

MAKING A SWEDISH PROMIS: A NEEDS ASSESSMENT

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National Quality Registries

National Quality Registries are initiated and led by healthcare professionals

Contain individualised data on symptoms, interventions and outcomes.

Vision

Build an over-all knowledge system that is actively used on all levels for continuous learning, quality improvement and management of all healthcare services.



- Bipolar Affective Disorder ADHD Treatment Follow-up
- Amputation and Prostheses
- Ankle Arthroplasty Assisted Reproductive Technology
- · Atrial Fibrillation and Anticoagulation
- · Behavioural and Psychological Symptoms of
- Dementia
- Better Management of Patients with Osteoarthritis Bladder Cancer
- Brain Tumours
- Breast Cancer
- Breast Implants
- · Cardiopulmonary Resuscitation
- · Caries and Periodontitis
- Cataracts
- Catheter Ablation
- Cervical Cancer Prevention
- Child and Adolescent Habilitat
- Child & Adolescent Psychiatry Child Preventative Health
- Childhood Cancer
- Childhood Epilepsy
- Childhood Obesity
- Cleft Lip and Palate
- Colorectal Cancer Treatment.
- Congenital Heart Disease
- · Congenital Metabolic Diseases
- Corneal Transplant
- Cruciate Ligament Injuries
- Cystic Fibrosis
- Dementia
- Dependency
- Diabetes
- Ear, Nose and Throat Care
- Eating Disorders
- Electroconvulsive Therapy
- Endovascular Treatment of Ischemic Stroke
- Enhancement and Development of Evidence-Based Care in Heart Disease

- Follow-up of Persons with Cerebral Palsy
- Forensic Psychiatry Fractures
- Gallstone Surgery & Endoscopic Retrograde Cholangiopan-creatography
- Gender Dysphoria
- Gynaecological Oncology
- · Gynaecological Surgery
- Haemophilia • Hand Surgery
- Head and Neck Cancer
- Heart Failure

Many areas of healthcare: common & rare conditions; nursing and primary to tertiary care.

- Iviacuia
- Malignant Melanoma
- · Mammography Screening
- Neonatal Care
- Neurological Care (NEUROreg)
- Neuromuscular Diseases
- Obesity Surgery
- Oesophageal and Stomach Cancer
- · Paediatric Kidney Disease
- Paediatric Orthopaedic Conditions
- · Paediatric Rheumatology
- Pain Rehabilitation
- Palliative Care

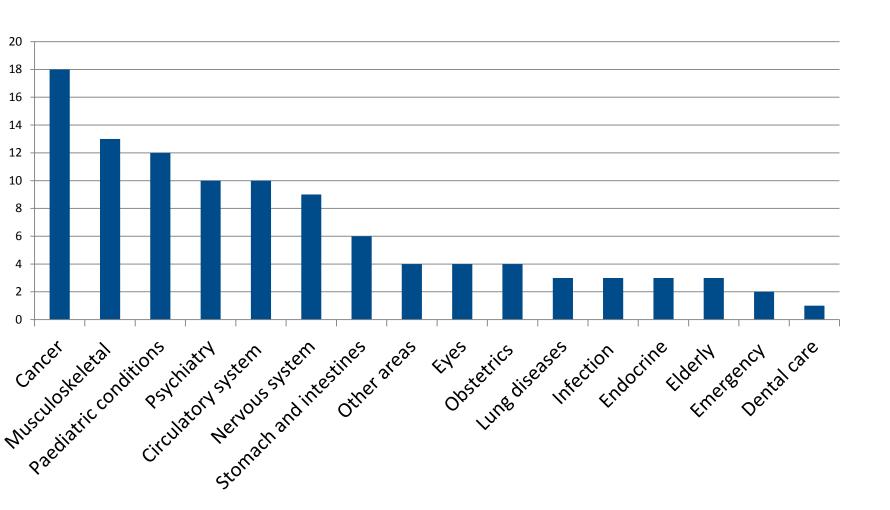
- Pancreatic Cancer
- Penile Cancer Perioperative Care (SPOR)
- Pituitary Disease
- · Podiatric Surgery
- Pregnancy
- Preventative Care
- Primary Immunodeficiency Prostate Cancer
- · Psychiatric Care Monitoring
- · Psychosis Care
- · Pulmonary Arterial Hypertension • Rehabilitation for Visual Impairment
- Rehabilitation Medicine
- Renal Failure
- Respiratory Diseases
- Respiratory Failure Rheumatic Diseases
- School Health Services
- Shoulder and Elbow Arthroplasty
- Sleep Apnoea
- Spinal Dysraphism & Hydrocephalus
- Spine Surgery
- Stroke
- Systemic Psoriasis Treatment
- Testicular Cancer
- Thyroid Cancer
- Thyroid, Parathyroid and Adrenal Surgery
- Trauma
- Ulcer Treatment
- Vascular Surgery

