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## PATIENTS' ASSESSMENT OF CHRONIC ILLNESS CARE



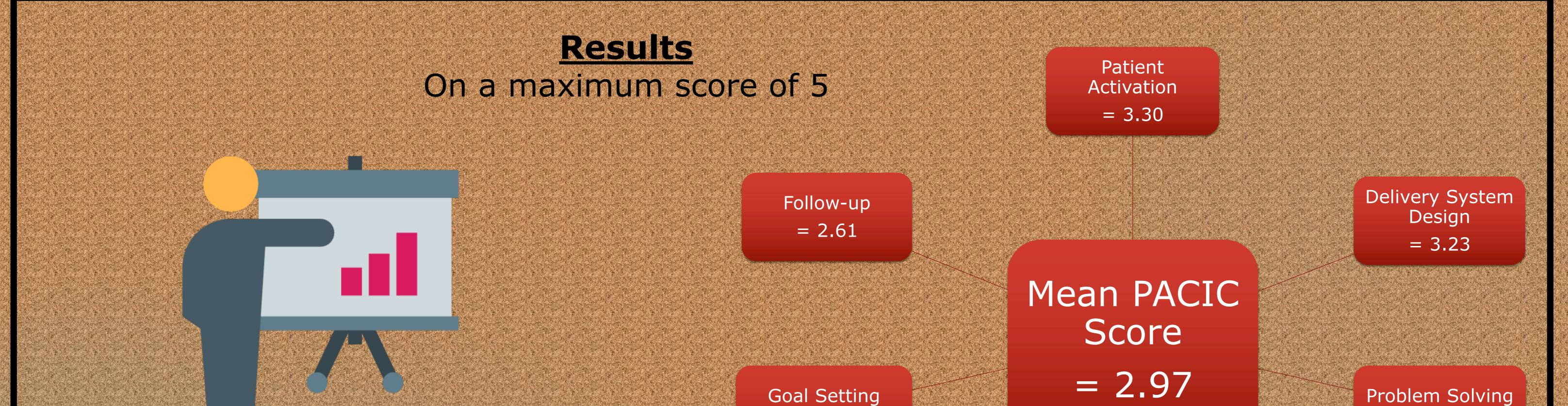
## INTRODUCTION

THE INCREASING PREVALENCE OF PATIENTS SUFFERING FROM CHRONIC CONDITIONS, TOGETHER WITH THE FRAGMENTED DELIVERY OF CARE, URGE THE OPTIMISATION OF THE QUALITY OF CHRONIC CARE. THE OBJECTIVE OF THE PRESENT STUDY WAS TO EXPLORE PATIENTS' PERCEPTIONS ON CHRONIC ILLNESS CARE IN FLANDERS, THE DUTCH SPEAKING PART OF BELGIUM.



AN OBSERVATIONAL, CROSS-SECTIONAL STUDY DESIGN WAS APPLIED BY USING AN ONLINE QUESTIONNAIRE, PARTLY BASED ON THE PATIENT ASSESSMENT OF CHRONIC

## ILLNESS CARE (PACIC) SURVEY. PARTICIPANTS WERE RECRUITED FROM THE FLEMISH PATIENTS' PLATFORM NETWORK BETWEEN MARCH AND JULY 2016.



= 2.70

= 2.86

IN TOTAL, 303 PATIENTS WITH A CHRONIC ILLNESS COMPLETED THE SURVEY. MEAN AGE WITHIN THE SAMPLE WAS 56.71 YEARS (SD +/- 11.62) AND THE MAJORITY OF RESPONDENTS WERE FEMALE (65.3%). MEAN NUMBER OF CHRONIC CONDITIONS WAS 2.31 (SD +/- 1.78). THE FIVE MOST PREVALENT CHRONIC CONDITIONS IN THE SAMPLE WERE CHRONIC LOW BACK PAIN (31.0%), MULTIPLE SCLEROSIS (29.4%), JOINT ARTHROSIS (22.8%), CHRONIC NECK PAIN (22.1%), AND ARTERIAL HYPERTENSION (14.5%). THE MEAN PACIC SUMMARY SCORE WAS 2.97 (SD +/- 0.93). MEAN SCORES FOR THE SUBSCALES RANGED FROM 2.61 (FOLLOW-UP) TO 3.30 (PATIENT ACTIVATION). PATIENTS' CHARACTERISTICS (AGE, GENDER, EDUCATIONAL LEVEL, AND NUMBER OF CHRONIC CONDITIONS), MEDICAL CONSUMPTION (NUMBER OF CONTACT MOMENTS WITH A GENERAL PRACTITIONER AND/OR SPECIALIST), AND QUALITY OF LIFE WERE NOT SIGNIFICANTLY ASSOCIATED (P > 0.05) WITH DIFFERENCES IN PACIC SCORES.





IMPROVING QUALITY OF CHRONIC CARE REQUIRES A COMPREHENSIVE UNDERSTANDING OF PATIENTS' PERCEPTIONS. THE CURRENT STUDY IDENTIFIED SEVERAL AREAS (SUCH AS SETTING SPECIFIC GOALS IN THE CARE PLAN AND PLANNING FOLLOW-UP VISITS) WHERE QUALITY IMPROVEMENT EFFORTS MIGHT BE BENEFICIAL, SUGGESTING THAT RECENT AND DIRECT PATIENT-PROVIDER INTERACTIONS MAY PLAY AN IMPORTANT ROLE IN ENHANCING CARE CONTINUITY AND COORDINATION.

