

nView Health: Supporting Measurement-Based Care in Behavioral Health

Measurement-based care (MBC) is increasingly a primary point of focus in both behavioral health and healthcare in general and is a standard of care directive for behavioral health providers. MBC is fully supported by the Utilization Review Accreditation Commission (URAC), which offers the Designation for Measurement-Based Care to Mental Health and Substance Use Disorder (SUD) providers.

Outside of specific behavioral health and SUD facilities, our broader healthcare system currently provides the bulk of mental health services in our country. Within the healthcare system it is widely expected that the Joint Commission, which requires accredited behavioral healthcare organizations to assess outcomes for the individuals they serve, will in the very near future require all healthcare systems engaged in behavioral health to follow MBC directives.

MBC has become the standard for all mental healthcare. To measure the effectiveness of behavioral health treatment, providers must have quantifiable and well documented data to serve as a baseline upon which to track and chart the patient's progress and outcomes.

NVIEW MBC SOLUTIONS

nView Health has a wide assortment of solutions that provide more actionable behavioral health data than any other set of tools available to clinical practice. nView's digital screeners and severity measurement solutions provide a methodical, closed-loop process that uses patient input to assess and accurately measure patient-reported outcomes. nView

outcome measurement solutions provide a monitoring protocol to consistently and accurately gather the patient-reported data so that a provider can systemically track the patient's progress and be alerted to intervene as required. And at each step nView provides documentation of each reported measure back to the provider and system.

DATA OUTPUT THROUGHOUT THE CARE PROCESS

From the time of patient intake through assessment and treatment, nView solutions provide a considerable amount of data on a patient's condition. Our evidence-based screeners assess the 15 most diagnosed adult DSM-5 mental health disorders, the 21 most diagnosed pediatric disorders, and other related mental health disorders, in a single three-minute screener.

In addition, nView offers the most trusted severity measurement scales including the Sheehan Disability Scale (SDS©) and Clinical Global Improvement Scale, to determine the level of impact a patient's condition has on their ability to function in daily life.

Finally, nView also offers the most trusted monitors to track clinical outcomes specific to the patient's DSM-5 disorders. The monitors can automatically be delivered and replied to on a patient's phone, tablet, or computer. These patient-reported outcome measurements provide standardized scoring that enables the provider to track and fully document patient outcomes for measurement-based care and outcomes data collection.

NVIEW SCREENER RESULTS SAMPLE

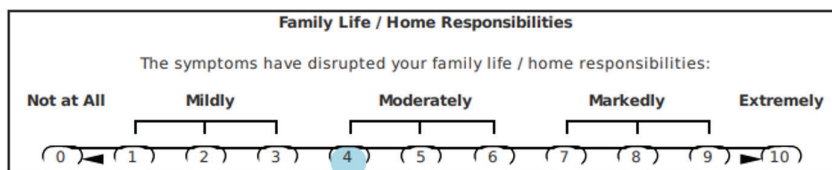
Test Results

1.

A	Have you been depressed or down, or felt sad, empty or hopeless most of the day, nearly every day , for the past two weeks?	no
A	In the past two weeks, were you much less interested in most things or much less able to enjoy the things you used to enjoy most of the time ?	no
B	In the past month did you think that you would be better off dead or wish you were dead?	no
B	In the past month have you thought about killing yourself, or wanted to be dead, or planned to kill yourself, or done anything that you hoped would cause your death?	no
C	Have you ever had a period of time when you were feeling 'up' or 'high' or 'hyper' or so full of energy or full of yourself that you got into trouble, or that other people thought you were not your usual self? (Do not consider times when you were intoxicated on drugs or alcohol.)	no
C	Have you ever been persistently irritable, for several days, so that you had arguments or verbal or physical fights, or shouted at people outside your family? Have you or others noticed that you have been more irritable or over reacted, compared to other people, even in situations that you felt were justified?	no
D	Have you, on more than one occasion, had spells or attacks when you suddenly felt anxious, very frightened, uncomfortable or uneasy, even in situations where most people would not feel that way? Did the spells surge to a peak, within 10 minutes of starting?	no

Test results from the nView Screener are presented in an easy-to-read format, and data can be exported for graphing over time or adding to a data warehouse or analytics platform for analysis.

