

Perspectives of patients and healthcare professionals on a tailored implementation of the standard set of generic PROMs in Dutch medical specialist care. A mixed method study.

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INTRODUCTION

Patient Reported Outcome Measures (PROMs) contribute to the dialogue and shared decision making between patient and healthcare professionals (HPs). The utilisation of various PROMs in patient care, along with the challenges associated with collecting and comparing data from these instruments, prompted the development of a standard set of generic PROMs (G-PROM) in the Netherlands. This study aimed to 1) **assess feasibility and satisfaction on the G-PROM** from patients' perspective, and 2) **assess acceptability, adoption, feasibility, satisfaction, and sustainability of the use of the G-PROM** from the HPs perspective.

METHOD

An explanatory mixed methods design was used. The G-PROM was implemented in two outpatient clinics in a Dutch University Medical Centre. Evaluation questionnaires were distributed to both patients and HPs. Semi-structured interviews and a focus group were conducted with HPs to provide deeper insights into the quantitative data.

RESULTS

In total 79 patients and 11 HPs were enrolled. The intention of the G-PROMs was not always clear for patients. The response options available do not always align with their current situation and an **open text field** allowing them to provide clarification is desired. The G-PROM was not consistently discussed in the clinical setting, a preference that was expressed by patients. HPs perceived the G-PROM as acceptable and feasible. Overall, they embraced the utilization of the G-PROM. The interviews showed that HPs primarily **seek connection to direct clinical practice**, thereby expressing a desire for condition-specific PROMs to be added to, or substituted for, the G-PROM.

STANDARD SET OF GENERIC PROMs

The Dutch program Outcome-Based Healthcare initiated efforts to enhance the supportive role of measuring health outcomes in the healthcare process and shared decision-making. With a multidisciplinary group of all the umbrella organizations involved in medical specialist and the Ministry of Health, welfare and sports, a consensus-based G-PROM was published. This set supports uniformity, and standardisation in collecting generic Patient Reported Outcomes (PROs). The G-PROM is a set of 27 questions regarding various PROs and has a more holistic approach. This set, which includes PROMIS-short forms expands upon previous initiatives like the Linnean menu of generic PROMs and the ICHOM Overall Adult Health set. The process involved carefully choosing a set of generic PROs that apply to all conditions and prioritizing cost-efficiency and clarity.



DISCUSSION

The G-PROM provide sufficient insight into the patient's situation, however both parties suggested some improvements. Most of the patients experienced ambiguity regarding the G-PROM' intention. Overall, they were satisfied with the G-PROM (average score 7) and said it **represents their health situation well**. Unfortunately, the G-PROM was not consistently discussed in clinical consultations, contrary to patients' preferences. HPs found the skills training and supportive tools, such as the **PROM summary** in the electronic health record, to be **beneficial**. HPs exhibit **ambivalence regarding the standalone value of the G-PROM** but recognize its added value when combined with condition-specific PROMs. It is evident that both HPs and patients still need to acclimate to the utilization of PROMs in healthcare practice.

CONCLUSION

The use of the G-PROM can be of added value during the consultation according to patients and HPs. Future implementations should **focus on behavioural change** and providing support, particularly for groups that require extra attention.

