

Using a partnership model for priority setting

Katherine Cowan

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What will I cover?

- •What is the James Lind Alliance (JLA)?
- •What do we do and why do we do it?
- •How do we do it?
- •What difference does it make?



What is the JLA?

•A small initiative – four part-timers



•Funded by the National Institute for Health Research

National Institute for Health Research

Supported by the Medical Research Council





What is the JLA?

- •Established in 2004 to see if it would work
 - •Royal Society of Medicine Dr John Scadding
 - •James Lind Library Sir Iain Chalmers
 - •INVOLVE Sir Nick Partridge
- •From 2013: the NIHR Evaluation, Trials and Studies Coordinating Centre (NETSCC)



NIHR Evaluation, Trials and Studies Coordinating Centre

What is the JLA?

- Tackling treatment uncertainties together
- •Finding out what research is important to:
 - Patients / service users
 - Carers
 - Clinicians / healthcare professionals

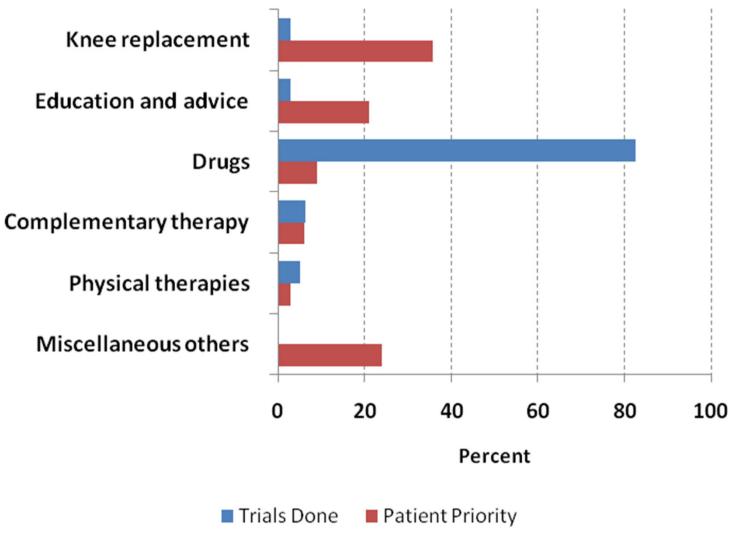


Why involve stakeholders?

Why involve patients, carers and clinicians in research priority setting?



Why involve stakeholders?



Tallon, D. *et al.* (2000) 'Relation between agendas of the research community and the research consumer', *The Lancet*, Vol. 355. pp. 2037-40



What do we do?

- Priority Setting Partnerships
 - Patients, carers and clinicians
 - Focusing on single conditions
 - Identifying uncertainties about treatments
 - Prioritising the ones they think are most important for research to address
 - •A top 10



What do we do?

Completed Partnerships	Current Partnerships
•Asthma	•Cleft lip and palate
 Urinary incontinence 	•Dementia
•Vitiligo	Head and neck cancer
Prostate cancer	•Lyme disease
•Schizophrenia	•Pressure ulcers
•Type 1 diabetes	Pre-term birth
•ENT aspects of balance	Sight loss and vision
•Stroke	•Tinnitus
•Eczema	



The priority setting process:

- Set up steering group
- Invite partners
- Gather uncertainties
- Prioritise uncertainties
- Promote priorities to researchers and funders



Set up steering group

- Patient, carer and clinician representatives
- Resources and expertise
- Protocol



Invite partners

- Patients, carers, clinicians and their representatives
- Declaration of interests
- Affiliation
- Exclusions



Invite partners

Case study: Sight Loss & Vision Priority Setting Partnership

- •19 April 2012
- •78 attendees
- Organisations representing patients and healthcare professionals
- www.sightlosspsp.org.uk







Patient perspective Carol Bronze



Optometry Jo Mullin

















- Gather uncertainties
 - no up-to-date, reliable systematic reviews of research evidence addressing the uncertainty about the effects of treatment exists
 - up-to-date systematic reviews of research evidence show that uncertainty exists



Gather uncertainties

- Survey
 - Patients and carers
 - Clinicians
- Research recommendations
- •UK Database of Uncertainties about the Effects of Treatments (UK DUETs)

www.library.nhs.uk/duets





Gather treatment uncertainties

Case study: Type 1 Diabetes Priority Setting Partnership

Do you have an unanswered question or an uncertainty about the treatment of type 1 diabetes? Do you think that answering that question through research will help to improve the lives of people with type 1 diabetes? This is your chance to make your views known.

