CONFERENCE ABSTRACT

Can somatic healthcare use predict whether patients with chronic conditions consider the cooperation of their care to be good? A longitudinal cohort study.

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Background: Coordination of services are especially challenging for persons with chronic conditions, as they tend to use a range of different services. The coordination is dependent of good cooperation between those who work in the different services. The patients are the best judge of this cooperation as they are the only ones who experiences all parts of the services.

Aim: The aim was to investigate whether consumption of healthcare could predict how satisfied patients' with chronic conditions were with the cooperation of care between the healthcare services they had received the last two year.

Methods: Longitudinal total population cohort study of a random sample of persons 18 years and older with a chronic disease or long lasting condition who had used at least one somatic healthcare service during a two year period. The data sources was register data and a question about “The health care workers from the different services have cooperated well with each other” (5 point balance Likert with Strongly disagree to Strongly agree) which was the dependent variable. The independent variables were the use of primary and secondary healthcare services, gender, age, education and health status. The data were analysed using logistic regression.

Results: The population consisted of 173 050 persons who had used at least one somatic health care service (90% of the total population). A total of 94 967 (54.9%) had a chronic condition and of these a random sample of 12 502 (13.2%) persons where drawn with 3 158 (25.3%) returning the questionnaire.

The respondent analysis showed that the respondents and non-respondents were very similar, but the respondents were somewhat older with more persons in the age group 45 to 79 years, and less in the age group 18-44.

The 56% of the respondents were women, 37% were 69 years and older, 26% lived alone, 49% had higher education and 28% reported to have poor or not very good health.

Increasing age (adjusted OR increasing from 2.3 (25 to 39 years) to 7.2 (80 years and older) was the strongest predictor for being satisfied with the cooperation between the health care
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workers in the different services. Having higher education, living alone and poor self-reported health predicted less satisfaction with cooperation of care.

**Conclusions:** Consumption of health care had a negligible effect on satisfaction with cooperation of care. Being 25 years or younger, having higher education, living alone and having poor self-reported health independently predicted less satisfaction with cooperation of care.

**Keywords:** patient experience; coordination; cohort study