

## **COVID-19: ACTION BRIEF**

#### Title

Maintaining primary care services for patients with multimorbidity using a remote based approach

## **Country** Chile

#### **Author**

Ximena Barros / María J. Fernández

Technical Advisors, Integrated Care in Primary Health Care Strategy

Ministry of Health / Metropolitan Southeast Health District (Servicio de

### Salud Metropolitano Suroriente)

#### **Key learning points**

- A remote-based primary care service was effective in maintaining care to patients with complex health needs in the Southeast Health District of Santiago, Chile between January July 2020.
- A multidisciplinary approach was key to providing holistic care to this cohort of patients.
- Limited resources and digital infrastructure hampered efforts in the early phase of implementation.

## How has COVID-19 impacted essential health services?

COVID-19 has caused significant disruption to the delivery of primary care services for patients with multimorbidity in the Metropolitan Southeast Health District population in Santiago, Chile. This is in large part due to a reduction in face-to-face visits in order to minimise COVID-19 transmission. As a result, there was an urgent need to develop an efficient remote service that could address the needs of patients in this District – in particular those with complex, chronic conditions, who required close monitoring and follow up.



Photo: SSMSO building

# What was the intervention to mitigate this impact?

The Integrated Care in Primary Health Care Strategy was developed for the Southeast Health District population in 2017. This included a multidisciplinary approach to the care of patients with multimorbidity. In order to mitigate the impact of the COVID-19 pandemic on primary care services, The Integrated Care in Primary Health Care Strategy was adapted to focus on remote care where possible, so as to minimise the transmission of COVID-19 in health facilities. This includes using the existing multidisciplinary approach to risk stratify patients with multiple chronic conditions and identify the most suitable approach for their care. A combination of telephone consultations for immediate triage and follow up were complemented by outreach home visits for certain groups (i.e. older patients).

In addition, specific guidance has been developed for remote care delivery: "Recommendations for remote follow-up of multimorbidity patients from PHC facilities which are part of the Integrated Care Strategy". This guidance serves as a critical tool for PHC teams. It provides protocols for the remote management of patients, including information on communication and follow up of complex patients.

# How did this intervention help in the maintenance of essential health services?

The Integrated Care in PHC Strategy was crucial in maintaining essential health services for patients with multimorbidity during the pandemic. It led to the development of a well-functioning remote service for these patients based on a multidisciplinary approach. Furthermore, the multidisciplinary approach was well received by patients, with positive feedback to clinicians.

## What were the key challenges involved?

The key challenges involved in the process of maintaining essential health services for patients with multimorbidity were:

- Remote consultations were impacted by logistical and communication issues between providers and patients (i.e. availability of telephone connectivity, challenges in explaining complex care plans to patients on the phone).
- Adapting to new models of service delivery there was initial resistance from PHC teams on using a remote-based approach to managing the care of complex patients but this subsided once the guidance and associated protocols were in place.
- Digital infrastructure due to limited resources, PHC team members had to use their own devices (i.e. smartphones) to provide health services. For some teams, there were privacy concerns about the use of personal devices in this context.