108 NQRs





Number of NQRs in different healthcare categories





Organization

6 regional competence centres.

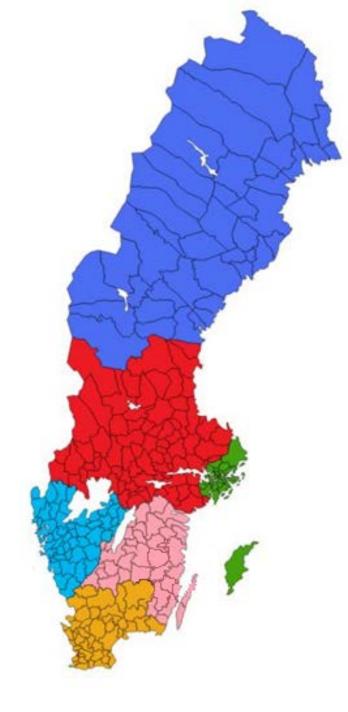
- promotes the development of new registries
- create synergistic effects by providing a service to and facilitating collaboration between registries.
- 60% of the NQRs have ≥80% coverage of their target population



REGISTERCENTRUM SYDOST





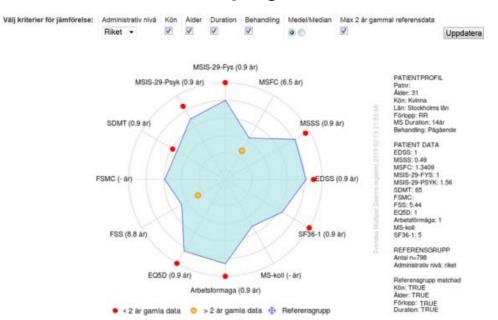




Pediatric Diabetes

Two types of reporting

Presentation to physician



Figur 13. Klinikens medel-HbA1c (mmol/mol) Örnsköldsvik Average HbA1c, by Växiö Uddevalla Uppsala Department Kalmar Linköping Karlskrona Göteborg Kristianstad Norrköping Lidköping Kungsbacka Västeräs Helsingborg Borås Östersund Eskilstuna Sundsvall Hudiksvall Riket Örebro Skövde Jönköping Malmö ALB Lund Ängelholm Gävle Falun Ystad Karlstad Huddinge Umeå Trollhättan Luleä Västervik Sachsska Sollefteå Nyköping Halmstad Gällivare Skellefteå 🚾 Visby 🖵 55 70

