

# COMMEND

## Collaborative Mental Health Management Enhanced Dashboard

### Integrating Measurement Based Care into the VA Mental Health Workflow with COMMEND

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# Question?

- What category best describes your interest in this talk?
  - Clinical/Research/Administration
- Are you a mental health clinician and/or researcher?
  - Yes/No

# OUTLINE

- 1. Barriers to measurement based care in mental health
- 2. Design features in the collaborative mental health management enhanced dashboard (COMMEND)
- 3. Lessons learned from iterative design deployments
- 4. Directions for future development

# Measurement-based Care in Mental Health

- Systematically collecting and recording
  - treatment interventions
  - outcomes
  - side effects
  - using data to inform treatment decisions
- ...essential to excellent mental health care.  
*Harding, J Clin Psychiatry 2011*

# Measurement-based care affects individual care

- Prompts change of intervention if needed
- Prompts additional interventions/services
- Prompts step-down in care after functioning has improved
- Orients providers/programs toward outcomes
- Increases interest in evidence-based care

# Measurement-based care affects management of programs

- Prompts more frequent program redesign
- Prompts more targeted program redesign
- Focuses attention on outcomes
- Increases interest in evidence-based care
- Enables...
  - Performance evaluation of staff, clinic, and treatments
  - Evidence-based negotiations with leadership

# Improving the Quality of Mental Health Care

*Institute of Medicine 2006*

- Despite the availability of effective MH treatments, significant deficiencies exist in the US, including unjustified variations in the type of care provided, safety issues, and significant deviations from evidence-based care

# VA Mental Health Care Evaluation

## *Rand Corp 2011*

- Quality of care for veterans with MH or SUDs is the same or better than in the community
- Quality of care across facilities varies
- Significant deviations from evidenced-based practices.



# VA Mental Health Care Evaluation

## *Rand Corp 2011*

- Suggestions in the report
  - ability to create clinical registries
  - tools that can be accessed in real time without assistance
  - tools that minimize additional data entry, are easy to use, and allow high-level tracking of evidence-based care

# What are the Barriers?

- 2007 VA national expert consensus identified
  - **information overload**
  - **inefficient data presentation** that does not meet the needs of providers
  - **organizational policies/procedures impede use**

# Other Known Barriers

- negative impact on workflow
- duplication of work
- lack of buy-in of clinical leaders
- insufficient training
- lack of end-user involvement
- unresponsiveness to end-user feedback
- barriers to rapport with patients
- measures not relevant and useful to clinicians

*Coombs, 2011; Young et al, 2007; Trivedi et al, 2009*

# VA Palo Alto Outpatient MH Provider Survey

- Providers rated tracking patient outcomes as very important (M=4.18, SD=0.95) (1=Not at all to 5=Extremely important)
- But only 53% reported doing so with standardized measures at least 20-30% of the time

# VA Palo Alto Outpatient MH Provider Survey

- Reasons for not using standardized measures included “entering data into the clinical tools is WAY too time consuming”.
- About half of providers (47%) use individualized measures to make treatment decisions.
- Majority (77%) recorded the information in a session note rather than EMR.

