

Project Title

Factors affecting patient enablement in an Asian setting: a mixed methods study

Project Lead and Members

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Organisation(s) Involved

National Healthcare Group Polyclinics; SingHealth Polyclinics

Project Period

Start date: Jan 2017

Completed date: Apr 2017

Aims

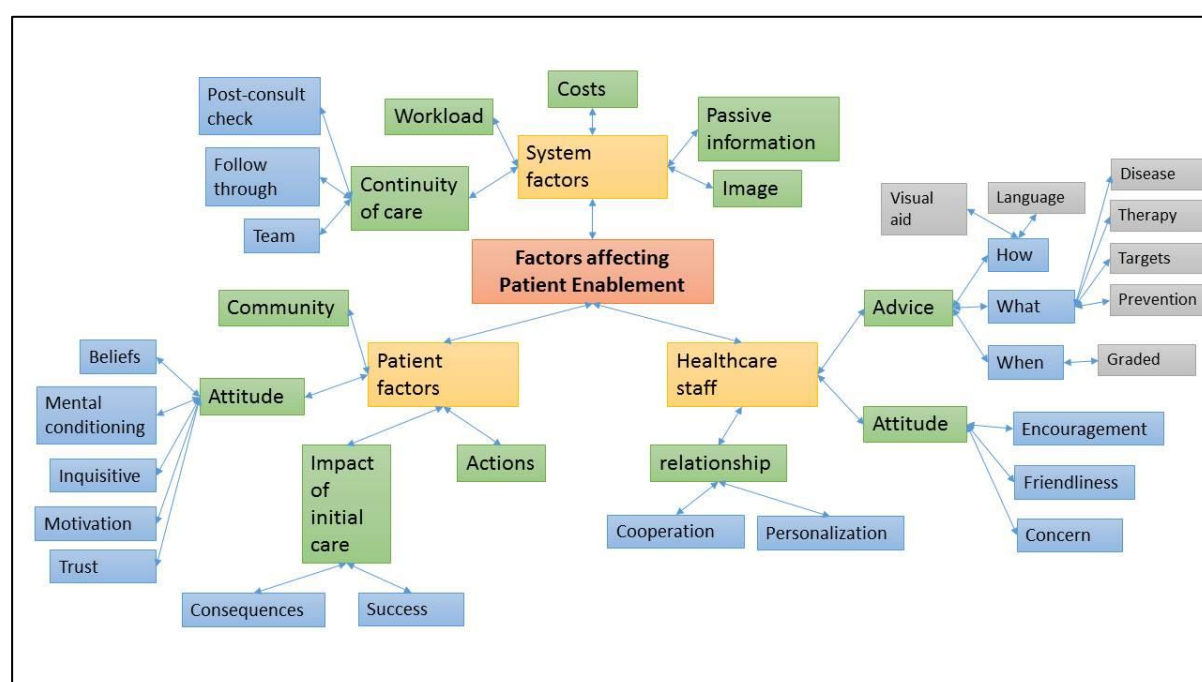
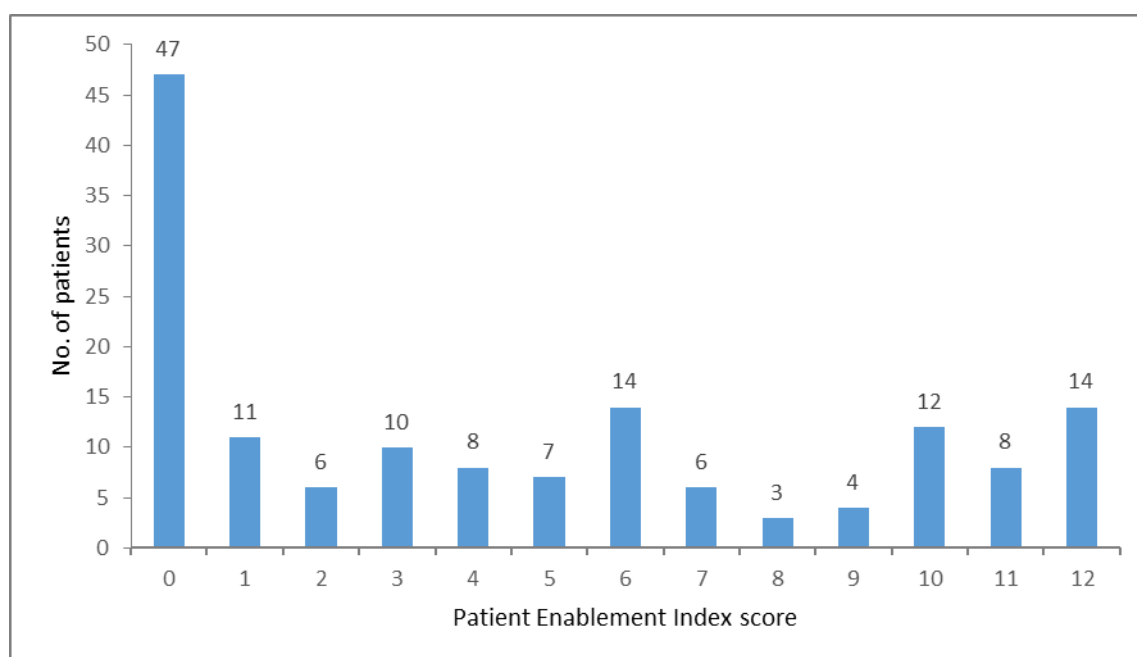
To investigate :

