

# FEEDBACK-INFORMED CARE

## A Data-Driven Approach to Improving Mental Health Care at Kaiser Permanente

### A New Way to Improve Patient Outcomes

Kaiser Permanente patients are now benefitting from an innovative approach to mental health treatment. This approach, called Feedback-Informed Care (or FIC), enables patients and therapists to work together in a new way, using patient-reported information to track progress. The approach has been proven to significantly improve the outcomes of mental health care.

Here's how it works: At each visit, patients fill out a questionnaire that asks if they have experienced feelings of depression, anxiety, and general distress in recent days. Providers tally the responses and the result is referred to as the Global Distress Score (GDS). The higher the score, the more pronounced the patient's symptoms, and the greater the feeling of distress.

These scores can be displayed graphically over time, allowing the patient and provider to see evidence of progress, or lack thereof. This information allows them to assess whether to continue a current therapy or change treatment. Over time, they can assess how the patient responded to those changes.

*"People come to us because they don't feel well and are not functioning well, and they want this to change. Feedback-Informed Care allows for meaningful communication with the patient about whether they are getting the change that they want."*

**Cosette Taillac, LCSW, BCD**  
Strategic Leader for Mental Health and Wellness  
Kaiser Permanente

### Harnessing Data to Improve Mental Health Treatment

The FIC questionnaire is based largely on a depression screening tool known as the Patient Health Questionnaire-9 (PHQ-9), in addition to questions about anxiety and productive functioning.

The FIC tool includes three questions relating to patients' treatment experience. These "goodness of fit" questions ask whether patients feel their therapy is focused on what is most important to them (treatment goals), whether they agree with the approach to solve their problem (treatment method), and whether they feel understood and respected by their clinician (therapeutic bond). Responses to these questions help the therapist and patient identify changes that might benefit their therapeutic relationship.

*"Feedback-Informed Care seems simple, but it's actually profound in its implications. The patient's voice is at the center of every decision about their care."*

**John Peters, PhD**  
Psychologist  
Kaiser Permanente

### Scaling Up Feedback-Informed Care

More than a decade ago, a Kaiser Permanente psychologist in Northern California named John Peters began to champion what is now known as FIC. The approach was inspired by the work of Michael Lambert, a researcher at Brigham Young University, who had earlier developed a similar system of therapy metrics.<sup>1</sup> The concept of using patient-reported outcomes to guide and improve care now has a robust evidence base.<sup>2</sup>

Today in Northern California, patients in therapy for mental health conditions complete FIC questionnaires in 85 percent of individual therapy visits. This results in approximately 50,000 completed questionnaires across the region per month. Providers in every Northern California department of mental health are participating in FIC and more than 1,500 clinicians have received FIC training. Several providers from each department have received intensive training and these clinicians lead weekly case consultation groups, which deepen the level of FIC expertise among other therapists in their departments. In addition, providers in adult primary care and ob-gyn settings are using the same FIC assessment form. This allows providers to track pregnant and post-partum women and other patients across multiple care settings.

Thousands of clinicians in all eight Kaiser Permanente regions are in the process of implementing FIC to augment patient care. As the method scales, facilities are also developing innovative systems to collect and track their data. For example, in some outpatient departments patients enter data into tablets or use kiosks; others complete the questionnaire online the day before their visit. Providers, including those in primary and specialty care facilities and emergency departments, can access this data through KP HealthConnect, Kaiser Permanente's electronic health record, in real time.

*"The feedback we get from our members not only helps us get them better faster, it helps make us better as a system of mental health care. When we aggregate the patient-reported outcomes data, we begin to see patterns that can positively affect the way our system of care evolves."*

**Don Mordecai, MD**

National Leader for Mental Health and Wellness  
Kaiser Permanente

## What's Next for Feedback-Informed Care

In 2017, FIC researchers in Kaiser Permanente's Washington and Colorado regions applied for and received a \$380,000 grant from Kaiser Permanente's Sydney Garfield Memorial Fund to design and implement a data warehouse, develop and test statistical models to predict treatment outcomes, and design reports for health system leaders and clinicians.

As data are collected, aggregated, and de-identified, researchers can use them to answer clinical questions, such as: What intensity of treatment works best for particular types of problems? How can providers learn from previous cases to select the best treatments for their current patients?<sup>3</sup> What other clinical questions of interest to providers and patients can researchers use these stores of data to answer?

FIC is a promising approach that gives patients and providers a new lens to assess treatment progress and facilitate meaningful dialogue leading to improved results for patients. In addition, as more patients participate in FIC, their collective data will help Kaiser Permanente clinicians refine best practices in therapeutic approaches.

- 1 Rousmaniere, T. "What Your Therapist Doesn't Know," The Atlantic, April 2017, <https://www.theatlantic.com/magazine/archive/2017/04/what-your-therapist-doesnt-know/517797/>
- 2 Fortney, JC, et al. "A Tipping Point for Measurement-Based Care," Psychiatric Services, February 2017, <http://ps.psychiatryonline.org/doi/pdf/10.1176/appi.ps.201500439>
- 3 Simon, G. "Feedback Informed Care: Mapping a New Course for Depression Treatment," Kaiser Permanente Washington Health Research News, May 2017.