Improving Outcomes with Measurement-Based Care: *A No-Brainer*!

12th Annual Commonwealth of Virginia CSA Conference

Julie Greenlee, Ph.D, MSW, Sr. Director of Clinical Quality & Stephan Stark, VP of Customer Experience

Learning Objectives

- ★ Define Measurement Based Care (MBC)
- ★ Learn the benefits of MBC to individuals receiving services, practitioners, and organizations
- ★ Explore the paradox of the underutilization of MBC among providers
- ★ Identify barriers and strategies to adopt MBC into practice

ncgCARE

Sound Familiar?

This has been occurring in the Physical Health world for well over a century!

Vitals

Whether presenting in an ER or for a routine wellness exam, physicians always start with collecting vitals. Blood pressure, oxygen levels, and temperature are critical elements in the overall picture of health.

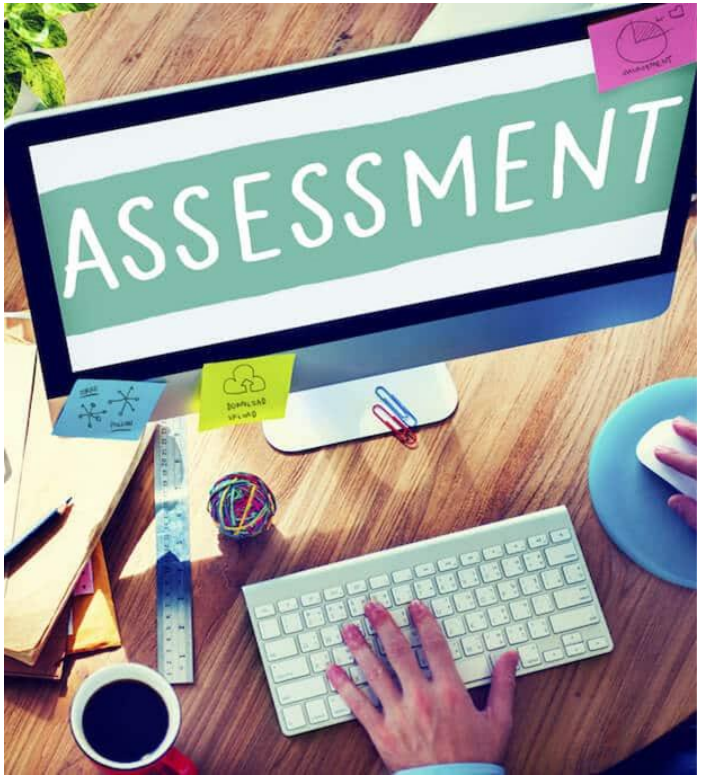
ncgCARE

Sound Familiar?

This has been occurring in the Physical Health world for well over a century!

Comprehensive Assessment

The vitals are important but aren't the whole story. They are combined with collecting patient and family history, interviewing the patient for additional information, and exercising medical expertise.



ncgCARE

Six Days!

Patrick Lawler, a construction worker, suffered from a toothache for six days before making an appointment with his dentist to seek some relief.

Patrick denied any recent injury to his mouth or teeth and described the pain as “nagging”.

After a preliminary examination and getting a patient history, the dentist took an x-ray to help make an accurate diagnosis.

(Fisher et al., 1995; Zoffness, 2019)

Sound Familiar?

This has been occurring in the Physical Health world for well over a century!

Hypertension

- A patient is discovered to have high blood pressure at their wellness exam
- Medication is prescribed to help lower their blood pressure
- The patient returns for a follow-up visit and their blood pressure is taken and compared to previous visits.
- The physician makes a decision about how to continue treatment

ncgCARE

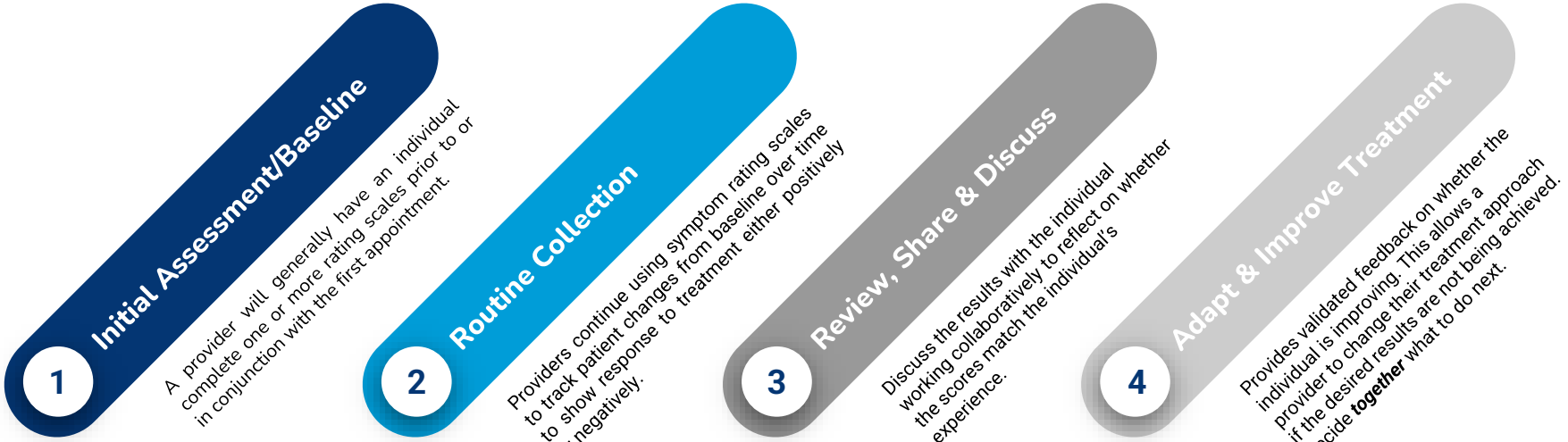
The systematic administration of symptom rating scales and other assessment tools to ***guide treatment***.

ncgCARE

Source: Seinfeld Episode 28: The Alternate Side

ncgCARE

What is Measurement Based Care



(Barber & Resnick, 2022; Jensen-Doss et al., 2020; Lambert & Shimokawa, 2011)

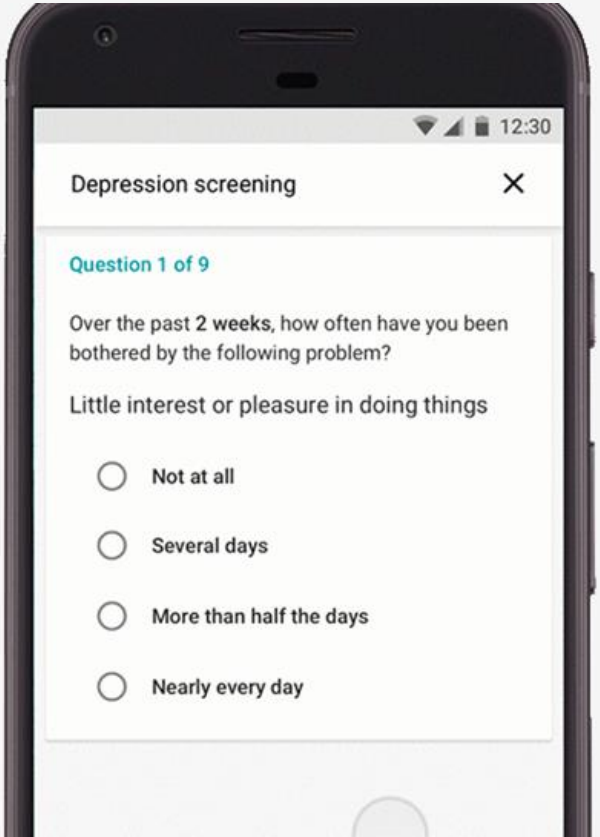
ncgCARE

Standardized Measures of Symptoms or Function

- Depression [PHQ-9]
- Anxiety [GAD-7]
- Trauma [PCL-5]
- AUDIT or DAST [Substance Use]
- Level of Functioning [DLA-20]
- Outcome Rating Scale [ORS]

Resources:
MDCalc - Online Screenings
Alliance Health Plan - Online Screenings
Kennedy Forum - Outcome Measures
Owl® Measure Library M5.0 (Feb 2023).pdf

(Boswell, et. al., 2023; Kelley & Bickman, 2009; Lambert et al., 2018; Miller et al., 2005; Trivedi & Daly, 2007)



ncgCARE

Individualized Idiographic Measures

Idiographic measures are designed to capture information that is specific to a particular person.

