



Feasibility and Preliminary Outcomes of Collaborative Decision Skills Training in a VA Open Trial

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Introduction

Collaborative Decision Skills Training (CDST) is a group therapy designed to help participants with serious mental illness to more effectively engage in their healthcare. CDST assigns equal participation between patients and providers to empower patients to advocate for their needs and express their preferences.

Preliminary outcomes of CDST in a civilian pilot (n=21) provided evidence for fidelity and acceptability.

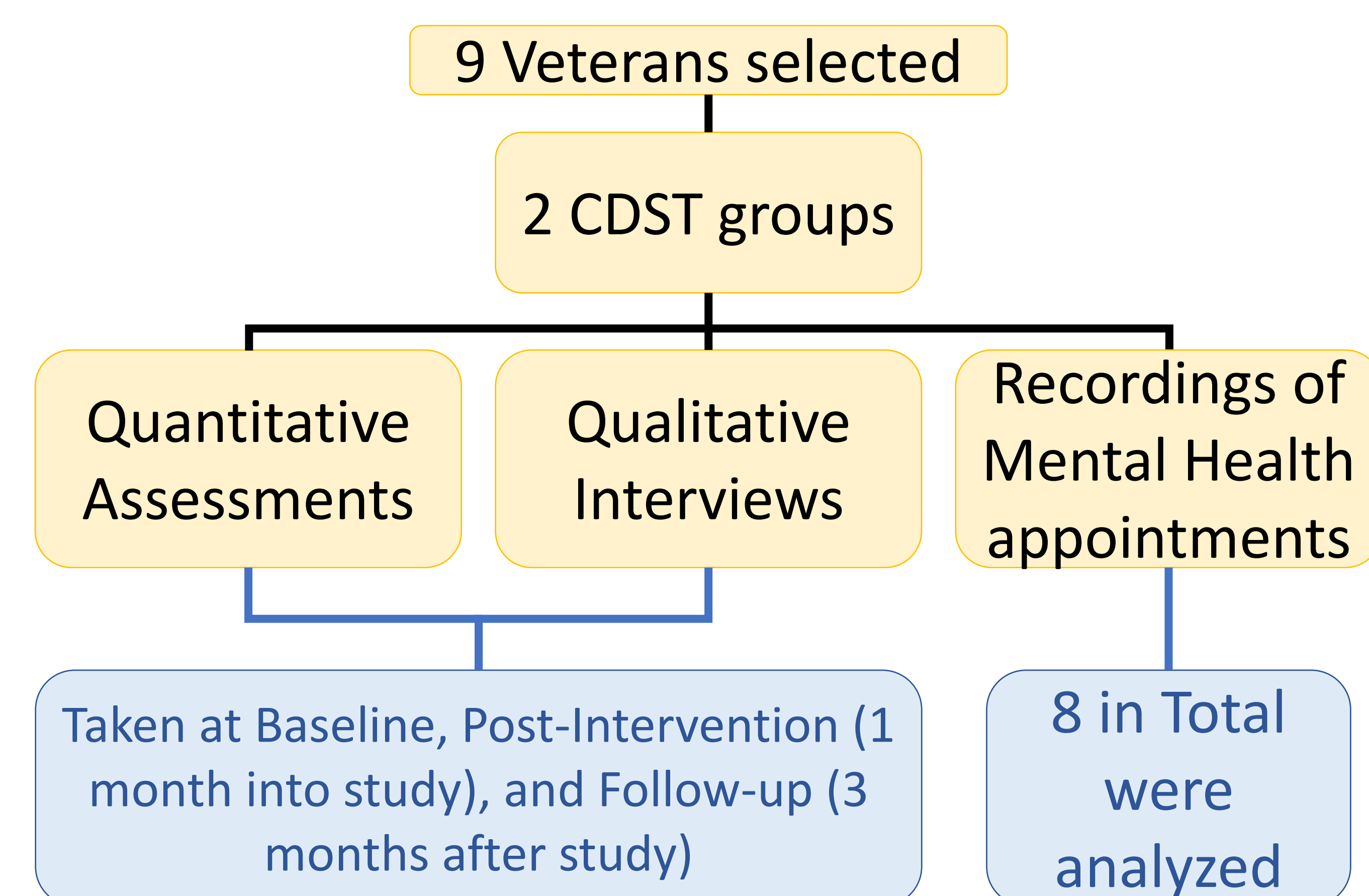
The intervention underwent a series of adaptations before implementation in a VA Psychosocial Rehabilitation and Recovery Center (PRRC) context.

- Adaptations were based on input from members of an Adaptation Resource Team, which included Veterans with psychosis who are participating in VA psychiatric rehabilitation and VA clinicians who are providing psychiatric rehabilitation services.

