



# Identifying and Prioritizing Patient-Centered Research Questions: Software Training




*Kara Odom Walker, MD, MPH, MSHS*

*Program Officer, Improving Healthcare Systems*

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Patient-Centered Outcomes Research Institute

# Agenda

-  Background
-  Decision Analysis Web Tool
-  Web Survey Tool

# What is ExpertChoice?

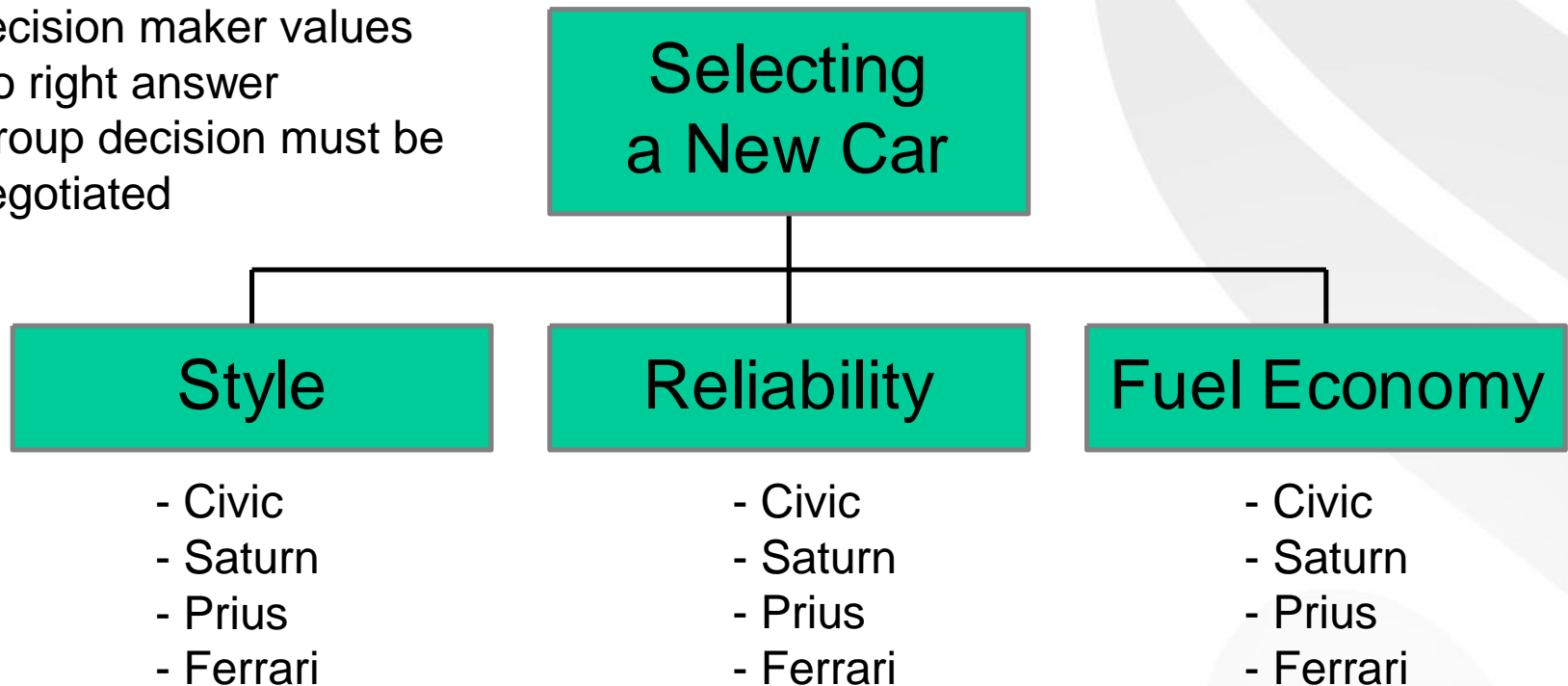
- ExpertChoice is a decision analysis software that is based on multi-criteria decision making that uses mathematical theory called analytic hierarchial process
- Created in 1983 by Thomas Saaty and Ernest Forman
- Serves over 100 Fortune 500 companies such as IBM, used by 30 Federal Agencies, and is taught in over 100 universities and used in 60 countries worldwide

