

Public priorities for primary healthcare for children in five European countries

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Purpose:

As part of the Models of Child Health Appraised (MOCHA) project (www.childhealthservicemodels.eu), we studied formative values from the general public for the quality assessment of a child-oriented primary healthcare system in five European countries. As a starting point we used the MOCHA working model, defined in the first phase of the project.

Methods:

We performed an online survey in a representative sample of the general public in the Netherlands, Germany, United Kingdom, Spain, Poland. Based on definitions in literature sources (e.g. Kringos 2010), we defined the nine potential quality outputs presented in the MOCHA model. Next, these outputs were operationalized in 40 items to cover the full description of each output. We collected data on: background characteristics, performance, and prioritization. Performance was measured by asking respondents' general opinion on child healthcare quality (1-10 scale) and reaction on statements on quality items (5pt Likert agree-disagree scale). For priority setting, we used the best-worst scaling case 1 methodology, with eight different sets of combinations of ten statements on quality items.

Findings:

Reliable results were obtained from 2403 respondents. Preliminary analyses show that overall top-10 priorities are related to items of acceptability (timeliness), appropriateness (skills/competences, management, facilities), affordability (no costs), continuity (informational, dignity/respect), and coordination (swift referrals, collaboration). Mean general performance ranges from 5.47 (Poland) to 7.17 (Spain); average percentage of agreement with statements on quality items ranges from 56% (Poland) to 70% (Netherlands).

Discussion:

Between countries, significant differences exist in perceived performance of primary child healthcare and in public priorities on quality aspects. In priority setting, a combination of a highly prioritized outcome and a low performance could warrant further investigation and action.

Key messages:

- Public experiences and priorities can support policy making in achieving a child-oriented primary care.
- Public experiences and priorities on primary care quality differ between European countries.