SEVERITY MEASUREMENT SCALE SAMPLE



Days Lost

On how many days in the last week did your symptoms cause you to miss school or work or leave you unable to carry out your normal daily responsibilities? 2

Days Underproductive

On how many days in the last week did you feel so impaired by your symptoms, that even though you went to school or work or had other daily responsibilities, your productivity was reduced? 1

Severity measurement scales like this excerpt from the Sheehan Disability Scale (SDS©) indicate the level of impact a person's disorder has on daily life.

NVIEW WEEKLY MONITOR SAMPLE

<p style="text-align: center;">KID-I. OBSESSIVE-COMPULSIVE DISORDER 8/2/2021</p> <p>Since your last evaluation or monitor, how much did you suffer from:</p> <p>1. bad thoughts that came into your mind that you couldn't get rid of? (For example, bad thoughts or urges, or nasty pictures, or thoughts of harming someone even though you didn't want to, or thoughts that someone would get hurt because of something little you did or didn't do, or thoughts of having dirt or germs on you, or thoughts that you would make someone sick somehow, or thoughts that you would do something shocking.) 5</p> <p><small>(DO NOT INCLUDE SIMPLY EXCESSIVE WORRIES ABOUT REAL LIFE PROBLEMS. DO NOT INCLUDE OBSESSIONS DIRECTLY RELATED TO HOARDING, HAIR PULLING, SKIN PRICKING, BODY DYSMORPHIC DISORDER, EATING DISORDERS, SEXUAL DEVIATIONS, PATHOLOGICAL GAMBLING, OR ALCOHOL OR DRUG ABUSE BECAUSE YOU MAY DERIVE PLEASURE FROM THE ACTIVITY AND MAY WANT TO RESIST IT ONLY BECAUSE OF ITS NEGATIVE CONSEQUENCES.)</small></p> <p>2. trying to make these thoughts or images or impulses go away by replacing them with another thought or action? 3</p> <p>3. these thoughts coming back into your mind even when you tried to ignore or get rid of them? 5</p> <p>4. feeling that you had to do something over and over without being able to stop doing it? (Like washing over and over, or straightening things up over and over, or counting or checking on something over and over, or saying or doing something over and over.) 4</p>	<p style="text-align: center;">KID-I. OBSESSIVE-COMPULSIVE DISORDER 8/5/2021</p> <p>Since your last evaluation or monitor, how much did you suffer from:</p> <p>1. bad thoughts that came into your mind that you couldn't get rid of? (For example, bad thoughts or urges, or nasty pictures, or thoughts of harming someone even though you didn't want to, or thoughts that someone would get hurt because of something little you did or didn't do, or thoughts of having dirt or germs on you, or thoughts that you would make someone sick somehow, or thoughts that you would do something shocking.) 4</p> <p><small>(DO NOT INCLUDE SIMPLY EXCESSIVE WORRIES ABOUT REAL LIFE PROBLEMS. DO NOT INCLUDE OBSESSIONS DIRECTLY RELATED TO HOARDING, HAIR PULLING, SKIN PRICKING, BODY DYSMORPHIC DISORDER, EATING DISORDERS, SEXUAL DEVIATIONS, PATHOLOGICAL GAMBLING, OR ALCOHOL OR DRUG ABUSE BECAUSE YOU MAY DERIVE PLEASURE FROM THE ACTIVITY AND MAY WANT TO RESIST IT ONLY BECAUSE OF ITS NEGATIVE CONSEQUENCES.)</small></p> <p>2. trying to make these thoughts or images or impulses go away by replacing them with another thought or action? 3</p> <p>3. these thoughts coming back into your mind even when you tried to ignore or get rid of them? 4</p> <p>4. feeling that you had to do something over and over without being able to stop doing it? (Like washing over and over, or straightening things up over and over, or counting or checking on something over and over, or saying or doing something over and over.) 3</p>
<p style="text-align: center;">KID-I. OBSESSIVE-COMPULSIVE DISORDER 8/16/2021</p> <p>Since your last evaluation or monitor, how much did you suffer from:</p> <p>1. bad thoughts that came into your mind that you couldn't get rid of? (For example, bad thoughts or urges, or nasty pictures, or thoughts of harming someone even though you didn't want to, or thoughts that someone would get hurt because of something little you did or didn't do, or thoughts of having dirt or germs on you, or thoughts that you would make someone sick somehow, or thoughts that you would do something shocking.) 3</p> <p><small>(DO NOT INCLUDE SIMPLY EXCESSIVE WORRIES ABOUT REAL LIFE PROBLEMS. DO NOT INCLUDE OBSESSIONS DIRECTLY RELATED TO HOARDING, HAIR PULLING, SKIN PRICKING, BODY DYSMORPHIC DISORDER, EATING DISORDERS, SEXUAL DEVIATIONS, PATHOLOGICAL GAMBLING, OR ALCOHOL OR DRUG ABUSE BECAUSE YOU MAY DERIVE PLEASURE FROM THE ACTIVITY AND MAY WANT TO RESIST IT ONLY BECAUSE OF ITS NEGATIVE CONSEQUENCES.)</small></p> <p>2. trying to make these thoughts or images or impulses go away by replacing them with another thought or action? 2</p> <p>3. these thoughts coming back into your mind even when you tried to ignore or get rid of them? 4</p> <p>4. feeling that you had to do something over and over without being able to stop doing it? (Like washing over and over, or straightening things up over and over, or counting or checking on something over and over, or saying or doing something over and over.) 2</p>	<p style="text-align: center;">KID-I. OBSESSIVE-COMPULSIVE DISORDER 8/16/2021</p> <p>Since your last evaluation or monitor, how much did you suffer from:</p> <p>1. bad thoughts that came into your mind that you couldn't get rid of? (For example, bad thoughts or urges, or nasty pictures, or thoughts of harming someone even though you didn't want to, or thoughts that someone would get hurt because of something little you did or didn't do, or thoughts of having dirt or germs on you, or thoughts that you would make someone sick somehow, or thoughts that you would do something shocking.) 3</p> <p><small>(DO NOT INCLUDE SIMPLY EXCESSIVE WORRIES ABOUT REAL LIFE PROBLEMS. DO NOT INCLUDE OBSESSIONS DIRECTLY RELATED TO HOARDING, HAIR PULLING, SKIN PRICKING, BODY DYSMORPHIC DISORDER, EATING DISORDERS, SEXUAL DEVIATIONS, PATHOLOGICAL GAMBLING, OR ALCOHOL OR DRUG ABUSE BECAUSE YOU MAY DERIVE PLEASURE FROM THE ACTIVITY AND MAY WANT TO RESIST IT ONLY BECAUSE OF ITS NEGATIVE CONSEQUENCES.)</small></p> <p>2. trying to make these thoughts or images or impulses go away by replacing them with another thought or action? 2</p> <p>3. these thoughts coming back into your mind even when you tried to ignore or get rid of them? 3</p> <p>4. feeling that you had to do something over and over without being able to stop doing it? (Like washing over and over, or straightening things up over and over, or counting or checking on something over and over, or saying or doing something over and over.) 2</p>

