

CLAHRCBITE

Brokering Innovation Through Evidence

Feasibility of collecting retrospective patient reported outcome measures (PROMs) in emergency hospital admissions



Emergency admissions account for nearly 40% of hospital admissions and are an area of increasing demand. This is also an area where the NHS knows least about

- the quality of patient outcomes,
- whether resources are being used effectively,
- and whether there are unexpected variation between different providers.

There is also growing acceptance of the importance of patients' views when evaluating interventions and assessing the quality of services. This means that it is necessary to devise ways in which accurate Patient Reported Outcome Measures (PROMs) – which asks patients for their views on their health (such as their functional status, or their health related quality of life) - can be obtained.

By collecting PROMs (patients' views of their health) at different time points (e.g. before and after hospital care) can provide information on the effectiveness of their treatment, an important component in determining the quality of healthcare. Development to widen use of PROMs helps to focus the health service towards patient-centred care. The challenge of using PROMs in emergency admissions is how

we capture patients' view of their health before their emergency episode, and whether it is feasible to collect PROMs in these acute settings.

The aim of this project is to investigate the use of retrospective PROMs to identify a reliable method that would allow the extension of PROMs collection into this important area of health care.

Outcome of emergency admissions is usually limited to mortality with little attempt to capture the views or health status of survivors. This is because of the challenge how we capture patients' view of their health before their emergency admission, and whether it is feasible to collect PROMs in these acute settings.

The aim was to assess the feasibility of collecting retrospective PROMs to capture the pre-admission health status of patients admitted as emergencies.

What was the aim of the project?

Asking patients for their views of their health is becoming a key and increasing important focus in health care. It is also a way in which hospitals and clinicians can know whether the care they have given helps patients recover and to measure the quality of care.

However, there are areas such as in emergency admissions to hospital whereby current NHS PROMs collection does not cover and the methods for doing so pose a challenge. Emergency admissions accounts for 40% of NHS hospital admissions and has made news headlines repeatedly due to their increasing rates and rising costs.

This project investigates the ways that would allow the NHS to extend PROMs collection into this area to allow better assessment health services in this area, and therefore guide further advances in understanding the quality of our health services to patients.

What we did

Prospective study of two cohorts:

- patients undergoing primary coronary angioplasty for acute ST-elevation myocardial infarction (STEMI) – commonly described as a “heart attack” – in five hospitals
- and emergency laparotomy (EL) – an operation used for people with severe abdominal pain to find the cause of the problem and in many cases to treat it – for gastrointestinal conditions in 11 hospitals.

Three rates were calculated:

- proportion of patients eligible for inclusion;
- proportion of eligible patients invited to participate;
- proportion of invitees who participated.

Staff views were thematically analysed to understand factors that affected recruitment.

What we found

Around 85% of patients were eligible of whom most were invited to participate (84% EL; 79% STEMI). The proportions of invitees agreeing to participate differed between STEMI (92%) and EL (72%), probably reflecting greater post-intervention morbidity in the latter.

Variation between hospitals was observed in the proportion deemed eligible (EL 72-97%; STEMI 63-100%), proportion invited (EL 60-93%; STEMI 71-96%) and the proportion of invitees agreeing to participate (EL 55-92%; STEMI 67-100%). While this might reflect case-mix differences between hospitals, it suggests there is scope for less well-performing hospitals to improve their recruitment processes.

What next?

These findings justify the case for a large, multi-site study that could explore unresolved concerns about selection bias (a known risk studies involving groups of patients), particularly those arising from the clinical characteristics of patients. It would also enable estimates of the extent of variation in PROMs between hospitals to determine the usefulness of using PROMs in emergency admissions.



Find out more

Kwong, E and Black, N.

Feasibility of collecting retrospective patient reported outcome measures (PROMs) in emergency hospital admissions.

Journal of Patient-Reported Outcomes 2018 2:54

<https://doi.org/10.1186/s41687-018-0077-y>

Further reading

Patient Reported Outcome Measures (PROMs) – NHS England website

www.england.nhs.uk/statistics/statistical-work-areas/proms

Black, N. Patient reported outcome measures could help transform healthcare

BMJ 2013; 346 doi: <https://doi.org/10.1136/bmj.f167>

London School of Hygiene & Tropical Medicine PROMs research homepage

www.lshrm.ac.uk/research/centres-projects-groups/proms