

# Facilitating quality improvement interventions by providing real-time data on patient-reported indicators

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**Introduction:** Patient-centered care (PCC) plays a pivotal role in ensuring healthcare quality and patient safety. Santana and colleagues (2018) have proposed a conceptual framework (Figure 1) that emphasizes the significance of Patient-Reported Experience Measures (PREMs) and Patient-Reported Outcome Measures (PROMs) as indispensable elements for effective implementation of PCC. This framework serves as a roadmap, guiding the sequential integration of structural domains, facilitate processes, and influence outcomes required to achieve PCC. In line with this framework, the objective of our project, led by the Quality Management and Patient Safety Department (QMP) at the University Hospital Zürich (USZ), is to support clinicians in the collection and utilization of validated PREMs and PROMs to enhance quality improvement measures that prioritize the patient's perspective.

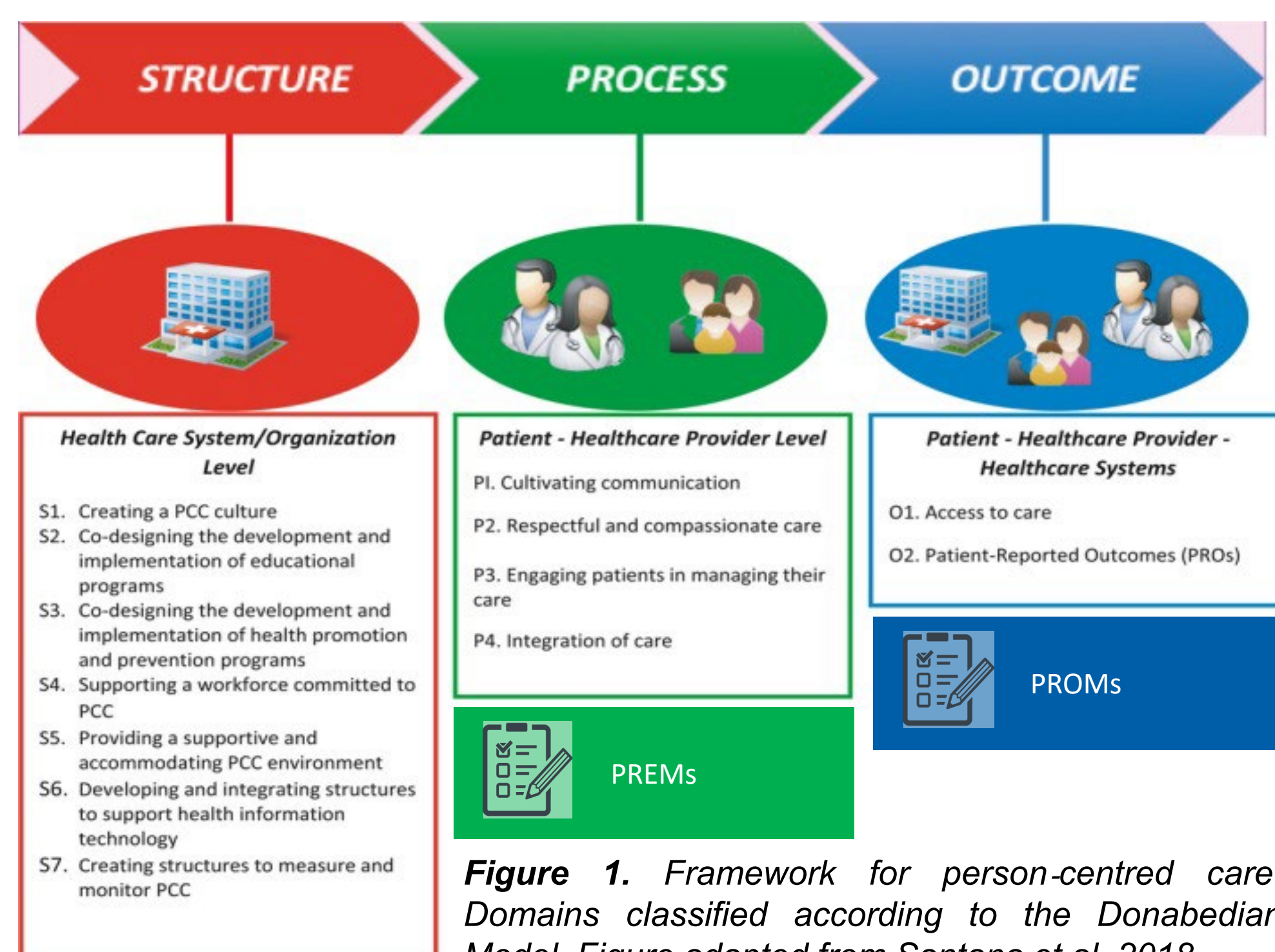


Figure 1. Framework for person-centred care: Domains classified according to the Donabedian Model, Figure adapted from Santana et al. 2018

