

Outcome Measurement and Evaluation as a Routine practice in alcohol and other drug services in Belgium (OMER-BE)

Amine Zerrouk¹, Clara De Ruyscher¹, Wim van den Brink², Lies Grémeaux³, Frieda Matthys⁴, Cleo Crunelle⁴ & Wouter Vanderplasschen¹

¹Department of Special Needs Education, Ghent University (UGent), Ghent, Belgium

²Academic Medical Center, University of Amsterdam, Amsterdam, the Netherlands

³Department of Epidemiology and Public Health, Sciensano, Brussels, Belgium

⁴Department of Psychiatry, Free University Brussels (VUB) / University Hospital Brussels (UZ Brussel), Brussels, Belgium

Corresponding author: ElAmine.Zerrouk@Ugent.be

Introduction

Whilst treatment is considered the recommended recovery pathway for persons with severe alcohol and other drug (AOD) problems, little is known about the effectiveness of AOD treatment services in Belgium. Patient-reported outcomes measures (PROMs) and patient-reported experiences measures (PREMs) are hardly used in the AOD field, but provide excellent tools and a framework to monitor progress and outcomes in these services based on experiences of service users (Kendrick et al., 2016).

Objectives

The overall goal of the OMER-BE project is to

- (1) test and prepare the routine measurement and monitoring of patient-reported outcomes and experiences
- (2) measure the effectiveness of various treatment modalities for diverse populations of AOD users.

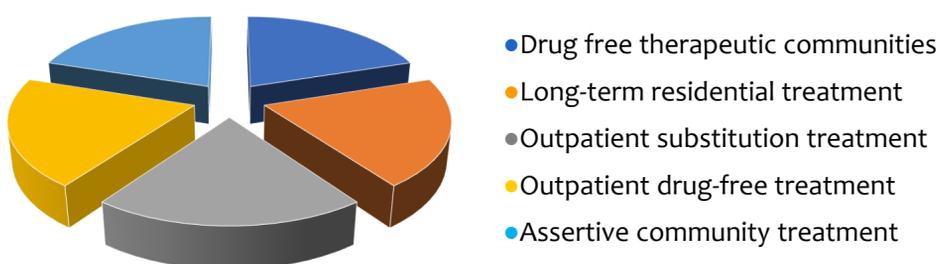
References

- Hinsley, K., Kelly, P.J., & Davis, E. (2019). Experiences of patient-centred care in alcohol and other drug treatment settings: A qualitative study to inform design of a patient-reported experience measure. *Drug and Alcohol Review*, 38(6), 664-673.
- ICHOM Standard Set for Addictions (2020). International Consortium for Health Outcomes Measurement (ICHOM). <https://www.ichom.org/portfolio/addiction>
- Kendrick, T., et al. (2016). Routine use of patient reported outcome measures (PROMs) for improving treatment of common mental health disorders in adults. *Cochrane Database of Systematic Reviews*, 13,7(7), CD011119.

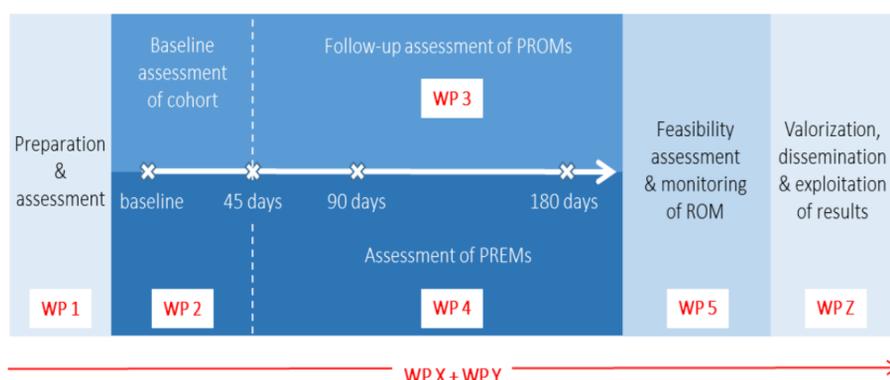
Methods

A non-randomized naturalistic, longitudinal, multi-centre cohort study

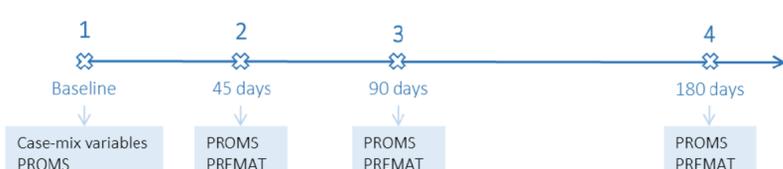
Participants (n=250) will be recruited from five different types of AOD treatment modalities:



Research plan



Impact of these treatment modalities on PROMs & PREMs will be monitored at different time points:



Baseline & outcome measurements (based on ICHOM Standard Set for Addiction (2020), WP1-WP3):

- Case-mix variables (e.g. socio-demographic, clinical & intervention factors)
- PROMs (e.g. alcohol and drug use, smoking (PROMIS), disability, recovery (SURE) & quality of life (WHOQOL-BREF) (ICHOM, 2020))
- PREMs (PREMAT; Patient-Reported Experience Measure for Addiction Treatment; Hinsley et al., 2019) (WP4)

Comparative analyses of outcome variables will be performed, distinguishing between:

- Treatment modalities (residential vs. outpatient vs. outreach)
- User characteristics (demographic, clinical & intervention variables)
- Follow-up moments & recovery status

Qualitative study with a subset of participants (n=25) (WP4):

- following the 6-month follow-up moment (5 per treatment modality)
- In order to gain in-depth understanding of their lived experiences related to their treatment and recovery trajectories

To assess technical and practical feasibility of routine outcome measurement in Belgian AOD services, an online version/app of the OMER-BE outcome measurement tool will be developed and pilot-tested in 5 AOD services (WP5).

During the valorisation phase, two focus groups will be organized with relevant stakeholders from the AOD field to:

- Check the ecological validity of the findings
- Formulate contextualized recommendations based on service users' and providers' lived experiences
- Gain insight into preconditions for implementing ROM in Belgian AOD services.