Go to www.menti.com and use the code 2756 6372
Measurement-Based Care: Empowering Psychologists and Veterans
Our FY22 Strategic Priorities

The areas we are currently prioritizing in service of the Uniform Mental Health Services (UMHS) Handbook to accomplish our mission.

- Coordinated Access Solutions, including enhanced training for effective business operations and promoting key strategies for ensuring adequate mental health and suicide prevention field staff to meet demand
- Advance Suicide Prevention through Implementation of the full public health approaches of Suicide Prevention (SP) 2.0 and SP Now
- Support Cerner implementation and Informatics Solutions (e.g. data synchronization/syndication)
- Continued expansion of stepped care, team-based care, and implementation of the Behavioral Health Interdisciplinary Program (BHIP)
- Optimization of MH Integrated Clinical Communities (ICCs)
- Transforming Healthcare Delivery (MH/WH/PC), including Continued implementation of Measurement-Based Care (MBC) and Clinical Practice Guideline (CPG)-consistent care
MEASUREMENT BASED CARE

Measurement Based Care

https://www.youtube.com/watch?v=mDaszfddPNG&t=2s
Recharging & Reimagining
What is MBC and Collect, Share, Act?
Measurement Based Care (MBC) is a clinical process where clinicians and Veterans use patient-reported outcome measure (PROM) data to track progress and to inform treatment decisions.
What is the MBC in MH Initiative?
OUR GOAL: To make MBC the **standard of care** for VA mental health programs.
Initiative Leadership

Sandy Resnick
Sandra.Resnick2@va.gov

Jessica Barber
Jessica.Barber@va.gov

Leslie Parillo
Leslie.Parillo@va.gov
Measurement Based Care (MBC) is a clinical process where clinicians and Veterans use patient-reported outcome measure (PROM) data to track progress and to inform treatment decisions.
Yes, and …
A story ...
Why is this conversation difficult?
A story …
The MBC part wasn’t new.
The partnering part was.
Two sides of MBC
Instrumental Part

Relational part
Collect, Share, Act provides a relational approach to the systematic monitoring and talking about progress, or lack thereof, in treatment in a way that is transparent, collaborative, and supports alliance.
COLLECT

**Rationale**
Explain the rationale for using measures in your initial session or early on in treatment. Explain how you'll be using the measures together in treatment.

**Administer**
Administer the patient-reported outcome measures regularly as a standard part of care.

**Select**
Select in addition to measures required by your program (if applicable), consider additional measures you and the Veteran agree are relevant for their treatment, symptom management, and/or functional goals.

**Collect**
Collect by linking the measures to the Veteran’s goals enhances care.
**RATIONALE**

**Explain the Collect, Share, Act process.**
- how often the measures will be repeated
- who will have access to the information

**Elicit & answer questions.**

"I like to hear from you, in your own words, but I also like to have another way to guide our understanding of how you’re doing. This will help us see where we’re starting from and help us track progress. So, this is a tool we’ll repeat each session." (or whatever frequency is appropriate for your setting)

"We’ll score this together and review it each time."

"This is part of your medical record, just like blood pressure readings."

**MBC provides a foundation for:**
- meaningful conversations about individualized goals
- collaborative development of treatment plans
- assessment of progress over time
- Informed, collaborative decisions about changes to the treatment plan

**Why are you using each particular measure?**

Explain how each measure you’ve chosen is relevant to the Veteran and their goals/treatment.

"This form asks about symptoms of ______, which are things you’ve said you’ve been experiencing. It will help us track where you’re at with each symptom and help us decide which one(s) to focus on."

"This form asks about different areas of life veterans with ______ often struggle with. It will help us see where you’re at with these and help us decide on our treatment plan."

"We’re committed to making sure that treatment is working for you. This is one way to keep track of that."

"In addition to everything else we discuss, the scores help us talk about what’s working and what may need to change for you to feel improvement."

"We’ll use this to target goals that matter to you and to track progress on them."

"These forms will help us keep track of the areas where you’re doing well, your strengths."
“How are you right now?”
S H A R E

C A P T U R E
Capture data in the record with a tool like Behavioral Health Lab.

