DEVELOPING AN OUTCOME MEASURE FOR USE IN ECONOMIC EVALUATION SPANNING HEALTH AND SOCIAL CARE

EXTENDING THE QALY PROJECT (E-QALY PROJECT)

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Motivation for developing a new instrument

- Address limitations with standard HR-QALY
 - too narrow
 - misses important quality of life aspects for carers, social care users, & those with long-term conditions
- Multiple QALY measures used across sectors (EQ-5D, ASCOT, Carer-QoL) - comparability and aggregation problems

Focus of new instrument

- 1.Reflect impact of health and social care interventions on
 - physical and mental health
 - broader quality of life
 - judged to be important by service users and those impacted by interventions such as informal carers

2.Amenable to

- generating a long-version of the measure & a preference-based index
- being included in clinical trials and routine surveys
- being used internationally

Extending the QALY project partners

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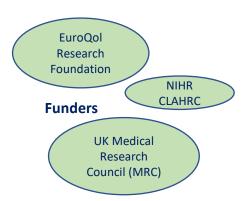
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Governance & consultation groups

EuroQol Research Foundation

Advisory Group

academics, wide range stakeholders

Steering Group key stakeholders & academics

Public Involvement Group N=7 NICE Citizen's Council

Project timetable – completed stages in green

Consultations:

Items for long

measure and

classifier

Stage I: Identify Domains / Themes

Stage II: Generate long list of items (~100 items)

Stage III: Face validity interviews Replicated in 5 countries **Stage IV: Psychometrics** Argentina Australia **Stage V: Valuation** China TTO (Time trade off), DCE and deliberative exercises Germany **USA Stage VI: Impact** Possible mapping. Impact on existing cost effectiveness studies **Future work: Validity** E-QALY project

Stage 1: Qualitative literature review

- Aim: to identify potential domains for the new measure:
 - "Based on the voice of adult (aged 18 years and over) patients, social care users and carers what is the impact on <u>quality of life</u> and <u>wellbeing</u> of health conditions and interventions (health, social care and public health interventions)?"
- Best reflected in qualitative research
- Mostly from Europe, USA, Canada, Australia, New Zealand

Working conceptual model – a starting point for the review

Conditions:

- Biological and physiological variables
- Caring role
- Health or social care treatment or self-management

Physical symptoms or impairment

Functioning & Activity

Mental symptoms or impairment

Social connections

Daily circumstances (caring hours, treatment regime e.g. time at hospital)

Feelings & Identity

Social judgements

Measure of Health, social care and carer-related quality of life

Expectations, adaptation, response shift

Individual environment. Social Environment. Personality.

Identification of evidence – systematic searching across four arms

- 1. Qualitative reviews of sample of 17 health conditions
- 2. Qualitative reviews carers + measures
- 3. Qualitative reviews social care users + measures
- 4. Qualitative work in development of generic measures

Analysis

Framework analysis using modified model of health and QoL (Wilson and Cleary)

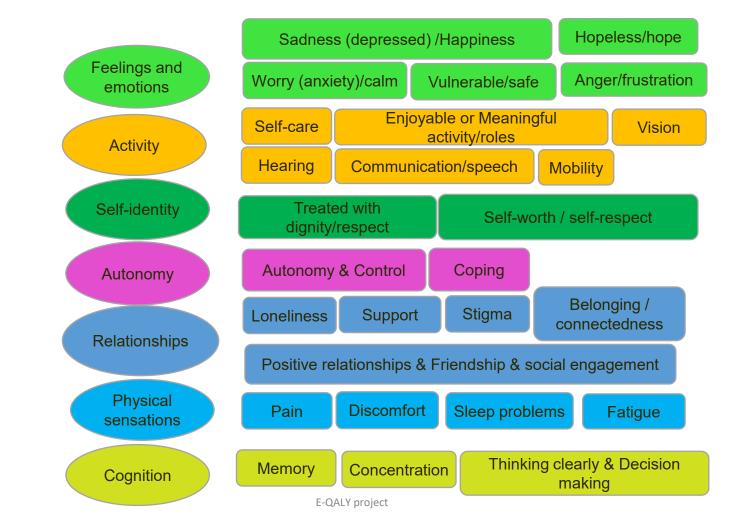
Conceptual model used to develop extraction framework

Thematic analysis to develop themes and sub-themes

Consultation

Consultation at all stages with wider team and governance groups

Revised themes and sub-themes



Stage II: Item generation

- Drew on terminology from qualitative review
- Existing measures and item banks (n=687), plus new items where gaps
- Sifted through potential items using agreed criteria

Challenges:

- Identifying items that work in a generic context
- Identify items that convey construct without too much information (preference-elicitation in mind)

Result: over 90 items for face validation

Stage III: Face validation

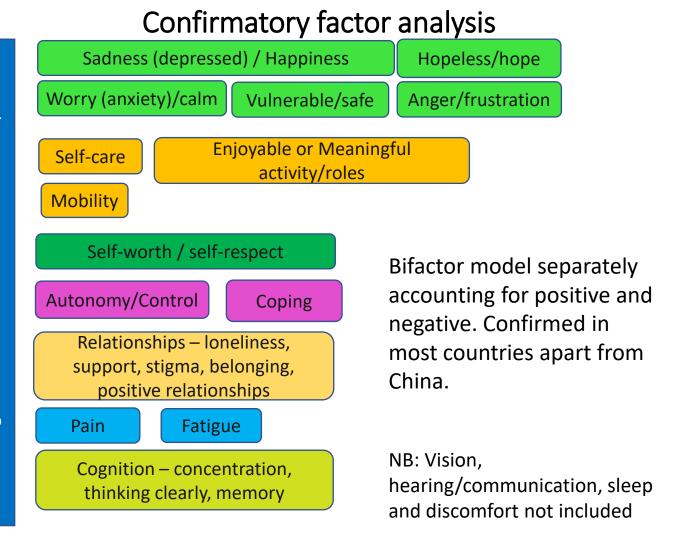
- Test the content and face validity of the proposed domains and draft set of >90 items using a standardised protocol.
- Semi-structured cognitive interviews conducted with people reporting physical and mental health conditions, carers and social care users
- Response options (frequency, severity, difficulty, agreement) were tested.
- Items were translated into Spanish, Chinese and German using forward and back translation (with input from international teams)
- Spreadsheet used to indicate item performance and any issues

