



Achieving **R**ecovery/**R**esiliency the **O**utcomes **W**ay

Alternatives Conference
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Workshop Agenda

1. **Ohio Consumer Outcomes Initiative**
2. **ARROW Report**
 - Purpose/Development
 - Goal setting/treatment plan
 - Barriers/Solution
3. **Stand-alone computer version of report**
4. **You try it!**
5. **Training**



Overview: Ohio Consumer Outcomes Initiative

- Origin
 - **In September 1996, Michael F. Hogan, Ph.D., Director of ODMH, convened the Ohio Consumer Outcomes Task Force**
- Charge
 - **Develop a statewide approach to measuring consumer outcomes in Ohio's publicly-supported mental health system**
- Purpose
 - **Facilitate consumer recovery**
 - **Improve service delivery system**
 - **Account for public resources**



Outcomes Instruments

- **Adult Consumer Form A**
- **Adult Provider Form A**
- **Adult Consumer Form B**
- **Ohio Youth Scales Youth Rating**
- **Ohio Youth Scales Parent Rating**
- **Ohio Youth Scales Agency Worker Rating**



Outcomes Instruments

- *Adult Consumer Form A*
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Adult Consumer Form A

67 Item Survey with four domains:

1. **Safety & Health**
2. **Symptom Distress**
3. **Functional Status**
4. **Quality of Life (including empowerment)**
 - **Making Decisions Empowerment Scale**
 - Overall empowerment
 - Self esteem/self-efficacy
 - Power/powerlessness
 - Community activism & autonomy
 - Optimism & control over the future
 - Righteous anger

Survey Administration

Policy/Procedure:

- **Administered at intake, 6 & 12 months later and then annually**
 - Access database
 - telesage
 - Point of View box
 - paper/pencil/scan
- **Requirement of the Ohio Administrative Code for all contract agencies (2004)**
- **Necessary for attaining and maintaining certification**



Outcomes Report

- **Demographic information**
- **Summary scores for scales**
- **Actual items**
 - **Quality of life**
 - **Physical health and stigma**
 - **Symptom distress**
 - **Symptom recognition and prevention**
 - **Making Decisions Empowerment scale**
- **Format of report varies depending on type of administration (Hamilton County uses the Point of View)**

Point-of-View Box and Docking Station



Segment of Point of View Report

Symptom Distress Scale (Part 3: Q17-Q31)

X Nervousness or shakiness inside	Extremely	5 (=)
Being suddenly scared for no reason	Some	3 (=)
Feeling fearful	A little bit	2 (-)
Feeling tense or keyed up	A little bit	2 (-)
Spells of terror or panic	A little bit	2 (-)
X Feeling so restless you couldn't sit still	Extremely	5 (+)
Heavy feelings in arms or legs	A little bit	2 (-)
Feeling afraid to go out of your home alone	A little bit	2 (-)
Feeling of worthlessness	A little bit	2 (-)
Feeling lonely even when you are with people	Quite a bit	4 (+)
Feeling weak in parts of your body	A little bit	2 (-)
Feeling blue	Some	3 (=)
Feeling lonely	Some	3 (-)
Feeling no interest in things	Not at all	1 (-)
Feeling afraid in open spaces or on the streets	Not at all	1 (-)

Symptom Recognition & Prevention (Part 3: Q32-Q33)

How often can you tell when mental or emotional problems are about to occur	Always	5 (+)
How often can you take care of the problems before they become worse	Often	4 (+)

* Extreme negatives (X) in yellow and extreme positives (bold) in blue

* Changes from previous to current administration indicated in parentheses



Criticisms of Report

- **Format not user-friendly**
 - **Basically a report that regurgitates the information that consumers provided**
 - **disconnect between the report and treatment planning (report not being used)**
-
- **Survey not administered frequently enough for optimal use**



Achieving Recovery/Resiliency the Outcomes Way (ARROW) Report



Development of ARROW Report

- **Goal: develop a recovery-oriented tool that is responsive to the needs of both service recipients and providers.**
- **2003 Ohio Department of Mental Health grant awarded to further the marriage between Outcomes and Recovery.**
- **Collaborative effort of consumers, family members, academics, and agency, board and ODMH staff.**

Development of ARROW Report

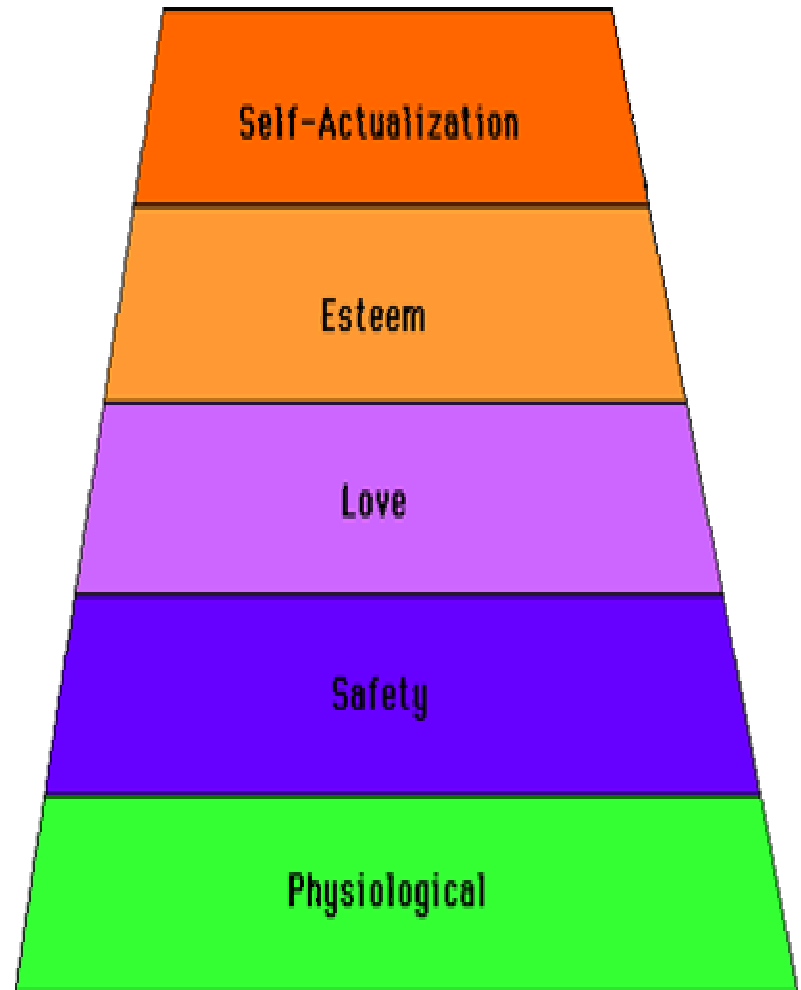
- **Participants were asked to assign each Ohio Consumer Outcomes Survey item to the recovery components.**
- **Example: Q1 How do you feel about the amount of friendship in your life?**
Component = Support