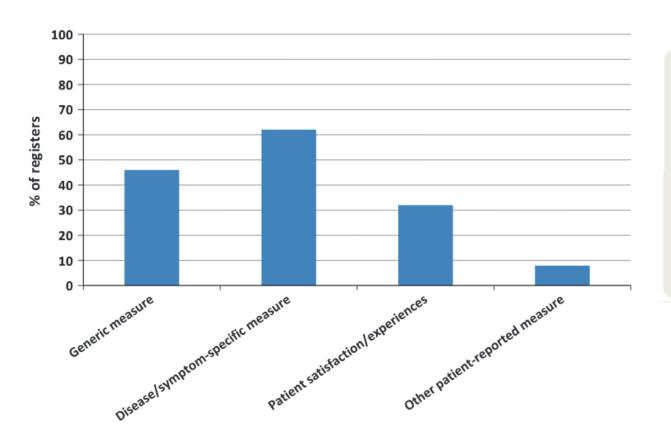




Patient-reported outcomes in the Swedish National Quality Registers

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Library of Questionnaires

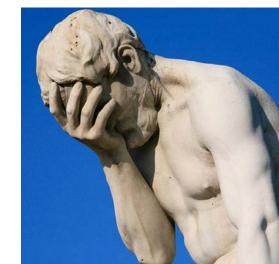
- EQ-5D
- HAQ
- Kidscreen
- Diabkids
- ESS
- MSIS-29

- PDQ8
- BASDAI
- TSQ
- FSMS
- NMS
- MPOC



Problems

- Not all Registries are using PROMs
- PROs are not documented as thoroughly as traditional medical outcomes.









Why is there limited take up of PROMs in NQRs?

Educational issues

- Limited understanding of PROMs
- Unfamiliar with how this data is used
- PROMs are not valued by clinicians

Supply issues

- Lack of instruments (or lack of translated instruments)
- Alternatively: too many instruments to choose from.

Administrative issues

- Unwillingness to burden patient with many questions.
- Requires additional resources / costs







The action taken by the Swedish Health Service

- 1) Certification funding is based on quality in these 5 areas!
- (i) Completeness target population.
- (ii) Coverage healthcare units.
- (iii) Validity reflects the real world of patients and healthcare (includes PROM).
- (iv) Promptness /speed of data collection.
- (v) Comparability across clinics /other NQRs







2) Swedish item-banking project

- Translation and linguistic validation.
- Establishment of a network of active users and researchers working with item banks in general.
- Workshops and seminars to inform and identify potential future users and stakeholders.
- Creation of a secure national data collection methodology.

