



DEPARTMENT OF
GENERAL
PRACTICE

A framework for analysing primary care provider relationships

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Why do primary care provider relationships matter?

Problem

- “General practice has been **isolated** from the rest of the health care system.....**new working relationships** are needed at a **number of levels** - between general practitioners (GPs) and community groups, between GPs and other health professionals, between GPs and specialists, among GPs and between GPs and government”

(General Practice Strategy Review, 1998)

Solution

- “Developing and maintaining greater **integration** across primary health care” (*Primary Care Integration Section, 2002*) via
 - Program & Service developments

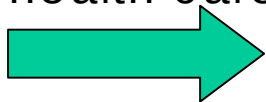
Evidence base

- **Contextual Literature** – Reviews and Reports
- **Descriptive Studies** - Confirmatory & Theory Generating
Does not recognise the interdependent nature of current general practice relationships

Gap in Research Base

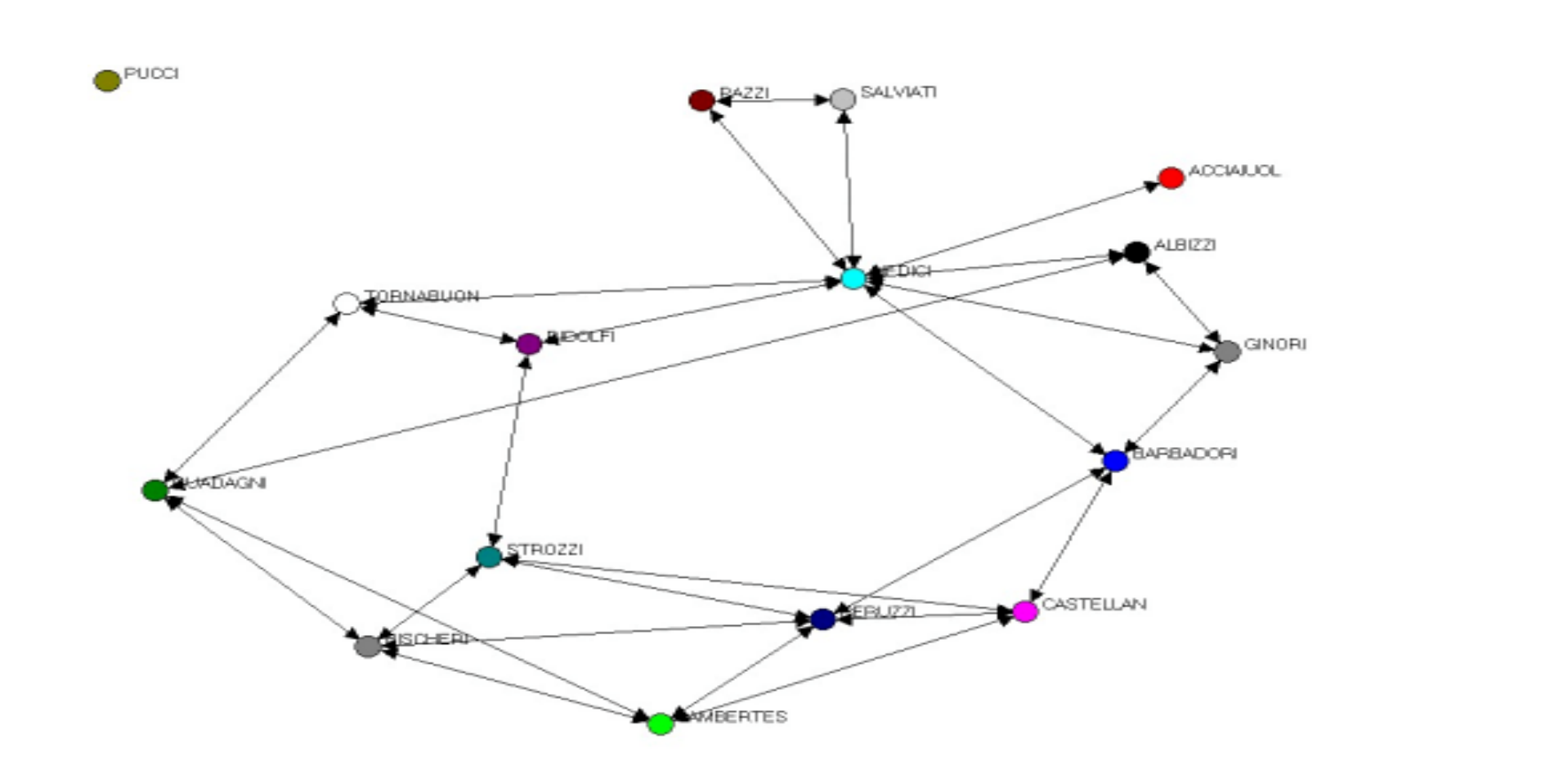
Need theoretical approach & analytical tools to describe:

- What are the patterns of interactions between GPs and other primary health care providers?
- Why do GPs interact with other primary health care providers?
- How can these interactions between GPs and other primary health care providers be influenced?



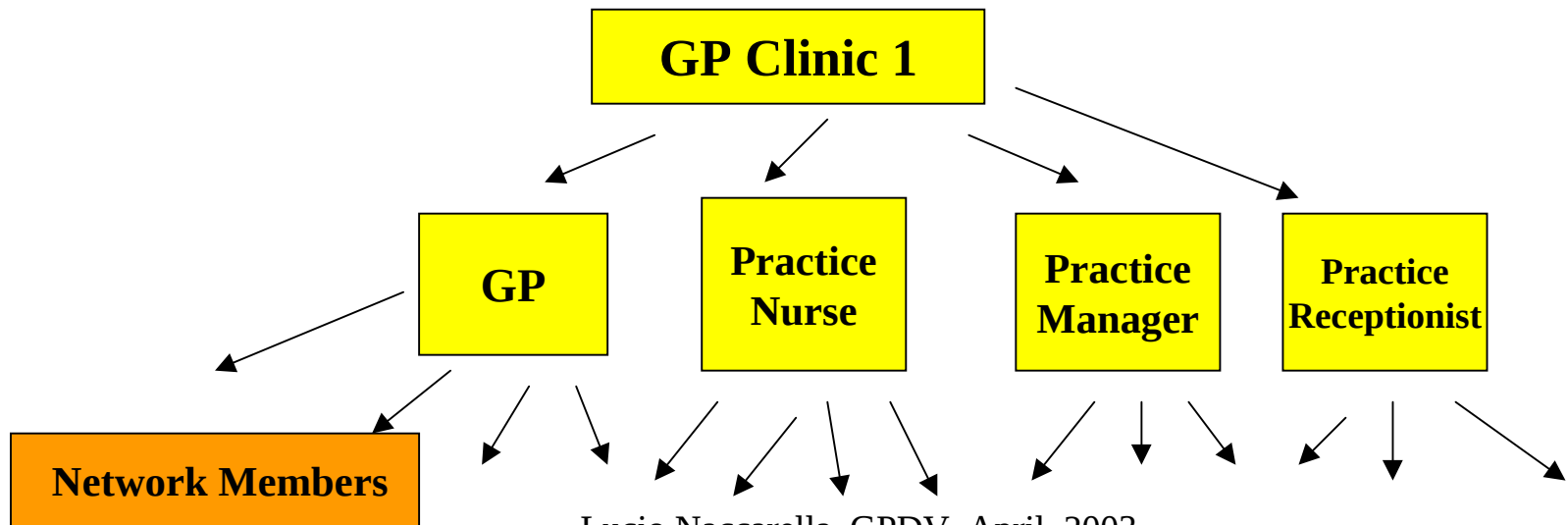
Social Network Analysis (SNA)

