

# Evidence Based Practice in Forensic Mental Health Care

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Waypoint Centre for Mental Health Care

# The difference between knowledge transfer and translation

## Traditional Research and Education

- The Creation of New Knowledge
  - Basic and Applied Research
  - Empirical Investigations leading to the collection of original data
  - Publication of findings in the peer-reviewed archival scientific literature
- Knowledge Transfer & Exchange
  - Teaching
  - Education
  - Training
  - Clinical Supervision

## Translating Knowledge into Practice

- Knowledge Translation (Canadian Institutes of Health Research)
  - “A dynamic and iterative process that includes synthesis, dissemination, exchange and ethically sound application of knowledge to:
    - Improve the health of Canadians
    - Provide more effective health services and products
    - Strengthen the health care system”

# Today's presentation

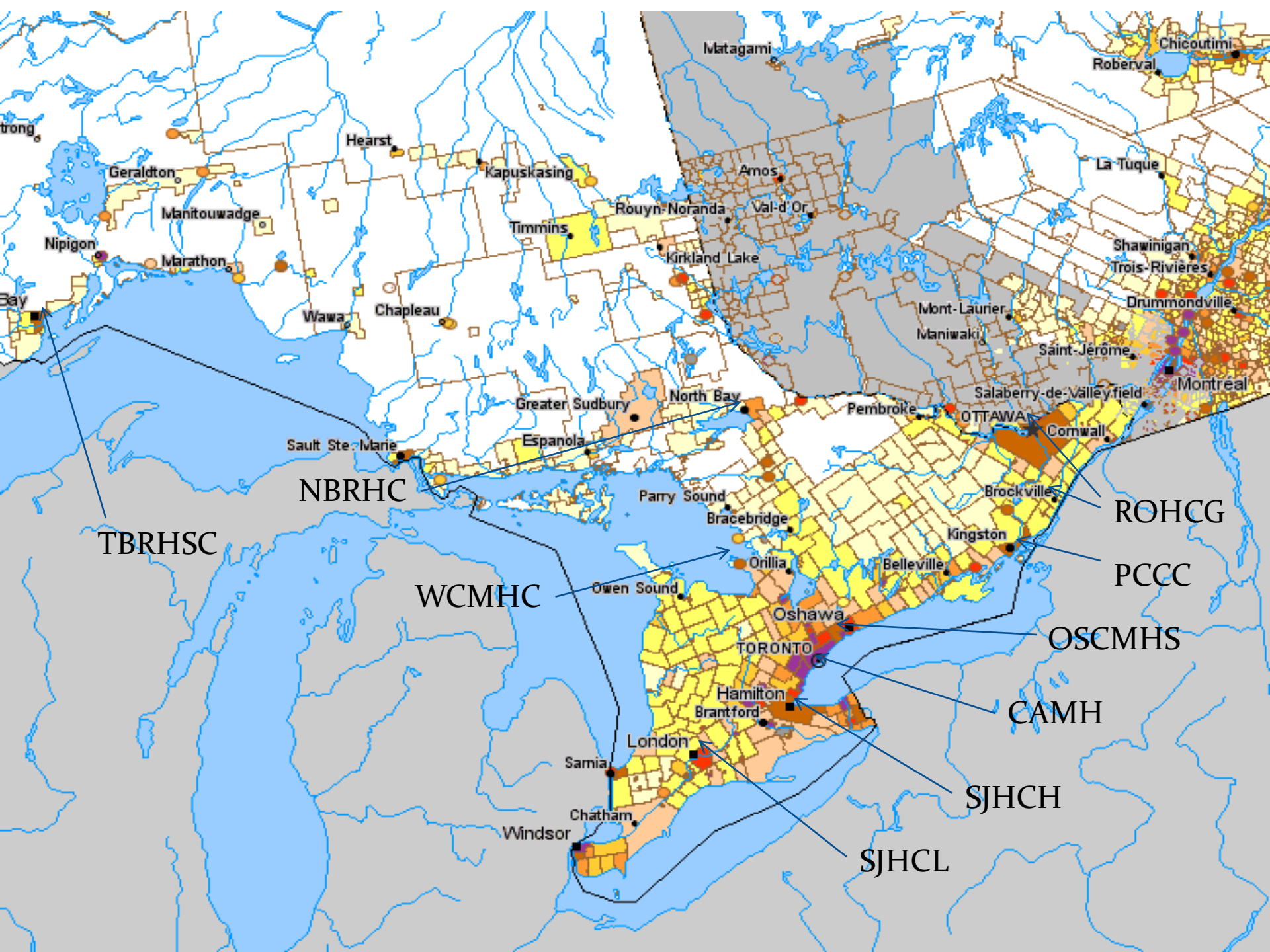
- An illustrative example of knowledge translation in forensic mental health care
  - *The Evidence Based Practice in Forensic Mental Health Task Force*
- Important principles
  - Leadership
  - Buy in
  - Ownership