RECOMMENDATIONS

1/ **Healthcare professionals should receive on-the-job support**

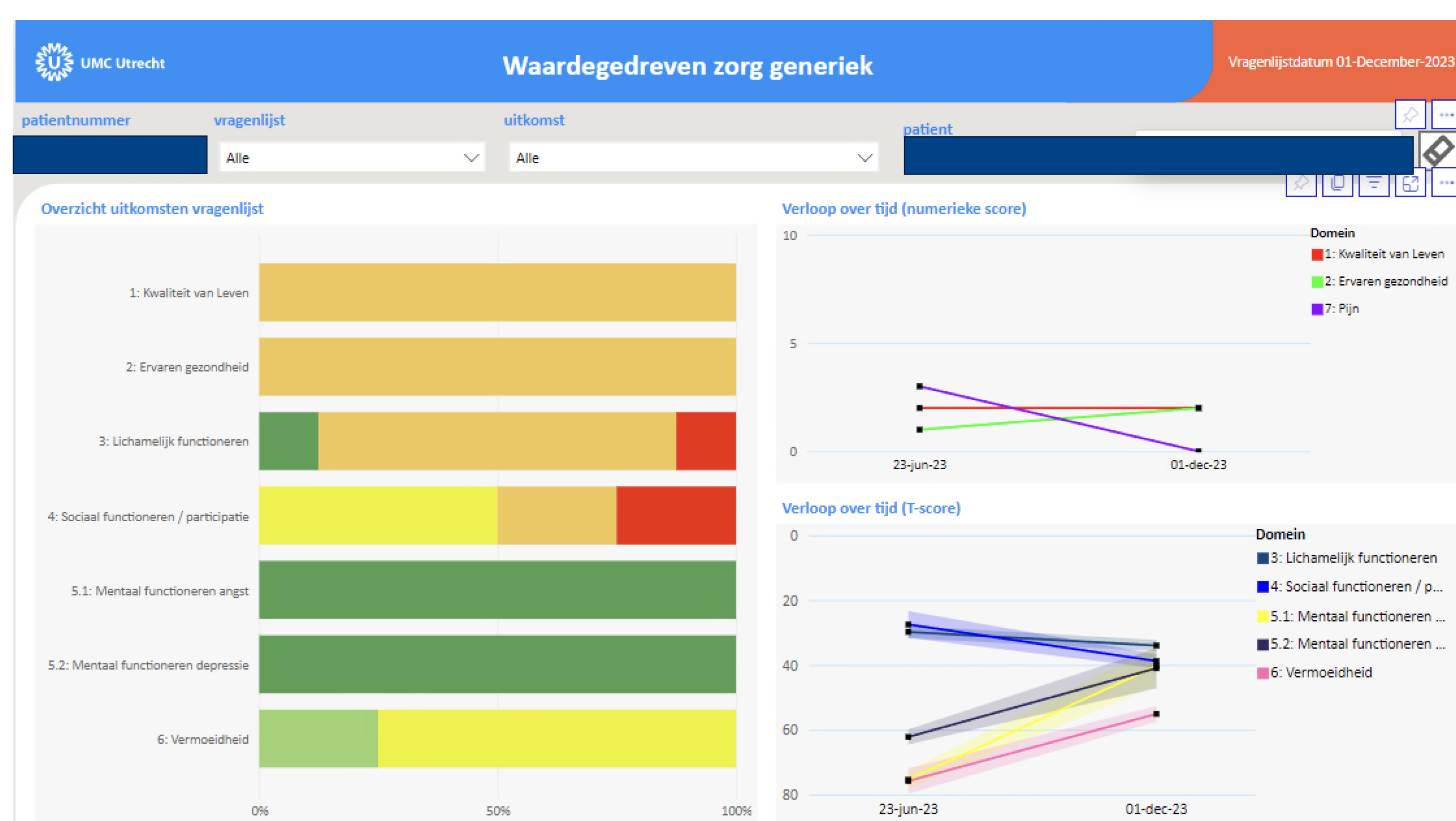
This should take place especially in the beginning phase, as it supplements current practice. Summarizing the results of the PROMs and reminding HPs when patients complete questionnaires can be helpful.

2/ **Make sure healthcare professionals can establish a routine**

Establish a broader deployment of the G-PROM and/or condition-specific PROMs, possibly by selecting specific outpatient clinics where all patients or HPs are included, to establish routine in using PROMs during consultations.

3/ **Involve patients and professionals in the dashboard development**

To create a concise and supportive dashboard, it's vital to obtain the perspectives of both groups. Through this process, the eventual users of the dashboard reach a consensus, gaining new insights by combining multiple viewpoints that may not have been clear separate.



REFERENCES