Social Network Analysis:
Eg: Florentine Families (Breiger & Pattison, 1986)



PhD Research Methodology

- **Methodology**-Qualitative research approach
- **Ontology & epistemology** – Interpretivism
- **Research Strategy** – Inductive approach
- **Main Theoretical framework** – SNA - Ego-centred approach
- **Sampling framework- Two GP Clinics**

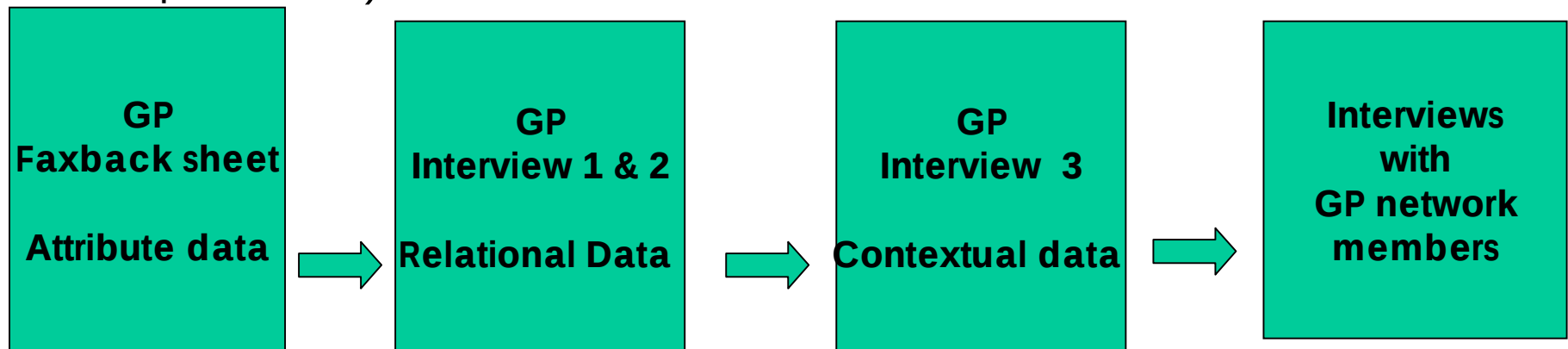


Lucio Naccarella, GPDV, April, 2003

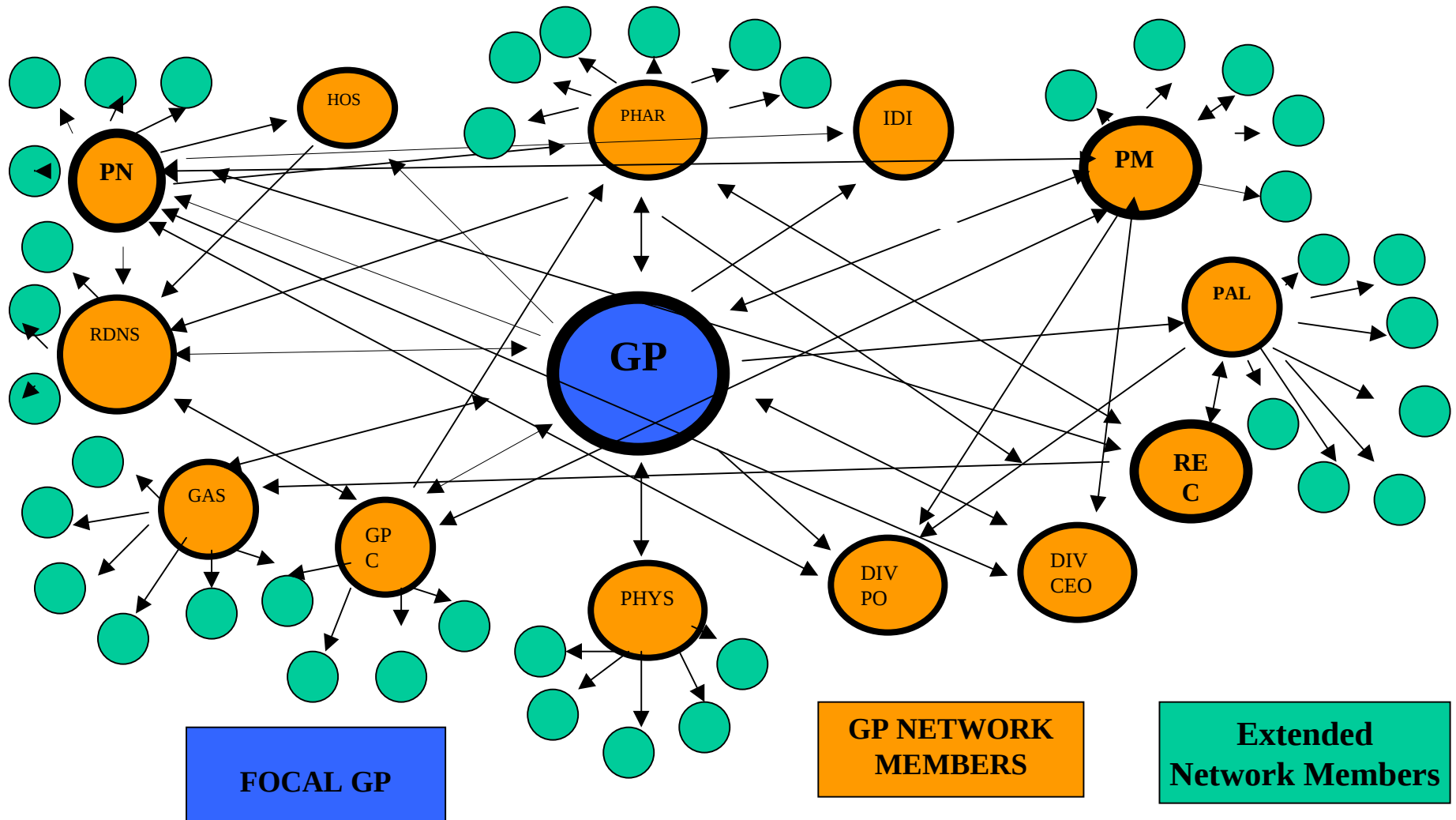
Data Collection

Three main types of data:

- **Attributes** (gender, age, background, education, affiliations)
- **Relations** – Network generator questions
 - communication, advice , discussion networks
- **Context** (What influences whether GPs interact with other providers?)



GP Clinic Network



Qualitative Content Analysis

GP Networks

Selection of Network Members

- Accessibility
- Competency
- Fee structure
- Service demands
- Familiarity
- Personal reputation
- Patient attributes)
- GP/focal actor attributes
- GP Clinic attributes

Purpose of Relationship

- Patient problem assessment
- Patient care coordination
- Generate solutions
- Upskilling
- Obtain meta-knowledge
- Obtain validation
- Obtain legitimation
- Assist clinic operation

Qualitative Content Analysis

GP Networks

Functionality of Relationships

- Accessibility
- Competency
- Fee structure
- Roles
- Obtain meta-knowledge
- Reciprocity
- Patient attributes

