

# Continuity of care through the chronic care trajectory –patients, family carers and professionals' perspective

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# What do we already know?

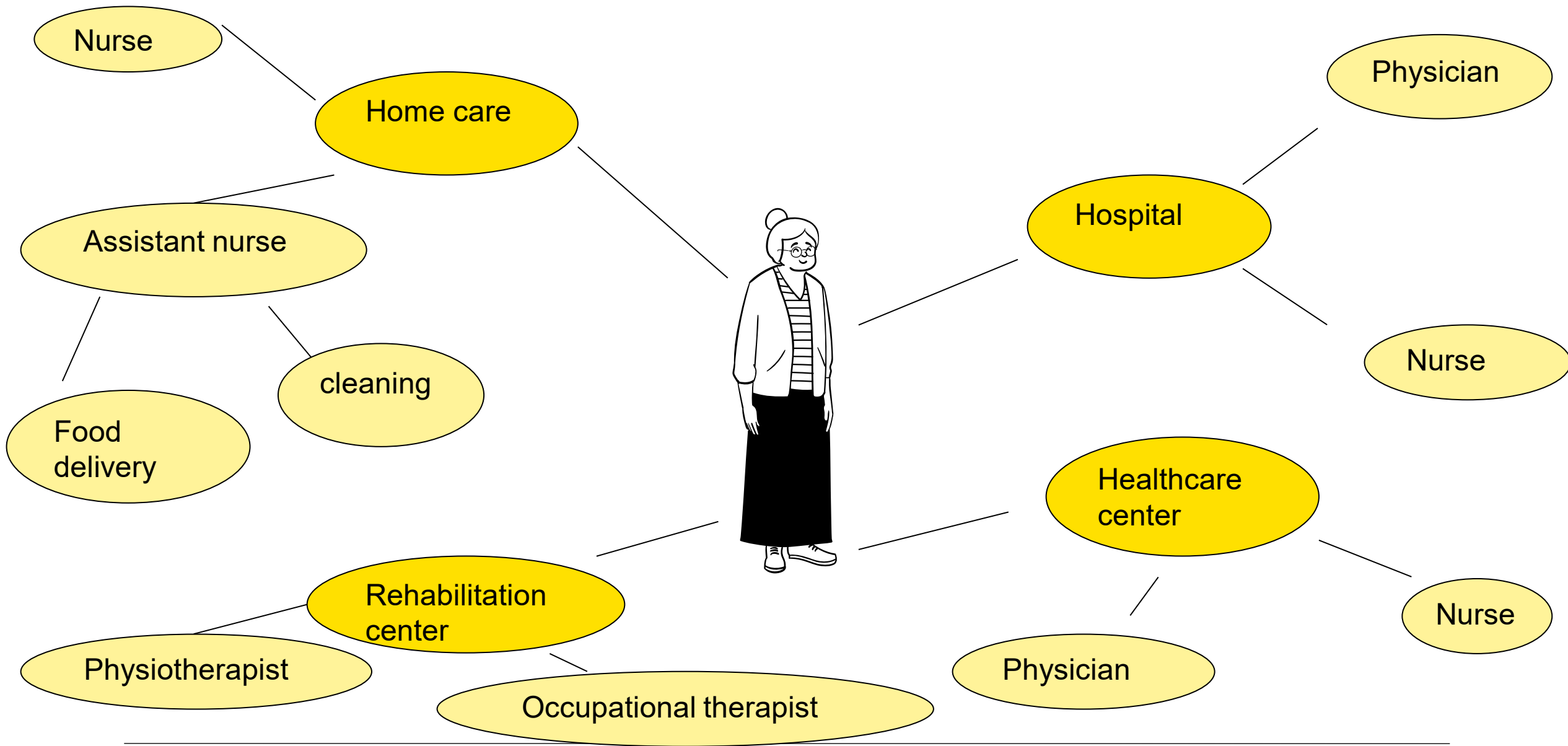
Relational continuity

Information continuity

Management continuity

When these three aspects of continuity of care are in place, there are also conditions for “patient-perceived continuity”, which is the experience of a coordinated and smooth development of care from the patient's point of view. Freeman (2002)





# Aims and study design

## Study 1

Aim to describe essential aspects of care continuity from the perspectives of persons with complex care needs and their family carers

