UK Adult Rehabilitation Survey on Patient Reported Outcomes Measures

On behalf of the British Society of Audiology Adult Rehabilitation Interest Group, we have submitted a freedom of information request to find out more information about the use of patient-reported outcome measures across NHS funded audiology services. Data on outcomes are increasingly important to maximise patient benefits and improve services locally, as well as ensure service providers, commissioners, the respective UK health administrations and the UK and devolved governments understand how beneficial and effective audiology services are.

We are looking for information on all NHS-funded audiology services, whether these are provided by NHS organisations, private companies, social enterprises or charities. If you also provide private services (paid for by the consumer), please answer with respect to your NHS funded services.

We are collecting these data on outcome measures to get a national picture on how patient reported outcomes are being used in practice. This will also feed into the development of an upcoming UK Outcome Measures Toolkit for Adult Rehabilitation. These data will be treated as confidential and reported results will be anonymised. The survey will take no more than 10 minutes to complete.

Thank you for taking the time to complete this survey.

Section 1: Information about your service

1.1. What is the name of your organisation? (e.g. Nottingham University Hospitals NHS Trust)

1.2. What is your region?

1.3. Is your service part of: (tick one box)

    NHS organisation

    Private/independent organisation providing NHS-funded services

    Voluntary organisation providing NHS-funded services

1.4. How do you typically assess patient's needs leading to goal-setting? (tick all that apply.)

    A clinical interview

    A published questionnaire
      - Glasgow Hearing Aid Benefit Profile
      - Glasgow Hearing Aid Difference Profile
      - COSI
      - HHIE-S (screening)
      - Other

    An in-house questionnaire

    Completing an individual management plan

    Discussion with significant other

    Other (please specify)
1.5. Do you assess patient readiness and motivation for intervention?

Yes/no

If yes, how do you assess these (tick all that apply)

- A clinical interview
- An in-house questionnaire
- A published questionnaire
- Ida Institute motivation tools
- Discussion with significant other
- Other (please specify)

If yes, how does assessment of patients’ motivation inform your delivery of clinical services?

1.6. Does your service use patient self-report outcome measures YES / NO

NB these are measures that are reported directly by patients to describe the impact of their hearing loss and the intervention they receive.

These are not:
- measures of patient experience with the service
- behavioural tests such as speech discrimination
- objective measures such as Real ear measurement

1.7. Why do you use patient self-report outcome measures? (Please tick all that apply):

- To help plan additional appointments
- To enhance individual patient care
- To monitor patient outcomes
- To monitor and improve the service provided
- To justify resource allocation
- It is required by our contract
- We have to provide the data to the CCG
- Other (please specify)
- We do not use outcome measures

If not why?
Section 2: Measuring outcomes for individual patients

In this section, please answer the questions to tell us how you measure outcomes for individual patients.

2.1. Which tools do you use to measure individual patient outcome? (Please tick all that apply, even if not used all the time):

- Glasgow Hearing Aid Benefit Profile
- Glasgow Hearing Aid Difference Profile
- Client Orientated Scale of Improvement
- International Outcome Inventory – Hearing Aids (or others)
- SSQ (Speech Spatial Qualities)
- IMP-outcome score
- Generic (e.g. quality of life EQ5D, SF36)
- Specific for significant others (e.g. family or friends)
- In-house (please describe)
- Other (please specify)
- None

If none, please explain why?

- Too time consuming
- Burden on patients
- Limited or no added value for patient care
- Uncertain as to which is the best questionnaire to use
- Other (please specify)

2.2. Do you find these tools satisfactory for the purpose of measuring patient outcomes?

Yes/No

If no, why? What else would you want to see measured?

2.3. If you use any outcome measure(s), do you use it with:

- All patients (unless clinically or linguistically contraindicated (e.g. dementia/cognitive or English not first language)
- Most patients
- Some patients
If you selected some or most patients, please explain your criteria for deciding whether or not to use it (tick all that apply)

*Non attendance*

*English not first language*

*Dementia/cognitive problems*

*Too time-consuming*

*Only certain pathways*

*Specific patient groups*

*Only want a sample*

> If so, how do you choose patients (e.g. every third patient)?

