



St Patrick's
Mental Health Services



Outcomes Report
Summary

2018

Introduction

Every year, St Patrick's Mental Health Services (SPMHS) publishes an Outcomes Report relating to clinical care pathways, governance processes, programmes and service user satisfaction surveys.

The comprehensive, full Outcomes Report is the eighth of its type produced by SPMHS and is central to the organisation's promotion of excellence in mental health care. This summary provides some highlights from the full report on the analysis of clinical outcomes of services provided by SPMHS. By measuring and publishing these service outcomes, we strive to understand what we do well and what we need to do to continue to improve.

PROMPT ASSESSMENT OF NEEDS (PAON)

In December 2017, SPMHS made enhancements to the way referrals are assessed in order to improve the speed of access to services; this was in response to feedback from service users and referrers on waiting times to access initial outpatient assessment in the Dean Clinics. Any referrals received for Dean Clinic assessment are now transferred into the new Referral and Assessment Service and offered a free-of-charge Prompt Assessment of Needs (PAON) by an experienced mental health nurse. This allows for more prompt, efficient mental health assessment and onward referral to the most appropriate service.

Service users can access the PAON from their own home, without the need to travel to a clinic. A range of communications technologies, including telephone and audiovisual technologies such as Skype or FaceTime, are used to provide the assessment. The choice of communication with the Referral and Assessment Service is based on the service user's preference.

The table below provides the number and percentages of adult PAONs completed and the outcome of each PAON in 2018. These results identify the immediate outcome of the PAON assessment.

	Number	%
Dean Clinic Referral	942	86.3%
Discharge*	76	8.2%
Inpatient Admission Referral	60	5.5%
Total	1,078	100%

**Discharge includes service users who declined any further services following PAON and service users for whom there was not an appropriate service to offer.*

CLINICAL OUTCOMES

Clinical Global Impression and Children's Global Impression Scales

The Clinical Global Impressions Scale (CGI) is a clinician-rated mental health assessment tool used to establish the severity of illness at point of assessment (CGIS) and global improvement or change following care, treatment or intervention (CGIC). The CGIS is rated on a 7-point scale, with the severity of illness scale rated from 1 (normal) through to 7 (most severely ill). CGIC scores range from 1 (very much improved) through to 7 (very much worse).

The Children's Global Assessment Scale (CGAS) is used in our child and adolescent services, providing a global measure of level of functioning in children and adolescents. The CGAS is scored by the Multidisciplinary Team (MDT) on a scale of 1 to 100, which reflects the individual's overall functioning level.

CGIC - Final Global Improvement or Change Score (Adult Inpatient Service)

	2016 Total	2017 Total	2018 Total
1. Very much improved	13%	15%	8%
2. Much improved	37%	45%	42%
3. Minimally improved	15%	15%	19%
4. No change	5%	5%	7%
5. Minimally worse	0%	0%	1%
6. Much worse	0%	0%	0%
7. Very much worse	0%	0%	0%
Not scored	31%	20%	24%

CGAS - Baseline and Final Assessment Scales (Willow Grove Adolescent Unit)

		2016		2017		2018	
		Baseline	Final	Baseline	Final	Baseline	Final
100 - 91	Superior functioning	0%	0%	0%	0%	0%	0%
90 - 81	Good functioning	0%	0%	0%	0%	0%	0%
80 - 71	No more than a slight impairment in functioning	0%	0%	0%	0%	0%	0%
70 - 61	Some difficulty in a single area, but generally functioning pretty well	0%	45%	0%	26%	0%	21%
60 - 51	Variable functioning with sporadic difficulties	24%	38%	7%	68%	0%	62%
50 - 41	Moderate degree of interference in functioning	61%	8%	56%	2%	41%	13%
40 - 31	Major impairment in functioning in several areas	12%	4%	36%	2%	46%	3%
30 - 21	Unable to function in almost all areas	4%	0%	1%	1%	13%	0%
20 - 11	Needs considerable supervision	0%	0%	0%	0%	0%	0%
10 - 1	Needs constant supervision	0%	0%	0%	0%	0%	0%
	Not scored	0%	5%	0%	0%	0%	3%
	Mean +/- SD	45+/-7	59+/-7	41+/-6	57+/-6	38+/-6	56+/-6
	Median	45	59	42	58	39	58
	Wilcoxon Signed Ranks Test	Z = -5.485	p<.001	Z = -7.841	p<.001	Z = -7.525	p<.001

Mindfulness Programme: Clinical Outcomes

The Mindfulness Programme provides eight weekly group training sessions in mindful awareness. The programme aims to introduce service users to the practice of mindfulness for stress reduction through group discussion and experiential practices.

