

# By the end of my 10 minutes, you will learn..

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- What **IPPOSI** stands for?
- How Patient Experience Mapping **is relevant in/across Europe?**
- Importance of integrating **Patient Experience Data** with **Patient Engagement**

PATIENTS

SCIENCE

INDUSTRY

*Irish Platform for Patient Organisations, Science and Industry*

IPPOSI



PATIENTS

SCIENCE

rb.ie

***IPPOSI is a patient-led organisation  
that works with patients, science & industry  
to put patients at the heart of health innovation***

IPPOSI

# What IPPOSI does, and how?

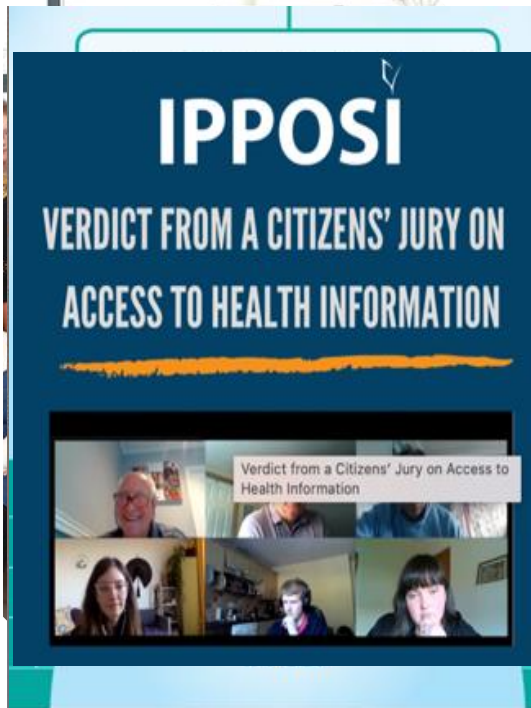
EDUCATION

ADVOCACY

INSIGHT

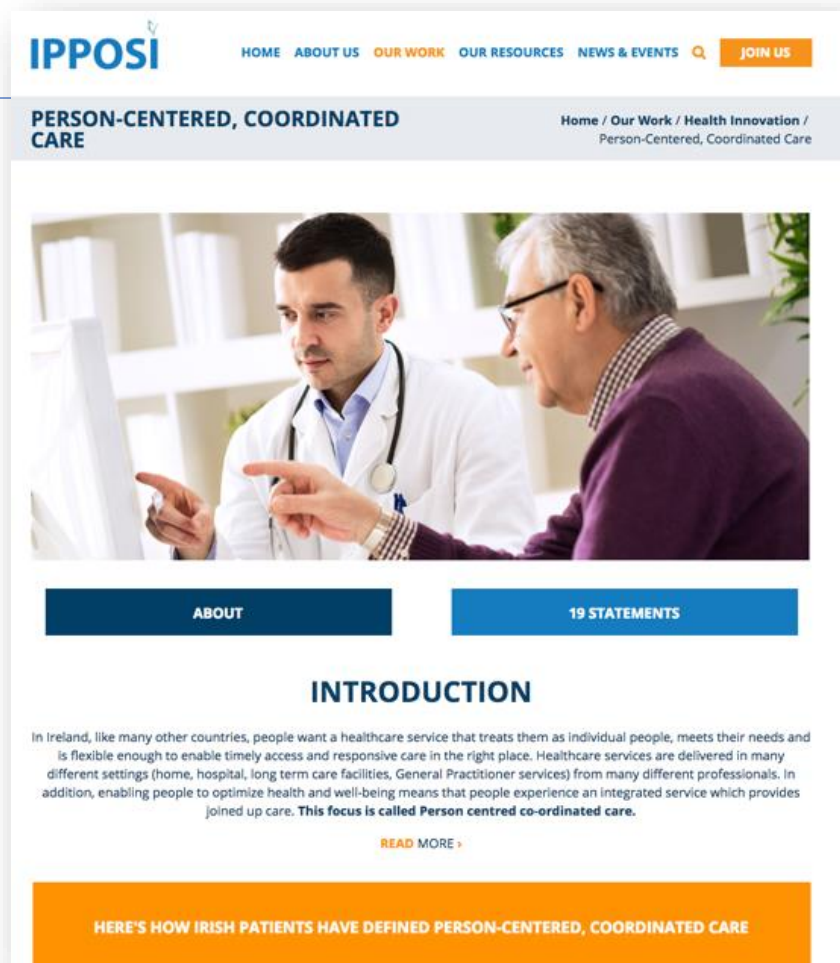
## Our Patient-led, Public Private Partnership