Participants 16 patients with chronic diseases and 12 family carers

Method constructed grounded theory

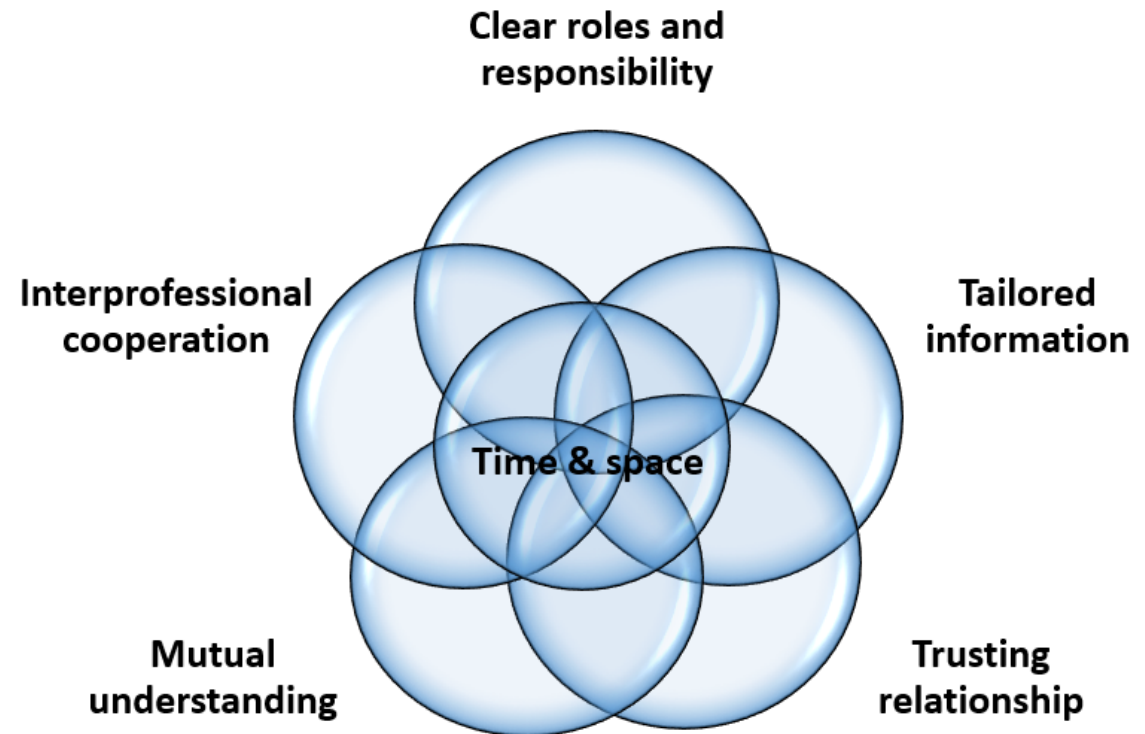
Study 2 to investigate perceptions for how continuity of care can be realized for people with complex care needs from an interprofessional perspective.

Participants 34 healthcare professionals (assistant nurses, nurses, physicians, Physiotherapists)

