

Barriers and Facilitators to Implementing the Information System for Post-discharge Information Transfer to Old Adult Patients from the Perspective of Healthcare Professionals: A Qualitative Study

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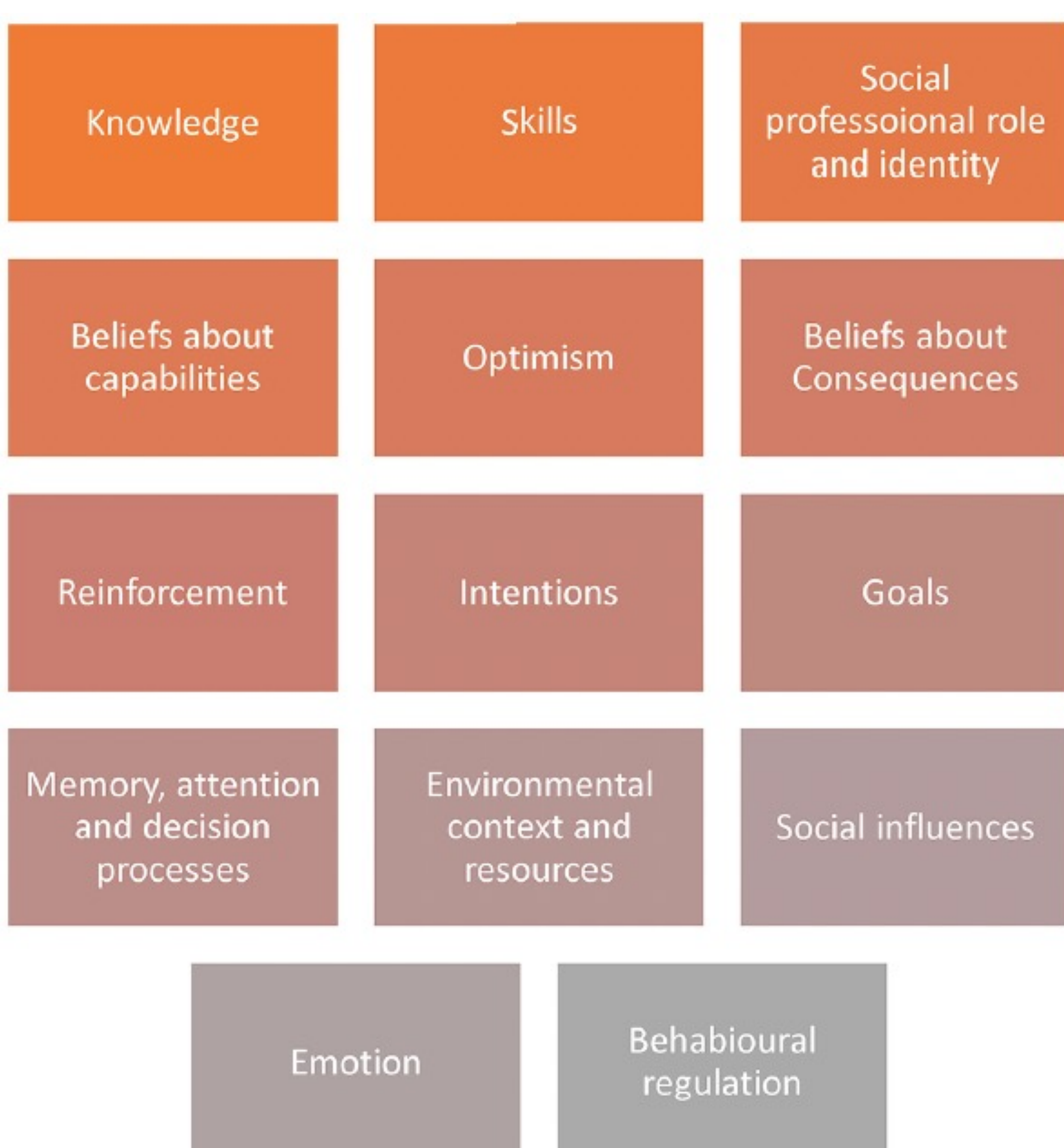


Introduction

Quality indicators specify that healthcare professionals (HCPs) should provide self-care information in the community, including expected and essential medication side effects, especially to old adult patients before discharge. However, many HCPs found difficulties when disseminating such kind of discharge information. Recently, a system of post-discharge information summary (PDIS) was developed and implemented locally in a public inpatient setting. This study aimed to explore barriers and facilitators from the perspective of healthcare professionals to the adoption of the PDIS and identify corresponding strategies to enhance the PDIS implementation in Hong Kong.

Methods

Individual semi-structured interviews were conducted with nurses, doctors, and pharmacists among four local public hospitals participating in the pilot program of PDIS. Telephone or face-to-face interview method was used. Theoretical Domains Framework (TDF) was applied for direct content analysis. Belief statements were generated by the thematic synthesis under each of the 14 TDF domains.



Theoretical Domains Framework.

Summary

In order to enhance behavior change for healthcare professionals (HCPs), person-environmental interactions, including physical and social factors, should be strengthened. Enhancing beliefs on the positive value of the program and ensuring the agreement on program responsibility could foster successful program implementation as well.

Results

A total of 98 participants were interviewed. Thirty-five themes subsumed with 52 beliefs across 14 TDF domains were generated.

• Major barriers and facilitators

| Barriers | Facilitators |
|---|---|
| <ul style="list-style-type: none"> • Features of the program • Communication among HCPs • Knowledge about the program objective • Lack of behavior regulation • Negative attitudes toward the value of the program | <ul style="list-style-type: none"> • Positive attitudes towards the value of the program • Agreement on the responsibility of the program • Diffusion of the program • Confidence on program implementation • having planning on implementation difficulties • knowledge about the responsibility • goal-setting |

Discussions

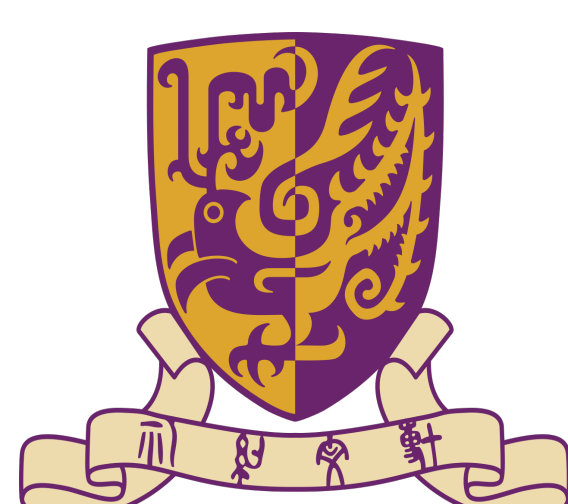
Several implementation strategies were proposed to address potential barriers and enhance facilitators

Possible strategies

- Produce and provide the PDIS program protocol to nurses
- Involve pharmacists in the practice of the PDIS program to support the explanation of medication side effects and warnings
- Inform nurses of the positive outcome of the PDIS program
- Provide visual demonstration on how to perform the explanation of medication side effects
- Periodic review and update of the most frequently used drugs in the geriatric and medicine department
- Inform nurses of the positive outcome of the PDIS program;
- Set up an evaluation mechanism to inspect the performance of implementing the PDIS program
- Use reminders such as a discharge procedure checklist to self-monitor the practice
- Hold informal departmental workshops to share experiences of implementing the program

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