Which notions are applied to describe the cooperation mechanisms between hospital sector and primary care? Analysis of terminology

Sabine Vogler¹, Nina Zimmermann², Claudia Habl³, Christine Leopold₁-², Katharina Habimama¹, Aukje Mantel–Teuwissem, Elfriede Dolinar³

¹ WHO Collaborating Centre for Pharmaceutical Pricing and Reimbursement Policies, Health Economics Department, Gesundheit Österreich GmbH / Geschäftsbezirk ÖBIG – Austrian Health Institute, Vienna, Austria
² WHO Collaborating Centre for Pharmacoeconomics and Pharmaceutical Policy Analysis, Utrecht University, Utrecht, the Netherlands
³ Retired Chief Hospital Pharmacist, General Vienna Hospital, Vienna, Austria

Background

Cooperation between the hospital sector and primary care (out-patient sector) in terms of medicines is addressed under different names. This hampers sharing and identifying existing practices and policies in this field.

Objective

To get a better understanding about the concept of medicines management at the interface of the hospital and the primary care sectors (hereafter called interface management).

Results

In English-speaking literature, the most commonly applied terms are seamless care, integrated care, comprehensive care, transmural care, transitional care and continuity of care for which, in most cases, generally accepted and repeatedly quoted definitions exist. A more recent terminology is “interface management”.

In many cases, specific projects such as hospital discharge programs are described without any explicit reference to overall concepts such as interface management or seamless care. Frequently, references on medication reconciliation and/or patient counseling were found in the literature search. These are tools to improve medicines management at the interface but they are not necessarily applied as specific interface management measures.

Discussion

There is a variety of terms used for describing the activities and the level of cooperation regarding medicines management at the interface of primary and hospital care. Clarity is limited. These variances complicate literature search. Evidence regarding existing practices to improve medicines management at the interface is thus difficult to interpret. In addition, the flawed terminology is a barrier to make a case for the need of interface management and to motivate health care providers, including hospital pharmacists, and policy makers to take appropriate action.

Conclusions

In English-speaking literature, the mechanisms of cooperation between the hospital sector and primary care are referred to under different names. The authors recommend including specific interface management measures as search terms for literature reviews on interface management since overall notions such as seamless care and interface management are likely to yield only a few results. Terminology work to increase clarity in this field is needed.

Methodology

Narrative literature review

Search strategy: Medline, EMBASE, GoogleScholar, Web of Science (ISI), supplemented by hand-search (snowballing) to detect grey literature; and contacts to policy makers, researchers and hospital pharmacists to identify further references.

Inclusion and exclusion criteria: Search terms included interface (management), seamless care, continuous care, transitional care, continuity in combination with medication, medicines, drugs, and pharmaceuticals. Interventions which did not address medicines were excluded.

Search period: 1990 to September 2012

Common terms frequently identified

Interface management


Seamless care

Definition: Seamless care is defined as the desirable continuity of care delivered to a patient in the health care system across the spectrum of care settings and environments. Pharmacy care is carried out without interruption such as when one pharmacist ceases to be responsible for the patient’s care, another pharmacist or health care professional accepts responsibility for the patient’s care. Source: Canadian Society of Hospital Pharmacists and Canadian Pharmacists (editors). Proceedings of the seamless care workshop. 1990. Ottawa.

Integrated care (comprehensive care, transmural care)


Continuity of care


Medication reconciliation

Definition: Medication reconciliation is a process of identifying the most accurate list of all medications a patient is taking — including name, dosage, frequency, and route — and using this list to provide correct medications for patients anywhere within the health care system. Reconciliation involves comparing the patient’s current list of medications against the physician’s admission, transfer, and/or discharge orders. Source: Institute for Healthcare Improvement. Medication reconciliation review. http://www.ihi.org/knowledge/Pages/Tools/MedicationReconciliationReview.aspx

Acknowledgements. This research was done in the framework of the Vienna’s WHO Collaborating Centre’s activities funded by the Austrian Federal Ministry of Health. No conflict of interest to declare.

Contact

Sabine Vogler, e-mail: sabine.vogler@goeg.at
http://www.ihi.org