



Keeping Current about QOL Assessments for Recovery Planning in Community Mental Health – Practice Leaders

PowerPoint

This document accompanies the learning exchange lesson plan. After removing the activity answers, it can also be used as a participant handout.

Reference as Wolff, A.C. & Research Team (2026). *Quality of life assessment toolkit. Learning Exchange: Keeping Current about QOL Assessments for Recovery Planning in Community Mental Health – Practice Leaders* [PowerPoint]. Trinity Western University, British Columbia, Canada.
<https://www.healthyqol.com>

Keeping Current about Quality-of-Life Assessments in Recovery Planning

*A learning exchange for CMH Clinical
Leaders*

March 3, 2023



1

Research Team

- **Principle investigator**
 - Dr. Angela Wolff, RN, PhD, Associate Professor, School of Nursing, Trinity Western University
- **Co-investigators**
 - Anthony Neptune, Program Director, Mental Health & Substance Use Services, Fraser Health Authority
 - Scott Mcneil, RPN, MSc, Clinical Nurse Educator, MHSU, Fraser Health Authority
 - Dr. Zohreh Yaghoub Zadeh, PhD, Evaluation Leader, MHSU, Fraser Health Authority
 - Dr. Lynn Musto, RN, PhD, Assistant Professor, SON, TWU
 - Brenda Jones, Patient Partner
- **Research coordinator/assistant**
 - Olga Slavutskiy, MSN, RN, TWU

2

▸ Purpose and Objectives

Purpose: Provide supportive resources to clinical leaders for the incorporation of patient-reported, routine outcome measures (ROMs) (specifically Quality of Life (QOL) assessments) to inform the care and services received by persons living with a mental illness.



1. **Discuss** the value of patient-reported outcome measures (i.e., quality of life tools) to meet the needs of persons served within the recovery-centred clinical system (RCCS)
2. **Understand** the knowledge and skills needed by healthcare providers/Clubhouse staff to facilitate the uptake of QOL assessments into practice
3. **Explain** the administration of the QOL within a therapeutic encounter
4. **Demonstration** how the QOL assessment results can be incorporated into recovery planning
5. **Create** a plan to support coordinators and staff to integrate QOL tools into specific practice areas
6. **Identify** further supports and resources to optimize QOL assessments into

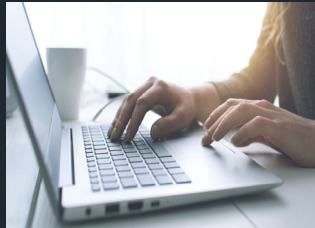
5

Hello my name is

- Name
- Role and area within MHSU
- How long in this role/position
- Any comments about how supported staff in past to use QOL assessment tools and/or which learning objective is of highest priority

6

Learning Hub Resource in Fraser Health



Using Routine Outcome Measures (ROM's) in Community Mental Health & Substance Use (MHSU) (Online)

eLearning Course 2 hrs 30 mins Clinical

This course is designed to give you an overview of tools that will support you in the process of community redesign and increase quality of care provided.

Target Audience	Clinicians in community MHSU who work with clients in longer duration teams.
Course Length	2 hrs 30 mins
Course Code	15304

7

Routine Outcome Monitoring (ROM) in Team Based Care

Application	ROM	First administration	Minimum Frequency	Last administration	Documentation	Mode of administration
All Clients	HoNOS	In first month	Every 6 months	At transition	In Paris (assessment module)	Clinician completed
Based on client need	PHQ-9	First session	As needed	At transition	In Paris (shared care assessment module)	Client completed
Based on client need	GAD-7	First Session	As needed	At transition	In Paris (shared care assessment module)	Client completed
Based on client need	Role Functioning Scale	In first month	Yearly	At transition	In Paris (assessment module)	Clinician completed
Based on client need	WHO Quality of Life (WHOQOL)	In first month	Yearly	At transition	In Paris (assessment)	Client completed (clinician can assist)

- ROM's = standardized set of questions (a scale) relating to a specific aspect of a person's experience or outcome
- Routinely collected over time
- Developed using rigorous methods by researchers to ensure it measures what it is intended to measure
- Completed by the client (their voice) = **person-reported outcome measure**

8

Person/Patient-reported outcome measure (PROM)



- What are PROMs?
 - Used to measure client’s health status in a standardized manner at a point in time
- What do they assess (or measure)?
 - Questions capture how the patient/client is functioning, their quality of life, their mental wellbeing
 - World Health Organization Quality of Life (WHOQOL) Scale (CMH)
 - Broader view of health beyond medical model to one more humanistic (holistic)
 - Annual Quality of Life Scale (Clubhouse)
- Why are they needed?
- What are the benefits of using PROMs for clients?

[video](#)

9

WHOQOL (Bref)

Quality of Life Scale
(WHOQOL-BREF)

The following questions ask how you feel about your quality of life, health, or other areas of your life. Read each question along with the response options. Please circle the number below the response option that best describes your experience in the past **two weeks**. If you are unsure about which response option to select, the first response you think of is often the best one.

