Background/Purpose

- Improving patient experience is important in all diseases, but most important in patients with chronic rheumatic diseases like rheumatoid arthritis
- To date there have been no specific patient reported experience measures (PREMs) in rheumatology. This would be a method of ascertaining that the patient has an optimum experience when attending for their care
- A multi-disciplinary group, commissioning for quality in rheumatoid arthritis (CQRA) was established to develop the first PREM in RA
  - This group was supported under the terms of a joint working agreement with Roche Products Ltd. (Ailsa Bosworth, Chief Executive, NRAS; Joint Chair Rheumatology Futures Group; Graeme Johnston, NRAS, Chair of the Trustees; Dr. Marwan Bukhari, Consultant Rheumatologist, Royal Lancaster Infirmary; Maureen Cox, Clinical Nurse Specialist in Rheumatology, Nuffield Orthopaedic Centre (NOC Trust); Anne O’Brien, Lecturer in Physiotherapy - Keele University; Staffordshire; Prof. Peter Jones, Senior Statistician at the Health Services Research Unit, and Emeritus Professor of Statistics, Keele University; Paul Carroll, Assistant Director Commissioning, Ashton, Leigh and Wigan PCT; Dr. Alan Nyce, Director Pennine MSK Partnership; Alison Elliott, Strategic Funding Manager-Specialty Care; Roche Products Limited; Ify Sargeant, Medical Writer, imedica Ltd.)
- A series of focus groups were held with patients from the UK National Rheumatoid Arthritis Society (NRAS) to determine which elements of the patient experience was deemed most important
  - This was mapped against the UK Department of Health Patient Experience Framework which comprises 8 domains
- A questionnaire was then developed using the same 8 domains, but with questions developed specifically relating to RA and Rheumatology Services
  - This questionnaire was then piloted across ten UK sites
- The first question asked respondents to evaluate their overall level of care
  - All questions were graded from strongly agree to strongly disagree

Aim

To determine the construct validity of the PREM questionnaire developed by the CQRA group, to determine it’s ability to measure the patient experience

Methods

- Cronbach’s alpha (Bland & Altman 1997) was chosen to measure construct validity. It is commonly used over ordinal scales to measure internal consistency within a domain or how closely the individual questions are related. A value of at least 0.7 is regarded as satisfactory. The percentage agreement with overall care over the 5 point scale for each question within a domain was also calculated
  - Additionally, for each question the percentage agreement with the overall assessment on the five point scale was calculated
  - In case of multiple questions per domain, the responses are shown as a range

Results

- 524 patients were included in the analysis
  - Median age was 65 years (IQR 55.80 years)
  - 377 (72%) were female
  - Median RA disease duration was 8 years (IQR 3.5, 15 years)
  - The Cronbach alpha co-efficients within the multi-question domains and their percentage agreement with the question on overall care are shown in table

Figure 1: Map of UK showing participating unit locations (white dots)

Conclusion

- The PREM has good construct validity and is a valid tool for measuring RA patient experience
- Some domains have higher agreement with overall patient experience
- This could provide a useful future tool for measuring patient experience
- Modification of the tool to use in other rheumatic conditions is underway

Reference


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