Validation of the Primacy Care Resources and Support for Chronic Disease Self-Management (PCRS): An assessment tool for the quality of self-management support

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Abstract

Introduction: The treatment of patients with a chronic condition is challenging the sustainability of healthcare systems worldwide. One possibility to utilize healthcare resources more efficiently is to enhance self-management of patients. However, self-management has not found a commonplace in chronic healthcare and one of the reasons is the lack of self-management support (SMS) given by healthcare professionals. To improve SMS, an assessment of the quality of current SMS in a healthcare organization is necessary. The Primary Care Resources and Support for Chronic Disease Self-management (PCRS) is an instrument to measure the quality of SMS, but evidence on its validity and reliability is limited. In this study we assessed the validity and reliability of the PCRS.

Objective: The goal of this study is to assess the validity and reliability of the PCRS in measuring the quality of SMS by healthcare professionals.
Method: In this observational study, we collected data on SMS in healthcare organization to investigate the face-, construct- and discriminant validity, as well as the reliability of the PCRS. We translated the PCRS from English to Dutch according to WHO recommendations. We asked health care professionals from general and specialized healthcare organizations to complete the PCRS, ACIC and CS-PAM and to assess the understandability and applicability of each individual item of the PCRS for face validity. The correlation between the self-management scale of the ACIC and the PCRS was a measure for construct validity, while the lack of a correlation between the CS-PAM and the PCRS was a measure for discriminant validity. To measure its reliability, we compared the correlation between the total score on t=0 to the total score on t=1, two weeks thereafter. Also, we assessed point reliability on t=0.

Results: Data from 50 healthcare professionals showed that most items of the PCRS were considered to be completely understandable and relevant. The PCRS total score correlated strongly with the total score of the ACIC SMS subscale (r= .730, p<.001). We found no correlation between PCRS total and CS-PAM (r=.030, p>.005). Finally, Cronbach’s α and Guttmann’s λ, measuring respectively the test-retest and point-reliability, were high (r>0.9).

Conclusion: We found evidence that the PCRS is a valid and reliable tool to assess the quality of SMS and is applicable for chronic healthcare. The PCRS consists of understandable items appropriate to assess SMS. It measures self-management support by healthcare professionals in an objective manner; it does not reflect the perception of healthcare professional on their self-management support.

Discussion: Healthcare professionals who want to assess the quality of SMS, can use to the PCRS as a valid and reliable assessment tool. Based on its outcomes, the PCRS may direct the development of a tailored improvement plan, focusing on SMS during patient consultation as well as the organization of SMS. Future studies should investigate the added value of the PCRS in improving the quality of SMS.

Keywords

self-management; assessment; quality; questionnaire

PowerPoint presentation

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