	Very poor	Poor	Neither poor nor good	Good	Very good
1. How would you rate your quality of life?	1	2	3	4	5
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
2. How satisfied are you with your health?	1	2	3	4	5
	An extreme amount	Very much	A moderate amount	A little	Not at all
3. To what extent do you feel that physical pain prevents you from doing what you need to do?	1	2	3	4	5
4. How much do you need any medical treatment to function in your daily life?	1	2	3	4	5
	Not at all	A little	A moderate amount	Very much	An extreme amount
5. How much do you enjoy life?	1	2	3	4	5
6. To what extent do you feel your life to be meaningful?	1	2	3	4	5
7. How well are you able to concentrate?	1	2	3	4	5
8. How safe do you feel in your daily life?	1	2	3	4	5
9. How healthy is your physical environment?	1	2	3	4	5

QOL is an “individuals' perceptions of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards, and concerns”

- physical health (Domain 1)
- psychological state (Domain 2)
- independence and environment (Domain 3)
- social relationships (Domain 4)

10

WHOQOL (Bref) – 26 questions

Asking clients to provide their opinion or perspective about quality of life is beneficial to:

- Recognize clients’ expertise in their own life and shifts power
- Help clinicians understand and empathize with client
- Allows for further exploration of the response with the client
- Foster collaboration and shared decision-making
- Focus on a recovery-centred approach (RCCS) and trauma-informed care

	Not at all	A little	Moderately	Mostly	Completely
10. Do you have enough energy for everyday life?	1	2	3	4	5
11. Are you able to accept your bodily appearance?	1	2	3	4	5
12. Have you enough money to meet your needs?	1	2	3	4	5
13. How available to you is the information that you need in your day-to-day life?	1	2	3	4	5
14. To what extent do you have the opportunity for leisure activities?	1	2	3	4	5
	Very poor	Poor	Neither poor nor good	Well	Very well
15. How well are you able to get around?	1	2	3	4	5
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
16. How satisfied are you with your sleep?	1	2	3	4	5
17. How satisfied are you with your ability to perform your daily living activities?	1	2	3	4	5
18. How satisfied are you with your capacity for work?	1	2	3	4	5
19. How satisfied are you with yourself?	1	2	3	4	5

11

What does the WHOQOL score mean?

- Higher scores indicate increasing levels of QOL
- If 5+ questions are incomplete the score of the questionnaire is invalid
- Talk to the client about how the various “total” scores show different aspects of their health and well-being
- You might also review the answers to certain questions
- Begin a conversation with clients about what their recovery needs are at this point and how to assist them by improving their health
- Scores do **NOT** indicate areas of importance or priority – the client does that
- Routine monitoring of QOL over time to develop and assess the recovery plan

	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
20. How satisfied are you with your personal relationships?	1	2	3	4	5
21. How satisfied are you with your sex life?	1	2	3	4	5
22. How satisfied are you with the support you get from your friends?	1	2	3	4	5
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
23. How satisfied are you with the conditions of your living place?	1	2	3	4	5
24. How satisfied are you with your access to your health services?	1	2	3	4	5
25. How satisfied are you with your mode of transportation?	1	2	3	4	5
	Never	Seldom	Quite often	Very Often	Always
26. How often do you have negative feelings, such as blue mood, despair, anxiety, depression?	5	4	3	2	1

Totals
This scale includes 5 sections, shown in different colours. To get each Section total, add up the numbers you have circled for that section colour. Write this number below the Section total.

Items 1&2 total (2 items)	Physical total (7 items)	Psychological total (8 items)	Environment total (8 items)	Social total (5 items)

12

Annual Quality of Life Questionnaire

Clubhouse Name: _____

Member's Name: _____	D.O.B. (dd/mm/yy): _____	Today's Date: _____
Survey Type: <input type="checkbox"/> Initial Survey <input type="checkbox"/> Annual Follow-up Survey		
Instructions: For each survey item, please mark the circle that best describes you at this time.		

	Strongly Disagree	Somewhat Disagree	Neither Agree or Disagree	Somewhat Agree	Strongly Agree
	1	2	3	4	5
1. I respect myself (I believe I am a valuable, worthy person)	○	○	○	○	○
2. I take care of myself (emotionally, physically, etc.)	○	○	○	○	○
3. I am hopeful about my future	○	○	○	○	○
4. I am confident in my ability to improve my life	○	○	○	○	○
5. I have a sense of meaning and purpose	○	○	○	○	○
6. I have a sense of personal control	○	○	○	○	○
7. I feel safe and secure in my life	○	○	○	○	○
8. I take initiative to begin and follow through with tasks that are important to me	○	○	○	○	○
9. I am doing something meaningful in my life, such as work, volunteering or school	○	○	○	○	○
10. I am satisfied with my current relationship with my family (whether close or no contact)	○	○	○	○	○
11. I have friends who are important to me	○	○	○	○	○
12. I am confident in my ability to recover	○	○	○	○	○
13. I am fully engaged in my recovery	○	○	○	○	○
14. I am currently supporting others in their recovery	○	○	○	○	○
15. I am taking personal responsibility for my recovery	○	○	○	○	○

January 2017

- This tool is used in the clubhouse program for Rehab and Recovery
- Focuses on individual's view of self-respect, future, capability, security, self-control, satisfaction, friendships, responsibility

13

QUESTIONNAIRE

Canadian Personal Recovery Outcome Measure (C-PROM)

Please take the time to fill in the following questionnaire. There are 30 questions. The score for each question is as follows:

Based on your experiences in the **last week**, please indicate how often you have felt this way by selecting the option you most agree with.

	0	1	2	3	4
	None of the time	25% of the time	50% of the time	75% of the time	All of the time
1. I am motivated to keep myself well	0	1	2	3	4
2. I can access the health and social services that I need	0	1	2	3	4
3. I can identify the early warning signs of becoming unwell	0	1	2	3	4
4. I feel safe	0	1	2	3	4
5. I am hopeful about my future	0	1	2	3	4
6. I have an idea of who I want to become	0	1	2	3	4
7. I am respected by others	0	1	2	3	4
8. I know what helps me stay well	0	1	2	3	4
9. I like myself	0	1	2	3	4
10. I am driven by meaningful goals	0	1	2	3	4
11. I am supported by family and friends	0	1	2	3	4
12. I have a purpose in life	0	1	2	3	4
13. I can be an advocate for myself	0	1	2	3	4
14. I accomplish the goals I set out for myself	0	1	2	3	4
15. I have fun	0	1	2	3	4

QUESTIONNAIRE

Scoring Instructions

- Add up total score and divide by 4 to give you the ADJUSTED SCORE.
- Based on the ADJUSTED score, mark an X on the ruler below corresponding to this number.

