

**I**  
**TI**  
**STI**  
**METO**  
**CHANGE**  
**OUR PERSPECTIVE**

“Goodbye to the Jante Law”

– a new focus in the work with children, young people, couples and families

Psykolog Susanne Bargmann

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➤ Teaching and implementing FIT in Denmark, Scandinavia and Europe.

➤ Therapy with children, adolescents and adults. Family work and eating disorder treatment.

➤ ICCE COO and Community Manager

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[www.centerforclinicaexcellence.com](http://www.centerforclinicaexcellence.com)

Twitter: @scott\_dm @susannebargmann @theICCE  
Facebook: The International Center for Clinical Excellence

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## WHAT IS THE JANTE LAW?



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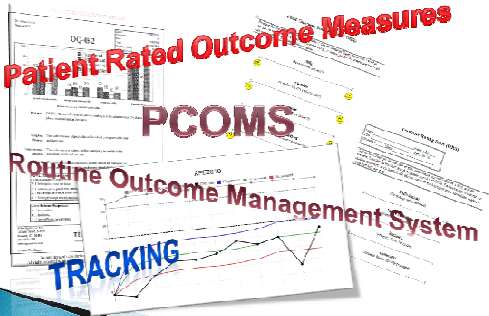
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## Feedback Informed Treatment



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## Feedback Informed Treatment

<b>The Medical Model</b>	<b>The Contextual Model</b>
“What treatment, by whom, is most effective for this individual with that specific problem, under which set of circumstances, and how does it come about?”	“Is this relationship between this client and this therapist working for this individual at this time and place?”
Evidence Based Practice	Practice Based Evidence

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### Feedback Informed Treatment

**CLIENT-  
benefits**



1. Ability to adjust services to individual needs and preferences;
2. Improve quality and outcome;
3. More efficient resolution of presenting concerns or referral.

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### Feedback Informed Treatment

**THE EVIDENCE**

- Increases effectiveness by 30-65% (.2 - .5 effectsize)
- Decreases deterioration significantly ("at risk clients") =>Reduced hospital re-admission
- Improves retention (client engagement) (cuts drop-out by as much as 50%)
- Anker et al. 2009: 50% less divorce rate
- Counselor self efficacy higher w. feedback

Miller, S. 2010: Measures and Feedback, The Available Evidence, ICCE Press

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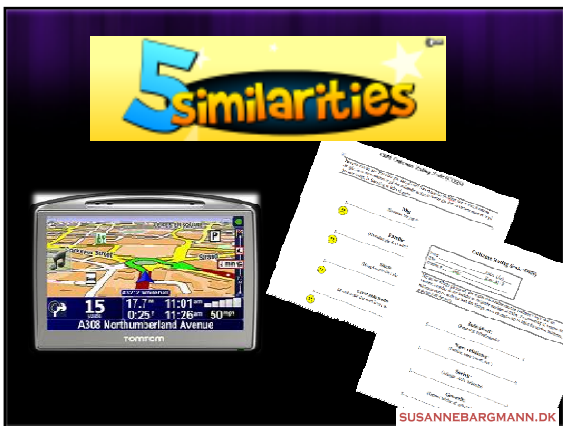
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**Feedback Informed Treatment**

**THE NOT-SO-GOOD NEWS**

- ▶ **UNFAIR COMPARISONS** – Feedback has never been compared to another active intervention.

Flückiger et al. 2011:

- 101 Clients, 58 Therapists
- Studying the effects of a letter sent to clients requesting client feedback
- Similar effects on alliance as routine feedback

**ENGAGEMENT**

Flückiger, C., Del Re, A., Wampold, B. E., Znoj, H., Caspar, F., & Jörg, U. (2011, May 23). Valuing Clients' Perspective and the Effects on the Therapeutic Alliance: A Randomized Controlled Study of an Adjunctive Instruction. *Journal of Counseling Psychology*.

