

Adaptive tests for long-term conditions



Supporting patient-centred care for patients
with long term conditions

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- Multimorbidity.
- Undetected psychosocial issues.
- Assessment using PROMs increases involvement.
- PROMs suffer from barriers to implementation.
- Computer adaptive testing (CAT) may help overcome barriers to the implementation of PROMs in primary care.

Qual Life Res (2008) 17:179–193
DOI 10.1007/s11136-007-9295-0

The impact of measuring patient-reported outcomes in clinical practice: a systematic review of the literature

J. M. Valderas · A. Kotzeva · M. Espallargues · G. Guyatt · C. E. Ferrans ·
M. Y. Halyard · D. A. Revicki · T. Symonds · A. Parada · J. Alonso

- 28 Studies reviewed
- 50% of studies in mental health
- Compared PROM use with feedback to no feedback
- 67% of studies showed impact on processes
- 47% of studies showed impact on outcomes

Routine use of patient reported outcome measures (PROMs) for improving treatment of common mental health disorders in adults (Review)

Kendrick T, El-Gohary M, Stuart B, Gilbody S, Churchill R, Aiken L, Bhattacharya A, Gimson A, Brütt AL, de Jong K, Moore M

- 17 studies
- No evidence for improvement in symptoms
- High risk of bias
- Short follow-up

Using Feedback From Patient-Reported Outcome Measures in Mental Health Services: A Scoping Study and Typology

Christian U. Krägeloh, Ph.D., Karol J. Czuba, M.Phty., D. Rex Billington, Ph.D., Paula Kersten, Ph.D., Richard J. Siegert, Ph.D.

- Studies with formalised feedback *did* show a significant effect of clinical PROM use.
- Feedback should be given in a formalised and structured manner.



THE COCHRANE
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**Routine provision of information on patient-reported
outcome measures to healthcare providers and patients in
clinical practice (Protocol)**

Gonçalves Bradley DC, Gibbons C, Ricci-Cabello I, Bobrovitz NJH, Gibbons EJ, Kotzeva A,
Alonso J, Fitzpatrick R, Bower P, van der Wees PJ, Rajmil L, Roberts NW, Taylor RS,
Greenhalgh J, Porter I, Valderas JM

Updated review due 2017

What do patients think?

- PROMS for Depression in primary care in the UK.
- Patients favoured the PROMS.
- They saw them as an efficient and structured supplement to medical judgement.
- They saw them as evidence that clinicians were taking their problems seriously through full assessment.

BMJ

RESEARCH

Patients' and doctors' views on depression severity questionnaires incentivised in UK quality and outcomes framework: qualitative study

Christopher Dowrick, professor of primary medical care,¹ Geraldine M Leydon, senior research fellow,² Anita McBride, research fellow,² Amanda Howe, professor of primary care,³ Hana Burgess, academic foundation trainee,² Pamela Clarke, research assistant,¹ Sue Maisey, research associate,³ Tony Kendrick, professor of primary medical care²

What seems to work

- Specific PROM training
 - Frequent and timely feedback
 - Feedback processes well aligned with practice
 - Information integrated into available systems
 - Information that is linked to specific clinical action
-
- Interventions with a formal, structured, feedback process perform better (Krageloh, 2014).

But...

Implementation rates are

LOW

Overcome barriers

- Make measurement more accurate
- Make measurement more efficient
- Engage patients and clinicians with instant feedback
- Align feedback more closely with care

Computer adaptive testing

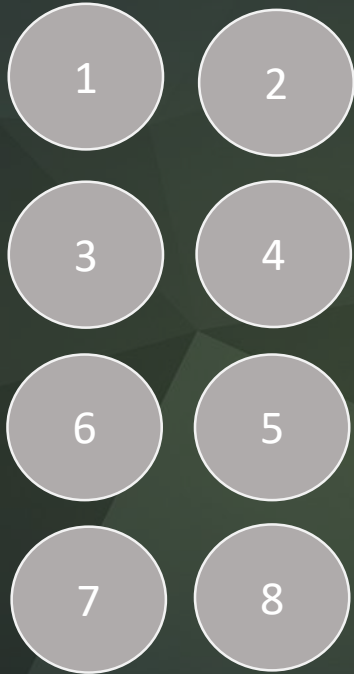
Computer system which uses algorithms to match participants with the most relevant questions for them.

Assessments which use IRT and CAT are shorter, better targeted, and thus more reliable than paper-based tests.