Method thematic analysis

# Results

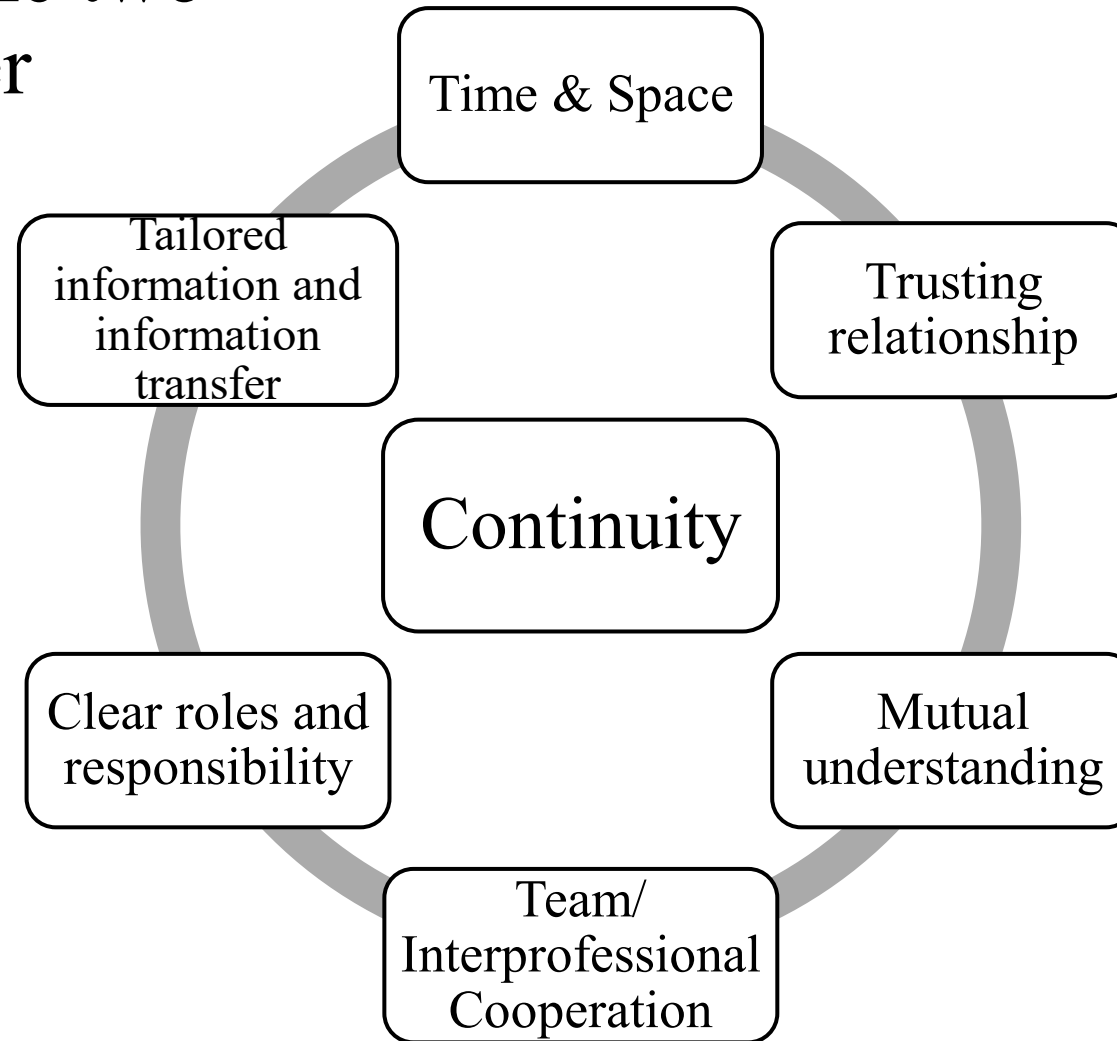
Study 1, conceptual care continuity model with its six interconnected concepts



Study 2, Findings of what is needed for CoC for people with complex care needs and how to achieve it at different levels of care.

	What	How
Micro level  Focus on relation continuity	Long-lasting, customized relationships in team-based care	Set aside time to develop -needs-based -holistic relationships Provide -predictable and -accessible care -with continuous follow-ups
Meso level  Focus on management continuity	Dynamic stability in organizational structures and routines for cross-disciplinary teams responsible for geographically defined areas	Establish teams -facilitating long-term patient care -coordination and responsibility Strive for -low staff turnover -clear professional roles -joint development of routines
Macro level  Focus on authorization of informational continuity	Long-term solutions that enable knowledge and information exchange and affirm shared responsibility for cohesive care	Support building of lasting inter-organizational cooperation based on -knowledge -trust -respect Enable -regular cross-organizational -information transfer -knowledge exchange

## Results from the two studies together



# Trusting relationship and mutual understanding

To gain a trusting relationship there  
is a need for mutual understanding





# Team/ interprofessional cooperation

A team provide more predictable services, increase patient safety and promote more communicable care plan

Work flow focused on function instead of person.