# The Evidence Based Practices in Forensic Mental Health Project

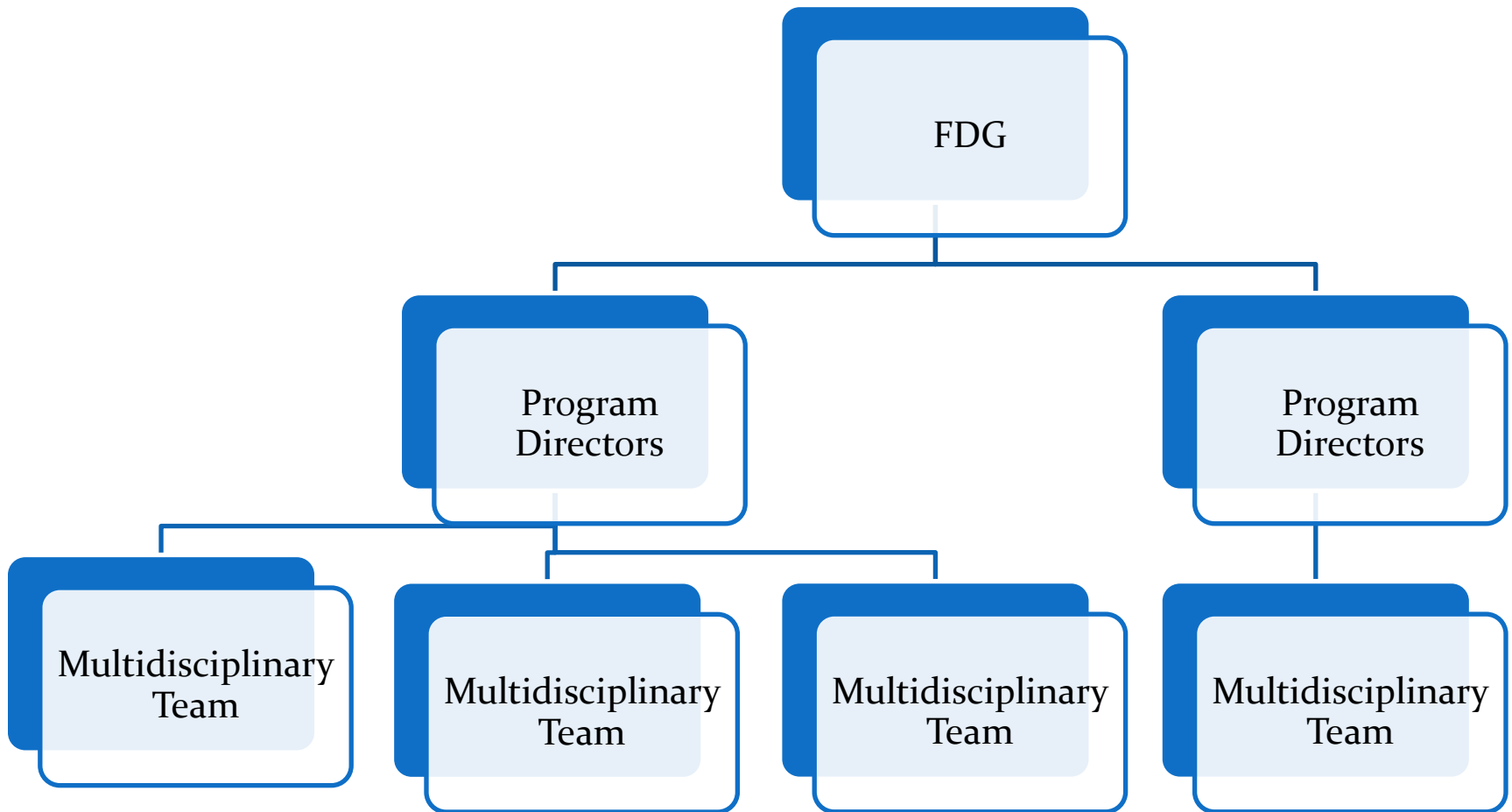
- An OMHF funded project by Howard Barbaree and Paula Goering in 2005
  - A review of the world's literature on best practices in forensic mental health
  - Produced an annotated bibliography  
[http://www.camh.net/Publications/Resources\\_for\\_Professionals/Law\\_and\\_Mental\\_Health/index.html](http://www.camh.net/Publications/Resources_for_Professionals/Law_and_Mental_Health/index.html)

