further thorough research and training.

Conclusions:

Our results show that both categories - providing patient-oriented approach and self-management support interventions were highly assessed by the respondents. The most frequent categories of interventions identified in our study were “Creating individualised and adapted interventions”, “Performing regular consultations” and “Reinforcing adherence”. Less frequently reported elements such as “Considering the needs of relatives” and “Developing a self-management plan” are still underestimated by the Bulgarian GPs.

The understanding of innovative patient-centered interventions adapted to patients with multimorbidity could be accepted as a good indicator for improving health-related outcomes and care for patients with multiple chronic conditions.

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