

## **Benefits of Using Outcome Measures**

Patients seek behavioral health treatment to get better. In turn, providers want to see improvement in their patients. Using outcome measures before, during, and at the conclusion of treatment is an easy way to monitor symptoms, track patient progress, provide feedback to patients, and demonstrate the effectiveness of the treatment.

## **How Do Outcome Measures Benefit Your Clinic?**

• Give providers an objective method by which to establish baseline symptoms for each patient and to monitor progress session by session

- Are easy to administer and score and do not subtract from valuable treatment time
- Act as a supplement to providers' diagnostic assessment and treatment planning
- Help providers determine if treatments are working and if adjustments are needed
- Can be shared with patients and used as a therapeutic tool in session to provide feedback to patients on their progress, and to show patients their improvement



"Clinical outcomes based on measures standardized for patient cohorts and validated in scientific, peer-reviewed literature will be documented at all points of mental health care at MTFs." (DASD, 2013)

- Using outcome measures has been found to lead to improved patient outcomes (Lambert et al., 2003)
- Track progress at a clinic-wide level and demonstrate the overall effectiveness of clinic treatment for a variety of disorders. Readily identify strengths and opportunities for growth in a clinic.
- Outcome measures are required at all MTFs using the Behavioral Health Data Portal (BHDP)

**NOTE:** Despite some misconceptions, a provider or clinic does not need Institutional Review Board (IRB) approval to use outcome measures. These measures can be used for tracking individual patient progress, or at the clinic level, for process improvement and/or program evaluation.

## References:

Deputy Assistant Secretary of Defense. (September 9, 2013). *Military treatment facility mental health clinical outcomes guidance.* [Memorandum]. Washington, DC: Office of the Assistant Secretary of Defense.

Lambert, M. J., Whipple, J. L., Hawkins, E. J., Vermeersch, D. A., Nielsen, S. L., & Smart, D. W. (2003). Is it time for clinicians routinely to track patient outcome? A meta-analysis. *Clinical Psychology*, *10*, 288-301. https://psycnet.apa.org/doi/10.1093/clipsy.bpg025