- a) how patients with chronic medical conditions rated enablement in a local context;
- b) the factors associated with patient enablement in the local context.

Box 1. Questions in Patient Enablement Instrument:

As a result of your visit to the doctor today, do you feel you are:

1. Able to cope with life?
2. Able to understand your illness?
3. Able to cope with your illness?
4. Able to keep yourself healthy?
5. Confident about your health?



Background

Patient-centred medical care has been rising in importance since the turn of the century. It entails treating patients in relation to their biopsychosocial outlook so as to support the management of their conditions. The extent to which a patient is enabled to acquire skills and knowledge can be measured with the Patient

Enablement Instrument (PEI) proposed by Howie and colleagues, and it has been noted to be more reflective of a good consultation compared to patient satisfaction scores. This study aimed to determine the level of patient enablement in the Singaporean context and the factors facilitating it.

Methods

We conducted an embedded mixed method study with primary care patients in two phases: (a) a PEI questionnaire was completed by 150 patients; and (b) a qualitative approach using focused group discussions and individual interviews was used to explore factors associated with high enablement.

Results

The mean PEI score was 4.5 ± 4.4 , with significantly higher scores among patients attending specialised primary care clinics. Important physician factors were doctors' advice, attitude and relationship with the patient. Critical system factors included good continuity of care, workload and financial support, while patient factors included their beliefs, preparedness, inquisitiveness and trust, with considerable impact from the influence of community.

Lessons Learnt

Patient enablement requires not just good advice about a patient's illness, but also a holistic management of the biopsychosocial factors affecting the patient and practitioner. Patient who score '0' may have had been on follow up for many years and would thus have fewer gaps in knowledge or understanding than patients who had been newly diagnosed and therefore, there would not be any net change in enablement for subsequent visits.

Conclusion

The PEI score in the Singaporean context is similar to that of other Asian contexts, but slightly higher than that reported in Western studies. Good doctor-patient

relationships, efficient systems facilitating continuity of care, and motivated and informed patients all contribute to increased enablement.

Project Category

Research

Keywords

Research, Mixed-Method Study, Primary Care, Patient Enablement, Continuity of Care, Systems Efficiency, National Healthcare Group Polyclinics, SingHealth Polyclinics, Doctor-Patient Relationship, Questionnaire, Focus Group Discussion, Interview

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Factors affecting Patient Enablement in an Asian Setting: A Mixed Methods Study

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Polyclinics
SingHealth

INTRODUCTION

- Patient Centered medical care involves enabling a patient to manage his condition.
- But due to poor information exchange¹, perceived lack of interest² and increased workload³ patients are often not enabled to manage their condition well.

