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### Doctors' perceived coordination of care across care levels according to country of origin in public healthcare networks of Brazil and Chile

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#### Background:

Despite efforts to improve care coordination between primary care (PC) and secondary care (SC) in Latin American healthcare systems, problems in coordination remain in the region. The objective is to explore differences in doctors' perceptions of care coordination across levels of public healthcare networks in Brazil and Chile according to country of origin.

### Methods:

A cross-sectional study was carried out based on a questionnaire survey, applying the COORDENA questionnaire to a sample of PC and SC doctors working in two public healthcare networks of each country (348 doctors per country) of which 7.1% in Brazil and 24.7% in Chile were foreigners. Outcome variable: general perception of care coordination across care levels. Main explanatory variables: doctors' country of origin (national/foreigner). Covariates: sociodemographic, employment, organisational, and interactional factors. Descriptive analysis and multivariate logistic regression models were performed.

## **Results:**

In both countries, foreign doctors mostly work in PC, identify PC doctors as care coordinators and trust to a higher extent in the clinical skills of the other level doctors. Their perception of good care coordination across levels is low (about 15%) but slightly better than that of national doctors. According to multivariate analysis, in Chile, foreign doctors' perception of good coordination of care is higher: OR adj: 2.35 [95% CI = 1.61-3.42]. No differences were found in Brazil.

# **Conclusions:**

The level of perceived care coordination is generally low but somewhat better among foreign doctors, particularly in Chile. Further research on influencing factors is needed.

### Main messages:

This is the first exploratory analysis comparing doctors' perception of care coordination according to country of origin in Brazil and Chile.

Doctors' perception of care coordination across levels is generally low but slightly higher among foreign doctors.