- Goal attainment setting
- Self-monitoring journals
- Personalized assessments of life satisfaction or well-being

Promotes a collaborative and empowering therapeutic approach.

Credit: Therapy Insights

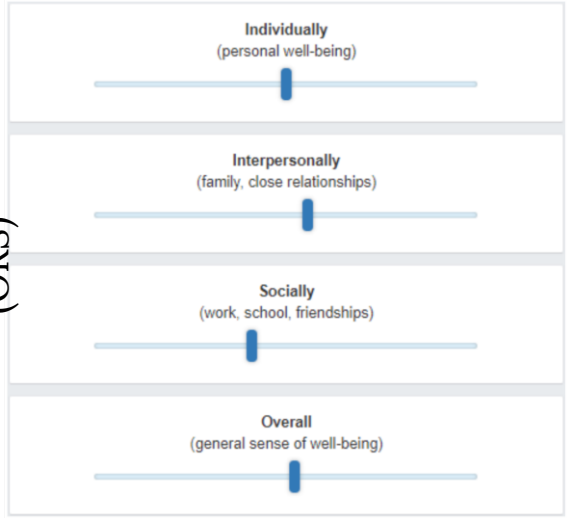
(Boswell & Scharff, 2022; Jensen-Doss et al., 2020; Lloyd, Duncan, & Cooper, 2019; Lutz et al., 2019; Metz et al., 2019; Tabak, Link, Holden & Granholm, 2015; Nakamura, Daleiden & Chorpita, 2007; Turner-Stokes, 2009; Weisz et al., 2011; Wolpert et al., 2017)

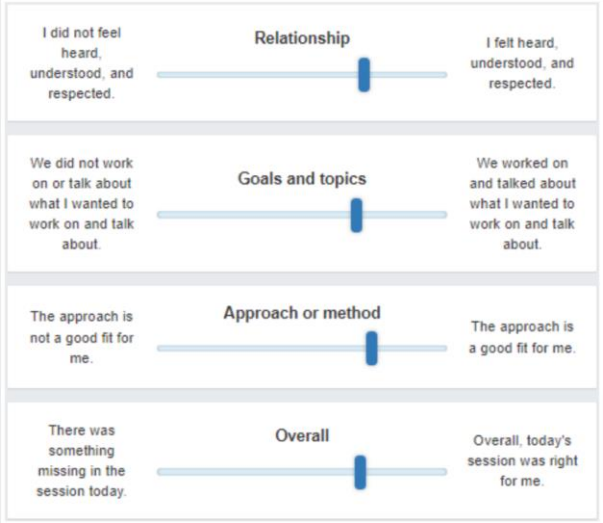
ncgCARE

Feedback Informed Treatment (FIT)

FIT is the systematic collection of feedback from the individual to inform and enhance the treatment process. ⚠ *These are proprietary rating scales and cannot be reproduced without permission.*

Outcome Rating Scale (ORS)





Session Rating Scale (SRS)

(Boswell et al., 2015; Brattland et al., 2019; Goldberg et al., 2016; Miller et al., 2005)

ncgCARE

Alternative & Emerging Measures

While most often data is “patient generated” it can also include alternative sources such as:

- Wearables
  - Sleep monitoring
  - Measure skin temperature and heart rate and individuals can give feedback on their mood
- Caregivers & Collateral Contacts
  - ADHD NICHQ Scale (Caregiver & Teacher versions)

(Boswell & Scharff, 2022; Parikh et al., 2020)

ncgCARE

Evidence Based Practice

The Substance Abuse and Mental Health Services Administration recognizes MBC as an evidence based practice.

- Measurement-based Outcomes → Measurement-based ***Care***
- The use of MBC in the context of ongoing treatment to guide adjustments and responsiveness to individual progress **is a clinical skill**

(Barber et al., 2023; Brooks Holliday et al., 2021)

ncgCARE

Why is Measurement-Based Care a Good Idea?

MBC Across the Continuum

Micro-Level

3

Inform care decisions - MBC is specifically intended to make dynamic changes during treatment at the individual level.

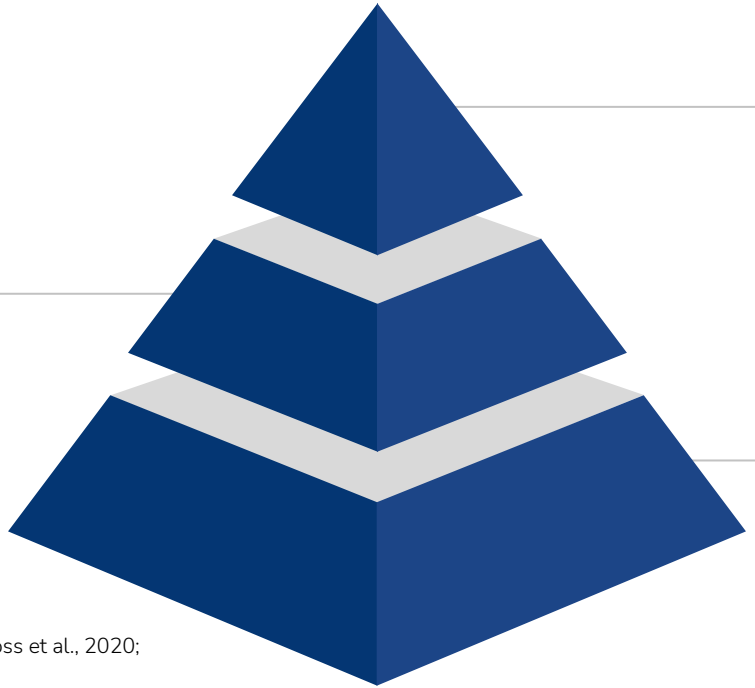
Meso-Level

Practice-based evidence - is this program effective?

2

Quality Improvement Initiatives (QII) aggregated MBC data can support organizational goals, quality monitoring, and shape QII projects.

Satisfy Accreditation or Accountability Standards



Macro-Level

1

Expected Recovery Trajectory predictive analytics indicating whether an individual is on track for a positive outcome.

(Castonguay et al., 2021; Connors et al., 2021; Jensen-Doss et al., 2020; Lewis et al., 2018)

ncgCARE

Increased Effectiveness

- Accelerated symptom improvement
  - transtheoretical, transdiagnostic, and setting agnostic
- Rates of positive response are ***several times*** those of individuals who received treatment without MBC
- Clinical or functional deterioration during treatment is ***cut in half***
- Enhanced alliance & engagement

MBC is an evidence-based practice associated with **symptom reduction**, **improved retention**, and **greater patient satisfaction**.

