

Does a 'Readiness for Therapy' Questionnaire Predict Attendance in Community Mental Health Psychological Therapy?

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Background

- 'Did not attend' (DNA) rates within in psychiatric services have been found to be as high as 20%, this being twice the amount of DNAs recorded in physical health settings (1).
- Existing literature suggests that motivation and readiness for change when measured for specific disorders can predict engagement and drop-out (2-3). However, there are few current tools developed to measure readiness for change for a wide range of mental health disorders.
- The RTQ (4), a newly developed tool by Talking Change (IAPT) in Portsmouth has proven reliable at predicting drop-out for common mental health problems, however this is yet to be validated with more complex mental health presentations in a secondary care setting.

Research Questions

- 1) Is the RTQ reliable when used in CMHT?
- 2) Does RTQ predict drop out from therapy and number of sessions attended/ cancelled/ missed in a CMHT?
- 3) Is there a relationship RTQ scores and overall severity/ functioning/ impact on quality of life?

Results

- **Reliability:** Cronbach's alpha for RTQ and ReQoL was acceptable ($\alpha = .80$ $\alpha = .90$ respectively) .
- **RTQ predicting drop-out:** Of the 26 participants data analysed 23% dropped out of therapy. An independent-sample *t*-test found there was no significant difference between the completers and drop-out group for RTQ total scores ($t(24) = .345$, $p = .335$, two tailed).
- **RTQ, ReQoL and Attendance Correlations:** No significant correlations were found.

	RTQ	ReQoL
RTQ	-	.274 (ns)
ReQoL	.274 (ns)	-
Attendance	-.022 (ns)	-.223 (ns)

Correlations are one-tailed Pearson's correlations

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Solent Research and Improvement Virtual
Conference- 24th September 2020

Method

- **Design:** Analysis was conducted as part of a service evaluation project within the Mental Health Recovery Teams in Solent.
- **Participants:** 26 service users under the care of an NHS mental health recovery team and starting psychological therapy during the data collection. Ages range 19-77. 12 male, 14 female.
- **Measures:** Readiness for Treatment Questionnaire (RTQ) (4) and Recovering Quality of Life (ReQoL) (5) measures completed at start of therapy. Attendance (inc. DNA/ cancellations) and drop out were also recorded.
- **Data Analysis-** A Pearson's parametric correlation was performed to analyse the cross sectional correlations and independent samples *t*-tests to explore any association between completers and those who dropped out.

- **Conclusions:** The measure is reliable, but does not successfully predict drop-out, and there is no correlation between RTQ and attendance or RTQ and quality of life in this study.
- **Limitations:** Small sample size, questionnaires do not capture those referred but never attended, data collected from only one CMHT, limited ethnic diversity. Data also collected during covid-19 pandemic where treatment was disrupted.
- **Recommendations:** With a larger sample the effects of diagnosis and therapeutic intervention on readiness for treatment and drop out rates could be explored. Use of RTQ to measure motivation and to indicate when 'pre' therapy interventions such as motivational interviewing may impact drop out.

References

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