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Understanding patient's experience on discharge medication information in three acute general hospitals

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Introduction

According to the three rounds of territory-wide Patient Experience Survey (PES) on inpatient service, a consistent low score was found on care aspects related to information dissemination on leaving hospital, particularly in those older patients. This study aims to further elicit detail patient experience in geriatric patients.

Objectives

To investigate the factors influencing geriatric patients' experience on discharge medication information in three selected acute general hospitals.

Methodology

A cross-sectional telephone survey was conducted in June to Dec 2017 involving 3 acute general hospitals from 3 Hospital Authority clusters respectively in Hong Kong that provided care for adult inpatients. The inclusion criteria were: Hong Kong citizens; aged ≥65; discharged live from acute medicine ward; having at least one overnight in the selected hospitals and be contacted within 2 weeks after discharge; and able give verbal consent.

Result

The survey successfully interviewed 643 patients and 317 carers with the overall response rate of 62%. Generally, majority of patients received information on the effect of medications (90%) and how to take medication (97%) but not on medication side effect (41%) and danger signals to watch for (42%). Medical information were generally given verbally by hospital staff (94%) than in a written or printed format (77%). Only a very small proportion of patients received both written and written information on medication side effects (Both: 12%; Verbal only: 68%; Written only: 20%) and danger signals to watch for (Both: 11%; Verbal only: 74%; Written only: 14%)

in hospital in which respondents preferred having both verbal and written/printed format as it was easier to understand on medication side-effects (Both: 95%; Verbal only: 72%; Written only: 74%) and danger signals (Both: 95%; Verbal only: 77%; Written only: 69%).

Conclusions. The findings demonstrated the patient experience related to their medication prescribed. More written information parallel with verbal explanation about the medication side-effects and danger signals to watch for would be useful for improving patient medication literacy and self-care after leaving hospital.