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Transitional patient safety from a patient's perspective: the Transitional Risk and Incidents Questionnaire (TRIQ)

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Introduction: When a patient transfers from one healthcare level to the other (either during referral, discharge or simultaneous care at the outpatient clinic and the general practitioner (GP)), they are at risk for incidents. To assess continuity between hospital and GP, we asked patients their recent experiences using the Transitional Risk and Incident Questionnaire (TRIQ).

Methods: The TRIQ contains questions on three dimensions of continuity of care: Relational continuity (9 items), Informational continuity (8 items), and Management continuity (9 items) and an overall judgement of the transition. During 6 weeks, all patients visiting the cardiology and gastroenterology outpatient clinic of three hospitals in the Netherlands were requested to fill in the digital TRIQ questionnaire. All participants' negative experiences were reassessed into an incident and non-incident experience.

Results: in total, 372 patients participated. Patients assessed relational continuity as "good". Patients had difficulties assessing the collaboration between the GP and hospital (management continuity), since this collaboration is often not visible for them. 51% of patients had experienced a transitional incident in the last 6 months. Main problems were (1) the timely and qualitative transfer of information between hospital and GP (17% of patients reported an incident in transfer of information at discharge, 13% in transfer of information after visit to the outpatient clinic and 13% in transfer of information at referral to hospital) and (2) redundant diagnostics (reported by 16% of patients). Especially hospital discharge was prone to incidents. The overall quality of transition was judged as "good".

Conclusions: Although patients judge quality of transitions as good, over half of them have recently experienced an incident. This study shows there is room for improvement in transitional patient safety, especially concerning timely and qualitative transfer of information.