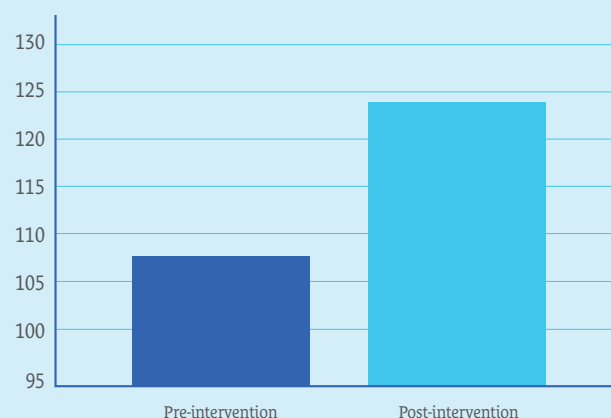
The programme explores ways of helping service users develop the ability to pay attention to the moment and to be more aware of thoughts, feelings and sensations in a non-judgemental way. Developing and practicing this non-judgemental awareness has been found to reduce psychological distress and prevent relapse of some mental ill-health experiences. The outcomes measure used by the Mindfulness Programme is the

Five Facet Mindfulness Questionnaire (FFMQ). The

FFMQ assesses the tendency to be mindful in daily life, including five specific facets of mindfulness: observing, describing, acting with awareness, non-reactivity to inner experience, and non-judging of inner experience.

Analysis for 2018 revealed a significant increase in total scores on the FFMQ from pre-intervention to post-intervention.

FFMQ Total Scores 2018



Note: Scores range from 39 to 195, with higher scores indicative of greater mindfulness.

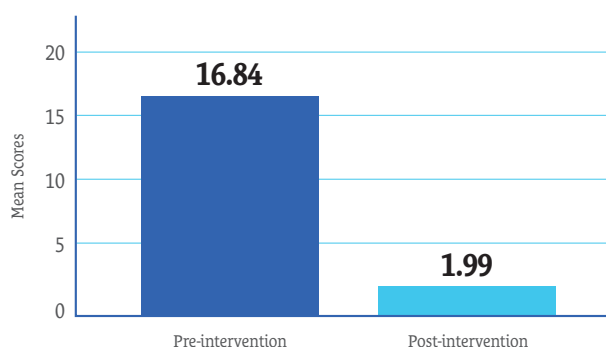
Alcohol and Chemical Dependence and Dual Diagnosis Programme Outcomes

The Alcohol and Chemical Dependence Programme (ACDP) is designed to help individuals with alcohol and/or chemical dependence/abuse to achieve abstinence by enabling them to develop an increased awareness of the implications and consequences of their drinking and/or drug-taking.

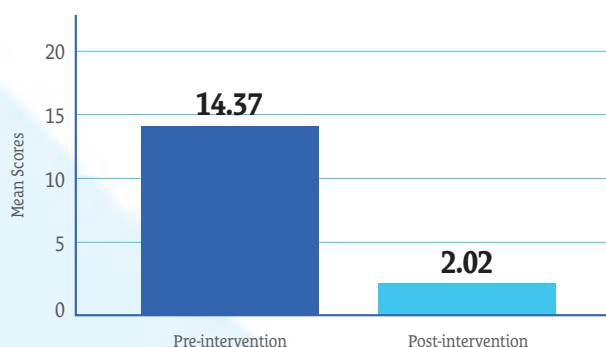
The Dual Diagnosis Programme is designed for adults who have a dependence on alcohol or chemical substances, and, in addition, a co-morbid diagnosis of a mental health difficulty, such as depression, anxiety or bipolar disorder. The aim of this programme is to enable service users to not only achieve abstinence and recovery in relation to substance use, but also to facilitate awareness and understanding and to provide practical support and knowledge in relation to their mental health difficulties.

Since 2014, the Leeds Dependence Questionnaire (LDQ) has been used to measure the clinical outcomes of the multidisciplinary, stepped-care ACDP and Dual Diagnosis Programmes.