Source: The Need for a Measurement-Based Care Professional Practice Guideline

(Bickman et al., 2011; Brattland et. al., 2018; Boswell et al., 2023; de Jong et al., 2021; Janse et al., 2020; Lambert & Shimokawa, 2011)

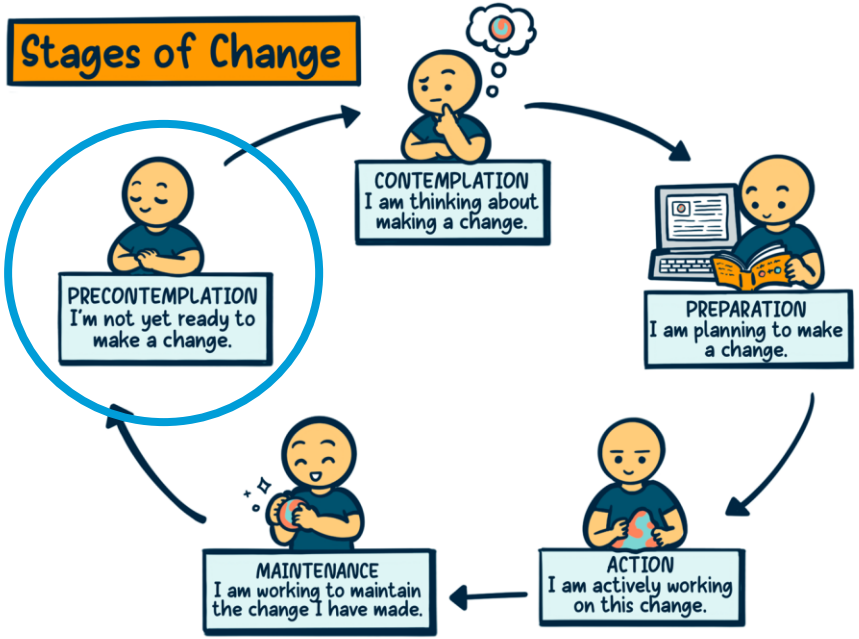
ncgCARE

Did you know?

Individuals entering treatment in the precontemplation stage are ***most likely*** to drop out.

MBC has been shown to be ***most effective*** with individuals identified as “not on track” (NOT) for a positive outcome.

Overall, a proven benefit is a ***reduction*** in client dropout or early termination.



Source: Jennifer Yoshimura - the INFORMED SLP

(de Jong et al., 2021; Jensen-Doss et al., 2020; Lambert & Shimokawa, 2011; May et al., 2007)

ncgCARE

Benefits to the Individual

- Improved individual **satisfaction** with treatment
- Individuals feel more **respected**
- Persons served have a **better understanding** of their diagnosis
- Contributes to breaking down **stigmas** associated with mental illness
- Experience of person-centered, collaborative, and transparent care

Source: MI Blues Perspectives

(Boswell et al., 2023; CAAPS, 2018; Dowrick et al., 2009; Eisen et al., 2000; Finn, 2007; Finn et al., 2012; Gopalan et al., 2016; Knaup et al., 2009; Moltu et al., 2018)

ncgCARE

Benefits to the Clinician

- Restores **joy** in practice!
- Greater **diagnostic accuracy**
- Opportunity to address **therapeutic misalignment**
- Increased **practitioner effectiveness**
- Enhanced **clinical skills**
- More **successful** and **ethical** practice
- Reveal opportunities for needed **referrals**

Source: Verywell Health

(Boswell et al., 2023; Brattland et al., 2018; Duncan, 2014; Goldberg, Babins-Wagner, et al., 2016; Moltu et al., 2018; Valenstein et al., 2009; Walfish et al., 2012)

ncgCARE

Benefits to the Organization

- Higher **Net Promoter Score**
- Demonstrates **value**
    - Empirical data that can ultimately change the narrative of mental health treatment. It **PROVES** that individuals are im**PROVING**.
- Help meet a variety of accountability **reporting requirements**
- Use the data to identify **quality improvement** opportunities

Source: Thriveworks Counseling

(AHRQ, 2014; CAAPS, 2018; Connors et al., 2021; Dubé, 2021; Eisen et al., 2000; HEDIS, 2017; Jensen-Doss et al., 2020; JTC, 2017; NQF, 2018)

ncgCARE

The Paradox

If MBC has been proven to be so effective, why are so few providers using it?

(Boswell et al., 2023; Fortney et al., 2015; Jensen-Doss et al., 2018; Lewis et al., 2019)

Less than 20% of mental and behavioral health providers use measurement-based care.

(Boswell et al., 2023; Fortney et al., 2015; Jensen-Doss et al., 2018; Lewis et al., 2019)

ncgCARE

Organizational Barriers to Adoption

- Resource Limitations
  - Lack of an Electronic Health Record or automated feedback system
- Administrative Barriers
  - Limited training resources
  - Turnover
- Leadership Support
- Lack of Payment Incentives from Payers

Source: Jeff Hitchcock - Wikimedia Commons

(Boswell et al., 2023; Dowrick et al., 2009; Eisen et al., 2000; Knaup et al., 2009; Moltu et al., 2018)

ncgCARE

Provider Barriers to Adoption

- Concerns about time and effort
- Skeptical attitudes regarding the effectiveness
- Worried about how the data will be used beyond informing client care
- Most believe clients will have a negative reaction

Source: Getty Images - istockphoto.com

(Boswell et al., 2023; Boswell, Kraus, Miller, et al., 2015; Cuperfain et al., 2021; Doherty, 2023; Lovett, 2023; Oslin et al., 2019; Valenstein et al., 2009; Wolpert, 2014)

ncgCARE

Belief vs. Knowledge

BELIEF

Clinicians consider their practical wisdom and clinical judgment ("*phronesis*") to be **more important** than **objective assessments**.

KNOWLEDGE

In the absence of objective data:

- Providers may be less likely to identify stagnation and/or deterioration, and
- Overestimate their effectiveness

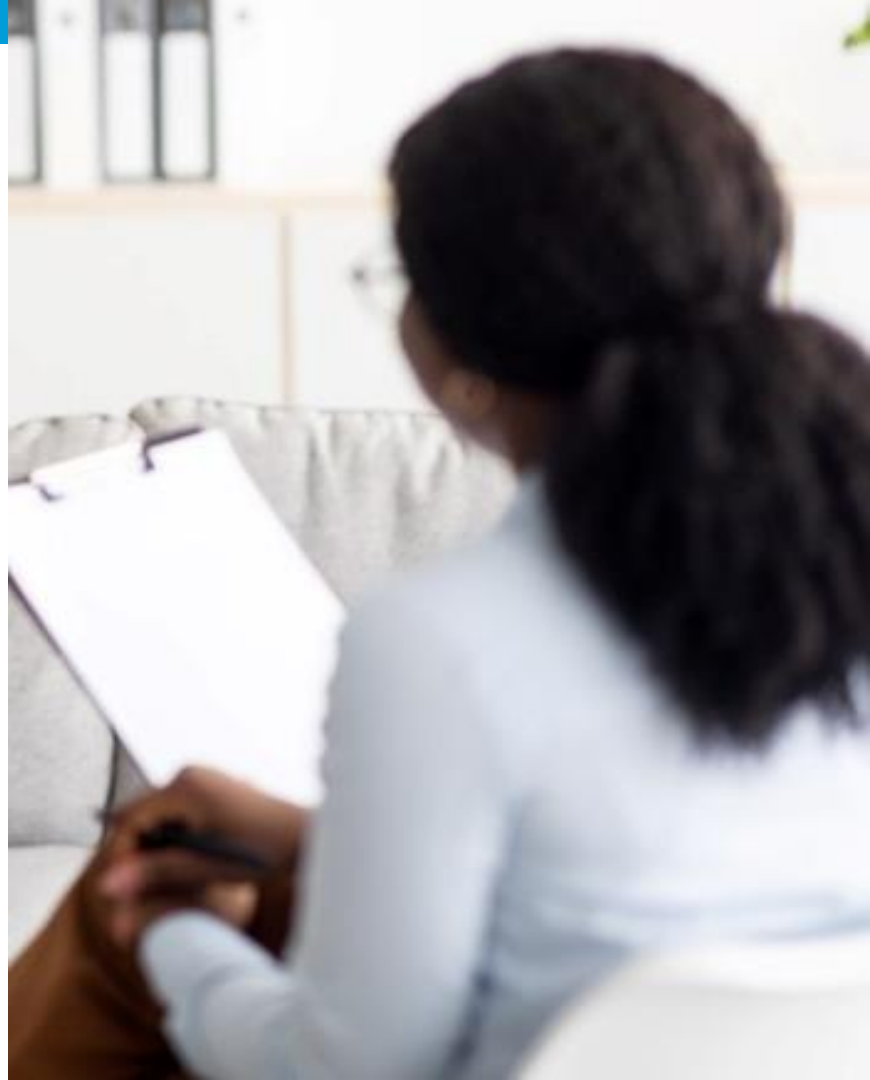
(Boswell et al., 2023; Boswell, Kraus, Miller, et al., 2015; Cuperfain et al., 2021; Doherty, 2023; Hatfield & Ogles, 2007; Lovett, 2023; Valenstein et al., 2009; Walfish et al., 2012; Wolpert, 2014; Zhu, 2021)

ncgCARE

Phronesis Fallacy

- Providers ***believed*** 85% of their clients were improving; research suggests ***actual rates*** are between 40-60%.
- Providers ***believed*** that about 3% of their clients had deteriorated; research suggests ***actual rates*** are ~10% among adults and ~25% among youth.

