

IN THIS PHD THESIS RESEARCH INTO THE IMPLEMENTATION AND USE OF OUTCOME MEASUREMENT IN THE NETHERLANDS IS PRESENTED. ITS APPROACH RESTS FIRMLY ON THE NOW-ESTABLISHED DEMANDS THAT HEALTHCARE DELIVERY BE COST-EFFECTIVE AND PROVIDE EVIDENCED-BASED TREATMENTS. FOR PSYCHIATRY BOTH BIOLOGICAL AND PSYCHOSOCIAL INTERVENTIONS MUST BE IDENTIFIED AND MEASURED. THE AIM OF THIS STUDY IS TO PROVIDE A SET OF FEASIBLE, MEANINGFUL, AND USEFUL MENTAL HEALTH OUTCOME MEASURES THAT CAN BE INCORPORATED INTO ROUTINE CLINICAL PRACTICE AND THAT IMPROVE THE QUALITY OF THE CLINICAL CARE THAT PATIENTS RECEIVE.

IN THE NETHERLANDS THE APPROACH TO OUTCOME MEASUREMENT IS CALLED ROUTINE OUTCOME MONITORING (ROM). THE THEORETICAL UNDERPINNINGS OF ROM DERIVE FROM EXTENSIVE RESEARCH ON THIS SUBJECT THAT DRAWS SUBSTANTIALLY ON THE WORK OF DONABEDIAN (1988) AND HIS THREE DIMENSIONS OF QUALITY: STRUCTURE, PROCESS, AND OUTCOME.

IN THIS THESIS, SPECIFICATIONS THAT OUTCOME MEASUREMENT INSTRUMENTS MUST MEET ARE PROVIDED, AS WELL AS HOW TO IMPLEMENT THESE INSTRUMENTS IN ROUTINE CLINICAL PRACTICE AND HOW TO EFFECTIVELY MANAGE THE DATA THEY GENERATE. PARTICULAR ATTENTION IS PAID TO THE FEEDBACK OF TREATMENT RESULTS, BOTH TO THE CLINICIAN AND PATIENT, AND HOW THIS MUST BE AN ESSENTIAL PART OF THE CLINICAL WORK.

# ROUTINE OUTCOME MONITORING IN DUTCH PSYCHIATRY

MEASUREMENT INSTRUMENTS,  
IMPLEMENTATION AND OUTCOME

ROUTINE OUTCOME MONITORING IN DUTCH PSYCHIATRY

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