# The Forensic Directors Group of Ontario (FDG)

- Membership: Administrative and Clinical (Medical) Directors of forensic programs in Ontario; MOHLTC
- Purpose:
  - To coordinate the provincial forensic programs as a “Provincial Program”
  - To implement evidence-based or best practices in forensic mental health programs across the province



# Content Leadership



# The Evidence Based Practice in Forensic Mental Health Task Force

- Established in 2007 as a sub-committee of the FDG
- Reports to the Forensic Directors Group
- Co-Chairs: John Bradford and Howard Barbaree
- Members:
  - All of FDG
  - Interested volunteers from forensic programs around the province
  - Ex-Officio MOHLTC Representative

# Activities to date

- **Definition of terms**
- Completed the first EBP Project
  - On Risk Assessment
  - To provide a template or model for other projects to follow
- Draft of Introductory Chapter
  - Ball, L.C., Barbaree, H.E., & Goering, P. (2011). *Developing evidence-based practices in forensic mental health care*. Manuscript in preparation.
- Established Sub-Work Groups
- Developed an FDG EBP Webpage

# Definition of Terms

- Standard
  - An established norm or requirement. It is usually a formal document that establishes uniform or technical criteria, methods, processes and practices
- Guideline
  - Any document that recommends a course of action. By definition, following a guideline is never mandatory

# Early decision of task force

- Decided to work toward guidelines not standards
  - Hard to get agreement/consensus on standards
  - Penalties too great for not following standard
- Drawing on our own early experiences with developing such guidelines, we suggest that evidence based practices in forensic mental health services and programs should fall into one of two categories:
  - 1) flexible, dynamic guidelines that leave room for local interpretation; or
  - 2) clear guidelines, practices and benchmarks geared towards specific populations and local circumstances.

# Definition of Terms

- Best Practice
  - A practice that is presumed by consensus of experts to be more effective at delivering a particular outcome than any other practice
- Evidence Based Practice
  - A practice for which systematic empirical research has provided evidence of statistically significant effectiveness in improving outcomes and/or validity of measurement

# Definition of Terms

- **Key Performance Indicator**
  - A metric judged to be critical in defining and measuring progress toward strategic goals
- **Benchmarking**
  - The process of comparing performance indicators between like organizations
- **Balanced Scorecard**
  - A performance management tool for ensuring that practices are aligned with the organization's vision and mission and strategic directions

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# The Definition of an Evidence Based Practice “Project”

- According to the FDG, the following products will define the EBP project
  - A *Bibliography* containing the relevant and salient published works that would appropriately be thought of as the “evidence base” for any particular content area
  - A narrative *Review of the Relevant Literature*. The review might in some cases be a review written by a task group member or group of members, or it may be a literature review, published or unpublished, that could be identified and adopted as an acceptable review of the relevant literature

# The Definition of an Evidence Based Practice “Project”

- According to the FDG, the following products will define the EBP project
  - A description of each *Best Practice* or *Evidence Based Practice* identified in the review of the literature including those identified in current practice guidelines in place with professional governing bodies, associations, government agencies, etc.
  - A draft of proposed *Practice Guidelines* based on the review of the literature

# The Definition of an Evidence Based Practice “Project”

- According to the FDG, the following products will define the EBP project
  - Any documents or materials that could be used in educational programs, training workshops, or any workshop leaders/experts that provide training in the relevant area
  - A list of proposed *Key Performance Indicators* based on the review of the literature