(APA, 2023)



ncgCARE

“Measurement-based care is designed not to replace clinical judgment but rather to augment it.”

Kimberly Hepner, PhD
Clinical Psychologist

ncgCARE

Belief vs. Knowledge

BELIEF

Most providers believe that MBC was **negatively perceived** by individuals

KNOWLEDGE

Interviews with clients revealed an almost ***universal positive attitude*** toward MBC

93% of individuals believe it is important to monitor the results of their treatment.

(Boswell et al., 2023; Cuperfain et al., 2021; Lutz et al., 2015)

ncgCARE

How do individuals feel?

Individuals were more positive about the questionnaires, seeing them as an efficient and structured supplement to clinical judgment and as evidence that [the professional] was **taking their problems seriously** through a full assessment.

(Dowrick et al., 2009)

ncgCARE

“Do the best you can until you know better. Then when you know better, **do better**”

Maya Angelou

ncgCARE

Ready or Not… it’s coming!

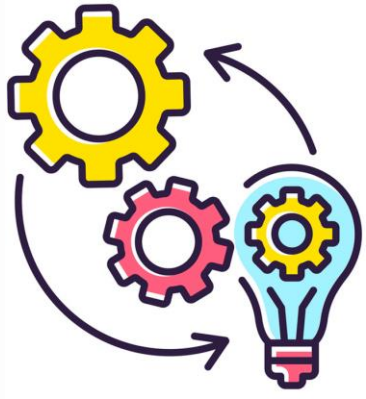
Why Wait, Start Now

- **2013** - Collaborative Care Model requires the use of measurement-based care
- **2016** - Department of Veterans Affairs (VA) Office of Mental Health and Suicide Prevention launched a national initiative to establish MBC as a standard of care
- **2017** - National Committee for Quality Assurance (NCQA) implemented depression response (PHQ-9) to HEDIS measures
- **2018** - The Joint Commission added standard CTS. 03.01. 09 which requires measurement based care in service provision
- **2019** - National Alliance, American Psychiatric Association, and Meadows Mental Health Policy Institute launched the **"Path Forward"**
- **2020** - North Carolina requires DLA-20 for Adult Community Support & Skill Building Service Programs
- **2021** - Utilization Review Accreditation Commission (URAC) incorporated MBC into their standards
- **2023** - Publication advocating for MBC to be recognized as a Professional Practice Guideline

(Atler et al., 2021; Boswell et al., 2023; CAAPS, 2018; HEDIS, 2017; Jensen-Doss et al., 2020; Martin-Cook, 2021; Resnick & Hoff, 2020; URAC, 2021)

ncgCARE

MBC Implementation Strategies



Just get started!

ncgCARE

S.O.C.C.E.R

SELECT

Select a brief, validated outcome measures that are connected to your treatment goals and objectives.

OPERATIONALIZE

Change expectancy - that is, how you expect your client to progress over time.

COLLECT

Collect outcomes at regular intervals. This can be done before or during a session depending on what works best.

COLLABORATE

Collaborate with your client to make sense of their assessment results during your session.

(DuBois, 2020)

EXAMINE

Examine the trend in progress over time - does it line up with your expectation?

RESPOND

By changing or adding to your treatment if progress is not being made as expected.

ncgCARE

Don’t Overthink It!

Failure to integrate this MBC standard was the third most frequently cited deficiency, with 70% of the citations noting ***failure to even select an instrument***”

(Martin-Cook, 2021; Williams, 2020)

ncgCARE

Comprehensive Needs Assessment Elements

- Presenting Issue(s)/Reason for Referral: Chief Complaint.
  - *Indicate duration, frequency, and severity of symptoms*
- Current Living Situation, Family History and Relationships
  - … *“affecting the individual and family's functioning”*
- Drug and Alcohol Profile
- Mental Status Profile
  - *Include findings and clinical tools used*
- Diagnosis

ncgCARE

Did you know?

More than ⅓ of individuals with a severe psychiatric disorder have been misdiagnosed.

- Schizoaffective is the most commonly diagnosed (75%)
- Major Depressive Disorder (55%)
- Schizophrenia (22%)
- Bipolar Disorder (18%)

(Ayano et. al., 2021)

ncgCARE

What contributes to misdiagnosis?

- Implicit Bias
- Cultural Competence
- Symptom Evolution
- Limited to a cross-sectional snapshot
    - E.g. Bipolar misdiagnosis

A clinician's job is to **draw out as much information from the individual as possible**, to put together a complete picture of the individual's condition.

Source: The Impact of Mental Health Misdiagnosis | Hillside®

(Akers, 2019; Gara et. al., 2019, 2012)

ncgCARE

Best Line of Defense

Symptom rating scales play a significant role in improving diagnostic accuracy by providing a standardized and quantifiable method for assessing and measuring symptoms.

1. Standardization
2. Objectivity
3. Comprehensive
4. Establishes a Baseline
5. Monitoring Progress
6. Communication and collaboration
7. Research and comparison
8. Level of Care

ncgCARE

Giving Youth a Voice

When assessing and working with youth, there are multiple stakeholders who may hold different perspectives on how the child is doing.

- Getting feedback from *both* the youth and their caregivers can give a more robust picture
- Help families understand why certain symptoms are being addressed

ncgCARE

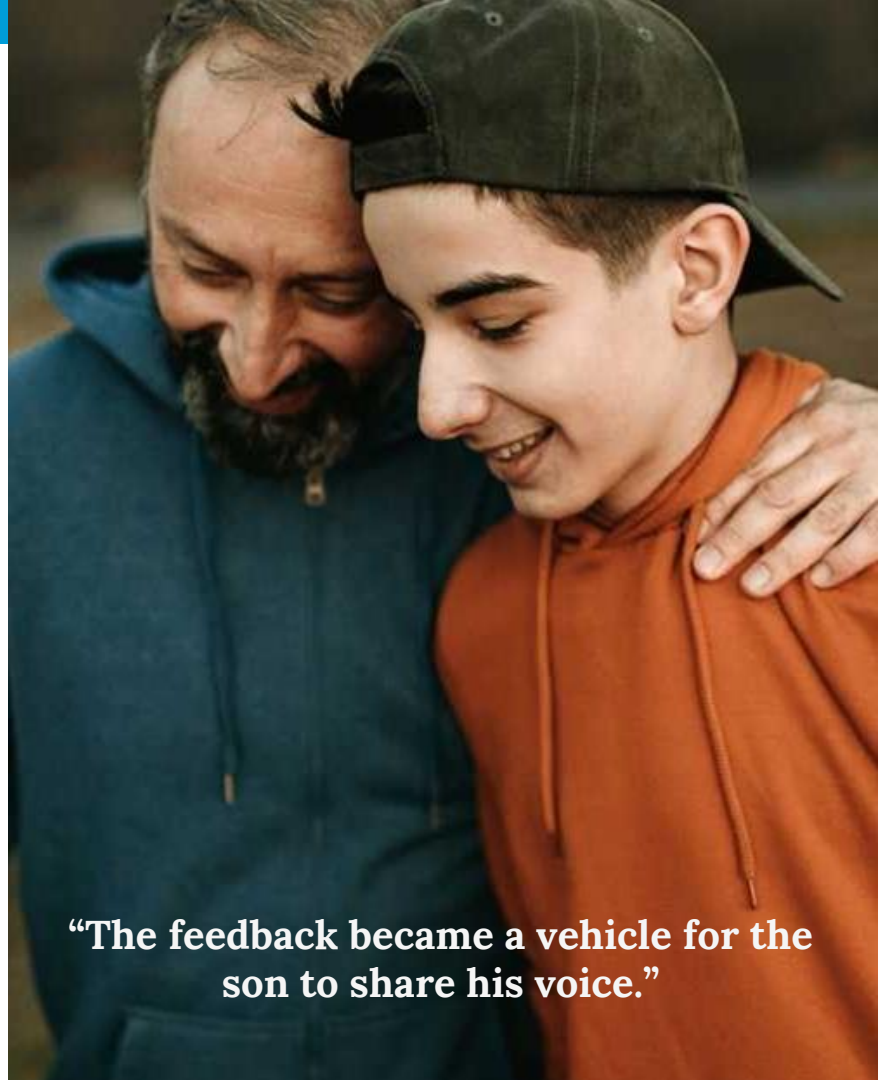
Meet Omar

An adolescent was referred for services because he refused to attend to school.