<b>151</b>	<b>patient organisations*</b>	<small>*represents the largest network of patient organisations in the country</small>
<b>137</b>	<b>individual patients</b>	
<b>258</b>	<b>individual scientists/researchers</b>	
<b>23</b>	<b>healthcare companies</b>	



- Patient Training programmes
- Patient Matchmaking
- Patient Dragon's Dens
- Citizens' Juries
- In-person/virtual conferences
- Policy consensus positions
- Member resources
- Coalitions and networks
- International leadership

# Patient experience mapping in Ireland





# Latest Phase

<http://www.hse.ie/yourvoicematters>



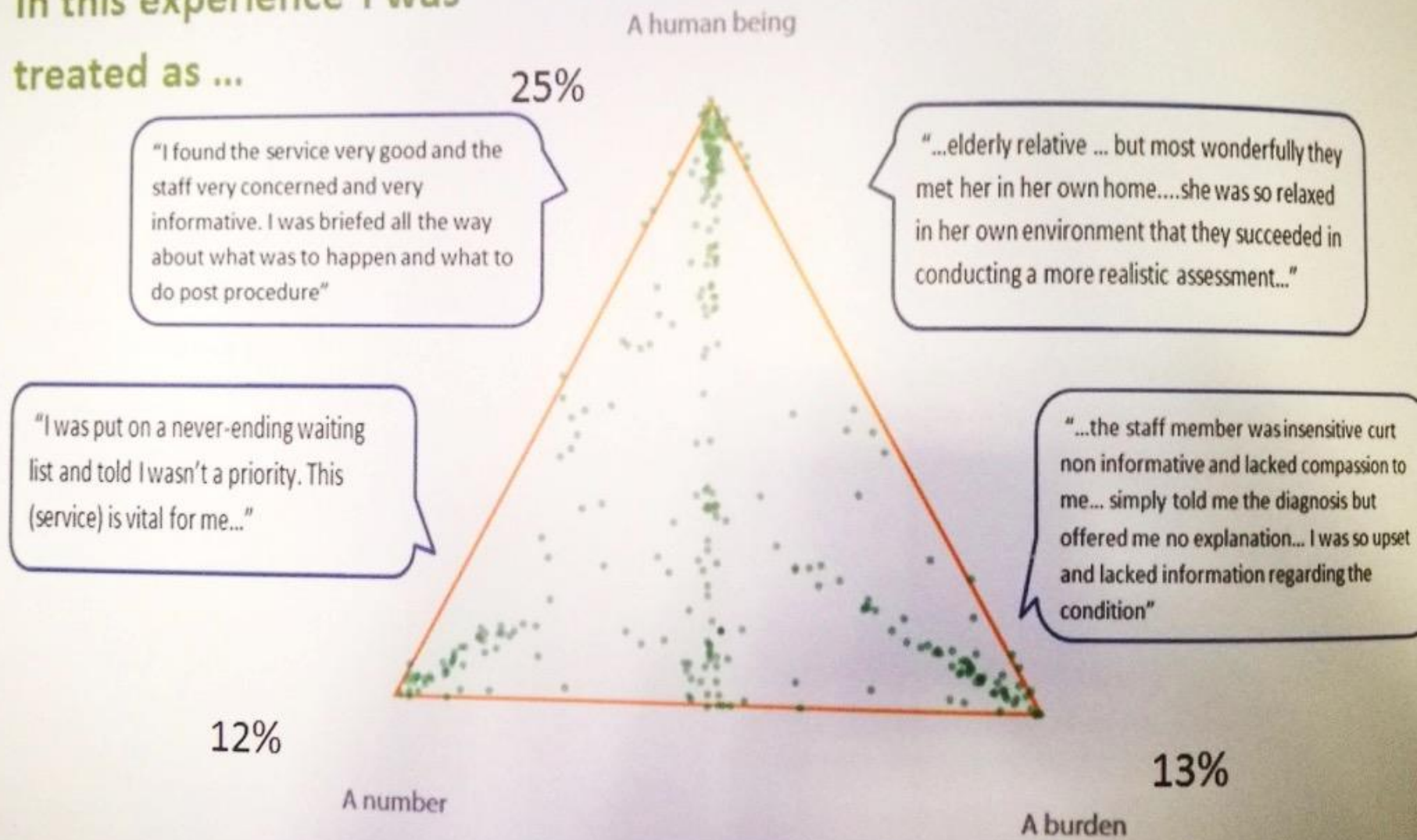
The patient engagement framework, based on the principles of co-design and co-production, consists of:

- an online survey that utilizes a software programme SenseMaker®
- processes for staff and patients to work together to analyse the data from the survey
- processes for staff and patients to identify key areas for service development or improvement

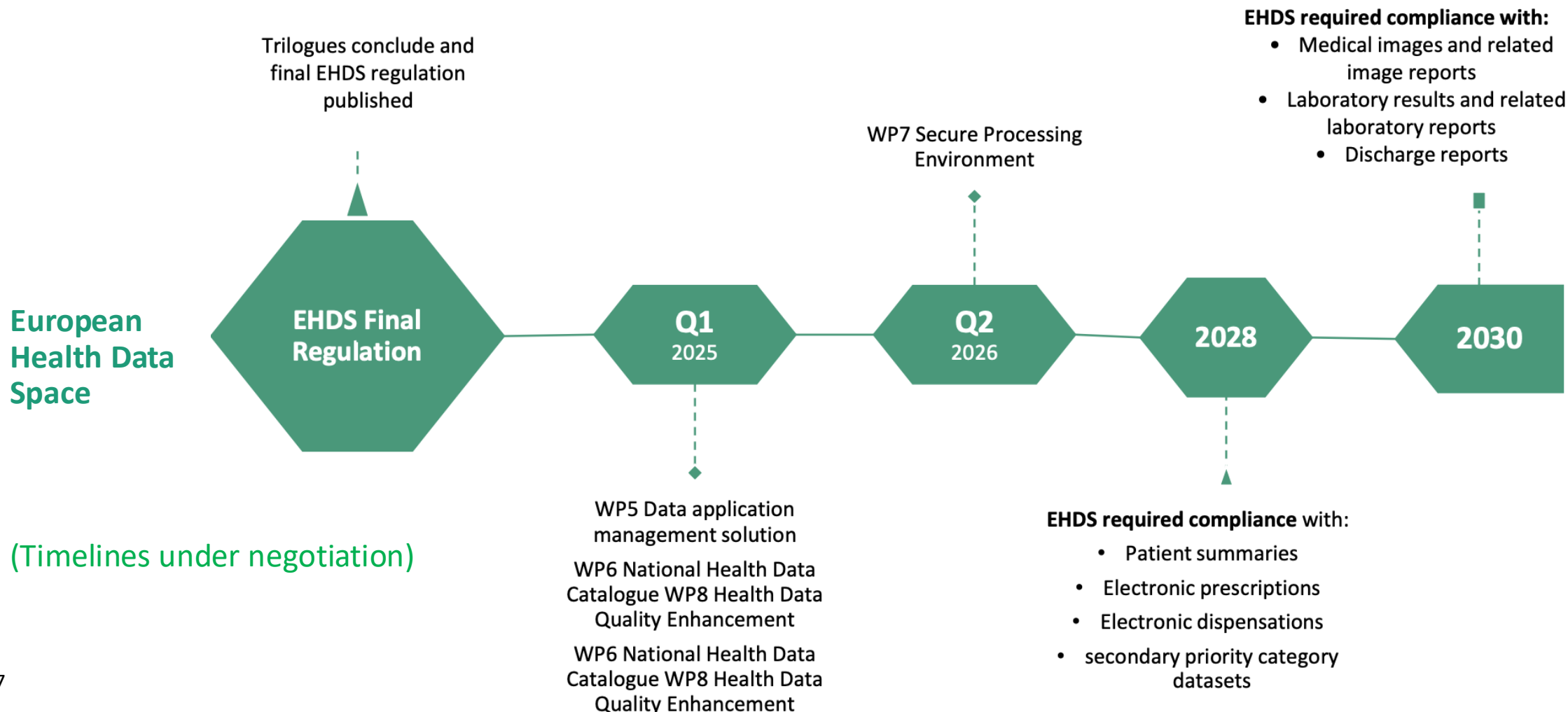
***“Patients and service users cannot just be storytellers in the co-production process; they need to be involved in the solution”***