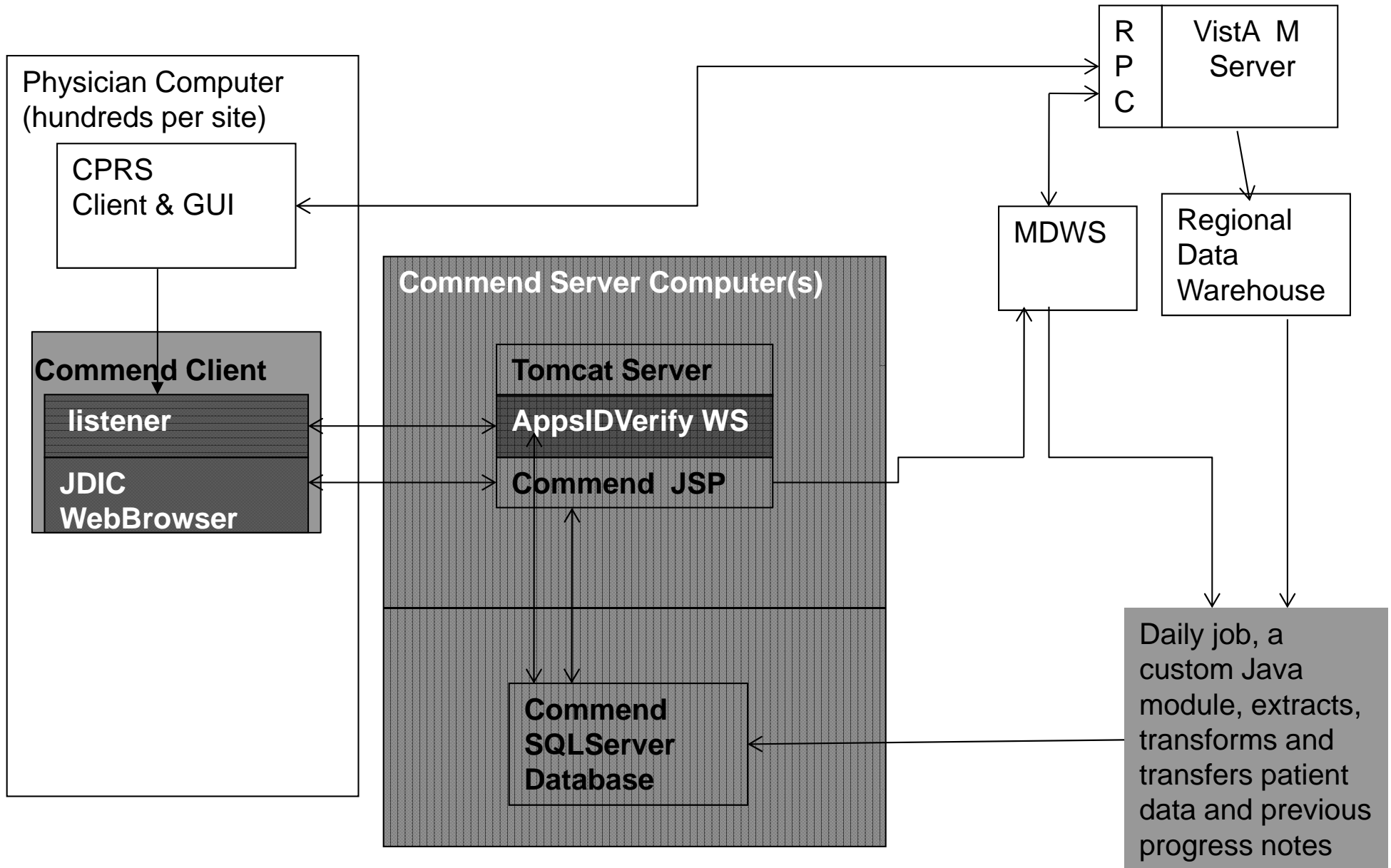
# COMMEND Development

- 2010-11 VA Greenfield Innovation Grant
- 2011-12 VA Office of Mental Health Funding
- Leveraged knowledge and experience of a set of successful computerized decisional support tools for hypertension and opioid management called the Athena Decision Support Systems developed by Dr. Mary Goldstein and colleagues

# Design Features

- Ease of use
- Minimize additional data entry
- Relevant to patient care
- Fits within workflow
- Clinically useful data presentation

# Commend Architecture





# Synchronized with CPRS

**COMMEND**  
 Provider: WANG, DAN Y  
 Patient: ZZTESTPATIENT, ROYAL  
 Panel Review Reports

Vista CPRS in use by: Wang, Dan Y (VISTA.PALU-ALIU.MED.VA.LU)

ZZTESTPATIENT, ROYAL (OUTPATIENT)  
 000 00 8784 Jun 01, 1918 (88) Visit Not Selected  
 Consent Provider Not Selected Primary Care Team Unassigned

Active Problems: Atrial Fibrillation, Human Immunodeficiency Virus (HIV) L

Allergies / Adverse Reactions: Penicillin, Sulfonamides, Sapro, Allegra 60mg Tab, Aspirin, Rikuzimab, Lisinopril

Active Medication: No Active Medications Found

Clinical Reminders	Due Date
W/ib - Evaluate AntiCoag	DUE NOW
Alcohol Use Screen (AUDIT-C)	Oct 04, 08
Depression Screening	Oct 04, 08
Fall Assessment (FDS FALL SCREEN)	DUE NOW
Fall Screen	Jul 08, 12
Health Habits Screening	Oct 04, 08
Hepatitis C Risk Assessment	DUE NOW
Hypertension Screening	DUE NOW
Home Oxygen Renewal	Nov 01, 00
Influenza Immunization	DUE NOW
Iraq/Afghanistan Post Deployment Screen	DUE NOW

Recent Immunizations: Flu, Flu Outsid, Hepb III 3, Influenza, Pneumo-VAc, Tetanus


Vitals: Ht 72 in, Sep 19, 2006 11:25, (182.9 cm)

Appointments/Visits/Admissions: No data found

Cover Sheet Problems Labs Orders Notes Consults Surgery D/C Status Labs Requests

# Patient List

Can see appointment Information and changes in outcomes



COMMEND

Show  entries Search:

Name	SSN	Age	Last PCL	Date	1st PCL	Date	Last appt.	% missed	Next appt.
<a href="#">ZZTESTPATIENT_ALPHA</a>	1919	63	53.00	Jul 12, 2011	28.00	Oct 22, 2007	Jul 20, 2011	0.0	
<a href="#">ZZTESTPATIENT_DEER HEAD</a>	5213	75	67.00	Jan 28, 2011	58.00	Jan 13, 2010	Jul 20, 2011	0.0	
<a href="#">ZZTESTPATIENT_FANG</a>	5150	20	34.00	Feb 06, 2009	50.00	Mar 03, 2008	Jul 20, 2011	0.0	
<a href="#">ZZTESTPATIENT_MODESTO</a>	1015	61					Jul 20, 2011	0.0	
<a href="#">ZZTESTPATIENT_ROYAL</a>	8784	92					Jul 20, 2011	0.0	

