

**QUALICOPC (QUALITY AND COSTS OF PRIMARY CARE) CANADA:
A FOCUS ON THE ASPECTS OF PRIMARY CARE MOST HIGHLY RATED
BY CURRENT PATIENTS OF PRIMARY CARE PRACTICES
(COLLABORATIVE PUBLICATION)**



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CONTEXT

The Quality and Costs of Primary Care (QUALICOPC) study is an international study of quality and costs of primary care in 34 countries. It was designed to satisfy the demand for benchmarking performance information and to inform primary care reform through international comparison. This pan-Canadian report describes results from the data collected from patients and physicians in primary care practices that provide comprehensive primary care.

OBJECTIVES

This report aims to look at the aspects of primary care valued most by patients and the performance of primary care on those aspects across Canada.

METHODS

Primary care physicians from all Canadian provinces were asked to participate in the QUALICOPC study by a research team in each province. Physicians who agreed to participate were sent a package containing four different surveys. In each practice, the physician was asked to complete the survey about the services provided and any staff member could complete the practice setting survey. One patient was expected to respond to the patient values survey and nine other patients to the patient experience survey. The research team categorized the questions from the patient values and patient experience surveys into four dimensions: Continuity and Coordination, Communication and Patient-Centred Care, Patient Activation, and Access.

FINDINGS

Among the 10 most highly rated aspects of primary care in the patient values survey, seven represented aspects of Communication and Patient-Centered Care, and the other three represented aspects of Continuity and Coordination. Results from across Canada suggest that patients visiting primary care practices had predominantly positive experiences with the care they received, specifically on those aspects of primary care that were found to be most important to respondents of the patient values survey.

The sampling populations of this study included patients, mostly in good or very good health, who had regular access to a primary care provider. This may have affected the results of this study particularly pertaining to access to primary care, which the Commonwealth Fund has consistently identified as an area in which Canada has shown a poor performance compared to other countries with similar wealth.

CONCLUSIONS

These data provide the largest source of information about patient values and experience with primary care in Canada. The report summarizes the aspects of primary care that were most valued by patients who responded to a survey that was distributed to participating primary care physician practices in each province in Canada. The findings show that patients who completed surveys in these practices most highly value care aspects related to communication and patient-centred care, and to continuity and coordination. The data presented in this report also shows that there was very little variation across the country in the aspects of primary care that patients found to be most important, as well as little variation in the experiences of patients in different provinces related to these aspects.

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