Does Outpatient Treatment Help?:  
A Long Term Look at OMS Results

Organizations that attempt to help people always face the question of whether their efforts make a difference. Data from the Maryland Public Mental Health System (PMHS) Outcomes Measurement System (OMS) is used in this Data Short to examine this question: “Does PMHS outpatient treatment help?”

In the OMS, psychiatric symptoms are measured by the BASIS 24® for adults and by KIDNET, an instrument developed and tested at the University of Maryland, for youth. Additionally, both the C&A and adult OMS include a scale measuring functioning, developed and tested jointly by the Substance Abuse and Mental Health Services Administration (SAMHSA) and the states.

In order to investigate the effect of the outpatient services in the PMHS, the changes in these measures were examined based on the number of OMS interviews that an individual has on record, which is a proxy for the length of time in treatment. All of the instruments are scored on five point scales, with lower scores indicating either less frequent/less intense symptoms or better functioning. All OMS interviews for people who had two or more OMS interviews are included in the analysis.

The results for adults are shown in the first graph. The average score on the BASIS 24® overall scale and the functioning scale decrease with reasonable consistency as the “number” of OMS interviews (the time that the individual has been in treatment) increases. At intake, about 77,000 adults had an average symptom score of 1.73; for those 1,300 adults who were in service long enough to have 15 interviews, this drops to 1.31. Similarly, functioning scores average 3.00 at intake and decrease to 2.67 for those with 15 OMS interviews.

The second graph, the results for the C&A population, shows similar trends. At intake, about 63,000 youth had an average symptom score of 1.10; for the 650 who have 15 interviews, the average drops to 0.77. Similarly, functioning scores average 2.55 at intake and decrease to 2.26 for the group with 15 interviews.

For all of the averages, the greatest decreases occur between the first and second interviews. Scores then continue to decrease more gradually over time, as might be expected.

Consistent trends showing decreased symptoms and improved functioning as length of time in treatment increases are observed when analyzing all of the OMS interviews for more than 140,000 individuals. This large number of observations included in the analysis is indicative that this relationship does not result from chance alone. The OMS data show that mental health treatment is effective in reducing symptoms and improving functioning for the majority of people who receive treatment.