Showing 1 to 5 of 5 entries (filtered from 146 total entries) 
[First](#)
[Previous](#)
[1](#)
[Next](#)
[Last](#)

# Clinically useful graphs



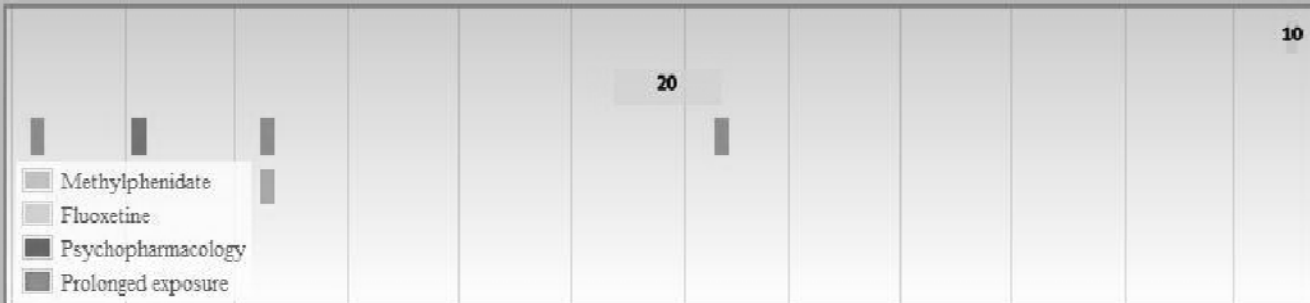
Graphs

6 Months 1 Year 2 Years

Measures



Score of 15 on March 9th, 2011



Aug 2010 Sep 2010 Oct 2010 Nov 2010 Dec 2010 Jan 2011 Feb 2011 Mar 2011 Apr 2011 May 2011 Jun 2011 Jul 2011

Medication and Therapy

Treatment Monitoring

Notes

Feedback

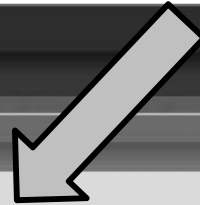
Today's Date	Jul 25, 2011
DOB	Dec 12, 1935
Last Visit	Jul 20, 2011
Age	75
Last Therapy Mode	Psychopharmacology

Outcomes	Last	Baseline
PCL-C	67.00 Jan 28, 2011	58.00 Jan 13, 2011
AUDC	0.00 Aug 26, 2009	0.00 Aug 26, 2009
Hand Washing	4.00 Sep 03, 2010	4.00 Sep 03, 2010
DialingExGirlfriend	15.00 Mar 09, 2011	6.00 Aug 06, 2010

Side Effects	Last	Baseline
loss of sexual desire, headache	0.00 Apr 20, 2011	5.00 Aug 06, 2010

# Patient Detail

Ability to adjust display with a click



**PTSD Treatment Monitoring**  
ZZTESTPATIENT,DEER HEAD SSN: ██████████

Provider: ██████████

**COMMEND**

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**Graphs**

6 Months | 1 Year | 2 Years

▶ **Measures**

Score of 15 on March 9th, 2011

▶ **Medication and Therapy**

<b>Today's Date</b>	Jul 25, 2011
<b>DOB</b>	Dec 12, 1935
<b>Last Visit</b>	Jul 20, 2011
<b>Age</b>	75
<b>Last Therapy Mode</b>	Psychopharmacology

Outcomes	Last	Baseline
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Hand Washing	4.00 Sep 03, 2010	4.00 Sep 03, 2010
DialingExGirlfriend	15.00 Mar 09, 2011	6.00 Aug 06, 2010

Side Effects	Last	Baseline
loss of sexual desire, headache	0.00 Apr 20, 2011	5.00 Aug 06, 2010

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▶ **Treatment Monitoring**

▶ **Notes**

**Feedback**

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# Patient Detail

Ability to adjust display with a click

**PTSD Treatment Monitoring**  
ZZTESTPATIENT,DEER HEAD SSN: \_\_\_\_\_

Provider: \_\_\_\_\_

COMMEND

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**Graphs**

6 Months | 1 Year | 2 Years

**Measures**

Symp/Func Scales	Goal Tracking Measures	Custom Measures	Side Effects
<input type="checkbox"/> AUDC	<input type="checkbox"/> No Data	<input checked="" type="checkbox"/> DialingExGirlfriend	<input checked="" type="checkbox"/> Side Effects
<input type="checkbox"/> PCL-C		<input type="checkbox"/> Hand Washing	

<b>Today's Date</b>	Jul 25, 2011
<b>DOB</b>	Dec 12, 1935
<b>Last Visit</b>	Jul 20, 2011
<b>Age</b>	75
<b>Last Therapy Mode</b>	Psychopharmacology

