Identifying & Examining Measures to tap Person-Centred Coordinated Care (PCCC)

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BACKGROUND
- Person Centred Coordinated Care (PCCC) is a priority for all stakeholders (e.g. patients, carers, staff, commissioners, and policy makers).
- Our (South West (SW) Peninsula CLAHRC) collaboration with SW Academic Health Science Network is advancing thinking, innovation and research evaluation for PCCC.
- To address the latter, we are establishing a consistent multi-level and multi perspective evaluation and measurement framework.
- Aim: The aim of this work was to identify measures that tap peoples experiences of PCCC for routine practice.

METHODS
- **Design:** Structured review and critical examination of measures.
- **Article/documents reviewed:**
  1. Recently published systematic reviews on integrated care (IC/CC), person-centeredness, care coordination and care continuity.
  2. Grey literature and reports published by organisations such as the Agency for Healthcare Research and Quality, and the Health Foundation.
  3. Measures currently used in DH Integrated Pioneers and those used for the DH Pilot IC site evaluation.
- **Inclusion criteria:**
  1. Patient perspective of experience of care,
  2. Care from multiple providers,
  3. Taps experiences of coordinated care.
- **Mapping:** To aid comparison, each item from questionnaires that met inclusion criteria were mapped to 14 core IC domains identified from the National Voices ‘I’ statements1, the Year of Care model2 and relevant key literature (Table 1).

FINDINGS
- Sixty four measures were identified from the above process, of which only seven met the inclusion criteria (Figure 1).
- Longer questionnaires (PPIC, PPCMC) covered higher number of integrated care domains than shorter ones (LTC-6).
- Only three questionnaires (PPIC, PPCMC, PACIC) had established psychometrics.
- As part of an iterative process, these measures were presented to stakeholders in four workshops to explore strengths and weaknesses in terms of applicability and utility in their respective settings.
- The LTC-6 was the most preferred measure based on its length, relevance and utility for routine practice. However, stakeholders identified that the questionnaire needed some additional items in relation to the coordination of care.
- Accordingly, changes are now being made.

NEXT STEPS
- Cognitive testing of the Modified LTC-6 questionnaire.
- Pilot testing in local Integrated Care sites.
- Further psychometric testing with additional questions.

REFERENCES
1. National Voices. 2013: A Narrative for Person-Centred Coordinated Care.
2. The Kings Fund. 2013: Delivering better services for people with long-term conditions: Building the house of care.

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