Computer adaptive testing_

Item bank



Computer
adaptive test

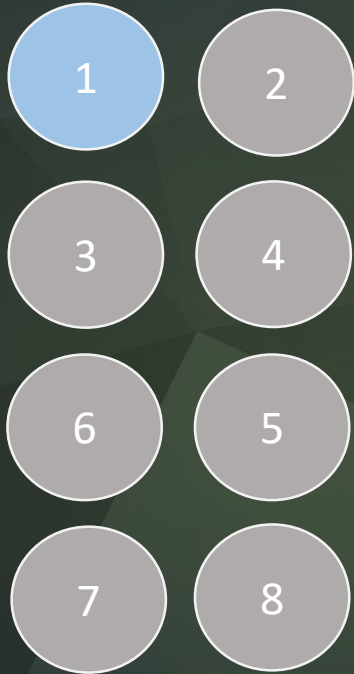


Patient/
participant



Computer adaptive testing_

Item bank



Computer
adaptive test

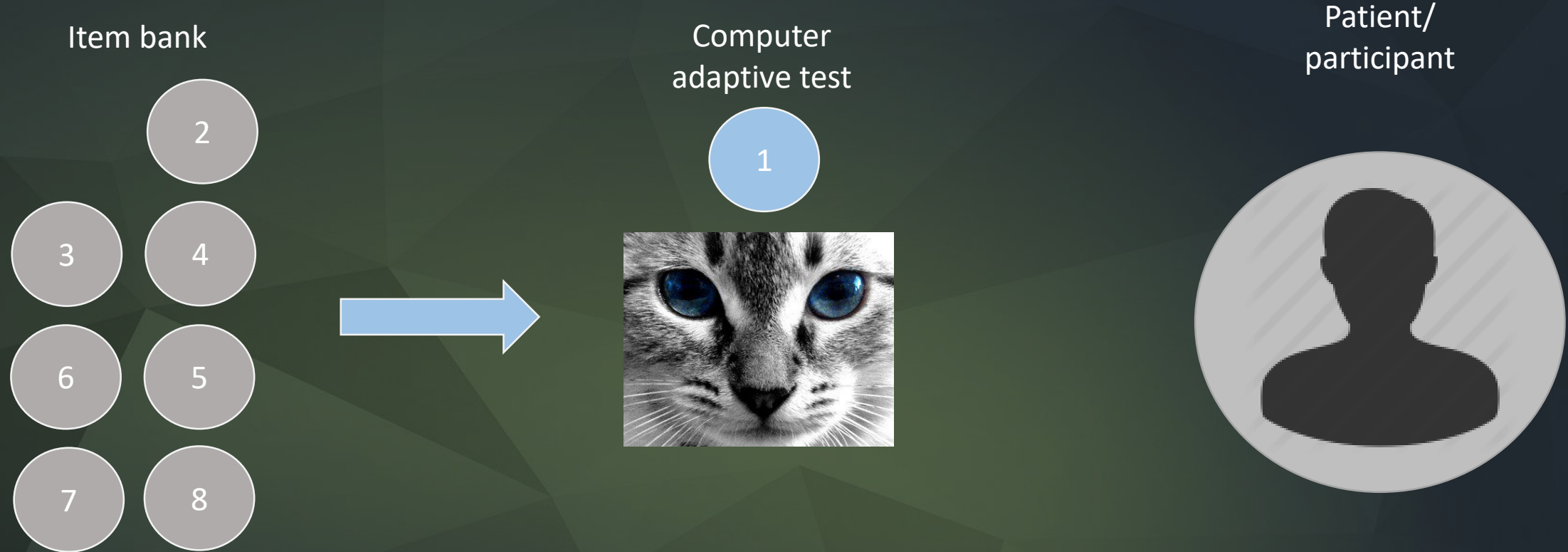


Best item

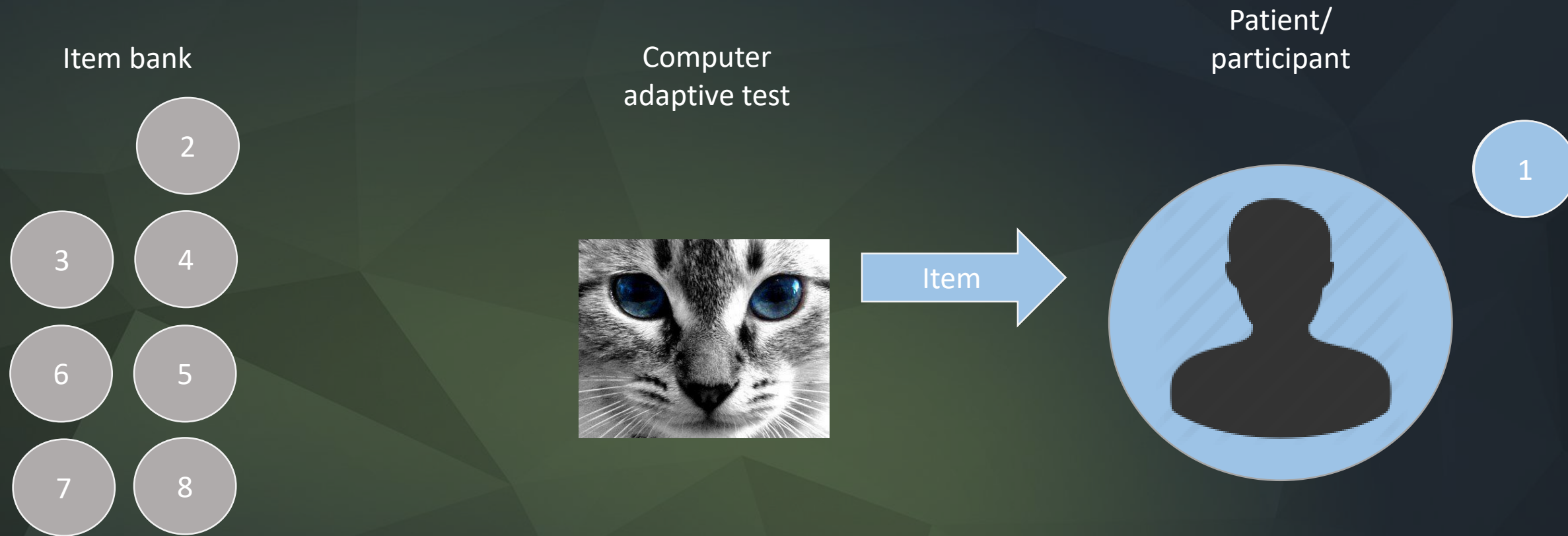
Patient/
participant



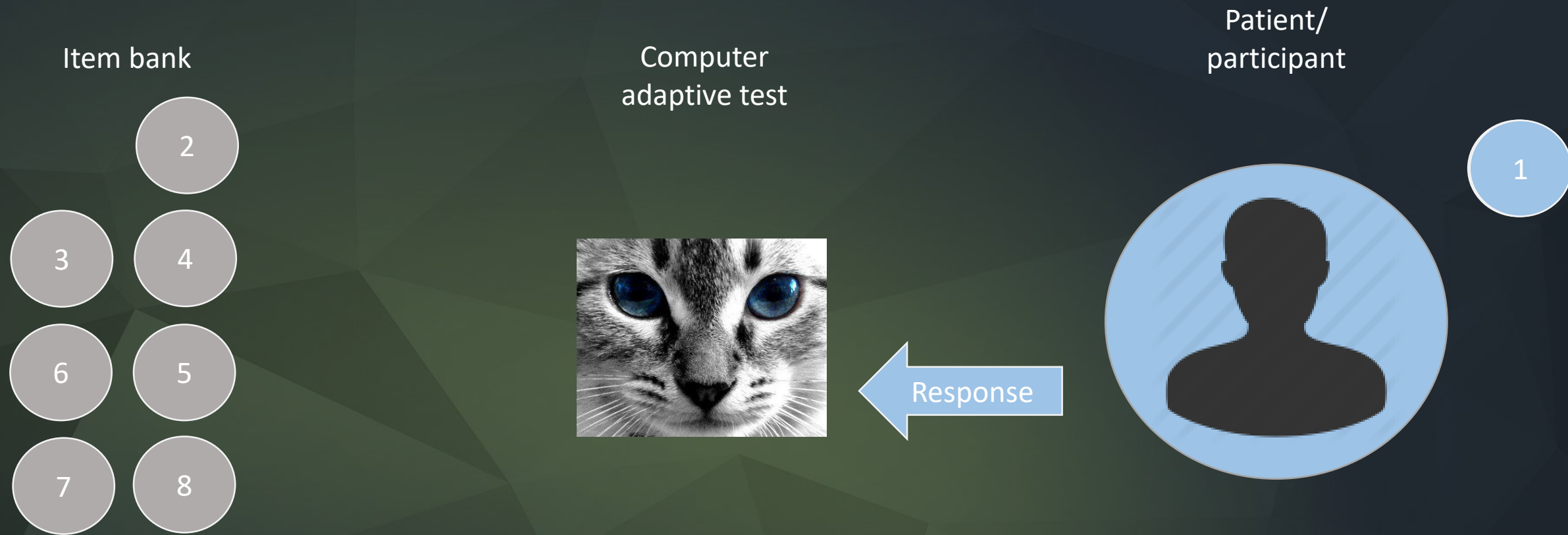
Computer adaptive testing_



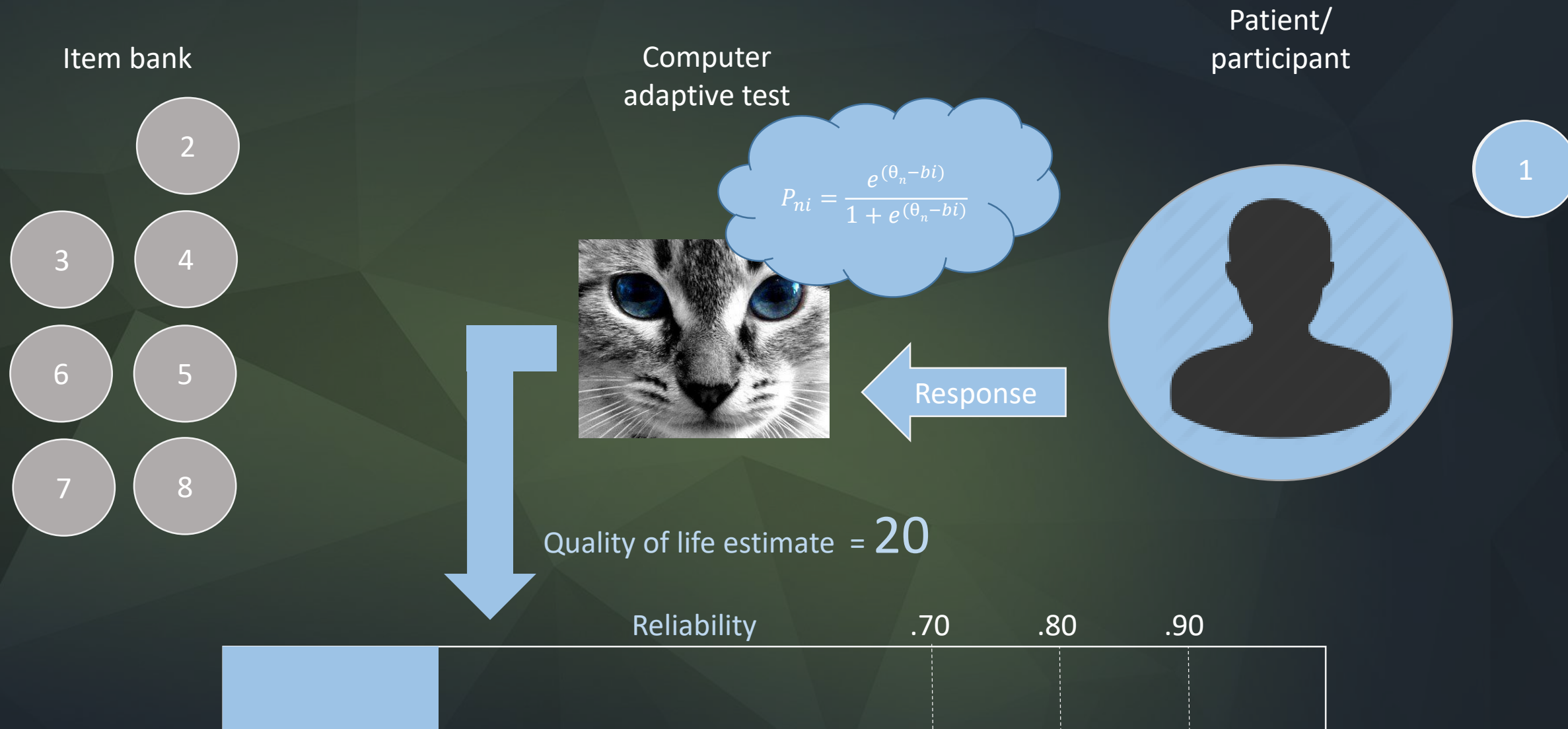
