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PROMs and PREMs for systematic quality improvement

>> Following the end of the traffic light government, the current legislative procedures in the area of healthcare are unlikely to end quite as easily as Health Minister Prof Dr Karl Lauterbach had imagined. This applies to the Healthcare Strengthening Act, the reform of emergency care, the Health Digital Agency Act, the Nursing Competence Act, a bureaucracy relief act announced for this autumn and the Healthy Heart Act.

This can be seen as a pity - and it certainly is to some extent - or as an opportunity. The reason is that all of the proposed laws are united by the fact that they were developed without the patients in mind. Certainly - and this can be charitably assumed - with the best of knowledge and conscience, but precisely out of a patriarchal attitude that sees the person or persons in question as the target of measures, but not as the relevant actors.

In the current and certainly necessary phase of reflection and reform, there is certainly the possibility of systematically integrating the voice, will and wishes of the patient community into the legislative process. You just have to want it.

Other EU countries, such as Denmark, the Netherlands and Switzerland, have been showing us how to do this for many years. And how the consistent involvement of patients in quality measurement on the one hand and in patient-centred care models on the other not only promotes transparency, but also gives their perspective a central role in healthcare. As structured patient feedback, PROMS and PREMS represent the decisive component of patient-centred and safe healthcare.

The instruments required for this have been around for a long time and are definitely being used, but have not yet been used systematically in this country: these are patient-reported outcome and experience measures (PROMs and PREMs), absolutely indispensable tools for consistently recording the quality of healthcare from the patient's perspective. PROMs focus on evaluating health outcomes from the patient's perspective, e.g. indication-specific criteria-based assessment of the healing process. In contrast, PREMS capture patients' experiences during their treatment, including aspects such as communication, waiting times and procedures that are directly linked to the quality of care experienced and patient satisfaction.

The importance of these two tools is steadily increasing in healthcare. The WHO emphasises the importance of strong political and organisational accountability to increase patient safety, while calling for active patient involvement. The introduction of indication-specific PROMS and standardised PREMS at national level is an essential step towards improving healthcare in a sustainable and systematic way. The timing for such measures is particularly favourable in the context of the hospital structural reform, as the planned changes are aimed at optimising patient care and improving safety anyway.

A central aspect is the establishment of regular surveys on PROMs beyond the oncological departments and study-relatedness and the regular surveys of PREMs throughout Germany. This should give the voice and experience of patients a firm place in the planning and evaluation of care.

In this context, it makes sense to use existing structures such as patient portals in hospitals and doctors' surgeries to provide patients with an easily accessible platform for their feedback. These portals could be used specifically to collect PROMs and PREMs, enabling continuous feedback on treatment processes and outcomes.

Health insurance companies can also make a valuable contribution by conducting standardised surveys of insured persons throughout Germany, covering PREMS in particular. This could also highlight regional differences in care and initiate targeted improvements.

One particularly important aspect is the feedback of the collected data to the service providers. By making the results of PROMS and PREMS available to healthcare professionals, they can gain valuable insights to reflect on their practices and make targeted improvements. This not only promotes learning from patients' experiences, but also makes a decisive contribution to improving patient safety.

The relevance of patient feedback for quality improvement is undisputed. It enables healthcare facilities to become aware of problems at an early stage and initiate targeted measures to optimise care. When patients share their experiences and results in real time, deficits can be recognised and rectified immediately. This feedback is a valuable resource for medical staff to receive real-time feedback and continuously work on patient safety and quality of care.

The KhaSiMir21 hospital study and the statement by the government hospital commission make it clear that patient safety must be considered the primary goal of hospital reform in particular. PROMS and PREMS are key instruments here, as they provide evidence-based insights into the reality of care. <<