



Australian Mental Health Outcomes and Classification Network

'Sharing Information to Improve Outcomes'

An Australian Government funded initiative

Process to identify and select non-mandatory measures for use in mental health services

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Background

A review of the National Outcomes and Casemix Collection (NOCC) (National Mental Health Information Development Expert Advisory Panel, 2013), identified that it would be timely to develop a process for identifying non-mandatory, preferred additional measures for use outside the scope of NOCC. These measures might be used by mental health services for specific cohorts, diagnostic groups or within service settings. A number of services already use some additional measures along with the NOCC measures in particular target populations, e.g. the Geriatric Depression Scale (GDS). The identification of a range of selected optional measures has the potential to enhance the clinical utility of the NOCC suite of outcome measures and may support overall uptake of outcome measures across services.

The National Mental Health Information Development Expert Advisory Panel (NMHIDEAP) and the Child and Adolescent Mental Health Information Development Expert Advisory Panel (CAMHIDEAP) considered issues regarding the use of non-mandatory additional measures and provided advice on a process to identify, review and select additional measures. That process is outlined in this document.

Governance

The National Mental Health Information Development Expert Advisory Panel (NMHIDEAP) would provide governance for the review and selection process.

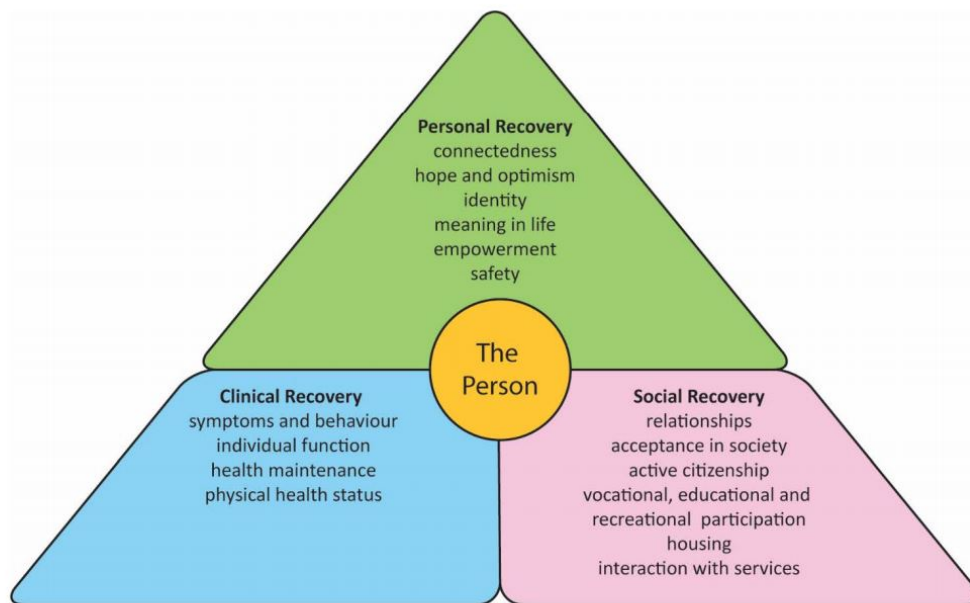
Identification of the need for non-mandatory measures

Any measurement or measure identification should support the national mental health reform agenda or the development and evaluation of new approaches to service provision.

The need for the identification of non-mandatory measures could occur in two ways:

1. NMHIDEAP identifies a domain or subdomain of the outcome measure framework (National Mental Health Information Development Expert Advisory Panel, 2018) (see Figure 1) that requires the identification of a measure or measures that may be suitable for use in practice.
2. A service or individual may indicate that a tool is suitable for a specific cohort, diagnostic group or service setting and is seeking the endorsement of the tool by the NMHIDEAP. This process would be supported by a portal on the Australian Mental Health Outcomes and Classification Network (AMHOCN) website seeking submissions and outlining the process.

Figure 1: NOCC Domain Framework



NMHIDEAP would initiate the review and selection process outlined below, on an ad-hoc basis, when seen as necessary.

Literature review

The approach to the literature review would be dependent on whether:

- NMHIDEAP identifies a domain or sub-domain that requires population using a measure; or
- if a service or individual proposes the use of a particular instrument for a particular cohort, diagnostic group or service setting.