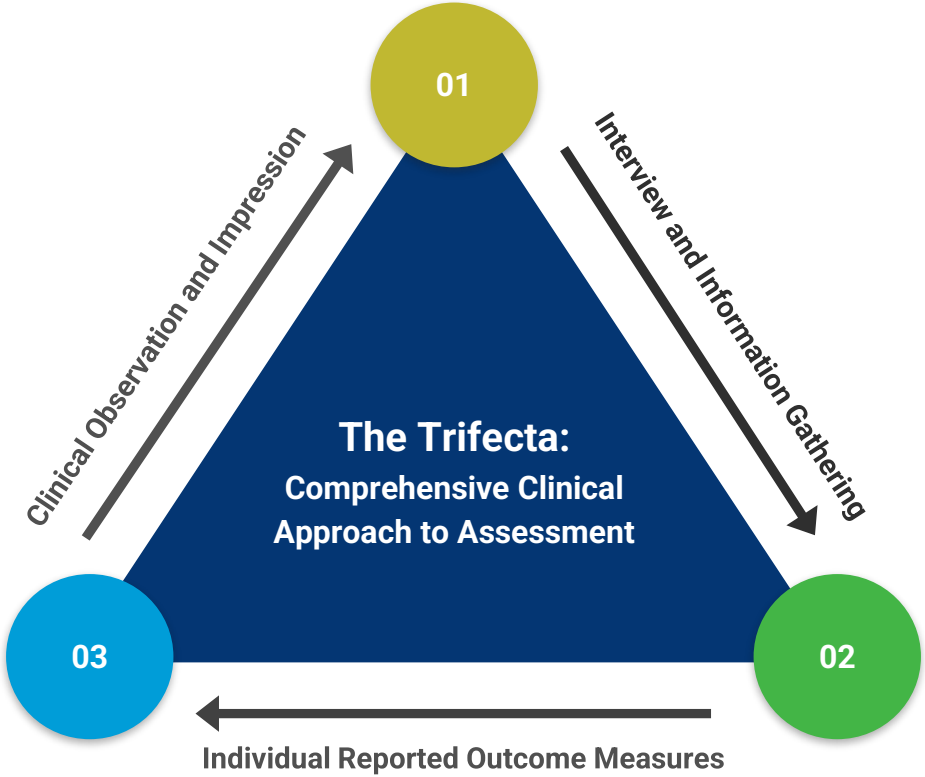
- His mother just moved out of the home to live with her new boyfriend
- The boy was playing video games for up to 10 hours a day to cope with her absence
- The clinician asked both the father and son to complete the same symptom rating scale.
- This gave the boy the opportunity to report he was feeling unhappy, was having difficulty getting along with others, having trouble sleeping among other issues.
- The father rated these symptoms much lower than his son.
- The therapist turned her computer around to show them the differences in graphical form.

The father looked at his son and said, 'I had no idea,' and the boy began to cry.

(Jensen-Doss et al., 2020; Stringer, 2023)



ncgCARE

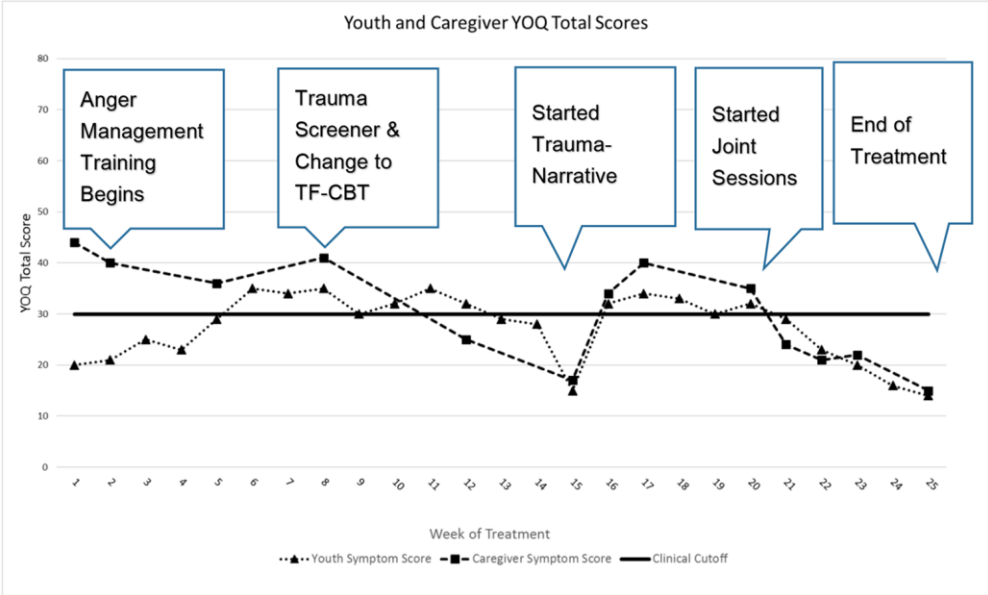


ncgCARE

Meet Madeline

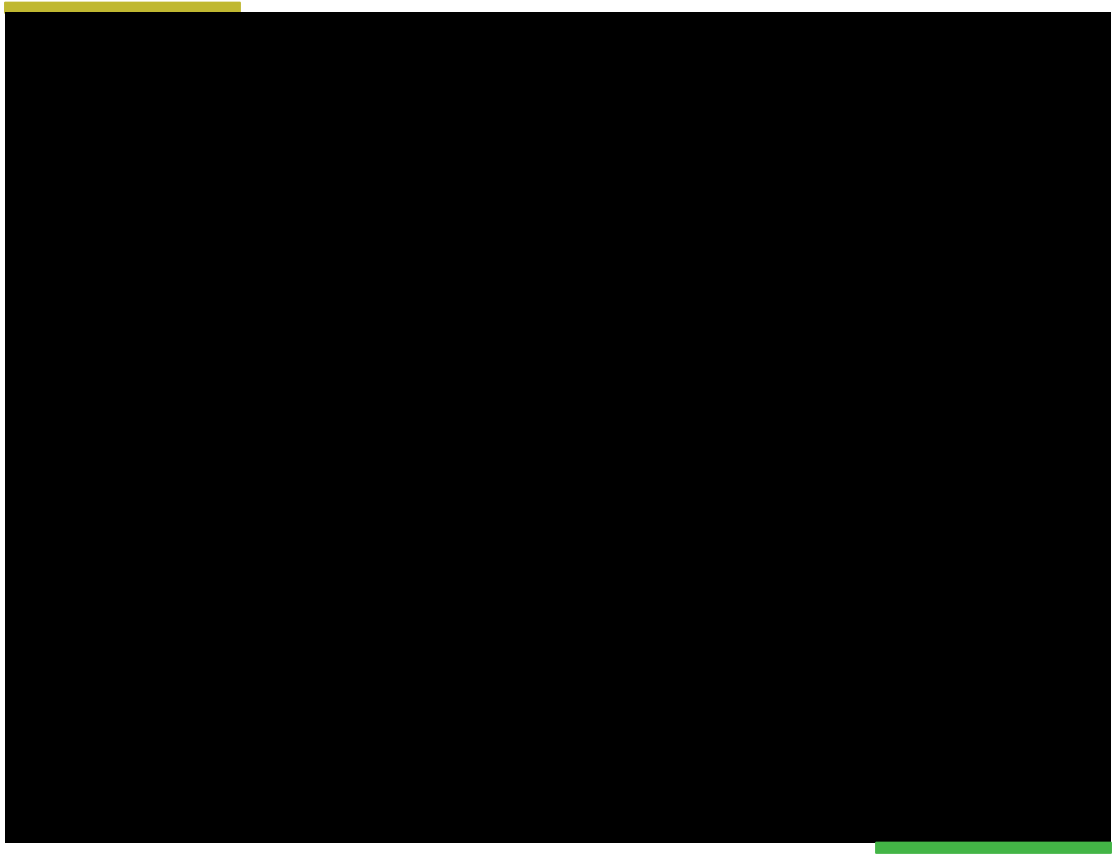
Youth Outcome Questionnaire® Self-Report 2.0