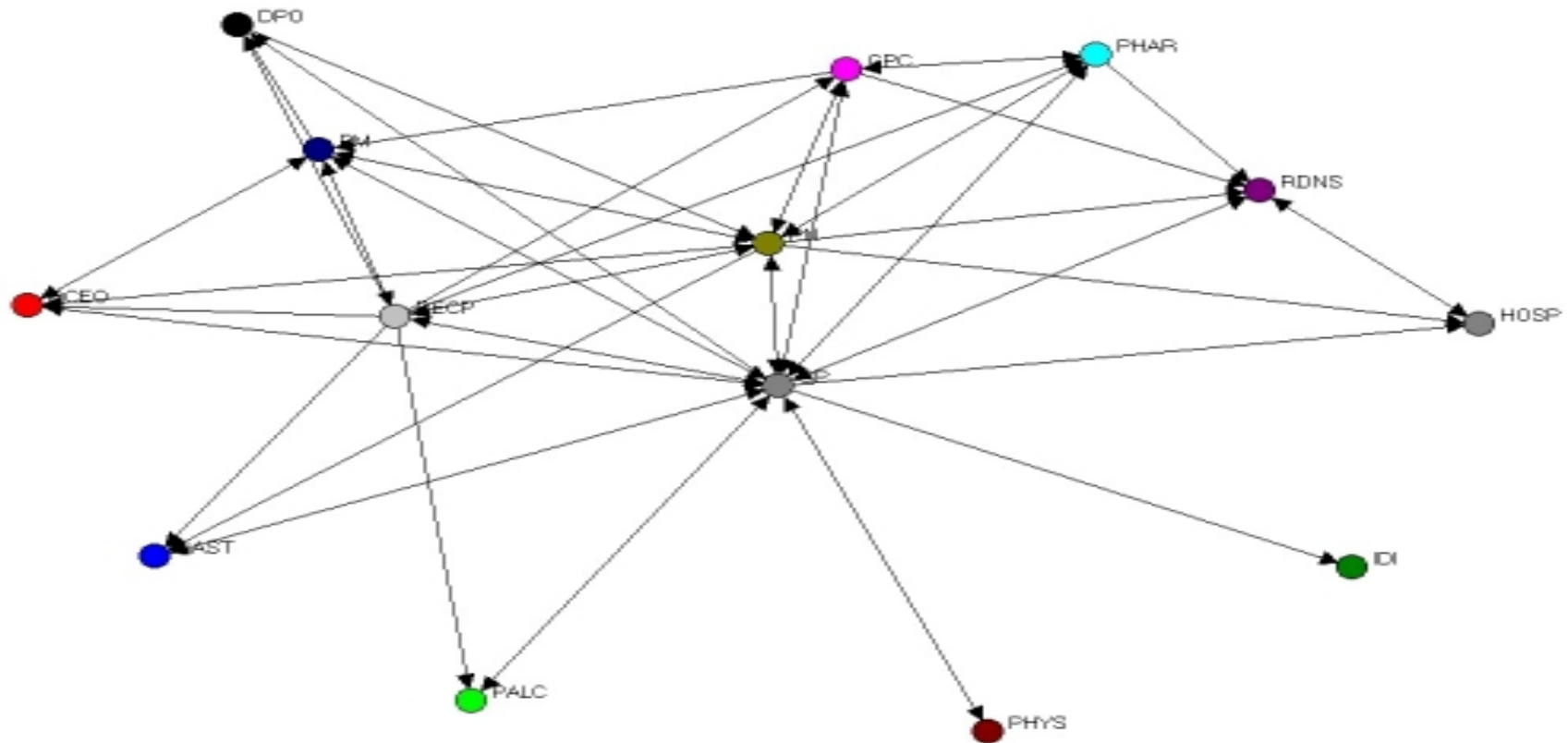
Impact of relationships

- Patient care
- Generate Solutions
- Upskilling
- Obtain Meta-knowledge
- Obtain Validation
- Obtain Legitimation
- Assist Clinic Operation

