January - March 2024 **Quarterly Evaluation Report**

CBI Initiative Skills Groups

This summary presents evaluation findings¹ from January to March 2024 of the **CBT Skills Groups Spread** Initiative, which offers CBT Skills training to physicians and patients. The initiative is offered through Mind Space, previously known as the CBT Skills Groups Society.

Physician Overview 192

physicians participated in Phase 1-4 training this quarter; 140 in Phase 1, 9 in Phase 2, 3 in Phase 3 and 23 in Phase 4.

(plus 17 physicians who are in

This quarter, 6 trainees completed Phase 3 training, and 2 trainees completed Phase 4 and are now Certified **Facilitators**

transition between phases) Terrace

Rural and Remote



No location available

Legend:



Number of Phase 1 trainees by Health Authority



Number of Phase 2-4 trainees by Health Authority



Number of DoFPs



A Division of Family Practice (DoFP)

Vancouver Island **SharedCare** Abbotsford

Cranbrook

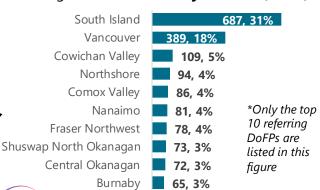
Patient overview

1050

Individuals participated in CBT Skills Foundations Groups this quarter, primarily from the following DoFPs: South Island (n=361), Vancouver (n=223), and Fraser Northwest (n=48)

2233

Participants were referred this quarter by 1,008 providers. On average, providers referred 2 participants each. The **highest number of referrals** were made by the following Divisions of Family Practice (DoFP)*:



1 Findings are based on administrative data of participating physicians / patients during the quarter, and participant evaluation surveys. Survey responses will not match administrative data; surveys are voluntary and open ongoing therefore may include responses from physicians / patients from other quarters.



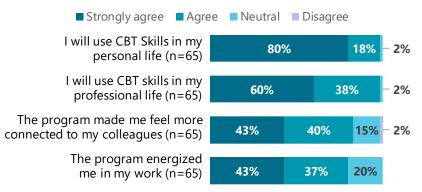
mind space





Impacts on Phase 1/Physician Wellness Participants Learning and applying CBT Skills

Based on survey responses of Phase 1 / Physician Wellness participants this quarter (60 of 88; 68% response rate), **over 95% agreed they will use CBT skills in their personal and professional lives.**



Satisfaction with the program

Based on survey responses of Phase 1 / Physician Wellness participants this quarter (n=60), over 95% agreed they would recommend the program to others, and it was a valuable use of their time.



of physician wellness participants (64 of 65) would **recommend the program to colleagues**



of physician wellness participants (62 of 65) would **recommend the program to patients**



of physician wellness participants (65 of 65) **agreed the program was a valuable use of their time**

Interest in becoming a CBT Skills Group Facilitator

Based on survey responses of Phase 1 / Physician Wellness participants, **26 physicians** (40%; 26 of 65) **would like to be trained to become a CBT Skills Group facilitator**.

Of these 26 physicians...

38% (10 of 26) WERE ALREADY interested when they started training

62% (16 of 26) BECAME interested by the end of training

ants Professional Fulfillment & Burnout

Physicians are requested, at the start and end of their training, to complete a survey which employs the **Stanford Professional Fulfillment Index**² to investigate the **wider impacts of the training**. Findings from these surveys will be analyzed annually, once a sufficient sample size is available.

The following feedback was received from physician wellness participants this quarter:

"[The facilitator] was an extremely skilled facilitator, maximizing time and content presentation in a workable fashion. The power of the group and their sharing and interpretation of the tools was extremely powerful."

- Physician wellness participant

"[The facilitator] and the engaging way [they] taught the course. The content amount and level was just right. Very usable tools in professional and personal life."

– Physician wellness participant

² The <u>Stanford Professional Fulfilment Index (PFI)</u> is a 16-item instrument that covers burnout (work exhaustion and interpersonal disengagement) and professional fulfilment. Response options are on a five-point Likert scale. Scale scores are calculated by averaging the item scores of all the items within the corresponding scale. Scale scores can then be multiplied by 25 to create a scale range from 0 to 100. Higher score on the professional fulfilment scale is more favourable. In contrast, higher scores on the work exhaustion or interpersonal disengagement scales are less favourable.







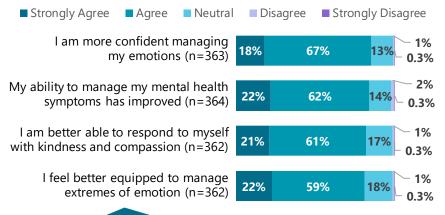




Impacts on CBT Skills Foundations Participants

Learning and applying CBT Skills

Based on survey responses of this quarters' participants, **85%** agreed that as a result of the group they are more confident managing their emotions.



"I'm EXTREMELY GRATEFUL that my NP referred me to this program. It has made a HUGE DIFFERENCE in my ability to cope with the ups and downs in my life".

— CBT Skills Foundations participant

Satisfaction with CBT Skills Foundations groups

Based on survey responses of this quarters' participants, **over 95% agreed they felt safe in the group and would recommend it to friends and family.**

of participants (359 of 371*) agreed or strongly agreed they felt safe in the group. This level of agreement was similar across both white and racialized patients. (*of the other 3%, 2% were neutral and 1% strongly disagreed)

of participants (356 of 372) agreed, or strongly agreed, they would recommend this program to friends and family

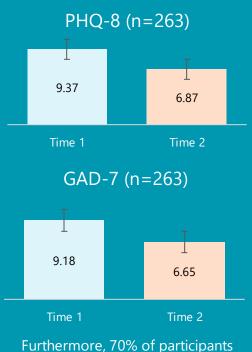
"I've been in therapy a few times before and being in a group setting was a really big change for me. It was fantastic. It was so helpful and affirming."

CBT Skills Foundations participant

Depression and anxiety severity

Participants are requested, at the start and end of their group, to complete a survey which employs the Patient Health Questionnaire 8 (PHQ-8) and the Generalized Anxiety Disorder 7 (GAD-7) to investigate impacts of CBT Skills on depression and anxiety, respectively. Analysis includes only those who attended 6 or more sessions between Oct 2023 and Mar 2024 and had pre- and post-scores. A paired t-test and 95% confidence interval was applied.

Participants experienced statistically significant improvements in their symptoms of depression and anxiety. Effect sizes were moderate (0.564 for PHQ-8 and 0.585 for GAD-7).



Furthermore, 70% of participants with moderate to severe depression improved by one or more degrees of severity.

⁴The <u>GAD-7</u> is a 7-item questionnaire for screening and severity measuring of generalized anxiety disorder (GAD). The GAD-7 score is calculated by assigning scores of 0, 1, 2, and 3, to the response categories of 'not at all', 'several days', 'more than half the days', and 'nearly every day', respectively, and adding together the scores for the seven questions. Scores of 5, 10, and 15 are taken as the cut-off points for mild, moderate and severe anxiety, respectively.













³ The <u>PHQ-8</u> is an 8-item instrument for screening, diagnosing, monitoring and measuring the severity of depression. Responders are asked to rate the frequency of depression symptoms in the last 2 weeks on a Likert scale ranging from 0-3. Items are summed to provide a total score. In terms of the depression severity, a score of 1-9 is considered 'minimal, 10-14 mild, 15-19 Moderate, 20-24 Severe. Only patients with a score of 18 or less at time of referral are eligible to register for CBT Skills Groups.