# EBP Project Work Products

- Bibliography
  - Narrative Review of the Relevant Literature
  - Identified Best Practices or Evidence Based Practices
  - Draft Practice Guidelines
  - Documents or materials that could be used in training
  - List of proposed Key Performance Indicators
- (note: not all projects would result in all of these products)

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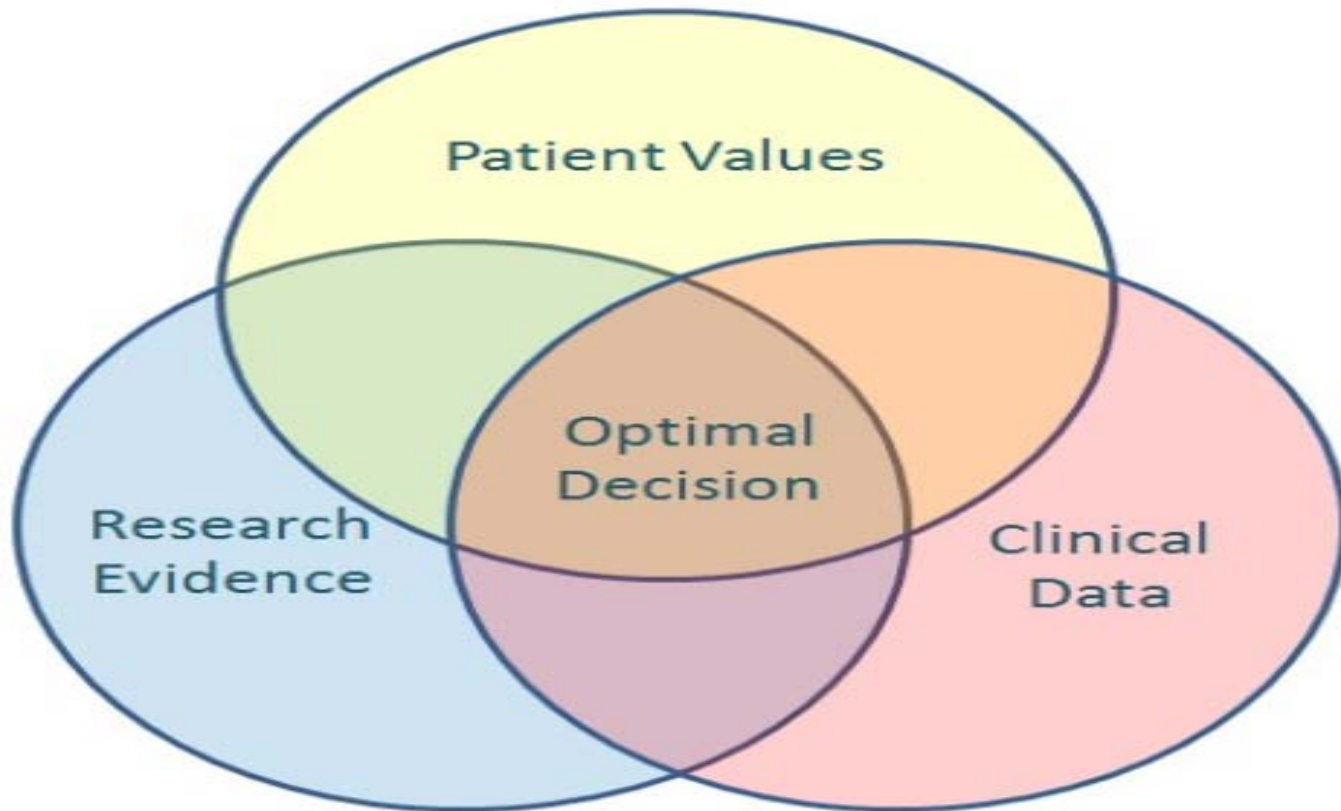
# Purpose of Introductory Chapter

1. To review the history of evidence-based practice
2. To discuss the challenges of this framework for forensic mental health care
3. To explore possible solutions to these issues
4. To begin a dialogue on how to implement these strategies in everyday practice

