

POSTER ABSTRACTS
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Chronic Disease
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The Architecture of Chronic Care Improvement: Patients, Physicians, and Organization of Care

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Background: To articulate a broad and cohesive theory that suggests practical strategies that can be brought to bear to improve chronic disease care in primary care practices.

Methods: We have synthesized information from over a dozen funded research projects that studied chronic disease improvement that we have personally been involved in, and supplemented this perspective with information obtained from published literature and conversations with leaders in chronic disease care improvement.

Results: There are three “clusters” that must be addressed to optimize chronic disease care in primary care settings. The first involves patient activation, which depends in turn on explanatory models of disease and on relationships with providers. The second cluster involves physician behavior and care team constitution and function. The third cluster involves the organizational characteristics of primary care practices.

Conclusions: Improvement strategies most often focus on organization of care, but evidence suggests that optimizing this cluster alone will not be a potent enough strategy to reach desired levels of chronic disease care. More attention must be given to physician behavior change and to effective patient activation strategies.