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**Feedback Informed Treatment**

**THE NOT-SO-GOOD NEWS**

- ▶ **RESEARCHER ALLEGIANCE EFFECTS** – Research so far has been done by the developers or proponents of the scales. The small number of studies done by researchers that are not proponents of feedback have more modest effectsizes

Miller, S. 2010: Measures and Feedback, The Available Evidence, ICCE Press  
Brown, J. 2011: Personal communication

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**Feedback Informed Treatment**

**THE NOT-SO-GOOD NEWS**

- ▶ **THERAPISTS DON'T LEARN FROM FEEDBACK**



11.000 Therapists  
Therapists experience  
professional accumulative growth  
over time-

*"Therapists have a deep need  
to think of themselves as  
learning more and getting  
better at what they do over  
time"*

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**Feedback Informed Treatment**

**THE NOT-SO-GOOD NEWS**

- ▶ The effect of psychotherapy has remained stable over the past 30 years of psychotherapy research
- ▶ Wampold & Brown 2005: Large variability between therapists : Clients of the most effective therapists improve at a rate at least 50% higher and drop out at a rate at least 50% lower than clients who work with less effective therapists

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## Feedback Informed Treatment

### THE NOT-SO-GOOD NEWS

#### Feedback mega-analysis:

Therapists got feedback on half their cases while the information is not provided in the other half of their cases.

In all the studies outcomes are better when therapists get feedback.

If they were learning something they would be able to perform better with the non-feedback cases over time.

Shimokawa, K., Lambert, M. J. & Smart, D. W. (2010). "Enhancing Treatment Outcome of Patients at Risk of Treatment Failure: Meta-Analytic and Mega-Analytic Review of a Psychotherapy Quality Assurance System", *Journal of Consulting and Clinical Psychology*, Vol. 78, No. 3, 298-311

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## Feedback Informed Treatment

### FEEDBACK 2.0

- ▶ Feedback holds an unrealized potential. It's not the technique - it's not the ORS and SRS.
- ▶ Lessons from the literature on Expertise and Excellence. K. Anders Ericsson: 10.000 hours of deliberate practice
- ▶ For the first time there is a potential for therapists as a profession to actually improve



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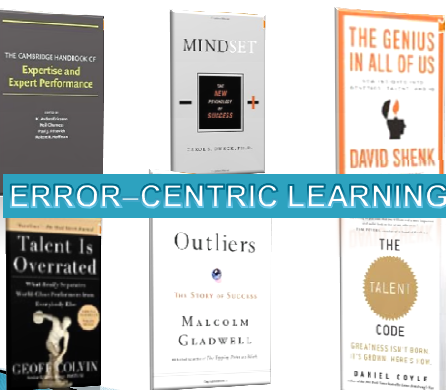
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### ERROR-CENTRIC LEARNING

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### Achieving Clinical Excellence



- ▶ The focus is on PROCESS rather than OUTCOME



- ▶ Having a MENTOR or COACH

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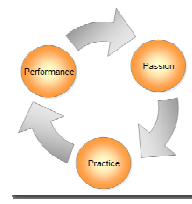
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### Achieving Clinical Excellence



- ▶ Feedback makes it possible to take the steps required to improve our level of performance:
  - Know your baseline
  - Formal, routine, ongoing feedback
  - Engage in "deliberate practice" to develop deep domain specific knowledge



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## Achieving Clinical Excellence

"Deep Practice"

- *Slowing down whenever you make a mistake, playing the piece from the beginning - this time slowly, repeating the part until you play it without mistakes.*
- *Continue learning the piece bit by bit.*



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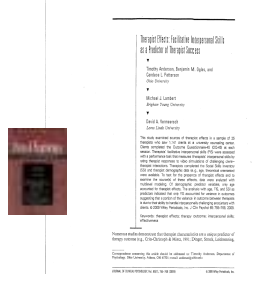
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## Achieving Clinical Excellence

- Researchers Anderson, Ogles, Lambert & Vermeersch (2009):
  - 25 therapists treating 1100+ clients;
  - Variety of demographic variables;
  - Measure of interpersonal skills (SSI).
- Domain-specific interpersonal knowledge tested by using therapist responses to challenging therapeutic interactions:
  - Four problematic therapeutic process segments;
  - Multiple challenging interpersonal patterns (e.g., angry, dependent, confused, blaming, controlling, etc.).



