Outcome Orientated Mental Health

Dianne Tetley
Assistant Director Research, Innovation and Effectiveness

Co-Developer of Outcomes Orientated Approaches to Mental Health

HEART AND SOUL OF CHANGE PROJECT

Lincolnshire Partnership NHS
NHS Foundation Trust

POWERED BY UNIVERSITY of DERBY
INNOVATION FOR LEARNING

medipex NHS Innovation Awards and Showcase 2012

Inspiration

- Only 15% of patients with mental health problems recover *(Centre for Social Justice, 2012)*
- 24% entering community CAMHS get worse
- A need to report recovery metrics in addition to activity metrics *(DoH, 'Closing the Gap', 2014)*
- No feasible online feedback/data management system available
  - With clinical utility
  - Incorporates brief PROM measures that address factors that are most likely to influence therapeutic outcome
  - Permits charting of therapeutic progress for patient and clinician
  - Aggregates outcomes data and provides reports

Outcome Orientated Mental Health

Key Findings from Research

- Research finds therapy is effective for mental health problems (70%)
- Model or technique has a minimal impact on outcomes.
- Extra-therapeutic factors such as social circumstances and motivation have biggest impact on outcomes
- Quality of therapeutic alliance important.
- Regular monitoring of progress and alliance improves outcomes (10 RCTs).

Evidence Base

NREPP SAMHSA's National Registry of Evidence-based Programs and Practices

Quality and Productivity: Proposed Case Study

Improving the efficiency of mental health services: an outcome orientated model

Provided by: Lincolnshire Partnership NHS Foundation Trust

Publication type: Proposed quality and productivity example

Sharing QIPP practice: What are 'Proposed Quality and Productivity' examples?

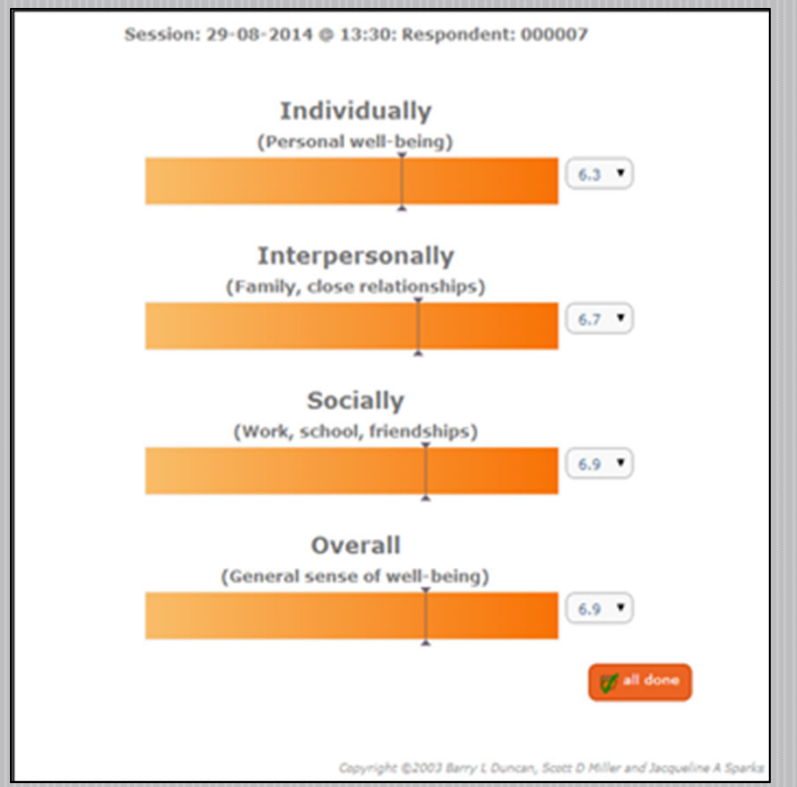
QIPP Evidence provides users with practical case studies that address the quality and productivity challenge in health and social care. All examples submitted are evaluated by