ACDP: LDQ Total Scores 2018



Dual Diagnosis: LDQ Total Scores 2018



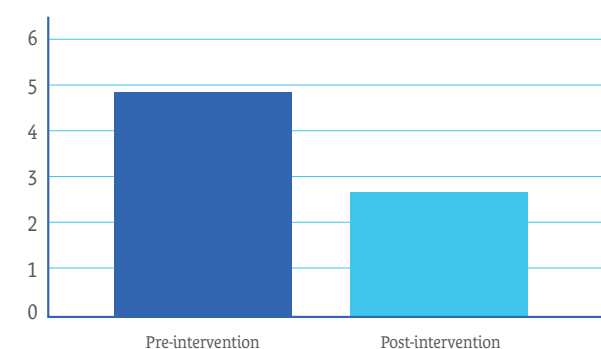
The LDQ is a ten-item questionnaire, designed to screen for mild to severe psychological dependence on a variety of different substances, including alcohol and opiates. This measure was completed by service users pre- and post- programme participation, and, in 2018, showed significant improvements in service users' mean scores following completion, for both programmes.

Eating Disorders Programme: Clinical Outcomes

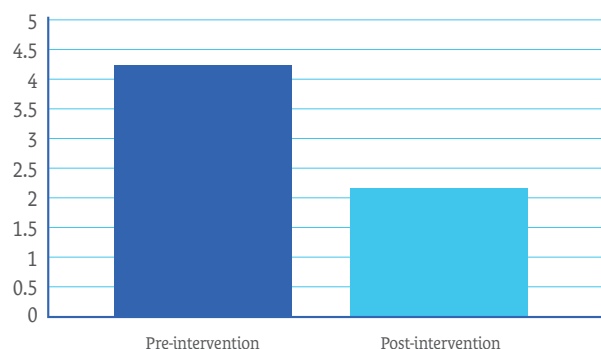
The Eating Disorders Programme (EDP) is a service specifically oriented to meet the needs of people with anorexia nervosa, bulimia nervosa and binge eating disorder. The objective of the programme is to address the physical, psychological and social issues arising as a result of an eating disorder, in an attempt to resolve and overcome many of the struggles associated with it. The programme is a multidisciplinary programme with an emphasis on a Cognitive Behaviour Therapy (CBT) treatment model, which is applied throughout inpatient, day patient and outpatient treatment stages, as needed by the service user.

The programme is structured into three stages. Following a PAON by the Referral and Assessment Service, a service user is assessed at the Dean Clinic. The typical care pathway then involves inpatient care, day care, and follow-up outpatient care. The results for all outcome measures utilised are reported in the full Outcomes Report, but, for the purpose of this summary, the Eating Disorder Examination Questionnaire (EDE-Q), is reported below. The EDE-Q, is a self-reporting version of the Eating Disorder Examination, which is considered to be the "gold standard" measure of eating disorder psychopathology. The pre- and post-programme results for both inpatients and day patients showed significant improvements in the EDE-Q Global Scores in 2018.

Pre- and post- the inpatient programme: EDE-Q Global Score



Pre- and post- the day patient programme: EDE-Q Global Score



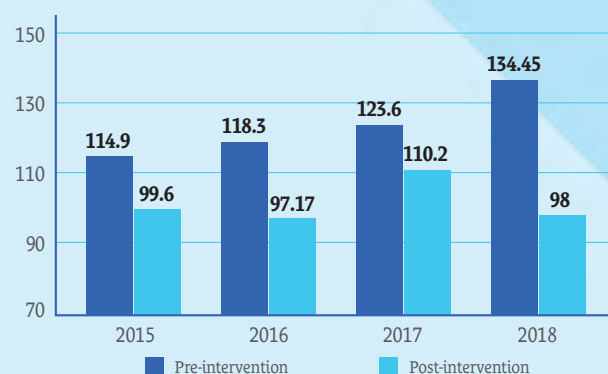


Living Through Distress (LTD) Programme: Clinical Outcomes

Living Through Distress (LTD) is a Dialectical Behaviour Therapy (DBT) informed, group-based intervention. The programme aims to teach emotional regulation, distress tolerance, mindfulness and interpersonal effectiveness skills for individuals with problems of emotion under-control, who frequently present with self-harmful behaviours. For those participants with pre- and post- data, significant advancements were observed in enhanced mindfulness, improved distress tolerance, and increased emotion regulation.