Outcomes	Last	Baseline
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DialingExGirlfriend	15.00 Mar 09, 2011	6.00 Aug 06, 2010

Side Effects	Last	Baseline
loss of sexual desire, headache	0.00 Apr 20, 2011	5.00 Aug 06, 2010

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**Medication and Therapy**

**Treatment Monitoring**

**Notes**

**Feedback**

# Patient Detail

Easy to access other areas

**PTSD Treatment Monitoring**  
ZZTESTPATIENT,DEER HEAD SSN: ██████████

Provider: ██████████

COMMEND

▼ **Graphs**

6 Months

1 Year

2 Years

► **Measures**

Date	DialingExGirlfriend	Side Effects
Aug 2010	6	6
Sep 2010	6	13
Oct 2010	10	17
Nov 2010	5	7
Dec 2010	7	10
Jan 2011	6	6
Feb 2011	3	6
Mar 2011	1	15
Apr 2011	10	10
May 2011	0	0

Outcomes	Last	Baseline
PCL-C	67.00 Jan 28, 2011	58.00 Jan 13, 2011
AUDC	0.00 Aug 26, 2009	0.00 Aug 26, 2009
Hand Washing	4.00 Sep 03, 2010	4.00 Sep 03, 2010
DialingExGirlfriend	15.00 Mar 09, 2011	6.00 Aug 06, 2010

Side Effects	Last	Baseline
loss of sexual desire, headache	0.00 Apr 20, 2011	5.00 Aug 06, 2010

► **Medication and Therapy**

Date	Methylphenidate	Fluoxetine	Psychopharmacology	Prolonged exposure
Aug 2010	0	0	0	0
Sep 2010	0	0	0	0
Oct 2010	0	0	0	0
Nov 2010	0	0	0	0
Dec 2010	0	0	0	0
Jan 2011	0	0	0	0
Feb 2011	0	0	0	20
Mar 2011	0	0	0	0
Apr 2011	0	0	0	0
May 2011	0	0	0	0
Jun 2011	0	0	0	0
Jul 2011	0	0	0	10

► **Treatment Monitoring**


► **Notes**

**Feedback**

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# Patient Detail

Three areas for data entry

 PTSD Treatment Monitoring  
ZZTESTPATIENT,DEER HEAD SSN: Provider: **COMMEND**

▶ Graphs

▼ Treatment Monitoring

Therapy Mode

PRIMARY MODE: Acceptance Commitment Therapy  
SECONDARY MODE: Smoking Cessation  
Duration: 50

Symptom/Functioning Scale

Goal Tracking Measures

Customized Goal Tracking

Symptom/Functioning Scale:  
PHQ-9: 11  
PCL-C: 65  
Goal Tracking Measures:  
exercise: 0 day(s)/week


Side Effects

Side Effects (in order of Severity):  
headache, dizziness, decreased energy  
Frequency: 5 day(s)/week

▶ Notes

Feedback

# Patient Detail Click to open therapy mode

 PTSD Treatment Monitoring  
ZZTESTPATIENT,DEER HEAD SSN: Provider: **COMMEND**

▶ **Graphs**

▼ **Treatment Monitoring**

**Therapy Mode**

PRIMARY MODE: Acceptance Commitment Therapy  
SECONDARY MODE: Smoking Cessation  
Duration: 50

Symptom/Functioning Scale

Goal Tracking Measures

Customized Goal Tracking

Symptom/Functioning Scale:  
PHQ-9: 11  
PCL-C: 65

Goal Tracking Measures:  
exercise: 0 day(s)/week

**Side Effects**

Side Effects (in order of Severity):  
headache, dizziness, decreased energy  
Frequency: 5 day(s)/week

▶ **Notes**

**Feedback**





# Patient Detail Enter up to two treatments

PTSD Treatment Monitoring  
ZZTESTPATIENT,DEER HEAD SSN: Provider: COMMEND

Graphs  
Treatment Monitoring

### Therapy Mode

Service Modality:  
Select Service Modality

Duration(Min.)  
50

Contact Type:  
Select Contact Type

Primary Mode(Req)     Secondary Mode(Opt.)

Acceptance Commitment Tl    Smoking Cessation


#### Therapy Mode Selection

- Care Management
- Psychopharmacology
- Motivational Interviewing
- Cognitive Behavioral Therapy
- Acceptance Commitment Therapy
- Trauma-Focused
- Problem Specific
- Other Therapies

Save    Cancel

Notes  
Feedback

# Patient Detail Click to enter standard measure

 PTSD Treatment Monitoring  
ZZTESTPATIENT,DEER HEAD SSN: Provider: **COMMEND**

▶ **Graphs**

▼ **Treatment Monitoring**

Therapy Mode

PRIMARY MODE: Acceptance Commitment Therapy  
SECONDARY MODE: Smoking Cessation  
Duration: 50

**Symptom/Functioning Scale**

Goal Tracking Measures

Customized Goal Tracking

Symptom/Functioning Scale:  
PHQ-9: 11  
PCL-C: 65

Goal Tracking Measures:  
exercise: 0 day(s)/week

Side Effects

Side Effects (in order of Severity):  
headache, dizziness, decreased energy  
Frequency: 5 day(s)/week