If NMHIDEAP identifies the need for a tool, the literature review would be a scan of both grey and scholarly material to identify the psychometric properties of potentially suitable measures that could be used to populate that domain or sub-domain.

If an individual or service proposes a tool, the literature review would include not only an understanding of the published psychometric properties of the measure but also a scan of other measures that may prove more suitable.

Technical Advisory Group

A technical advisory group would be identified that could provide input into the measure selection process. This group would include consumers, carers, members of the National Mental Health Information Development Expert Advisory Panel and invited experts who have an understanding of

the specific cohort, diagnostic group or service setting. This group would be primarily involved in the measure selection process outlined below.

Selection Criteria

The identification of measures will be guided by a set of selection criteria. The selection criteria would include that the tool:

- explicitly measures the domain(s) of interest;
- is brief and easy to use (≤ 50 items);
- yields quantitative data;
- demonstrates sound psychometric properties (e.g., of internal consistency, validity, reliability and sensitivity to change);
- is applicable to the Australian context;
- no or negligible cost;
- is acceptable to consumers/ carers and or clinicians; and
- has clinical utility and is effective in promoting dialogue between consumers and providers.

These are not a hierarchical set of selection criteria but rather a set of selection criteria that can be used to screen tools before proceeding to the measure selection process outlined below.

Measure Selection Process

It is proposed that a Delphi process be used to identify additional measures. The Delphi method is a qualitative approach that is used to gain consensus through expert opinion on a real world problem (McPherson, 2018) Once the Technical Advisory Group (TAG) is identified, round one of the Delphi process commences.

Round one will involve an online presentation of the different tools identified in the literature review to the TAG. TAG participants will be asked to review the instruments and provide ratings of the suitability of each instrument across a variety of criteria (criteria may vary depending on the domain). TAG members will be asked their opinion on the instruments, any advantages or disadvantages of a particular instrument.

The responses to round one are analysed to identify consensus agreement on the ratings as well as the collation of the advantages or disadvantages regarding individual instruments. This collated information provides the basis for round two of the Delphi process.

Round two aims to identify the advantages and disadvantages of a particular instrument with a view to identifying a consensus through the use of Likert scale responses. TAG participants will provide a rating of their preferred instrument.

During round three, TAG participants provide a rating of their preferred instrument along with a consensus agreement of the advantages and disadvantages of each instrument. The instrument identified as the preferred instrument will be one that:

- rates the most highly preferred;
- rates lowest with disadvantages; and
- rates highest with advantages

One of the advantages of the Delphi technique is the anonymity of participants reducing the influence of more assertive group members or avoiding group pressure for conformity. Anonymity also ensures that responses are not unduly influenced by those deemed superior or more expert than the respondent. Also, the use of an online approach is cost effective and enables the participation of people geographically diverse locations.

The process does have disadvantages. Attrition can be an issue as participants do not remain engaged in the iterative process. This attrition can weaken the results as the group works towards consensus. Also, experts may be hesitant to share a view that is different from other experts and change their mind and move towards consensus thinking that their views are incorrect (Keeney, Hasson, & McKenna, 2006).

Copyright issues

While cost is a selection criterion, issues of copyright will be a specific area of consideration for instrument selection. The preference would be that the authors of any tool would provide free unrestricted access. This would include the ability to develop and disseminate any training materials that may support the tools implementation. Alternatively, an instrument may be identified as suitable but have copyright restrictions. These restrictions would be clearly identified and the process of any licensing agreement would be made explicit.

Hosting results of selection

AMHOCN will host on their website the recommended measure and any training materials that may be created or made available.

The AMHOCN site will make clear that measures are simply recommended for use within certain populations or contexts. Any measure recommended from this process will not automatically form part of the National Outcomes and Casemix (NOCC) collection. However, potential users of the instruments can be assured that any recommended measures will have been vetted through a robust process that involves consumers, carers, clinicians and experts in the field.

References

Keeney, S., Hasson, F., & McKenna, H. (2006). Consulting the Oracle: Ten Lessons from Using the Delphi Technique in Nursing Research. *Journal of Advanced Nursing*, 53(2), 205-212.

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