

Project Details	
Project Code	MRC21PHBr Mitchell
Title	Measuring and valuing the broader patient benefits from health and care in economic evaluations
Research Theme	Population Health
Summary	The aim of this PhD is to develop appropriate methods to expand the information included on patient benefits in economic evaluation by using measures of health status and capability wellbeing. Such methods will allow for a broader evaluation of patient benefits to aid national health and care decision-making. The successful candidate will be able to draw from a wealth of expertise within the supervisory team, including qualitative and quantitative research methods.
Description	<p>Since the establishment of the National Institute of Health and Care Excellence (NICE) in 1999 as an independent body to the Department of Health, the role of economic analysis in deciding how best to spend the £120 billion taxpayer funds provided to the NHS annually has increased substantially. NICE recommends a standard approach for economic analysis of healthcare treatments, allowing decisions on value for money to be made consistently across different patient populations and treatment types. To do this, NICE recommends that measures of patient quality of life benefit focus on health gain from treatment, using the EQ-5D questionnaire; patients self-report their current problems across five health areas (1. walking about, 2. washing and dressing, 3. usual activities, 4. pain or discomfort, 5. anxiety or depression). There is growing interest in trying to also measure the broader quality of life benefits of healthcare treatments beyond patient health gains to also include gains in patient wellbeing. One way of measuring patient wellbeing in economic analysis is to focus on individual capability, that is, the freedom to achieve the aspects of life that are important to you, such as being independent and having enjoyment and pleasure. Questionnaires measuring capability have been developed, such as the ICECAP questionnaire for adults. This asks about a person's capability to achieve in five areas of life (1. feeling settled and secure, 2. love, friendship and support, 3. being independent, 4. achievement and progress, 5. enjoyment and pleasure). NICE and the Dutch equivalent of NICE now recommend using capability questionnaires in certain contexts, such as social care and long-term conditions. However, there is no guidance as to how this information on capability can be combined with existing health outcomes to inform value for money decision-making. This is important as not consistently including information on capability could mean that treatments offering patients broader benefits to quality of life than their health alone will not be routinely provided by the NHS. The aim of this research is to simultaneously include information on health and capability quality of life benefits that patients report from the treatments they receive, so that this information can be used to aid national healthcare decision-making. This research will allow for broader patient quality of life benefits to be consistently included in the economic analysis of healthcare treatments. This could have important implications in terms of the treatments that are considered to provide the most patient benefit from scarce healthcare resources, and thus that the NHS funds. Research for this PhD will include: 1.</p>

	<p>A systematic review of the methods available to include multiple outcomes in economic evaluations of health and care interventions; 2. Conceptualising an economic evaluation framework that is consistent with the capability approach and health economics principles; 3. A valuation study including EQ-5D-5L and ICECAP-A, to demonstrate the practical application of the framework developed in (2). This studentship is ideal for a talented graduate in a relevant economics, social science or health discipline wishing to develop strong interdisciplinary skills at the interface of health economics, population health and the capability approach. It will also provide experience in quantitative and qualitative research methods. The student will split their time between two GW4 partners. When in Bristol, you will be based in the Health Economics Bristol (HEB) team (Population Health Sciences, Bristol Medical School, University of Bristol), a leading centre for excellence in population health science. In Exeter, you will be based in the Health Economics Group (HEG) team (College of Medicine and Health, University of Exeter). Both teams have thriving and expanding groups of PhD students working on population health policy relevant areas.</p>
Supervisory Team	
Lead Supervisor	
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