

The need for co-creation of care with multi-morbidity patients A longitudinal perspective

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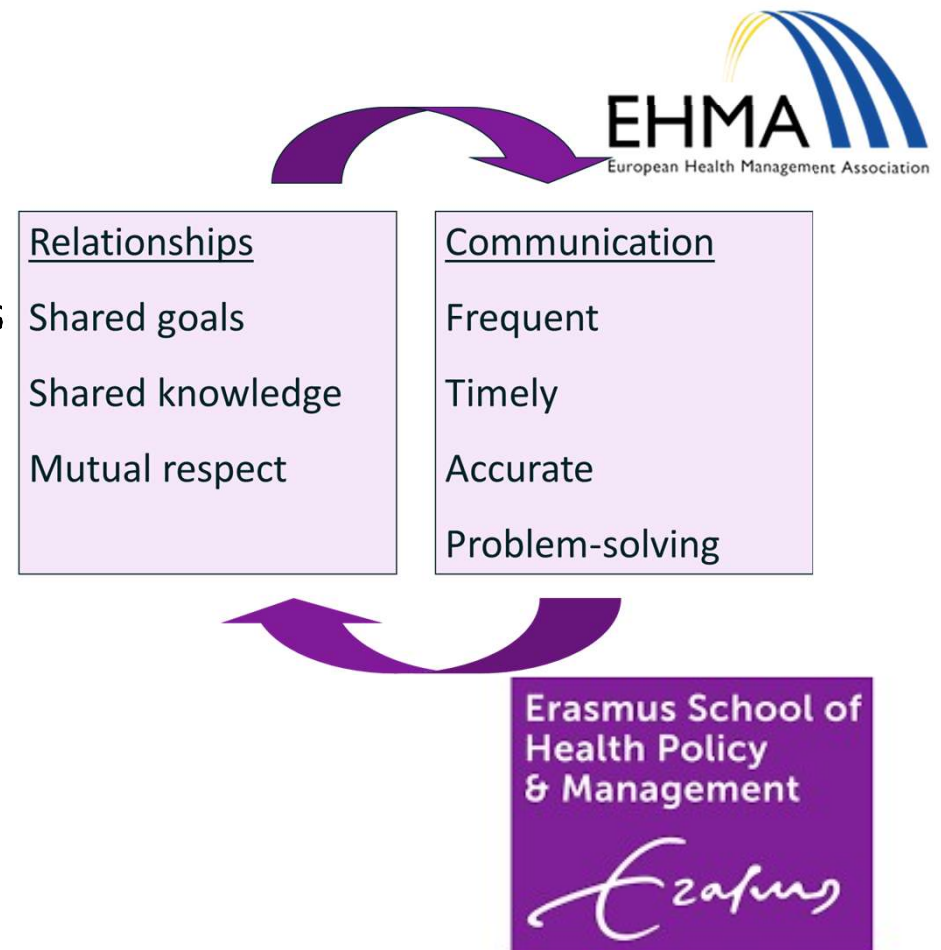
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Co-creation of care

- The establishment of productive interactions between patients and healthcare professionals based on the quality of relationships characterized by patient-centered interaction and communication
- Based on the relational coordination theory
“a mutually reinforcing process of communicating and relating for the purpose of task integration”



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Co-creation of care with multi-morbid patients

- Complexity
- Uncertainty
- Time constraints



Study aim

What is the relation between co-creation of care, satisfaction with care, and physical and social well-being of patients with multi-morbidity in a primary care setting?



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Methods

Longitudinal survey among 138 patients with multi-morbidity of seven primary care practices in Noord-Brabant, the Netherlands





Instruments

1. Co-creation: Relational co-production instrument
2. Wellbeing: 15-item Social Production Function Instrument for the Level of Well-being (SPF-IIs)
3. Satisfaction with care: Satisfaction with Stroke Care questionnaire (SASC)

Statistical analyses

1. Paired sample t-test
1. Multivariate regression analyses
2. Imputation techniques (e.g. Markov chain Monte Carlo)

Descriptive statistics at T1	Mean \pm standard deviation (range) or percentage
Age (years)	73.50 \pm 9.99 (48.45-94.32)
Gender (male)	42.2%
Marital status (single)	37.2%
Education level (low)	33.8%
Satisfaction with care	3.20 \pm 0.43 (2-4)
Social well-being	2.90 \pm 0.47 (1.56-3.78)
Physical well-being	2.80 \pm 0.55 (1-4)
Co-creation of care	3.86 \pm 0.80 (1-5)

Note. The analysis included only data from respondents who filled in questionnaires at both T0 and T1 (n = 138).

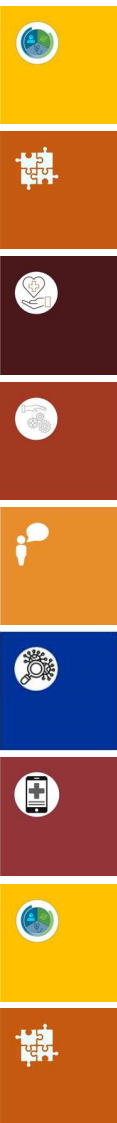
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		T0		T1		Paired difference		
Variable	N	Mean	SD	Mean	SD	t	df	p
Co-creation of care	135	3.70	0.88	3.87	0.78	2.25	134	0.026
Frequent communication	135	3.20	0.84	3.44	0.87	2.94	134	0.004
Timely communication	132	3.51	1.05	3.75	0.90	2.51	131	0.013
Accurate communication	131	3.86	1.01	4.01	0.86	1.68	130	0.095
Problem-solving communication	124	3.95	1.07	4.10	0.83	1.44	123	0.153
Shared knowledge	121	3.81	1.10	3.91	0.94	0.852	120	0.396
Mutual respect	114	3.95	1.06	4.12	0.88	1.54	113	0.127
Shared goals	116	3.92	1.05	4.06	0.94	1.38	115	0.171



		T0		T1		Paired difference		
Variable	N	Mean	SD	Mean	SD	t	df	p
Social well-being	132	2.80	0.50	2.90	0.47	2.31	131	0.022
Physical well-being	135	2.67	0.57	2.79	0.55	2.72	134	0.007
Satisfaction with care	125	3.19	0.50	3.20	0.42	0.18	124	0.858

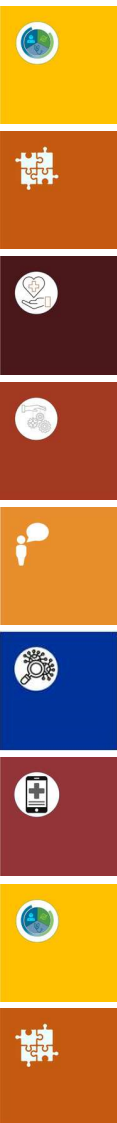
Conclusion

Improvement in co-creation of care showed significant longitudinal relationships with the social and physical well-being of patients with multi-morbidity

The study findings indicate the value of investment in co-creation of care to improve outcomes for patients with multi-morbidity in the primary care setting



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