

Primary care assessment: some previous experiences from Spain and Argentina

Silvina Berra, MPH, PhD.
CONICET – School of Public Health, National University of Cordoba

PCAT: *Primary Care Assessment Tools*

Interest for PC assessment in Spain

- General Health Law of 1986
- PC reform since 1996
- Increasing number of PC evaluations
- Lack of information about the population view

Martín Zurro et al. *Aten Primaria*. 2000; 25:45-58.

The population perspective

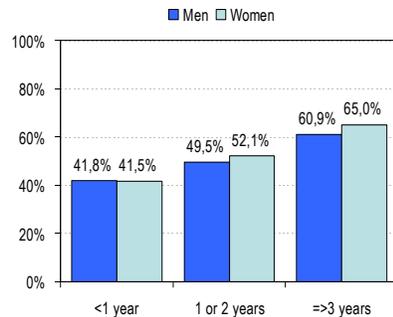
- How good is PC from the population perspective?
- Are there social inequalities in the experiences with PC?

The Catalan Health Interview Survey

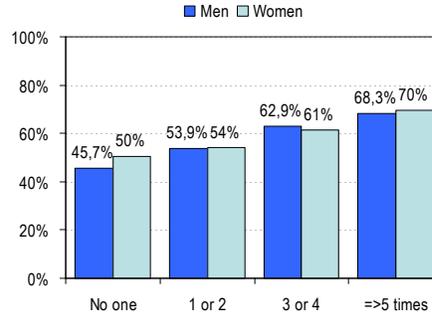
- Conducted periodically since 1983 in Barcelona city and 1994 in Catalonia
- Cross-sectional study carried out in a representative sample of non-institutionalized residents
- It evaluates population's health status, health determinants, and performance of healthcare services
- The 2006 edition included a selection of items from the PCAT consumer versions.

Good experiences with PC by utilization. Catalonia 2006.

Percentage of people scoring a good experience with PC by the time with the same provider



Percentage of people scoring a good experience with PC by the number of visits to the PC provider



2006 Catalan Health Interview Survey – Adult population

Parents scores on primary care experiences for children

PC attributes	Mean scores (SD)	% scoring 3 or more	% scoring under 2.5
First contact	3.40 (0.52)	74.1	3.9
Continuity of care	3.25 (0.73)	60.6	13.5
Coordination	3.43 (0.86)	69.2	10.0
Services available	3.21 (0.51)	62.1	5.7
Services received	3.03 (0.96)	50.7	19.1
Cultural competence	3.50 (0.77)	71.2	7.9

2006 Catalan Health Interview Survey - Children 0 –14 years

“Poor” experiences with PC: characteristics associated to weak first contact-accessibility

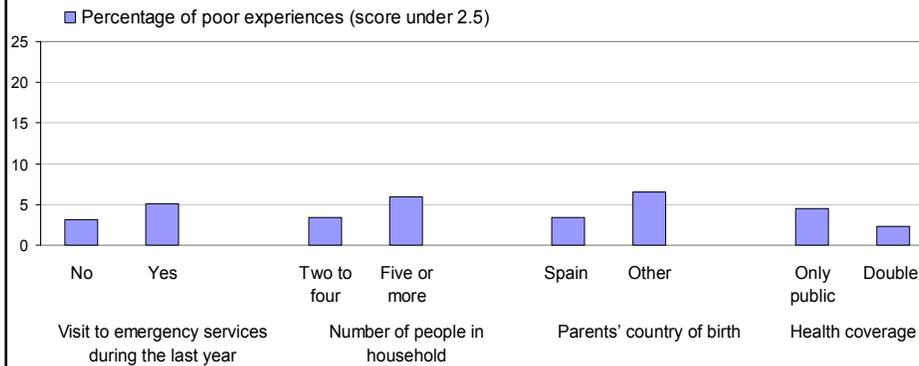


Figure presents only variables with statistical significance within the multivariate model.

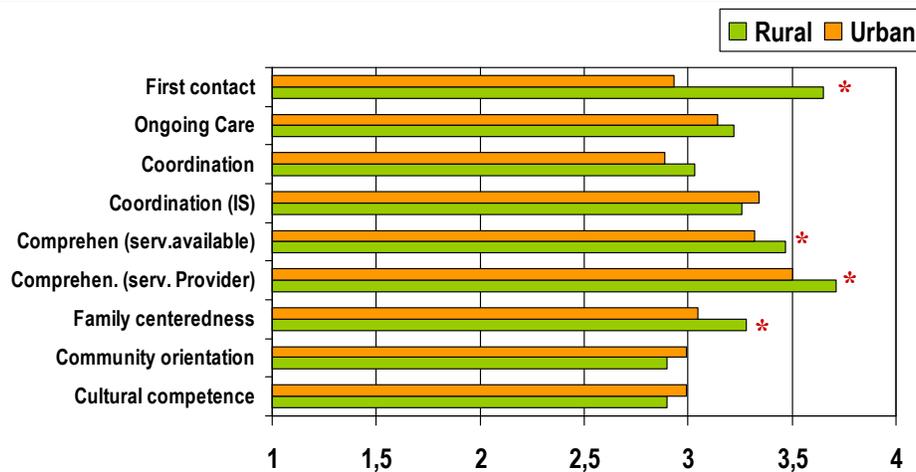
2006 Catalan Health Interview Survey - Children 0 –14 years

