



ANNUAL REPORT

SIG/Committee Name: QOL in Clinical Practice SIG

Date: February 17th 2020

Co-Chairs: Kathryn Flynn, Kate Absolom and Angela Stover

Board Liaison: Antoine Regnault

Mission: The QOL in Clinical Practice Special Interest Group (CP-SIG) was formed by researchers and clinicians who are interested in health-related quality of life (QOL) assessment to improve clinical practice. Thus the CP-SIG is unique in that it is at the cusp between methodology and implementation. The ultimate objective of the CP-SIG is to bring together individuals who are interested in using QOL assessment to better involve, manage and treat individual patients as well as using QOL data for medical decision-making and improve clinical practice.

Project/Objective	Actions/Deliverables	Project Chair	Project Members	Timeline
1. Webinar- <i>Patient engagement with PRO completion in clinical practice: Challenges and solutions</i>	Converting patient engagement in PRO completion in clinical practice symposium (delivered at ISOQOL 2019) to webinar (collaboration between QOL in Clinical Practice and Patient Engagement SIG)	Elizabeth Unni /Kate Absolom	Coles T, Wilson H, Lavallee D, Roberts N, Freel J	Webinar planned for April 22 nd 2020
2. Paper- <i>Patient engagement with PRO completion in clinical practice (Target journal JPRO)</i>	To complement the above webinar we are planning a complementary summary/commentary paper (ISOQOL concept proposal form to be completed)	Kate Absolom/ Danielle Lavallee	Coles T, Wilson H, Lavallee D, Roberts N, Freel J	May/June 2020
3. Paper series- <i>Using implementation science to implement and evaluate PROM initiatives in routine care settings</i>	Five interconnected papers were submitted to QOLR in November, 2019: <ul style="list-style-type: none"> • “Using an Implementation Science Approach to Implement and Evaluate Patient Reported Outcome Measures (PROM) Initiatives in Routine Care Settings” by Angela Stover, Lotte Haverman, Hedy A. van Oers, Joanne Greenhalgh, Caroline M. Potter, on behalf of the ISOQOL PROMs/PREMs in Clinical Practice Implementation Science Work Group • “Prospective application of implementation science theories and frameworks to use PROMs in routine clinical care within an integrated pain network” by Sara Ahmed, Diana Zidarov, Owis Eilayyan, Regina Visca • “Implementation of the KLIK PROM portal using the Consolidated Framework for Implementation Research (CFIR) retrospectively” by Hedy A. van Oers, Lorynn Teela, Sasja A. Schepers, Martha A. Grootenhuis, Lotte Haverman • “Using Implementation Science to Inform Integration of Electronic Patient-Reported Experience Measures (ePREMs) into Healthcare Quality Improvement” by Kimberly Manalili and Maria Santana • “Using the Integrated Promoting Action Research in Health Services (iPARIHS) Framework to evaluate implementation of Patient Reported Outcome Measures (PROMs) into routine care in a medical oncology outpatient department “ by Natasha A. Roberts, Monika Janda, Angela M. Stover, Kim Alexander, David Wyld, Alison Mudge 	Angela Stover/ Lotte Haverman	Angela Stover, Lotte Haverman, Hedy van Oers, Joanne Greenhalgh, Caroline Potter, Sara Ahmed, Owis Eilayyan, Maria Santana, Kimberly Manalili, Natasha Roberts,	Two papers have received revise and resubmit invitations, and three are still under review. Anticipated to be published in special issue in summer 2020.
4. Symposium proposals submitted to ISOQOL 2020 conference	Main meeting and SIG-specific symposia submissions SYMPOSIUM DESCRIPTION: Patient-reported outcome and experience measures (PROMs/PREMs) are well established in research for many health conditions, but barriers persist for implementing them in routine care. Implementation science (IS) offers a potential	Angela Stover	Angela M. Stover, PhD University of North Carolina at Chapel Hill Chapel Hill, NC, USA	Proposals submitted in January for 2020

