



Outcomes Report
Summary

2021

A photograph of two women walking in a brightly lit hallway. The woman on the left is wearing a light blue surgical mask and a matching light blue scrub top. The woman on the right is wearing a light blue surgical mask and a black long-sleeved top with black trousers. They are both looking towards the right. The hallway has wooden doors and a framed picture on the wall.

Introduction

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

This summary provides some highlights in relation to analysis of the clinical outcomes for services provided by SPMHS. The comprehensive *Outcomes Report* is the eleventh of its type published by SPMHS and is central to the organisation's promotion of excellence in mental healthcare.

By measuring and publishing outcomes of the services we provide, we strive to understand what we do well and what we need to continue to improve.

The organisation delivered a full and comprehensive *Outcomes Report* in 2021, despite the challenges posed by a second year of the COVID-19 pandemic, demonstrating the commitment of all SPMHS staff to continuously measure and improve our services. In 2021, SPMHS continued to build on the successes of 2020, consolidating and embedding our new models of care while protecting our service users and staff.



In 2021, many services continued to be delivered remotely, ensuring a full range of care was offered across inpatient services, day services and the community Dean Clinics, based on a service user's assessment of needs. These technology-mediated interventions did not replace inpatient admission for those requiring care delivered on-site. Following its introduction in 2020, SPMHS continued to offer a Homecare service offering all the elements of our inpatient services, but provided remotely in the service user's own home. This involves the highest levels of one-to-one mental health support, delivered remotely through daily or more frequent contact over videocall and other technological channels.

Prompt Assessment of Needs (PAON)

Referrals received for an SPMHS Dean Clinic assessment are transferred into our Referral & Assessment Service (R&A) and receive a free-of-charge prompt assessment of needs by an experienced mental health nurse. This allows for more prompt and efficient mental health assessments and onward referral to the most appropriate service.

Service users can access this assessment from their own home, without the need to travel to a clinic. A range of digital communications, including telephone and audio-visual technologies, are used to provide the assessment. The choice of communication with the R&A is based on the preference of the service user.

The table below provides the number of adult PAON assessments completed in 2020 and 2021. There was a significant rebound in PAON assessments in 2021 following a decrease in referrals during the early months of the pandemic in 2020. The 2021 total was the highest number of PAON assessments completed since the service began in 2018.

	2020 Number	2021 Number
PAON Assessments	995	1,338

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 scored following care, treatment or intervention (CGIC). The CGI is rated on a seven-point scale, with the severity of illness scale rated from one (normal) through to seven (most severely ill). CGIC scores range from one (very much improved) through to seven (very much worse).

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

CGIC – Final Global Improvement or change score (Adult inpatient service)

	2019 Total	2020 Total	2021 Total
1. Very much improved	7%	9%	8%
2. Much improved	44%	40%	41%
3. Minimally improved	23%	29%	29%
4. No change	5%	10%	12%
5. Minimally worse	0%	1%	1%
6. Much worse	0%	0%	0%
7. Very much worse	0%	0%	0%
Not scored	21%	10%	9%

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

Children's Global Assessment Scale		2018		2019		2020	
		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%	1%	0%	1%
70 - 61	Some difficulty in a single area, but generally functioning pretty well	0%	21%	0%	49%	1%	41%
60 - 51	Variable functioning with sporadic difficulties	0%	62%	0%	33%	1%	41%
50 - 41	Moderate degree of interference in functioning	41%	13%	25%	2%	17%	9%
40 - 31	Major impairment to functioning in several areas	46%	3%	59%	5%	67%	8%
30 - 21	Unable to function in almost all areas	13%	0%	12%	2%	9%	0%
20 - 11	Needs considerable supervision	0%	0%	4%	1%	2%	0%
10 - 1	Needs constant supervision	0%	0%	0%	0%	0%	0%
	Not scored	0%	3%	1%	6%	1%	0%
	Mean +/- SD	38+/-6	56+/-6	36+/-6	58+/-10	36+/-7	57+/-9
	Median	39	58	38	61	35	59
	Wilcoxon Signed Ranks Test	Z = -7.525	p<.001	Z = -7.517	p<.001	Z = -5.973	p<.001

Alcohol and Chemical Dependency and Dual Diagnosis: Programme outcomes

The Alcohol and Chemical Dependence (ACDP) programme 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/drug-taking.