The view of PC teams directors

- There are differences in the degree of achievement of PC attributes by characteristics of the PC centers or teams?
- Methods:
 - Cross-sectional study in 194 PC teams of the Barcelona health region.
 - Directors were contacted by phone and e-mail: 69 % response.
 - PCAT facilities expanded version, previously adapted and pilot tested.

Maribel Pasarín, Agency for Public Health of Barcelona

Degree of achievement of PC attributes by area. Barcelona Health Region. Scale 1-4 points.



Maribel Pasarín, Agency for Public Health of Barcelona

Some findings from the Catalan studies

- In general PC was evaluated positively by the population.
- There were some differences in experiences by socio-demographic variables (inequalities).
- The population experience with PC was related with the utilization of services.
- There are organizational and financial issues of facilities related to the strength of PC.
- Areas for improvements: ongoing care and services received (by people), cultural competence, coordination and first contact (by directors).

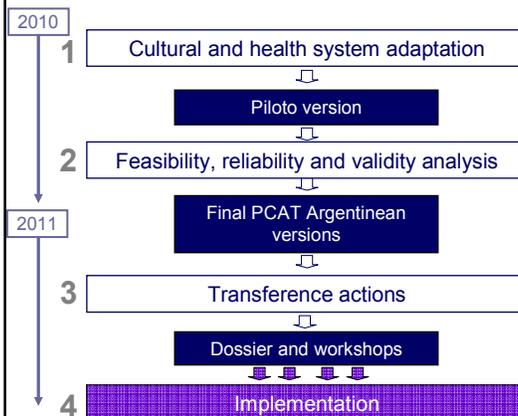
Adaptation and implementation in Argentina

Silvina Berra, MPH, PhD.
CONICET - Escuela de Salud Pública
Facultad de Ciencias Médicas, Universidad Nacional de Córdoba

PCAT: *Primary Care Assessment Tools*

PCAT projects in Argentina

Local projects:



Institutional support:

- CIESS, School of Public health, National University of Cordoba (UNC).
- Johns Hopkins University (EUA)
- Public secondary schools
- University insurance (Obra social universitaria, UNC).
- Municipality of Cordoba city
- Government of the Province of Cordoba

Scientific and financial support: CONICET, Ministerio de Ciencia, Tecnología e Innovación Productiva.
SACYT, Comisión Nacional de Salud, Ciencia y Tecnología, Ministerio de Salud de la Nación.
SECYT, Universidad Nacional de Córdoba

Pilot studies on Feasibility, reliability and validity analysis

- To test modes of administration
- To know participation rates
- To analyze reliability and validity of Argentinean versions

Pilot studies

Secondary schools

- Parents answering for themselves (PCAT-AE) and for their youths (PCAT-CE)
- Middle and low social class
- Paper self-administration
- Participation and response:
 - Eligible parents: 542
 - Accepted to participate: 336 (62%)
 - Responded: 271 (81%)

Overall response rate: 50%

Social insurance

- Adults affiliates (18 years and older answering for themselves (PCAT-AE)
- Mostly university employees
- Digital and paper self-administration, phone interview
- Participation and response:
 - Initial random sample: 500
 - Located: 309 (62%)
 - Accepted to participate: 261 (84%)
 - Responded: 168 (64%)

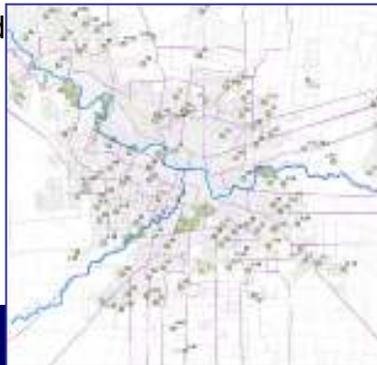
Overall response rate: 54%
(over localized)

Transference actions

- Objectives:
 - To divulgate the conceptual model and the tools to assess PC
 - To promote and support the PC assessment at the local level

