CLIENT PERCEPTIONS: A USEFUL MEASURE OF COORDINATION OF HEALTH CARE

CLARE FRANCES MCGUINESS
BMed (Newcastle) FRACGP MAE

A thesis submitted for the degree of
Doctor of Philosophy
of the Australian National University

February 2001

DECLARATION

This thesis is my original work. The research was conducted within a large trial for which the National Centre for Epidemiology and Population Health were employed as evaluators. The Chief Investigator of this evaluation was Dr Beverly Sibthorpe, who was also the chair of my supervisory panel. The trial managers were responsible for collecting the majority of the data used in this thesis, and much of this was cleaned and assembled by members of the local evaluation team. I was responsible for entering, cleaning and assembling all data derived from the Client Perceptions of Coordination Questionnaire.

.....

Clare Frances McGuiness

National Centre for Epidemiology and Population Health
Australian National University
Canberra

February 2001

ACKNOWLEDGEMENTS

I am grateful to my supervisory panel, Drs Beverly Sibthorpe and Dorothy Broom and Professor Bob Douglas for support and guidance in research practice. The local evaluation team for the Care Plus Coordinated Care Trial provided a constant sounding board and motivation to unravel the meanings of client perceptions of coordination. This group were: Ms Robyn Attewell, Dr Ross Bailie, Dr Jim Butler, Ms Karen Gardner, Ms Jean Hardy, Ms Patricia Healy, Professor Charles McGilchrist and Dr Craig Veitch. I am also indebted to staff from Robert Barnett and Associates Pty Ltd, in particular Michael Tyler, for help in forms design.

The Care Plus Trial was managed by a large team comprising staff of Care Plus Pty Ltd, the ACT Division of General Practice and ACT Department of Health and Community Care. As evaluators for the trial, we were active participants with them in designing, monitoring and reviewing the trial at all stages. For this we relied on the support and collaboration of all these colleagues.

The study was funded through an ANU scholarship and a grant from the Australian Department of Health and Aged Care for some development work on the CPCQ during 1996. Their funding of the evaluation of the trials in general provided an invaluable setting in which to conduct my research.

I am also grateful to staff at Tuggeranong Square Medical Practice, Team Care, Brisbane and Linked Care, Sydney and study participants in three cities for their involvement.

ABSTRACT

Despite the many interventions and trials aimed at improving coordination of health care, there is currently no accepted measurement of coordination. My professional interests and an opportunity provided by the Care Plus (Coordinated Care) Trial in the ACT led me to consider client perceptions as a potentially appropriate measure. My research question is "can coordination of health care be usefully measured through client perceptions?"

I addressed this question by developing and testing an instrument to measure perceptions of coordination called the Client Perceptions of Coordination Questionnaire (CPCQ). In the thesis I describe the processes of developing the instrument, testing it through use in several studies and considering how useful such an instrument may be for health services research. In addition to the Coordinated Care Trial, I conducted two validation studies - in a chronic pain population and a general practice sample.

In Part 1 of the results I demonstrate good face, content and discriminant validity, and reliability of the instrument. Psychometric analysis of the CPCQ did not support scaling, and identified areas were the instrument could be improved. Nevertheless the underlying construct of client perception of coordination as a measure is entirely new, and it is therefore worthwhile to explore its associations with other health outcome data. In Part 2 I use a single item from the CPCQ, "how often did you feel the care you received was well-coordinated?" to explore this construct. I explore the influences upon on client perceptions of coordination, and examine its associations with service utilisation and health outcome data.

The construct of 'perceived coordination', and the capacity of the CPCQ to measure it accurately show considerable promise as measures of health care. Consistent trends were found that suggested coordination was a complex construct, and that a stronger theoretical base was needed to interpret this complexity. Theory is the first of the 'phases' of instrument development, and so I revisit these in order to summarise the strengths and weaknesses of the current CPCQ. Overall, the perceptions of coordination have surprisingly plausible associations with other health data, the effort to improve the instrument should be worthwhile for a wide range of health service evaluation and research.

TABLE OF CONTENTS

LIST OF TABLES, FIGURES AND APPENDICES

LIST OF ABBREVIATIONS

ACT	Australian Capital Territory
ACTDGP	ACT Division of General Practice
ACTHCC	ACT Department of Health and Community Care
CCT	Coordinated Care Trial/s
CHF	Consumers Health Forum
COAD	Chronic Obstructive Airways Disease
COAG	Council of Australian Governments
CPCQ	Client Perceptions of Coordination Questionnaire
CPS	Chronic Pain Study
CPT	Care Plus Trial
DHFS	Commonwealth Department of Health and Family Services
DVA	Department of Veteran Affairs
GP	General Practitioner
GPA	General Practice Audit
GPCQ	General Practitioners Perceptions of Coordination Questionnaire
HIC	Health Insurance Commission
HSQ	Health Status Questionnaire
IHD	Ischaemic Heart Disease
LHS	London Handicap Scale
MBS	Medical Benefits Schedule
MOS74	Medical Outcomes Study 74 item version
NSW	New South Wales
PCA	Principal Components Analysis
RACGP	Royal Australian College of General Practitioners
SF36	Medical Outcomes Study, Short Form –36
VAS	Visual Analogue Scale
YHYL	Your Health/Your Life Questionnaire