
CONFERENCE ABSTRACT

Effectiveness of a virtual community of practice to improve professionals' attitude towards empowering chronic patients: a cluster randomized controlled trial.

ICIC20 Virtual Conference – September 2020

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Introduction

Health care professionals need to increase their awareness of patients' capacities to assume a more active role in their own care and to learn mechanisms that increase this capacity. Communities of practice (CoP), based on the idea that learning involves a group of people exchanging experiences and knowledge, are an innovative educational tool which can increase knowledge and change attitudes of professionals towards patients' empowerment. The aim of this project is to assess the effectiveness of a virtual CoP (e-MPODERA) in improving attitudes of health professionals in primary care on the empowerment of patients with chronic diseases.

Methods

Two-arm cluster randomized controlled trial. Participants: Primary care professionals - General Practitioners (GP) and Practice Nurses (PN). Patients were eligible to participate if aged ≥ 18 years and diagnosed of ≥ 1 chronic disease. Randomization: Nine pairs of practices per Spanish participating region (Catalonia, Madrid and Canary Islands) were randomly selected and randomly assigned to the intervention (IG) or control group (CG). Randomization was performed after the selection of participants. Blinding: participants were not but patients and data managers were blinded to group assignment. Intervention: IG was offered participation in a virtual CoP web 2.0 platform for 12 months; CG received usual training. Outcome measures: primary outcome was measured by Patient-Provider Orientation Scale (PPOS) questionnaire at baseline and 12 months follow-up; secondary outcomes included Patient Activation Measure (PAM) questionnaire and healthcare resource use (number of GP or PN in the past year). Analysis: A linear mixed-effects regression to estimate the effect of participating in the virtual CoP was estimated.

Results

1183 GP/PN (recruiting 1,095 patients) were assigned to vCoP and 138 GP/PN (recruiting 826 patients) to usual training. Outcome (intention to treat): PPOS total score (range 1-6) (mean adjusted difference = 0.15 points higher in vCoP arm, 95% CI 0 to 0.26; $p=0.009$) and PPOS sharing score (mean adjusted difference =

0.30 points higher in vCoP arm, 95% CI 0.16 to 0.45; $p < 0.001$) were significantly higher in vCoP arm than in usual training arm; PPOS caring score was similar between groups. PAM score was similar in the two groups.

Discussion

The vCoP intervention lead to better results than usual training in the total PPOS score and the Sharing component, with absence of effect in the Caring component. No significant changes were observed in PAM.

Lessons learned

At the professional level, the intervention might be more attractive (retention potential) to professionals that are already interested in empowerment. Regarding its effectiveness, the intervention affects only the Sharing component of PPOS, but there was not a significant effect on Caring.

Suggestion for future research

The effectiveness of our virtual CoP (e-MPODERA) in improving attitudes of health professionals in primary care on the empowerment of patients with chronic diseases may increase if offered to professionals with PPOS lower scores, especially for Caring.

Funding

This study was Cofinanced by Fondo Europeo de Desarrollo Regional and Fondo de Investigaciones Sanitarias. Instituto de Salud Carlos III. Ministerio de Economía y Competitividad. Gobierno de España. (PI15/00164, PI15/00586 and PI15/00566).