Polypharmacy Patient Reported Experience Measures

Patient Reported Experience Measures on deprescribing and medication changes

Purpose
To obtain patients' views and observations, in particular their awareness of, involvement in and information provision on deprescribing and medication changes during health care services they have recently received.

Background and evidence
Polypharmacy is common among older patients in Australia and is associated with adverse outcomes. Several studies have reported high prevalence of potentially inappropriate medications among older patients in hospital. Recent studies have indicated that older patients are willing to have one of their medications deprescribed if their clinician indicates it is possible. Hospitalisation provides an opportunity for specialist input into medication review to individualise and rationalise therapy for older patients, which often involves deprescribing.

Adverse medicine events are commonly caused by a lack of effective communication about medicines, and commonly occur in the transition between the hospital and community settings. Older patients are especially at risk due to the large number of medicines they are frequently prescribed. Whenever possible, shared decision-making regarding any proposed medicine changes should occur during hospitalisation. This process, together with timely transfer of accurate and comprehensive medication documentation at hospital discharge, including explanations for any medication changes and, if applicable, details of a deprescribing plan should reduce adverse events caused by ineffective communication.

The National Safety and Quality Health Service (NSQHS) Standards 2nd edition, Partnering with Consumers, specifically actions 2.6 and 2.7, require that health service organisations have systems, to support the delivery of care to the individual patient, that are based on partnering with that patient. Patients can be partners in their own care to the extent that they choose. Moreover, the health service organisation is expected to support its workforce to form partnerships with patients and carers so that patients can be actively involved in their own care.

Healthcare is changing in line with the expectations and needs of people accessing care. Patient-reported experience measures (PREMs) are used to obtain patients’ views and observations on aspects of health care services they have received. The Australian Charter of Healthcare Rights outlines the right to partnership in care and information provision. Increased patient and/or carer involvement can encourage greater patient and/or carer empowerment and participation in personal care, adherence to recommended treatment and monitoring of prescriptions and medication doses.

The Australian Commission on Safety and Quality in Health Care (ACSQHC) developed the Australian Hospital Patient Experience Question Set (AHPEQS) in 2017 as a tool to assess the quality of patient experiences during a recent hospital stay or visit to a healthcare service. The PREMs in this document were developed using the same format as the AHPEQS for ease of use and potential incorporation into existing patient-based surveys.

Data collection for local use
Please refer to the Technical specifications for Australian Hospital Patient Experience Question Set (AHPEQS) use for guidance on preparing a survey, sample selection, sample size, survey collection modes and other considerations.

Inclusion criteria: Patients aged 65 years and over, or other ages for high risk groups as appropriate, admitted to hospital, and who have a length of stay in hospital greater than 24 hours from the time of hospital admission and are taking at least one regular medicine at admission.

Exclusion criteria: Patients with length of stay less than 24 hours from the time of hospital admission; patients cared for in the emergency department only; patients admitted for more than 24 hours and are not taking a regular medicine at admission.

Recommended data sources: Patients (or carers) on day of discharge or within 3 days of discharge. (If possible, reconciled discharge medication list and accompanying medication information in the discharge summary to check accuracy of information).
Data collection for inter-hospital comparison

The PREMs may be suitable for inter-hospital comparison. In this case, definitions, sampling methods and guidelines for audit and reporting need to be agreed in advance in consultation with the coordinating agency.

Calculation of PREMs

Calculate proportion of responses to each question.

Limitations and interpretation

Patient’s responses to questions may be inaccurate although an accurate reflection of their perception. If possible, check the accuracy of their response by checking a reconciled discharge medication list. However, it may also be challenging to retrospectively check the accuracy of a patient’s response. It is suggested that if the auditor, is able to check accuracy, that they also collect data regarding accuracy for all patients in the sample.

Consider the information collected for Questions 2 and 3 separately as different interventions may be required for improvement.

PREMs Questions

Question 1
Do you know whether any of your medicines were reduced or stopped while you were in hospital?
Response options
☐ Yes
☐ No
☐ Unsure

[if answer is No or Unsure, then no further questions; if answer is Yes, then answer Questions 2 and 3]

Question 2
I was involved as much as I wanted in making decisions about reducing or stopping one or more of my medicines while I was in hospital.
Response options
☐ Yes
☐ No
☐ Unsure

[only for those answering Yes to Question 1]

Question 3
I am satisfied with the level of information provided to me about reducing or stopping one or more of my medicines while I was in hospital.
Response options
☐ Yes
☐ No
☐ Unsure

[for those answering Question 2, regardless of answer to question 2]

Related information and further reading

Translators may be required to ensure true representation of a hospital’s casemix.

The Australian Charter of Healthcare Rights, describes the rights that consumers, or someone they care for, can expect when receiving health care.

The Australian Hospital Patient Experience Question Set (AHPEQS) is a patient experience survey question set developed by the (ACSQHC).

The Technical specifications for Australian Hospital Patient Experience Question Set (AHPEQS) use provides guidance for survey administrators in health organisations and healthcare services on best practice implementation of the AHPEQS.
References