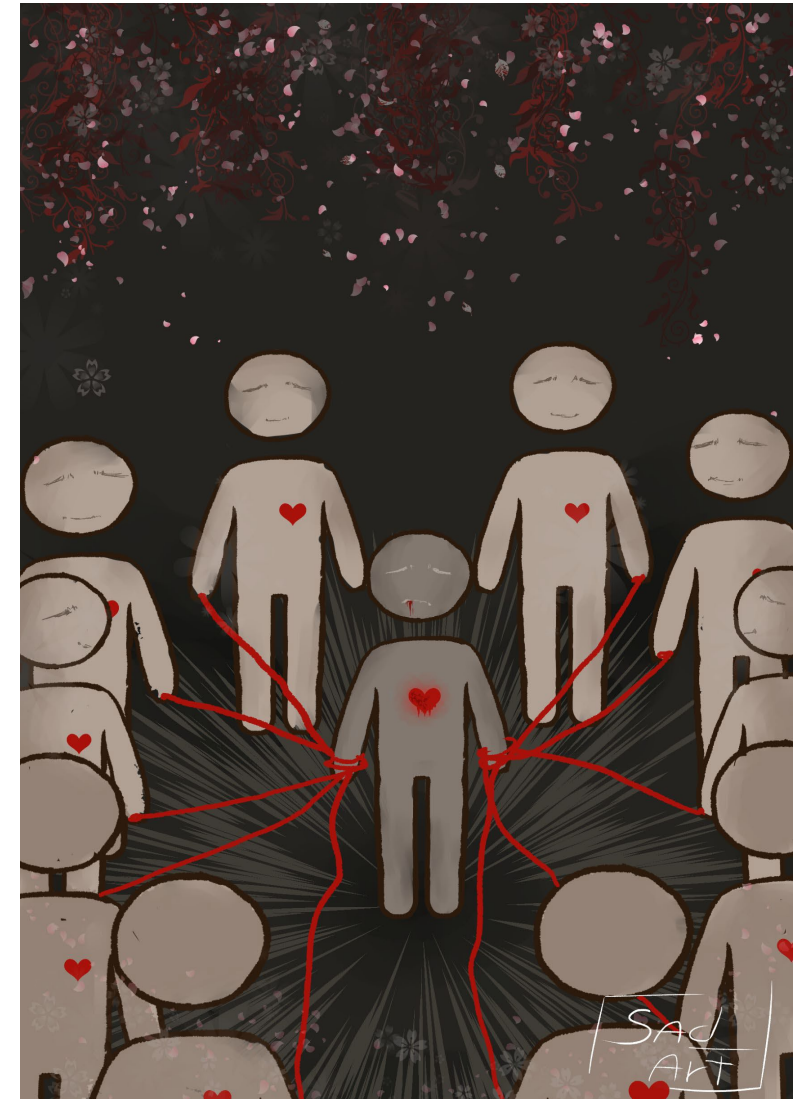
# Clear roles and responsibility

Knowing who's responsible

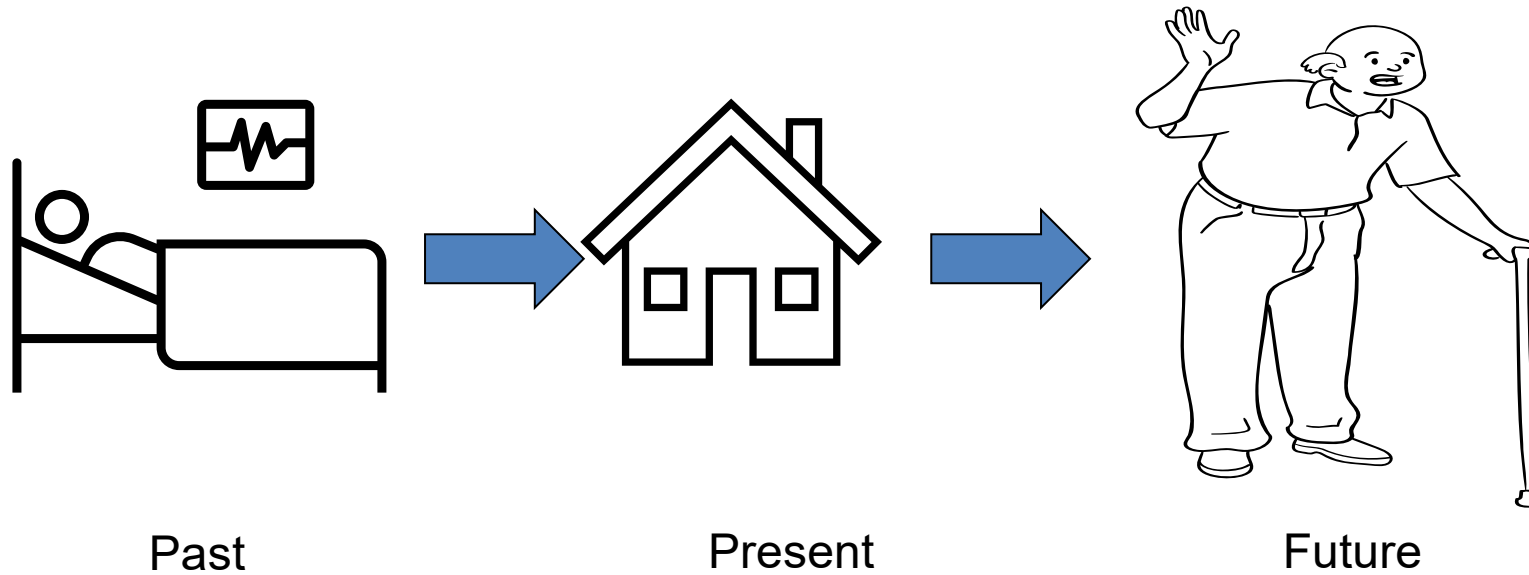
Availability and flexibility based on patients needs