# Analytic Hierarchy Process

- Information is broken into a hierarchy of alternatives and criteria
- Information is then synthesized to determine relative ranking of alternatives
- Both qualitative and quantitative information can be compared using informed judgments to derive weights and priorities

# Hierarchical Tree Example

- Hierarchy corresponds to decision maker values
- No right answer
- Group decision must be negotiated



# We've made it simple!



## Welcome to PCORI Research Prioritization using Expert Choice

Thank you for your participation in PCORI Research Prioritization. Your input will help PCORI determine which topics you have discussed to present should be the highest priority for PCORI funding.

You will now rate each topic based on the criteria on a 5 (high) to 1 (low) scale. This will generate your ranked list of topics which you will be able to view at the end of your ranking. We will discuss the overall ranked list when we reconvene.

Keep in mind you can always go back and adjust your ratings for any topic. You can refer to the guidebook, topic briefs or software training slides, there are also staff floating throughout to answer any questions you may have.

Please click **'Next'** to begin.

After completing the task on a page, you simply need to click 'Next' to continue. You may be alerted along the way of specific things to keep in mind.

If you need help, click the help icon  near the top right of the screen.

### Navigation Box

Steps: **1** 2 3 4 5 6 7 8 9 ... 18 Evaluated: 3/75

Next Unassessed

Previous Next



# Software for Ranking Activity: Expert Choice

- You'll receive a personal link via e-mail which you will retrieve at the time your panel decides to begin the ranking exercise
- Please use Internet Explorer or Safari browsers if possible; Mozilla Firefox is the best alternate
- You will score each topic based on the 5 criteria described earlier, using a 5 (high) to 1 (low) scale

# Scale

## Intensity of Importance

## Definition

1	Low Importance
2	Moderate Importance
3	Strong Importance
4	Very Strong Importance
5	Extreme Importance



# ExpertChoice Welcome Screen



» About » Logout   

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# If a Login Screen Appears...

The screenshot shows the Expert Choice web application interface. At the top left is the 'expertchoice' logo. At the top right are links for 'About' and social media icons. The main content area is split into two columns. The left column is for logging into the 'comparison SUITE'. It features the 'comparison SUITE' logo, the title 'Login to Expert Choice Comparison™', and input fields for 'E-mail:' and 'Password:'. Below these are links for 'Password Help?' and 'I have and would like to use an Access Code', a 'Remember me' checkbox, and a 'Log in' button. The right column is for joining a 'TeamTime™ Meeting'. It features the 'Comparison TeamTime™' logo, the title 'Join a TeamTime™ Meeting', and a blue box containing the text: 'TeamTime is a collaboration tool to brainstorm structure, and evaluate a decision in real-time.' Below this are input fields for 'Meeting ID:', 'Name:', and 'E-mail:', and a 'Join Meeting' button. At the bottom center, there is a message: 'Don't have a Comparison Suite account? [Sign up](#) right now!' followed by a red error message: 'Sorry, but project 'copy of Grp2 Oct29a as of...' is off-line. Contact the decision project organizer and request that it be put on-line'.

# Using the Topic Briefs in the Software

## Rate 1. Accountable Care Organizations and PCOs with respect to the following Objectives

1. Accountable Care Organizations and...

Compared to usual care, what are the effects of accountable care organization (ACO) care on PCOs among patients with chronic conditions?

**Introduction.** Chronic conditions are the leading cause of death in the United States. The quality of care provided to

Patient-centeredness

Is the proposed research focused on questions and outcomes of specific interest to patients, their caregivers, and clinicians? Is the proposed research focused on questions and outcomes of specific interest to patients, their caregivers, and clinicians?

