

Relation Between Outpatient and Inpatient Portal Use



A new study analyses the impact of outpatient portal use on how patients use an inpatient portal depending on their previous experience and the overall ability to use technology for health management.

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The use of patient portals depends on multiple factors including how individuals perceive the technology based on their skills and experiences. A group of researchers conducted a large-scale, pragmatic, randomised controlled trial across six noncancer hospitals at a large academic medical centre to explore the patterns in the use of outpatient and inpatient portals by patients between September 2016 and August 2019 (Fareed et al. 2021).

The 1,571-strong user sample was divided in three categories: prior users — those experienced in use of an outpatient portal before using an inpatient portal during hospitalisation, new users — those using an outpatient portal only after using an inpatient portal; and nonusers — those who used an inpatient portal but not an outpatient portal. The authors studied users' preferences across various specific portal functions such as Dining on Demand, Messages, Notes, I Would Like, Access MyChart, etc., and identified whether users were comprehensive (using eight or more portal functions) or composite (comprehensive users initiating the majority of sessions).

The findings show that compared with prior users, new users engaged more with specific inpatient portal functions, e.g. messaging and access to outpatient portal, while nonusers overall used inpatient portal less including specific functions and were less likely to be either comprehensive or composite users.

Other key findings include:

- Dining on Demand and Happening Soon were the inpatient portal functions most popular with users; I Would Like and Notes the least popular.
- Tutorial, Messages and Access My Chart were used more by new users than by prior users. Also, new users had higher numbers of sessions compared with prior users.
- The prior user group mostly included older, female and white users.
- Other factors may influence the use of patient portals, such as levels of patient activation, health literacy, or general digital skills, which in turn depend on factors like household income or education level.
- New and prior users were similarly likely to be composite or comprehensive users.
- In the enrolment admission, new users showed high level of engagement with all active functions, particularly the Happening Soon and Dining on Demand functions, but this association decreased from up to three admissions.

While acknowledging some limitations to their study, the authors conclude that promoting awareness of patient portals and their functions may contribute to smooth care provision and patient engagement. They also point out that understanding the relation between the use of outpatient and inpatient portals may improve the overall uptake of these services by patients.

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