- Return to the question on the scale that corresponds with the number on the ruler.
- Begin conversation, assessment, and goal setting at this point.

	0	1	2	3	4
	None of the Time	25% of the time	50% of the time	75% of the time	All of the time
16. I like the place that I live in (house, apartment, etc...)	0	1	2	3	4
17. I spend my day doing the things that I enjoy	0	1	2	3	4
18. I am confident	0	1	2	3	4
19. I sleep well	0	1	2	3	4
20. I have energy	0	1	2	3	4
21. I am happy	0	1	2	3	4
22. I have control over my life	0	1	2	3	4
23. I have new interests	0	1	2	3	4
24. I have good self-esteem	0	1	2	3	4
25. I have enough money to meet my basic needs	0	1	2	3	4
26. I feel a part of my community	0	1	2	3	4
27. I can manage stress	0	1	2	3	4
28. I contribute to my community	0	1	2	3	4
29. I am satisfied with my intimate relationships	0	1	2	3	4
30. I have peace of mind	0	1	2	3	4
TOTAL SCORE ____ /120	ADJUSTED SCORE = TOTAL SCORE / 4				

14

Dr. Wolff & Team

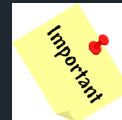
7

True or False

	True or False
1. Results from QOL assessments can be useful to guide recovery planning	T
2. QOL assessments may interfere with or being intrusive to a therapeutic encounter	F
3. Clinicians own assessments of clients are the best source of information	F
4. QOL assessments can open or improve the communication between clinicians and clients	T
5. Clients do not answer PROMs honestly, rather they say what they think the clinician wants to hear	F
6. PROMs can improve client's motivation and sense of control	T
7. PROMs take too much time	It depends

16

Why is PCM Important to you as Clinicians?



- Encourage conversations with the clients
- Identify problems that are overlooked
- Discuss areas difficult to described or not easily observed
- Can monitor client progress over time
- PROMs can elicit holistic information of a patient's condition (e.g., health history, biological measures, physical and mental status)
- Prioritize concerns
- Involve clients in their care for improved shared decision making

17

What is Recovery?

- A journey, individualized, on-going process → **client** defines the journey
- Individuals with mental illness can get well, have control, and decide what matters
- Associated with achieving benefits in various aspects of life
- Prioritizes the voices and perspectives of clients and not the clinicians
- Fosters collaboration and a shared focus on clients' needs, hopes and dreams

19

RCCS My Recovery Plan



Who's driving this plan?



What about in an emergency?



How does it look when the client is in control?

20

Recovery Planning

- Client defines the journey
- Clinicians may have an agenda
 - Extended Leave
 - Relapse prevention risk mitigation measures
 - Risk mitigation processes
- What happens to engagement if the clinician's agenda takes precedence over the client's vision of recovery?
- Clinicians can work on their agenda, but only if they are working **with** clients not **on** clients

The *Australian Treatment Outcome Study (ATOS)* followed over 500 persons with long-term relationships with heroin. Health and global outcomes were not related to **type** of treatment regimen, but rather **level of engagement** with care providers. Engagement is primarily a function of **quality of relationship** with health care professionals.

My Recovery Plan

A Plan to Create the Life You Want

The recovery journey can be a challenging one. By choosing different paths, we can move toward a future that feels hopeful, promising and meaningful.

It is important to remember that we will get off track at times. This is normal. However, by creating a recovery plan where we outline our vision for the future and the steps we need to take, we can help get ourselves back on track later. It can help guide our recovery journey.

INSTRUCTIONS

On the following pages is a template for your recovery plan. There are six steps to creating it.

1. **Guiding Values:** Write your guiding values. Your recovery plan will help you get to a life based on these values.
2. **Hopes and Dreams:** Write your hopes and dreams. You may want to refer back to the exercises earlier in this booklet and identify the areas that are most meaningful and important to you. Summarize your hopes and dreams in your recovery plan. A few words and phrases are usually enough.
3. **The Way Things Are Now:** Think about your circumstances in the same areas as your Hopes and Dreams. Write a few words or phrases describing how these areas are now.
4. **Starts and Steps:** List things you want to do differently, what do you want to START doing that will help your journey? What will you choose to STOP doing? These will move you closer to the life you want to live. You are changing habits you have by thinking about choices.
5. **A Step Closer:** Here you pick a time in the near future and describe what will look different in your life. This is a goal that helps you keep on track. Be sure to write in a way that will let you be able to say "Yes, I achieved that" or "Yes, I didn't make that this time."
6. **I Will and Others Will:** These are steps or tasks you will take and ask others to take to move you closer to the life you want to live.