*Other (please state)*

2.4. How long after intervention (e.g. hearing aids, communication tactics) for each patient does your service typically collect patient reported outcome measures? (tick all that apply)

< 1 month

1-2 months

3-4 months

5-6 months

6+ months

Not at all

2.5. For those patients for whom outcomes are reported, what proportion of patients report their outcomes by the following means? (approximately)

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<th>Method</th>
<th>0%</th>
<th>25%</th>
<th>50%</th>
<th>75%</th>
<th>100%</th>
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<tbody>
<tr>
<td>Face-to-face</td>
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<td>By telephone</td>
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<td>Other, please state</td>
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2.6. Who administers the outcome measures for face-to-face or telephone? (tick all that apply)

- Audiologist/clinical scientist
- Audiologist assistant
- Student audiologist
- Administrative assistant
- Speech and Language Therapist
- Hearing Therapist
- Other (please state)

2.7. How helpful are the outcome measures you use in evaluating the following for an individual patient post-intervention?

   Technological interventions (e.g. hearing aid)
   - Not at all
   - A little
   - Moderately
   - Very

   Non-technological interventions (e.g. communication strategies)
   - Not at all
   - A little
   - Moderately
   - Very

   Psychosocial impact of hearing loss
   - Not at all
   - A little
   - Moderately
   - Very

   Communication abilities
   - Not at all
   - A little
   - Moderately
   - Very

   Activity limitations (e.g. disability, speech intelligibility)
   - Not at all
   - A little
   - Moderately
   - Very

   Participation restrictions (e.g. handicap, social engagement)
   - Not at all
   - A little
   - Moderately
   - Very

   Involvement of significant others
   - Not at all
   - A little
   - Moderately
   - Very

2.8. Do you use different outcome measures for patients with complex needs than you do for routine patients?

   Yes/No

   If yes, which outcome measures do you use?
Section 3: Measuring outcomes for service evaluation

In this section, please answer the questions to tell us how you use outcome measures for the purposes of service evaluation and/or improvement.

3.1. Which outcome measures do you use for the purposes of service evaluation. (Please tick all that apply, even if not used all the time):

- Glasgow Hearing Aid Benefit Profile
- Glasgow Hearing Aid Difference Profile
- Client Orientated Scale of Improvement
- International Outcome Inventory – Hearing Aids (or others)
- SSQ (Speech Spatial Qualities)
- IMP-outcome score
- Generic (e.g. quality of life EQ5D, SF36)
- Specific for significant others (e.g. family or friends)
- In-house (please describe and include a copy of the )
- Other (please specify)
- None

If none, please explain why?

- Too time consuming
- Burden on patients
- Limited or no added value for patient care
- Uncertain as to which is the best questionnaire to use
- Other (please specify)

3.2. How **helpful** are the outcome measures you use in achieving the purposes of service evaluation?

| Not at all | A little | Moderately | Very |
Section 4: Provision of patient-reported outcome measure data outside of your service

4.1. Are you required to provide patient-reported outcome measures outside of your service?

Yes/No

If yes, who receives this outcomes information? (tick all apply)

- Directorate or non-audiology management
- Executive Board of your organisation
- Commissioner
- Other (please state) ..............................................................

4.2. Do you report on all collected outcome data?

Yes/No

If no, please explain why not

4.3. Are the processes for collecting and reporting outcome data subject to external scrutiny? (external = individuals not employed by your own organisation)

Yes/No

If yes, by whom?

If no, why not?

4.4. If outcomes data are used by commissioners, how do you think are they used? (tick all that apply)

- To monitor contractual requirements
- To work with us to improve the service
- To choose who provides the service
- We are paid according to the outcomes we achieve
- General
- I don’t know
- Other, please specify
4.5. If a national database of outcome measures was to be set up with the main purpose of providing evidence for the effectiveness of adult rehabilitation services, would you be interested in supplying anonymous outcomes data from your service?

   Yes/No/Maybe

4.6. If a practical guidance / toolkit about using outcome measures was made available by the British Society of Audiology would you make use of it?

   Yes/No/Maybe

Would you consider reassessing what you would do and changing what you do in the light of it?

   Yes/No/Maybe

4.7. Please provide the contact details of the person who filled in this survey

   Name:
   Role:
   Service:
   Email address:
   Telephone:

4.6. Please indicate if you are happy for use to contact you for more details on your answers, or if you would like to help us by supplying anonymous data from your service.

   Yes/no

**On behalf of the British Society of Audiology Adult Rehabilitation Interest Group, many thanks for completing this survey**