Complete Summary

TITLE

Competency Assessment Instrument (CAI): provider's mean score on the "Family Involvement" scale.

SOURCE(S)

Chinman M, Young AS, Rowe M, Forquer S, Knight E, Miller A. An instrument to assess competencies of providers treating severe mental illness. Ment Health Serv Res 2003 Jun;5(2):97-108. PubMed

Providing care to people with severe and persistent mental illness [questionnaire]. Los Angeles (CA): Matthew Chinman, Ph.D; 2003. 9 p.

Brief Abstract

DESCRIPTION

The Competency Assessment Instrument (CAI) measures 15 competencies needed to provide high quality care for those with severe and persistent mental illness (SPMI). This measure assesses the "Family Involvement" scale on the CAI; defined as "Involves family members and helps them cope effectively."

This measure is a component of a disaggregatable composite measure. The "Family Involvement" scale is one of 15 individual CAI scales. A summary total score (summary index) of all 15 scales is calculated.

RATIONALE

The quality of care for serious mental illness is frequently poor. Most practicing mental health clinicians lack sufficient specialized training, and are not well prepared to provide rehabilitation services. In the United States, over three-quarters of clinicians have a bachelor's degree or less education. Even among the small proportion of doctoral-level professionals, many have not been exposed to curricula or practicum experiences that are relevant to the care of people with severe and persistent mental illness (SPMI). Thus, existing care is often not patient-centered because many clinicians lack important clinical competencies in the areas of empowerment and recovery that are at the heart of rehabilitation. Recent reviews find that this lack of competencies is a critical barrier to provide high quality care. Therefore, competency assessment has the potential to inform broad quality improvement efforts that affect clinician recruitment, training, feedback and profiling.

There is a critical need for measures of important domains of treatment process for SPMI. Competencies are a useful domain to assess because they emphasize the skills and values that may be less visible in a guideline or standards-based approach, but are equally important to care. Thus, the Competency Assessment Instrument (CAI) is well suited to be a quality improvement tool enabling researchers, providers, and administrators to reliably and validly assess which competencies need the most attention, which improves with training, and which need further development.

A strength of the competencies included in the CAI are that they were specifically chosen to represent rehabilitation, recovery, and empowerment principles, which are aspects of care that are critical to the treatment of patients with SPMI but are often lacking in public settings. Underlying recovery-oriented care is the idea that persons can regain purpose and meaning in life while having a serious mental illness. These concepts, which tend not to be included in many treatment guidelines and standards, have proved to be important aspects of high quality care for those with SPMI.

PRIMARY CLINICAL COMPONENT

Provider competency; serious mental illness, schizophrenia, bipolar disorder; major depression

DENOMINATOR DESCRIPTION

This measure applies to providers of services to those with serious mental illness (one provider at a time).

NUMERATOR DESCRIPTION

Mean scale score on "Family Involvement" scale of the Competency Assessment Instrument (CAI)

Evidence Supporting the Measure

PRIMARY MEASURE DOMAIN

Structure

SECONDARY MEASURE DOMAIN

Not applicable

EVIDENCE SUPPORTING THE MEASURE

A formal consensus procedure involving experts in relevant clinical, methodological, and organizational sciences
One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Overall insufficient capacity

EVIDENCE SUPPORTING NEED FOR THE MEASURE

Chinman M, Young AS, Rowe M, Forquer S, Knight E, Miller A. An instrument to assess competencies of providers treating severe mental illness. Ment Health Serv Res 2003 Jun;5(2):97-108. PubMed

Corrigan PW, Steiner L, McCracken SG, Blaser B, Barr M. Strategies for disseminating evidence-based practices to staff who treat people with serious mental illness. Psychiatr Serv 2001 Dec;52(12):1598-606. [100 references] PubMed

Hoge MA, Stayner D, Davidson L. Psychology internships in the treatment of severe mental illness: implications for training in academic medical centers. J Clin Psychol Med Settings 2000;7:213-22.

Manderscheid RW, Henderson MJ. Mental health, United States, 2000. 2001.

Young AS, Forquer SL, Tran A, Starzynski M, Shatkin J. Identifying clinical competencies that support rehabilitation and empowerment in individuals with severe mental illness. J Behav Health Serv Res 2000 Aug;27(3):321-33. PubMed

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Collaborative inter-organizational quality improvement
Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Ambulatory Care
Behavioral Health Care
Community Health Care
Managed Care Plans
Rehabilitation Centers
Residential Care Facilities
Rural Health Care

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Allied Health Personnel
Physicians
Psychologists/Non-physician Behavioral Health Clinicians
Social Workers

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Individual Clinicians

TARGET POPULATION AGE

Does not apply to structure measures

TARGET POPULATION GENDER

Does not apply to structure measures

STRATIFICATION BY VULNERABLE POPULATIONS

Does not apply to structure measures

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

Unspecified

ASSOCIATION WITH VULNERABLE POPULATIONS

See "Burden of Illness" field.

