

THE CLINICAL OUTCOME AND QUALITY INDICATOR (COQI) FRAMEWORK PROJECT: ASSESSING VALIDITY AND INTER-RATER RELIABILITY OF THE CLIENT COMPLEXITY RATING SCALE

RM Deacon^{1,2}, K Mammen¹, J Holmes¹, R Bruno³, A Dunlop^{4,5}, A Jackson¹, V Hunt⁴, M Farrell⁶, A Shakeshaft⁶, W Alzahrer^{1,2}, N Lintzeris¹

¹ South Eastern Sydney Local Health District Drug and Alcohol Service, Sydney, Australia.

² Central Clinical School, The University of Sydney, Sydney, New South Wales, Australia

³ School of Medicine, University of Tasmania, Australia; ⁴ Hunter New England Local Health District Drug and Alcohol Clinical Services, Newcastle, Australia; ⁵ School of Medicine and Public Health, University of Newcastle; ⁶National Drug and Alcohol Research Centre, University of New South Wales, Sydney, Australia.

Introduction and Aims: As part of a larger project to implement a Clinical Outcomes and Quality Indicators (COQI) Framework across NSW Drug and Alcohol Services (DAS), we will assess the validity and inter-rater reliability of a DAS Client Complexity Rating Scale (CCRS). This CCRS was developed by NSW Health as no similar validated instrument specific to DA treatment had been identified in the literature. It was implemented in electronic Medical Records in 2015 and although it has high face validity with clinicians, it has not yet been formally validated.

Design and Methods: The CCRS rates a number of factors that impact upon the complexity of DAS clients, including substance use, physical and mental health, cognitive function and socioeconomic domains, on a 0-12 scale.

The validation study is prospective, involving 120 clients of South Eastern Sydney Local Health District DAS. Each client will be rated by two independent clinicians. Participants will include both continuing and new clients with alcohol and opioids as their primary drug of concern to ensure a range of complexities are measured. Gold standard tools (Australian Treatment Outcomes Profile, and the Clinical Global Impression – Severity scale) will be compared to CCRS ratings to assess concurrent validity. CCRS's will be compared to assess inter-rater reliability. Recruitment commenced in May 2016.

Results: Recruitment will be completed and final results available for presentation at APSAD in November 2016.

Conclusions: We anticipate presenting CCRS as a validated, DA-specific instrument of interest to other DA treatment services.

Implications for Practice or Policy: Validation of the CCRS will assist clinicians to appropriately interpret clinical outcomes and potentially improve treatment for future clients. As the CCRS is a component of the NSW statewide D&A eMR, a validated instrument will also assist in future benchmarking between services and in quality improvement initiatives.

Disclosure of Interest Statement: The COQI Framework study is funded by the Mental Health and Drug and Alcohol Office (MHDAO) at the NSW Ministry of Health.