

Measure #31. Korean Primary Care Assessment Tool (KPCAT)

CARE COORDINATION MEASURE MAPPING TABLE

	MEASUREMENT PERSPECTIVE		
	<i>Patient/Family</i>	<i>Health Care Professional(s)</i>	<i>System Representative(s)</i>
CARE COORDINATION ACTIVITIES			
Establish accountability or negotiate responsibility			
Communicate	□		
<i>Interpersonal communication</i>			
<i>Information transfer</i>	■		
Facilitate transitions			
<i>Across settings</i>	□		
<i>As coordination needs change</i>			
Assess needs and goals	□		
Create a proactive plan of care			
Monitor, follow up, and respond to change	□		
Support self-management goals	□		
Link to community resources	□		
Align resources with patient and population needs	□		
BROAD APPROACHES POTENTIALLY RELATED TO CARE COORDINATION			
Teamwork focused on coordination			
Health care home			
Care management			
Medication management			
Health IT-enabled coordination			

Legend:

- = ≥ 3 corresponding measure items
- = 1-2 corresponding measure items

Korean Primary Care Assessment Tool (KPCAT)

Purpose: To develop and measure performance in Korean primary care practices.

Format/Data Source: 26-item instrument consisting of 4 multi-item scales and 1 composite scale with 21 items designed to measure performance within Korean primary care practices based upon 4 domains: (1) comprehensiveness, (2) coordination function, (3) personalized care, and (4) family/community orientation. Responses provided on a 5-point Likert scale.

Date: Measure published in 2009.¹

Perspective: Patient/Family

Measure Item Mapping:

- **Communicate:**
 - *Between health care professional(s) and patient/family:* 15, 17
 - Information transfer:
 - *Between health care professional(s) and patient/family:* 18, 21
 - *Across health care teams or settings:* 16
- **Facilitate transitions:**
 - Across settings: 15
- **Assess needs and goals:** 6, 21
- **Monitor, follow up, and respond to change:** 16
- **Support self-management goals:** 7, 9
- **Link to community resources:** 25
- **Align resources with patient and population needs:** 13

Development and Testing: The Korean Primary Care Assessment Tool (KPCAT) was pilot tested regarding content validity on 3 distinct groups of skilled experts in primary care. Three domains (comprehensiveness excluded) demonstrated sufficiently high reliability alpha coefficients. Each item-scale correlation surpassed required minimum values. Further validation was demonstrated in a recent study of 9 South Korean primary care clinics, forthcoming in the International Journal for Quality in Health Care (J.H. Lee, personal communication, September 12, 2010).

Link to Outcomes or Health System Characteristics: None described in source identified.

Logic Model/Conceptual Framework: This is an adaptation of the original PCAT measures, which were based on a framework described by Starfield, 1992. For further information on the framework and development of the PCAT, please see Measure #17.

Country: Korea

Past or Validated Applications*:

- **Patient Age:** Not Age Specific
- **Patient Condition:** General Population/Not Condition Specific
- **Setting:** Primary Care Facility

*Based on the source listed below and input from the measure developer.

Notes:

- The original measure did not have individual items numbered. In order to properly reference specific items within this profile, all instrument items found in Table 2 of the source article were consecutively numbered.¹
- This instrument contains 26 items; 10 were mapped.

Source:

1. Lee JH, Choi YJ, Sung NJ, et al. Development of the Korean primary care assessment tool: Measuring user experience: Tests of data quality and measurement performance. *Int J Quality Health Care* 2009;21(2):103-11.