Purpose of GP Relations

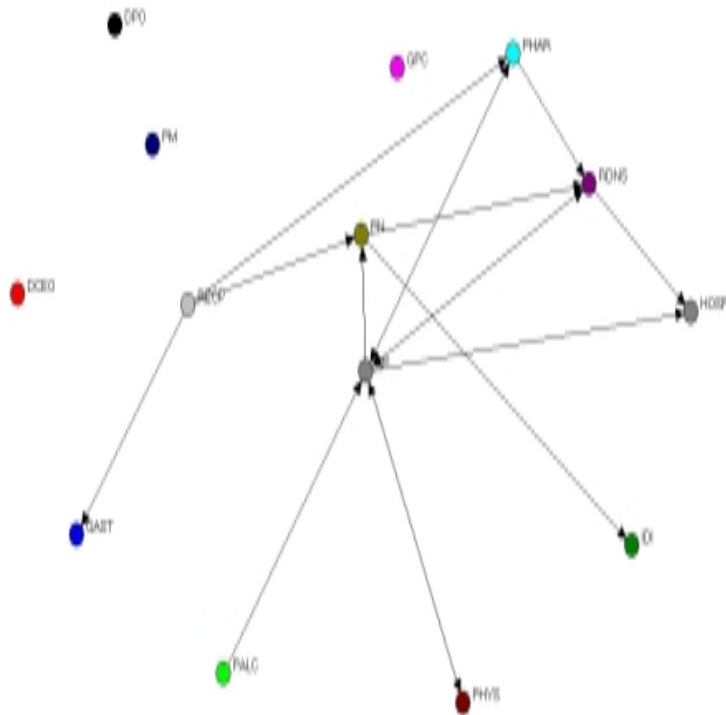
Content of GP Relations	Ranked (%)
Patient care coordination	46.2%
Generate solutions	46.2%
Obtain meta-knowledge	38.5%
Patient problem assessment	30.8%
Assist clinic operation	30.8%
Upskilling	23.1%
Obtain legitimation	15.4%
Obtain validation	7.7%

Social Network Analysis: Sociogram of a GP Clinic Network (UCINET)