Aims

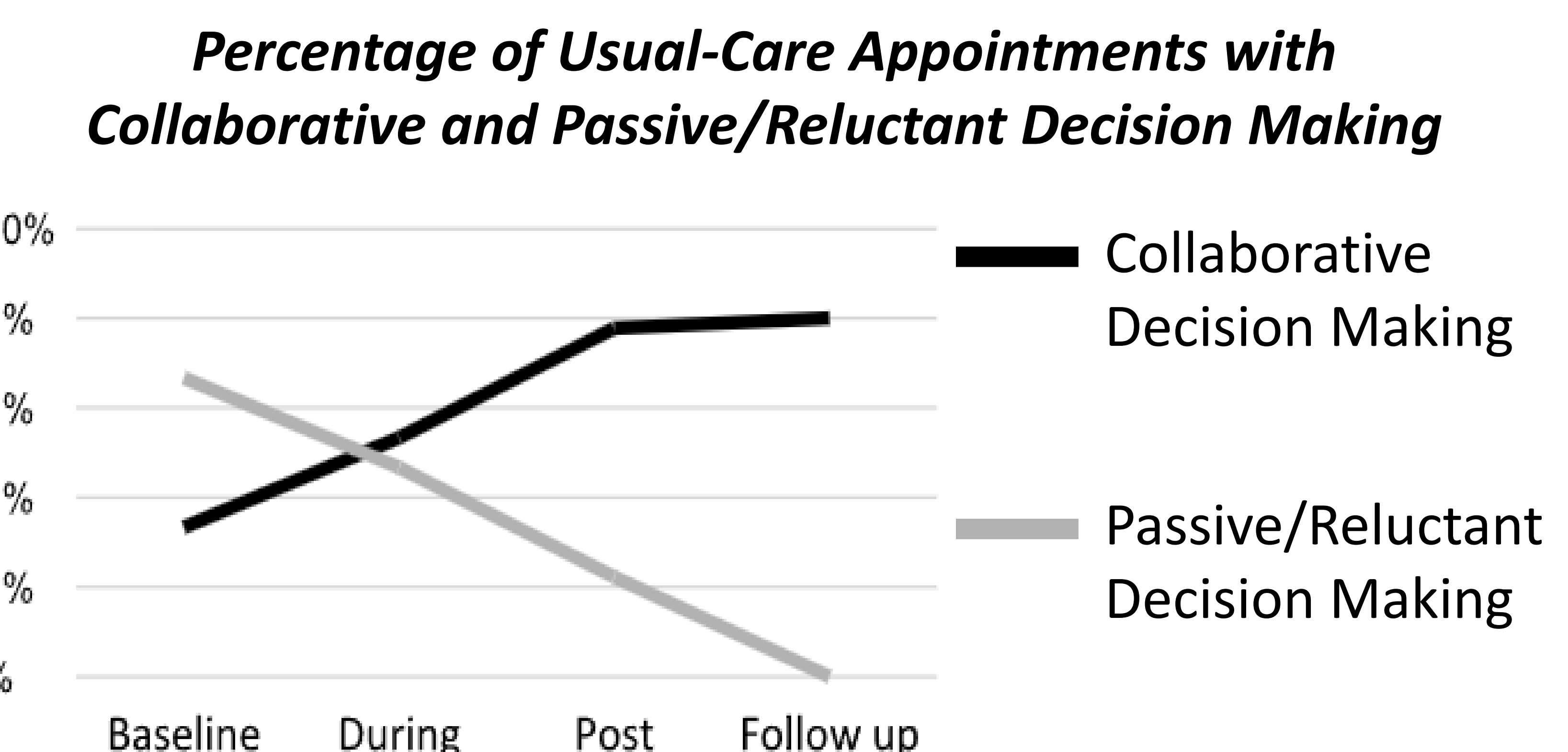
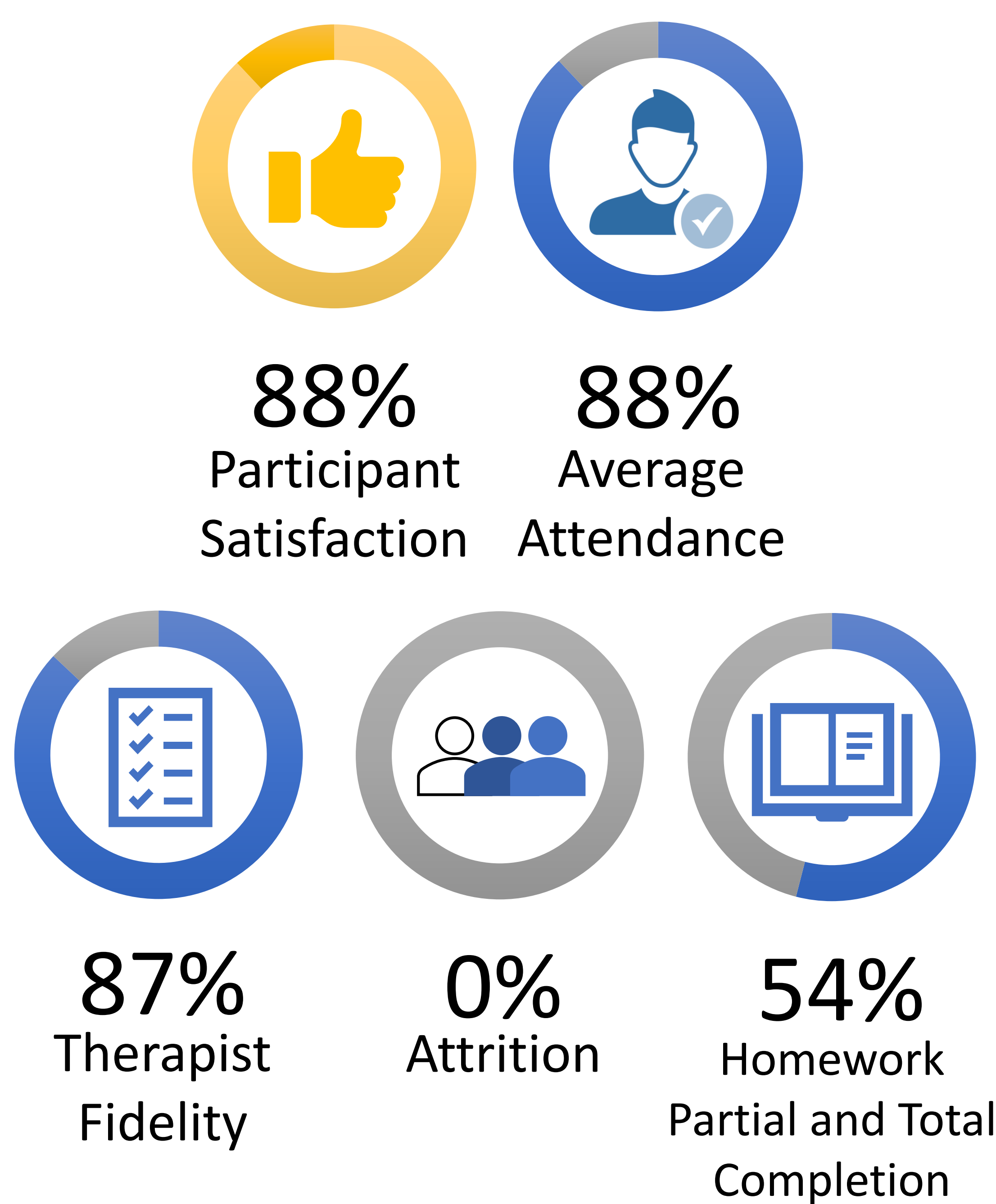
1. To assess CDST's **feasibility** of implementation in a VA context.
2. To evaluate CDST's **preliminary effectiveness** in improving treatment outcomes and collaborative decision-making skills in Veterans receiving care in PRRCs.

