Challenges to implementing electronic collection and use of patient-reported measures in older adults' care

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1. Introduction	3. Methods	4. Findings
Patient-reported	A program of research	Older adults' capacity to
measures (PRMs), in the	consisting of three studies	engage in electronic
form of patient-reported	was conducted to draw on	completion of PRMs is
outcome or experience	stakeholder perspectives	determined by level of

measures allow capturing patient perception of health status, impairment, disability, health-related quality of life and experiences of the care process¹.

In the recent times, PRMs are used in the provision of value-based care². In older adults' care, these factors are important given multi-morbidities and complex care needs in this population³. reported in the literature, pre- and postimplementation contexts.

Perspectives of older adults, healthcare professionals, carers, administrative staff, program managers, information technology professionals and organisation leaders were gathered. ageing related limitations, digital literacy and access to digital technology

Planning at an early stage and co-design of solution with users is important to ensure acceptability and sustainability of solution

Leveraging existing organisational resources and investing in seamless information technology solutions were regarded important for future sustainability

Digitalisation of PRMs collection and use come with many benefits. Yet, little evidence exists about the challenges to digitalising PRMs collection and use in older adults' care.

2. Aim

To investigate challenges to implementing electronic collection and use of patient-reported measures in older adults' care, from various stakeholder perspectives. The Non-adoption, Abandonment, challenges in Scale-up, Spread and Sustainability and the Capability, Opportunity, Motivation – Behaviour frameworks were used to collect and analyse data in this research

Study 1: Systematic literature review

Study 2: Qualitative study

5. Conclusion

Findings from this research will inform future implementations and guide hospitals and implementation specialists on challenges to consider when designing a solution for electronic collection

(pre-implementation)

Study 3: Qualitative study (post-implementation)

Consolidation of findings

and use of PRMs

6. References

- Kingsley, C., Patel, S. (2017). Patient-reported outcome measures and patient-reported experience measures. *BJA Education*, 17(4). <u>https://doi.org/10.1093/bjaed/mkw060</u>
- Teisberg, E., Wallace, S., & O'Hara, S. (2020). Defining and Implementing Value-Based Health Care: A Strategic Framework. *Academic Medicine*, *95*(5), 682–685. https://doi.org/10.1097/ACM.000000000003122
- Schick-Makaroff, K., Karimi-Dehkordi, M., Cuthbertson, L., Dixon, D., Cohen, S. R., Hilliard, N., & Sawatzky, R. (2020). Using Patient- and Family-Reported Outcome and Experience Measures Across Transitions of Care for Frail Older Adults Living at Home: A Meta-Narrative Synthesis. *The Gerontologist*, 61(3), e23–e38. <u>https://doi.org/10.1093/geront/gnz162</u>