21

RCCS My Recovery Plan

- Starts with the clients' values that guide their **Hopes and Dreams**
 - Over time (several sessions)
 - Identifying values **hope & dreams** using common language the client can relate to
 - Follows a **guided discovery** of where they are now and where they would like to go, paying attention to **obstacles and needs**
 - Based on CPROMs (and informed by WHOQOL)
 - The client draws the route map
 - Plan is written in the **client's** voice
 - Clinician documents their interventions as a part of the **client's** Recovery Plan

Fraser Health
www.fraserhealth.com

PARIS

RCCS My Recovery Plan Downtime Form

Person Details

Name: _____

Date/Gender: _____

Address: _____

City: _____

Country: FR _____ PARIS, FR _____

Other Details

Responsible For: _____

Signature: _____

Date Recorded: _____

My Hopes and Dreams (How I hope my life will be in 5-10 years)

The Way Things Are Now (The situations I want to get better)

Things Would Get Better if I Could START... (Things that I can make me closer to my hopes and dreams)

Page 1 of 2

Revised on: Dec 3, 2015
By Health Informatics: Advanced Clinical Systems - Community PARIS

22



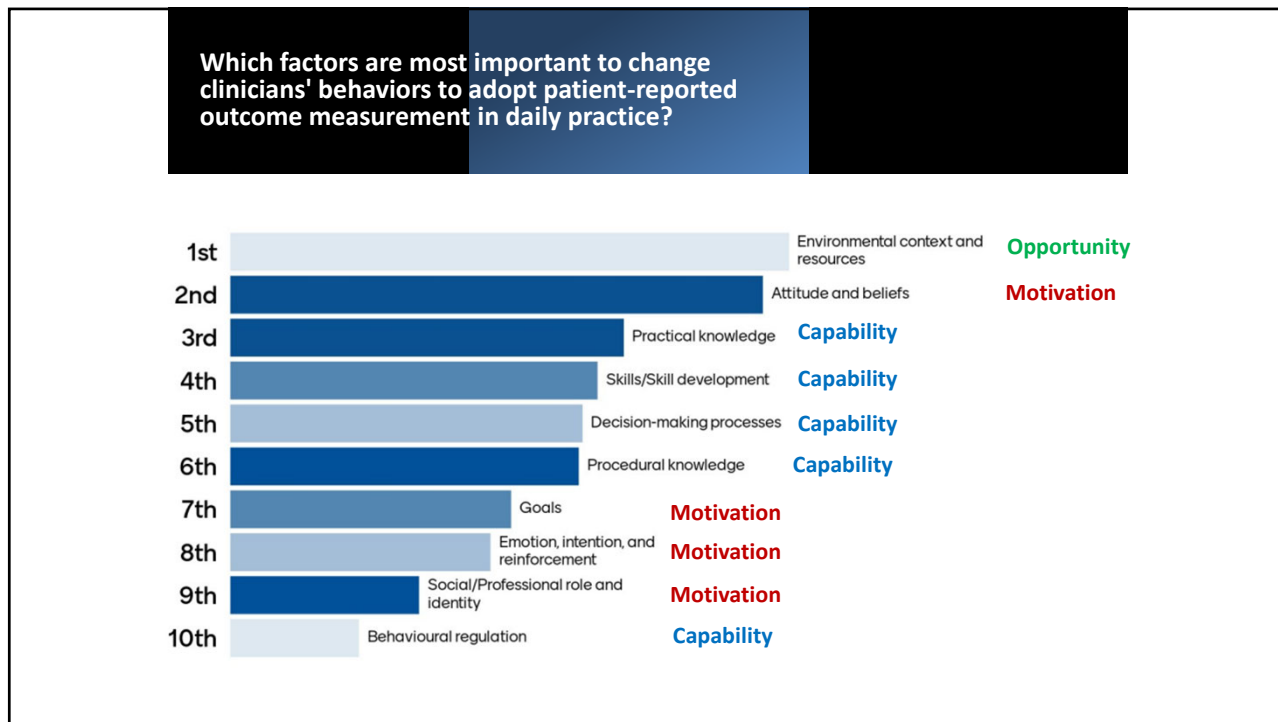
- Based on what you heard, what assistance do your clinical coordinators and staff need to ensure the QOL assessments are part of their routine?
- How might you shift the conversation about PROMs? motivate staff?