What is Patient Enablement?

- assisting the patient to acquire or expand the means, abilities and opportunities to fulfil a role or complete a task, to a patient's perceived satisfaction⁴
- measured with the Patient Enablement Index (PEI).

勉勵病人自強評估量表
(Evaluation Table on Promoting Patients' Self-strengthening Practice)

看過這次醫生後，你感到……
(After this medical consultation, you feel:-)

(請於每行的其中一個空格內劃“X”號)
(Please check your answer for each statement)

	大為改善 (greatly improved)	有所改善 (slightly improved)	一樣或少了 (the same or less)	不適用 (not applicable)
a. 能夠面對生活 (able to face your life)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. 能夠了解自己的疾病 (able to understand your illness)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. 能夠面對自己的疾病 (able to live with your illness)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. 能夠保持自己身體健康 (able to maintain good health)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

大為增強
(greatly increased)

	大為增強 (greatly increased)	有所增強 (slightly increased)	一樣或少了 (the same or less)	不適用 (not applicable)
a. 對自己的健康有信心 (confident about your health)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. 擁有自助的能力 (able to self help)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Why should we enable patients more?

- Provides important attitudes and events for patients in their ability to understand their conditions as well as their confidence to carry out medical treatment⁵
- Promotes positive quality care outcomes such as asthma control⁶
- may be more reflective of a good consultation compared to Patient Satisfaction scores.

Gaps in knowledge

- Howie, the creator of the PEI, found a mean PEI score of 3.1 (95% CI: 3.1-3.1); in Scotland: mean PEI score of 3 while the median was even lower at 2⁷.
- In the Asian context, experience regarding patient enablement is more limited- India noted that 84.85% of the respondents felt they were able to cope with their illness⁸; Hong Kong found a mean PEI score of 4.65⁹

OBJECTIVES

1. investigate the PEI of patients with chronic medical conditions in an Asian context
2. investigate the factors associated with patient enablement in the Asian context.

METHODOLOGY

- Embedded Mixed method study with primary care patients.
- Medium-sized polyclinic in Singapore between January to April of 2017.
- Target population: patients who were on follow up with the polyclinic for at least one chronic medical condition

		Study Sample	Target population ^A
Age proportion of participants 30 years and above	30-64 years	56.7%	62.3%
	65 years and older	43.3%	37.6%
Gender profile	Males	58.7%	55.1%
	Females	41.3%	44.9%
Ethnic profile	Chinese	78%	68.8%
	Malay	12%	12.4%
	Indians	9.3%	9.5%
	Others	0.7%	9.3%

A: Statistics from Geylang Clinic Profile 2014

Percentage of chronic illness in 18 to 69 years	Study Sample
Hypertension	76%
Diabetes	46%
Hyperlipidaemia	77.3%
Ischemic heart disease	10%
Chronic kidney disease	10%
Stroke	4%
COPD	0.7%
Asthma	4.7%

Phase 1: quantitative approach

- 150 patients completed a two-part questionnaire consisting of socio-demographic information and the PEI

