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Transitional patient safety in The Netherlands: a qualitative study on patient participation

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Background and Aim: Patient participation has been recommended as an important way to improve patient safety. Despite numerous initiatives and developed tools to enhance patient participation, evidence of their effectiveness in improving patient safety is limited. When a patient transfers between primary care and hospital the patient has an increased risk of experiencing a transitional incident. The objective of this study was to explore patient participation in transitional patient safety from a both patients' and health care providers' perspective.

Methods: Qualitative template analysis was used for a purposive sample of thirteen semi-structured interviews with patients who transitioned between general practice and hospital. These findings were analyzed alongside data of focus group discussions with 98 health care providers, namely hospital staff of three hospitals and their referring general practitioners on the role of the patient in transitional patient safety.

Results: Both patients and health care providers voice the lack of sufficient knowledge in patients of how health care providers handle the transition of care. Patients varied in the need to participate, from none to extensively. Those who want to participate expressed difficulty in how to actually participate. Health care providers confirmed the extensive differences between patients and elaborated on approaches tailored to individual patients. Health care providers expressed the need for a more shared responsibility for safety, whereas the majority of patients feel health care providers bear sole responsibility.

Conclusion: The lack of both sufficient knowledge and insight of patients in the way health care providers handle the transition of care may impede patient participation to improve transitional patient safety. Improvement strategies should focus on the role of health care providers to engage the individual patient to participate, tailored to their needs and capacity. Interestingly, patients and health care providers seem to differ in their opinion on who is responsible for transitional patient safety.