23

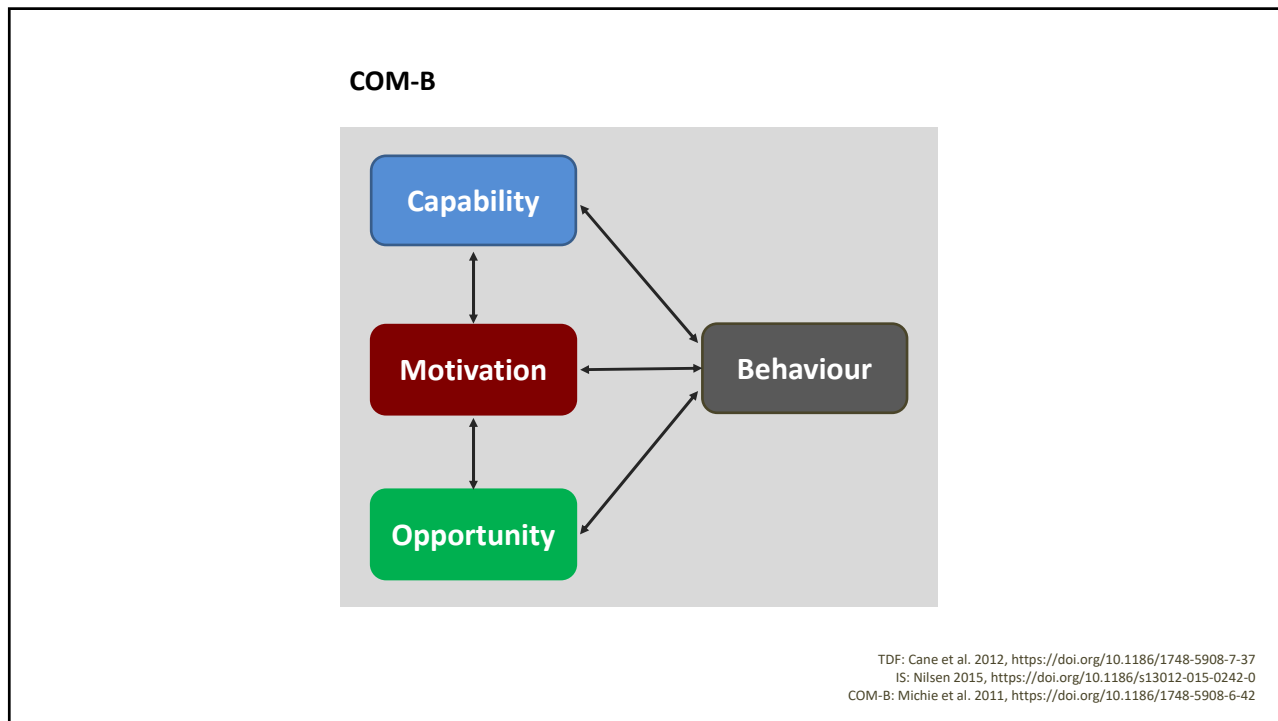
▸ Break Time! 10 Minutes



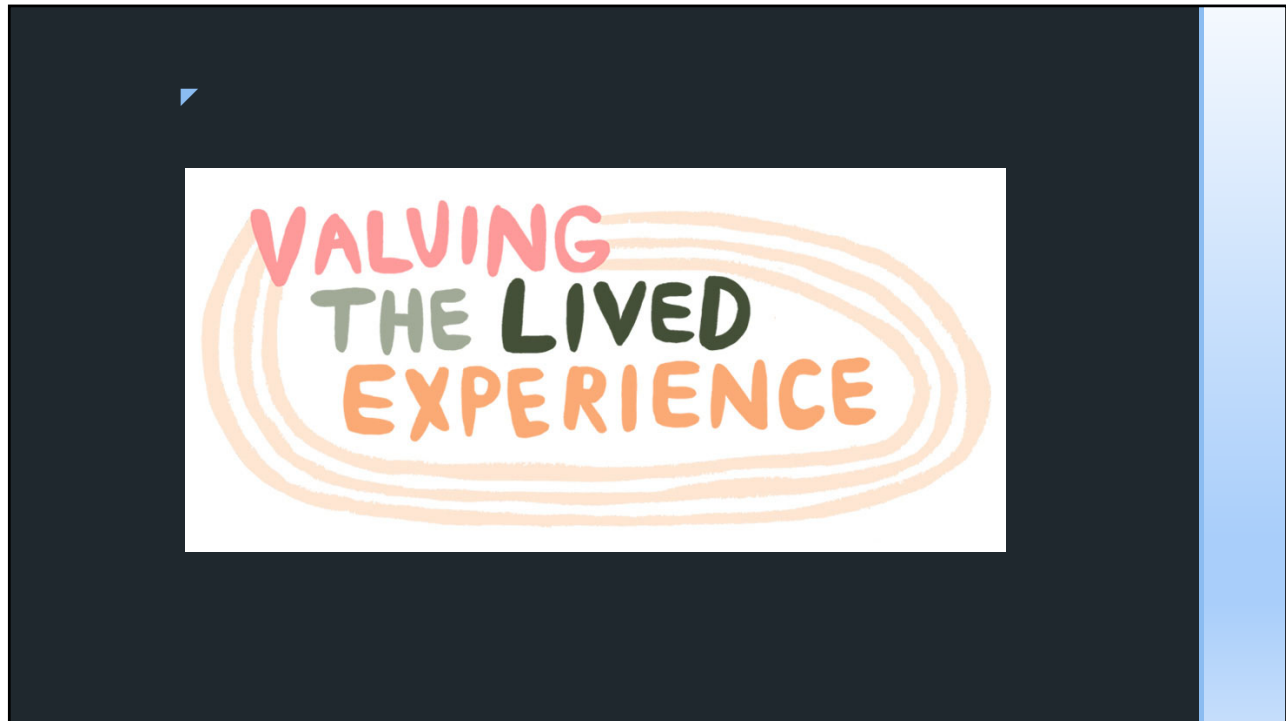
24




25



26



27

▶ **Skills, Skills Development and Learning** 

What skills are needed?

- Administer the ROM within a therapeutic encounter
- Scoring the tool
- Interpret the resultant data based on score (or item answers)
- Make use of results to inform care (e.g., shared decision-making)
- Clinical reasoning
- Interpersonal skills (e.g., prompt discussion, enrich conversation, offer reassurance)

28

Starting a Conversation (aka the initial administering a the QOL tool)



1. Read the Helena case study – THE FIRST PART
2. On your own, create a script for initial administration of QOL to Helena. What would you say to administer the QOL tool?
3. Divide into pairs
4. One person (clinician) administer the WHOQOL to the other person (client)
5. Debrief
 - *What was it like for you as the clinician?*
 - *What was it like for you as the client?*
 - *For the patients, what was helpful with regards to what the clinician said?*
 - *What would you prefer the clinician to say to you?*

29

Administering a PROM (follow-up)



1. Read the Helena case study
2. On your own, create a script for initial administration of QOL to Helena. What would you say to administer the QOL tool?
3. Divide into pairs
4. One person (clinician) administer the WHOQOL to the other person (client)
5. Debrief
 - *What was it like for you as the clinician?*
 - *What was it like for you as the client?*
 - *For the patients, what was helpful with regards to what the clinician said?*
 - *What would you prefer the clinician to say to you?*

30

PROmunication

Promoting Patient-Centred Communication with PROs

Journal of Patient-Reported Outcomes

Skovlund, P. C. et al. (2020). The development of PROmunication: a training-tool for clinicians using patient-reported outcomes to promote patient-centred communication in clinical cancer settings. <https://doi.org/10.1186/s41687-020-0174-6>

