POSTER ABSTRACT

Can the jointly collection of PROMs and PREMs improve integrated care? The changing process of the assessment system for the heart failure path in Tuscany Region

19th International Conference on Integrated Care, San Sebastian, 01-03 April 2019

Francesca Pennucci, Sabina De Rosis, Sabina Nuti
MeS Lab, Institute of Management, Scuola Superiore Sant’Anna, 56127 Pisa, Italy

The Patient Reported Outcome and Experience Measures (PROMs and PREMs) are key assessment tools from the patients’ point of view, with different purposes and different tools.

While PREMs have been increasingly used as a tool for improving care quality, PROMs are generally used to measure effectiveness within clinical trials or for improving patients’ health status. Integration of care has a relevant impact on both, quality of care and patient health status. This suggests that PROMs and PREMs should be collected in an integrated way, to understand the experience-outcome relationship along the care pathway, thus providing a complete vision of the quality and integration of care from the patient perspective. Performance evaluation systems should change shape and include PREMs and PROMs to tackle care integration.

The potential of the PROMs and PREMs combined collection was tested in the heart failure pathway assessment with a single-site pilot study in Tuscany. Disease-specific PROMs questionnaires have been identified in the literature and shared with a group of cardiologists. The short version of the Kansas City Cardiomyopathy Questionnaire (KCCQ-12) was selected. The authors and cardiologists developed a set of questionnaires on the patient experience, for investigating the patients care pathway. The questionnaires including both PROMs and PREMs was administered in specific time-points: discharge; 30 days, 7 and 12 months after the discharge.

The preliminary results were presented to the cardiologists, GPs, and nurses, as well as to the healthcare management of the involved hospital and the Local Health Authorities in charge of primary care.

PREMs data resulted a key information source on the patients’ view of the service delivery process along the care pathway, clarifying some PROMs results. By using these data all the health professionals could have a complete and integrated vision of the patients' pathway, above and over the single hospitalization event.

The integration of PROMs and PREMs enriched existing sources of health information from the patient perspective, as a complement of clinical and administrative data. The pilot study showed that those data can help to overcome a “silo” approach, focused on a specific setting and organization, allowing the longitudinal measurement of outcomes and experience along the whole patient care pathway.

The ‘pathway-vision’ of the system provided by the combined collection and reporting of PROMs and PREMs shows the eventual healthcare pathways discontinuities to be addressed in order to
Pennucci; Can the jointly collection of PROMs and PREMs improve integrated care? The changing process of the assessment system for the heart failure path in Tuscany Region

integrate care in the patient perspective, so enabling a potential shift of the healthcare system towards integration of care.

References:

1- Coulter et al. Collecting data on patient experience is not enough: they must be used to improve care. BMJ 2014;348:g2225.


3- Nuti et al. Bridging the Gap between Theory and Practice in Integrated Care: The Case of the Diabetic Foot Pathway in Tuscany. IJIC 2016;16(2).


Keywords: proms; prems; heart failure; care pathway assessment