

---

**CONFERENCE ABSTRACT****Using Patient Reported Measures in an integrated care context to capture what matters most to patients**1<sup>st</sup> Asia Pacific Conference on Integrated Care, Brisbane, 06-08 Nov 2017

Nicole Cook

Agency for Clinical Innovation, Australia

---

**Introduction:** The NSW Integrated Care Strategy involves implementing innovative, locally led models of integrated care across the State to transform the NSW healthcare system. The Agency for Clinical Innovation's Patient Reported Measures (PRMs) Program is an important enabler of this strategy. The PRMs Program aims to enable patients to provide direct, timely feedback in order to drive improvement and integration of health care across NSW.

**Short description of practice change implemented:** The PRMs Program enables the collection and use of Patient Reported Outcome Measures (PROMs) and Patient Reported Experience Measures (PREMs). The program has used a collaborative co-design approach working with a range of consumers and clinicians throughout each phase. The program is currently working with 11 proof of concept sites (geographical areas) from rural, regional and metropolitan NSW and has facilitated the development of strong partnerships between the acute, community and primary health care services. The program has significantly built capability and capacity of the health care system to transform how care is delivered and how people think about patient outcomes using a range of resources.

**Aim and theory of change:** A formative evaluation of the program was completed to assess the short-term and intermediate outcomes and identify the barriers and enablers of embedding PRMs into routine clinical practice.

**Targeted population and stakeholders:** The targeted population for the program was people living with complex and long term conditions. The PRMs Program has worked with a variety of consumers, clinicians and managers from the proof of concept sites across a range of different settings.

**Timeline:** The Integrated care strategy commenced in 2014 and will run over six years. The PRMs Program commenced late 2014 initially with four proof of concept sites and, due to heavy demand for support and broadening of the program, the program has expanded to 11 proof of concept areas which comprises 81 sites.

**Highlights (innovation, Impact and outcomes):** The PRMs Program formative evaluation identified that having a genuine co-design approach (working from the start with consumers and clinicians) of the program was identified as a key strength of the program as was the

Cook; Using Patient Reported Measures in an integrated care context to capture what matters most to patients

commitment to travelling out to visit the sites to localise implementation and the education and training was well received. There was early evidence that care planning changed following completion of PROMs and that PRM data has been used to monitor quality and refine service delivery. There was also early evidence that care was more patient-centred, more responsible to patient's needs, clinical practices improved, service delivery more effective and added to reduction in unplanned hospital admissions.

**Conclusions (comprising key findings):** PRMs Program demonstrates how the use of co-design and technology can be used to improve the integration of care and change the way care is delivered to ensure that we really hear what matters most to patients. The results of the program evaluation will be shared and will highlight the enablers and barriers to embedding PRMs into routine clinical practice.

---

**Keywords:** patient reported measures; proms; prems; co-design

---