

CONFERENCE ABSTRACT

Developing personalised outcome measures (POMs) in a child health population

17th International Conference on Integrated Care, Dublin, 08-10 May 2017

Sarah Montgomery-Taylor, Bob Klaber, Mando Watson

Imperial College Healthcare NHS Trust, United Kingdom

Introduction: The UK is developing new models of care^{1,2}; delivering better outcomes while using resources more efficiently. New models of care require smarter commissioning that moves away from pathways and instead commissions for outcomes. There are insufficient meaningful outcome metrics to support effective healthcare commissioning for children and young people (CYP).³ Patient-reported experience measures (PREMs) are extensively used in the NHS but are designed by the system to elicit patient feedback. In contrast, personalised outcome measures (POMs) are co-developed with the population, reflecting patient priorities.

Practice change implemented: We have developed a whole-population segmentation⁴ approach to commissioning for CYP and are developing robust outcome measures in partnership with children and their families for two segments: the healthy child and acutely mild/moderately unwell child.

Aim and theory of change: We are developing POMs for CYP with a primary aim of creating a tool to inform commissioning and planning of new models of care and a secondary benefit of growing the culture of patient-centred care. Our process involves the following stages:

1. Create valid segments
2. Identify patients representative of those segments
3. Create the setting (workshops) for authentic dialogue
4. Design measure
5. Test measure
6. Implement measure in new model of care
7. Observe impact of new model on measure

Targeted population and stakeholders: These POMs are for CYPs and families, the health professionals in child health and the commissioners and policy makers and budget holders.

Timeline:

- Preparatory phase March '16 – Feb '17
- POM development March – May '17

- Dissemination of findings June – August '17

Highlights: Innovation – POMs represent a significant shift from process and proxy measures of disease towards what matters to patients, against which care can be commissioned, evaluated and improved. However, they are not widely used within the health setting and have never been applied to child health populations.

Impact – to put the patient at the centre of what we do

Outcomes – valid, meaningful measures of CYP healthcare

Sustainability: These POMs are designed to have long-term validity across the NHS and beyond.

Transferability: The work will develop POMs that can be used anywhere in the UK and internationally. Importantly, the methodology will also be transferable to adult populations too.

Conclusions: This work lays the foundations for effective CYP commissioning by developing population segments with meaningful metrics: clinical, activity and POMs. It supports the move to the capitated payment approaches seen within accountable care organisations. There is a pressing need for efficient utilisation of health care resource and POMs enable us to keep patients at the centre of care delivered.

Discussions: How does CYP integrated care differ from adult integrated care?

How can we adjust for bias of those who will engage with co-development?

Lessons learned: Children can be engaged meaningfully in the development of integrated healthcare systems and delivery. Commissioning against outcomes must include POMs if it is to be meaningful. Our whole-population segmentation provides an important framework around which to develop patient-centred care.

References:

- 1- NHS England. Five year forward view. Available from: <https://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf> [Accessed 22nd November 2016]
- 2- NHS England. New care models: Vanguards - developing a blueprint for the future of NHS and care services. Available from: https://www.england.nhs.uk/wp-content/uploads/2015/11/new_care_models.pdf [Accessed 22nd November 2016]
- 3- NHS England. Commissioning for effective service transformation: what we have learnt. <https://www.england.nhs.uk/wp-content/uploads/2014/03/serv-trans-guide.pdf> [Accessed 22nd November 2016]
- 4- Klaber RE, Blair M, Lemer C, Watson M. Whole population integrated child health: moving beyond pathways. Arch Dis Child. 2016 May 23. pii: archdischild-2016-310485.

Keywords: child health; patient centred; outcomes; commissioning; segmentation
