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Primary Care Assessment – the PCAT

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Primary Care Course (Based on Cape Town, South Africa, 2007; and Barcelona, Spain, 2009) This presentation describes an instrument to assess experiences with the various aspects of primary care from the viewpoint of consumers, patients, practitioners, and managers, as well as from an overall systems view. All versions are comparable in that they each address the achievement of important functions of primary care.

Evaluating the Delivery of Primary Care

An existing suite of instruments makes it possible to evaluate the primary care orientation of health systems and facilities. It includes surveys of:

- Professionals knowledgeable about the health system
- People in communities
- Patients, professionals, and administrators of health care facilities

It is known as the PCAT (Primary Care Assessment Tool).

How Are the Features of Primary Care Actually Measured?

Principle: Each domain of primary (health) care has two subdomains, one related to important characteristics of the facility or practice and one related to the performance of the practitioner or facility on primary care functions.

The PCAT is used to assess the achievement of primary care from the point of view of people in the community, by patients, and by health professionals and managers.

The Primary Care Assessment Tool (PCAT)*

website: http://www.jhsph.edu/pcpc/pca_tools.html

PCAT Languages

- English
- Spanish
- Catalan
- Portuguese
- French (Quebec)
- Korean
- Turkish
- In progress: Mandarin, Maltese

PCAT (Primary Care Assessment Tool)

A family of comparable instruments (adult, child) (community, patients, facilities, providers, managers) to assess the strength of:

- Primary Health Care systems
- First-contact access and use
- Longitudinality (identification with a place/provider; interpersonal relationships)
- Comprehensiveness (services available, services provided)
- Coordination (information transfer; integration of care)
- Community orientation
- Cultural sensitivity
- Family-centeredness

PCAT (Primary Care Assessment Tool)

- First-contact (access and use)
- Person-focused care over time
- Comprehensiveness (services available and provided)
- Coordination
- Family centered
- Community oriented
- Culturally competent

PCAT Versions

Primary Health Care
Systems assessment (policy makers and managers)

Primary Care
Adult consumer long/short
Child consumer long/short
Facility long/short
Provider long/short

PCAT Domains

First contact

Longitudinality

Coordination

Comprehensiveness

Family-centeredness

Community orientation

Cultural competence

Primary Care Domains and Subdomains: First Contact

First-contact: accessibility

 Health system characteristics that facilitate access; e.g., if closed on weekend days would the individual be seen by a practitioner from the facility?

First-contact: use for each new need (consumer only)

 Use of primary care place for each new need (regular checkup, immunization, an acute illness.)

PCAT: First Contact Subdomains

Accessibility

Use for first contact

PCAT: First Contact - Access

- 1. When your PCP is *closed* and you get sick during the night, would someone from there see or talk with you that night?
- 2. When your PCP is *open* and you get sick, would someone from there see you the same day?
- 3. When the office is open, can you get advice quickly over the phone if you need it?
- 4. When the office is *closed*, is there a phone number you can call when you get sick?

PCAT: First Contact - Utilization

I go to my PCP before going somewhere else

- a. when I need a regular checkup
- b. when I have a new health problem
- c. when I have to see a specialist

Primary Care Domains and Subdomains: Longitudinality

Longitudinality: strength of affiliation (consumer only)

 Strength of relationship with a specific provider, e.g., degree to which the identified provider is also the place who knows the individual best and from whom care would be sought for a new problem.

Longitudinality: relationship

 Person orientation of practitioner/patient interactions, e.g., degree of interest of doctor in the individual as a person, rather than as someone with a medical problem.

PCAT: Longitudinality Subdomains

Extent of relationship

Interpersonal relationships

PCAT: Longitudinality

- 1. When you go to see your PCP, do you see the same doctor or nurse each time?
- 2. Does your PCP know you very well as a *person*, rather than as someone with a medical problem?
- 3. Does your PCP know what problems are most important to you?
- 4. If you have a question, can you call and talk to the doctor who knows you best?

PCAT*: Primary Care Domains and Subdomains: Comprehensiveness

Comprehensiveness: services available

 Availability of 11 specific services, e.g., family planning.