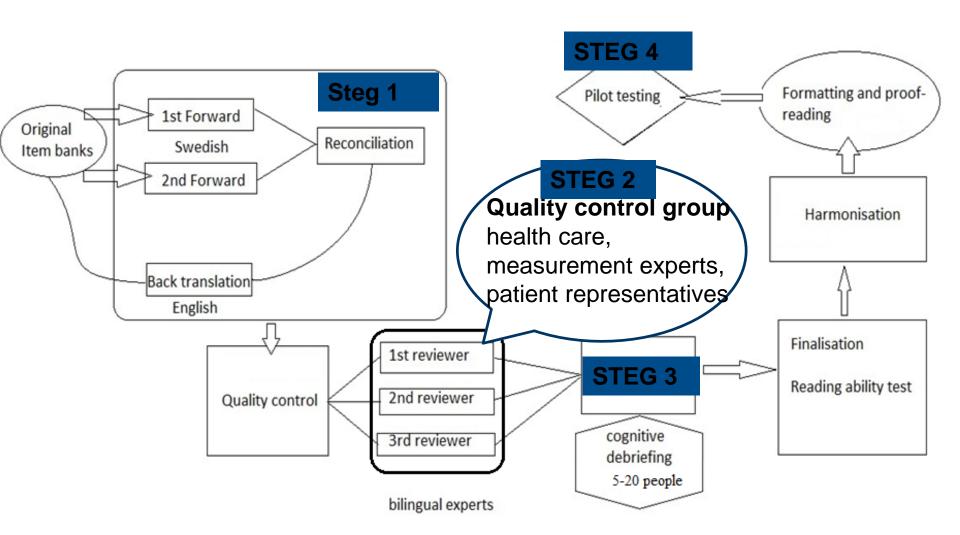


Swedish translation process



REGISTER CENTRUM SYDOST





10,000 metres for adult measures









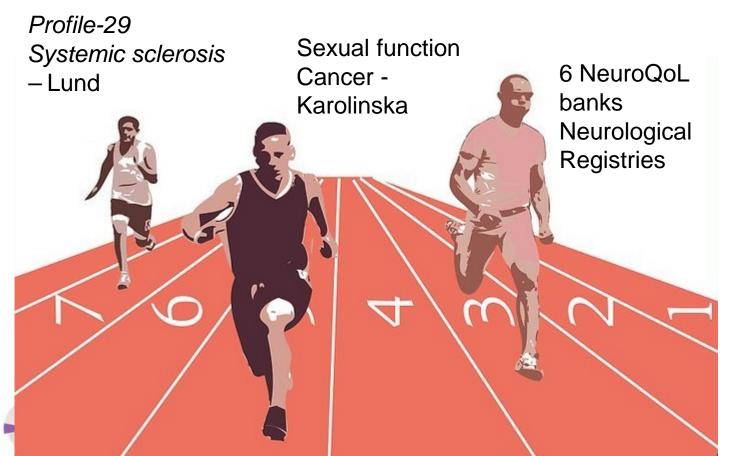
Global-10 Orthopaedics - St Göran's,

Global-10
Breast
cancer
- Huddinge,

Outstanding adult item banks - Karolinska

Fatigue short form-7 Polio,

- Skåne,



Profile-57 Norway



3000m Steeplechase for child measures







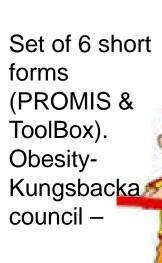
asthma

- Örebro

Profile-25
Healthy population
- Gothenburg

Profile-25
Pediatric
Orthopedic
4 item banks

Profile-25 Norway



NATIO Kunskap för Profile-25
Diabetes clinic
– Stockholm

All remaining pediatric item banks
Karolinska
Institute & Child cancer registry





We work with:

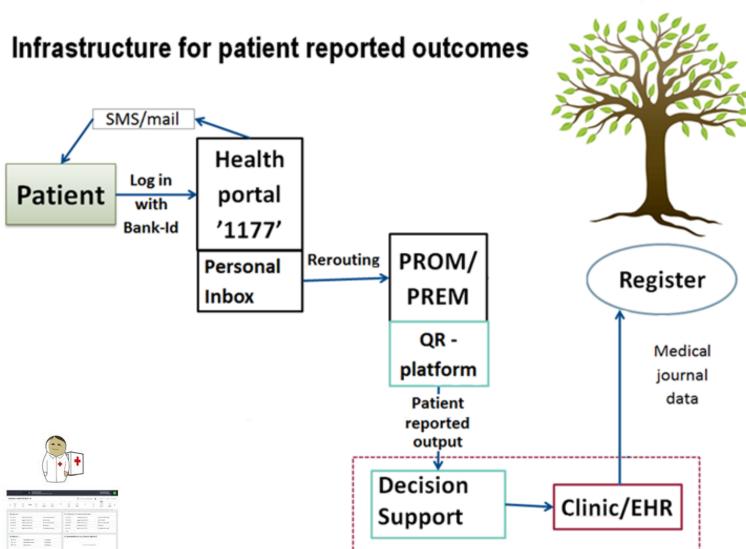
- Range of different conditions
- Registries, hospital, schools
- PROMIS, NeuroQoL, ToolBox
- Language specific reference scores in the general population



The technical solution











Survey maker

Patient overview



Data as support for medical decision















Conclusions / lessons learnt so far

- Involve multiple stakeholders at different levels in the early formulation of the approach in order to build a sense of ownership.
- Limit the administrative burden
- Ensure data quality and the use of standards
- Demonstrate how to use the data for improvement (health care and individual patients)
- Create a trust environment for building and maintaining registries
- Increase transparency to drive forward quality
- Encourage open access for research







Questions?

- How do we integrate item banking into decision making?
- Who should initiate the data collection doctor or patient?
- How should we present the results to the doctor & patient?
- How do we share the results with other professionals?
- How do we train the people who administer the tests?
- How do we obtain PRO data from very young patients?
- How do we ensure the quality of the items/banks?