Methods



We measured the feasibility and effectiveness of CDST through quantitative assessments, qualitative interviews, and recordings of the Veteran appointments with PRRC providers. The primary investigator provided training and fidelity monitoring to two usual care clinicians to deliver CDST.

Results



The percentage of appointments where Veterans and clinicians collaboratively agreed increased from 33% to 80% by 3-month follow-up.

We created a practice group to increase homework completion, but attendance in each session ranged from 0 to 3 Veterans.

Given the small sample size, only Cohen's d effect sizes were used to measure preliminary evidence.

	Symptom Severity	Personal Recovery	Targeted Skills	Empowerment
Pre-Intervention to Post-Intervention	Cohen's d = 0.13	Cohen's d = 0.50	Cohen's d = 1.23	Cohen's d = 1.16
Pre-Intervention to 3-month Follow-up	Cohen's d = 0.29	Cohen's d = 1.08	Cohen's d = 0.86	Cohen's d = 0.63

	Veteran-Initiated Collaboration during Decision-Making	Veteran-Initiated Collaboration in Non-Decisional Contexts	Veteran Self-Report Ratings of Collaborative Decision-Making
Baseline to Post-Intervention	Cohen's d = 1.03	Cohen's d = 1.31	Cohen's d = 0.68
Baseline to 3-month Follow-up	Cohen's d = 1.22	Cohen's d = 0.34	Cohen's d = 0.41

Conclusion

Based on this study, we have preliminary evidence of CDST as an acceptable treatment to fully implement within the VA context.

- We found initial evidence of feasibility for CDST as seen in the high therapist fidelity, attendance, and satisfaction.
- We found initial evidence of effectiveness for Collaborative Decision Skills Training for Veterans as seen in the improvements in the participants' treatment outcomes and their decision-making engagement.
- Like the civilian pilot, the VA Open Trial presented favorable results in its primary and secondary outcomes.

Limitations and Future Directions:

- No control group for this trial
- Further research about the effects of CDST in Veterans is currently being investigated in a hybrid type 1 study with a treatment group and an active control.