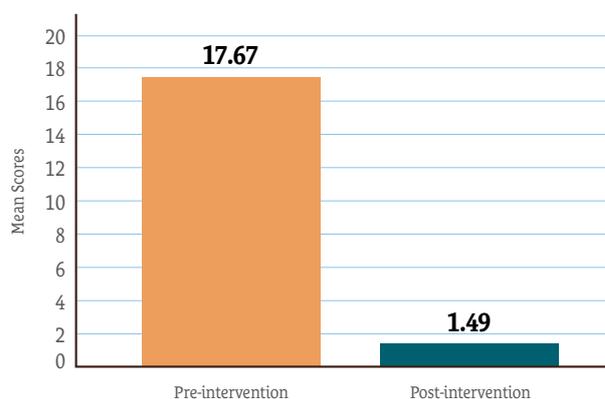
The ACDP is designed for adults with a dependence on alcohol or chemical substances, and in addition, have a co-morbid diagnosis of a mental health difficulty such as depression, anxiety or bipolar disorder. The aim of this programme is to enable service users to not only achieve abstinence and recovery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

Since 2014, both the ACDP and Dual Diagnosis programmes have used the Leeds Dependence Questionnaire (LDQ) to measure the clinical outcomes of these multidisciplinary stepped care programmes.

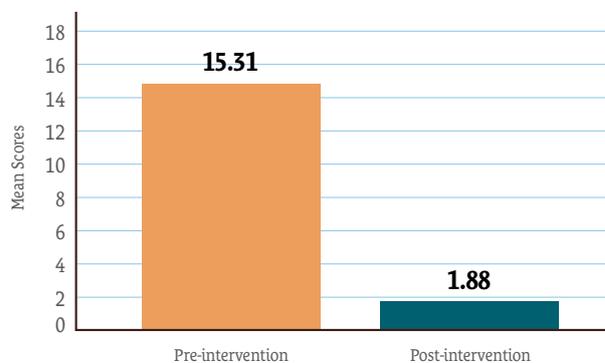
The LDQ is a 10-item questionnaire designed to screen for mild to severe psychological dependence on a variety of different substances, including alcohol and opiates. This measure was completed by service users pre and post-programme participation, and showed significant improvements in service users' mean scores following completion for both programmes.

Total scores on Leeds Dependency Questionnaire

ACDP: LDQ Total Scores 2021



Dual Diagnosis Programme: LDQ Total Scores 2020



The Eating Disorders programme: Programme outcomes

The Eating Disorders programme (EDP) is a service specifically oriented to meet the needs of people with anorexia nervosa, bulimia nervosa, binge eating disorder and other specified feeding and eating disorders (OSFED). 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 behavioural therapy (CBT) treatment model which is applied throughout inpatient, day programme and outpatient treatment stages as needed by the service user.

The programme is structured into three stages. Initially service users are assessed at the Dean Clinic. The typical care pathway then involves inpatient care, day care and follow-up outpatient care. Treatment can also be provided in a standalone capacity as an inpatient, day care service user or an outpatient.

