

What do we know about the patient journey through the healthcare system after hospital discharge?

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Introduction

The transition of care from the hospital to the ambulatory setting is a **complex and high-risk period** for patients in terms of managing, understanding and adhering to medications.

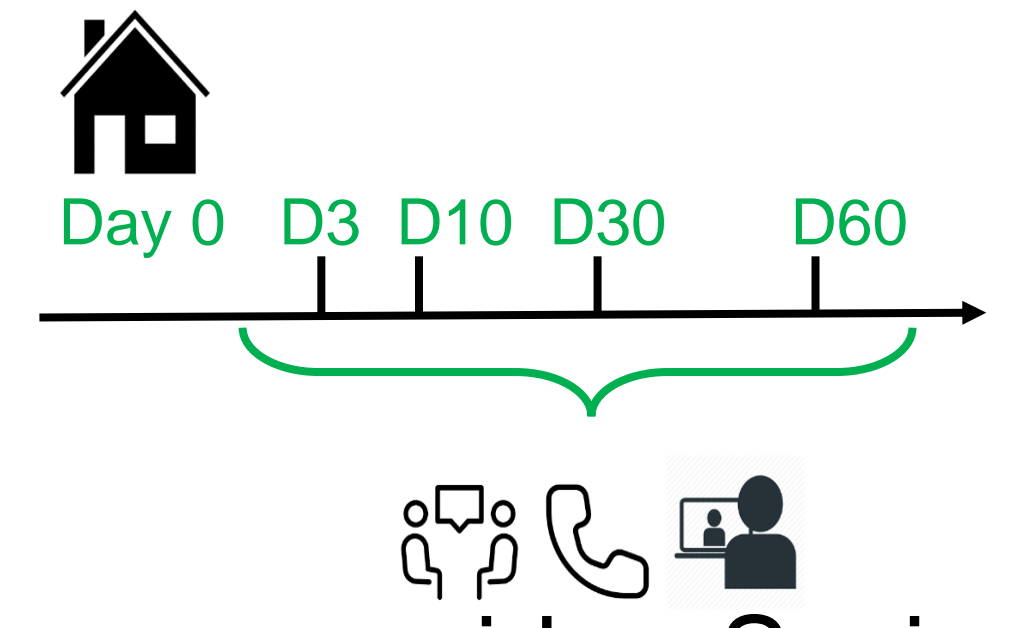
Interprofessional communication, care coordination and **partnership with patients** are key components for patient safety but there are weaknesses at the interfaces.

Aim
Describe **patients' itinerary through the healthcare system** from their hospitalization to two months **after discharge** and their experiences with healthcare professionals (HCPs) encountered during this period.

Methods

Qualitative longitudinal research approach: four individual semi-structured interviews over a period of 2 months after discharge

Inclusion criteria: Type 2 diabetic patients with at least 2 comorbidities and returning home after HUG discharge



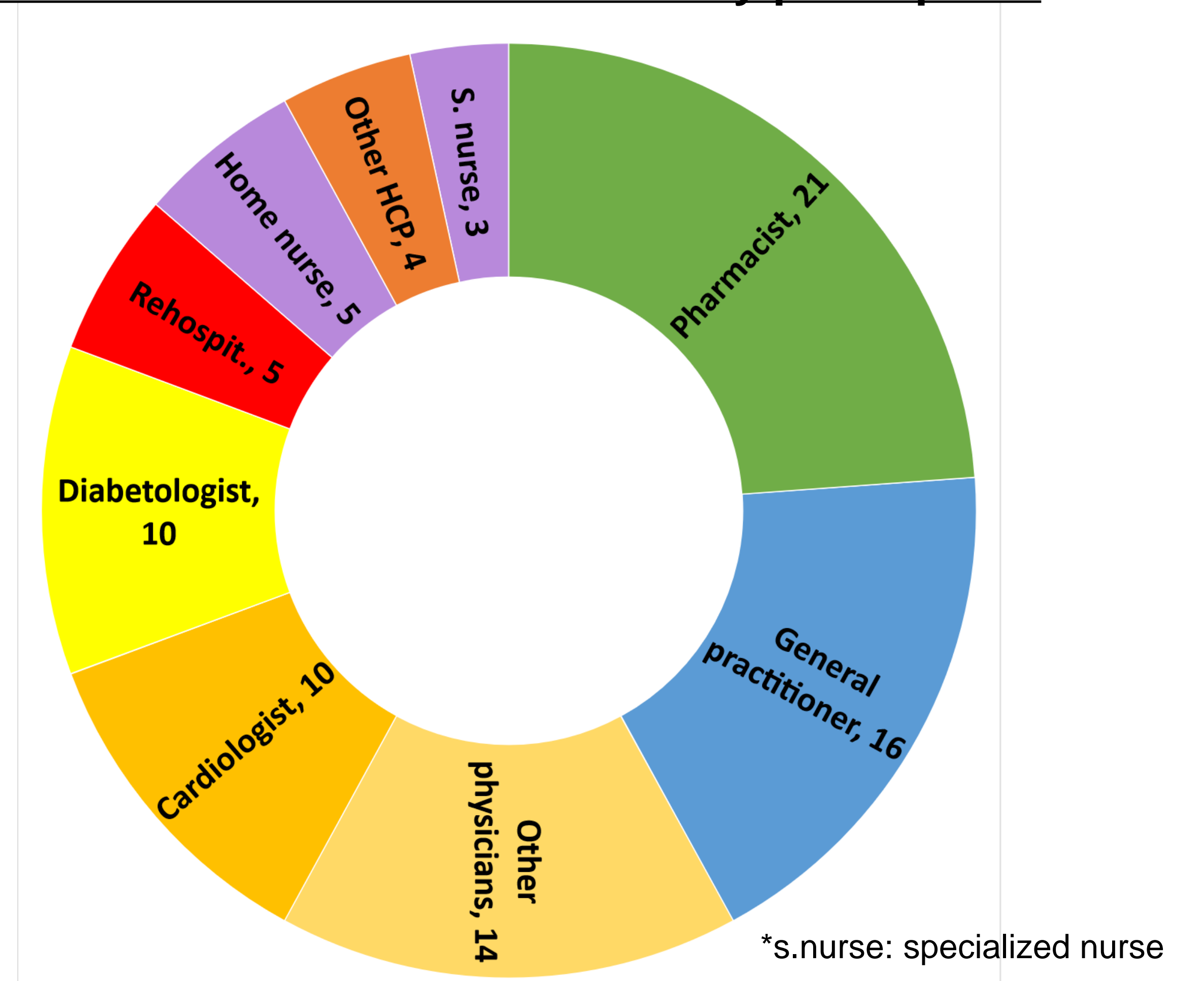
Data collection: Interviews were based on a guide. Socio-demographic data as well as information on HCPs encountered were also collected during interviews.