▶ **Notes**

**Feedback**

# Patient Detail Enter total score

PTSD Treatment Monitoring  
ZZTESTPATIENT,DEER HEAD SSN: Provider: COMMEND

Graphs  
Treatment Monitoring

Therapy Mode

PRIMARY MODE: Acceptance Commitment Therapy  
SECONDARY MODE: Smoking Cessation  
Duration: 50

Symptom/Functioning Scale  
Goal Tracking Measures  
Customized Goal Tracking

Side Effects


Notes  
Feedback

### Symptom/Functioning

PHQ-9	PCL-C
<input type="text" value="11"/>	<input type="text" value="65"/>
BAM	BPRS
<input type="text"/>	<input type="text"/>

Save Cancel

# Patient Detail Option for goal tracking

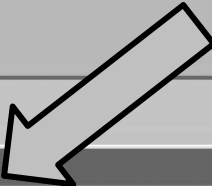
 PTSD Treatment Monitoring  
ZZTESTPATIENT,DEER HEAD SSN: Provider: **COMMEND**

▶ Graphs

▼ Treatment Monitoring

Therapy Mode

PRIMARY MODE: Acceptance Commitment Therapy  
SECONDARY MODE: Smoking Cessation  
Duration: 50

Symptom/Functioning 

Goal Tracking Measures

Customized Goal Tracking

Symptom/Functioning Scale:  
PHQ-9: 11  
PCL-C: 65  
Goal Tracking Measures:  
exercise: 0 day(s)/week

Side Effects

Side Effects (in order of Severity):  
headache, dizziness, decreased energy  
Frequency: 5 day(s)/week

▶ Notes

Feedback

# Patient Detail Select from available options

PTSD Treatment Monitoring  
ZZTESTPATIENT,DEER HEAD SSN: Provider: COMMEND

Graphs  
Treatment Monitoring

Therapy Mode

Symptom/Function  
Goal Tracking  
Customized Goals

Side Effects

Notes  
Feedback

### Goal Tracking Measures

<u>Behaviors</u>	<u>Symptoms</u>
<input type="checkbox"/> Activity Level	<input type="checkbox"/> Depression
<input type="checkbox"/> Recreation	<input type="checkbox"/> Anxiety
<input type="checkbox"/> Socializing	<input type="checkbox"/> Insomnia
<input type="checkbox"/> Practicing skills	<input checked="" type="checkbox"/> Anger/Irritability
<input type="checkbox"/> Sleep Hygiene	<input type="checkbox"/> Fatigue
<input type="checkbox"/> Nutrition	
<input checked="" type="checkbox"/> Exercise	

Exercise: How many days in the last week did you exercise for 20 minutes or more?

<input checked="" type="radio"/> 0 days	<input type="radio"/> 1 days	<input type="radio"/> 2 days	<input type="radio"/> 3 days	<input type="radio"/> 4 days	<input type="radio"/> 5 days	<input type="radio"/> 6 days	<input type="radio"/> 7 days
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Anger/Irritability: How many days in the past week were you so angry or irritated that it bothered you or prevented you from getting things done?

<input type="radio"/> 0 days	<input type="radio"/> 1 days	<input type="radio"/> 2 days	<input type="radio"/> 3 days	<input type="radio"/> 4 days	<input checked="" type="radio"/> 5 days	<input type="radio"/> 6 days	<input type="radio"/> 7 days
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Save Cancel

# Patient Detail Option to create own measure

**PTSD Treatment Monitoring** ZZTESTPATIENT,DEER HEAD SSN: Provider: **COMMENT**

▶ **Graphs**

▼ **Treatment Monitoring**

Therapy Mode

PRIMARY MODE: Acceptance Commitment Therapy  
SECONDARY MODE: Smoking Cessation  
Duration: 50

Symptom/Functioning Scale: PHQ-9: 11  
PCL-C: 65

Goal Tracking Measures: exercise: 0 day(s)/week

Side Effects (in order of Severity):  
headache, dizziness, decreased energy  
Frequency: 5 day(s)/week

Side Effects

▶ **Notes**

Feedback

# Patient Detail Create and save new measure

COMMEND v1.1  
PLSD Treatment Monitoring  
ZZTESTPATIENT,ROYAL SSN: 000009784  
Provider: WANG,DAN Y  
COMMEND

### Custom Goal Tracking Measures

Created Custom Goal

Goal	Select	Edit
anxietyTest	<input type="checkbox"/>	<input checked="" type="radio"/>
DialingExGirlfriend	<input type="checkbox"/>	<input type="radio"/>
DrivingFastDangerously	<input type="checkbox"/>	<input type="radio"/>
FlashBackWhileOut	<input checked="" type="checkbox"/>	<input type="radio"/>
handwashing	<input checked="" type="checkbox"/>	<input type="radio"/>
KansasDepressionScale	<input type="checkbox"/>	<input type="radio"/>
MinnesotaFats	<input type="checkbox"/>	<input type="radio"/>