**Methods:** Adhering to the proposed framework, the QMP focused first on the systematic collection of PREMs by utilizing validated questionnaires, including from the Schweizerischen Nationalen Vereinigung für Qualitätsentwicklung (ANQ), Patients' Experience Questionnaire (PEQ), Hamburger Hospitalisierungsfragebogen (HFK), and Kölner Patientenfragebogen (KPF). These questionnaires were carefully selected to ensure the comprehensive collection of patient experiences. Furthermore, QMP partnered with an external company to develop a Patient Survey Dashboard (Figure 2) that serves as a centralized platform where clinicians can access and analyze the relevant and actionable PREM data, enabling them to make informed decisions regarding quality improvement initiatives. Additionally, clinicians received training in the Plan-Do-Check-Act (PDCA) cycle, a well-established quality improvement methodology. This training equips them with the necessary skills to effectively analyze data, identify areas for improvement, implement changes, and evaluate the impact of these interventions. A sample worksheet provided to clinicians is shown in Figure 3.

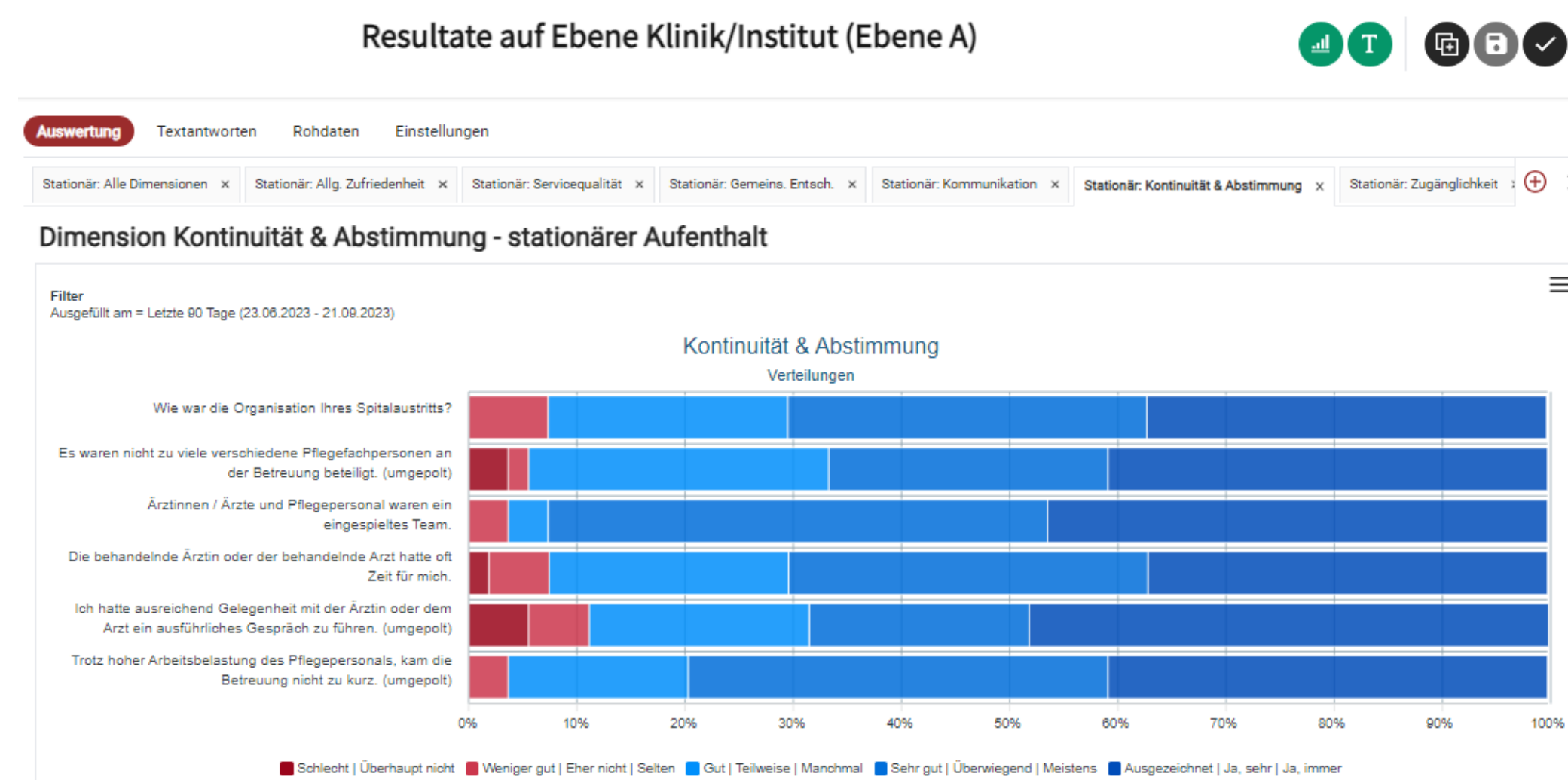


Figure 2. Example view for PREM data in the Patient Survey Dashboard available to each hospital clinic for internal evaluation.

