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# Electronic Actionable Patient Perspectives (eAPP)

Initiative Type

Service Improvement

Status

Deliver

Added

08 February 2020

Last updated

21 September 2021

URL

<https://clinicalexcellence.qld.gov.au/improvement-exchange/electronic-actionable-patient-perspectives-eapp>

## Summary

- a. Determining that healthcare providers better understand the patient perspective when using eAPP-enabled Patient Reporting Experience Measures (PREM) feedback
- b. Demonstrate opportunities to enable quality benchmarking
- c. Record patients' experiences over the entire care journey in the ieMR, benchmarking against

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accepted or targeted standards

d. Record and report variations in the experience of different patient subgroups

e. Provide relevant information to healthcare providers to enhance quality improvement programmes

f. Determining whether eAPP use identifies and rewards forward thinkers and early adopters in health services with opportunities to enhance service delivery and patient experience

### Key dates

Feb 2020

Feb 2020

### Implementation sites

Trial at Princess Alexandra Hospital with potential for statewide rollout based on tender (pending)

### Partnerships

The Clinician team, University of Auckland, patients and families at Auckland Hospital, Waikato Hospital and Princess Alexandra Hospital, eHealth Queensland and the Australian Digital Health Agency

## Key Contacts

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## **Aim**

The aim of this project was to deploy a software solution, Electronic Actionable Patient Perspectives (eAPP), which enables optimal patient outreach, collection and analysis of PREMs and then creates actionable information in the clinical setting.

## **Benefits**

Use available data or other evidence to outline some of the benefits or impact of the initiative.

## **Background**

The team wanted to demonstrate the applicability and scalability of PREM information across different clinical scenarios, organisations and geographical settings. The software solution (eAPP) enables optimal patient outreach, collection and analysis of PREMs and then creates actionable information in the clinical setting.

## **Solutions Implemented**

- Collection of real time data and analysis to trigger responsive actions, such as ready redesign of workflows responsive to patients and family needs.
- Engagement of the entire patient population vs sample patient populations, resulting in larger and more statistically significant data sets.
- Impact on individual patient care experience.
- Historically aggregated data has been used to support Continuous Quality Improvement (CQI) programs at a population level only. Improvement in clinical outcomes, overall quality and safety of care at similar or reduced costs, supporting value based care models.
- Ability to integrate with additional information systems to leverage full value of the data.
- Delivery of higher patient response rates vs legacy processes (15% vs 80%).
- Lower cost per patient response vs legacy processes.

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## Lessons Learnt

- Readiness of the organisation to manage and react to transparent data relating to quality and safety of care given by individual clinicians and care team members. Including change management activities driven by insights coming from the data.
- Reorganisation of internal processes which may result in change or reduced workforce. Additional digital platform within the hospital technology ecosystem and constant changes within eHealth as the system matured and was rolled out across wider teams.

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