

Conference abstract

The association between chronic care management and the quality of thrombosis care

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Abstract

Introduction: The oral anticoagulant therapy (OAT), used to prevent thrombosis, is associated with substantial avoidable hospitalization.

Aim: Identify the associations between chronic care management and the quality of OAT as suggested by the chronic care model (CCM) of Wagner.

Methods: Regression analysis with data of 61 thrombosis clinics and inductive analysis with 63 interviews with health care professionals of 23 thrombosis clinics.

Results: Results show substantial differences between regions in the quality of thrombosis care and the CCM activities. However, the variation in quality of care was not associated with the differences in CCM activities. The inductive analysis indicates that there are problems in the cooperation between caregivers. Several preferred CCM activities (e.g., multidisciplinary protocol) as well as the barriers to implement these activities (e.g., conflicting interests) were put forward by the health care professionals.

Conclusion: It can be concluded that there is variation in quality of thrombosis care between regions. This variation could not be explained by the observed differences in CCM activities. However, fragmentation is a major source of inefficiency according to health care professionals. The paper concludes with suggestions to improve chronic care management for thrombosis.

Keywords

quality of care, thrombosis, chronic care management, disease management, effectiveness