Showing 1 to 7 of 7 entries

Selected Goals

Question	Answer
How many days in the last week did you experience a flashback while out and about in a crowd?	2 per Week
How many times per day have you been washing your hands even when it was clean?	7 per Day

Showing 1 to 2 of 2 entries

Scale Selection

Likert Frequency Range


1  2  3  4  5

Not at all A little Moderately Very Extremely

Goal: 1 Symptomatic Range: higher lower

Enter Cancel

# Patient Detail Option to enter side effects

 PTSD Treatment Monitoring  
ZZTESTPATIENT,DEER HEAD SSN: Provider: **COMMENT**

▶ Graphs

▼ Treatment Monitoring

Therapy Mode

PRIMARY MODE: Acceptance Commitment Therapy  
SECONDARY MODE: Smoking Cessation  
Duration: 50

Symptom/Functioning Scale  
PHQ-9: 11  
PCL-C: 65

Goal Tracking Measures:  
exercise: 0 day(s)/week

Side Effects (in order of Severity):  
headache, dizziness, decreased energy  
Frequency: 5 day(s)/week

Side Effects

▶ Notes

Feedback



# Patient Detail Type and frequency

Commend v1.1

PTSD Treatment Monitoring  
ZZTESTPATIENT, CHARLIE SSN: 000001001

Provider: WANG, DAN V

COMMEND

Graphs

Treatment Monitoring

Therapy Mod...

Sym...

Ge...

Cu...

Side Effects

Progress Note Template

Feedback

### Side Effects

<u>Gastrointestinal</u>	<u>Nervous System</u>	<u>Sleep</u>
<input type="checkbox"/> diarrhea	<input checked="" type="checkbox"/> headache	<input type="checkbox"/> difficulty sleeping
<input type="checkbox"/> dry mouth	<input type="checkbox"/> tremors	<input checked="" type="checkbox"/> sleeping too much
<input type="checkbox"/> nausea/vomiting?	<input checked="" type="checkbox"/> poor coordination	<input type="checkbox"/> sleeping-other desc. <input type="text"/>
<u>heart</u>	<input type="checkbox"/> dizziness	<u>sexual functioning</u>
<input type="checkbox"/> palpitations(skipping a beat)	<input type="checkbox"/> anxiety	<input type="checkbox"/> loss of sexual desire
<input type="checkbox"/> dizziness on standing	<input type="checkbox"/> poor concentration	<input type="checkbox"/> trouble achieving orgasm
<input type="checkbox"/> chest pain	<input type="checkbox"/> general malaise	<input type="checkbox"/> sexual functioning- desc. <input type="text"/>
<input type="checkbox"/> heart-other desc. <input type="text"/>	<input type="checkbox"/> restlessness	<input type="checkbox"/> sexual functioning- other <input type="text"/>
<u>skin</u>	<input checked="" type="checkbox"/> fatigue	<u>Other</u>
<input type="checkbox"/> rash	<input type="checkbox"/> decreased energy	<input type="checkbox"/> major adverse event desc. <input type="text"/>
<input type="checkbox"/> increased perspiration	nervous system- other desc. <input type="text"/>	<input type="checkbox"/> lab abnormality desc. <input type="text"/>
<input type="checkbox"/> dry skin		<input type="checkbox"/> weight(lbs.) value. <input type="text"/>
<input type="checkbox"/> skin-other desc. <input type="text"/>		

In the past week, how many days have side effects bothered you a lot or made it hard to do things?

<input type="radio"/> 0 day(s)	<input type="radio"/> 1 day(s)	<input type="radio"/> 2 day(s)	<input type="radio"/> 3 day(s)	<input type="radio"/> 4 day(s)	<input checked="" type="radio"/> 5 day(s)	<input type="radio"/> 6 day(s)	<input type="radio"/> 7 day(s)
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Most severe SE

Enter Cancel

# Patient Detail [Click to create note](#)

▶ Graphs

▼ Treatment Monitoring

Therapy Mode

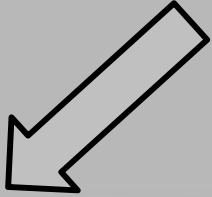
PRIMARY MODE: Acceptance Commitment Therapy  
SECONDARY MODE: Smoking Cessation  
Duration: 50

Symptom/Functioning Scale  
Goal Tracking Measures  
Customized Goal Tracking

Symptom/Functioning Scale:  
PHQ-9: 11  
PCL-C: 65  
Goal Tracking Measures:  
exercise: 0 day(s)/week

Side Effects

Side Effects (in order of Severity):  
headache, dizziness, decreased energy  
Frequency: 5 day(s)/week



▶ Notes

Feedback

# Note Template (Top)

Commend v1.1

Back Up Draft Text Save Note in CPRS

Select Encounter: JAN 27, 2012@12:40:00 TEST-CLINIC-NC(MPD) NON-COUNT

Note Title: MIIC TELEPHONE CARE 12111 Enter Desired Title Search

Mental Health Treatment Coordinator: [ ]

Time in Session: [ ] minutes

Session Number: 4

**INFORMATION:**

92 Y/O, null, MALE veteran who is married with 1 adult child, presently unemployed

Veteran's chart was reviewed

**Session focused on the client's concerns including:**

Reviewed homework over the last week, including in vivo exposures and listening to the imaginal exposure tape. Then veteran did trauma recounting for the 5th time over about 32 minutes.

