

CONFERENCE ABSTRACT

Is there enough Amour in the Basque Health Service? Evaluating Interprofessional cooperation using D'Amour Questionnaire

17th International Conference on Integrated Care, Dublin, 08-10 May 2017

Mario Del Rio Camara¹, Maite Paino Ortuzar², Sergio Resino Santamaria², Marisa Arteagoitia Gonzalez¹, Carlos Sola Sarabia²

1: BIOEF (Basque Foundation for Health Innovation and Research), Spain;

2: Osakidetza / Basque Health Service, Spain

Introduction: D'Amour Questionnaire was validated by the Basque Ministry of Health and BIOEF in 2010 (1) to measure the degree of collaboration among health professionals from different levels of care. It is one of the qualitative indicators that were introduced by the Ministry in 2015 to all 18 Integrated Care Organisations (ICOs) and it helps to evaluate how integration policy is perceived among health professionals.

Methods: The questionnaire has 10 items and uses a Likert scale. In addition to this, an 11th question has been added where respondents are asked to propose actions to improve collaboration between care levels. Traditionally this survey was conceived for health professionals, however in 2016 non health personnel, such as social workers, admin and ancillary staff have been included. They also participate in pathways and other integration processes and their opinion should be equally valued.

Results: In 2016 there have been 1975 answers (10% answer rate) of which 75% are female. The number of participants coming from hospital care is slightly higher than from primary care (see Figure 2) and nurses are the more frequent respondents (35%) followed by doctors (33%) (see Figure 3).

Quantitative: Figure 1 shows the evolution of D'Amour since 2012 and in colored numbers the results of 2016's evaluation (green=improvement, yellow=same result, red=worse). The worst valued item across time is "Forums for Meetings" and the two most valued items are "Shared Goals" and "Trust".

Qualitative: More than 800 proposals of actions to improve collaborations coming from the 11th item were analyzed. Figure 4 shows that 48% of the respondents demand actions related with item "Forums for meetings" followed by "Protocolisation" (23%), improvements in "Information Systems" (10%) and one item that does not appear in D'Amour: "Shared Training" (8%).

Discussion: There is a slight but continuous improvement across time, especially if the first and last evaluation are analyzed. This is important since in 2012-13 only part of the ICOs had been created and it gives an idea of how perception has changed..

“Forums for meetings” is one of the improvement areas identified both in the quantitative and qualitative analysis, this pattern also occurs in the best performing ICOs, when analyzed individually (2). However professionals perceive “Shared Goals” and “Trust” as one of the most valued items. This could imply that despite sharing a common narrative of what working and trusting each other means they lack the resources (space and time) to get to know each other better. This is also reflected on the item “Shared Training” that has been identified in the qualitative analysis.

Conclusions: D'Amour Questionnaire is a valid tool for Organisations to identify one of the non tangible aspects of integrated care, which is how professionals collaborate with each other when they work in a different level of care but have the goal to serve the same patient. Moreover, it also gives the opportunity to health professionals to engage in this process by providing ideas/actions to improve it.

References:

- 1- Nuño Solinís R, Berraondo Zabalegui I, Sauto Arce R, San Martín Rodríguez L, Toro Polanco N. Development of a questionnaire to assess interprofessional collaboration between two different care levels. *International Journal of Integrated Care*. 2013;13(2). DOI: <http://doi.org/10.5334/ijic.984>
- 2- Toro Polanco N, Berraondo Zabalegui I, Pérez Irazusta I, Nuño Solinis R, Del Río Cámara M. Building integrated care systems: a case study of Bidasoa Integrated Health Organisation. *International Journal of Integrated Care*. 2015;15(2). DOI: <http://doi.org/10.5334/ijic.1796>

Keywords: integrated care; interprofessional cooperation; evaluation tools