Working towards the same goal

Well-documented care plans, routines and guidelines



# Tailored information and information transfer

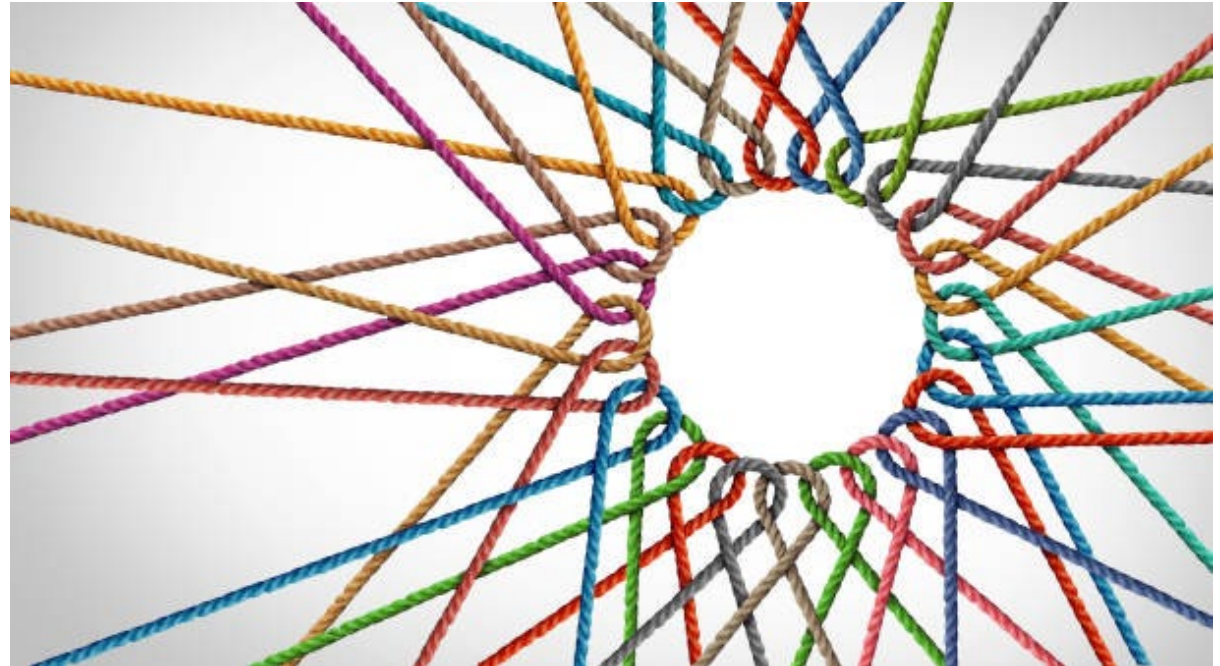



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# I want you to remember

Patients, family carers, and healthcare professional's perceptions of care continuity are associated with the experience of a safe and secure care where access to information about the patient is available along the patient's care trajectory, and where time and space create trusting relationships through mutual understanding, as well as interprofessional collaborations across borders.



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## What matters in care continuity on the chronic care trajectory for patients and family carers?—A conceptual model

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## What is needed for continuity of care and how can we achieve it? – Perceptions among multiprofessionals on the chronic care trajectory



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