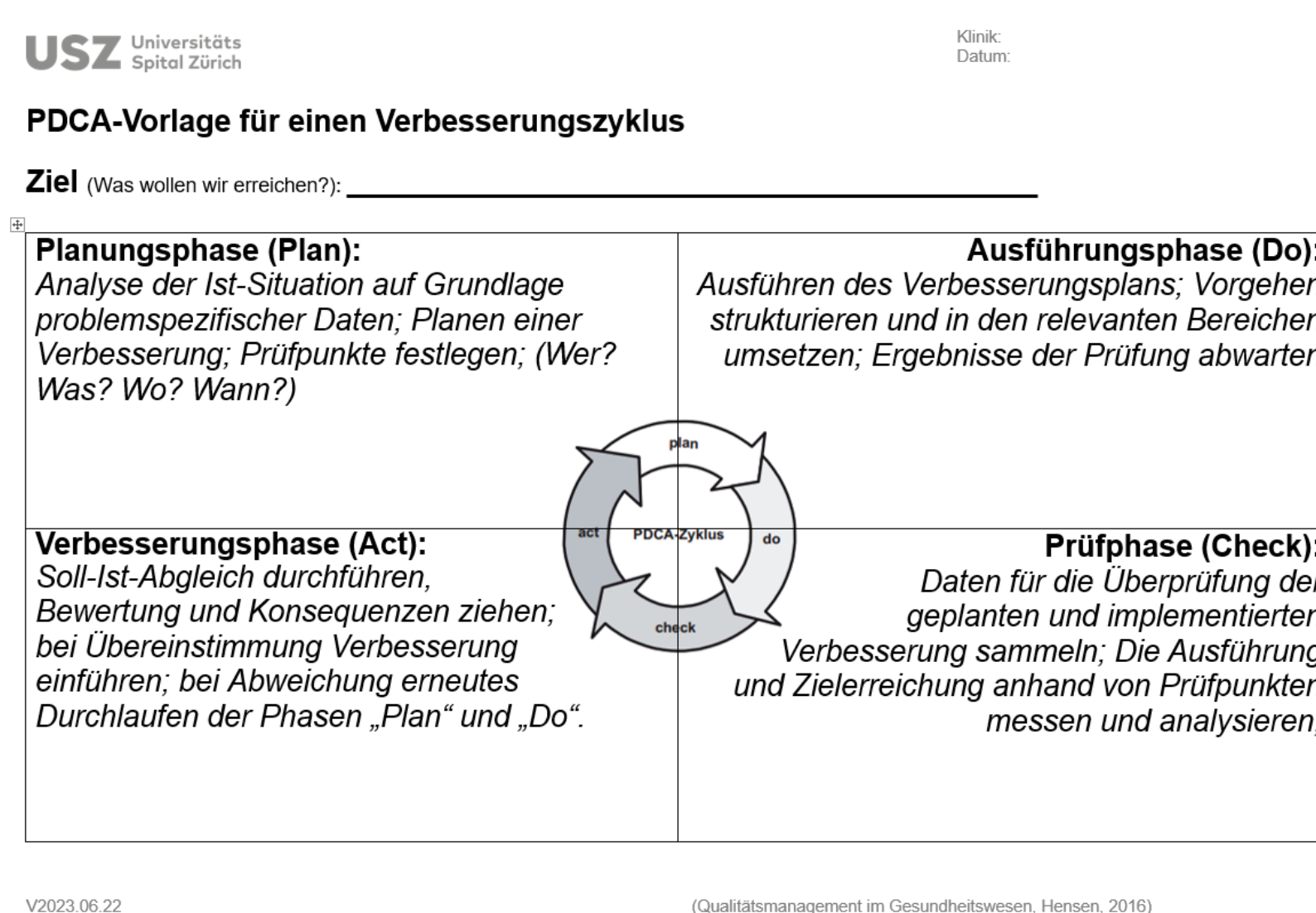


Figure 3. Example worksheet available to each hospital clinic for the internal development of a PDCA cycle using the patient survey data to improve the quality of their treatment and services.

As the next step, in line with the framework, we are preparing the systemic implementation of PROM collection, which we plan to roll out on a pilot basis. We are working closely with the first pilot clinics to integrate ICHOM sets, the gold standard of PROMs, into their workflow.

**Results/Conclusion:** Through our dedicated efforts, we anticipate that clinicians within USZ will effectively utilize the Patient Survey Dashboard, which displays data from validated questionnaires, for quality improvement purposes. The stepwise approach based on the framework from first implementing PREMs, then PROMs, allows clinicians to build upwards from the foundations of PCC. The availability of comprehensive and timely data through the Dashboard, combined with the training in the PDCA cycle, empowers clinicians to implement targeted quality improvement measures based on patient-centered indicators. By embracing the integration of PREMs and PROMs, our project contributes to the ongoing enhancement of patient-centered care and fosters a culture of continuous improvement at the USZ. Ultimately, this endeavor aims to ensure that the patient's perspective remains at the forefront of healthcare decision-making, leading to improved healthcare outcomes and a higher quality of care delivery.