- 1. What question(s) about the treatments for type 1 diabetes would you like to see answered by research? (You can submit as many or as few as you like.)
- 2. Consent
- 3. Some questions about you
- 4. Next steps















Check treatment uncertainties

Case study: Type 1 Diabetes Priority Setting Partnership

- Online survey promoted via partners and the JLA
- •583 people submitted 1141 uncertainties
- •890 were true uncertainties
- •118 uncertainties came from research reccs/literature
- •Combining duplicates, there were 350 verified uncertainties
- Steering Group shortlisted 47 based on number of submissions















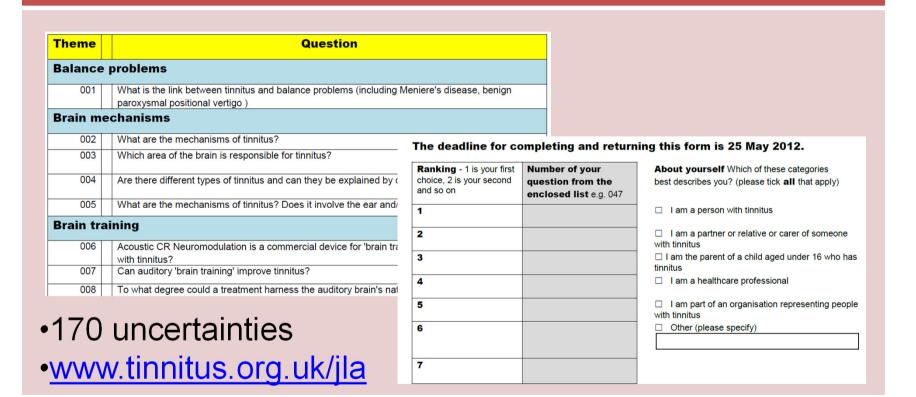
Prioritise uncertainties – step 1 (interim stage)

- From a long list to a short list
- Top 10 uncertainties chosen by partners
 - As individuals
 - On behalf of members
 - On behalf of colleagues
 - Representing an organisation



Interim prioritisation

Case study: Tinnitus Priority Setting Partnership















Prioritise uncertainties – step 2 (final)

- Priority setting workshop
- Patients, carers and clinicians
- A day of democratic discussion and ranking
 - Nominal Group Technique
- Prioritise the remaining uncertainties
- •Agree the top 10



Final priority setting







Final priority setting







Promote priorities to researchers and funders

- NIHR Health Technology Assessment programme
- Dissemination of findings



Asthma

•Funding has been awarded by NIHR HTA programme to fund research to provide better evidence on the effects of breathing exercises for asthma



- Urinary Incontinence
 - •Five related studies have been funded and several more are in development, addressing six of the top 10 priorities, with two combined.



- Vitiligo
 - •A pharmaceutical company is preparing to run a pilot multi-centre trial on number 6 of the top 10.
 - •The Centre of Evidence Based Dermatology is developing two research ideas from the top 10 into a trial protocol.
 - www.vitiligostudy.org.uklight therapy



- Prostate cancer
 - •The prioritised list has informed the research funding strategies of Prostate Action and the Prostate Cancer Charity.
 - •Over 15 projects addressing the priorities have been funded since the workshop in October 2010.



Involving stakeholders in research priority setting – the JLA's principles

Inclusive

- Balance of perspectives
- Accessible to all

Supportive

Recognising a range of capacities and skills

Transparent and democratic

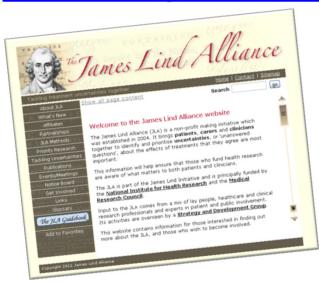
- Data sharing
- Agreed protocol
- Declaration of interests
- Neutral facilitation
- Communication and feedback





For more information...

www.lindalliance.org – become an Affiliate www.JLAguidebook.org - practical guidance







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Thank you!

