

# Using Clinical Progress to Guide Treatment: Measurement-Based Care

### **About the Core Topic**

Measurement-based care (MBC) is the clinical approach of using regularly collected patient-reported outcome measures to monitor progress and inform treatment decisions. These data track how a patient (hereafter 'client') is responding to treatment and inform treatment adjustments for individuals who are not getting better. MBC produces "real-time" data to help clinicians and clients communicate about the client's experience in treatment and decide how and when to adjust treatment to improve outcomes. MBC can also help clients and clinicians know when treatment is working and can help inform decisions to make treatment less intensive or to conclude a treatment episode. MBC has been shown to improve clinical outcomes; however, is underutilized in community mental health practice.<sup>1</sup>

## **Key Components**

#### WHAT DOES MBC LOOK LIKE FOR CLIENTS AND CLINICIANS?

Here are the steps of MBC:

- Client completes an outcome measure or measures, ideally before each clinical encounter.
- Clinician reviews data from the measure.
- Client reviews data from the measure.
- Clinician and client discuss to ensure that the data are consistent with the client's experience.
- Clinician and client collaboratively reevaluate the treatment plan informed by the data.<sup>2</sup>

Where possible, patient-reported outcome measures (PROMs) are recommended for MBC because they foster client engagement and can be implemented in community settings with limited technology infrastructure. These measures should be brief, easy to collect, validated and sensitive to change. PROMs can measure symptoms, typically for a particular diagnosis, or other domains such as functioning and quality of life. Organizations may choose to use standardized measures and/or individualized progress monitoring approaches, which allow clinicians and clients to identify and track personalized goals over time.<sup>3</sup>



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#### **STEPS TO IMPLEMENT MBC**

To implement MBC in an organization, there are several common steps:<sup>4</sup>

- Clarify the goals and priorities for using MBC.
- Choose measures that will support those goals and priorities.
- Select the group of clients for implementation.
- Identify, train, and support MBC clinician implementers.
- Decide how the measures will be completed and how results will be shared with clinicians and clients.
- Determine frequency of measure collection.
- Implement organizational strategies to support the use of MBC.
- Monitor and support ongoing uptake and implementation of MBC.
- Develop strategies to finance and sustain MBC over time.<sup>5</sup>

#### **REPOSITORY OF PROMS**

We convened a panel of national experts in MBC to compile a list of standardized, <u>patient-reported outcome measures</u> (<u>PROMs</u>). The process was guided by a review of the peer-reviewed literature as well as reports and white papers addressing implementation of MBC in community mental health settings. The committee identified a set of PROMs that were validated, brief, publicly available at no cost, and sensitive to change over time. This repository includes measures for youth and adults, that address symptomatic and functional outcomes, that are standardized and individualized approaches to measurement, and that are applicable to a wide range of mental health conditions. The repository is intended to be a starting point for measure selection; other patient-reported measures not included here may also be useful in MBC.

#### References:

1. Interdepartmental Serious Mental Illness Coordinating Committee Data and Evaluation Working Group. (2023). Use of measurement-based care for behavioral health care in community settings, a brief report.

2. 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.

3. 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.

4. Yale Measurement Based Care Collaborative. (n.d.). Yale School of Medicine.

5. Yale Measurement Based Care Collaborative. (2024). MBC Implementation Planning Worksheet.



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### **Key Resources**

These practical resources are designed to help you move from planning to action.

- <u>Use of Measurement-Based Care for Behavioral Health Care in Community Settings, a Brief Report</u>. Interdepartmental Serious Mental Illness Coordinating Committee Data and Evaluation Working Group.
- Implementing Measurement-Based Care in Behavioral Health: A Review. 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.
- What Gets Measured Gets Done: How Mental Health Agencies Can Leverage Measurement-Based Care for Better Patient Care. Connors, E. H., Douglas, S., Jensen-Doss, A., Landes, S. J., Lewis, C. C., McLeod, B. D., Stanick, C., & Lyon, A. R.
- Yale Measurement Based Care Collaborative. Yale School of Medicine.
- <u>MBC Implementation Planning Worksheet</u>. Yale Measurement Based Care Collaborative.
- *Financing Measurement-Based Care in Community Behavioral Health Settings*. Substance Abuse and Mental Health Services Administration.
- *National Repository of Patient-Reported Outcome Measures*. Center for Mental Health Implementation Support, Measurement-Based Care Workgroup.



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