Integrating Patient Reported Outcomes (PRO) into Practice: University of Rochester Medical Center URMC

KC Clevenger, PhD, RN CPNP
Chief Nursing Officer
Wilmot Cancer Institute
University of Rochester Medical Center

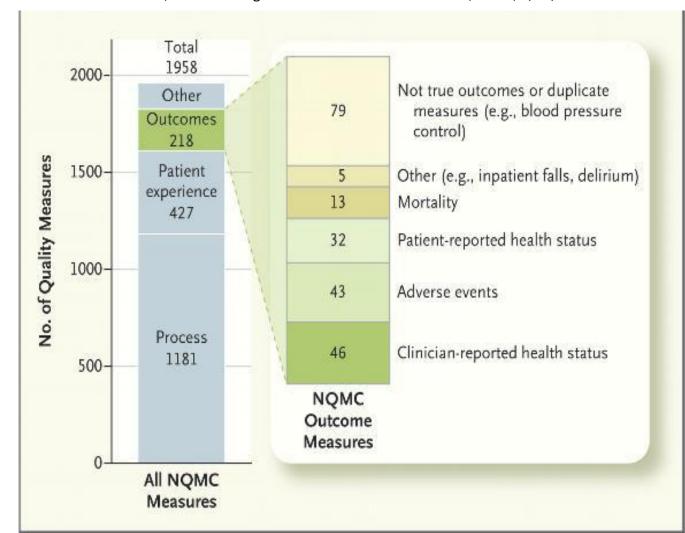
MEDICINE of
THE HIGHEST ORDER



Using Performance Measures to Drive Care Decisions

"Of the 1958 quality indicators in the National Quality Measures Clearinghouse...only 139 (7%) are actual outcomes and only 32 (<2%) are patient reported outcomes"

Porter et al, Standardizing Patient Outcome Measurement, NEJM, 2/11/16



UR PRO Collection Platform

CORE IDEALS

- Collection for clinical use to improve health of patients and community
- Only validated, standard of care PROs added to platform to allow for Research and Quality use
- 3. Minimize Provider Burden
- 4. Minimize Patient Burden
- 5. Minimize Disruption to Clinic Flow
- 6. Minimize Cost
- 7. Easy reporting for use with other data
- 8. Provide feedback/data for continuous improvement

Developed a Homegrown Platform to Collect PRO Data:

URVoice

Validated Outcomes In Clinical Experience



- Incorporates biopsychosocial assessments
- Domain specific not disease specific
- Produces validate data quickly
 - Item Response Theory
 - Short Forms
- Uses Computer Adapted Technology

Core Instruments:

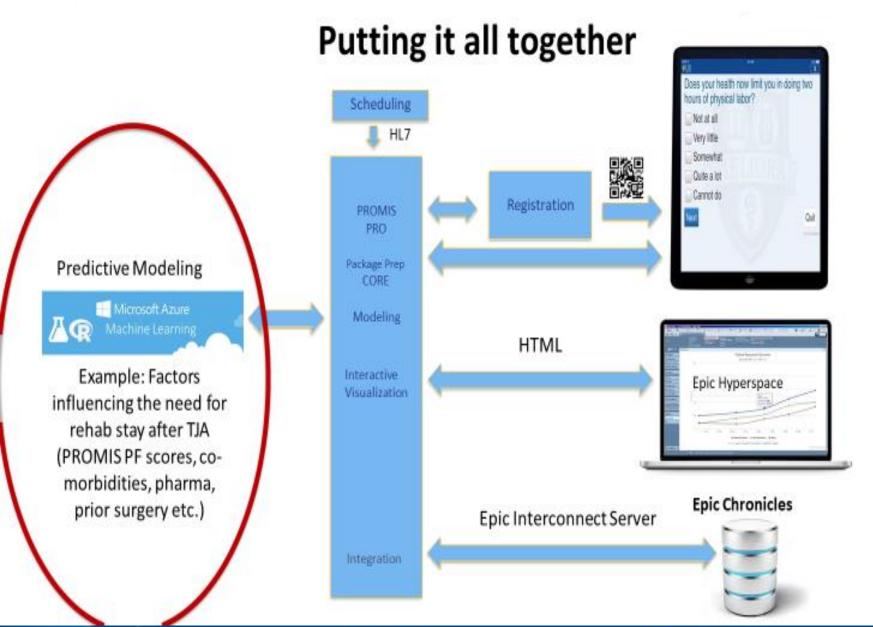
- Pain Interference
- Physical Function
- Depression