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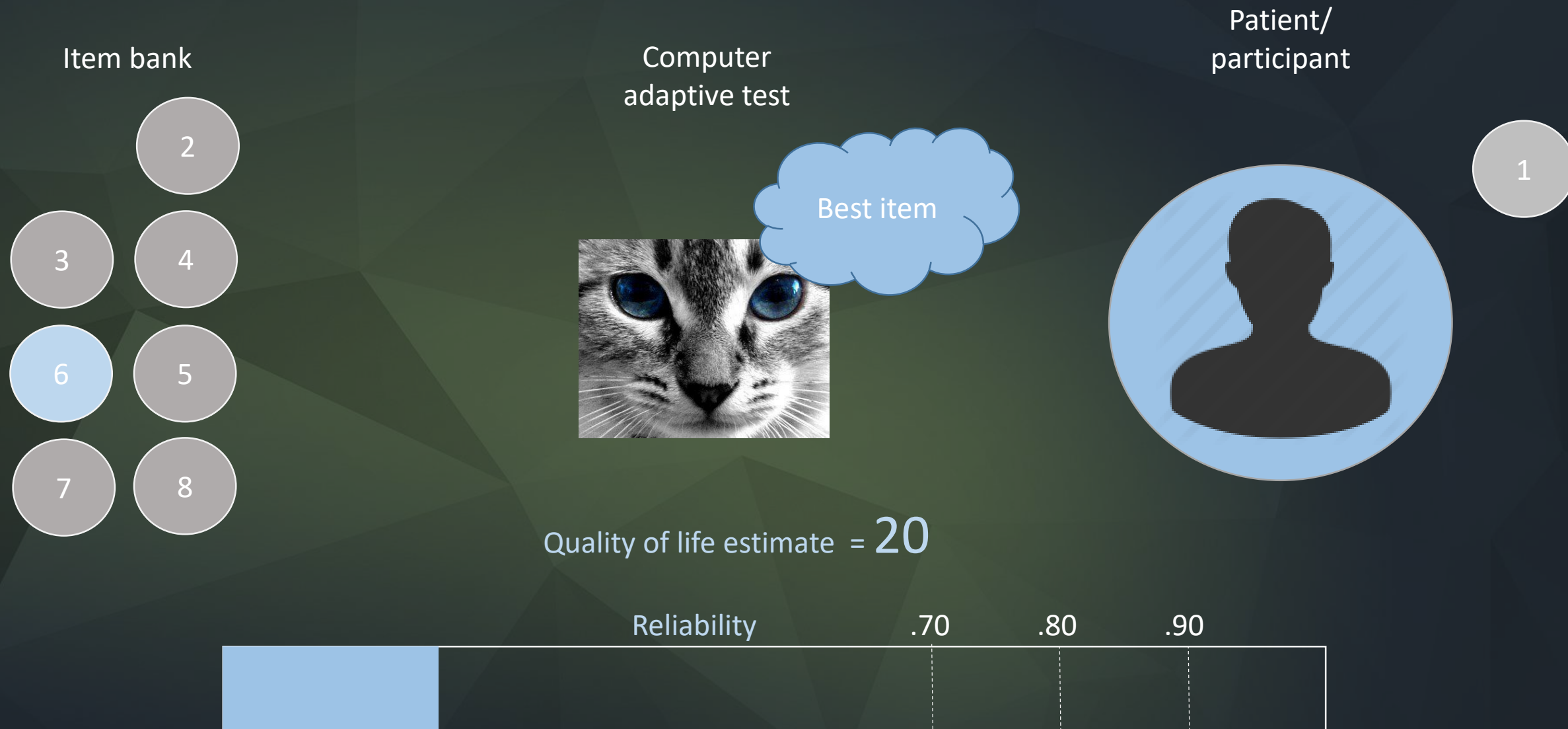
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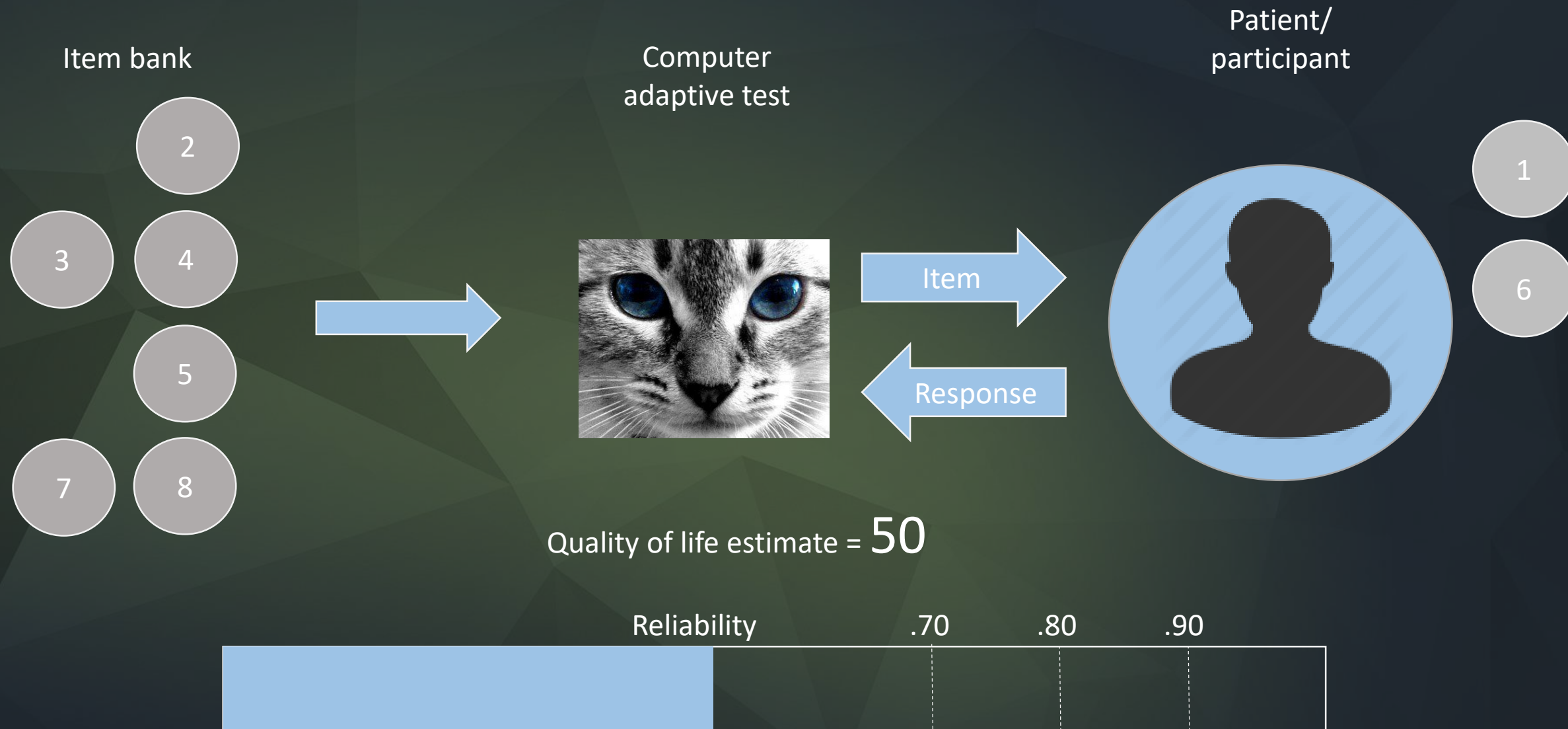