31

Elements of what to say by clinician to client for administering WHOQOL

[video](#)

32

▸ Clinical Reasoning and Decision-making

1. Based on the *initial* Helena case study and *initial* WHOQOL assessment
2. Create a total score for WHOQOL
3. Divide into groups of 3 to 4 people
4. Create an *initial* recovery plan

33

▸ Debrief

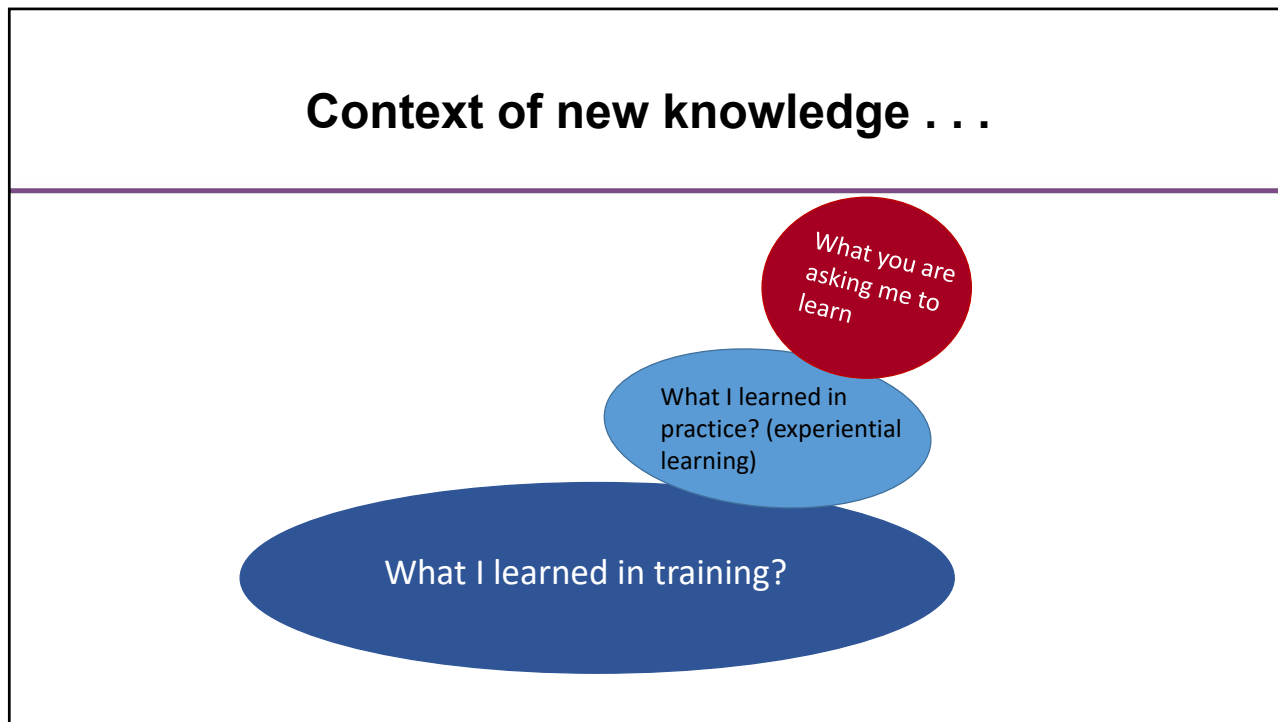


1. What information from the WHOQOL was meaningful/useful to inform the recovery plan?
2. What other assessment data would be important to include for the recovery plan?

Now, based on the follow-up WHOQOL score, where would you go from here with Helena?


