Patient and Provider Perspectives on Reasons for Hospital Re-admissions
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Patients with chronic illnesses that require hospitalization, such as heart failure, often have difficulty managing their disease after discharge and are often readmitted to the hospital within a short period. Efforts to predict and reduce readmissions have not been tailored to the specific needs of patients most at risk for readmission. In this study, investigators will partner with patients, primary caregivers, and healthcare providers to obtain their perspectives on factors leading to readmission and on strategies to address those factors. The specific aims are: 1) to identify patient-centered factors using a suite of rigorous qualitative methods; 2) to measure the prevalence of these factors and determine if they help to predict, in a quantitative model, those at high risk of readmission; and 3) to obtain stakeholder input on how these patient-identified factors might be addressed in interventions to improve transitions of care. A combination of qualitative and quantitative methods will be used, sequentially, to accomplish these aims. First, "freelisting" interviews (a technique borrowed from anthropology), will be conducted with readmitted and recently discharged patients with congestive heart failure (CHF) at the Hospital of the University of Pennsylvania, as well as with their primary caregivers and care providers. Next, semi-structured interviews will be conducted with a second patient sample and the results will be used to develop a questionnaire that measures patient-centered constructs. This questionnaire then will be administered to a larger sample of patients with CHF in order to determine if adding patient-centered variables improves the predictive ability of an existing readmission risk model. In the final phase of the study, four focus groups consisting of patients and caregivers will be convened to discuss actionable interventions that address the identified patient-salient factors. The long-term objective of this work is to use study findings to design and test targeted and tailored transition of care interventions for CHF and other illnesses.

RELEVANCE
All aspects of this study are aligned with PCORI's mission to improve health outcomes by producing high integrity, evidence-based information from research guided by patients, caregivers and the broader health community. The philosophy underlying the aims and design of this study is that stakeholder perspectives are vital to understanding the complexities of managing CHF transitions from hospital to home; that they are meaningful and actionable; and that, when voiced and considered, they will result in more effective interventions and improved health outcomes. Study findings will provide a platform for future PCORI research and will advance its methodologies by: 1) furthering our understanding of the challenges faced by patients discharged from the hospital as described by patients and those that care for them; 2) establishing the feasibility and utility of novel interviewing methods with stakeholder groups; 3) determining the practicality of combining diverse stakeholder perspectives in constructing a patient interview tool; 4) determining whether the prediction of individuals at high risk for readmission can be improved by including patient- and caregiver-identified factors, and 5) identifying the benefits and challenges to involving stakeholders in efforts to develop interventional strategies. We hope that these efforts will lead to new paradigms and approaches to patient-centered research.