

# A scoping review:

# MEASUREMENT BASED CARE EDUCATIONAL PROGRAMMES FOR TRAINEES

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## INTRODUCTION

Measurement based care (MBC) is characterized as “the systematic administration of symptom rating scales and use of the results to drive clinical decision making at the level of the individual patient” (Fortney et al., 2017). **MBC improves patient clinical outcomes** and is acceptable to patients and providers. Yet, only **5% of mental health clinicians routinely use MBC**, potentially due to limited education and training. The aim of this scoping review is to survey MBC educational initiatives for mental healthcare trainees.

## METHODOLOGY

### PRISMA Diagram

MEDLINE 358 Citations	PsycInfo 137 Citations	CINAHL 189 Citations	Embase 850 Citations	Cochrane 178 Citations
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1270 Non-duplicate citations screened

Inclusion/exclusion criteria applied

1240 Articles excluded after title/abstract screened

30 Articles retrieved

19 Articles excluded after full text screened

Inclusion/exclusion criteria applied

4 Articles excluded during data extraction

**7 records included in scoping review**

## INSTITUTIONAL, FACULTY, ADMINISTRATIVE, AND LEARNER SUPPORTS

are vital to optimize the educational and health system outcomes of MBC training programmes.

## FUTURE DIRECTION

To identify best practices for MBC training in future publications, educators should describe programme costs, educational frameworks, programme instructors, and outcomes.

## POTENTIAL FACTORS INFLUENCING EDUCATIONAL PROGRAMME SUCCESS

	SYSTEM	STAKEHOLDER	CURRICULUM
Facilitators	<ul style="list-style-type: none"> <li>Online measurement feedback system</li> <li>MBC champion</li> <li>Use of implementation model</li> <li>Iterative process for refining programme</li> </ul>	<ul style="list-style-type: none"> <li>Early consensus-building to support educational programme</li> <li>Support from supervisors</li> <li>Training for supervisors in measurement based care</li> <li>Support from trainees</li> <li>Support from administrative staff</li> </ul>	<ul style="list-style-type: none"> <li>Sufficient time for educational programmes</li> <li>Multicomponent training approaches</li> <li>Structured training</li> <li>Use of simple measures</li> <li>Regular audits</li> <li>Participant collaboration to solve common challenges</li> <li>Weekly motivational enhancement sessions</li> </ul>
	Barriers	<ul style="list-style-type: none"> <li>Changes in electronic medical record</li> <li>Few resources to support educational programme</li> <li>Administrative barriers to incorporating scales</li> </ul>	<ul style="list-style-type: none"> <li>Negative attitudes from supervisors</li> <li>Absence of supervisor training</li> <li>Negative attitudes from trainees</li> </ul>

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