

## Policy briefing

### Putting outcome measures into palliative care practice: what works?

#### Brief background

It is important that we can demonstrate if and how palliative care works to improve the symptoms, wellbeing, and ability to do everyday tasks for people with life-limiting illnesses.

An 'outcome measure' is a measure of these symptoms, wellbeing, and ability to do everyday tasks. Systematically collecting outcome measures helps to ensure thorough assessment and monitoring of these aspects of a person's care. In turn, this improves the quality of care that patients receive and allows us to clearly demonstrate the impact of palliative care services.

Outcome measures, however, are used inconsistently (if at all) in practice. The aim of this study was to understand the processes that underpin successful implementation of outcome measures into routine palliative care practice.

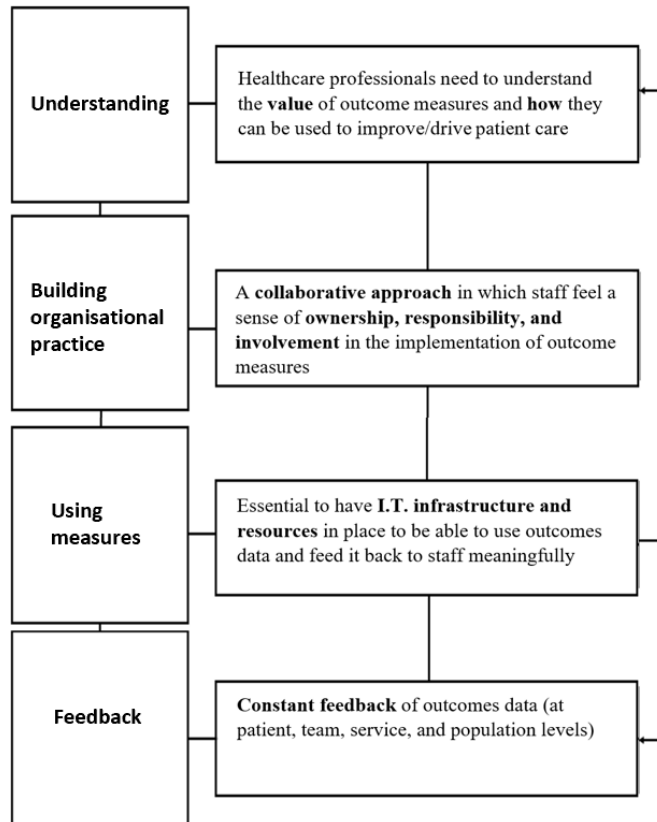
<p><b>What we did</b></p>	<ul style="list-style-type: none"> <li>• We wanted to understand what works and why when implementing outcome measures into routine palliative care practice</li> <li>• This work is part of the wider RESOLVE project which aims to directly improve the health status and symptom experience of Yorkshire patients living with advanced cancer. More information available can be found here: <a href="https://www.hyms.ac.uk/research/research-centres-and-groups/wolfson/resolve">https://www.hyms.ac.uk/research/research-centres-and-groups/wolfson/resolve</a></li> </ul>
<p><b>How we did it</b></p>	<ul style="list-style-type: none"> <li>• We interviewed 63 healthcare professionals about using outcome measures, across 11 specialist palliative care services, sampled by role, experience, seniority, and setting</li> </ul>

	(inpatient, outpatient/day therapy, home-based/community)
<b>What we found</b>	<ul style="list-style-type: none"> <li>• Processes fell into four categories (as seen below). Having these processes in place was crucial to ensuring that organisations made it easy for their staff to use the right outcome measures, at the right times, and in the right places, so that patients could benefit from improved quality care, symptoms, and well-being:</li> </ul> <p><b>1. Understanding measures</b> For outcome measures to be used effectively in assessing and monitoring patients’ symptoms, concerns and functional ability, understanding what each outcome measure was, how and when to use them appropriately, and their value to patient care was important. However, many professionals commented on challenges to effectively understanding measures in these ways, including difficulty scoring, ambiguity/confusion over meanings, frequency of collection, and which version of a measure to use.</p> <p><b>2. Building organisational practice around outcome measures</b> A key factor to ‘buy in’ was adopting a collaborative approach in which teams/individuals felt included and engaged in implementation of measures. It was also crucial that outcome measures were used as a common language that professionals communicated with in their everyday practice, and to have good leaders who championed the implementation of outcome measures.</p> <p><b>3. Using outcome measures</b> An integral factor that helped was having the ability to input outcome measures onto electronic systems, use and share them within these systems, and then having the ability to extract the outcomes data out of these systems. In organisations where there was no capability to do this, the use and utility of outcome measures was severely disrupted/limited, and in extreme instances, abandoned.</p> <p><b>4. Feedback</b> Feeding back outcomes data (at a patient, team, and service level) to those who used them was crucial in reinforcing their use and demonstrating the value of palliative care. When this did not</p>