Outcome Orientated Mental Health

Measures

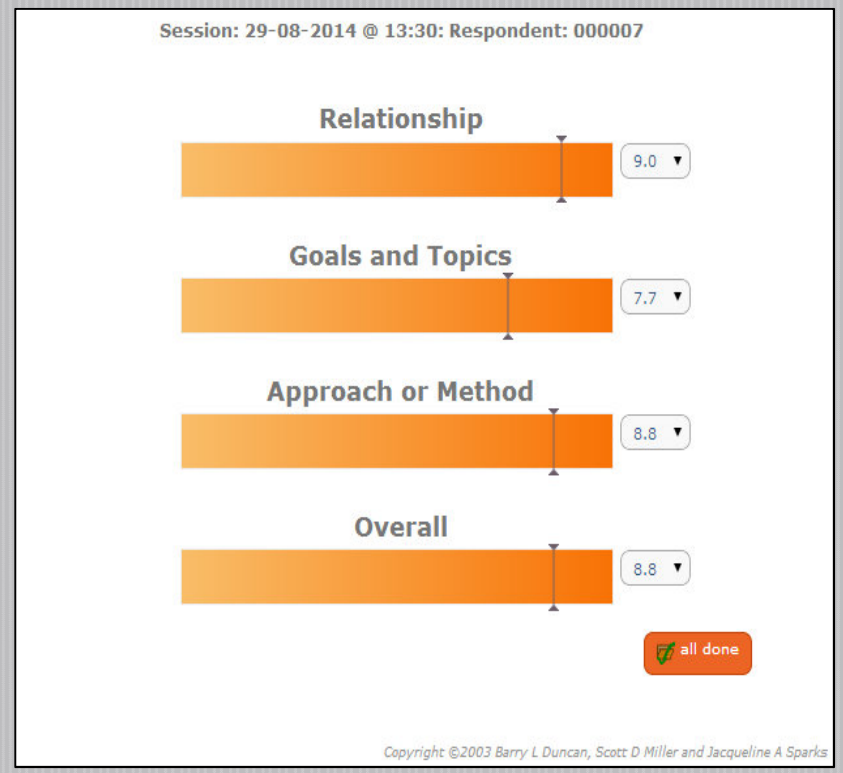
At the start of the session

Outcomes Rating Scale (ORS)



At the end of the session

Session Rating Scale (SRS)



Consultation

- Patient/extra-therapeutic = 40-87% variance of outcome.
- Who is best placed to have a meaningful relationship with patient? Multi-agency consultation.
- Are circumstances favourable for treatment? How stable is the extra-therapeutic context.
- Is more than one agency working on same problem? Avoid duplication. Complex cases are often created.
- Match clinician to patient from first appointment.
- Avoid long term treatment with no discernable or measurable benefit.

Outcomes

- **Regular feedback** can by itself improve outcomes
- PROM measure should be simple and feasible otherwise it wont engage clinicians
- Keep a record of the outcome score session by session and **plot a graph** that is discussed at the beginning of each session
- **If no improvement has occurred after 5 sessions** discuss with the patient and/or their carer and/or the Multidisciplinary team, as up to 90% chance of no improvement in that treatment episode

Outcome Orientated Mental Health

Relationship

- Alliance as rated by the patient strongest factor, from within treatment, associated with improved outcomes.
- Use simple and feasible PROM measure.
- From the first session create a culture of strong interest in patient feedback.
- Building strong alliances is important particularly early in treatment.
- Address and discuss alliance issues before the patient and/or their carerer leave the session.