Data analysis: **thematic analysis** of transcripts with double coding until obtaining similar themes; descriptive statistical analysis of sociodemographic and clinical characteristics and HCPs encountered over time.

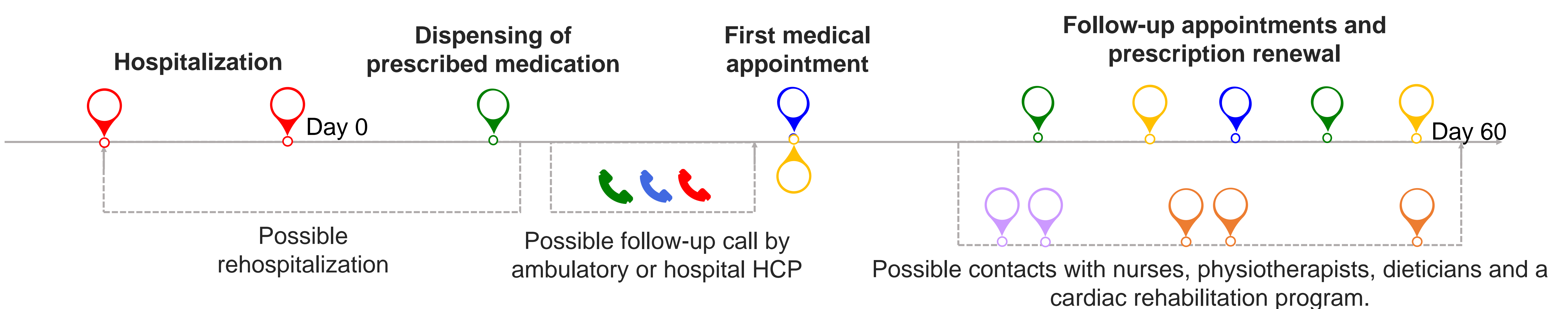
Results

N of participants	21
Age (mean)	65 yo (SD:9; min-max: 45-89)
Gender	12 men; 9 women
N of interviews	75
Duration per interview	41 minutes (SD:11)
N of healthcare professional encounter during study period per participant (median)	11 (min-max: 6-28)

HCPs encountered at least once by participants



Typical steps in the patients' journeys after discharge



Patients' perspectives on:

- Follow-up after discharge

I had dizziness... I called [the hospital physician] yesterday morning, because he told me that I could call at anytime.

There is no follow-up! Nobody called me from the hospital to see how I was doing...

- Trust in the care relationship

My GP is someone who works with the sensitivity of people. I find it good because there is really an exchange [between us].

They know me [...] at my pharmacy.[...] I feel like the staff is here to help. Their advice, their listening [are] great !

Conclusion

- **GP have a central role** for ensuring continuity of care and medication adaptation
- Other HCPs, such as **pharmacists**, are **easily accessible** to patients and contribute actively to ensure a safe medication use.
- **Interprofessional care coordination and collaboration**, which are known to reduce patient burden and ensure patient safety, must be designed and implemented at the interface and in the outpatient care setting.

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