Create progress notes for the recovery plan


34




35

Procedural Knowledge *(The "Know-How" Knowledge)*

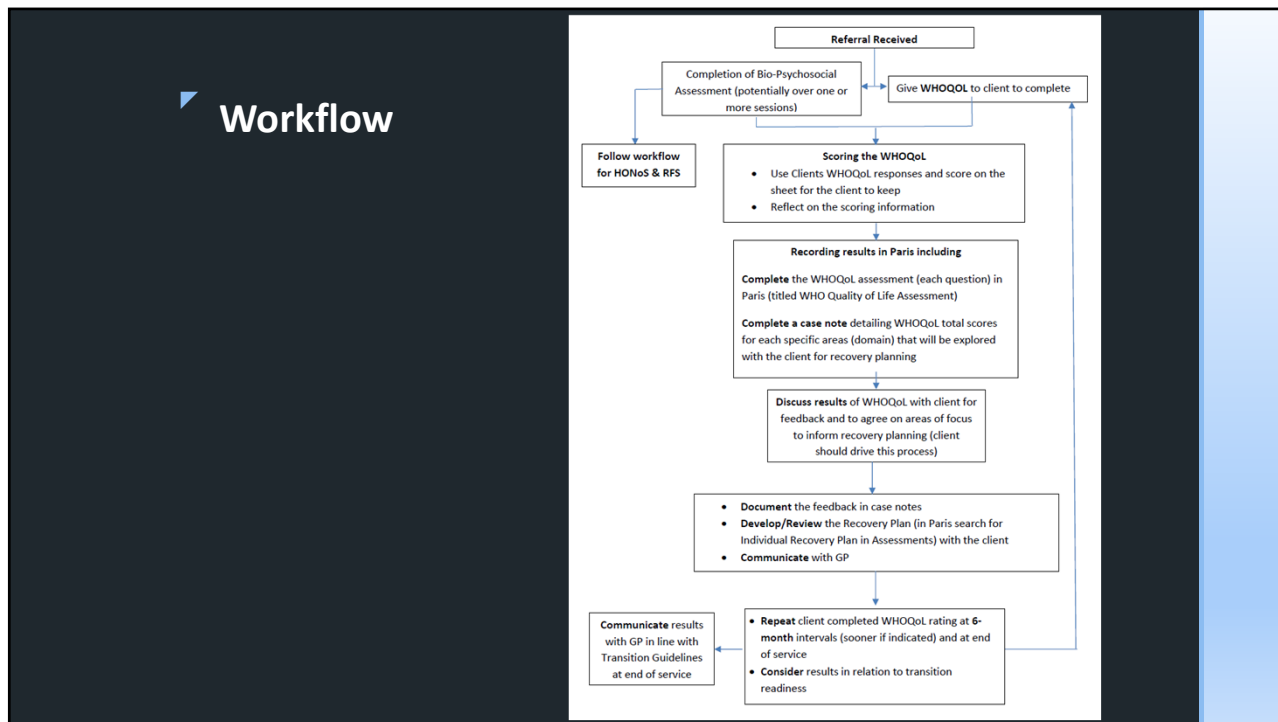
- 

How will PCMs be administered to collect data in the current workflow?
- 

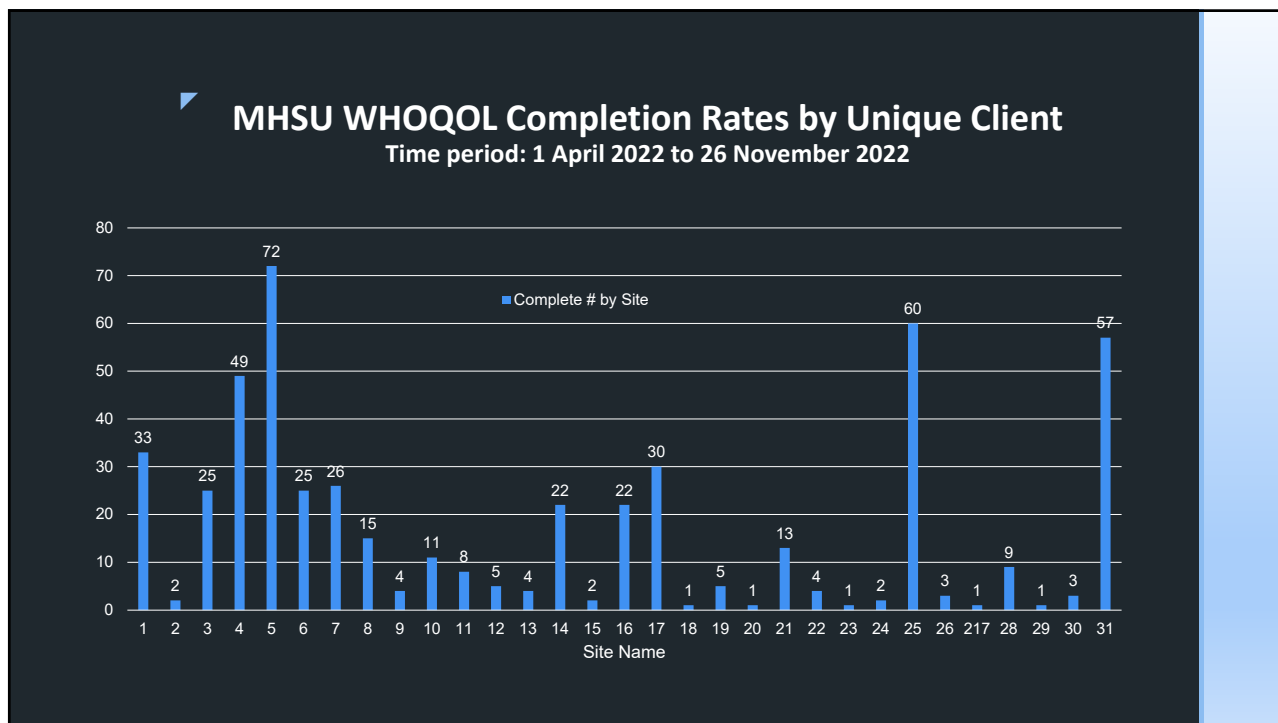
When will the PCM measures be administered?
- 

What needs to be considered when viewing results? (includes both how, when and who)

36



37



38

Now What?



1. (1 min) Read the question and write you initial ideas down
 - What are the most common reasons your staff may / may not be using QOL tools in recovery planning (or other tx plans)?*
 - Given what you know now, how will you address these reasons?*
2. (2-4 min) Divide into pairs and discuss **both** questions
3. (1 min) Summary the common ideas you shared
4. (4 min) Join another pair and identify the common ideas for each question
5. Assign someone to report back on behalf of the group – share one idea per group

39

39


Motivation Staff with goals / intention, attending to emotion, and reinforcement



- Goals and intention about using PROMs
- Attitudes and beliefs
- Emotions (fear)
 - Performance eval
 - Funding of services
- Professional identity and roles
- Feedback and audit (for learning)