BURDEN OF ILLNESS

Treatment quality for those with severe and persistent mental illness (SPMI), including schizophrenia, bipolar disorder, and major depression is often poor, which can lead to serious negative outcomes such as injury or death.

EVIDENCE FOR BURDEN OF ILLNESS

Chinman M, Young AS, Rowe M, Forquer S, Knight E, Miller A. An instrument to assess competencies of providers treating severe mental illness. Ment Health Serv Res 2003 Jun;5(2):97-108. PubMed

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Living with Illness

IOM DOMAIN

Effectiveness
Patient-centeredness

Data Collection for the Measure

CASE FINDING

Does not apply to structure measures

DENOMINATOR SAMPLING FRAME

Does not apply to structure measures

DENOMINATOR (INDEX) EVENT

Does not apply to structure measures

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions
This measure applies to providers of services to those with serious mental illness (one provider at a time).

Exclusions
Unspecified

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions
Mean scale score on "Family Involvement" scale of the Competency Assessment Instrument (CAI)

Exclusions
Unspecified

DENOMINATOR TIME WINDOW

Does not apply to structure measures

NUMERATOR TIME WINDOW

Not applicable

DATA SOURCE

Clinician survey

LEVEL OF DETERMINATION OF QUALITY

Does not apply to structure measures

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Non-weighted Score/Composite/Scale

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Does not apply to structure measures

STANDARD OF COMPARISON

Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

The "Family Involvement" scale of the Competency Assessment Instrument (CAI) was tested for internal consistency (Cronbach's alpha equal to 0.85) and test-retest reliability (intraclass correlation equal to 0.68). Results also support the concurrent and construct validity of the CAI.

EVIDENCE FOR RELIABILITY/VALIDITY TESTING

Chinman M, Young AS, Rowe M, Forquer S, Knight E, Miller A. An instrument to assess competencies of providers treating severe mental illness. Ment Health Serv Res 2003 Jun;5(2):97-108. PubMed

Identifying Information

ORIGINAL TITLE

Family Involvement.

MEASURE COLLECTION

Competency Assessment Instrument (CAI)

SUBMITTER

Chinman, Matthew, Ph.D.; Young, Alexander S., M.D., M.S.H.S.; Veterans Administration Desert Pacific Mental Illness Research, Education and Clinical Center (MIRECC)

DEVELOPER

Chinman, Matthew, Ph.D. (MIRECC); Young, Alexander S., M.D., M.S.H.S. (MIRECC); Sandy Forquer (Comprehensive Neuroscience Inc.); Edward Knight (ValueOptions); Anita Miller (ValueOptions); Melissa Rowe (RAND)

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2003 Jun

MEASURE STATUS

This is the current release of the measure.

SOURCE(S)

Chinman M, Young AS, Rowe M, Forquer S, Knight E, Miller A. An instrument to assess competencies of providers treating severe mental illness. Ment Health Serv Res 2003 Jun;5(2):97-108. PubMed

Providing care to people with severe and persistent mental illness [questionnaire]. Los Angeles (CA): Matthew Chinman, Ph.D; 2003. 9 p.

MEASURE AVAILABILITY

The individual measure, "Family Involvement," is contained in the Competency Assessment Instrument (CAI), which is published in:

> Chinman M, Young AS, Rowe M, Forquer S, Knight E, Miller A. An instrument to assess competencies of providers treating severe mental illness. Ment Health Serv Res 2003 Jun;5(2):97-108.

The Competency Assessment Instrument (CAI) questionnaire is available from the Mental Illness Research, Education and Clinical Center (MIRECC) Web site.

COMPANION DOCUMENTS

The following is available:

> Young AS, Forquer SL, Tran A, Starzynski M, Shatkin J. Identifying clinical competencies that support rehabilitation and empowerment in individuals with severe mental illness. J Behav Health Serv Res 2000 Aug;27(3):321-33. An abstract of this document is available at Mental Illness Research, Education and Clinical Center (MIRECC) Web site.

NQMC STATUS

This NQMC summary was completed by ECRI on April 14, 2004. The information was verified by the measure developer on April 19, 2004.

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