

Final report N57: Identification of items for inclusion in a standardised resource-use measure

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1 February 2015 – 31 January 2017

Original objectives

- To identify a core set of economically important resource-use items that are suitable for future inclusion in a modular patient-reported resource-use measure.
- To review current resource-use instruments to assess similarities and differences and to extract a 'long list' of potential items.
- To use Delphi methodology to achieve a consensus opinion on which resource-use items from the 'long list' should be included.

What was achieved

- The review of current instruments stored in DIRUM (the Database of Instruments for Resource-Use Measurement, www.dirum.org) resulted in the extraction of over 2000 potential items for inclusion. Following scrutiny for overlap and subsequent deduplication, the items were reduced to a list of 350. Further inspection allowed the list to be reduced to 60 key items relevant to an NHS and personal social services perspective. The repetition and overlap among instruments suggested that defining a core set of items for use in economic evaluations is feasible.
- Health economists with experience of working on trials in the UK were recruited to an expert Delphi panel via an email to the Health Economists' Study Group mailing list. Health economists who had recently published NIHR HTA reports or attended relevant workshops were also approached directly. By means of an electronic Delphi survey, participants were asked to rate each of the 60 items on a scale of 1 to 9 according to how important they felt the item was in a generic context.
- 45 health economists took part in the first round of the Delphi survey, with over 90% (42/45) participating in round 2. Following the results of the first round, the 'long list' was reduced to 34 items. Increased consensus on the most important items was achieved following the second round.
- Following the Delphi survey and discussions among the project team, we defined a core list of ten items that health economists with experience of working on

randomised controlled trials in the UK believe should be present in a generic resource-use measure. We also designed a modular approach to developing such an instrument, and identified several areas that are suitable for forming additional 'bolt-on' modules to increase the breadth and depth of the measure.

- Although we initially intended to include patients in the Delphi survey, it became very clear that the task was not meaningful and that patient input would be better targeted at the instrument development stage. We therefore recruited a patient and public involvement representative to the study team to ensure that the direction the project took did not conflict with a patient perspective.
- A publication describing the results of the Delphi survey is currently under review with *Value in Health*.
- The review results were disseminated via the International Society for Pharmacoeconomics and Outcomes Research European Congress (*Value in Health* 18(7):A688) and the International Clinical Trials Methodology Conference (*Trials* 16(Suppl 2):O26). The Delphi survey results were presented at the Health Economists' Study Group meeting in Gran Canaria, June 2016. MRC HTMR funding was acknowledged in all research outputs.

Next steps

- The next step is to develop the identified items into a standardised patient-reported resource-use instrument for use in randomised controlled trials. We have secured funding for a PhD student, who is scheduled to start the work in October 2017.
- The results of the Delphi survey will be presented at the International Clinical Trials Methodology Conference in Liverpool, May 2017.
- In addition to the Delphi survey publication described above, the results of the review of current instruments are also being written up for publication.
- Both the Delphi survey and review publications will be disseminated via the DIRUM website (www.dirum.org). An entry for the HTMR Guidance Pack website will be prepared.
- We plan to use the experience gained in Delphi methodology to conduct a Delphi survey to identify the key content for a Health Economics Analysis Plan.