Outcome Orientated Mental Health

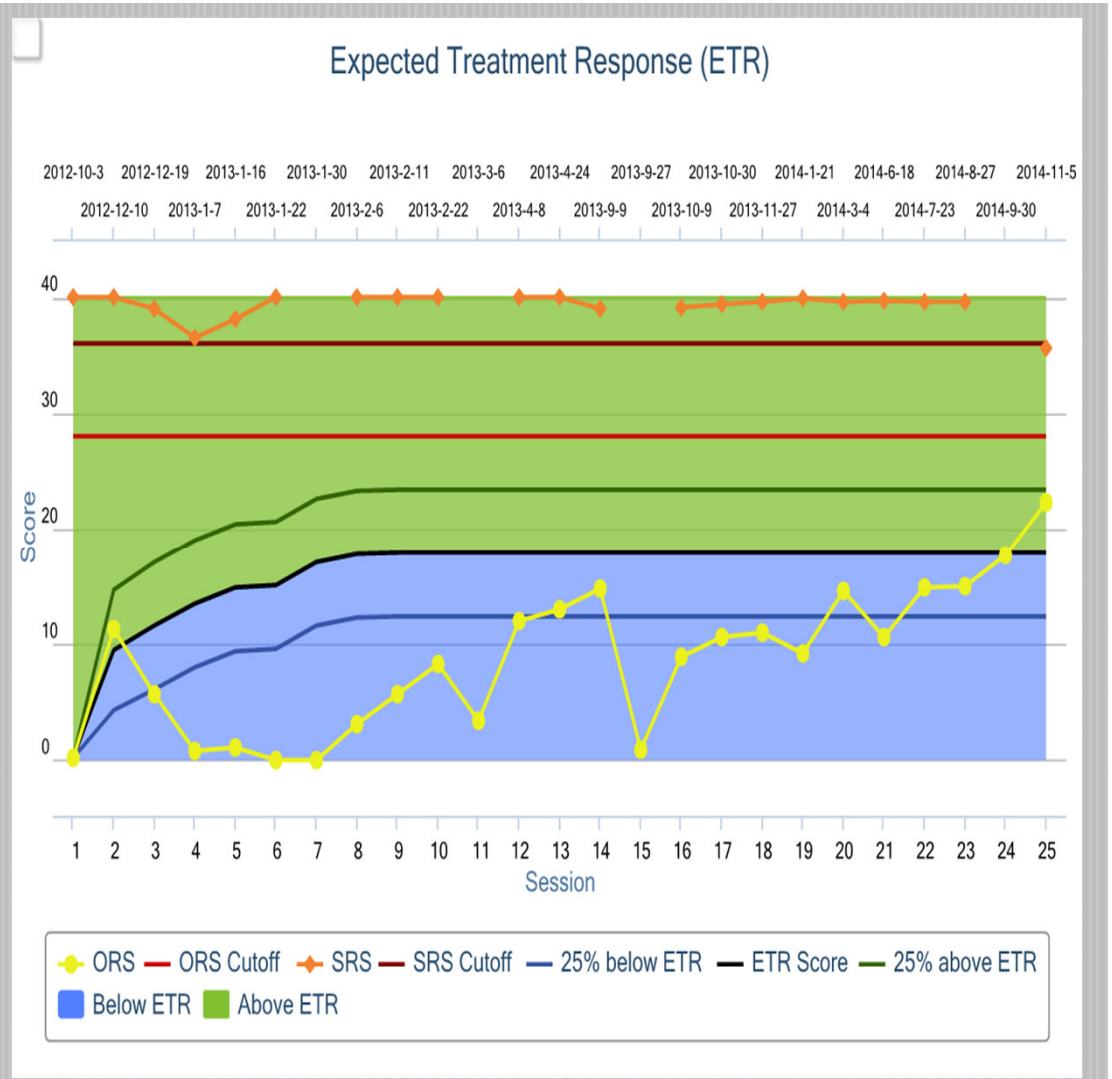
Ethics of Care

- Most 'transformation' projects fail at implementation and maintenance phases.
- Like service users, clinicians work better when they feel valued, listened to, and taken seriously.
- Create culture that is interested in outcomes and values service users' perspective.
- Build strong culture of clinical feedback and supervision.
- Be prepared to fail 'successfully'
- Evidence base everything!

Outcome Orientated Mental Health

No Improvement after 5 Sessions?

- Discuss with patient
- Discuss with family
- Discuss with MDT/supervision
- Change approach
- Change clinician
- Carry on for agreed period.



Outcome Orientated Mental Health

Tracker

A secure web-based automatic feedback and data management system that supports the practical application of an **O**utcomes **O**rientated **A**pproach to the delivery of **M**ental **H**ealth **S**ervices (**OO-AMHS**) for adults and children.

OO-Tracker Features

- A therapeutic tool that supports clinician decision making
- An electronic feedback system that incorporates session by session PROMS suitable for use in mental health
- Powerful reporting capability reporting outcomes for individual clinician, team, service for PbR cluster, treatment or diagnosis
- Supports the development of team ethos and supervisory structures
- Supports dialogue between service users, carers and clinician empowering them to have a voice and choice in the treatment and care they receive