Monitors completed by the patient weekly enable providers to track the patient's progress and use the data for MBC and outcomes reporting.

WHY CHOOSE NVIEW HEALTH FOR MEASUREMENT-BASED CARE?

The nView Solution is more than a set of short tests to detect the presence and severity of depression or anxiety. Rather, it is a prescriptive, repeatable, and proven process to help providers gather the data they need to accurately assess, diagnose, treat, and monitor complex and co-occurring behavioral health conditions.

- ▶ nView Monitors provide patient-reported data on the most common DSM-5 mental health disorders and other related disorders on one comprehensive platform vs. the disjointed one-dimensional screeners commonly used today.
- ▶ nView is the worldwide exclusive licensee for the most commonly used severity measurement scales including the SDS®, the YBOCS®, CYBOCS®, BDD-YBOCS®, and more.
- ▶ nView offers the most comprehensive behavioral health structured data collection capabilities available to track and document patient-reported outcomes.

Learn how our solutions can help meet measurement-based care standards for behavioral healthcare at www.nView.com • 877-684-3943

ABOUT NVIEW

nView Health offers behavioral health technology that enables healthcare professionals to rapidly deliver the right diagnosis, resulting in the right treatment at the right time. Its signature product, the digital M.I.N.I., enables healthcare providers, researchers and educators clinically validated behavioral health screens, diagnostic interviews, and patient outcome monitors. To learn more, please visit Nview.com or follow nView on LinkedIn or Twitter @NviewHealth.

¹ <https://www.urac.org/accreditation-cert/measurement-based-care-designation/>

² <https://www.jointcommission.org/accreditation-and-certification/health-care-settings/behavioral-health-care/outcome-measures-standard/>