Adaptation and validation of the Ugandan primary care assessment tool (UG-PCAT)

Authors: *Besigye K. Innocent^{1,2}, Robert Mash²

- 1. Department of Family Medicine, School of Medicine, Makerere University College of Health Sciences
- 2. Division of Family Medicine and Primary Care, Faculty of Medicine and Health Sciences, Stellenbosch University

Background: Health systems based on primary health care (PHC) have better outcomes at lower cost. Such health systems need regular performance assessment for quality improvement and maintenance. In many low- and middle-income countries, there are no electronic data databases for routine monitoring. There is need to have valid and reliable tools for use in regular measurement of PHC systems performance. This study aimed to adapt and validate the South African Primary Care Assessment Tool (ZA PCAT) for the Ugandan context.

Methods: The study utilised a Delphi process using a panel of experts. The selection of the experts was based on their conceptual understanding of primary care and the Ugandan context. The ZA PCAT was emailed to 30 experts followed by 2 weekly telephone call reminders. The final panel of experts included 10 family physicians, 14 district health officers, 4 academics in primary care and 2 ministry of health technical staff who responded within 2 months. The same experts participated in the second round. The items for rephrasing, the added domain with its items were presented to the expert panel in round 2.

Results: Two rounds of Delphi were done with a panel of 20 experts.

Round 1: Four items in the comprehensiveness domain (services available) achieved consensus for removal and 5 items needed rephrasing. A new domain on person-centredness with 13 items was suggested for addition.

Round 2: The added domain with its items and the items for rephrasing all achieved consensus. The final Ugandan version of the PCAT has 12 domains and 91 items with additional 3 domains on primary care affiliation, self-health assessment and socio-demographic characteristics.

Conclusion: The ZA PCAT was adapted and validated to measure primary care performance for the Ugandan context and can now be used to measure the core functions of primary care in Uganda. The psychometric properties of the tool should be re-assessed since a new domain with new items were added.