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What do older patients want? Understanding older patients' attitudes towards general practice trainees

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What do older patients want? Understanding older patients' attitudes towards general practice trainees

Abstract
Context: Older patients constitute an increasing proportion of the caseloads in general practice (GP) training practices, but are relatively reluctant to consult trainees. Understanding their attitudes is a first step in improving older patient-trainee interaction. Objectives: Characterise the attitudes of older patients to GP trainees. Design: Cross-sectional survey; exploratory factor analysis; logistic regression. Setting: Randomised, stratified sample of 38 training practices across five Australian states. Participants: Patients aged 60 years and over (N=911; response rate 47.9%). Instrument: Questionnaire for self-completion: previously piloted and subjected to factor analysis. Main and secondary outcome measures: Identification of attitude factors; patient characteristics predicting high factor scale scores; patient responses predicted by factor scale scores. Results: Cronbach's ? =.791. Three factors identified: interpersonal trust (IPT); system trust (ST); and interpersonal continuity of care (IPC). Female gender and age >/= 75 predicted high IPT scores [OR 1.95, 95% CI 1.39-2.72, p<001; OR 1.41, 95% CI 1.01-1.96, p=.044]. Female gender and chronic illness predicted high IPC scores [OR 2.88, 95% CI 1.66-5.00, p<.001; OR 2.17, 95% CI 1.93-3.94, p=.011]. Self-rated health score >/= 4/5 predicted high ST scores [OR 1.91, 95% CI 1.38-2.64, p<.001]. High IPT reduced odds of satisfaction with trainees [OR .51, 95% CI .32-.81, p=.004], and both high IPT and IPC reduced odds of comfort with trainee chronic/complex care [OR .61, 95% CI .40-.92, p=.02; OR .31, 95% CI .18-.56, p<.001]. High IPC predicted reduced odds of seeing a trainee more than once or twice [OR .42, 95% CI .24-.74, p= .002]. High ST predicted increased satisfaction with trainees [OR 6.96, 95% CI 4.47-10.83, p<.001]. Conclusions: Three underlying constructs (IPT, ST and IPC) appear important in influencing older patients' interactions with trainees. Patients with high IPT and/or IPC scores demonstrate significantly reduced acceptance of trainees. Strategies aimed to improve trust and continuity, e.g. shared continuity of care with their regular GP, may improve acceptance for these patients.

Keywords
older, do, patients, practice, want, trainees, understanding, attitudes, towards, general

Disciplines
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Different Needs, Same Solution: The Effect of Visible Supervision On Older Patients' Attitudes to General Practice Trainee Chronic/Complex Care

Andrew D Bonney, MBBS, MFM; Sandra C Jones, PhD; Don Iverson, PhD; Christopher Magee, PhD

Hide Abstract

Context: The ageing population requires training practices to provide appropriate training for future general practitioners (GPs) in chronic disease management, whilst recognising the particular needs of older patients. There has been little research to assist practices meet these requirements. Objectives: To assess older patients' attitudes to GP trainee management of a chronic condition with varying levels of visible supervision. Design: Cross-sectional survey; exploratory factor analysis; logistic regression. Setting: Randomised, stratified sample of 38 training practices across five Australian states. Participants: Patients aged 60 years and over (N=911; response rate 47.9%). Instrument: Questionnaire for self-completion: previously piloted and subjected to factor analysis; clinical vignette assessing responses to trainee chronic/complex care with varying supervision. Main and secondary outcome measures: Identification of attitude factors; patient responses to vignette according to factor scale scores. Results: Cronbach's ? =.791 for main attitude scale, ?=.780 for vignette. Three factors identified: interpersonal trust (IPT); system trust (ST); and interpersonal continuity of care (IPC). High ST factor scale score predicted not feeling the need for a regular GP [OR 2.50, 95% CI 1.43-4.37, p=.001]. There was noticeable variation between the IPT, ST and IPC high score groups in their attitudes to unsupervised GP trainee chronic/complex care [Not at all comfortable: IPT 42.9% vs. ST 15.1% vs. IPC 23.7%]. The responses significantly improved for all groups if their regular GP checked on management [Not at all comfortable: IPT 7.2%, p<0.001; ST 2.2%, p<0.001; IPC 3.9%, p<0.001]. Conclusions: Older patients' attitudes to trainees are heterogeneous and have varying influences upon their acceptance of trainee chronic/complex care. Beyond the educational and safety issues, all three groups characterised by their factor scores would benefit from supervision for chronic disease management: the IPT and IPC groups to address their trust and continuity concerns; and the ST group as it appears they are significantly less likely to arrange for continuity in their care of their own accord.

What Do Older Patients Want? Understanding Older Patients' Attitudes Towards General Practice Trainees

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