Anderson, T. Ogles, B., Lambert, M., Vermeersch, D. (2009). Therapist effects: Facilitative interpersonal skills as a predictor of therapist success. *Journal of Clinical Psychology, 65*(7), 755-768.

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## Achieving Clinical Excellence

considerable differences in \_\_\_\_\_ between clinicians

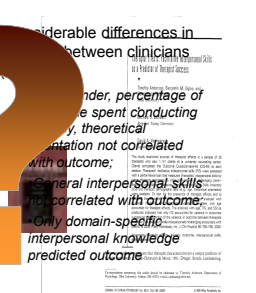
\_\_\_\_\_ under, percentage of \_\_\_\_\_ spent conducting \_\_\_\_\_, theoretical \_\_\_\_\_

\_\_\_\_\_ not correlated with outcome;

\_\_\_\_\_ General interpersonal skills \_\_\_\_\_ not correlated with outcome;

\_\_\_\_\_ Only domain-specific \_\_\_\_\_ interpersonal knowledge predicted outcome

- Researchers Anderson, Ogles, Lambert & Vermeersch (2009):
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### Achieving Clinical Excellence

**DELIBERATE PRACTICE – AN EXAMPLE**



**Name:** Linda and Stephan  
**Age:** 34 and 40  
**Family:** 2 children, 1 and 5 years old  
**Work:** Both work full time  
**Treatment start:** 6 months prior, Linda has come to individual session because of depression.  
**Current treatment:** First session of couples therapy  
**Reason for seeking treatment:** Relationship suffering, lack of closeness and intimacy.

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### Achieving Clinical Excellence



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### Deliberate Practice – TAR

- **Step One: Identify “at risk” case**
  - a. We lose connection/engagement with one person in a couple therapy because the other person is dominating the conversation.
- **Step Two: Think**
  - a. Develop a strategy
    - 1. Minimum 4 different gambits with 2 additional responses each;
  - b. Connect the strategy to a specific target outcome.
- **Step Three: Act**
  - a. Conduct the session;
  - b. Take a break prior to the end of the visit to “self-record” noting the steps in the planned strategy that were missed.
- **Step Four: Reflection**
  - a. Review self-record;
  - b. Identify specific actions and alternate methods to implement strategy.
  - c. Review video: (stop/commit/imagine course and consequences/start)

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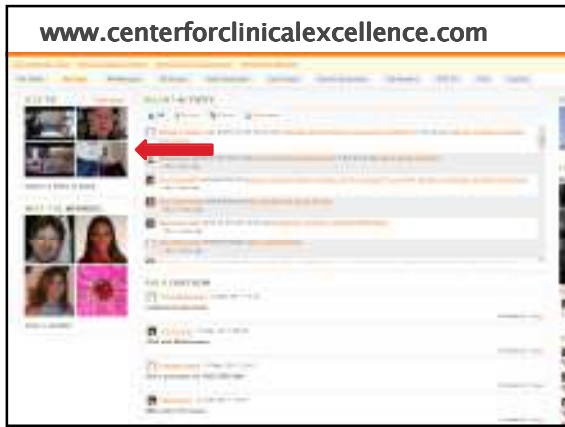
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## Feedback Informed Treatment

**Support to sustain commitment to feedback**

- ▶ "Communities of Excellence".  
(Miller & Hubble 2011, "The Road to Mastery")
- ▶ A mentor/trainer/consultant
- ▶ The ICCE Online Community



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The complex block contains a title, a subtitle, a bulleted list of three items, a book cover image, a website URL, and a contact email address. The book cover shows a person's face and the title 'THE ROAD TO MASTERY'.

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