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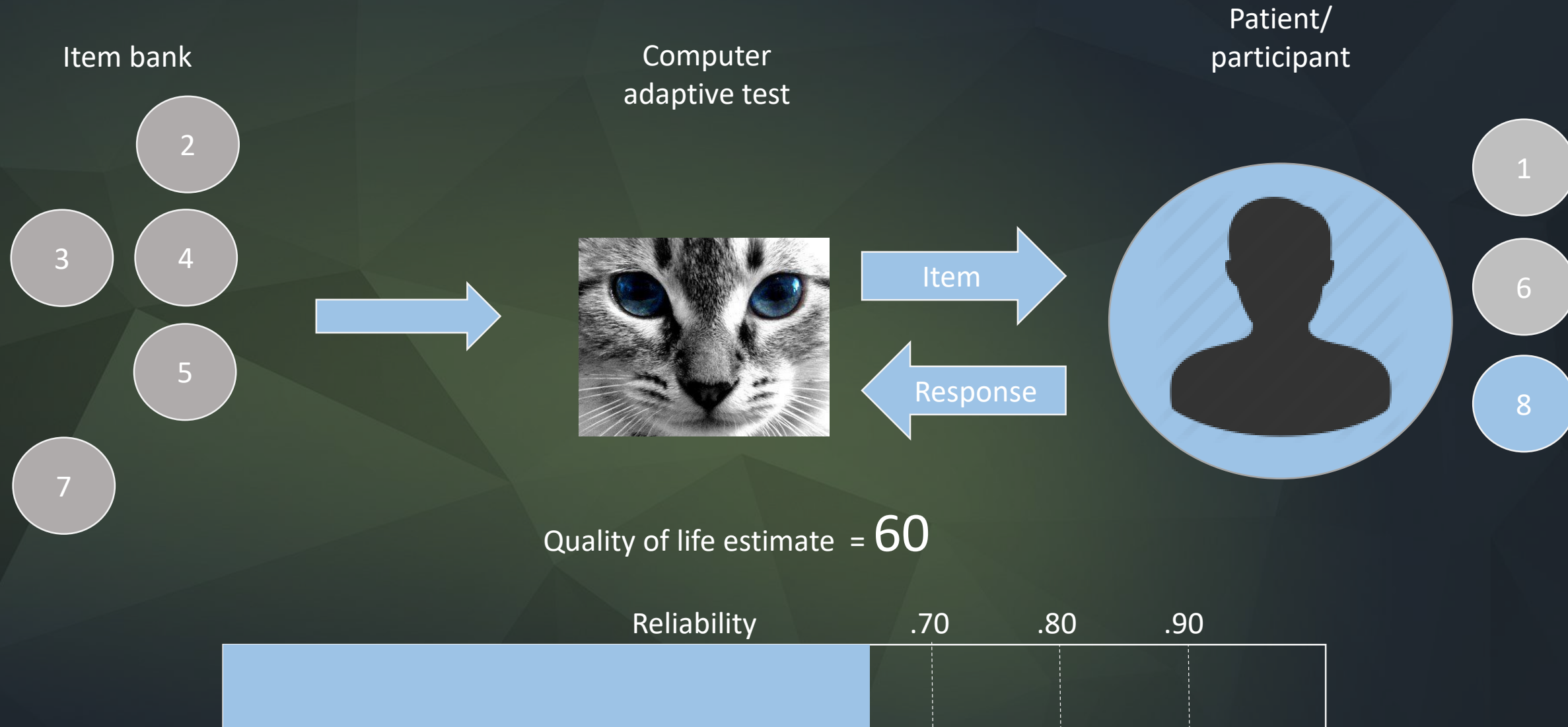
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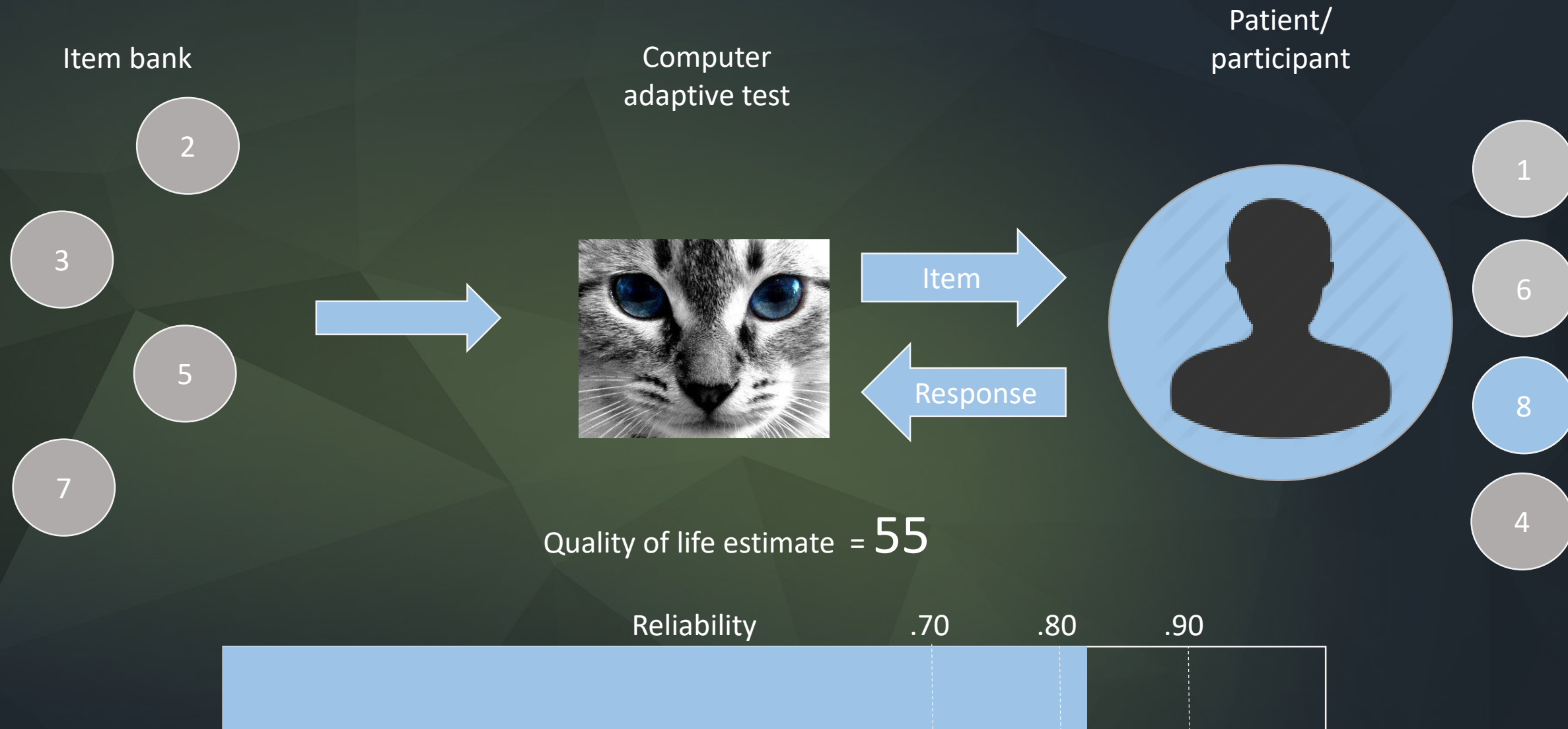
Computer adaptive testing_