D I S C U S S
Ask if the score matches the veteran's subjective experience. Explore discrepancies.

E D U C A T E
Provide education on the measure &/or individual items. Clarify any confusion.

R E P O R T
Report the measure data to the Veteran. Explain what the data mean.
ACT

“How is this going? Are we making progress on what’s important to you?”
ACT

“Should we make adjustments to what we’re doing?”
ACT

**APPRAISE**
The scores on the patient-reported outcome measures inform your evaluation of how treatment is going.

Do you see improvement, worsening, or lack of change?

**BRAINSTORM**
Together with the Veteran, generate possible steps or adjustments in treatment you can make in light of your appraisal.

Utilize all the clinical data—the scores, the Veteran’s input, and your own clinical impressions—to generate ideas.

**CHOOSE**
Engage the Veteran in a conversation to collaboratively decide on a plan of action from among the possibilities.

Both you and the Veteran get to weigh in on this decision.

WHAT DO THESE RESULTS MEAN FOR THIS VETERAN, SPECIFICALLY?

THE CONVERSATION IS KEY.

WHAT OPTION BEST MEETS YOUR SHARED GOALS OF TREATMENT?
Instrumental Part
MBC enhances care and empowers Veterans.

- MBC improves outcomes
  - Track progress over time
  - Identify those not responding to treatment or who are doing worse
  - Identify opportunities to intervene in crisis

- Combined with clinical judgement, data from MBC helps to ensure that Veterans are getting the care they need, especially in a time of crisis.
Relational part
• MBC can improve the treatment alliance by helping providers prioritize what matters most to Veterans

• Veterans are more likely to be actively involved in their care when they are partners in treatment planning and tracking their progress over time

• Patient-reported outcome measures empowers Veterans to share their perspective

• The collaborative shared-decision making framework is at the center of Veteran-centered care
Collect, Share, Act is a process that operationalizes true therapeutic alliance.
What is Alliance?
Therapeutic Relationship

Therapeutic Alliance
Confident, collaborative relationship; we all know what we’re working on and why what we’re doing will hopefully help.
Alliance is evidence-based.

Collaboration

Goal-Consensus

Collecting & delivering client feedback

Alliance, engagement, and communication are hypothesized mechanisms for the positive impact of MBC on client outcomes.

A couple examples
“I’m not quite ready to go it on my own though.”

When we talk about an improvement trajectory week-to-week, it facilitates Veterans reluctant to terminate coming to terms with that, build confidence, celebrate their efforts.
Our Menti Poll
- Our cue to ask how the treatment is going and should we do something different
- We’ve been saying from the beginning that we’re going to keep an eye on how it’s going so we can adjust if needed
- We catch the lack of change in a timely manner
- CSA gives us a process to guide a number of hard conversations
- It’s not one hard conversation anymore; it’s just part of how we work together
- Progress feedback isn’t coming out of left field
- When it’s time to have the hard conversation, talking about the trajectory is already established as just something we do
- Facilitates “Act”; Veteran may already have insight into what would work better even if we never asked the to formally share their thoughts
- Confident that our clinics are making best use of resources
CHALLENGES IN ALLIANCE NEGATIVELY IMPACTS CONSUMERS FROM MINORITIZED GROUPS.

- Agreement on diagnosis
- Patient’s perception of rationale for tx
- Patient’s perception of correct/right/optimal treatment
- Patient’s perception of communication
- Treatment engagement & dropout
- Greater insight into disparities
It just feels good.
What if there’s lack of progress and the Veteran gets discouraged?
What if there’s lack of progress and the *psychologist* gets discouraged?
What if there’s lack of progress and the psychologist gets discouraged?

Zarzycka, Jankowski, & Krasiczynska (2021) - Therapeutic relationship and professional burnout in psychotherapists: A structural equation model approach
Build alliance and prevent burnout by doing this one weird thing …
Thank you.

MBC In Mental Health Sharepoint
Develop your style MBC Rationale Mad Lib
MBC Information@va.gov
MBC Technology@va.gov
ADDITIONAL REFERENCES


