

**ISWP Evidence-based Practice Working Group
Comparative Effectiveness Research Subcommittee**

March 3, 2016 Meeting Recap

The ISWP Evidence-based Practice Working Group Comparative Effectiveness Research (CER) Subcommittee met by conference call on Thursday, March 3, 2016 from 10:00 a.m. to 11:00 a.m. U. S. Eastern Time. This provides a recap.

Link to Meeting Recording: <https://iswp.adobeconnect.com/p5jz217lc7f/>

Next Meeting: Thursday, April 7, 2016, 10:00 a.m. U.S. Eastern Time.

Discussion (action items in bold/underline)

1. ***Country Data Collection Subcommittee Update:*** Nancy reported on the Country Data Collection Subcommittee, including the Subcommittee's invitation for the CER group to participate on the next call (March 17) to better understand the CER Subcommittee's data needs and extent to which the CER Subcommittee may need additional resources for its data gathering efforts.

Nancy will: a) forward the matrix to the group for review; and b) send details for CER Subcommittee members to participate on Thursday, March 17 Country Data Subcommittee call.

2. ***Defining Effectiveness Framework:*** Subcommittee reviewed the Effectiveness framework model Deepan presented previously.
 - a. ***Level of Resources:*** Johan suggested using the WHO 8 steps for wheelchair provision in place of the three service provision components listed in the framework (Assessment, Training, Follow-up).
 - b. ***Improvements in Health:*** Following a discussion regarding the best category for factors such as education, employment, and customer satisfaction, Johan and Deepan agreed to incorporate the International Classification of Functioning, Disability and Health (ICF) system. ICF includes personal factors, environmental factors, body functions and



structures, and activity and participation. **Johan** previously designed a framework based on ICF and will forward to the subcommittee. Deepan agreed ICF would make the framework clearer, especially because it could be based on existing definitions. The ICF categories are very broad, but the model has subcategories, and some categories are more detailed and include scoring tools. Johan felt it would be easier for others to accept the model if it is based on the ICF.

- c. Among the components currently listed, Johan suggested:
 - i. Merging social with economic to become “socioeconomic” well being measures as social is quite broad. Physical and psychological will remain separate.
 - ii. Changing “Improvements in Health” to “User” and “Level of Resources” to just “Resources” so that the categories are broader.

Deepan will edit the framework flowchart.

3. **Defining Goals of the Subcommittee:** Deepan suggested narrowing the focus to 2-3 goals and then developing a list of tasks to complete those goals. **Deepan** will create the initial draft and send to subcommittee members as a starting point for group discussions.
4. **Outcome Measure Database:** **Deepan** will start an EndNote library. It cannot be public due to copyright, but it will be good for the subcommittee to use. Nancy asked if the entire Evidence-based Practice Working Group could have access to the Google Drive, including the EndNote library. Deepan suggested indicating that this is for internal use only. **Nancy** will discuss with Jon.
5. **Funding Proposal:** The group discussed the timeline for a meeting in Dublin, as the subcommittee will only have two more calls before the meeting. (The Advisory Board will vote on the funding proposal by March 11.) Deepan has started to identify ESS speakers who could be invited to provide input on the conceptual framework. He also suggested inviting others.
6. **Evidenced Based Practice Working Group:** Nancy reported on the EBP Working Group meeting earlier on March 3. Please see the working group notes for the full recap.
7. **ACCESS Project:** Deepan stated that the ACCESS project has written a white paper. **Deepan** will send to the subcommittee.
8. **Inviting Training WG members:** Deepan suggested postponing inviting the Training Working Group until a future call – after the subcommittee has developed the framework further.

Participants

- ✓ Johan Borg, Lund University
- Nathan Bray, Centre for Health Economics and Medicines Evaluation
- Molly Schengel, Free Wheelchair Mission
- Kavi Bhalla, Johns Hopkins University
- ✓ Deepan Kamaraj, University of Pittsburgh
- ✓ Rachel Gartz, University of Pittsburgh
- ✓ Nancy Augustine, University of Pittsburgh

Prepared by: Rachel Gartz