Computer adaptive testing_



Computer adaptive testing_



adaptive tests



WHOQOL adaptive test

- Physical, psychological, social, and environmental QoL.
- 4000 people (320 from the UK).
- Partial credit model parameters, no DIF for UK sample or between conditions, all assumptions of the model met.
- Simulated CAT using 1000 iterations based on experimental theta values.
- Stopping rules related to standard error of .32, .45, and .55 (Reliability .90,.80 and .70) and matched reliability of paper WHO measures.

WHOQOL adaptive test

reliability **.90**

9 Items

reliability **.80**

4 Items

reliability **.70**

2 Items

82% shorter

than **WHOQOL-100**

46% shorter

than **WHOQOL-BREF**



Adaptive Quality of Life

Over the past two weeks...

Do you have enough energy for everyday life?

Not at all

A little

Moderately

Mostly

Completely



Next



Personalised Quality of Life (QoL) feedback

Unique Identifier - S5QHJ

Scale		Score
Physical QoL	<div></div>	60
Psychological QoL	<div></div>	71
Social QoL	<div></div>	53
Environmental QoL	<div></div>	76

The scores above are worked out from the answers that you gave to the questions you have just completed. Your results are given on the chart above. A higher score means that you have a higher quality of life. The table below gives you a little bit more information about what each of the scores mean.

Physical Quality of Life

Your physical quality of life includes things like how well you are able to move around, how much energy you have or how much you are in pain.

Your score of 60 on this scale indicates that your physical quality of life is normal. The majority of people in the United Kingdom report a similar quality of life to you.

If you are worried about your physical quality of life then you should contact your doctor. You can [click here to find a local doctor](#) or [click here to access local emergency services](#)

