

Background Information on Model of Care Research

The study entitled “*Evidence to guide investment in a model of primary care for all*” involved senior academics from five universities – Massey, Auckland, Otago, Cambridge (UK) and the Karolinska Institute (Sweden) – together with Sapere Research Group, DataCraft Analytics, and experts from general practice, nursing, public health, health policy and consumer advocacy. Māori and Pacific academic clinicians on the team held central roles in project governance.

The practice types studied were defined as follows:

Corporate practice: A group of practices owned and run as a business entity, including practices that deliver high volumes of care, with low costs for patients and often without the need for an appointment. Corporate practices have a relatively high degree of standardisation in business and clinical processes across different sites. Most corporate practices had been Traditional practices before being bought by a corporate entity.

Health Care Home (HCH): As defined by the HCH Collaborative, HCHs emphasised ready access to urgent and unplanned care; proactive care for those with more complex need; better routine and preventative care; and improved business efficiency and sustainability. Most had been Traditional practices prior to embarking on the HCH programme.

Traditional general practice: Such practices typically centred upon the general practitioner, with nursing support. They could span the range from very small to very large organisations, and could serve high need or low need populations. Traditional general practice was not typically part of a formally standardised approach to organising care, with the individual practice having a high degree of autonomy over service delivery.

Māori practices: Practices owned and governed by Māori entities. They were identified through lists from the Ministry of Health and DHBs together with web searches, direct contact with practices and advice from our Māori investigators.

Pacific practices: Practices owned and governed by Pacific entities. They were identified through lists from the Ministry of Health and DHBs together with web searches, direct contact with practices and advice from our Pacific investigators.

List of investigators

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