***Patient Partnership Panel Member,***

## In this experience I was treated as ...



# Setting up national health data access services



# IPPOSI at EU + Global Levels

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PATIENT FOCUSED  
MEDICINES DEVELOPMENT

[www.pfmd.org](http://www.pfmd.org)



[www.eupati.eu](http://www.eupati.eu)



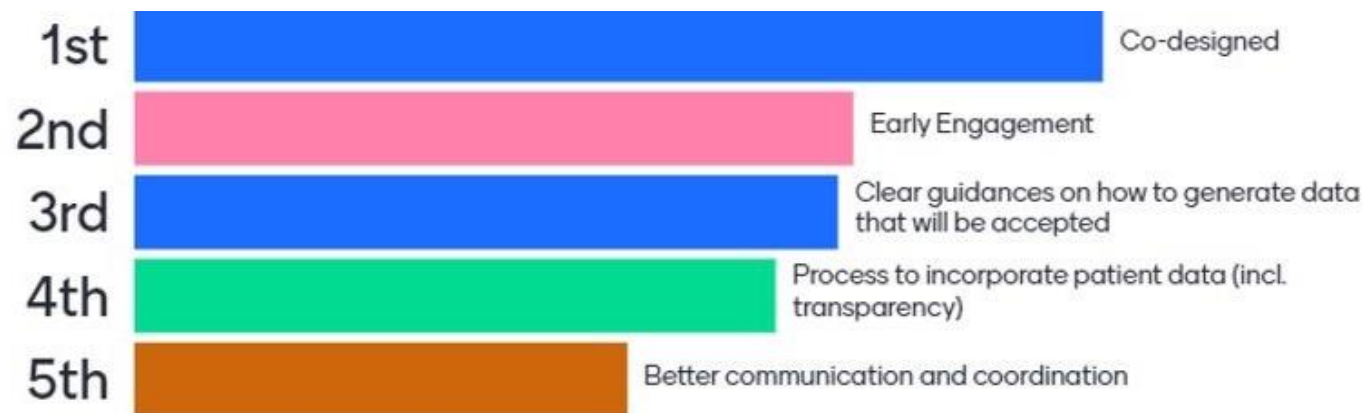
[www.oecd.org/health/paris](http://www.oecd.org/health/paris)





## Regulatory Level Considerations

*The top 5 'Guiding principles' to help stakeholders ensure that Patient-Generated Health Data (PGHD) is incorporated to meaningfully improve HTA*



ISPOR European Patient Round-Table, 2021

frontiers | Frontiers in Medicine | Sections | Articles | Research Topics | Editorial Board

### Leveraging patient experience data to guide medicines development, regulation, access decisions and clinical care in the EU

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 Ana António<sup>5</sup> Juan Garcia Burgos<sup>4</sup> Patrice Verpillat<sup>3</sup>  
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<sup>5</sup> Referrals Office, Quality and Safety of Medicines Department, European Medicines Agency, Amsterdam, Netherlands  
<sup>6</sup> Regulatory Practice and Analysis, Medsafe—New Zealand Medicines and Medical Devices Safety Authority, Wellington, New Zealand

<https://www.frontiersin.org/journals/medicine/articles/10.3389/fmed.2024.1408636/full>