happen, outcome measures were more often viewed as a 'tickbox' exercise.

A summary of processes that were integral to the implementation of outcome measures into clinical practice can be seen in Figure 1.

Figure 1: An overview of the processes important to the implementation of outcome measures into routine clinical practice



**Recommendations:**

Based on the findings of this study, we provide a set of questions (see Table 1) that professionals who are leading the implementation of outcome measures, and those using them in everyday practice, should consider before and during implementation. These questions are designed to enhance the likelihood that the value of outcome measures are harnessed by using them to demonstrate the value of palliative care and improve the quality of care that is provided to patients through the systematic identification and monitoring of symptoms, concerns, and functional ability. This is by ensuring that:

- The right outcome measures are selected.

	<ul style="list-style-type: none"> <li>• Individuals and teams understand what outcome measures are, their value, and how to use them appropriately so that patients can experience improved outcomes.</li> <li>• Teams and services are aware of the ways through which they can collectively build organisational practice around using outcome measures so that they become a normal part of what they do.</li> <li>• Electronic systems are in place that allows for the input of outcomes data into, ability to use within, and extract out of electronic systems, and that professionals understand how to use outcome measures within these systems.</li> <li>• Services have feedback mechanisms in place to demonstrate to those using measures how they are being used to inform and benefit patient care.</li> <li>• How to use outcome measures to demonstrate impact at a patient, team, and service level.</li> </ul>
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Table 1: Key questions to consider before and during the implementation of outcome measures

Level of Action	Who should take action?	Questions to consider
Those <i>leading implementation</i> of outcome measures	Services managers; Chief executives; Outcome 'champions'; Team leaders	<ul style="list-style-type: none"> <li>• Is there up-to-date and regular training/education in place for new and existing staff using outcome measures?</li> <li>• How will you include your team in the implementation of outcome measures?</li> <li>• Do you have electronic systems and support in place that allows staff to easily input, view, share, and extract outcomes data?</li> <li>• Have you considered how to feedback outcomes information to staff?</li> <li>• Have you planned on how to integrate the use of outcome measures into everyday clinical practice and team working (e.g., at multi-disciplinary team meetings, ward rounds, handovers etc.)?</li> <li>• Can you identify staff members within your service who would be an appropriate outcomes champion?</li> </ul>
Those <i>using</i> outcome measures	Nurses; Doctors; Allied healthcare professionals; Healthcare assistants	<p>Within the setting that you work (inpatient, outpatient/day therapy, home-based/community), do you:</p> <ul style="list-style-type: none"> <li>• Understand which outcome measures to use, when to use it, and why you are using it?</li> <li>• Know which version of IPOS to use and when to collect it?</li> <li>• Know how to input, view, and extract outcomes information into your services electronic system?</li> <li>• Understand how to clinically act on/respond to information collected through outcome measures?</li> <li>• Know where to go for additional help and advice on how to use outcome measures?</li> </ul>

**In depth findings can be found in the paper attached entitled:**

*Implementing person-centred outcome measures in palliative care: An exploratory qualitative study using Normalisation Process Theory to understand processes and context.*

Bradshaw, A., Santarelli, M., Mulderrig, M., Khamis, A., Sartain, K., Boland, J. W., Bennett, M. I., Johnson, M., Pearson, M., & Murtagh, F. E. M. (2020). Palliative Medicine.

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