# History of Evidence Based Medicine – The Forerunner to EBP

- Group of researchers, surgeons and physicians at McMaster University
  - "Evidence-Based Practices Working Group"
  - Led by Gordon Guyatt and David Sackett
- *Evidence-Based Medicine: How to Practice and teach EBM* (Sackett, et al., 1997, 2000)
- This new framework, defined by its three-pronged approach to practice, which incorporated:
  1. Best research evidence
  2. Clinical experience and judgment
  3. Patient values

# Clinical Decision Making



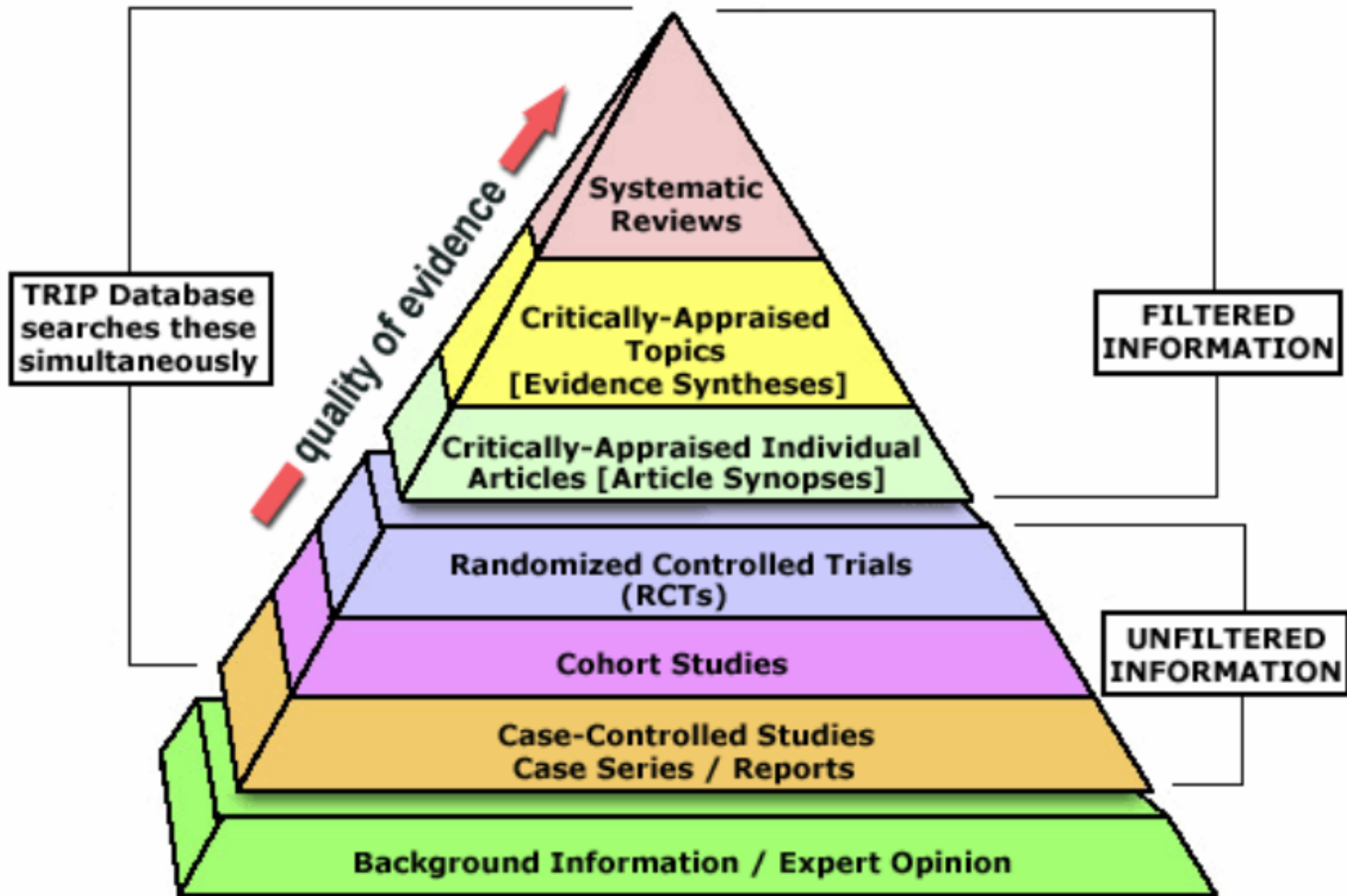
**Evidence Based Medicine:** when best evidence from research meets clinical information and patient values, optimal decisions are possible.