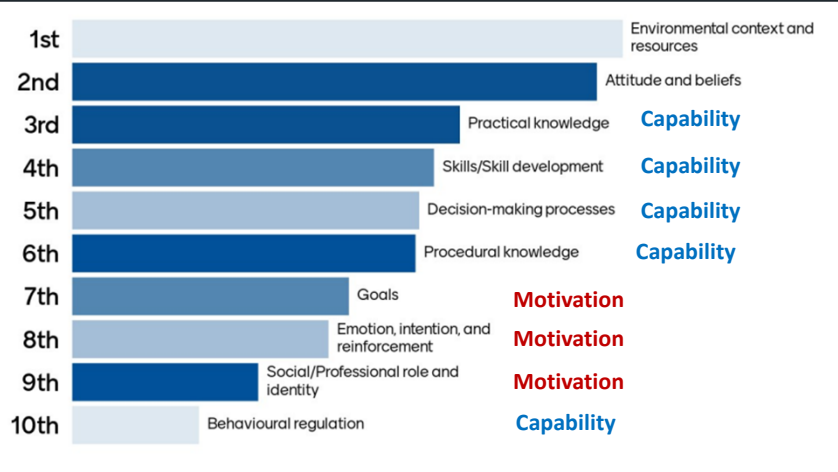
40

▶ **Outside your sphere of influence, what needs to be address**



41

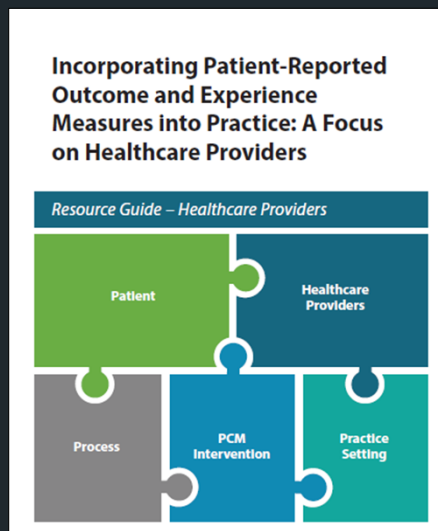
▶ **Which factors are most important to change clinicians' behaviors to adopt patient-reported outcome measurement in daily practice?**



Rank	Factor	Category
1st	Environmental context and resources	Opportunity
2nd	Attitude and beliefs	Motivation
3rd	Practical knowledge	Capability
4th	Skills/Skill development	Capability
5th	Decision-making processes	Capability
6th	Procedural knowledge	Capability
7th	Goals	Motivation
8th	Emotion, intention, and reinforcement	Motivation
9th	Social/Professional role and identity	Motivation
10th	Behavioural regulation	Capability

42

Resource Guide



Downloadable at
<https://www.healthyqol.com/resource-guide.html>

43

▶ In our setting, what aspects of the environment effect you the most regarding ROM use?

44

Any Questions?



45

Purpose and Objectives

Purpose: Provide supportive resources to clinical leaders for the incorporation of patient-reported, routine outcome measures (ROMs) (specifically Quality of Life (QOL) assessments) to inform the care and services received by persons living with a mental illness.




1. **Discuss** the value of patient-reported outcome measures (i.e., quality of life tools) to meet the needs of persons served within the recovery-centred clinical system (RCCS)
2. **Understand** the knowledge and skills needed by healthcare providers/Clubhouse staff to facilitate the uptake of QOL assessments into practice
3. **Explain** the administration of the QOL within a therapeutic encounter
4. **Demonstration** how the QOL assessment results can be incorporated into recovery planning
5. **Create** a plan to support coordinators and staff to integrate QOL tools into specific practice areas
6. **Identify** further supports and resources to optimize QOL assessments into

46

Attitudes about PROMs

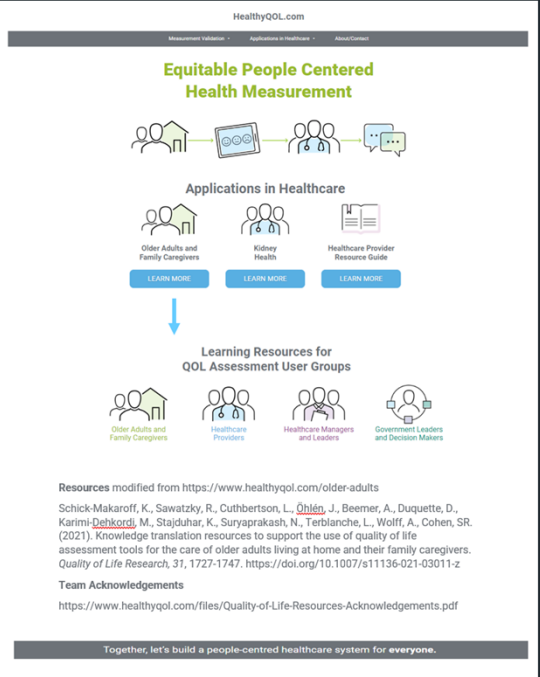
- Complete the same questions we started with
- Evaluation form go here <https://www.surveymonkey.ca/r/CLkeepCurrent>



- We really appreciate your feedback!
- Evaluation closes **Mar 17 @ midnight**

47

Additional Resources



Resources modified from <https://www.healthyqol.com/older-adults>
 Schick-Makaroff, K., Sawatzky, R., Cuthbertson, L., ~~Ohlso~~^{Ohlso}, J., Beemer, A., Duquette, D., Karimi-Dehkordi, M., Stajduhar, K., Sunyprakash, N., Terblanche, L., Wolff, A., Cohen, SR. (2021). Knowledge translation resources to support the use of quality of life assessment tools for the care of older adults living at home and their family caregivers. *Quality of Life Research*, 31, 1727-1747. <https://doi.org/10.1007/s11136-021-03011-z>
 Team Acknowledgements
<https://www.healthyqol.com/files/Quality-of-Life-Resources-Acknowledgements.pdf>

Together, let's build a people-centred healthcare system for everyone.

48



Sweet Summary

Color	Question
Red	Your favorite activity in session today
Green	One strategy you've learned about PROMs that you will use
Yellow	One important learning point from the session
Brown	What you learned about PROMs that surprised you
Orange	One barrier that will make it difficult to implement your new knowledge about PROMs
Blue	One thing about which you'd like to learn more

49

49