



**CIBHS 8th Annual Evidence
Based Practices Symposium
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Feedback Informed Treatment:

An Approach for Evaluating and
Improving the Quality and
Effectiveness of Behavioral Health
Services



Agenda

- **Foundations of Feedback Informed Treatment (FIT)**
- **Feedback Informed Clinical Work: The Basics**
- **Feedback Informed Supervision**



Foundations of Feedback Informed Treatment



Behavioral Health Outcomes: Therapeutic Factors

- **The average treated person is better off than 80% of those without the benefit of treatment**
- **Treatment is cost effective**
- **Treatment works because of a core group of general factors**
 - Treatment Effects
 - Alliance Effects
 - Model/Technique Effects
 - Expectancy, Placebo & Allegiance Effects
 - Therapist Effects



Behavioral Health Outcomes: What Does Not Work in Therapy

- Failure to address dropouts in treatment**
- Failure to identify who will not benefit and who will deteriorate while in treatment**
- Substantial variation in outcomes between therapists with similar training & experience**
- Therapists lack of knowledge regarding their overall rate of effectiveness**
- Therapist effectiveness tends to plateau over time**



Behavioral Health Outcomes: What Does Work in Therapy

- **Evidence of the role of routine and ongoing feedback in improving outcomes**
 - Predictors of outcome:
 - Duration of therapy without positive change
 - Early client change
 - Client rating of the alliance
 - Level of client engagement
 - Improvement in the alliance over the course of treatment
- **Client level of distress at the start of therapy**



The Therapeutic Alliance

- **Substantial and consistent contributions to client success**
- **Best predictor of treatment outcome and is more highly correlated with outcome than therapist ratings**
- **Variability in outcome is due to differences in the alliance**
- **Monitoring alliance corrects problems with engagement and reduces early dropout**



Properties of Alliance and Outcome Measures

- **Reliability**
- **Validity**
- **Feasibility**
- **Sensitivity to Change**
- **The Outcome and Session Rating Scales**



Expert Performance and Clinical Practice

- **Establishing a baseline performance level**
- **Engaging in deliberate, reflective practice**
- **Obtaining ongoing feedback/coaching**



Feedback Informed Clinical Work: The Basics



Psychometrics of the Measures

- **Measures for tracking client well-being and the quality of the therapeutic alliance:**
 - The Outcome Rating Scale (ORS)
 - The Session Rating Scale (SRS)



Creating a Culture of Feedback

- **Creating an atmosphere where clients feel free to rate their experience**
- **Introducing the scales to the client**
- **Therapists and the culture of feedback**



Administering the Measures

- **Introducing the ORS to clients**
 - Interpreting the score

- **Introducing the SRS to clients**
 - Interpreting the score



Integrating Feedback into Care

- **Client treatment goals**
- **Client progress notes**
- **ORS and SRS as dialogue tools**



Feedback Informed Supervision



Key Principles of FIT Supervision

- **Include client feedback in supervision**
- **FIT Administrative Supervision**
 - FIT Administrative Supervision Checklist
- **FIT Clinical Supervision**
 - FIT Clinical Supervision Checklist



Administrative Supervision Checklist

- **Monitor client feedback in discussions about clients and Treatment Planning Sessions**
- **Establish policies regarding the use of data generated by client feedback**
- **Establish standards and methods for data management and reporting**



Administrative Supervision Checklist

- **Set clear standards for compliance in data generation**
- **Provide oversight and leadership for successful implementation and data collection:**
 - Providing adequate and ongoing training
 - Identify and address implementation roadblocks
 - Support consultant with staff as needed



Clinical Supervision Checklist

- **Build trust with clinicians and teams by using client feedback constructively rather than punitively;**
- **Be open to acknowledging, validating and addressing clinicians fears and concerns about data collection;**
- **Acknowledge clinicians efforts to use data in their practice and commend clinicians' willingness to present cases for consultation;**
- **Emphasize the opportunities for learning that failing cases bring;**



Clinical Supervision Checklist

- **Demonstrate a willingness to share and learn from their own failures;**
- **Encourage a balance between presenting successful cases and cases of concern in supervision;**
- **Act as a role model by demonstrating the introduction and integration of outcome and alliance measures;**



Clinical Supervision Checklist

- **Encourage consultation on “at risk” cases;**
- **Acknowledge that there is a learning curve for clinicians as they start to employ a data use approach and demonstrate patience, understanding, and support for clinicians as they learn;**
- **Inspire clinicians to establish baselines of performance, to learn new skills, and to increase their repertoire of treatment approaches thereby increasing their ability to match treatment approaches with client preferences.**



Practical Applications of FIT Supervision

- **Identifying cases for review in supervision**
 - Successful cases
 - At-risk cases
- **Lack of progress on the ORS**
- **Fluctuating ORS scores**
- **Problematic alliance scores**



“Red Flags” for Supervisors

- Therapist uses language inconsistent with FIT practice**
- Therapist not able to describe client preferences or goals for treatment**
- Therapist is vague about how outcome and alliance measures are used in practice**
- Therapist dropout rates are higher than national benchmarks**



“Red Flags” for Supervisors

- Therapist continues to see clients for long periods despite an absence of measurable progress**
- Alliance scores consistently reflect problems with client engagement**
- Therapist sees the formal use of outcome and alliance measures as an administrative rather than a relevant clinical task**
- Therapist outcomes are consistently lower than the national benchmarks**



Assisting Therapists with Continuous Professional Development

- 1. Establishing a baseline level of performance**
- 2. Seeking ongoing feedback**
- 3. Engaging in deliberate practice**



Questions?





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