- Clients between the ages of 12 and 17 years complete the Y-OQ® SR 2.0
- Parents or others with reasonably extensive interaction with the patient complete the questionnaire at intake or admission to establish a severity baseline, and then complete it repeatedly at regular intervals to track the child's progress.



(Jensen-Doss et al., 2020)

ncgCARE



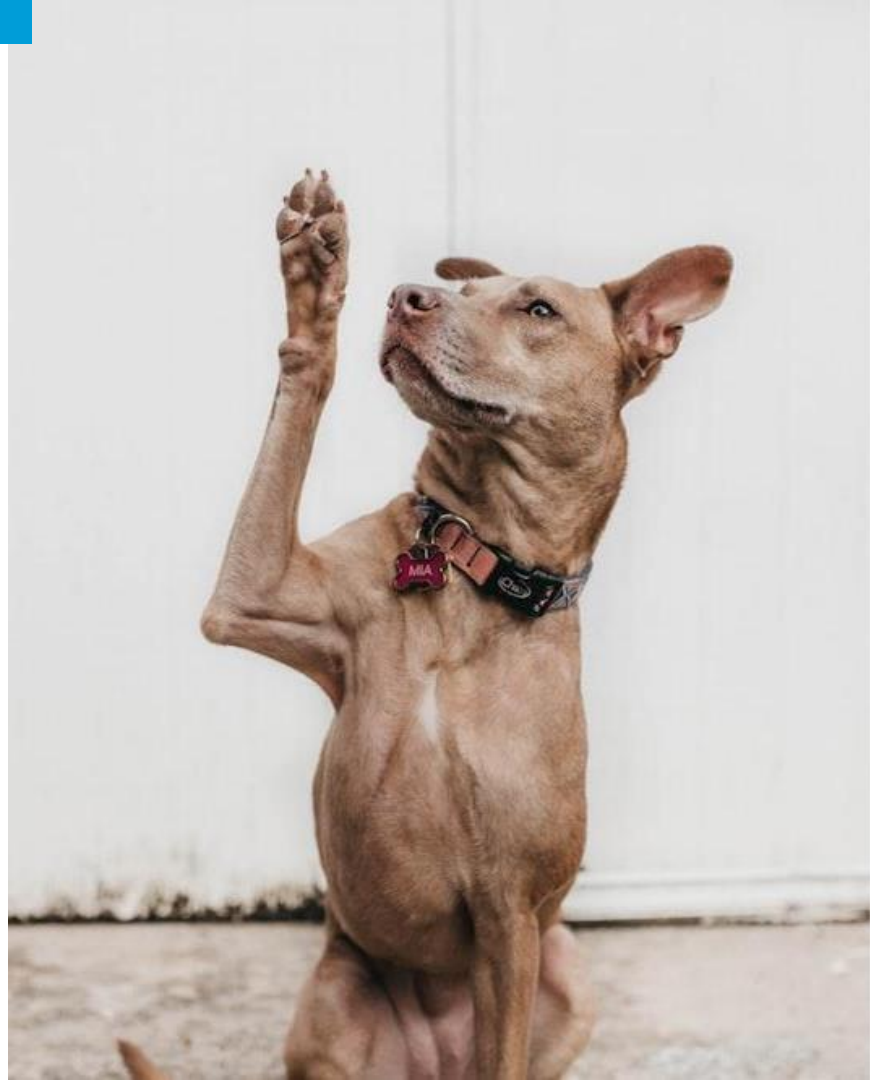
Source: Implementing Measurement Based Care in VA

ncgCARE

Questions??

julie.greenlee@ncgcare.com

stephan.stark@ncgcare.com



ncgCARE

References

Agency for Healthcare Research and Quality. (2014, June). *Quality improvement in primary care.* https://www.ahrq.gov/research/findings/factsheets/quality/qipc/index.html

Alter, C.L., Mathias, A., Zahniser, J., Shah, S., Schoenbaum, M., Harbin, H.T., McLaughlin, R, & Sieger-Walls, J. (2021, February). *Measurement-Based Care in the Treatment of Mental Health and Substance Use Disorders.* Dallas, TX: Meadows Mental Health Policy Institute. Mmhpi.org

American Psychological Association. (2023, June 1). Measurement-based care is giving psychologists and their patients a better picture of treatment progress. *Monitor on Psychology*, 54(4)

American Psychiatric Association. *Online assessment measures.* 2012 Retrieved from. http://www.psychiatry.org/practice/dsm/dsm5/online-assessment-measures#Level1.

Akers, G. (2019, October 18). *The impact of mental health misdiagnosis*. Hillside. https://www.urac.org/accreditation-cert/measurement-based-care-designation/

Ayano, G., Demelash, S., Haile, K., Tulu, M., Assefa, D., Tesfaye, A., ... & Tsegay, L. (2021). Misdiagnosis, detection rate, and associated factors of severe psychiatric disorders in specialized psychiatry centers in Ethiopia. *Annals of General Psychiatry*, 20(1), 1-10.

Barber, J., & Resnick, S. G. (2022). *Collect, Share, Act*: A transtheoretical clinical model for doing measurement-based care in mental health treatment. *Psychological Services.* Advanced online publication.

Barber, J., Bistline, K., Dubenitz, J., Everett, A., Humensky, J., Katz, I., ... & Vythilingam, M. (2023). *Use of measurement-based care for behavioral health care in community settings.* Substance Abuse and Mental Health Services Administration. https://www.samhsa.gov/sites/default/files/ismicc-measurement-based-care-report.pdf

Bickman, L., Kelley, S. D., Breda, C., de Andrade, A. R., & Riemer, M. (2011). Effects of routine feedback to clinicians on mental health outcomes of youths: results of a randomized trial. *Psychiatric services, 62*(12), 1423–1429.

Bickman, L., Lyon, A. R., & Wolpert, M. (2016). Achieving precision mental health through effective assessment, monitoring, and feedback processes: Introduction to the special issue. *Administration and Policy in Mental Health and Mental Health Services Research*, *43*, 271-276.

Boswell, J. F., Hepner, K. A., Lysell, K., Rothrock, N. E., Bott, N., Childs, A. W., ... & Bobbitt, B. L. (2023). The need for a measurement-based care professional practice guideline. *Psychotherapy, 60*(1), 1.

Boswell, J. F., Kraus, D. R., Castonguay, L. G., & Youn, S. J. (2015). Treatment outcome package: Measuring and facilitating multidimensional change. *Psychotherapy: Theory, Research, & Practice, 52*(4), 422–431.

Boswell, J. F., Kraus, D. R., Miller, S. D., & Lambert, M. J. (2015). Implementing routine outcome monitoring in clinical practice: Benefits, challenges, and solutions. *Psychotherapy Research, 25*(1), 6–19.

ncgCARE

Boswell, J. F., & Scharff, A. (2022). Client-focused assessment and intervention: Tailoring the work to the client. In J. N. Fuertes (Ed.), *The other side of psychotherapy: Understanding clients' experiences and contributions in treatment* (pp. 235–264). American Psychological Association.