1238 participants

97 countries

311 UK

70 chronic conditions

45 years old

56% male

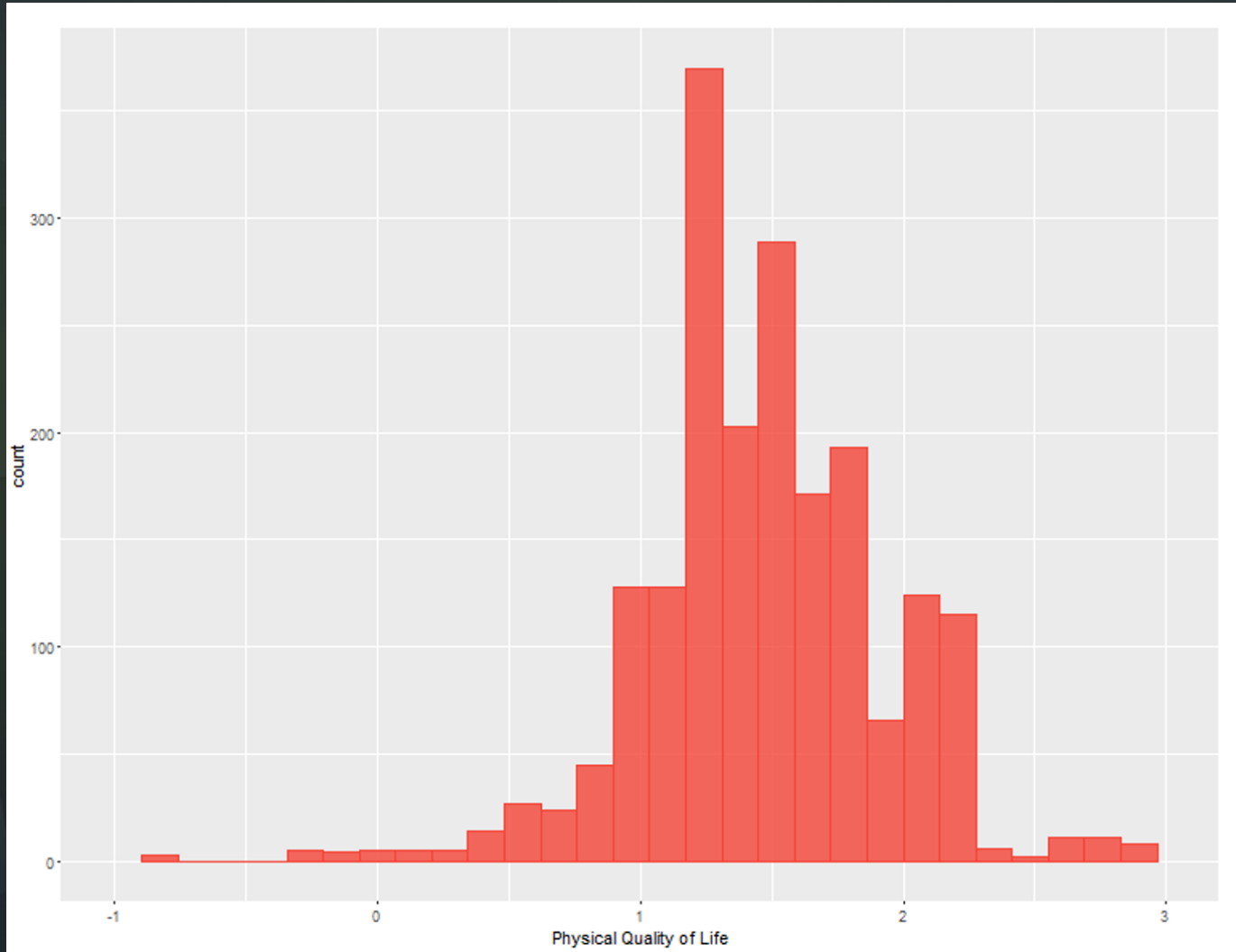
WHOQOL adaptive test

Entire assessment takes

Two minutes

up to 10 minutes shorter than the WHOQOL-100

Physical QoL



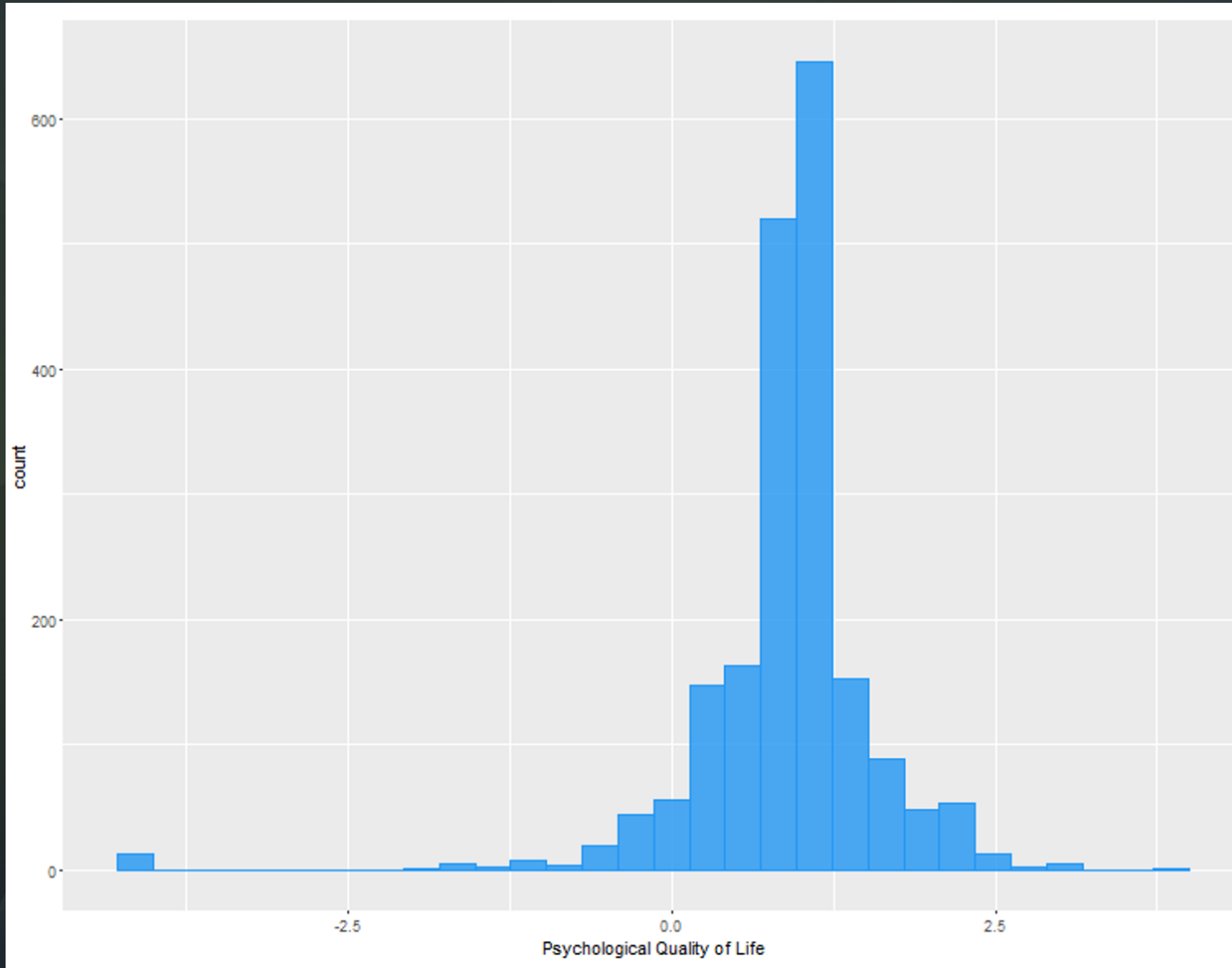
Items 4.83

Mean score 65.7

SD 10

MID 5

Psychological QoL



Items 5.34

Mean 61.5

SD 10

MID 5

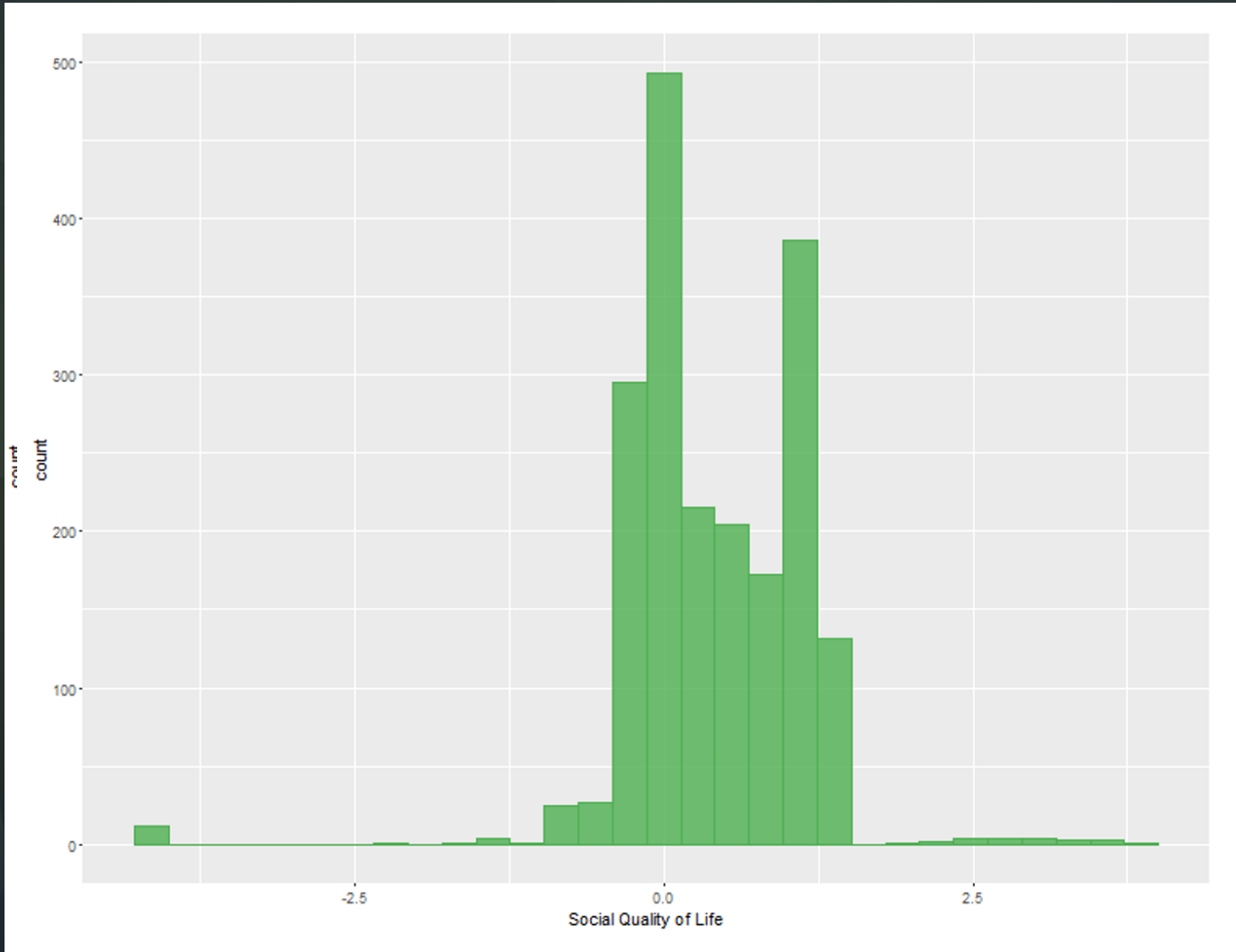
Social QoL

Items 4.77

Mean 59.3

SD 10

MID 5



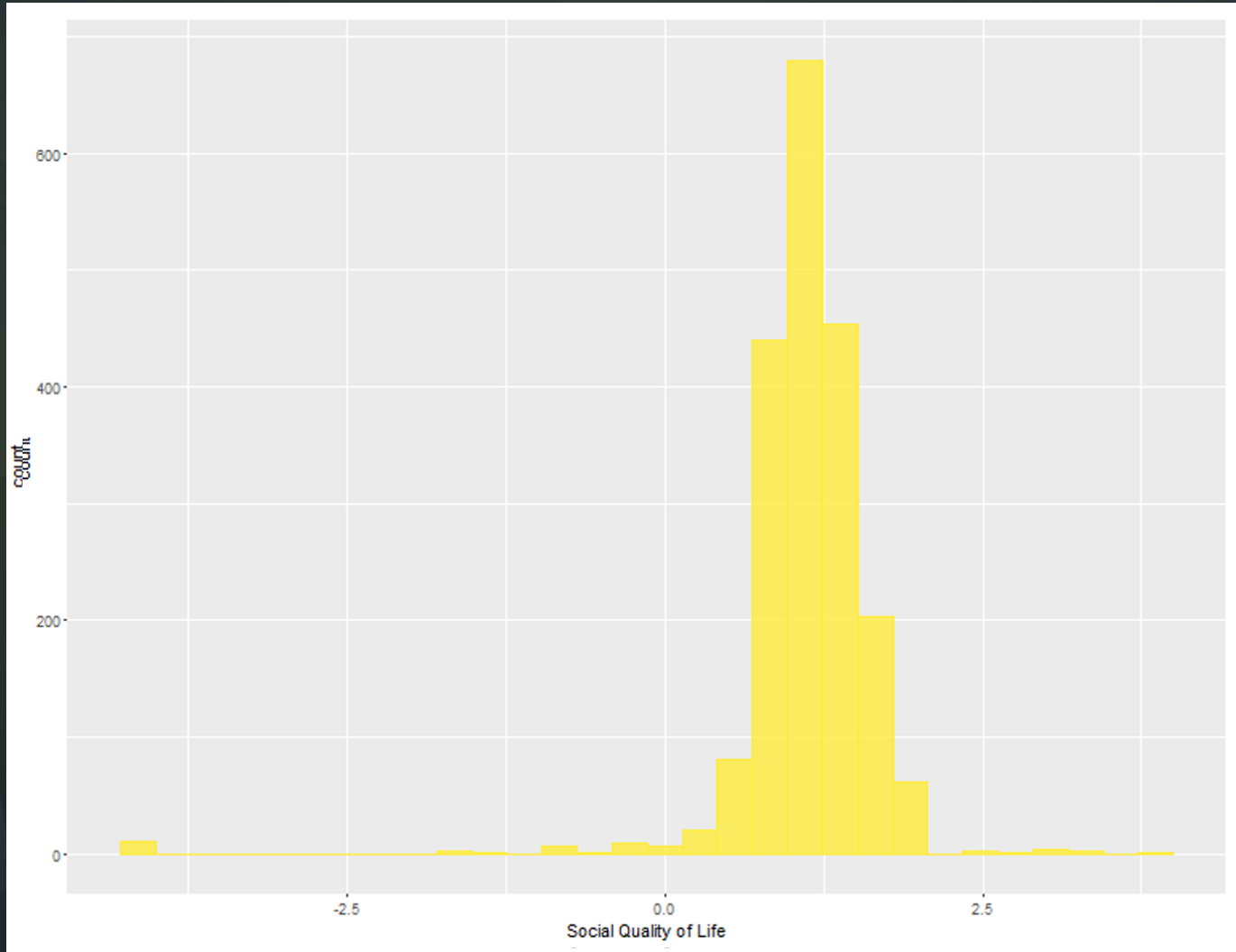
Environmental QoL

Items 4.59

Mean 53.8

SD 10

MID 5



WHOQOL adaptive test







- Significant differences between QoL for patients with long-term conditions (LTCs) and without ($P < .01$) in all domains
- Differences were greater than the minimally clinically important difference ($SD/2$)

Graphical feedback



Personalised Quality of Life (QoL) feedback

Unique Identifier - S5QHJ

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Future work

Limit the loss of information from a CAT.

Include open-text feedback and machine learning.

Include individualised information.

Clinician-facing feedback.

Generalise the system to other measures.



Engaging
assessments

Validate
CATs in practice

More
clinical
information



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