Comprehensiveness: services provided

 Services received from the primary care source, e.g., discussions of ways to stay healthy.

PCAT*: Comprehensiveness Subdomains

Services available

Services provided (received)

PCAT*: Comprehensiveness (Services Available**)

Following is a list of services that you or your family might need at some time. For each one, please indicate whether it is available at your PCP's office.

- 1. Family planning or birth control methods
- 2. Counseling for mental health problems
- 3. Sewing up a cut that needs stitches
- 4. Vision screening

PCAT*: Comprehensiveness (Services Provided**)

In visits to your PCP, are any of the following things discussed with you?

- 1. Advice about healthy foods and unhealthy foods
- 2. Ways to handle family conflicts that may arise from time to time
- 3. Advice about appropriate exercise for you
- 4. Checking on and discussing the medications you are taking

Primary Care Domains and Subdomains: Coordination

Coordination: medical record continuity (provider only)

 Do you use flow sheets to assure that needed services are provided? (Also, printed practice guidelines, periodic medical audits, problem lists, medication lists.)

Coordination: integration of referrals

Quality of primary care-referral interface, e.g.,
 Did the primary care practitioner know you made a visit to a specialist?

PCAT: Coordination Subdomains

Medical records adequacy (Provider version only)

Coordination

PCAT: Coordination

- 1. Did your PCP discuss with you different places you could have gone to get help with that problem?
- 2. Did your PCP or someone working with your PCP help you make the appointment for that visit?
- 3. Did your PCP write down any information for the specialist about the reason for that visit?
- 4. After you went to the specialist or special service, did your PCP talk with you about what happened at the visit?

Primary Care Domains and Subdomains: Family Centeredness, Community Orientation, Cultural Competence

Family centeredness

 Does doctor ask about opinions of family members when planning treatment and care?

Community orientation

 Does doctor know about important health problems of the neighborhood?

Cultural competence

 Would you recommend doctor to someone who uses folk medicine or has special beliefs about health care?

PCAT: Family-centeredness

- 1. Does your PCP ask you about *your* ideas and opinions when planning treatment and care for you or a family member?
- 2. Has your PCP asked about illness or problems that might run in your family?
- 3. Would your PCP meet with members of your family if you thought it would be helpful?

PCAT: Community Orientation

- 1. Does anyone at your PCP's office ever make home visits?
- 2. Does your PCP know about the important health problems of your neighborhood?
- 3. Does your PCP get opinions and ideas from people that will help to provide better health care?

PCAT: Cultural Competence

- 1. Would you recommend your PCP to a friend or relative?
- 2. Would you recommend your PCP to someone who does not speak English well?
- 3. Would you recommend your PCP to someone who uses folk medicine, such as herbs or homemade medicines, or has special beliefs about health care?

First contact: accessibility

Health system characteristics that facilitate access; e.g., if facility is closed on weekend days, would the individual be seen by a practitioner from the facility?

First contact: use (consumer only)*

Use of primary care place for each new need (regular checkup, immunization, an acute illness)

^{*}an index, not a scale

Longitudinality: strength of affiliation (consumer only) Strength of relationship with a specific provider, e.g., degree to which the identified provider is also the place that knows the individual best and from which care would be sought for a new problem

3 questions, scored by summing where the place is the same place

Longitudinality: relationship

Person orientation of practitioner/patient interactions, e.g., degree of doctor's interest in the individual as a person, rather than as someone with a medical problem

Comprehensiveness:

services available

Availability of specific

services, e.g., family

planning

Comprehensiveness:

services provided

Services received from

the primary care source,

e.g., discussions of ways

to stay healthy

Coordination: medical record continuity (provider only) Do you use flow sheets to assure that needed services are provided? (Also, printed practice guidelines, periodic medical audits, problem lists, medication lists)

Coordination: integration of care

Quality of primary carespecialty care interface, e.g., did the primary care practitioner know you made a visit to a specialist?

The Primary Care Assessment Tool - Systems Version

This tool assesses the primary health care and primary care characteristics at the system level. It addresses all of the primary care functions.

It is being considered for widespread use in comparing the primary care orientation of different health systems, both within and across countries. Website: http://www.jhsph.edu/pcpc/pca_tools.html