Submission Id: 5400

Title

The routine collection of patient-reported experience in primary care

Priority 1 (Research Category)

Mixed methods research

Presenters

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Abstract

Context. The Quadruple Aim is being used to evaluate the impact of Ontario Health Teams, a new model of integrated care in the province of Ontario, Canada, with improved patient experience as one of the core aims. While many tools have been developed to measure both patient-reported experience (PREM) and patient-reported outcomes (PROM), little has been done to routinely implement these within primary and community care.

Objective: Describe the routine implementation of a PREM in primary care. Understand how end-users incorporate patient experience data into routine use. Study Design and Analysis: A multiple mixed methods case study design. The Consolidated Framework for Implementation Research and Process Design informed data collection across the five major domains. Two sets of focus groups were completed with each of the four cases to understand the unique experiences of routine PREM collection. Within and across case analysis was used with descriptive statistics for quantitative survey data and thematic analysis for qualitative data. Setting: Three cases were interprofessional primary care clinics and one case was a Public Health organization. All cases were located in one Ontario Health Team in the province of Ontario, Canada. Population Studied: Each case included patients attending clinic appointments and 2-3 decision makers from each case. Intervention/Instrument: Real time collection of patient experience data. Outcome Measures: PREM with three domains: encounter experience, health and well-being and demographics. Results: A total of 1222 patients completed the survey over 5 months. Different mechanisms were used to deploy the PREM, including weekly emails to patients, tablets in waiting rooms and posted QR codes. The overall patient experience of the appointment varied across cases;99% of patients in one case rated their experience as very good or excellent to 87% in another case. Patients in the three primary care sites were less likely to report their health care needs were addressed (87%) than those in the Public Health sites (98%). Clinics received individualized reports on a weekly, bi-weekly or monthly basis, depending on their stated preferences. Themes from the focus groups included using the data for ongoing QI, boosting moral, resources needed for ongoing use. Conclusions: The study highlights the variation in how PREMs are deployed and used in primary care, with a range of patient experiences.