Outcome Orientated Mental Health

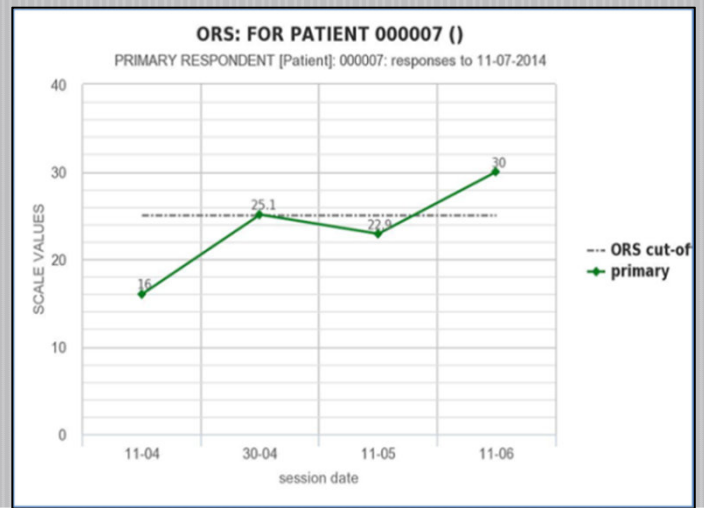
OO-Tracker Objectives

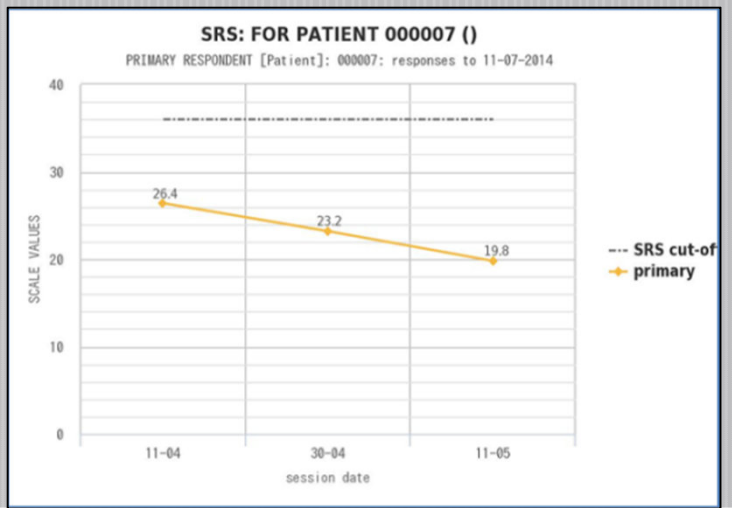
- Speed up adoption of OO-AMHS innovation in clinical practice
- Automatically generate on-going, session by session patient related outcome data from use of ultra brief measures in terms of clinical improvement or deterioration
- Build a culture of partnership and collaboration by developing team cultures that are recovery focused and support the use of outcomes data for clinical reflection, supervision and whole team development
- Support engagement with service users and carers and promote dialogue between them and their clinician ensuring their preferences are discussed

Outcome Orientated Mental Health

Electronic Administration

- OO-Tracker, provides electronic administration of ORS and SRS with direct input by each service user and/or carer, session-by-session
  - Captures scores automatically
  - Charts progress and therapeutic alliance graphically
  - Allows clinicians to provide verbal and visual 'real-time' session-by-session feedback to service users and their carer/s (when appropriate)





Early Warning System

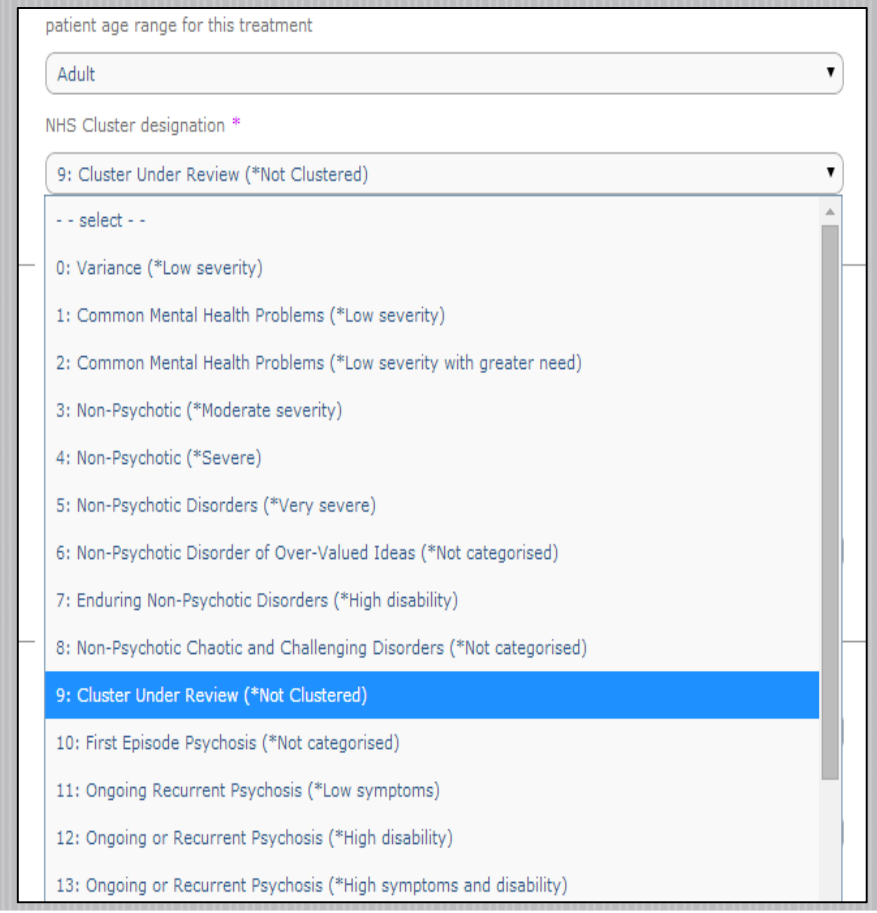
OO-Tracker has an in-built early warning system (traffic light)