1. Accountable... WRT Patient-centered...

Chronic conditions are the leading cause of death in the US. The quality of care provided to those with chronic conditions remains suboptimal, with little explicit attention given to PCOs, including measures of patient experience and care coordination in addition to health status. Highly intensive and expensive care has not improved outcomes

<input checked="" type="checkbox"/> Patient-centeredness	Not rated
<input checked="" type="checkbox"/> Impact of the Condition on the Health of Individuals and Populations	Not rated
<input checked="" type="checkbox"/> Options for Addressing the Issue	Not rated
<input checked="" type="checkbox"/> Likelihood of Implementation in Practice	Not rated
<input checked="" type="checkbox"/> Durability of Information	Not rated

Intensity Name	Priority
<b>Not rated</b>	
5 High	100%
4	75%
3	50%
2	25%
1 Low	0%

# Using the Topic Briefs in the Software

**Rate 1. Accountable Care Organizations and PCOs with respect to the following Objectives**

1. Accountable Care Organizations and... Patient-centeredness 1. Accountable... WRT Patient-centered...

**Compared to usual care, what are the effects of accountable care organization (ACO) care on PCOs among patients with chronic conditions?**

**Introduction.** Chronic conditions are the leading cause of death in the United States. The quality of care provided to

- ☐ Patient-centeredness
- ☐ Impact of the Condition on the Health of Individuals and Populations
- ☐ Options for Addressing the Issue
- ☐ Likelihood of Implementation in Practice
- ☐ Durability of Information

**Compared to usual care, what are the effects of accountable care organization (ACO) care on PCOs among patients with chronic conditions?**

**Introduction.** Chronic conditions are the leading cause of death in the United States. The quality of care provided to those with chronic conditions remains suboptimal, with little explicit attention given to PCOs, including measures of patient experience and care coordination in addition to health status. Highly intensive and expensive care has not improved outcomes for patients with chronic conditions.

In an effort to align physician incentives with improved quality of care, the Centers for Medicare and Medicaid Services (CMS) has designed a delivery model for Medicare patients known as Accountable Care Organizations (ACOs) that focuses on achieving the "triple aim" of high-quality patient care, improved population health, and reduced healthcare costs. Patients are to be assigned to an ACO based chiefly on the affiliation of their primary care physician. This care delivery model is patient-centered, with quality measures falling into four domains outlined by CMS: patient experience, care coordination and patient safety, preventive health services, and attention to at-risk populations. With ACO's commitment to prevention, care coordination, and case management, there is an expectation that PCOs will improve. Performance is to be evaluated on both process and outcome measures of quality, with patient experience an integral component. It is intended that meeting performance benchmarks will result in shared savings between the organization that enters into an ACO arrangement and CMS. ACOs are designed to change practice patterns by aligning incentives.

**Impact of the Condition on the Health of Individuals and Populations.** Advances in medicine and public health have resulted in increased life expectancy and a concomitant increase in the prevalence of chronic conditions. Patients with chronic diseases now represent more than half of the U.S. population and more than three-quarters of healthcare spending. In

100%

# Accessing Notes on the Criteria

## Rate 1. Accountable Care Organizations and PCOs with respect to the following Objectives

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Compared to usual care, what are the effects of accountable care organization (ACO) care on PCOs among patients with chronic conditions?

**Introduction.** Chronic conditions are the leading cause of death in the United States. The quality of care provided to

Durability of Information

Would new information on this topic remain current for several years, or would it be rendered obsolete quickly by subsequent studies? Durability is generally associated with the rate at which new clinical evidence and/or better alternatives for patient management are emerging. Durability might be limited

1. Accountable... WRT Durability of In...

While some work has been done to evaluate the methods by which patients will be assigned to an ACO, best practices need to be identified before health systems can confidently proceed with implementing ACOs. Work is also necessary in the development of measures to assess the performance of ACOs with respect to

<input type="checkbox"/> Patient-centeredness	Not rated
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# Using the Topic Briefs in the Software

Rate 1. **Accountable Care Organizations and PCOs with respect to** the following Objectives

1. Accountable Care Organizations and... Durability of Information 1. Accountable... WRT Durability of In...

Compared to usual care, what are the effects of accountable care organizations (ACO) care on PCOs among patients with chronic conditions?

