Development of an Implementation Planning Process for Patient-Reported Outcomes in a Clinical Setting

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Introduction

The EHR Access to Seamless Integration of PROMIS (EASI-PRO) consortium consists of nine universities sharing the goal of integrating measures from the Patient-Reported Outcomes Measurement Information System (PROMIS) into electronic health records (EHRs). To develop best practices for PRO implementation, a subset of institutions worked together to develop a planning process that clinics can use to prepare for EHR-integrated PROs. Our results are applicable to any group that aims to bring the benefits of patient-reported outcomes to the clinical setting.

To implement PROs successfully in a clinical setting, a clinic and an institution must make many collaborative and highly consequential decisions and arrangements. These include defining clinical goals; selecting measures; determining optimal populations, triggers, workflows, technical resources, and results management; and weighing institutional priorities and requirements. This presentation will present a planning process for PRO implementation and discuss results at four initial sites.

Methods

Information from past AMIA workshops, websites, and papers on PRO integration was assembled and clustered thematically into an Implementation Guide that incorporates sociotechnical factors from the Human-Organization-Technology Fit (HOT-fit) framework. Content from the Implementation Guide was transformed into a Decision Log consisting of over 90 discrete fields, which each implementation team completed through semi-structured interviews and collaboration among key stakeholders, including clinicians, informaticians, and PRO measurement scientists. Information in each clinic’s Decision Log was then summarized into a Clinic Implementation Plan for that clinic.

Results

Salient themes in our results include the critical role of the clinic PRO champion in providing leadership, the importance of working with multiple partners and diverse stakeholders, and the need to customize the PRO implementation to meet clinical aims. As an example of customization, an orthopedic clinic scheduled assessments of PROs into electronic health records (EHRs).

Conclusions

Our project elucidated the many local factors that are highly consequential in the success of clinical PRO implementation. We produced an Implementation Guide, a Decision Log, and a Clinic Implementation Plan Template to facilitate integration of PROs in clinical practice. These materials can be used by future clinics wishing to implement EHR-integrated PROs to plan for PRO implementation in a systematic manner.

References