



Clinical Outcomes

Translation and cross-cultural adaptation of the “Patient Reported Experiences and Outcomes of Safety in Primary Care” (PREOS-PC) questionnaire(s) for use in other languages / healthcare systems.

The PREOS-PC is a patient reported instrument to measure patient experiences and outcomes of patient safety in primary care. It was originally developed for its application in English General Practices (GP's) within the National Health Services (NHS).

Three PREOS-PC versions have been developed: PREOS-PC full version (61 items, 5 domains), PREOS-PC Compact (27 items, 5 domains), and PREOS-PC Short Form (6 items, 5 domains).

The aim of this guidance document is to advise on how to adapt and translate the PREOS-PC for use in healthcare delivery systems that inevitably differ from the NHS, but also set out the steps of translation required by us, in order to translate and cross-culturally adapt PREOS-PC for its use in primary care centres in other territories / languages.

The methodology will involve three steps:

- 1) **Adaption** - examination of content validity and potential adaptation of the instrument for the target healthcare system;
- 2) **Translation** - translation into Spanish, and
- 3) **Assessment** - an optional but recommended step of the study of the psychometric properties of the translated versions.

Content validity: expert consultation (online, involving 6-8 participants including healthcare providers, managers and experts) to ensure the validity of the content of the questionnaire (in terms of its applicability in Spanish primary care centres). Expert feedback will be initially gathered via email. Proposed changes will be subsequently discussed and approved via teleconference.

Translation into language(s) for the territory that the PREOS-PC will be used in

- 1) Forward translation: translation of the original language version of the instrument (English) supplied by the Clinical Outcomes team (under © licence) into the language(s) for the target territory. Two professional translators (native speakers of the target language but fluent in English) will carry out independent forward translations of the instrument.
- 2) Reconciliation: a third independent translator will compare and merge the two forward translations into a single forward translation. Reconciliation decisions will be reviewed by the Principal Investigator.
- 3) Back translation: translation of the new language version back into the original language. This will be done by a professional translator (with English as native language but fluent in target language) and will provide a quality-control step demonstrating that the quality of the translation is such that the same meaning can be derived when the translation is moved back into the source language.
- 4) Back translation review [February 2018]: comparison of the back-translated versions of the instrument with the original to highlight and investigate discrepancies between the original and the reconciled translation, which will then be revised in the process of resolving the issues.
- 5) Proofreading [February 2018]: review of the translation to highlight and correct any typographic, grammatical or other errors.

Recommended (but optional) additional steps

Cognitive debriefing [March 2018]: 8-10 interviews with patients purposefully selected to ensure variation in terms of health literacy levels and previous experiences of safety problems in primary care (PC) will be conducted



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in order to test alternative wording and to check readability, interpretation, and cultural relevance of the translation.

- Review of cognitive debriefing results and finalization [March 2018]: comparison of the patients' or lay persons' interpretation of the translation with the original version to highlight and amend discrepancies.
- **Examination of the psychometric properties** of the Spanish PREOS-PC (acceptability, reliability, and construct validity, based on data obtained from the feasibility trial in Stage 2) [September and October 2018].