**Introduction.** Chronic conditions are the leading cause of death in the United States. The quality of care provided to patients with chronic conditions is a key factor in the overall health of the population. Accountable Care Organizations (ACOs) are designed to improve the quality of care and reduce costs for patients with chronic conditions. However, there is still the need for much evidence generation and synthesis to identify these services.

**Objectives:**

- Patient-centeredness
- Impact of the Condition on Quality of Life
- Options for Addressing the Condition
- Likelihood of Implementation
- Durability of Information

While some work has been done to evaluate the methods by which patients will be assigned to an ACO, best practices need to be identified before health systems can confidently proceed with implementing ACOs. Work is also necessary in the development of measures to assess the performance of ACOs with respect to PCOs.

ACOs are designed to achieve the delivery of effective care. To be certain that ACOs benefit patients, one must demonstrate that this care improves the outcomes important to patients. The services prioritized by ACOs may allow patients with chronic illnesses to avoid unnecessary diagnostic tests and procedures that cause harm, anxiety, or additional downstream testing and interventions. It will be important that patients with chronic illnesses are empowered to make these and other choices for themselves based on their understanding of the evidence, including their own likelihood of benefiting from the intervention. Because ACOs explicitly focus on prevention, care coordination, and care management, if these improve, it is expected that PCOs will too. With the use of appropriate screening tests, use of appropriate preventive interventions, and patient behavior modification, PCOs should also improve. Care coordination strategies are aimed to reduce duplicate testing, to avoid drug interactions, and to improve the response to abnormal test results. Care management for at-risk patient populations should help patients to connect to the care they need. If successful, these should also improve PCOs. The underlying goal of ACOs is to impact on encourage the use of services that clearly benefit patients. However, there is still the need for much evidence generation and synthesis to identify these services.

100%

# Rating Topic Briefs Using the Criteria

## Rate 1. Accountable Care Organizations and PCOs with respect to the following Objectives

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Compared to usual care, what are the effects of accountable care organization (ACO) care on PCOs among patients with chronic conditions?

**Introduction.** Chronic conditions are the leading cause of death in the United States. The quality of care provided to

Options for Addressing the Issue

What current guidance is available on the topic, and is there ongoing research? How does this help determine whether further research in this area would be valuable?

1. Accountable... WRT Options for Addr...

There are no guidelines or systematic reviews about the impact of ACOs on PCOs. The current literature consists primarily of analyses and commentaries from policy experts as well as health care system leaders as they enter into ACO agreements with CMS. A recent review comparing the U.S. and comparable international health

<input type="checkbox"/> Patient-centeredness	Not rated
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<input checked="" type="checkbox"/> Options for Addressing the Issue	Not rated
<input type="checkbox"/> Likelihood of Implementation in Practice	5 High
<input type="checkbox"/> Durability of Information	4
	3
	2
	1 Low

Intensity Name	Priority
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<input type="checkbox"/> Durability of Information	4

Intensity Name	Priority
Not rated	
5 High	<div style="width: 100%; background-color: #808080;"></div> 100%
4	<div style="width: 75%; background-color: #808080;"></div> 75%
3	<div style="width: 50%; background-color: #808080;"></div> 50%
2	<div style="width: 25%; background-color: #808080;"></div> 25%
1 Low	<div style="width: 0%; background-color: #808080;"></div> 0%

# When You Make it Through the Scoring..

You have completed providing your judgments. These percentages are the relative priorities of the Alternatives.