# Both PE and PED are currently used to answer patient-relevant questions



## PATIENT EXPERIENCE DATA

### FDA Guidance on Patient Experience Data

Signs and symptoms and impact on everyday life

Changes in the disease and its impacts over time

Experience with treatments and disease management approaches

Expectations and views on desired treatment outcomes

Trade-offs between outcomes , benefits and risks



## PATIENT ENGAGEMENT

### Questions during HTA Patient Engagement

Signs and symptoms and impact on everyday life

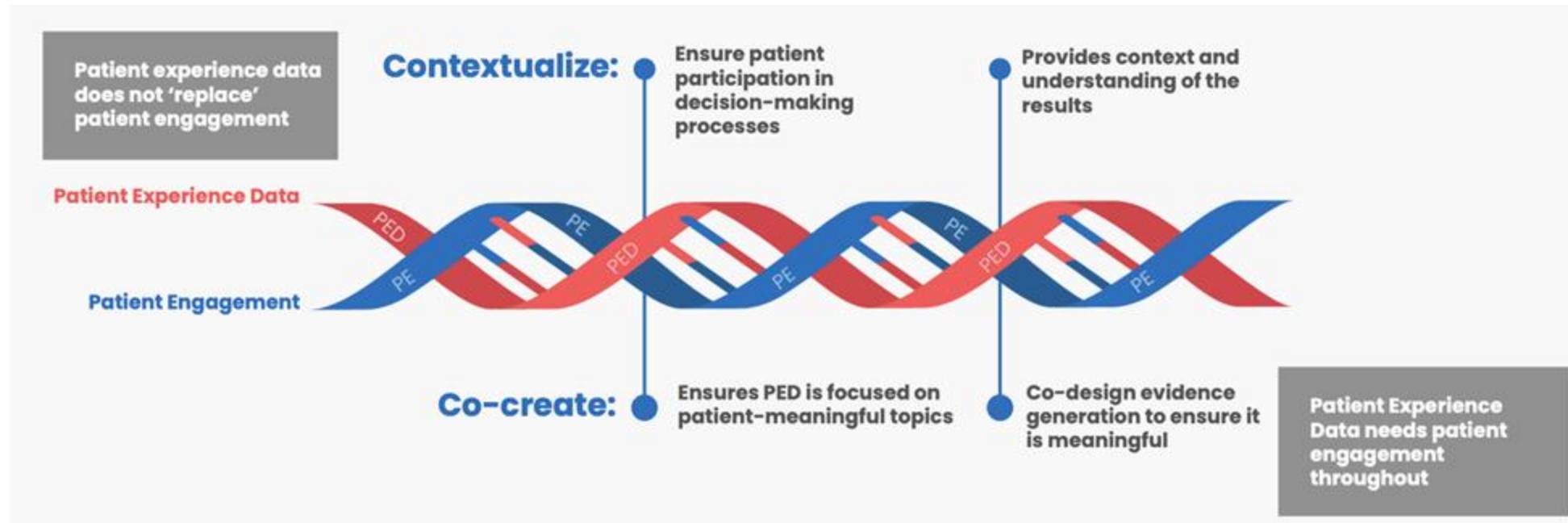
Burden of disease

Experience of current treatment and disease management approaches

Expectations on the new treatment and its outcomes  
Perceptions of downsides of the new treatments

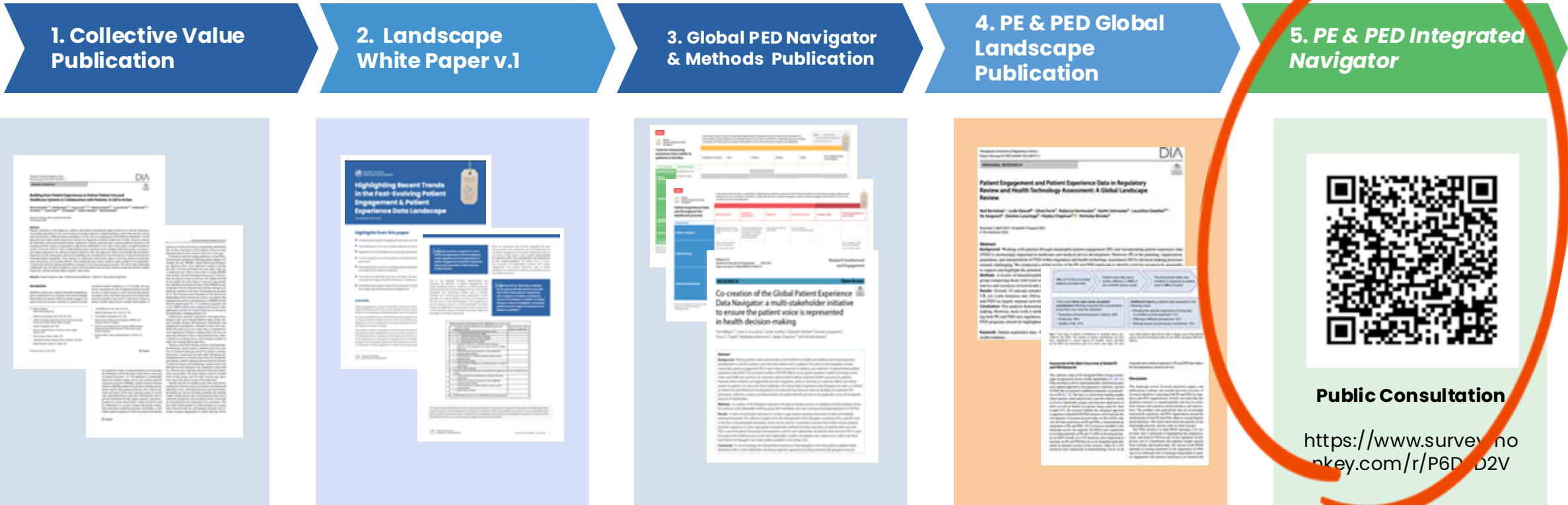
Potential impact (positive and negative) on family and care-givers