	<p>way forward, but its application has been limited for PROMs/PREMs. IS is the systematic study of methods to integrate evidence-based practices into care settings. Part of IS's appeal are the theories and frameworks guiding the translation process from research to practice. In this symposium, we will compare similarities and differences for five widely used IS frameworks and their applicability for implementing PROMs/PREMs in routine care through four case studies. Three case studies use theory to implement PROMs:</p> <p>1) pain clinics in Canada; 2) oncology clinics in Australia; and 3) pediatric/adult clinics for chronic conditions in the Netherlands. One case study is using theory to plan PREMs implementation in primary care clinics in Canada. We compare case studies on theories, barriers, enablers, and implementation strategies.</p> <p>IS approaches are largely harmonious with PROMs/PREMs implementation in routine care, although no single framework or theory appears to fully capture the nuances for PROMs/PREMs across clinical contexts. Across case studies in different countries and health conditions, barriers were remarkably consistent, including technology limitations, uncertainty about benefits and concerns about negative impacts, and competing demands within established clinical workflows. A unique aspect of our study is case studies showed more variation for PROM/PREM enablers in clinics than barriers, indicating the potential for tailored solutions. A common enabling factor was designing a technology system with automated features (e.g., patient reminders) and rapid access to results. More unique enablers capitalized on local resources, such as peer champions, advertising campaigns, and providing clinics with implementation funding.</p> <p>Common implementation strategies included engaging stakeholders, changing infrastructure, providing interactive assistance, and training clinicians and staff. Evaluation in case studies was inconsistent, and thus we will present IS metrics specific to evaluating PROM/PREM implementation initiatives. Increasing the use of IS in PROM/PREM implementation studies will help advance our collective understanding of causal mechanisms to better understand how, why, and in what circumstances IS frameworks and implementation strategies produce successful PROM/PREM implementation (or not).</p>		<p>Caroline Potter, DPhil Oxford University UK</p> <p>Natasha Roberts, PhD Queensland University of Technology Brisbane, Australia</p> <p>Hedy van Oers, PhD Academisch Medisch Centrum Universiteit van Amsterdam Amsterdam, Netherlands</p>	<p>conference- awaiting outcome</p>
<p>5. Workshop submitted to ISOQOL 2020 conference</p>	<p>Workshop submission: Best practices and lessons learned on implementing PROMs in routine care settings</p> <p>WORKSHOP DESCRIPTION: This workshop will serve as a broad introduction to implementing patient reported outcome measures (PROMs) in routine care settings. Participants will learn the state of the field and best practices, common barriers and enablers in clinics, implementation support strategies, and how to evaluate PROM implementation initiatives. International case studies will cover diverse health conditions and populations such as cancer, pediatrics, surgery, and primary care. At the workshop's conclusion, participants will be able to navigate the PROM implementation literature through exposure to best practices, lessons learned, and evaluation methods. Attendees will be asked to bring their own implementation barrier questions to discuss in small groups.</p>	<p>Angela Stover</p>	<p>Angela M. Stover, PhD University of North Carolina at Chapel Hill Chapel Hill, NC, USA</p> <p>Angela Wolff, PhD, RN Trinity Western University Vancouver, Canada</p> <p>Natasha Roberts, PhD</p>	<p>Proposals submitted in January for 2020 conference- awaiting outcome</p>

			Queensland University of Technology Brisbane, Australia Hedy van Oers, PhD Academisch Medisch Centrum Universiteit van Amsterdam Amsterdam, Netherlands Elizabeth Austin, PhD (c) University of Washington Seattle, WA, USA	
6. Paper- PROs and Payers	Scoping review underway, with 14248 abstracts identified, 13014 completed first level screening. Currently 1916 will need level 2 review (though some of the remaining in level 1 will also make it to level 2)	Janel Hanmer	Yucel E, Cizik A, Gulek-Bakirci B, McCracken P, Kinsky S, Swart E, Turner R.	Complete Level 2 screening by May 1, 2020. Then begin synthesis and writing
7. Webinar/2021 symposium proposal- Clinician engagement with PROs in clinical practice	Currently in early stages of planning activity around clinician engagement with PROs in clinical practice. Possible webinar towards second half of 2020 and subsequent symposium for 2021.	Angela Wolff/ Kate Absolom	TBC	Possible webinar later in 2020 and 2021 symposium proposal.
8. Communication with SIG members	<ul style="list-style-type: none"> Continued efforts being made to use Teamwork to communicate with members and advertise relevant CP activity/opportunities. In the last few months we have used Teamwork to support SIG member (Jae-Yung Kwon) find clinician input in “<i>No one size fits all for measuring what matters: Supporting the use of PRO data in healthcare</i>” a project funded by the Michael Smith Foundation for Health Research. We recently started promoting the use of Twitter amongst CP SIG members- we suggest using the hashtag #CPSIG to help disseminate news and facilitate networking/discussions amongst our Twitter active members. 	Kate Absolom/ Angela Stover	N/A	Ongoing