Enhancing Outcome Measurement Self-Report - Performance - Pain

Self-report measures the individual's *perception* of how his or her impaired body function or structure is limiting activities and participation. Performance measures provide actual *data* to the healthcare professional about the level of impairment in body structure or functions. Some measures are more suited to self-report or can be performed only via self-report, such as an individual's confidence or satisfaction measures. Other measures are better suited for observing the actual performance.

There are some patients for whom standardized self-reported disability outcome measures are insufficient. The same activity a self-report measure may have different results when compared to actual performance measure. Studies have shown there is only moderate correlation between self-report and performance measures. [1] Some patients under-report or exaggerate self-reported disability outcomes measures.[2-9] There is a modest correlation between pain and physical performance. [10] Physical performance test are not useful indicators of pain. Physical performance tests are useful indicators of disability.

Performance measures are much less frequently used than self-report measures. [11] When time and resources allow a more comprehensive assessment including both self-report and performance measures may be preferred. Although performance measures provide unique and useful information about patient functioning over and above self-report measures it is not entirely clear which of the many possible performances to assess. [11]

Both types of measures are affected differently by physical and psychological factors. Each provides unique and complementary information to the construct of physical function. [12]

The utilization of self-report measures has increased because of Functional Limitation Reporting (G codes) is a Centers for Medicare & Medicaid Services (CMS) reporting regulation for physical therapists, occupational therapists, and speech-language pathologists who provide outpatient therapy services to Medicare beneficiaries. Medicare will not reimburse providers for claims lacking FLR data. There are multiple lists and registries of self-report outcome measures available. Proprietary electronic medical records systems have incorporated standardized self-report measures. The current standard of practice is to default towards self-report measures as opposed to actual performance measures because of time, resources, and cost.

Actual performance based measurements are under-utilized in management of painful musculoskeletal conditions.[13] Most Physical Therapists consider outcome measures important, only half report using outcome measures after the intervention.[14] The majority of outcome measures utilized are self-report, not performance measures. Currently available lists and registries of outcome measures include very few if any actual performance measures for painful musculoskeletal conditions. Ideally a combination of self-report measures and actual performance measures should be utilized.[15-23]

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One of the challenges of using performance functional outcome measures it is difficult to calculate a change score comparing intake to discharge. At the time of initial evaluation the patient limitations and impairment it may not be safe or appropriate to utilize a performance based measure; however at time of discharge a more challenging performance measure is appropriate. Another challenge is therapist have difficulty interpreting the results of standardized outcome measures. [24]

There is a need to have a logical progression of performance based outcome measures from simple to complex that can show an ordinal change in actual observed performance.

Clinicians need a system or process to assess and interpret the different clinical outcome measures including self-reported measures, performance measures, and pain measures.[25-28]

There is a need to agree on outcome measurements among clinicians. There is a need for a comprehensive list of musculoskeletal performance measures.

References from slides in power point

Abilities slide #8 http://catalyst.nejm.org/chronic-pain-care-falls-short/

"Look at truth telling as a process instead of an outcome" [29]

Yellow flags and blue flags [30]

Symptom Magnification Syndrome [31]

Lies in Doctor Patient Relationship [29]

Documenting Self-limiting Behavior [32]

Rapid Grip Exchange self-limiting behavior [33]

Self-limiting behavior trunk accelerations during sit to stand [34]

Sincerity of effort during performance testing [29, 35]

Recalibration of pain visual analog scale by Steve Allison https://www.linkedin.com/pulse/how-do-you-know-injured-worker-exaggerated-pain-fce-steve

Lumbar performance measures [10, 36-42]

Lower extremity performance measures [43-47]

Knee performance measures [48, 49]

Foot and Ankle performance measures [46, 50, 51]s

Cervical performance measures [52-54]

Shoulder performance measures [41, 52, 54]

Elbow performance measure [55]

Performance measures through continuum of care [28, 56]

Adding pain measure to performance measure [25-27, 49]

Slide 92 Cognitive Behavior Therapy O'Sullivan, Dankaerts (57)

Interpretation/Assessment: Self-Report Measures; Actual Performance Measures; Pain During Performance Measures

Proportionate Credible	**Not Proportionate Not Credible**	**Not Proportionate Uncertain Credibility**
Self-perceived disability is **High** (significant disability) **Low** actual performance **High** level pain irritability during performance measurement *Dysfunctional& Painful* Is functional performance test to difficult try easier test? Check secondary exam correct movement see if it decreases pain. Modalities, manual therapy	Self-perceived disability is **High** (significant disability) **High** actual performance **High** level pain irritability during performance measurement *Functional & Painful* Is self-report measure to difficult? Is performance test to easy? Check if medical condition is contributing to pain. Check Fear Avoidance Score, & if fear avoidance score is high modalities manual therapy, exercise not indicated. Cognitive Behavioral Therapy, use progression of physical activity/exercise to desensitize patient to fear of activity/exercise. Use "Motivational Interviewing" to negotiate with patient Develop or refer to chronic pain management team	Self-perceived disability is **Low** (not disabled) **Low** actual performance **High** level pain irritability during performance measurement *Dysfunctional & Painful* Is self-report measure to easy? Is performance test to difficult? Design performance test to provide evidence of self-limiting behavior or lack of sincerity (5 position grip strength, sit to stand test requesting max effort) Modality, manual therapy, carefully change movement patterns evaluate results Check emotional state denial versus magnification. Check data base on drug seeking behavior

	Check data base on drug seeking behavior Referral for full Functional Capacity Evaluation Is Physical Therapy indicated? Confront patient, contact lawyer case manager settle case	
Self-perceived disability is **Low** (not disabled) **High** actual performance **Low** level pain irritability during performance measure *Functional& NOT Painful* Is performance test to easy? Encourage general exercise, good to go	Self-perceived disability is **Low** (not disabled) **High** actual performance **High** level pain irritability during performance measurement *Functional & painful* Is self-report measure to easy? Is performance test to easy? Modalities manual therapy, exercise not indicated, check if medical condition is contributing to pain Referral to chronic pain management team Check data base on drug seeking behavior	Self-perceived disability is **Low** (not disabled) **Low** actual physical performance **Low** level of pain irritability during performance measurement *Dysfunctional & NOT painful* Is self-report measure to easy? Is performance test to difficult? Change movement patterns, corrective exercises
Self-perceived disability is **High** (significant disability) **High** actual physical performance L**ow** level of pain irritability during performance measurement *Functional & NOT Painful* Credible but stoic need to address safety	Self-perceived disability is **High** (significant disability) **Low** actual physical performance L**ow** level of pain irritability during performance measurement *Dysfunctional & NOT Painful* Is self-report measure to difficult? Is performance test to difficult? Check Fear Avoidance Score Use Corrective exercise	

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