Brattland, H., Koksvik, J. M., Burkeland, O., Gråwe, R. W., Klöckner, C., Linaker, O. M., Ryum, T., Wampold, B., Lara-Cabrera, M. L., & Iversen, V. C. (2018). The effects of routine outcome monitoring (ROM) on therapy outcomes in the course of an implementation process: A randomized clinical trial. *Journal of Counseling Psychology, 65*(5), 641–652.

Brattland, H., Koksvik, J. M., Burkeland, O., Klöckner, C. A., LaraCabrera, M. L., Miller, S. D., Wampold, B., Ryum, T., & Iversen, V. C. (2019). Does the working alliance mediate the effect of routine outcome monitoring (ROM) and alliance feedback on psychotherapy outcomes? A secondary analysis from a randomized clinical trial. *Journal of Counseling Psychology, 66*(2), 234–246.

Brooks Holliday, S., Hepner, K. A., Farmer, C. M., Mahmud, A., Kimerling, R., Smith, B. N., & Rosen, C. (2021). Discussing measurement-based care with patients: An analysis of clinician–patient dyads. *Psychotherapy Research, 31*(2), 211–223.

Castonguay, L. G., Barkham, M., Youn, S. J., & Page, A. C. (2021). Practice-based evidence—Findings from routine clinical settings. In M. Barkham, W. Lutz, & L. G. Castonguay (Eds.), *Bergin and Garfield's handbook of psychotherapy and behavior change* (50th Anniv. ed., pp. 191–222). Wiley.

Cherones, T. (1991, December 4). *Seinfeld* (No. 28) [TV series episode]. NBC.

Coalition for the Advancement and Application of Psychological Science (CAAPS). (2018). Evidence-based Practice Decision-Making for Mental and Behavioral Health Care.

Connors, E. H., Douglas, S., Jensen-Doss, A., Landes, S. J., Lewis, C. C., McLeod, B. D., Stanick, C., & Lyon, A. R. (2021). What gets measured gets done: How mental health agencies can leverage measurement-based care for better patient care, clinician supports, and organizational goals. *Administration and Policy in Mental Health, 48*(2), 250–265.

Cuperfain, A. B., Hui, K., Berkhout, S. G., Foussias, G., Gratzer, D., Kidd, S. A., … & Zaheer, J. (2021). Patient, family and provider views of measurement-based care in an early-psychosis intervention programme. *BJPsych Open, 7*(5), Article e171.

de Jong, K., Conijn, J. M., Gallagher, R. A., Reshetnikova, A. S., Heij, M., & Lutz, M. C. (2021). Using progress feedback to improve outcomes and reduce drop-out, treatment duration, and deterioration: A multilevel meta-analysis. *Clinical Psychology Review*, *85*, 102002.

Doherty, K. (2023, September 18). *How Therapists (Really) Measure Progress*. Alma. Retrieved September 22, 2023, from https://helloalma.com/blog/how-therapists-measure-progress/

Doss, B. D., Thum, Y. M., Sevier, M., Atkins, D., C., & Christensen A. (2005). Improving relationships: Mechanisms of change in couple therapy. *Journal of Consulting and Clinical Psychology*, 73(4), 624.

Dowrick, C., Leydon, G. M., McBride, A., Howe, A., Burgess, H., Clarke, P.,… & Kendrick, T. (2009). Patients' and doctors' views on depression severity questionnaires incentivized in UK quality and outcomes framework: Qualitative study. *The BMJ, 338*, Article b663.

Dubé, K. (2021, May 14). The ultimate guide to practicing measurement-based care (and why you should). *Blueprint*. https://www.blueprint-health.com/blog/what-is-measurement-based-care-mbc

DuBois, R. (2020, May 29). How to practice measurement-based care: A step-by-step guide. *Psychology Today*. https://www.psychologytoday.com/us/blog/the-digital-doctor/202005/how-practice-measurement-based-care

Duncan, B. L. (2014). *On becoming a better therapist: Evidence-based practice one client at a time* (2nd ed.). American Psychological Association.

Eisen, S. V., Dickey, B., & Sederer, L. I. (2000). A self-report symptom and problem rating scale to increase inpatients' involvement in treatment. *Psychiatric services, 51*(3), 349–353. https://doi.org/10.1176/appi.ps.51.3.349

ncgCARE

Finn, S. E. (2007). *In our clients' shoes: Theory and techniques of therapeutic assessment*. Erlbaum.

Finn, S. E., Fischer, C. T., & Handler, L. (Eds.). (2012). *Collaborative/ therapeutic assessment: A casebook and guide.* Wiley.

Fisher, J. P., Hassan, D. T., & O'Connor, N. (1995). Minerva. *BMJ, 310*(6971), 70–70.

Gara, M. A., Vega, W. A., Arndt, S., Escamilla, M., Fleck, D. E., Lawson, W. B., Lesser, I., Neighbors, H. W., Wilson, D. R., Arnold, L. M., & Strakowski, S. M. (2012). Influence of Patient Race and Ethnicity on Clinical Assessment in Patients With Affective Disorders. *Archives of General Psychiatry, 69*(6).

Gara, M. A., Minsky, S., Silverstein, S. M., Miskimen, T., & Strakowski, S. M. (2019). A naturalistic study of racial disparities in diagnoses at an outpatient behavioral health clinic. *Psychiatric Services, 70*(2), 130–134.

Goldberg, S. B., Babins-Wagner, R., Rousmaniere, T., Berzins, S., Hoyt, W. T., Whipple, J. L., Miller, S. D., & Wampold, B. E. (2016). Creating a climate for therapist improvement: A case study of an agency focused on outcomes and deliberate practice. *Psychotherapy: Theory, Research, & Practice, 53*(3), 367–375.

Gopalan, S. V., Morgan, P. C., Mach, A. L., Gottron, F., Pirog, R., Colello, K. J., … & Binder, C. (2016). *The 21st Century Cures Act* (Division A of P.L. 114-255). https://www.everycrsreport.com/files/20161223_R44720_7de466f330212fb01f4d17c5c3a2aa9e ab44f7d9.pdf

Hatfield, D. R., & Ogles, B. M. (2007). Why some clinicians use outcome measures and others do not. *Administration and Policy in Mental Health, 34*(3), 283–291.

HEDIS (2017) Depression Measures Specified for Electronic Clinical Data. Washington, DC, National Committee for Quality Assurance. https://www.ncqa.org/hedis/the-future-of-hedis/hedis-depression-measures-specified-for-electronic-clinical-data

Hooke, G. R., & Page, A. C. (2017, June). *Tailored progress monitoring questions that respond to patient responses dynamically: How does this inform clinicians, how does this assist patient treatment?* International Meeting of the Society for Psychotherapy Research, Toronto, CA.

Jensen-Doss, A., Douglas, S., Phillips, D. A., Gencdur, O., Zalman, A., & Gomez, N. E. (2020). Measurement-based care as a practice improvement tool: Clinical and organizational applications in youth mental health. *Evidence-Based Practice in Child and Adolescent Mental Health, 5*(3), 233–250.

Jensen-Doss, A., Haimes, E. M. B., Smith, A. M., Lyon, A. R., Lewis, C. C., Stanick, C. F., & Hawley, K. M. (2018). Monitoring treatment progress and providing feedback is viewed favorably but rarely used in practice. *Administration and Policy in Mental Health and Mental Health Services Research, 45*, 48-61.

Jensen-Doss A., Smith, A. M., Becker-Haimes, E. M., Ringle, V.M., Walsh, L. M., Nanda, M., … Lyon, A. R. (2018). Individualized progress measures are more acceptable to clinicians than standardized measures: Results of a national survey. *Administration and Policy in Mental Health and Mental Health Services Research*, 45(3), 392–403.

