# EQuiP Invitational conference 7-9 April 2011



"Value for money in general practice - management and public trust"

Submission ID: 52.

Primary Subject Area: General practice's role in coordination of care.

Format: Oral presentation.

Authors: Alexandre Gouveia (APMCG) <alexandre.gouveia@me.com>, Vitor Ramos (National School of Public Health) <vramos@ensp.unl.pt>. Title: *Clinical and health governance: A navigation tool for primary care*.

Primary Contact: Alexandre Gouveia (APMCG), <alexandre.gouveia@me.com>.

## **Abstract**

# Background and aim

Portuguese primary care is at the verge of a new era. The primary health care reform, that started in 2005, led to a major organizational change in the Portuguese National Health System. The focus on self-organized primary care teams (Family Health Units), on accountable and decentralized Health Centre Groups and the reinforcement of the community participation in local health are some of the mainstays of this reform.

Although the reform had a significant impact on the provision of primary care in some areas, there is still a considerable attitudinal change towards clinical and health governance that needs to be fulfilled at a nationwide level by all primary care professionals. The aims of this study were to the define a conceptual framework for clinical and health governance in Portuguese primary care and to describe potential facilitators and barriers for its implementation.

### Methods

Two focus group discussions during a one day workshop were promoted by the Portuguese Association of General Practitioners with seventeen general practitioners and opinion leaders in primary care. The qualitative data generated during the discussions was transcribed and afterwards analysed by the authors.

#### Results

The participants developed a theoretical framework for clinical and health governance with eight domains divided in three key vectors: purposes (health outcomes and gains, accountability); persons (person-centered care, human resources, innovation and development) and processes (clinical risk management, adequacy of care and continuous process improvement). The identified facilitators for clinical and health governance implementation are the increased autonomy and accountability that emerges in primary care teams, the orientation towards health gains and the community involvement in the provision of care.

The main barriers are the need for a change in clinical behavior, the existing knowledge gap among professionals, the scarcity of human resources in primary care and the level of adoption and reliability of electronic health information systems.

# EQuiP Invitational conference 7-9 April 2011

"Value for money in general practice - management and public trust"

# Conclusion

Clinical and health governance is conceptualized by a framework of eight domains in three key vectors (purposes, persons and processes). This study identified facilitators and barriers to clinical and health governance implementation in Portuguese primary care; therefore, further research is mandatory to define a pathway and action points for its successful implementation in the upcoming years.