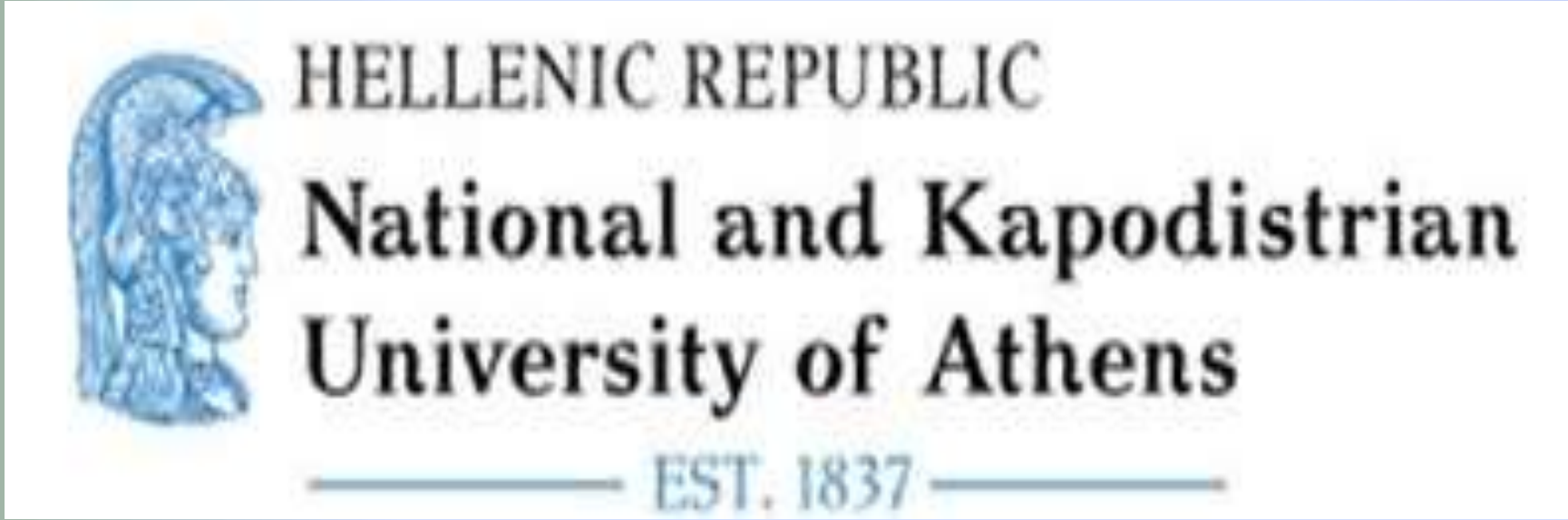


Evaluating quality of primary health care (PHC) services from the patients' perspective in Greece



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OBJECTIVES

Research on health services’ responsiveness (ability of a health provider to meet or exceed patients’/service recipients’ expectations) and consequently self-perceived quality of care is increasingly shifting towards measuring patient reported experiences. The aim of this study was **to evaluate patient experiences using Health Centres’ (HCs) primary care services in urban and semi-urban areas of Greece.**

METHODS

A cross-sectional survey was conducted in 2017. The study sample included **350 users of five HCs’ services in urban and semi-urban areas** (convenience sampling), who evaluated **several dimensions of care (accessibility, comprehensiveness and continuity/coordination of care, quality of medical and nursing care and facilities)** in an ascending positive experience scale from 1 to 5. The questionnaire used was based on a *measurement tool developed, tested and validated by the authors*. Bivariate correlation analyses and multivariate lineal regression analyses were conducted in order to identify determinants of patients’ experiences levels.

RESULTS

- ❖ More than ¼ of the users **(26.6%) were >65 years, 51.7% were women, 90% were of Greek nationality, 1/5 had higher education and almost half of the participants suffered from a chronic disease (48.6%)** (Table 1).
- ❖ The mean total patient experience score was high (=3.98), indicating **positive levels of patient experience**. Users rated **quality of nursing care highly** (=4.21), while **comprehensiveness of care and accessibility scored lower** (3.93 and 3.95, respectively) (but still over the mid-point scale) (Table 2).
- ❖ After adjusting for patient characteristics, **decreased educational level were related with increased patient experience scores** (p<0.035) and the **Greeks had higher continuity & coordination and comprehensiveness of care scores than the non Greeks** (p=0.002 and p<0.001, respectively) (Table 3).

Table 1: Socio-demographic characteristics of the participants

Characteristic	N	%
Gender		
Female	181	51.7
Male	169	48.3
Nationality		
Greek	315	90.0
Albanian	24	6.9
Other	11	3.1
Highest level of education		
I never finished Primary school	20	5.7
Primary school	49	14.0
Secondary school	49	14.0
High School	67	19.1
After High School education	91	26.0
Higher education	74	21.1
Insured		
Yes	326	92.3
No	26	7.7
Chronic disease		
None	180	51.4
One	118	33.7
Two	38	10.9
More than two	12	3.4
I don’t know	2	0.6

Table 2: Patient experience scores on six factors or care dimensions as identified after factor analyses

Factor/Care dimension	Mean value	Standard deviation	Median Value	Minimum value	Maximum value
Accessibility	3.95	0.59	4.0	1.67	5
Continuity and coordination of care	4.07	0.49	4.0	1	5
Comprehensiveness of care	3.93	0.63	4.0	1	5
Quality of medical care	3.99	0.61	4.0	1.25	5
Facility amenities’ evaluation	4.02	0.49	4.0	2.33	5
Quality of nursing care and care provided by other health professionals	4.21	0.72	4.0	1	5

Table 3: Multivariate linear regression analyses results

Independent variable	Coefficient beta	95% confidence interval for coefficient beta	P value
Dependent variable: Patient experiences total score			
Visit a nurse or another health professional without visiting a doctor vs. non visit	0.3	0.1 to 0.4	0.004
Educational level	-0.05	-0.08 to -0.01	0.019
Dependent variable: Continuity and coordination of care score			
Education	-0.04	-0.07 to -0.003	0.035
Scheduled appointment vs. non scheduled	0.13	0.02 to 0.23	0.021
Greeks vs. non Greeks	0.28	0.10 to 0.45	0.002
Dependent variable: Comprehensiveness of care score			
Greeks vs. non Greeks	0.54	0.32 to 0.75	<0.001
Education	-0.06	-0.10 to -0.02	0.007
Scheduled appointment vs. non scheduled	0.14	0.01 to 0.27	0.007
Non disabled vs. disabled	0.23	0.02 to 0.45	0.03

CONCLUSIONS

In general, the study showed that **HCs’ users reported relatively positive experiences at all dimensions of care** evaluated. Nevertheless, it is important that population groups such as the **migrants are provided with more coordinated, continuous and comprehensive PHC services in order to improve their health status, avoid future hazards and, therefore, increased costs of hospital services.**