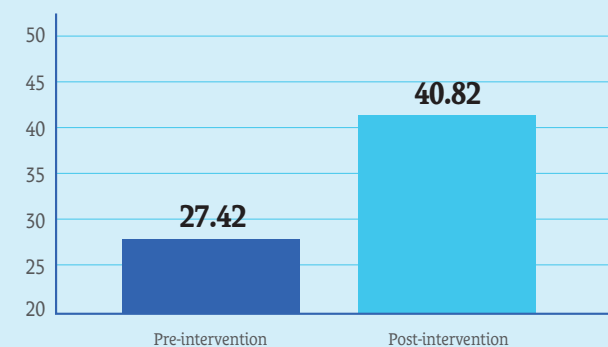
The three outcome measures for this programme are the Difficulties in Emotion Regulation Scale (which assesses emotion dysregulation), the Distress Tolerance Scale (measuring levels of distress and readiness to tolerate distress), and the Cognitive and Affective Mindfulness Scale (measuring the willingness and ability to be mindful, particularly related to psychological distress). The pre- and post- intervention results for all three of these scales showed significant improvements in 2018.

Difficulties in Emotion Regulation Scale Total Scores



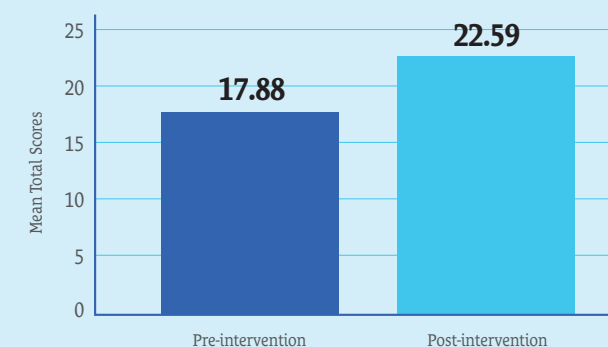
Note: Higher scores indicate greater difficulties with emotion regulation.

Distress Tolerance Scale Total Scores



Note: Higher scores indicate increased ability to tolerate distress. The scores range from 39 to 195, with higher scores indicative of greater mindfulness.

Cognitive and Affective Mindfulness Scale Total Scores



Overall Views of St Patrick's Mental Health Services

Those who completed and returned the 2018 Service User Satisfaction Survey within our adult inpatient services demonstrated a high level of satisfaction with the care they received.

Average Ratings of Care and Treatment and the Hospital Overall (scale 1-10)

How would you rate?	No.	Mean	Standard Deviation
Your care and treatment in hospital	219	8.3	2.1
The hospital, overall	215	8.6	1.7



Evaluating the Outcomes Report

REPORT STRENGTHS

By reporting the breadth of routinely collected clinical outcomes in our Outcomes Report, SPMHS demonstrates a willingness to constantly re-evaluate the efficacy of our clinical programmes and services in an open and transparent way. A detailed Service User Satisfaction Survey is well established in the full 2018 Outcomes Report, encompassing evaluation of all service delivery within SPMHS and reinforcing our commitment to service user-centred care and treatment.

The annual Outcomes Report has also provided valuable feedback to the staff who deliver services within SPMHS on the impact of their work. Their recruitment and ongoing education and training are underpinned by a philosophy which focuses on service users. The skills, talents and commitment of staff are reflected in the positive results within the 2018 Outcomes Report.

REPORT CHALLENGES

We continue in our efforts to expand the number of services included within the SPMHS Outcomes Report, but, as yet, we do not have all areas of service delivery included.

With no other organisation in Ireland currently producing a comparable report, efforts to benchmark our results can remain very difficult. Changes to the outcomes measures used have been implemented in order to best capture the efficacy of clinical programmes and services; this too can create challenges when comparing current results to previous reports.

The clinical outcome results in the report cannot be attributed solely to the services or interventions being measured, and are not developed to the standard of randomised control trials.

The relatively low Service User Satisfaction Survey response rate remains a significant challenge for SPMHS. The current content and structure of the survey is being reviewed, as well as the processes around how and when completion by service users is requested.



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