Resulted in some elimination, modifications and additional items leaving 62 items for the next stage

Stage IV: Psychometric testing

- 62 item pool administered to patients, social care users, carers and general population from 6 countries
- Recruited in NHS in UK and (n=627) and online across all 6 countries (UK=2000; the rest 500-900)
- Factor analysis (EFA/CFA), Classical testing (missing data, distribution of responses, known group differences), and IRT

Generally difficult to identify poor performing items on the basis of classical psychometric results



Consultations on domains and item selection

Consultation used summary of face validity & psychometric evidence from the 6 countries

Participants: Advisory group, EuroQol group, international stakeholders, public involvement group in UK

Consultation 1) Long version: 25 items from 62 item pool, with at least one item for each sub-domain

Consultation 2) Classifier: 7-10 items from 25 item long version of measure

EQ-HWB Long form (25 items)

These questions are trying to measure how <u>your</u>	life has be	en <u>over the</u>	last 7 days.									
In the last 7 days:	No difficulty	Slight difficulty	Visio	n			In the <u>last 7 days:</u>	None of the time	Only occasionally	Some of the time	Often	Most or all of the
 How difficult was it for you to see (using, for example, glasses or contact lenses if they are needed)? 		_	Heari	_			19. I felt accepted by others e.g. feeling li are able to be yourself and that you b					time
How difficult was it for you to hear (using hearing aids if you usually wear them)?			Mobi	•			20. I felt good about myself		Self	-wort	:h	
 How difficult was it for you to get around inside and outside (using any aids you 			Daily	activ	ities		21. I could do the things I wanted to do					
usually use e.g. walking stick, frame or wheelchair)?			Self-C	Care			In the last 7 days:	None of	Only	Some of	Often	Most or
 How difficult was it for you to do day-to-day activities (e.g. working, shopping, housework)? 		0	Enjoy	able	activities			the time	occasionally	the time		all of the time
5. How difficult was it for you to wash, toilet,							22. I had physical pain?					
get dressed, eat or care for your appearance?							 Please tick <u>one</u> box to describe your e I had no physical pain I had mild physical pain 	experience in the				
antrol	one of e time	Only occasionally	Some of the time	Often	Most or all of the time		I had moderate physical pain I had severe physical pain					
oping control over my day-to-day life					tine		I had very severe physical pain					
choice to do things or have things done for you as you like and when				Lo	neliness			None of the time	Only occasionally	Some of the time	Often	Most or all of the time
emory				Su	pport		comfort e.g. feeling g (not including pai					
oncentrating/thinking clea	arly			Sti	igma/belong	ging	ox to describe your sical discomfort			0		
40 (felk-endens						.	r nau mmu priysical discomfort					
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nsafe				4								
					© EuroQol Res	search	Foundation. EQ-HWB™ is a tro	ade mark of	f the EuroQ	ol Reseal	rch Fou	ndation.

EQ-HWB Short form 9-item descriptive system

These questions are trying to measure how your life has been over the last 7 days.

In the <u>last 7 days:</u>	No difficulty	Slight difficulty	Some difficulty	A lot of difficulty	Unable
 How difficult was it for you to get around inside and outside (using any aids you usually use e.g. walking stick, frame or wheelchair)? 					
 How difficult was it for you to do day-to-da activities (e.g. working, shopping, housework)? 	y 				
	None of	Only	Some of	Often	Most or
In the <u>last 7 days:</u>	the time	occasionally	the time		all of the time
3. felt unable to cope with my day to day life					
4. I had trouble concentrating/thinking clearly	<i>'</i> □				
5. I felt anxious					
6. I felt sad/depressed					
7. I felt lonely					
8. I felt exhausted					
9. Please tick <u>one</u> box to describe your experi I had no physical pain I had mild physical pain I had moderate physical pain I had severe physical pain I had very severe physical pain	ence in the la	st 7 days:		0.5	0.1.0

Mobility **Daily activities** Coping **Concentration & thinking** clearly **Anxiety Depression** Loneliness Pain

Domains/sub-domains

Strengths and limitations

Strengths

- •Rigorous methods to identify domains/sub-domains and items with valuation in mind from the start
- Extensive consultation with stakeholders at all stages (PHE, DHSC, NICE, service users)
- •Pool of items, long measure and classifier (experimental measures) covering a broad range of domains for use across sectors

Limitations

- Further psychometric testing of items needed e.g. responsiveness, recruited more beyond online (currently only n=627)
- Need to be understand how it compared to existing measures

Stage V: Valuation and next steps

- Pilot valuation using EQ-PVT v2 qualitative (n=15) (resulted in some minor modifications)
- 25 items version and 9-item classifier agreed
- Name: EQ-HWB agreed.

Next steps:

- Further pilot valuation quantitative (n=50)
- Full valuation study in UK (n=460) with 7 TTO and 6 DCE or 12 (?) TTO only depending on results of pilot
- DCE with duration mixed methods exploratory study (PhD)





Many thanks!

Project Website: https://scharr.dept.shef.ac.uk/e-qaly/project-updates/