## Transcript for Video #8.3 Use of Measures - ORS

Reigniting Clinical Supervision (RCS)

Alright, so I'm gonna talk about two specific measures that I use in my clinical practice. And we gonna go into some of its properties in how to administer these measures. One of the reasons I use first and foremost, the Outcome Rating Scale is because of its briefness is brevity and that's kind of crucial because the therapy hour is short in many ways, and you want to be able to get down to measuring things important to the person. And to pick up very quickly and close the loop back with them. You may ask as well why do I pick the outcome rating scale which is global wellbeing scale. You can see there are four key factors here: the Individual, the Interpersonal, Socially and Overall. Why I pick this is opposed to picking the symptoms specific measure.... What I really wanna get is to be able to measure what's of importance to the person beyond symptomology, beyond some of the presentations though this will also get captured in how it affects their functioning.

I'm gonna explain a bit more about the outcome rating scale. So as you can see the outcome rating scale which is based with four items. The client doesn't have to rate or write much. He just have to put dash to each of the points and this like an analogue line that ranges from 0 to 10. And then after that, you add up the score. But maybe more useful to explain how I use this literally with a client. So imagine I was in a session and I'm a therapist how would I explain to them about the use of the measure right from the first session. So this is how would you say to the client:

"You know I have some quirks in a way that I do my practice here. Do you mind to take some time to explain to you this measure? So this is the outcome rating scale and it serve like a way to take temperature how you doing, and in this measure I want you to think about what the last week including today how you feeling in these four areas. Now, this kind of important for me to get this because my first priority is to make sure that you get the results you want. And based on what you're rating we will be able to track to see if you're going in the right direction, if we are on-track.

Or if after few sessions, if I review the outcomes and we can talk about it, and if we are off track, it is my responsibility to do something different. So let me explain what this four measures are. So as you think back all the week including today on how you feeling individually, which means your all wellbeing. And this is the sliding scale, so all you have to do is to put a line down on where you at. Anywhere the left means not doing so well and anywhere on the right, means doing really well. Second, Interpersonally, this means about close relationships, family members. Socially, you know if you're working, about friends, where you at in this scale. And overall, this is general sense of your wellbeing. You don't have to write anything down but just a dash."

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Once they put that down, what I will do is I'll take this form and I'm going to score them, take a ruler and measure from 0 to 10 and add up the score.

So for example, if the person's score that say around 4, 4, 4, 4, for example, which equals to  $4 \times 4$  is 16, so the person's score is 16. Out of a total of 40 on this scale, here's what I explained to them.

"Thanks for taking the time to score this and I'll just give you some feedback what this score is telling you and this ORS. You scored at 16 in total and people who scored above 25, you know, doesn't mean that they don't have any issues but either they just have one very specific issues or generally they coping with how life is going for them. People who score below 25 tells us two things. 1. The person maybe is in distress or hurting. 2. people who score below 25 genuinely benefit from some kind of help. So your scores is 16 so I'm kind of glad that you're here and we got this opportunity to work on stuff. So this is make sense to you where you at, does this represent you?"

...Check that this scores aligned with how they are feeling. So pretty sure you're forward that's the outcome rating scale. Just to note, the outcome rating scale is has a clinical cutoff of 25 so people score above 26 as i mentioned in that little example, just means they belong to the non-clinical population. People who score below 25 just means that they are represented the people with clinical distress. And more of this information... you can download the cheat sheet that is available here given the link and you can take all the resources necessary.

For adults 19 and above, yeah the clinical cutoff is 25 but if you're working with somebody whose 13-18, the clinical cutoff is 28. For younger ones, 6 to 12, clinical cut off is 32. You know, behind the statistical property, you could see that ... the younger ones tend to score higher ratings. So this is the adult version of outcome rating scale. This is also the youth version, you can tell the additional smiley faces and the simplified language and then, if you're working with younger children, and they can't read words very well, you can use the smiley faces, though this is not clinically validated research, but just to get the younger kids and family, you see them individually to being involved in the process.

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And a bit more about the statistical practice of the outcome rating scale. It's based on the gold standard the outcome questionnaire 45. And this was done by Michael Lambert and team as you can tell by the name the OQ 45 is based on 45 items. It's pretty long and the feasibility between if you compare to OQ and ORS is between 25 % for the OQ and 89% for the ORS. Just simply because of their length. And the ORS actually adopted from the OQ 45. Even though when you look at such a tool, it's imprecise, but is certainly more feasible and other statistical properties I won't go into length you could look at the details right here and I provide them in the notes. And this section of the lecture as well if you want to review them. So once again, we pick a measure that's a value to the client and we continue to use and systematically measure that.

Final thing to note, when you use measures for one client at a time, don't get harped on using it like some kind of psychological assessment tool. Don't use it as a psychological assessment tool. **Use it as a conversational tool.** Use it as a platform to kick off the conversation. Use it as a way to ignite what is important to help you have a focus instead of pigeonholing people. I mean even pigeons don't like pigeonholes, so don't use it to categorise people. Use it as a way to hone in, to focus the conversation, right from the beginning.