

Developing a National Core set of Outcome Measures for Rehabilitation in Rheumatic and Musculoskeletal Diseases





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National Advisory Unit on Rehabilitation in Rheumatology (NKRR)







Who are we?

 Multidisciplinary research group

What do we do?

- Develop and communicate knowledge about rehabilitation in rheumatology
- Promote and strengthen an evidence based rehabilitation service nationally for people with rheumatic diseases.

Our main target groups

- Health professionals
- Patients
- Politicians and decision makers

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Background

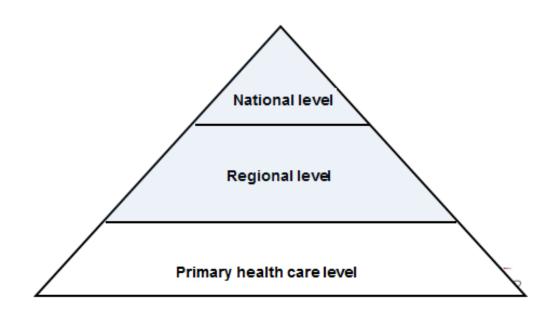
A core assignment for the National Advisory
Unit is to monitor and communicate quality of
rehabilitation for patients with rheumatic
diseases.





Background

 Patients with rheumatic and musculoskeletal diseases (RMD's) are in need of rehabilitation throughout periods of their lives







Background

- Evidence is scarce and there is no consensus of what outcome measures to use¹
- Lack of continuity between specialized care and primary care²





Aims

- Develop a national core set of outcome measures
 - Both in specialized care and in primary care
 - Both for clinical evaluations and for research
 - Multidisciplinary
 - Feasible and easy to use for patients (max. 20 minutes)
- «A relay baton» in the rehabilitation process, ensuring continuity in transitions between specialized- and primary care.





Two main steps

1. What are the 10 most important aspects to assess in rehabilitation for musculoskeletal diseases?

2. Which instruments are best to measure these 10 aspects?



Delphi consensus procedure and expert group



The Delphi expert group included 46 experts





The process -step by step

Selection of aspects of importance

Brainstorming

3 rounds of Delphi voting rounds

10 ASPECTS OF HEALTH

- Fatigue
- Pain
- Mental health
- Quality of life
- Social participation

- Goal attainment
- Motivation
- Coping
- Daily activities (ADL)
- Physical fitness



The process -step by step

Selection of aspects

Brainstorming

3 rounds of Delphi voting rounds

10 ASPECTS OF HEALTH

Selection of instruments for pilot test

Expert group + + literature search = 172 OM's

Inclusion and exclusion acc. to criterias = 22 OM's

Work shop
Voting
=11 OM's

Testing instruments

Pilot test (n=387)

Analysis of feasibility and responsiveness

Selecting instruments for final core set

Voting

FINAL CORE SET = 9 instruments



Outcome measures in the final core set

Hopkins NRS Pain NRS Fatigue Symptom Checklist Patient Specific Coop Wonca Functional Scale EQ 5D-5L Social incl. motivation **Participation Effective** Hannover 30 sec sit-to-**Functional Scale Consumer Scale** stand test





To be continued....

- A recommended core set of outcome measures are presented
- The core set is published online at <u>www.nkrr.no/klinisk verktøykasse/faglige anbefalinger</u>
 Research article is soon to be submitted.
- The core set is tested in rehabilitation settings for patients with RMD's but most OM's are generic so in the future it should also be tested on other diagnostic groups



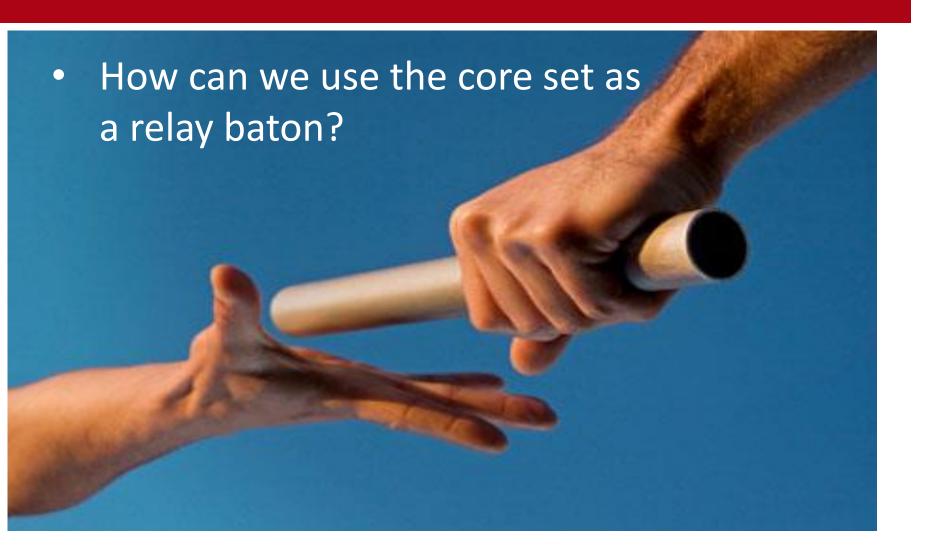


The Core set in use





Aim 1





Aim 2

 What happens after rehabilitation in specialised care for patients with

RMD's?



Method

- Multicenter observational study
- 9 rehabilitation centers and hospitals in all regions
- Electronic data collection started Nov 4.
- ~700-1000 patients
- Assessment:
 - admittance
 - discharge
 - 4,8 and 12 months after rehabilitation

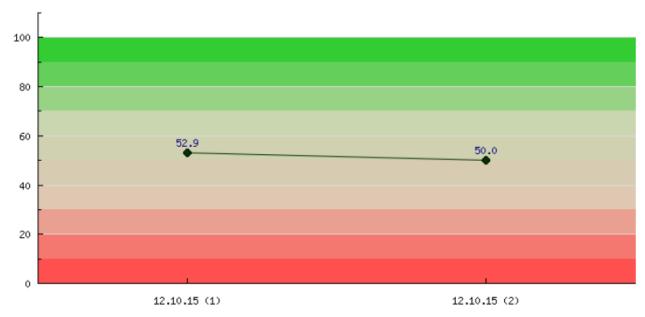




The core set as a relay baton

Mestring

100 tyder på at du i svært stor grad mestrer sykdommen



0 tyder på at du ikke mestrer sykdommen





The core set project thanks

- Exstra-stiftelsen
- Experts included in the Delphi group, and librarian Kari Engen
 Matre for valuable help in the literature search
- Patients participating in the pilot study







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