**CURRENT SUBSTANCE USE:**

**SUICIDAL/HOMICIDAL RISK:** Client \*

denied current suicidal or homicidal thoughts.

reports stable mood, no evidence of SI or HI.

acknowledged suicidal/homicidal thoughts, but denied plan or intent.

**is at high risk for hurting self or someone else. Actions taken include:**

**MEDICATION MANAGEMENT:**

**ACTIVE PROBLEM LIST:**

**SIDE EFFECTS:**

**LABS:**

**WEIGHT:**

**MENTAL STATUS EXAM:**

**IMPRESSION:**

**ASSESSMENT:**

Veteran was making efforts to discuss his current thoughts and feelings (even though he has not shared this with many others). He is motivated in treatment, and has expressed that he is comfortable talking with this writer.

# Note Template (Bottom)

Comment v1.1

**DIAGNOSIS:**

Patient's PCL score was 65, which confirmed that he is suffering from PTSD. The EDI-II was also administered, and the Vet scored 37, indicating severe depressive symptoms.

**PLAN:**

Client is scheduled for a follow-up appt at the MHC on:

5/21/2013 Tuesday, 21 May, 2013

Patient is scheduled to be seen in 2 weeks on May 21st. (He could not make next week's appointment due to a planned trip). Patient promises to do all homework assignments until the next session.

**SEEN BY ATTENDING PHYSICIAN:**

**LPS CONSERVED:**

**Client states that he**

- is taking psych meds as prescribed.
- is not taking psych meds as prescribed.
- would like a change in psych meds.
- is not interested in psych meds now.

**Comments:**

Patient is afraid that the psych meds given him will only worsen his condition based on listening to the experience of another vet.

**Medication refills were discussed and reviewed. It appears that:**

- client is taking meds as prescribed.
- client is NOT taking meds as prescribed.
- med refills were not discussed because:

**EDUCATION:**

Vet has been given the handout "rationale for PE" to read, with the understanding that we will discuss the information contained therein before formally beginning the PE protocol.

Client has been educated on how to reach case manager between appointments and knows the phone number for Telecare: (1-800-455-0067).

**TOBACCO SCREEN:**

Back Up Draft Text. Save Note in CPRS

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# Advantages of COMMENT Note Templates

- Automatic reload from previous note to review and editing
- Template “adapts” to use for a particular patient or type of therapy-automatically opens sections used before

# COMMEND Workload Reports

Commend v1.1

**COMMEND**

Performance Tracking   OEF4 Monthly Report   Management

Work Group: PCTTeam

Encounter Statistics   OEF4 Statistics

Year   Q: Oct-Dec 2011   Q: Jan-Mar 2012   Q: Apr-Jun 2012   Q: Jul-Sep 2012   Last Month

Period: October 01, 2011 to September 30, 2012   U = Unique Patients; E = Encounters

Show 25 entries   Search:

Provider	Individual		Group		Telephone		Other		Total	
	U	E	U	E	U	E	U	E	U	E
B	0	0	0	0	27	35	50	509	55	544
D	85	909	39	262	3	3	27	67	115	1241
F	49	196	34	113	3	3	17	77	83	389
G	0	0	1	1	91	168	81	583	135	752
H	83	644	16	59	25	55	17	111	102	869
K	79	347	15	24	21	35	36	102	108	508
S	412	827	0	0	87	127	80	182	467	1136
S	91	526	46	246	78	81	56	67	234	920
S	88	279	51	261	0	0	61	127	125	667
S	26	28	9	9	84	144	117	1110	204	1291
W	70	329	47	320	4	4	27	59	98	706
Y	241	569	47	284	50	75	2	13	259	941
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

Showing 1 to 12 of 12 entries   First   Previous   1   Next   Last

# Treatment Intervention Report



# Initial Deployment

- PTSD Clinical Team (PCT)
  - Psychologist, social workers, and recreational therapists providing evidence-based psychotherapies for PTSD
  - Located in three different geographical locations
  - One 1 ½ hour training session with a team and then observed