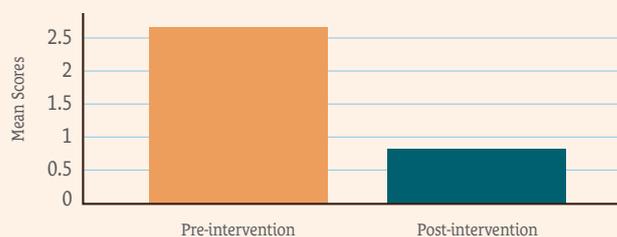
The Eating Disorder Examination Questionnaire (EDE-Q) is a self-report version of the Eating Disorder Examination which is considered to be the 'gold standard' measure of eating disorder psychopathology. Respondents were asked to indicate the frequency of certain behaviours, as well as attitudinal aspects of eating disorder psychopathology on a seven-point rating scale.

This measure was completed by service users pre and post-inpatient programme participation and showed clinically significant improvements in service users' mean scores. These improvements were demonstrated for the total EDQ scores and for each of the four sub-scales.

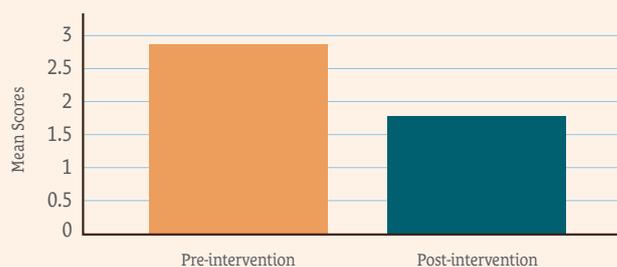
Graph: EDE-Q Global and sub-scale scores pre and post-intervention

EDE-Q Global and sub-scale scores pre and post-intervention

EDE-Q restraint concerns sub-scale



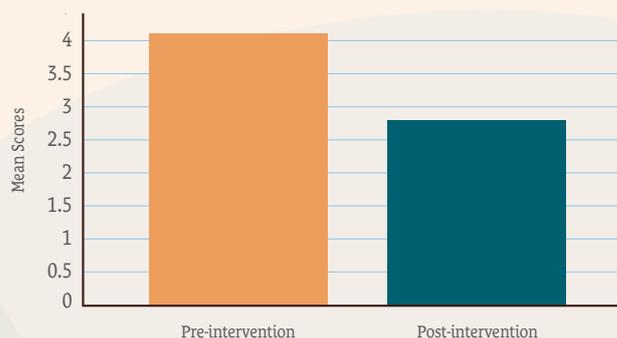
EDE-Q eating concerns sub-scale



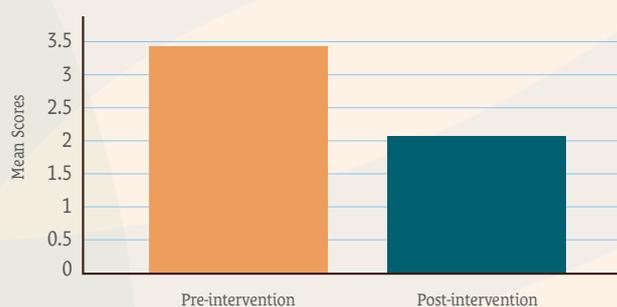
EDE-Q shape concerns sub-scale



EDE-Q weight concerns sub-scale



EDE-Q total scores



Dialectical Behaviour Therapy (DBT): Programme outcomes

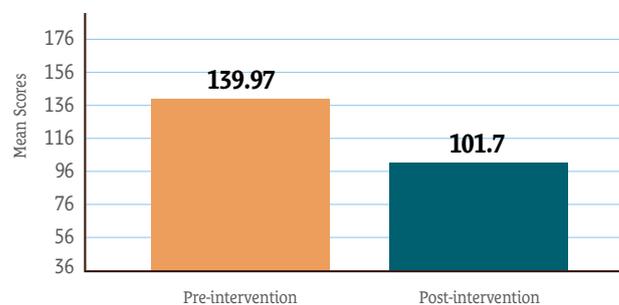
The DBT programme (formerly named Living Through Distress) aims to teach emotional regulation, distress tolerance, mindfulness and interpersonal effectiveness skills for individuals who experience out of control behaviour in the context of emotional dysregulation. Towards the end of 2021, the Living Through Distress (LTD) team made the decision to rename the programme Dialectical Behavioural Therapy (DBT). This is to reflect that fact that, while LTD has always been based on the DBT model, in the last two years the programme moved towards delivering an intervention that is very much adherent to the DBT approach - although in a more intensive format. It is hoped this name change will ensure prospective service users are more clearly informed on the nature of the programme they will engage with.