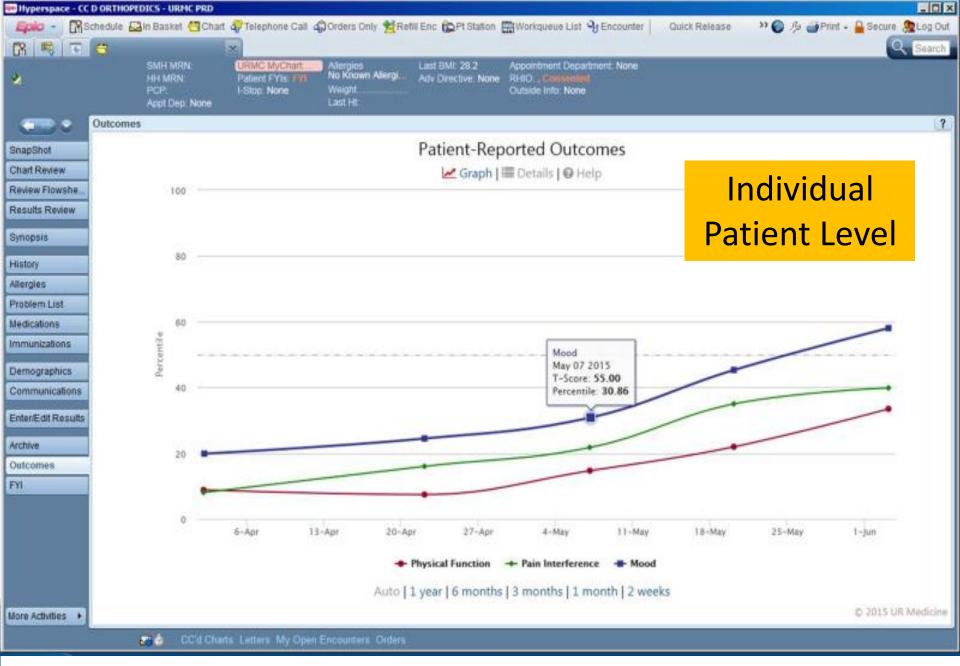
Oncology:

- Distress Score and Trigger
- Fatigue

Future:



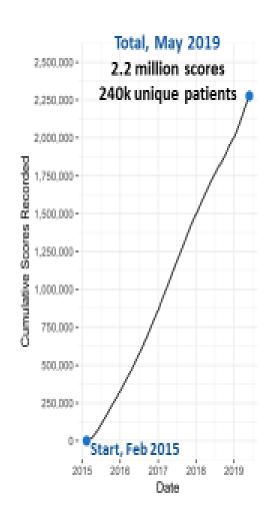


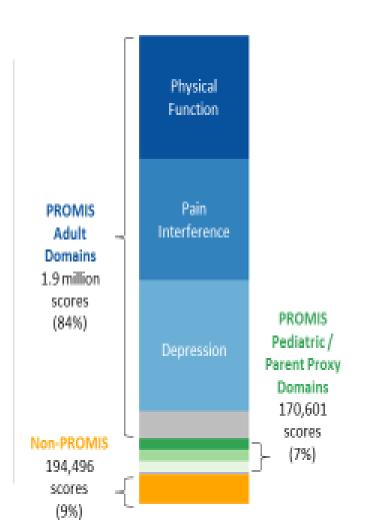


https://www.youtube.com/embed/H1EWU0RJYL0



UR VOICE: Collections





44 seconds

Median time to complete assessment

4 items

Median items answered per assessment

98.2% completed



Using the Data



- Started out as a clinical care tool in Ortho
- Now mined for quality projects and research studies
- Linking PROMIS to other related instruments
- Dermatology started in 2017
 - Added Mood Instrument
- Oncology started in 2018
 - Added Distress Tool and Social Work Trigger in EPIC
 - 2020: Adding Self-efficacy

Changes in the works for URVoice

- Improved Visualizations with categorial guidelines
 - Aid in clinical interpretation
- Delivery Windows
 - Choose which domains and when to collect
- Improved Program administration tools
 - Assess and monitor collection/administration metrics of PROs
- Clinician focused analytic resources
 - Help with Clinical questions geared toward improving Clinical Care and Quality
 - Additional Data analysts; small grant funding, statistical support



Resources

KC Clevenger, PhD RN CPNP

Chief Nursing Officer

Associate Professor, Nurse Scientist

Kc_Clevenger@urmc.Rochester.edu

Allison McIntyre, MPH CCRC

PRO Clinical Program Administrator

Oncology PRO Liaison

Allison_McIntyre@urmc.Rochester.edu

Chris Dasilva, BS

Software Architect & Project Director

Chris_Dasilva@urmc.Rochester.edu

Judy Baumhauer, MD MPH

Professor and Associate Chair of Academic Affairs

Department of Orthopaedics and Rehabilitation

judy_baumhaer@urmc.Rochester.edu

David Mitten, MD

Director, Health Information Technology Innovation

Director, UR Health Lab

David_Mitten@urmc.Rochester.edu

Antonina Paglario

Administrative Assistant, Wilmot Cancer Insitute

antonina_Paglario@urmc.Rochester.edu