



Partners for Change Outcome Management System (PCOMS)

A New Paradigm for Quality and Efficiency Improvement

For many years there have been calls for better and more effective client engagement. These have led to the development of “The Partners for Change Outcome Management System” (PCOMS) which supports increased client empowerment and better accountability.

PCOMS is an outcome management system that benefits the client, the worker and the organisation.

PCOMS:

- Uses simple sliding scales to solicit client feedback on factors proven to predict success, regardless of treatment model or the presenting problem.
- Provides objective, quantifiable data on the effectiveness of providers and systems of care.
- Provides a formalised mechanism for client preferences to guide the choice of intervention

In four randomised clinical trials (RCT) conducted by the clinical developer, Dr. Barry Duncan, and researchers at the Heart and Soul of Change Project (<https://heartandsoulofchange.com>) PCOMS was shown to significantly improve effectiveness in real clinical settings as well as substantially reducing costs related to length of treatment and provider productivity.

Based on the result of these randomised clinical trials, PCOMS was recognised in the USA's Substance Abuse and Mental Health Services Administration (SAMHSA's) National Registry of Evidence-based Programs and Practices (NREPP.) PCOMS has now been implemented by hundreds of organisations throughout United States of America as well as, Canada, Australia, Norway and New Zealand.

PCOMS has been shown to be consumer-friendly, highly feasible for clinicians, and importantly, it has been repeatedly demonstrated to dramatically improve the quality and efficiency of services in peer-reviewed, published studies conducted across a range of settings, including public behavioral health and social services.

Key facts about PCOMS

1. The PCOMS measures were co-developed by Dr. Barry Duncan to privilege the consumer in all facets of service delivery.
2. PCOMS operationalises the core values of client-driven, recovery-oriented, and individually tailored services in each and every service encounter with each and every client.
3. PCOMS is listed in the USA's SAMHSA National Registry of Evidence Based Practices and Programs.
4. PCOMS can be integrated into any treatment model and applies to all diagnostic categories. One size does fit all. PCOMS provides a cost effective way to be evidence based across all services and clients.
5. Four randomised clinical trials (RCTs;) have been conducted by researchers (B. Duncan, J. Reese, B. Bohanske, J. Sparks) at the Heart and Soul of Change Project (hereafter Project) demonstrating that PCOMS dramatically improves outcomes while increasing efficiency.
6. An independent meta-analysis of the RCTs revealed that individuals using PCOMS had a 3.5 times greater chance of achieving reliable change and a 50% less likelihood to deteriorate.
7. The largest benchmarking study ever conducted in public behavioral health and social services, found that PCOMS delivered comparable outcomes to RCTs of depression, proving it to be a viable quality improvement strategy.
8. Studies have shown that PCOMS reduced: total program cost by 10% to 35%; length of stay by 40% to 50%; and cancellation and no-show rates by 40% and 25%, respectively.
9. A recent study demonstrated that these same gains generalise to children and adolescents.
10. Studies are in process that demonstrate further benefits such as reduced recidivism after psychiatric hospitalisation.