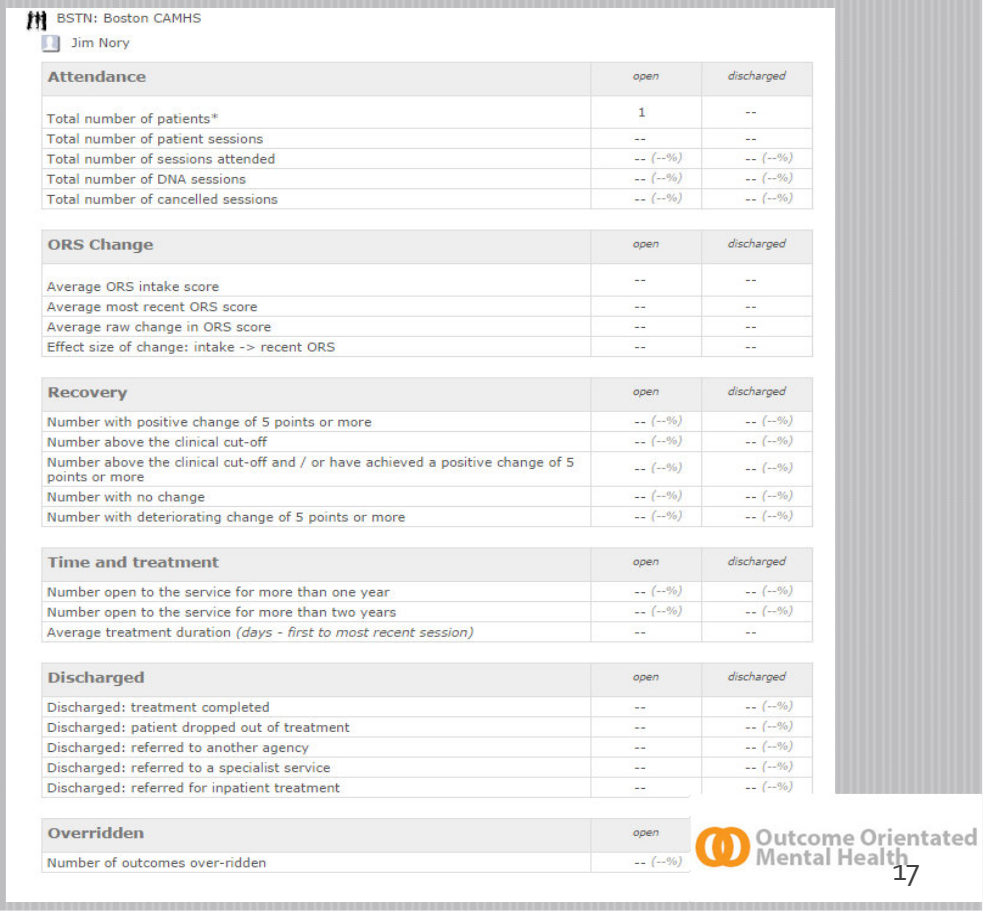
- Alerts clinicians to individuals at risk of poor clinical outcome and helps identify those who have reached likely maximum expected benefits from services received.
- Avoids individuals getting stuck in long term treatment with little change or benefit
- Avoids early 'drop-out' from treatment and DNAs (Did Not Attend).
- Serves as a prompt for clinicians and supervisors - highlighting cases for team or supervisory discussion. This may lead to improvement as a result of change in therapeutic approach or change of clinician.