DBT is a multimodal staged psychotherapeutic approach. The DBT programme at SPMHS is a stage one DBT programme "focusing on moving from out of control behaviour to behaviour control, even (or especially) in the presence of high-intensity emotions." (Rizvi & Sayrs, 2020) Client behaviours determine the stage of treatment and this determination is done via assessment (not just based on reports of diagnostic status). DBT stage one targets life-threatening behaviours, severe therapy-interfering behaviours and severe quality of life-interfering behaviours. It provides a number of modes of intervention, group skills training, individual DBT sessions, phone coaching and availability of a DBT consultation team. In addition to the comprehensive DBT streams, in 2021, a DBT skills group was established.

The four outcome measures for this programme were the Difficulties in Emotion Regulation Scale (which assesses emotion dysregulation), the Distress Tolerance Scale (measuring levels of distress and readiness to tolerate distress), the Cognitive and Affective Mindfulness Scale (measuring the willingness and ability to be mindful, particularly related to psychological distress) and the Ways of Coping Checklist (measuring the thoughts and acts that people use to deal with the internal and/or external demands of specific stressful encounters). Pre and post results for all four of these scales showed significant improvements.

Difficulties in Emotion Regulation Scale Total Scores 2021

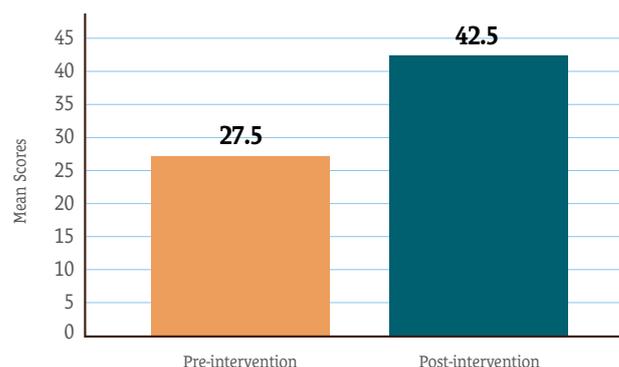
DERS Scores



Note: Higher scores indicate greater difficulties with emotion regulation.

Distress Tolerance Scale Total Scores 2021

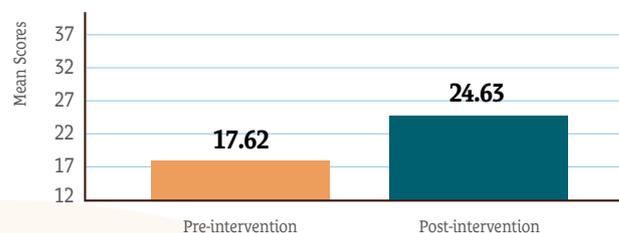
DTS Scores



Note: Higher scores indicate increased ability to tolerate distress.

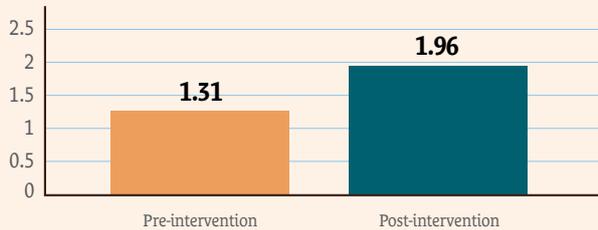
Mean CAMS-R Scores for Comprehensive Group Total Scores 2021