Kelley, S. D., & Bickman, L. (2009). Beyond outcomes monitoring: Measurement feedback systems in child and adolescent clinical practice. *Current Opinion in Psychiatry, 22*(4), 363–368.

Lambert, M. J., Whipple, J. L., & Kleinstäuber, M. (2018). Collecting and delivering progress feedback: A meta-analysis of routine outcome monitoring. *Psychotherapy: Theory, Research, & Practice, 55*(4), 520–537.

Lambert, M. J., & Shimokawa, K. (2011). Collecting client feedback. In J. C. Norcross (Ed.), Psychotherapy relationships that work (2nd ed.). New York: Oxford University Press.

Lewis, C. C., Boyd, M., Puspitasari, A., Navarro, E., Howard, J., Kassab, H., Hoffman, M., Scott, K., Lyon, A., Douglas, S., Simon, G., & Kroenke, K. (2019). Implementing measurement-based care in behavioral health: A review. *JAMA Psychiatry, 76*(3), 324–335.

ncgCARE

Lewis, C. C., Mettert, K. D., Dorsey, C. N., Martinez, R. G., Weiner, B. J., Nolen, E., Stanick, C., Halko, H., & Powell, B. J. (2018). An updated protocol for a systematic review of implementation-related measures. *Systematic Reviews, 7*(1), Article 66. https://doi.org/10.1186/s13643- 018-0728-3

Lovett, L. (2023, September 21). *Behavioral Health Payers and Providers Push Measurement-Based Care, But Clinicians Aren't Buying In*. Behavioral Health Business. Retrieved September 22, 2023, from https://bhbusiness.com/2023/09/21/behavioral-health-payers-and-providers-push-measurement-based-care-but-clinicians-arent-buying-in/

Lloyd, C. E., Duncan, C., & Cooper, M. (2019). Goal measures for psychotherapy: A systematic review of self-report, idiographic instruments. *Clinical Psychology: Science and Practice*, e12281.

Lutz, W., De Jong, K., & Rubel, J. (2015). Patient-focused and feedback research in psychotherapy: Where are we and where do we want to go? *Psychotherapy Research, 25*(6), 625-632.

Lutz, W., Rubel, J. A., Schwartz, B., Schilling, V., & Deisenhofer, A., K. (2019). Towards integrating personalized feedback research into clinical practice: Development of the trier treatment navigator (TTN). *Behaviour Research and Therapy, 120*, Article 103438.

Martin-Cook, K., Palmer, L., Thornton, L., Rush, A.J., Tamminga, C.A., & Ibrahim, H.M. (2021). Setting Measurement-Based Care in Motion: Practical Lessons in the Implementation and Integration of Measurement-Based Care in Psychiatry Clinical Practice. *Neuropsychiatric Disease and Treatment 17*, 1621–1631.

May, D. E., Kratochvil, C. J., Puumala, S. E., Silva, S. G., Rezac, A. J., Hallin, M. J., ... & March, J. S. (2007). A manual-based intervention to address clinical crises and retain patients in the Treatment of Adolescents With Depression Study (TADS). *Journal of the American Academy of Child & Adolescent Psychiatry*, *46*(5), 573-581.

Miller, S. D., Duncan, B. L., Sorrell, R., & Brown, G. S. (2005). The partners for change outcome management system. *Journal of Clinical Psychology, 61*(2), 199–208.

Moltu, C., Veseth, M., Stefansen, J., Nøtnes, J. C., Skjølberg, Å., Binder, P. E., Castonguay, L. G., & Nordberg, S. S. (2018). This is what I need a clinical feedback system to do for me: A qualitative inquiry into therapists' and patients' perspectives. Psychotherapy Research, 28(2), 250–263.

Muir, H. J., Coyne, A. E., Morrison, N. R., Boswell, J. F., & Constantino, M. J. (2019). Ethical implications of routine outcomes monitoring for patients, psychotherapists, and mental health care systems. *Psychotherapy: Theory, Research, & Practice, 56*(4), 459–469.

Nakamura, B. J., Daleiden, E. L., & Mueller, C. W. (2007). Validity of Treatment Target Progress Ratings as Indicators of Youth Improvement. *Journal of Child and Family Studies, 16*(5), 729–741.

National Alliance of Healthcare Purchaser Coalitions. (2021). *The path forward for mental health and substance use*. Retrieved October 25, 2021, from https://www.nationalalliancehealth.org/initiatives/initiativesnational/workplace-mental-health/pathforward

National Quality Forum. (2018). *Behavioral health and substance use fall 2017 cycle: CDP report.* http://www.qualityforum.org/Publications/ 2018/07/Behavioral_Health_and_Substance_Use_Fall_2017_Final_Re port.aspx

Oslin, D. W., Hoff, R., Mignogna, J., & Resnick, S. G. (2019). Provider attitudes and experience with measurement-based mental health care in the VA implementation project. *Psychiatric Services, 70*(2), 135–138.

Parikh, A., Fristad, M. A., Axelson, D., & Krishna, R. (2020). Evidence base for measurement-based care in child and adolescent psychiatry. *Child and Adolescent Psychiatric Clinics of North America, 29*(4), 587–599.

ncgCARE

Resnick, S. G., & Hoff, R. A. (2020). Observations from the national implementation of Measurement-Based Care in Mental Health in the Department of Veterans Affairs. *Psychological services, 17*(3), 238.

Scott, K., & Lewis, C. C. (2015). Using measurement-based care to enhance any treatment. *Cognitive and behavioral practice*, *22*(1), 49-59.

Stringer, H. (2023, June 1). *Measurement-based care is giving psychologists and their patients a better picture of treatment progress*. American Psychological Association. https://www.apa.org/monitor/2023/06/measurement-based-care-patients-treatment

Tabak, N., T., Link, P., C., Holden, J., & Granholm, E. (2015). Goal attainment scaling: tracking goal achievement in consumers with serious mental illness. *American Journal of Psychiatric Rehabilitation*, 18(2), 173–186.

Trivedi, M. H., & Daly, E. J. (2007). Measurement-based care for refractory depression: A clinical decision support model for clinical research and practice. *Drug and Alcohol Dependence, 88*(Suppl. 2), S61–S71.

Turner-Stokes L. (2009). Goal attainment scaling (GAS) in rehabilitation: A practical guide. *Clinical Rehabilitation*, 23(4), 362–370.

Utilization Review Accreditation Commission (URAC). (2021, May). *Measurement-Based care designation.* URAC. https://www.urac.org/accreditation-cert/measurement-based-care-designation/

Valenstein, M., Adler, D. A., Berlant, J., Dixon, L. B., Dulit, R. A., Goldman, B., Hackman, A., Oslin, D. W., Siris, S. G., & Sonis, W. A. (2009). Implementing standardized assessments in clinical care: Now's the time. *Psychiatric Services, 60*(10), 1372–1375.

Walfish, S., McAlister, B., O'Donnell, P., & Lambert, M. J. (2012). An investigation of self-assessment bias in mental health providers. *Psychological Reports, 110*(2), 639–644

Weisz, J., R., Chorpita, B., F., Frye, A., Ng, M., Y., Lau, N., Bearman, S., K, … Hoagwood, K., E. (2011). Youth top problems: Using idiographic, consumer-guided assessment to identify treatment needs and to track change during psychotherapy. *Journal of Consulting and Clinical Psychology*, 79(3), 369.

Williams, S. (2020). What are the key elements when utilizing a standardized tool to monitor progress toward treatment goals? In *The Joint Commission Standards*. The Joint Commission. https://www.jointcommission.org/standards/standard-faqs/behavioral-health/care-treatment-and-services-cts/000002332/

Wolpert, M., Vostanis, P., Martin, K., Munk, S., Norman, R., Fonagy, P., & Feltham, A. (2017). High integrity mental health services for children: Focusing on the person, not the problem. *The BMJ, 357*, Article j1500.

Zoffness, R. (2019, November 21). *A Tale of Two Nails*. Psychology Today. https://www.psychologytoday.com/us/blog/pain-explained/201911/tale-two-nails

ncgCARE