# Data Collected on Usage

## **Quantitative Data**

- *Logging of User Events*
- *Online Surveys*

## **Qualitative Data**

- *Real-time comments*
- *Interviews*

# User Events/Logs

- Able to track
  - frequency of use
  - which features are utilized
  - types of data entered

	eventtime	event	eventID
59	2012-11-08 10:23:37.357	Management Selected	1020
60	2012-11-08 10:23:46.043	Performance Tracking Selected	1019
61	2012-11-08 10:31:10.307	Patient Details Selected	1004
62	2012-11-08 10:32:17.713	noteTextAreaToggle (psychosocialInterventionID)	1010
63	2012-11-08 10:32:19.760	noteTextAreaToggle (psychosocialInterventionID)	1018
64	2012-11-08 10:34:02.073	noteTextAreaFocus (sessionFocusedTextId)	1018
65	2012-11-08 10:34:05.260	noteTextAreaFocus (sessionFocusedTextId)	1018
66	2012-11-08 10:34:07.680	noteTextAreaFocus (sessionFocusedTextId)	1018
67	2012-11-08 10:34:09.067	noteTextAreaFocus (sessionFocusedTextId)	1010
68	2012-11-08 10:34:13.180	noteTextAreaFocus (informationTextareaid)	1018
69	2012-11-08 10:34:17.790	noteTextAreaFocus (informationTextareaid)	1018
70	2012-11-08 10:34:27.820	noteTextAreaFocus (assessmentTextId)	1018
71	2012-11-08 10:34:30.510	noteTextAreaFocus (assessmentTextId)	1018
72	2012-11-08 10:45:45.567	Patient Details Selected	1004
73	2012-11-08 10:46:25.753	Patient Details Selected	1004
74	2012-11-08 10:46:33.240	Measure (PCL-M)	1011
75	2012-11-08 10:47:10.817	Measure (BDI2)	1011
76	2012-11-08 10:51:02.517	Patient Panel Selected	1003
77	2012-11-08 10:51:19.220	Patient Details Selected	1004
78	2012-11-08 10:51:24.957	Measure (PCL-M)	1011
79	2012-11-08 10:51:25.507	Measure (BDI2)	1011
80	2012-11-08 10:53:33.947	Patient Panel Selected	1003
81	2012-11-08 10:53:55.157	Patient Details Selected	1004
82	2012-11-14 12:52:30.220	Patient Details Selected	1004
83	2012-11-14 12:52:48.893	TherapyMode(load)	1013
84	2012-11-14 12:52:58.753	TherapyMode(save)	1013
85	2012-11-14 12:53:37.863	noteTextAreaFocus (sessionFocusedTextId)	1018
86	2012-11-14 12:53:54.770	MDWS saved note successfully.	1006
87	2012-11-14 13:40:31.770	Administration Page Selected	1043
88	2012-11-14 13:40:30.630	Encounter Statistics Last Month Tab Selected	1038
89	2012-11-19 13:28:51.827	Administration Page Selected	1043
90	2012-11-19 13:29:01.267	Encounter Statistics Last Month Tab Selected	1038
91	2012-11-20 14:15:43.127	Patient Details Selected	1004
92	2012-11-20 14:15:57.440	MedicationOrTherapyMode (No Therapies)	1012
93	2012-11-20 14:16:02.470	TherapyMode(load)	1013
94	2012-11-20 14:16:13.127	TherapyMode(save)	1013
95	2012-11-20 14:17:29.143	noteTextAreaFocus (informationTextareaid)	1018

# Existence of Some Features Not Apparent

- provider who thought patients were missing from her panel unaware of paging buttons or search features
- provider who thought scores were missing did not know how to adjust displayed outcomes

# Workflow Impediments

- Currently COMMENT not designed to meet initial assessment requirements
- Too cumbersome when cross-covering or doing brief evaluations
- Need to close the encounter ASAP-no time to write a detailed COMMENT note

# Organizational Impediments

- Some administrative requirements hinder use, e.g., Mental Health Assistant PCL for OEF/OIF PTSD patients, need for telehealth consent.
- Currently a “patient panel” shows all patients seen in a 6-week window not those assigned to provider
- COMMEND can only analyze notes saved via COMMEND

# Providers Motivations Need to be Altered

- Some providers not motivated to save treatment interventions
  - (paraphrase) “I know how I have been treating my patients. It is no use to me to record the therapy mode because the treatment history is well known to me.”
    - Acknowledged information may be useful to others

# Useful Features

- Enhanced Workflow
  - Automatic display of previous note text for editing
- Ability to sort panel by scores allows one to see who needs more attention
- Ability to check which patients had missing appointments and might need reminders
- Being able to see all scores gives a fuller picture of the patient's state
- Ability to review own workload report relative to past performance or others

# Features Requested (and since added)

- Note backup/draft
- Additional standard assessment scores
- Ability to create variable scale custom goals
- Ability to have complete management of custom goals ---add, update, disable
- Enabled selection of note titles with automatic re-use
- Update of encounter list at time of note-writing



# Future Directions

## **Modifications of COMMEND to facilitate use**

- Time saving features in note template
  - Quick Note: allow a quick save of basic information to close encounter and edit later
  - Integrate entry of therapy mode and outcomes into note template
- Easier access of actionable items
  - Display outcome changes as red-green-yellow indicators in patient panel

## **Modification of Workflow to facilitate use**

- **“E-Clinic”**-select group of earlier adopters dedicated to the use of new tools/modes of care delivery

# Future Directions

- Mental Health Clinical Registry

# Design Team

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