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Competencies for primary secondary care collaboration, a Delphi study among physicians

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BACKGROUND

To successfully manage complex patients, primary and secondary care physicians require specific collaborative competencies.

AIM

To define essential competencies for collaboration between primary and secondary care physicians, according to the views of physicians.

METHODS

We used a Delphi technique to obtain consensus on the opinions of experts: GPs and GP trainees and medical specialists and trainees in different specialties. Round 1 was used for idea generation by open ended questions. Answers were analysed based on knowledge, skills and attitudes. In round 2 the participants scored the items on a scale from 1 to 10. This was analysed using descriptive statistics. For inclusion in the final list, consensus was defined as: ≥75% scores a 7 or higher and ≤5% scores a 3 or lower for exclusion: ≥75% scores a 5 or lower and ≤5% scores an 8 or higher. Round 3 was used to gain consensus over the items over which no consensus was reached after round 2. An item was included in the list if more than 50% answered yes.

RESULTS

63 participants completed all 3 rounds. It resulted in a final list of 91 items that were divided in specific moments (referral/consultation initiated from the GP; treatment in secondary care; discharge from secondary to primary care) and generic skills (roles and responsibilities; professionalism and reflectivity; organisational knowledge; promoting the organisation of collaboration).

CONCLUSION

A rich list of collaborative competencies was defined. This can be the starting point for individual learning goals and for on- and off-the-job educational interventions.

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