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# Levels of Evidence

- What constitutes "best evidence"?
- Sackett et al (1997, 2000) provide a hierarchy of best evidence
- They suggest that practitioners should always draw on the best available evidence
  - Only if no evidence is available at the highest levels should a practitioner accept and rely on the lower levels

# EBM Evidence Hierarchy



# Evidence Based Practice in Mental Health Care

- *Evidence-Based Mental Health* journal
  - First published in 1998
  - Aims: to keep clinicians aware of advancements made in mental health care

# Evidence Based Practice in Mental Health Care

- American Psychological Association
  - Established a task force in 2005
  - To define and explicate the tenets of evidence-based practices in psychology (EBPP)
  - Resulted in a report and policy statement reaffirming the principles outlined by Sackett et al.
- EBPP is "the integration of the best available research with clinical expertise, in the context of patient characteristics, culture, and preferences"

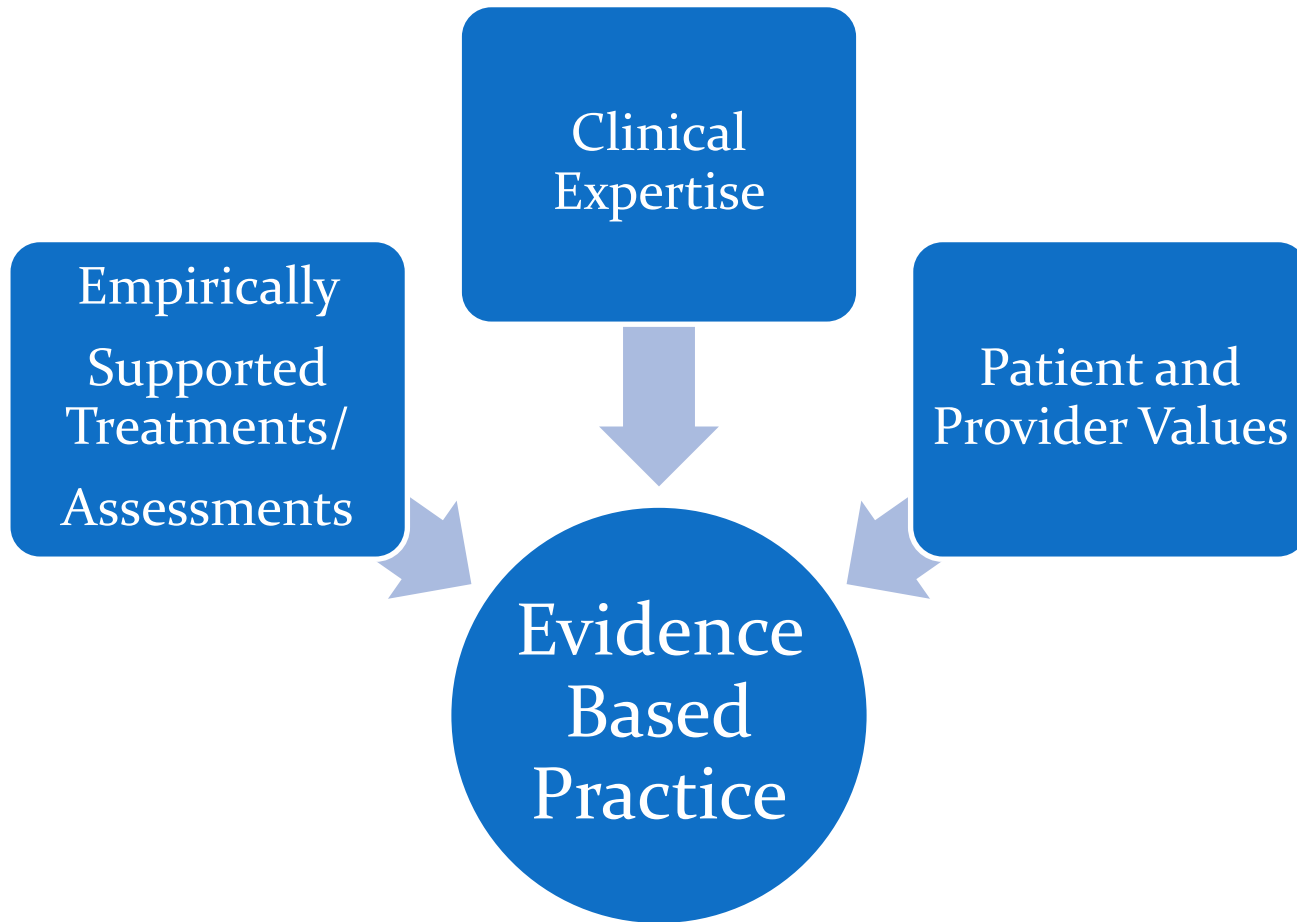
# American Psychological Association

- APA on empirically-supported treatments (ESTs) vs. EBPP
  - ESTs are methods of assessment and treatment that have been validated by empirical research
  - EBPP is the process of translating these ESTs into effective practice

# Definition of Terms

- Empirically Supported Treatments (ESTs)
  - methods of treatment that have been validated by empirical research
- Empirically Supported Assessments (ESAs)
  - methods of assessment that have been validated by empirical research

# The Components of EBP



# APA's EBPP as a "public idea"

- APA also addressed the interface between psychology and the public:
  - The "APA encourages the development of health care policies that reflect this view of evidence-based practice"
  - The APA saw EBPP as not only a guide for practice, but also as a way to educate and interact with the public on a much broader scale

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# *Evidence Based Practices in Forensic Mental Health*

## Table of Contents

- Introduction to Evidence Based Practices (Draft available)
- Risk Assessment (Completed)
- Managing Risk to Patients, Co-patients and Hospital Staff