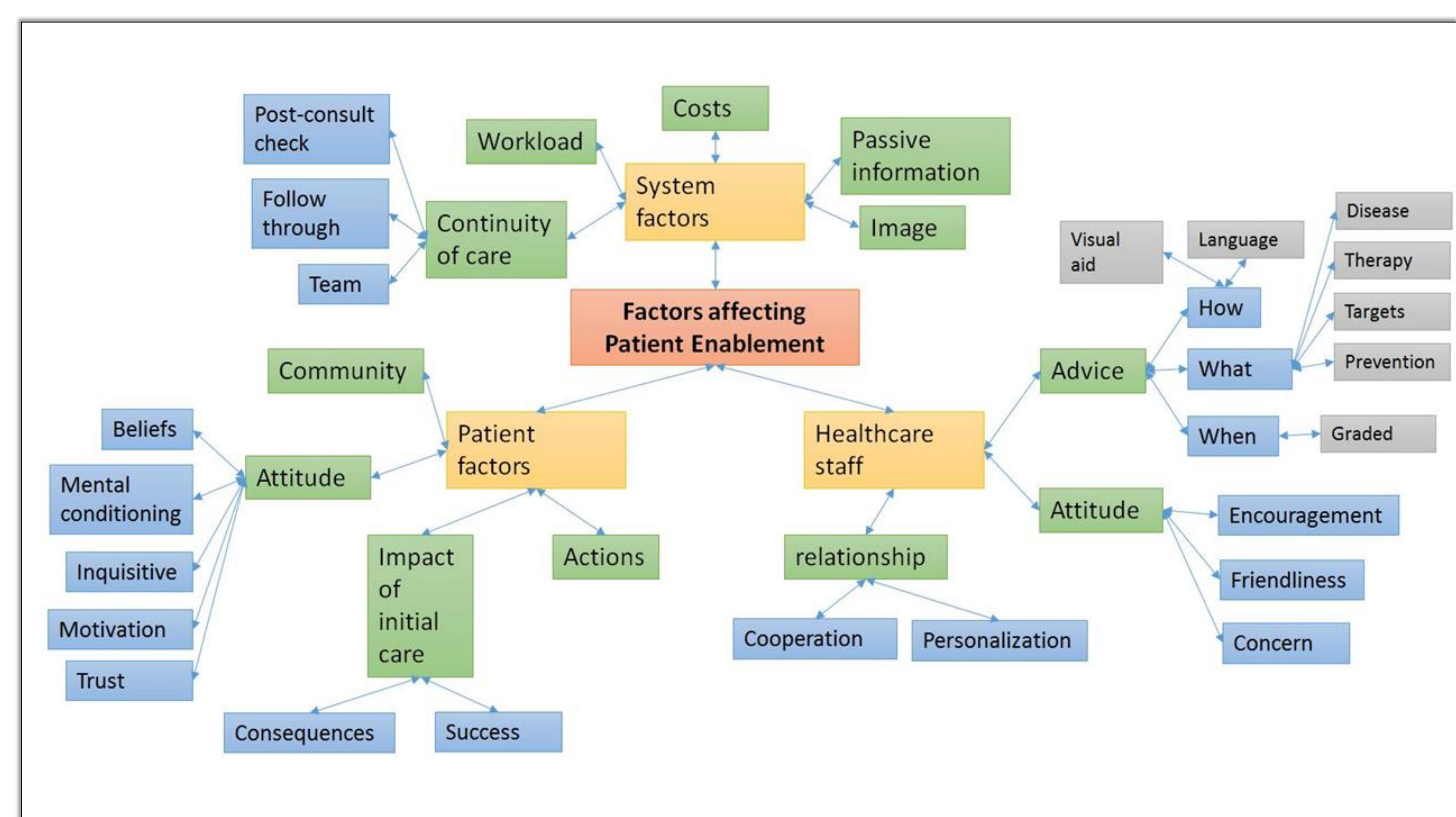
Phase 2: qualitative approach

- Focused Group Discussions (FGD)
 - Open-ended questions according to a pre-tested semi-structured topic guide; lasted on average 55 minutes.
- Individual Interview (IDI)
 - For patients unavailable for FGDs; took on average about 20 minutes.

RESULTS

- The Patient Enablement Index was found to be 4.5 (Standard Deviation 4.4)
- Significantly higher scores given by patients in specialized primary care clinics.

Clinic seen	Total (%)	PEI Score, Median (IQR)	p-value
General Clinic	127 (84.7)	3 (0-8)	0.05
Family Physician clinic	19 (12.7)	6 (2-11)	
Others	4 (2.7)	0.5 (0-4)	



CONCLUSIONS

This study has shown that the PEI score in the local context is similar to the Asian experience of patient enablement, and PEI scores are slightly higher than that recorded in Western studies.

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2. Dr Jonathan Ting Sing Shing and Geylang polyclinic team
3. SHP research team

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