- **Hope**
- **Medication**
- **Empowerment**
- **Self-esteem/ efficacy**
- **Support (family/friends)**
- **Education/Knowledge**
- **Self-Help/Self-Care**
- **Spirituality**
- **Clinical Care**
- **Work/Meaningful Activity**
- **Power & Control**
- **Stigma**
- **Community Involvement**
- **Access to Resources**
- **Physical health**

Maslow's Hierarchy

Participants were also asked to assign each component of recovery to a particular level of Maslow's hierarchy of Needs.

For example:
Support = "Love/Belongingness"





Recovery Component Ratings

○ Physiological:

- Physical health
- Medication
- Education *
- Clinical Care *

○ Safety:

- Access to resources *
- Community Involvement *
- Power & Control *
- Hope
- Self-help/Self-care



Component Ratings Con't

○ Love:

- Support (family, peer & friend) *
- Empowerment

○ Esteem:

- Work/meaningful activity *
- Stigma *
- Self-esteem/self-efficacy

○ Self Actualization:

- Spirituality

* Nine components of recovery from the Emerging Best Practices in Mental Health Recovery Process (ODMH: 1999)



ARROW Report Format

- **Items ordered by response type**
 - **Items with extreme negative response appear first.**
 - If less than 12 extreme negative responses, report includes negative responses up to 12 items.
- **Items ordered by perceived importance**
 - **Most critical to less critical**
 - The individual completing the survey may not agree with the ordering of the items.

Treatment Activities

- **Finally, for each question, participants were asked to develop examples of activities that might be useful to the consumer who reports an extreme negative response to that question.**
- **Example:**
Consumer reports extreme dissatisfaction with amount of friendship in his/her life
 - **Develop a list of places/activities of interest, which provide possible opportunities for developing social contacts.**
 - **Attend the *social club* available in the area for at least *one hour two times each week*.**
 - **Invite someone to *lunch* or to participate in an activity with.**
 - **Practice social/communication skills with treatment provider *one hour each week*.**



ARROW Report Attributes

- **Two copies of the report are printed - one for the chart and one for the consumer to take with them**
- **Each item that the individual identifies as important to them constitutes a section**
- **The number of sections varies based on the number and degree of difficulties experienced**
- **Only extreme negative or negative responses appear on the report**

Segment of ARROW Report

1. **How do you feel about:
amount of friendship in
your life.**

Answer: Terrible

- I will develop a list of places/activities of interest, which provide possible opportunities for developing social contacts.
 - I will attend the *social club* available in the area for at least *one hour two times each week*.
 - I will invite someone to *lunch* or to participate in an activity with me.
 - I will practice social/communication skills with my treatment provider *one hour each week*.
-

49. **Usually I feel alone.**
Answer: Strongly Agree

- I will call the warm line or participate in online chats when feeling lonely.
- I will go to a *day program/consumer agency* to increase my social interaction.
- I will attend a social activity *at least once per month at church or other community organization*.
- I will get a pet.



Goal Setting/Treatment Planning

- **One of the primary purposes of the ARROW report is to provide clinicians with a tool for improving the treatment planning process**
 - **Involves the consumer in the process**
 - **Provides connection between survey results and treatment plan goal setting**
 - **Provides example activities that are observable and measurable**



Potential Barriers

- **Requires that staff administer the survey and use the ARROW report in treatment**
 - **Person in recovery is dependent on their treatment provider**
- **Survey is administered at limited time intervals**
- **Person in recovery may discontinue services and/or move out of state**



Solution

- **Develop a stand-alone computer version of the Ohio Consumer Outcomes Survey and ARROW report**
 - **Allows a person to access and utilize the ARROW report without the assistance of their treatment provider**
 - **Can take the survey as frequently as desired**
 - **Can be used by anyone, anywhere; as long as they have access to a computer**
 - **Allows a person to modify the example activities as desired**



Stand-alone Version of ARROW

- **Development and design**
- **Limitations**
- **Availability**



Putting the **ARROW** to Use

- **You try it!**
- **Training**
 - **Video/Written documentation**
 - **Provided at consumer-operated agencies and consumer-run psychosocial programs**
 - **Web based**

Q & A

○ Questions/Comments

○ Additional Information

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www.orbohio.com (for more information about Outcomes)

www.mhrecovery.com (variety of recovery resources)