Abstract

Janine DeSimone

Johns Hopkins School of Nursing

NR.210.889.8101 Project Evaluation and Dissemination

Project Advisor: Dr. Bryan Hansen Ph.D., RN, APRN-CNS, ACNS-BC

Assignment Due Date: April 22, 2023
Abstract

**Background:** Psychiatric disorders have a detrimental impact on overall health and well-being. Unfortunately, the quality of care for psychiatric disorders has not improved to the same extent as other medical conditions. The usual standard care in psychiatry (USC) relies heavily on psychiatric interviews to diagnose patients and monitor progress. USC leads to considerable variations in practice and inconsistent care. Unfortunately, less than 20% of mental health clinicians have adopted Measurement-Based Care (MBC) into their daily practice, a systematic approach to care using objective, quantifiable patient data to monitor patient progress and inform treatment decisions.

**Methods:** This pre-post quality improvement project sought to increase provider compliance with MBC by establishing an office protocol in an outpatient psychiatric setting. The 12-week project included technology and education interventions to address identified barriers and used chart reviews to assess provider compliance. A post-intervention survey analyzed provider attitudes toward a new evidence-based practice.

**Results:** A total of six providers who worked in the outpatient practice were included. The findings show that these two interventions profoundly impacted provider behaviors. From pre to post-intervention, provider compliance went from 0% to 100% and 0% to 86%, respectively. These results demonstrate that when providers receive training and are technologically supported, they are willing to use a new evidence-based practice. Additionally, provider attitudes were positive toward using a new evidence-based practice.

**Conclusion:** Findings suggest the problem of low MBC adoption rates can be effectively remedied by addressing the barriers, including time constraints, increased workload, workflow issues, negative provider attitudes, and lack of education. Technology and education
interventions are solid first steps and have been demonstrated to be highly effective in addressing this practice gap.

**Implications:** Future initiatives should focus on educational efforts to familiarize mental health clinicians with MBC and technology solutions for a wide range of practices.

Keywords: measurement-based care, usual standard care, psychiatry, mental health, quality