

# Co-designing Interventions to Enhance Patient and Family Engagement in Medicines Management During Transitions of Care

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## BACKGROUND

Transitions of care are high-risk periods when medication errors are likely to occur. Existing research on medicines management across transitions of care primarily focuses on healthcare professional collaborative models to address these potential errors, however, the importance of engaging older patients ( $\geq 65$ ) and their family members in medicines management has been demonstrated.

Therefore, there is an evident need for effective strategies which are intended to improve engagement in medicines management. Through designing targeted strategies collaboratively with older patients and family members, it may be possible to improve engagement in medicines management and reduce unintended medication errors across transitions of care.

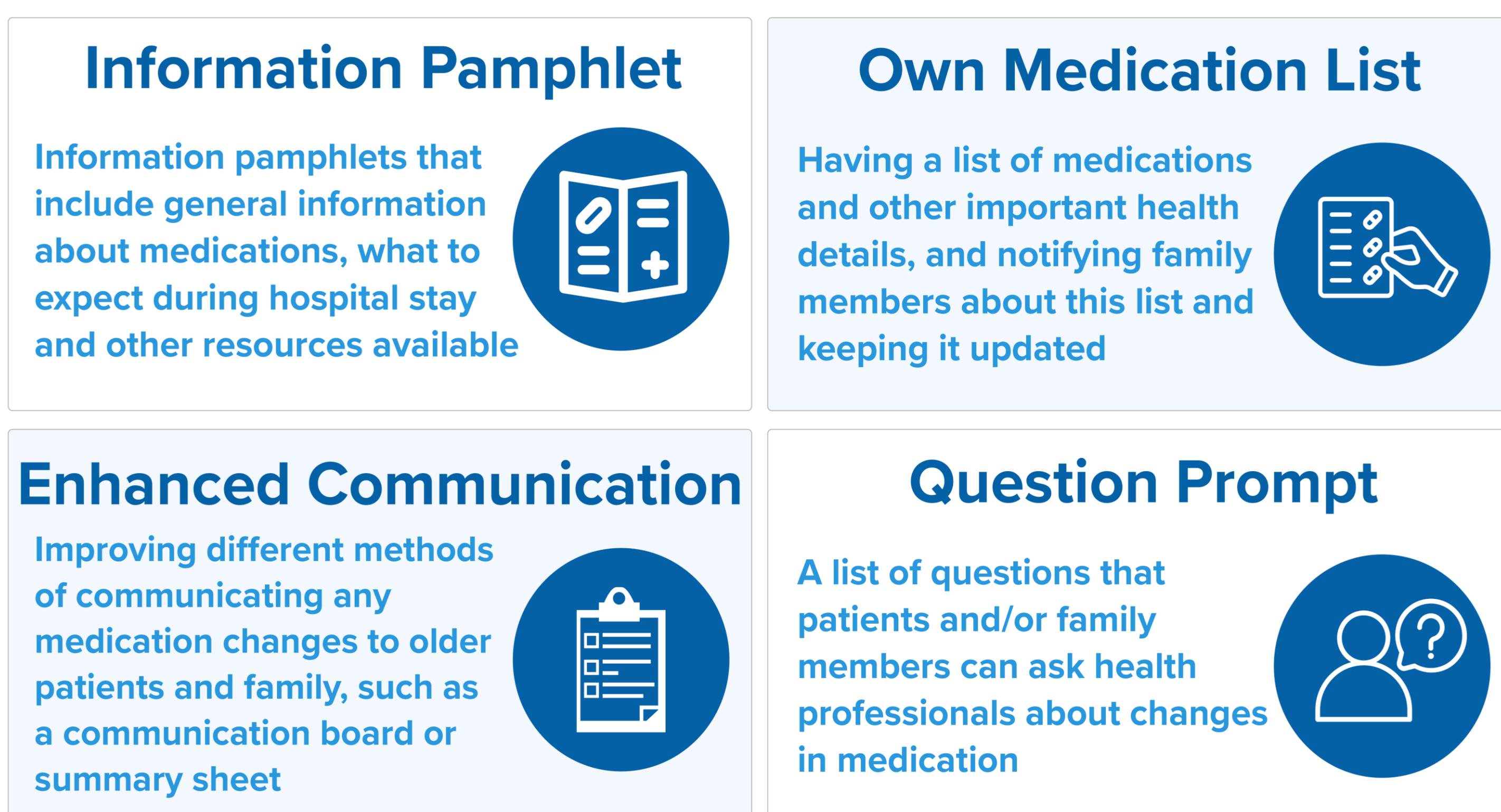
## AIM

To co-design potential strategies for improving older patient engagement in medicines management during transitions of care in hospitals.

## METHODS

Older adults, aged 65 or older, family members, and healthcare professionals, were recruited from a major metropolitan hospital service in Victoria, Australia.

Co-design workshops were conducted online via Zoom. Workshop facilitators presented four potential strategies which were identified from previous research involving interviews and focus groups and are outlined below.



Two activities adapted from the LUMA System of Innovation were utilised to further develop and refine these strategies. The *Creative Matrix* was used to brainstorm ways in which the strategies could be improved through asking participants 'Do you think this would be helpful?' and 'What should this look like?'

The *What's On Your Radar* method was used to conceptualise questions for inclusion in the question prompt strategy and categorizing the questions level of importance. Questions were placed on a bullseye diagram with the most important questions in the centre and less important questions further out.

Data captured during the workshop sessions were later analysed using content analysis.

## RESULTS

A total of 13 people participated across 3 co-design workshops, including 2 older patients, 4 family members, 2 doctors, 3 nurses, and 2 pharmacists.

Through the *Creative Matrix* participants identified that all of the presented strategies would be useful, with the information pamphlet and the question prompt being the preferred and most feasible strategies.

Written information in the patients preferred language and in a physical paper-based format was suggested, as electronic formats may be difficult for some patients. However, family members requested digital or app based access to information for future reference, in particular electronic and shareable medication lists.

Through the *What's On Your Radar* activity, information-seeking questions around medicine changes, dosage, side effects, and interactions were considered of primary importance to be included in the question prompt. The questions that were conceptualised in one of the workshops are shown below.

## What's On Your Radar?



## IMPLICATIONS FOR PRACTICE

It was evident from the co-design workshops that communication about medicine changes was a key concern for patients and family. Clear, concise and easily understandable information and resources that could enhance communication about medicines during transitions of care was found to be a viable strategy with potential to improve engagement in medicines management for older patients and family members.

Current research aims to further refine and test the feasibility of these co-designed strategies within the hospital setting.

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