



Checkpoint Ahead: Computerized Screening of Mental Health Disorders in a DUI Setting

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ABSTRACT: Substance use treatment programs must often juggle large client loads with limited time and resources. The Computerized Assessment and Referral System (CARS) was created to help counselors quickly and accurately identify mental illnesses within the DUI population. This study aims to determine the usability of the CARS tool.

INTRODUCTION

Background

- There are a number of barriers to mental health screening in substance use treatment settings – namely lack of time, training, and resources.
- Our pilot study of computerized mental health assessment within DUI programs confirmed that these programs were limited by the time they could commit to assessment and their ability to address the issues the assessment revealed (Nelson et al., 2007).

The Present Study:

- The current study assesses the usability of the Computerized Assessment and Referral System (CARS): a tool meant to facilitate mental health screening and subsequent referral to mental health treatment providers among DUI offenders and others in substance use treatment.

METHODS

Participants:

- 16 counselors at five different DUI programs in Massachusetts.
 - Counselors had an average of 12.9 years of experience in the field (range = 0-35; SD = 11.6).
 - Counselors rated their computer skills as fair to good (3.8/5; range = 3-5; SD = 0.8).
- 67 clients completed the CARS interview with their counselors.

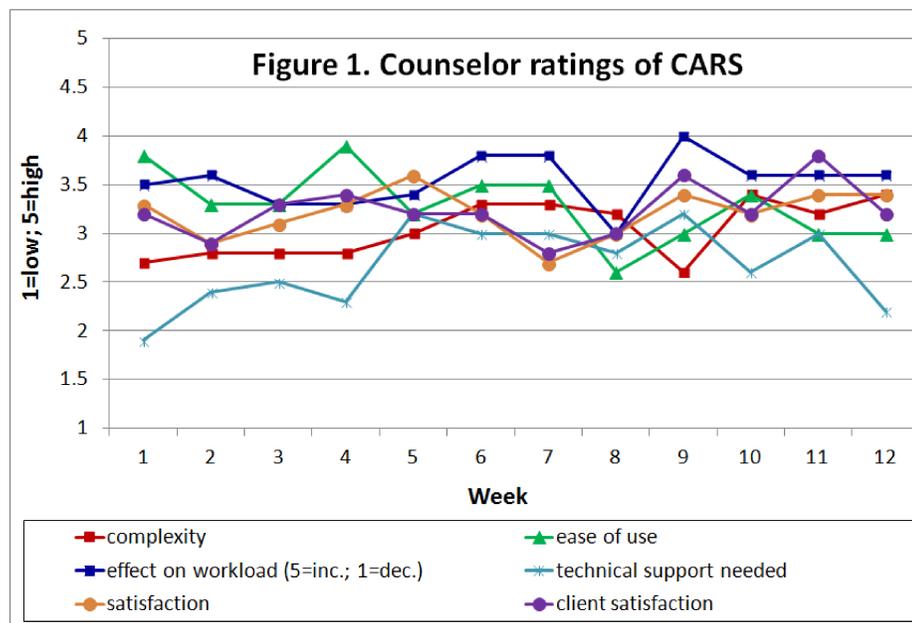
Procedures:

- Counselors completed CARS assessments with a selection of their clients.
 - CARS is a DSM-based assessment and referral system adapted from the Composite International Diagnostic Interview (CIDI; Kessler et al., 2004), used to flag possible mental health disorders and make targeted referrals.
- Clients completed a survey about their experience with CARS following the interview.
- Counselors completed weekly surveys about their experience with CARS for twelve weeks.

RESULTS

Counselors:

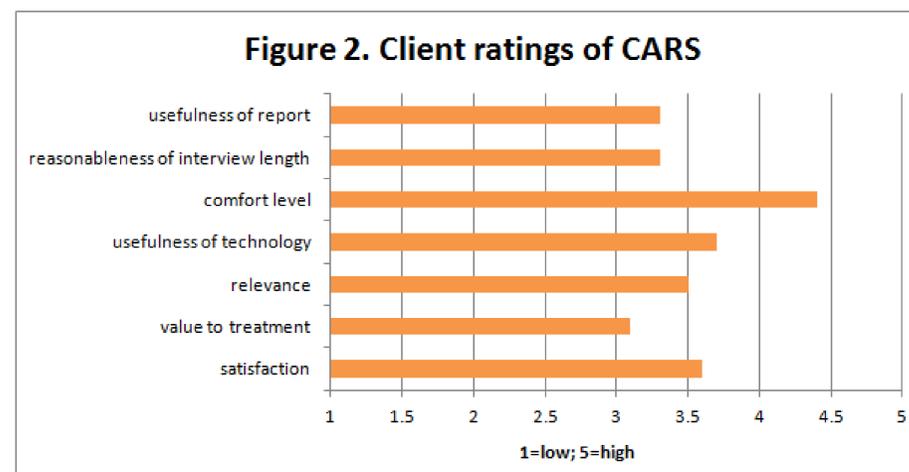
- Spent, on average, 1 hour using CARS with each client.
 - Rated this time as somewhat more than they would usually spend with clients.
- Reported that CARS, on average, slightly increased their workload.



- Ratings of the usability of the tool fluctuated significantly across time, but there were few significant increases or decreases in ratings across the 12 weeks.
- As Figure 1 shows, ratings of technological difficulty demonstrated a significant quadratic trend, increasing then decreasing over time.
- Ratings of ease of use decreased significantly over time.

Clients

- Felt positively about the CARS interview (67.1%) and thought it was valuable for treatment (68.6%).
- Furthermore, 82.1% found the report somewhat, mostly, or very useful; more than half of those found the report mostly or very useful.



CONCLUSIONS

- Results suggest that counselors experienced some burn-out related to the tool, likely due to limited time and resources.
- Clients' ratings of satisfaction with the tool were higher than the counselor ratings of client satisfaction again suggesting counselor burn-out.
- This feedback from actual users of the tool will allow us to modify CARS in a way that best fits available resources and needs.
- **We are modifying CARS to include a stand-alone, empirically-derived, enhanced screener that can be used in settings with limited time available for assessment.**

REFERENCES

- Kessler, R. C., et al. (2004), Clinical calibration of DSM-IV diagnoses in the World Mental Health (WMH) version of the World Health Organization (WHO) Composite International Diagnostic Interview (WMH-CIDI). *Int. J. Methods Psychiatr. Res.*, 13, 122–139.
- Nelson, S. E., LaPlante, D.A., Peller, A. J., LaBrie, R. A., Caro, G., & Shaffer, H. J. (2007). Implementation of a computerized psychiatric assessment tool at a DUI treatment facility: a case example. *Administration and Policy in Mental Health and Mental Health Services Research*, 34(5), 489-493.