Transference in Cordoba city

- Target:
 - 115 PC centers in the public first level of care (95 municipal and 20 provincial)
 - 900 healthcare professionals
 - Approximate population served 500,000 inhabitants
- Plan: 4 hours meetings
 - Model and tools
 - Administration of PCAT



Some lessons from the previous experiences: difficulties and opportunities

PCAT: *Primary Care Assessment Tools*

The PCAT: strong bases

- A widely recognized theoretical model
- A set of instruments to collect original information from diverse points of view (consumers, providers, directors, etc.)
- A detailed and complete user's manual
- An increasing number of studies and groups interested in their use around the world

To adapt the tools

- Instruments must be adequate to the population.
- The **method of cross-cultural adaptation** takes time and is quite complex, but guarantee the validity of the measurement and the **equivalence** between the (new) local version, the original, and other countries versions.
- **Cross-cultural equivalence:** the words and expressions mean the same thing, and the experiences of daily life captured by the questionnaire are equally experienced in the original and the target culture.

Defining translation and adaptation

Translation: Linguistic transcription from the original to the local language

Cultural adaptation: Changes due to culture (semantic and experiential equivalence)

Healthcare system adaptation: Review of health system and services elements and characteristics and variations

Who does and tests this?

✓ Bilingual translators who have the target language as their mother tongue

✓ Translators
✓ People from the target population

✓ Working group integrated by professionals with different disciplines and from diverse affiliation

Scenarios where some form of cross-cultural adaptation is required

The tools will be used...	Translation	Cultural adaptation	Health-sys adaptation
...in same population (no change in language, culture or country)	—	—	—
...in ethnic minorities or established immigrants in country	—	X	—
...in new immigrants, not speaking the local language, in same country	X	X	—
...in another country, same language	—	X	X
...in another country and another language	X	X	X

Adapted from Beaton et al. 2002.

To design the assessment

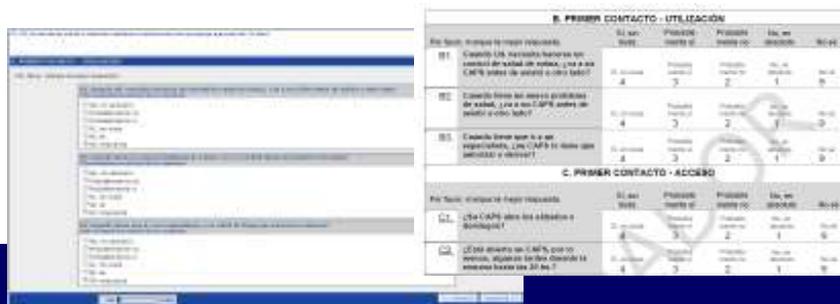
- To define the objectives
- To chose the perspective
 - System
 - Facilities
 - Providers
 - Consumers
- To consider the feasibility of conducting a valid study

To define population and sampling

- When population is the object of the study:
 - Whole population
 - Covered population
 - Users
- When PC centers are the object of the study:
 - The facility's director (PCAT-FE)
 - The best person to inform about the facility (PCAT-FE)
 - All physicians and nurses of the centre (PCAT-PE)
 - A small group of professionals intentionally selected to represent the team (PCAT-PE)

Alternatives of administration

- Phone
- Personal interview
- Paper self-administration
- Digital self-administration



B. PRIMER CONTACTO - UTILIZACIÓN						
El Sr/a	El Sr/a	Primeros	Primeros	Us, en	Us, en	
encuestado	encuestado	contactos	contactos	último	último	último
		último	último	último	último	último
101.	¿Cualquiera de los miembros de su familia ha utilizado alguna vez un CAPE?	4	3	2	1	0
102.	¿Cualquiera de los miembros de su familia ha utilizado alguna vez un CAPE en un centro de salud?	4	3	2	1	0
103.	¿Cualquiera de los miembros de su familia ha utilizado alguna vez un CAPE en un centro de salud, pero no en un CAPE en un centro de salud?	4	3	2	1	0
C. PRIMER CONTACTO - ACCESO						
104.	¿Ha utilizado alguna vez un CAPE en un centro de salud?	4	3	2	1	0
105.	¿Ha utilizado alguna vez un CAPE en un centro de salud, pero no en un CAPE en un centro de salud?	4	3	2	1	0

To analyze within the international context

- Beyond the cut of points within PCAT domains...
- Studies using the PCAT in other countries can be a reference for local studies.
- Local studies help to know the international situation of PC and to identify issues for improvement in different contexts.

Thank you!

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Silvina Berra, PhD, MPH.
School of Public Health, National University of Cordoba, Argentina.
National Research Council of Argentina (CONICET).