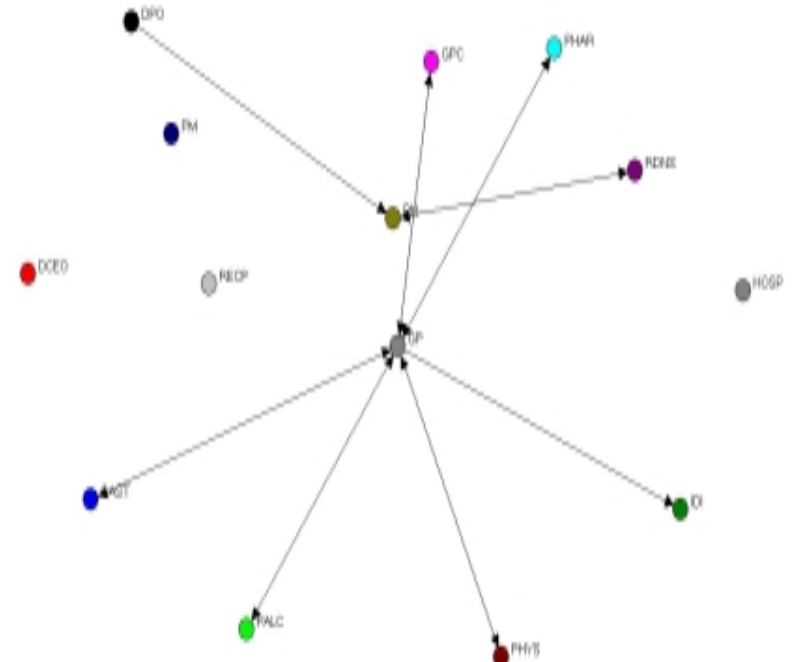


Relation Sociograms

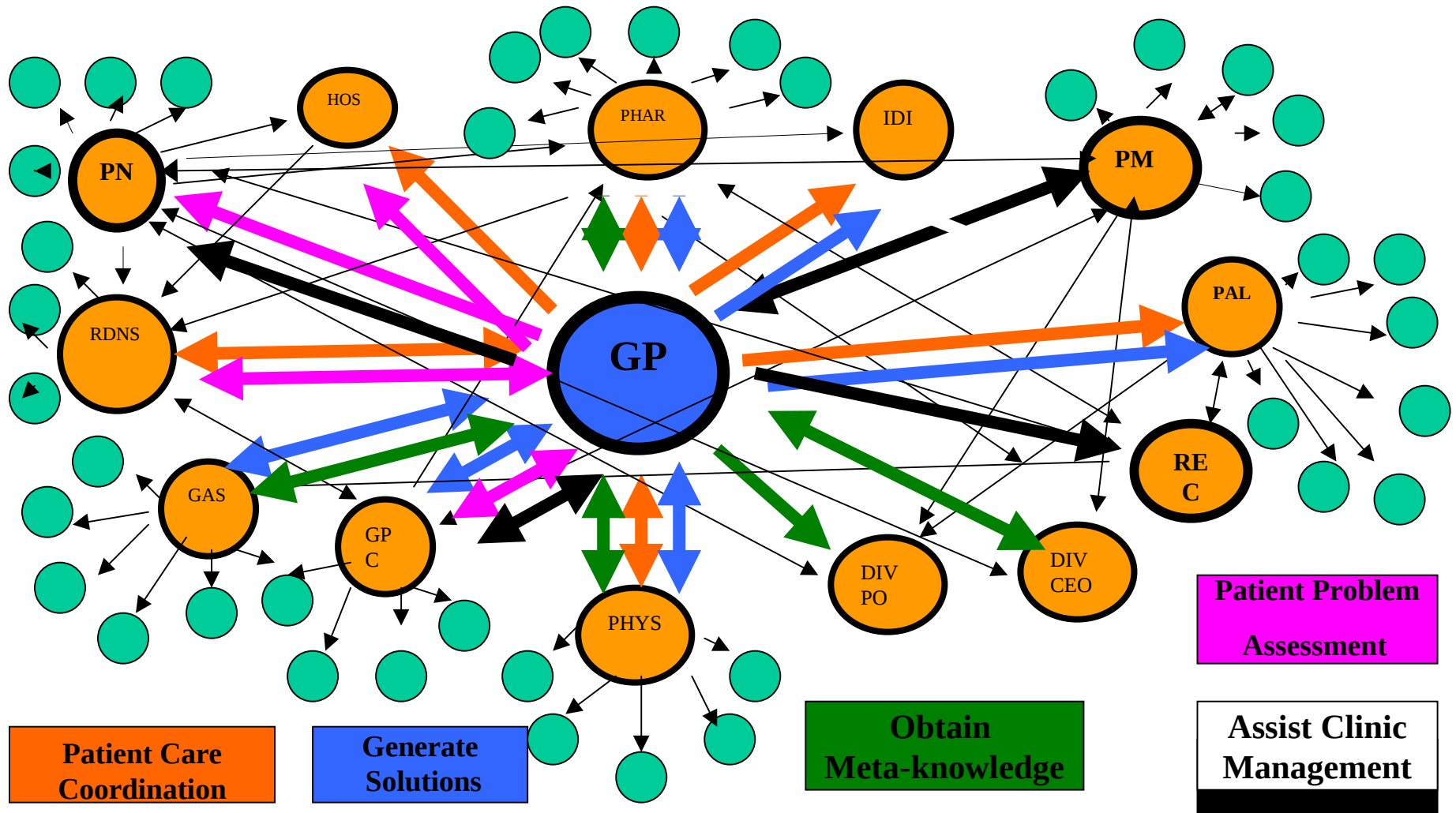
Patient Care Coordination



Generate Solutions



Multi-relational GP Network



Discussion

Methodological Challenges

- Qualitative and structural approaches
- Readiness of interviewees and sensitivity of tools

Research Questions – who, what, why

- Confirms the interdependent nature of general practice
- Provides insights into:
 - micro and macro level
 - interaction between micro and macro levels:

General practice is a multi-relational system

Implications for Research, Policy and Practices

Overall:

- Appropriateness of language and concepts (Integration)
- Building blocks underlying a Primary Health Care systems

Specifically:

Research

- Refining & realigning of GP “integration” research
- Refine evaluation frameworks, indicators and tools

Policy

- Initiatives need to consider multi-relational system

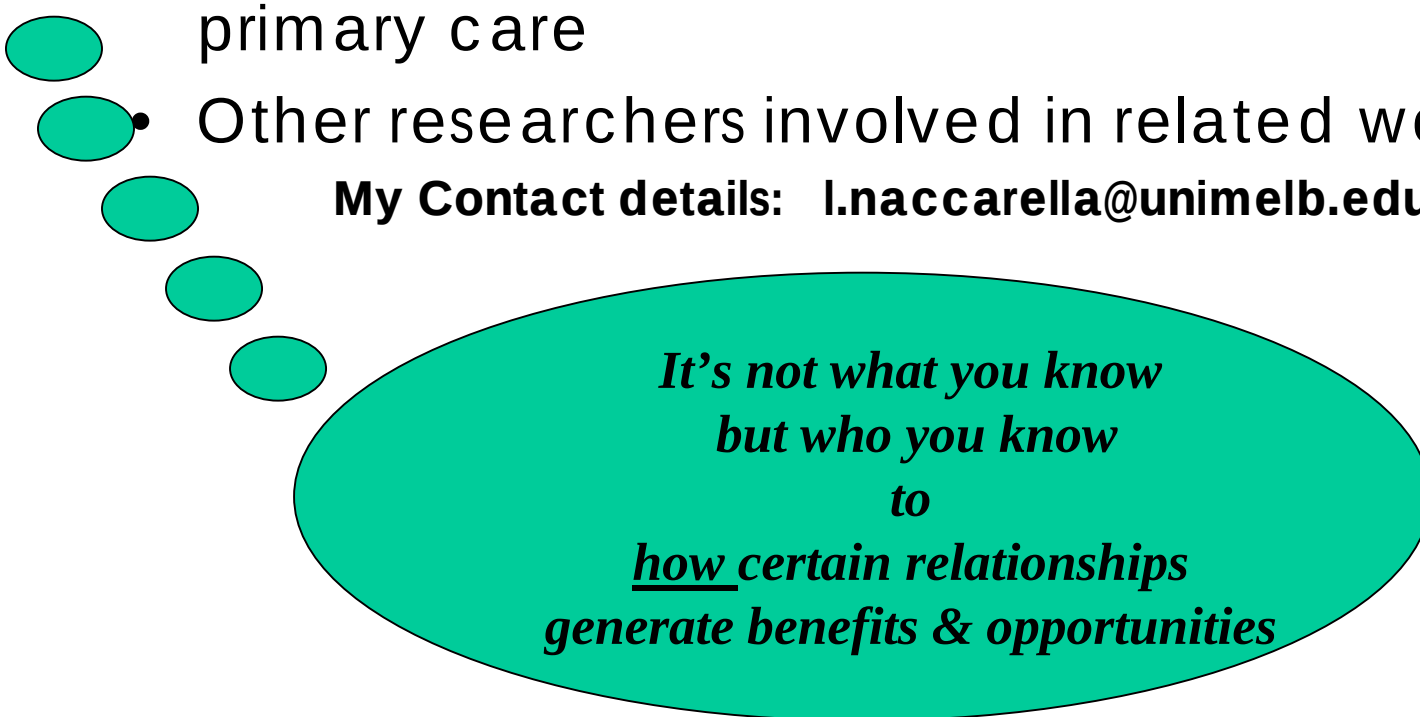
Practices

- Social Network Analysis – a reflective practice tool

Your views on :

- Applying Social Network Analysis (SNA) to understand coordination & collaboration in primary care
- Other researchers involved in related work

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*It's not what you know
but who you know
to
how certain relationships
generate benefits & opportunities*