

Health Professional's Preferences on Primary Care Models – a Discrete Choice Experiment

Sophie Karoline Brandt, University of Lucerne

Speaker	Sophie Karoline Brandt holds an MSc in Physiotherapy issued by the Bern University of Applied Sciences and an MSc in Global Health Policy issued by the University of Edinburgh, UK. She has a background in clinical practice, as well as education and professional policy of health professionals. In 2020, she started her PhD at the Department of Health Sciences and Medicine at the University of Lucerne. Her research interests deal with the measurement and the empirical analysis of preferences of health professionals regarding new models of outpatient primary care. She is especially interested in key aspects of interprofessional collaboration, health promotion and the innovativeness of health professionals.
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Introduction	To improve future primary care, new care models play an important role. These should be aligned with the preferences of health professionals so that work in primary care remains attractive. One way to reorganise care is to distribute competencies and responsibilities between professional groups regarding first contact with patients and the development and implementation of treatment plans. The way in which clinical decision-making is designed, as well as the organisational setting in which primary care is provided, can also increase the work attractiveness for professionals. This study therefore examines the preferences of health professionals regarding the design of new primary care models.
Methods	An online cross-sectional survey was conducted targeting pharmacists, physicians, medical practice assistants, nurses, and physiotherapists in Swiss primary care (n = 4063). The questionnaire was based on a patient case study and included a discrete choice experiment with hypothetical primary care models with four attributes: Professional responsible for the first contact with the patient and the development and implementation of a treatment plan, type of decision-making and organisational setting. Conditional logit models were used to estimate the influence of the attributes on the choice of primary care models.
Results	Considering the patient case study, the professional groups prefer a care model in which a professional from their own professional group takes responsibility for the first contact and for the treatment plan. Pharmacists, nurses, and physiotherapists prefer care models that deviate from the status quo. Compared to today's rather GP-centred primary care, they prefer future care models in which their professional groups can take on more responsibility and tasks. All professional groups prefer care models in which collective decision-making takes place involving all professionals involved. For all groups, the individual practice appears to be the least interesting model for the future. The pharmacists surveyed are the only professional group to prefer a health centre compared to a health network. In contrast, all other respondents prefer the health network.
Conclusion	Based on a strong data base, the study shows pathways to strengthen outpatient primary care and its attractiveness for the workforce. Political efforts should be made to promote the redistribution of responsibility for first contact and treatment planning to allied health professionals, the collective decision-making with all professional groups involved and the development of health centres and networks.
Contact	sophie.brandt@unilu.ch