

Implementing Clinical Outcomes Assessment in Everyday School Mental Health Practice



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KEYWORDS

- Evidence-based assessment • School mental health
- Clinical outcomes assessment

KEY POINTS

- Evidence-based assessment (EBA) and outcomes monitoring can improve clinical care in school mental health.
- Several valid and reliable tools for EBA are available to clinicians at little or no cost.
- Many perceived barriers to implementation of EBA in school mental health settings can be overcome without significant burden on clinicians.

Evidence-based treatments have gained considerable attention in mental health and school mental health practice over the past decade, but less attention has been paid to the potential benefits of evidence-based assessment (EBA).^{1,2} The American Psychological Association Task Force on Evidence-based Practice with Children and Adolescents defines EBA as “assessments shown to be psychometrically sound for the populations on whom they are used.”^{3(p.8)} EBA is critical to evidence-based practice because accurate assessment of a child and family’s needs and strengths is essential to the identification of children’s mental health concerns, selection of appropriate treatments, ongoing monitoring of children’s response to interventions,

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Abbreviations

ADHD	Attention Deficit Hyperactivity Disorder
CANS	Child and Adolescent Needs and Strengths
CBCL	Child Behavior Checklist
CSMH	Center for School Mental Health
DISC	Diagnostic Interview Schedule for Children
EBA	Evidence-based assessment
OMS	Outcomes Measurement System
SMHP	University of Maryland School Mental Health Program

and outcomes evaluation.³ Assessment and ongoing progress monitoring are therefore an essential component of evidence-based clinical practice.^{1,4} Despite consensus on the utility of EBA in improving care, however, it is not frequently implemented in routine clinical practice.⁵ Even when there is agreement that accurate assessment is crucial to quality treatment, there may be questions regarding what to measure and how. Clinical outcomes measurements used in child and adolescent assessment may include self report, parent report, as well as direct observation of behavior. Clinician-administered instruments may be fully structured, semi-structured, or unstructured. Selection of the appropriate tool for assessment is essential for efficient data collection that informs quality treatment.⁵

This article reviews how potential barriers to implementation can be addressed and EBA can be integrated into clinical care without significant burden. This investment of time and energy has the potential to bring about significant improvement in clinical care. This article specifically focuses on the importance of and implementation considerations for EBA in school mental health practice. First, the background of EBA is reviewed, including use in research settings, and challenges and benefits associated with EBA instrument use in clinical practice. Examples of implementation of EBA in school mental health practice in two school mental health programs are also provided.

MAKING THE CASE FOR EVIDENCE-BASED ASSESSMENT IN SCHOOL MENTAL HEALTH PRACTICE: WHY IS IT IMPORTANT?

EBA can inform care at multiple stages of treatment and at multiple levels of service delivery. At the initial assessment stage of individual treatment, the use of standardized measures can increase the ease and accuracy of clinical diagnosis.^{6,7} At the stage of ongoing progress monitoring, use of standardized measures may be even more critical because clinicians are often not able to accurately detect symptom change.⁸ Finally, at the stage of discharge from services, results from these tools can be shared with patients and families to highlight successes in treatment and decide whether additional treatment goals need to be set.

The levels of service delivery informed by EBA include assessment of individual students, and evaluation of clinician caseload, clinical program, and systems of care considerations. At the individual student level, use of EBA can improve problem identification, diagnosis, treatment planning, and monitoring of progress.^{9,10} Tracking of individual progress allows clinicians to know whether treatment goals have been met and highlights needs for adapting interventions to meet the needs of individual students. At the clinician level, assessment data can also be used in aggregate by the clinician to better understand the global needs of the clinician's caseload. At the program level, assessment tools inform decisions about staffing needs and provide data on clinician effectiveness and cost-benefit analyses of particular treatments used in a program.^{2,11} Program administrators can use assessment data to address

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