Show results as:

No. ▲	Name	Participant results	Bar Graph
1	Accountable Care Organizations and PCOs	3.87%	
2	Effects of Models for Chronic Disease Management	4.97%	
3	COPD Management	6.63%	
4	Cancer Management	7.73%	
5	Palliative Care Management	11.05%	
6	Pregnancy Management	8.29%	
7	Care Management of Multiple Chronic Conditions	4.97%	
8	Medical Homes	8.29%	
9	Non-Physician Medical Homes	6.08%	
10	Mental Health and Primary Care Co-location	5.52%	
11	Rural Trauma	7.73%	
12	Health IT and Treatment Guidelines	5.52%	
13	Quality Improvement Strategies	5.52%	
14	Effect of Insurance Features	6.08%	
15	Transitions in Care and Patient Safety	7.73%	



These scores were inserted at random for training purposes only and do not in any way reflect PCORI's preference.

# Need to Go Back?

You have completed providing your judgments. These percentages are the relative priorities of the Alternatives.

Show results as: Priority

No. ▲	Name	Participant results	Bar Graph
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15	Transitions in Care and Patient Safety	7.73%	



Steps:

1

...

12



13

14

15

16

17

18

19

20

Evaluated: 80/80

# Your Screen May Appear Like This..

You have completed providing your judgments. These percentages are the relative priorities of the Alternatives.

PCORI prioritizing... (100.0%)

- Patient-centeredness (20.0%)
- Impact of the Condition... (20.0%)
- Assessment of Current Opt... (20.0%)
- Likelihood of Implementat... (20.0%)
- Durability of Information (20.0%)

Show results as: Priority












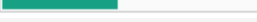
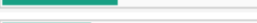


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13	Quality Improvement Strategies	5.52%	
14	Effect of Insurance Features	6.08%	
15	Transitions in Care and Patient Safety	7.73%	



# Your Ranked List in Priority Order

You have completed providing your judgments. These percentages are the relative priorities of the Alternatives.

Show results as:

No.	Name	Participant results ▼	Bar Graph
5	Palliative Care Management	11.05%	
6	Pregnancy Management	8.29%	
8	Medical Homes	8.29%	
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15	Transitions in Care and Patient Safety	7.73%	
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12	Health IT and Treatment Guidelines	5.52%	
13	Quality Improvement Strategies	5.52%	
10	Mental Health and Primary Care Co-location	5.52%	
2	Effects of Models for Chronic Disease Management	4.97%	
7	Care Management of Multiple Chronic Conditions	4.97%	
1	Accountable Care Organizations and PCOs	3.87%	



# Expected Time Commitment

- Online tools should be easy to use, each program area has adopted a different approach for how and when you will complete ranking exercises
- Software experts will be floating throughout the day
- After all panelists in your group have completed the exercise, PCORI program staff will generate the overall list for use in the discussion

# Final Ranking

- Discussion about important features of each potential research topic will guide the ranking
- All of the discussion is used as important input
- We want to document the groups final ranking using a consensus building approach

# Final Ranking Tool: Survey Gizmo

Thank you for your contributions that have helped us reach this part of the PCORI Research Prioritization process. This tool is intended to serve as a vehicle that will help PCORI get your input on the short list of highly prioritized topics.

1. Keeping in mind the criteria for PCORI research funding, please prioritize the questions for PCORI, with 1 being the highest priority for PCORI to fund and 6 (or X, depending on how many topics panels select as top tier) being the lowest.\*

	1	2	3	4	5	6
Topic 1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Topic 2	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Topic 3	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Topic 4	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Topic 5	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Topic 6	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Submit






0%



# Link to Online Survey

- Rank your list: from 1 (your first choice topic) to 5 (or more—depending on how many topics your group decides—for your lowest)
- Your group facilitator will provide the link and final number of topics

# Final Results: Combination of All Participant Rankings

-  Topic #1
-  Topic #2
-  Topic #3
-  Topic #4
-  ... and more

# Thank You for Your Time and Support of This Important Process

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