Outcome Orientated Mental Health

Outcome Orientated Indicators - OOI'S

Reports by patient, clinician, supervisor, manager.
Will collate reports by cluster, team, intervention type.





Summary

- OO-Tracker is simple, cheap and easy to use
- Requires minimal training
- Supports OO-AMHS implementation and helps clinicians to maximise existing skills by working more productively
- Direct patient entry avoids the need for costly administrative support
- It's bespoke data-base and online ORS/SRS administration system enables ongoing feasible data tracking of outcomes orientated indicators (OOI's)
- It's powerful reporting capability provides outcomes data to be aggregated with one 'click'

Outcome Orientated Mental Health

OO Impact

- Improvement in the quality of NHS mental health care
- Efficiency savings – decreasing costs and increasing capacity
- Development of positive therapeutic relationships and dialogue between service user and clinician, ensuring services respond to their preferences

Outcome Orientated Mental Health

OO Benefits

- Increased recovery rates
- Identification of those with no signs of reliable improvement/change
- Reduction in long-term use of services of no benefit
- Reduction in DNA's
- Avoidance of early drop-out from treatment
- Improved therapeutic efficiency and positive therapeutic relationship

Outcome Orientated Mental Health

OO Evidence of Impact

- 53% reduction in cases receiving service for over two years to 18%
- Annual inpatient referrals dropped from 15 to 3
- Significant drop in none attendance rates
- 900 discharged cases – 76% showed clinically significant improvement (above clinical cut off)
- Only 7% deteriorated
- CAMHS capacity increased – Tier 2 services have doubled capacity with the same number of staff, largely due to a dramatic increase in the length of time patients require treatment

Outcome Orientated Mental Health

OO-CAMHS Lincoln Team

- Reduction in cases receiving service for over two years from 34% to 18%
- Reduction in cases receiving service for over one years from 59% to 29%
- Discharged over 450 cases (analysis of 344).
- 77% clinically significant positive change, 17% no change, 6% deteriorated.

Outcome Orientated Mental Health

Annual appraisal -ST

- Discharged: 83 patients (as keyworker).
- 80% clinically significant positive change, 17% no change, 3% deteriorated.
- Effect size: 1.4
- Average change on ORS: +10.9

