
POSTER ABSTRACT**Experiences of health services among patients with chronic conditions**18th International Conference on Integrated Care, Utrecht, 23-25 May 2018Anna-Mari Aalto¹, Marko Elovainio^{1,2}, Tuulikki Vehko¹, Timo Sinervo¹

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Introduction: Patients with chronic illnesses often have complex health care needs and use multiple social and health care services. This study examined experiences about health care use among persons with chronic conditions and whether these experiences were associated with sociodemographic factors, health care needs and use of health care services.

Methods: The data were from a randomly sampled population survey concerning health care experiences n=2626, response rate 46%. In this study we used a subgroup of persons with a chronic illness n=1282. The outcome measures were experiences about: access to care, respectful treatment, participation to care and coordination of care during the last 12 months. The explanatory factors were sociodemographic factors, need for care functional limitation, depression, use of health services ambulatory care and hospitalization and having a continuous therapeutic relationship regular physician. Multivariate logistic regression was used to analyze the relationships between the explanatory and outcome variables.

Results: In fully adjusted models, more negative experience of care on all dimensions were reported by those with severe functional limitations ORs 0.35-0.49 and frequent visit to ambulatory care ORs 0.43-0.59, while continuous therapeutic relationship was related better experiences on all dimensions ORs 1.50-1.91. Depression was related to more negative experiences in respectful treatment OR= 0.54 and poorer coordination of care OR=0.61. Those who had been hospitalized during the past year reported more problems in respectful treatment OR=0.57 and coordination of care OR=0.41. Compared to those using public health centers as the main site of ambulatory care, better access to care was reported by those using private clinic OR=2.24, occupational health care OR=1.91 or hospital outpatient clinic OR=2.45. Participation to care was more often reported by those using hospital outpatient clinic as main site of care compared to other groups.

Discussion: In conclusion, these results indicate poor responsiveness of the health care system among those with complex health care needs and frequent use of health care. The lesson learned from the study is that many of the common problems of the Finnish health care system, such as poor and inequitable access to care and problems in integration, are reflected also in experiences of those with higher health care needs. Frequent attenders 10% of health care users are estimated to cause a substantial proportion of all health care costs. Thus, organizations and responsiveness of health care should be monitored from the point of view

of these vulnerable users. The limitation of the study is that we were not able to examine experiences in terms of specific illnesses. Future studies should focus on condition specific health care needs and experiences.

Keywords: health services; chronic condition; user experiences; health care; responsiveness