# Working **WITH** patients is essential to ensure integration of patient engagement in PED generation and use



“PE can support PED to ensure patient-centricity of measurement, contextualization of data, increased understanding of the evidence generated, and the co-creation of the design, generation, collection and analysis of PED.”

# Co-creating insights and tools to advance PE & PED across the healthcare continuum



Please find here the links for: the PE & PED Project, Landscape White Paper v1, Collective Value Publication, and Global PED Navigator



Slide courtesy of Hayley Chapman, PFMD & The Synergist





# The Global PED Navigator responds to 5 key questions about Patient Experience Data resulting in 4 integrated templates



## 1. WHAT:

Highlight the needs that are most important to patients

## 2. HOW:

Review the approaches and methodologies available (and identify gaps) to measure these patient experiences

## 3. WHEN:

Consider when stakeholders are using this data and 4. WHY

## 5. WHO:

Identify the stakeholders that are using PED  
Review the approaches and methodologies available (and identify gaps) to measure these patient experiences

**BETA**

Global Patient Experience Data Navigator

The current matrix can help you identify the methods or tools for measuring outcomes that matter to patients & families. In grey you can see what methods are the most appropriate for a specific area of impact.

Legend: Not appropriate, Somewhat appropriate approach, Most appropriate approach

Tools for measuring outcomes that matter to patients & families

Share your feedback on this document. Answer the public consultation. Click here to start.

Area of Impact*	Specific Impact	Qualitative methods	PEOs	ClinTriOs	ObseROs	PerROs	DXTs (Digital Health Technologies)
Mortality/survival	Objective signs						
Signs & Symptoms	Subjective						
Functioning	Physical						
	Emotional						
	Social						
	Role						
	Cognitive						
	Global QoL						
	Perceived						
Treatment experience	Treatment						
	Adverse side effect						
Resource use	Direct cost						
	Indirect cost						
Patient Journey	Societal/c						
	Patient job						

\* The "area of impact / specific impact" were developed in consultation with an ongoing initiative being led by Health Council and supported from the Government

**BETA**

Global Patient Experience Data Navigator

The Stakeholder matrix helps you understand how Patient Experience Data is used in the drug development process and the healthcare process. The matrix gives you the opportunity to see the collective value behind PED use. This view would support stakeholders' alignment to avoid duplication and inefficiencies.

Stakeholder	Real World Data	Symptoms identification	Diagnosis	Treatment choices	Therapy cycles	Disease progression or survivorship
Patients, caregivers	Measure improvements in health outcomes or quality of life	Enhanced understanding of the natural history of the disease or condition, including progression, severity, chronicity	Personalized medicine/ biomarkers	Enrich treatment information guidance (R)		
Patient advocates	Inform research, policy, education initiatives Unmet medical needs Defining patient-relevant added values and outcomes Enhanced understanding of the natural history of the disease or condition					Inform research, policy, education initiatives Unmet medical needs
Healthcare professionals	Inform healthcare priority setting Performance monitoring and assurance Unmet medical needs Enhanced understanding of the natural history of the disease or condition (R) Establish clinical guidelines (R) Characterize disease (R)	Enhanced understanding of the natural history of the disease or condition (R)	Personalized medicine/ biomarkers Enhanced understanding of the natural history of the disease or condition			Inform healthcare priority setting Performance monitoring and assurance Unmet medical needs

Share your feedback on this document. Answer the public consultation. Click here to start.

Click to navigate to the next tool: Overview document, Tools to identify what outcomes matter to patients & families, Tools for measuring outcomes that matter to patients & families, PED use throughout the drug development cycle, PED use throughout the Healthcare process

## In Conclusion



Patient mapping tools becoming more sophisticated

Elevating co-produced PED to sit alongside clinical & economic evidence



Regulatory / RWE requirements for PED remain to be defined

Need common tools for PED collection (some in progress)



Need greater participation of patients in the selection, analysis, and interpretation of all data, no matter what the source