- Managing Risk to Public Safety
- Substance Abuse: Assessment and Treatment
- Anger/Impulsivity: Assessment and Treatment
- Sexual Deviance: Assessment and Treatment
- Personality Disorder: Assessment and Treatment
- Treatment of Serious Mental Illness in a Forensic Setting
- Determinants of Success and Failure in Community Reintegration (Recovery, rehabilitation, and the social determinants of health)

# Managing Risks to Patients, Co-Patients and Hospital Staff

- Chair: Brian Jones
- Lead Facility: Mental Health Centre Penetanguishene (Penetanguishene)

# Managing Risk to Public Safety

- Chair: Jim McNamee
- Lead Facility: Centre for Addiction and Mental Health (Toronto)

# Substance Abuse: Assessment and Treatment

- Chair: Helene Philbin-Wilkinson
- Lead Facility: North East Mental Health Centre (North Bay)

# Anger/Impulsivity: Assessment and Treatment

- Chair: Gary Chaimowitz
- Lead Facility: St. Josephs Healthcare Hamilton

# Sexual Deviance: Assessment and Treatment

- Chair: Michael Seto
- Lead Facility: Royal Ottawa Health Care Group (Ottawa and Brockville)

# Personality Disorder: Assessment and Treatment

- Chair: Rob McDonnell
- Lead Facility: Providence Continuing Care Centre (Kingston)

# Treatment of Serious Mental Illness in a Forensic Setting

- Chair: John Bradford
- Lead Facility: Royal Ottawa Health Care Group  
(Ottawa and Brockville)

# Determinants of Success or Failure in Community Reintegration

- Chair: Janice Vandevooren
- Lead Facility: St. Josephs Health Care (London and St Thomas)

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# Sharepoint Main Page

- Task Force Sidebar
  - Documents
    - Shared Documents
  - Sites
    - Inpatient Safety
    - Community Safety
    - Etc
  - Lists
    - Calendar
    - Tasks
  - Discussion
    - Team Discussion
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# Inpatient Safety Shared Documents

- Bibliographies
- Membership and Contact Information
- Minutes of Meetings (Teleconferences)
- Source Documents
  - PDFs published articles and chapters
  - Grey Literature
- Work Product
  - Outlines
  - Rough Drafts
  - Penultimate Drafts
  - Final Drafts

# Thank you

For a copy of this presentation please email:

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