Outcome Orientated Mental Health

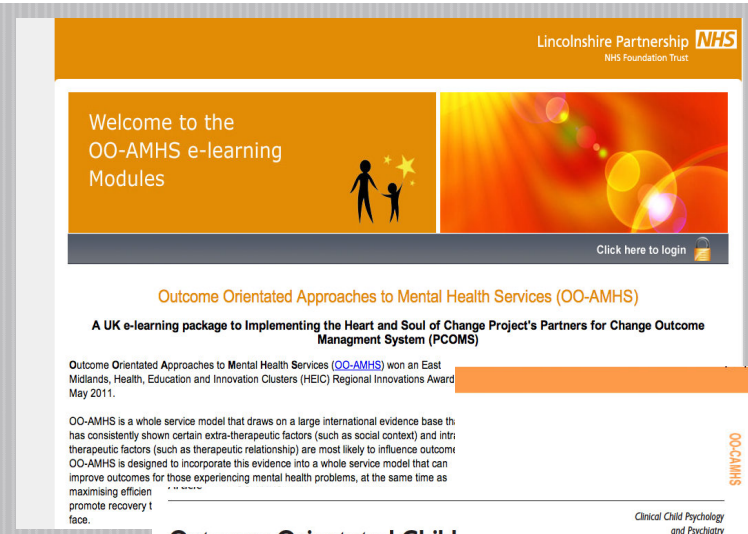
A Solvable Problem

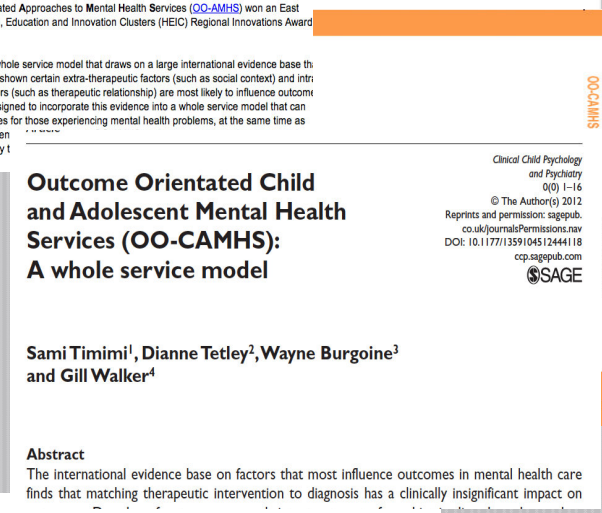
- Current follow up outpatient DNA rate in LPFT adult mental health services: **19%**
- ST DNA rate 6 months to April 2014: **3%**
- Do you know how many are getting better?
- Do you know how many are discharged significantly better or worse?

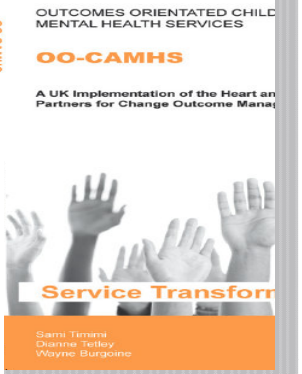
Outcome Orientated Mental Health

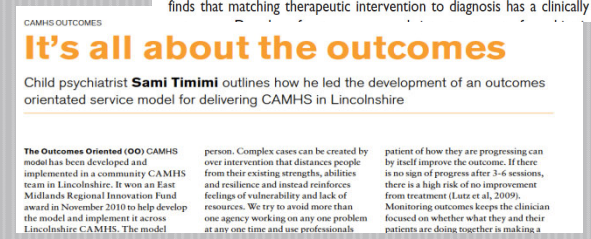
OO Implementation Support

- OO-Tracker is available to clinicians using OO-AMHS delivery in clinical practice
- OO-AMHS training is available via 8 online interactive e-learning modules
- Train the trainer course (incorporating above e-learning) has been accredited by the British Psychological Society
- A service transformation toolkit (book)published to support implementation
- Online OO-Tracker User Guide, including video available









OO Awards

- 'NHS East Midlands Innovation Award: OO-CAMHS (2010) – An Outcome Orientated Approach to the Delivery of Child and Adolescent Mental Health Services' www.oocamhs.com
- 'East Midlands, Health, Education and Innovation Clusters (HEIC) Innovation Award (2011): OO-AMHS Training Staff, Supervisors and Managers in Outcome Orientated Approaches to the Delivery of Mental Health Services: An e-learning Package'
- www.innovationforlearning.com/LPFT/
- 'East Midlands, Health, Education and Innovation Clusters (HEIC) Innovation Award (2012): National Role Out of the OO-AMHS e-Learning Package: Training NSPCC Clinical Practitioners and Managers in an Outcome Orientated Approach to the Delivery of Face-to-Face Services for Looked After Children'
- Medipex – 'Yorkshire, Humber and East Midlands Innovation Champions of the Year' (2012-13)
- Academic Health Science Network (ASHN) Innovation Finalist (2014)

Expressions of Interest

- Lincolnshire commissioners supported implementation across Lincolnshire CAMHS Services – CQUIN
- Implementation in North East Lincolnshire CAMHS (Grimsby)
- Request to implement across 9 LPfT integrated CMHT's
- National CYP IAPT programme has endorsed the use of the ORS and SRS in their routine outcome monitoring
- Joint application to the Health Foundation with CORC and Roehampton University to roll out OO-AMHS with OO-Tracker to 8 sites in England
- NSPCC rolled out nationally across England and N. Ireland
- Headspace – Australia national youth mental health foundation to implement OO-Tracker November 2014
- Interest from numerous NHS mental health providers and social enterprises

Outcome Orientated Mental Health

The Future ?

- What would we look like if we were an outcomes orientated organisations?
- Can we improve on a 15% recovery rate?

Questions

Outcome Orientated Mental Health

HEART AND SOUL OF CHANGE PROJECT

Lincolnshire Partnership NHS Foundation Trust

POWERED BY UNIVERSITY of DERBY INNOVATION FOR LEARNING

medipex NHS Innovation Awards and Showcase 2012