CAMS-R Scores

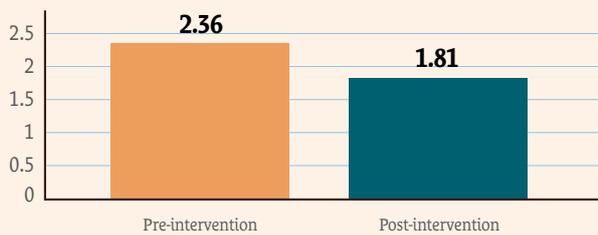


**Ways of Coping Checklist
Subscale Scores 2021**

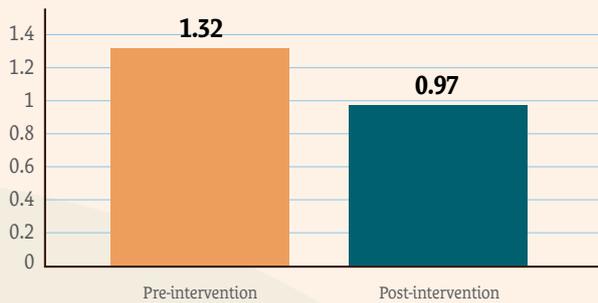
WCCL DBT Skills



WCCL Dysfunctional Coping Scale



WCCL Dysfunctional Coping Scale



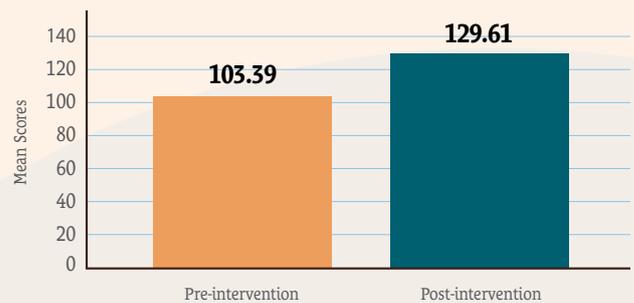
**Mindfulness:
Programme outcomes**

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 aims to help 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 practising this non-judgemental awareness has been found to reduce psychological distress and prevent relapse of some mental ill-health experiences. The outcome 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 revealed a significant increase in total scores on the FFMQ from pre-intervention to post-intervention. This indicates that the programme continues to be successful in helping service users develop their capacity for mindfulness in daily life.

**Five Facet Mindfulness Scale mean
Total scores 2021**

FFMQ



Service users' feedback of SPMHS

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

Respondents' ratings of care and treatment and overall experience of the hospital (1 = lowest, 10 = highest)

How would you rate?	No.	Mean	Standard Deviation
Your care and treatment in hospital	193	7.65	2.60
The hospital, overall	193	7.68	2.64



Report strengths

SPMHS continues to lead the way in providing such a detailed insight into service accessibility, efficacy of clinical programmes and service user satisfaction. Reporting this breadth of routinely collected clinical outcomes demonstrates a willingness to constantly re-evaluate the efficacy of our clinical programmes/services in an open and transparent way.

Well established in the full-length *Outcomes Report*, available on stpatricks.ie, is a detailed Service User Satisfaction Survey which encompasses all service delivery within SPMHS, and reaffirms the organisation's commitment for service user-centred care and treatment. SPMHS staff have continued to effectively report outcome measures in 2021, despite the continued challenges posed by the COVID-19 public health restrictions. Technology-mediated care continues as an effective option for clinical service delivery and providing access and convenience to service users.

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. Efforts to benchmark the results of this report remain very difficult as no other organisation within Ireland produces a comparable report. In order to best capture the efficacy of clinical programmes and services, there have been changes in the outcome measures used, which can create difficulties when comparing results to previous reports.

The report's clinical outcome results cannot be solely attributed to the service or intervention being measured and are not developed to the standard of randomised controlled trials. The relatively low response rate to the Service User Experience Survey remains a significant challenge for SPMHS, but the digitalisation of the survey in 2021 did lead to an increase in the number of responses received.

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