

Patient Rated Outcome Measures. Informing patients and tailoring care: the next step...(PROMs 2.0)

a. Strap line

The next step from the present National PROMS collection, we propose a system for collecting, analysing, and publishing of outcome data for defined procedures which empower patients to determine their after-care, improve quality and cut waste.

b. Summary

The PROMs 2.0 innovation solution delivers validated outcome measures to patients and clinicians about their surgery, in a form they can understand. This new, multi-format patient communication system liberates patient rated outcome measures (PROMs) from distant, academic research applications to give patients accurate and relevant information about their progress following a procedure. This information is used to target individuals who need to be reviewed in clinic and reduces unnecessary clinic attendances.

c. What is the issue?

Capturing outcome data is a fundamental step in advancing the quality and benefits of surgical care. Collecting this information over the whole UK population with different technological abilities and cultural diversity is a formidable challenge. Even if this were achieved, it is difficult for a patient to gain insight into their improvement by the process of answering a list of questions without reference to how they were before the treatment or how they compare to similar patients.

Patients attend review clinic appointments following a surgical procedure. Many of these patients will be progressing well and improving as anticipated. Patients may feel that they are doing well and that extra clinic appointments add no value to their care but require some reassurance that they are improving as expected.

Can we give patients clear information about their progress and offer them choice regarding their post-surgical care?

d. The Innovation Solution

PROMs 2.0 is a platform independent interoperable software application, developed by clinicians in collaboration with Bluespier International, developer of clinical information systems. Clinicians customise the system according to their individual practice. Patients listed for surgery are entered onto the secure database and a set of pre and post-op PROM assessments are generated. Automatic e-mail links are sent or phone calls made to each patient at pre-determined time points. Patients can compare their current, previous and pre-op scores and can see the average scores is for their specific procedure.

This information is also available to the treating clinician in the office or in clinic. A letter is automatically created with the outcome information and sent to the patients GP. Where a patient's score is satisfactory, they are reassured about good progress and can choose to avoid an

unnecessary clinic visit. However, if they wish to be seen, this is organised as usual. Where a score is not satisfactory, the patient is informed of the result and a review clinic appointment is arranged to check for any problems.

The system captures data about the quality of the intervention and also allows comparison of results between various groups i.e. clinicians, providers, subgroup of patients etc.

Partnerships and Delivery Team

This project has been developed in partnership with Bluespier clinical information systems, Trafford Healthcare NHS Trust, clinical staff and patient representatives. The initial scope of the project involved eight Acute Trusts – this was modified due to funding constraints. The next phase of the project is to involve more organisations.

e. Key Benefits

This system combines broad access with adaptability and automation to improve clarity and communication with patients and to focus resources where clinical need exists. This system can gather outcome data via e-mail, phone, and mail or directly in clinic and therefore can be used with patients of all levels of communication and technical ability. The software can be adapted to use any PROMs and activate at any specified time points for any procedure. Once patient details are entered, assessments and GP documents are automatically generated, reducing the burden of administration. Patients and clinicians get a clear measure of quality of intervention, complementing their post surgical care and adding value to the service. In addition, unnecessary clinic visits can be avoided.

The other major aspect of this innovation is in the fact that it allows real time comparative analysis of the quality of intervention based on organisation, clinician, specific patient groups etc.

f. Funding/Return on Investment/Savings

A health innovation grant of £20,000 from the SHA has enabled the software development with Bluespier. The automated system uses the only free resource in the NHS, the patient, to measure quality of interventions. Cost savings and increased productivity is facilitated by the reduced number of patients returning to outpatient clinics for unnecessary review appointments.

g. Potential to Scale and Strategy for Sustainability

The PROMs 2.0 project carries truly huge potential. This system can be applied to every specialty across the whole NHS. There is even potential for this system to be adopted in other countries, as outcome measurement is essential in healthcare worldwide. We estimate that post-procedure follow up appointments will be reduced by one third, *by only seeing patients who need to be seen*. These savings can not only absorb the costs of running the system, but result in significant savings.

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