



Are You Okay?

Recognizing Warning Signs of
Patient Mental Illness in
Optometric Practice

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Financial Disclosures

None

Learning Objectives

- **Understanding** mental illnesses, recognizing warning signs, and intervening with appropriate referral care
- **Identify** areas where optometrists and behavioral professionals can collaborate in combating patient mental illnesses
- **Discuss** crisis management, intervention and suicide prevention

What is Mental Health?

- Emotional, psychological, and social well-being
 - How we handle life challenges, interact with others, and make choices
- Patients with mental health conditions are often misunderstood
- Mental health is **a spectrum**
 - Influenced by many different factors



The Mental Health Continuum



Mental Health Signs & Symptoms

- Feeling Disconnected
 - Heighten Sensitivity
 - Nervousness
 - Unusual Behavior
 - Illogical Thinking
 - Difficulty with Sleep
- Mood Changes
 - Withdrawal
 - Apathy
 - Drop in functioning
 - Difficulty or Problems Thinking

Factors that influence mental status

- Stress
 - Life experiences
 - Lifestyle
 - Life circumstances
 - Biological
 - Genetics
 - Neurotransmitters
- Sleep
 - Beliefs
 - Emotions/ Attitudes
 - Psychological
 - Physical Health
 - Drugs/Alcohol

stand up against stigma

**No Health without
Mental Health**

Fact vs Fiction

Everyone experiences mental and emotional crises

Fact vs Fiction

- Everyone experiences mental and emotional crises
 - This does not mean that this episode will lead to mental illness
 - **Do not** prejudice, bias, or jump to conclusions

Fact

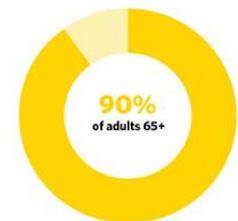
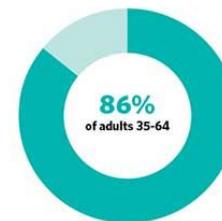
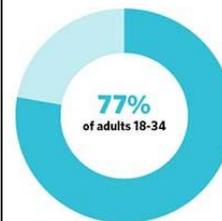
Understanding Mental Disorders

- In 2021, more than **50 million** adults aged 18 or older reported experiencing mental health conditions at some point
- **1 in 5 adults** have at least one mental health conditions
 - **1 in 25** lives with serious mental illness
- **Less than 50%** of mental health patients receive treatment
- Half of mental health issues begin by teenage years
 - **50%** of mental illness begin by age 14



PEOPLE WITH MENTAL HEALTH DISORDERS CAN LIVE NORMAL LIVES

% strongly/somewhat agree



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Fact vs Fiction

If you are feeling depressed, you must be mentally ill

Fact vs Fiction

- If you are feeling depressed, you must be mentally ill
- **Common misconception**
- Depression could be a result of life situations
 - (i.e. Death, Breakup, Divorce, Loss of a Job, Life)

Fiction

Fact vs Fiction

All individuals with mental health disorders are dangerous, violent, or unmanageable

Fact vs Fiction

- All individuals with mental health disorders are dangerous, violent, or unmanageable
 - **This only applies to a small percentage of mental ill patients**

Fiction

The Mental Health Continuum



Serious Mental Illness

- **Serious mental illness, or SMI,**
 - is defined as a mental, behavioral or emotional disorder
 - Resulting in
 - serious functional impairment, which substantially interferes with or limits one or more major life activities.

Warning Signs of Mental-Ill Health

- Early intervention is **CRITICAL**
 - Can help reduce the severity of an illness
- Major mental illnesses rarely appear “**out of the blue**”
 - Most often,
 - family, friends or other close individuals begin to recognize subtle changes in behavior or feeling like something “**is not quite right**”



Behavioral Crisis (Psychiatric Emergency)

- Behavior is what you see of a person’s response to the environment
- Any reaction that interferes with activities of daily living or is deemed unacceptable by others.
 - Reactions to stress that are acute and those that develop over time can create a crisis
- If an abnormal behavioral pattern **lasts longer than a month or more**, it is a concerning matter

Behavioral Crisis (Psychiatric Emergency)

- A **behavioral crisis** includes patients who exhibit aggressive or uncooperative behaviors or who are a danger to themselves and/or others
 - **EMT is usually called** to intervene during this emergency
 - I.e. Chronic depression or dementia



Common Mental Health Disorders



Types of Mental & Psychotic Disorders

- Depression
- Stress
- Anxiety
- Bipolar
- Schizophrenia
- Attention Deficit Hyperactivity Disorder (ADHD)
- Substance Abuse
- Suicide



Depression

Depression

- Defined by *American Psychiatric Association (2022)*
 - a common and serious medical illness that **negatively affects how you feel, the way you think and how you act**
 - Causes feelings of sadness and/or a loss of interest in activities you once enjoyed
 - It can lead to a variety of emotional and physical problems and can decrease your ability to function



Types of Mental Disorders

- Depression
 - Depression is **one of the most common mental disorders in the U.S.**
 - Research suggests that genetic, biological, environmental, and psychological factors play a role in depression.
 - Depression can happen at any age, **but often begins in adulthood**



Types of Mental Disorders

- Depression
 - It is the **most prevalent** of mental health disorders
 - It is the **leading cause of disability** worldwide among adolescents and adults
 - Women are more likely than men to experience depression.
 - Some studies show that one-third of women will experience a major depressive episode in their lifetime.
 - There is a high degree of heritability (**approximately 40%**) when first-degree relatives (parents/children/siblings) have depression

Signs & Symptoms of Depression

- Feeling sad or having a depressed mood
- Loss of interest in activities once enjoyed
- Changes in appetite – weight loss/gain unrelated to dieting
- Trouble sleeping or sleeping too much
- Loss of energy or increased fatigue
- Increase in purposeless physical activity
- Slowed movements or speech
- Feeling worthless or guilty
- Difficulty thinking, concentrating or making decisions
- Thoughts of death or suicide



Types of Mental & Psychotic Disorders



- Depression

- Depression is **now recognized as occurring in children and adolescents**,
 - although it sometimes presents with more prominent irritability than low mood.
 - Many chronic mood and anxiety disorders in adults begin as high levels of anxiety in children.
- 2023: U.S. Surgeon General has issued a warning that **social media use is a main contributor to depression, anxiety and other problems** in the nation's teenagers

3 TYPES OF DEPRESSIVE DISORDERS

1
Major Depressive Disorder



2
Persistent Depressive Disorder



3
Seasonal Affective Disorder



Types of Depression

- **Major depression**

- Symptoms of depression most of the time for **at least 2 weeks** that typically interfere with one's ability to work, sleep, study, and eat.



Types of Depression

- **Persistent depressive disorder** (also called dysthymia),
 - which often includes less severe symptoms of depression that last much longer, typically for **at least 2 years**.



Types of Depression

- **Seasonal affective disorder (SAD)**
 - which comes and goes **with the seasons**
 - Typically starting in late fall and early winter and going away during spring and summer.
 - Those who live furthest from the equator are at a higher risk



Light therapy for Seasonal Affective Depression (SAD)



Efficacy of Bright Light Treatment, Fluoxetine, and the Combination in Patients With Nonseasonal Major Depressive Disorder: A Randomized Clinical Trial

Raymond W Lam¹, Anthony Law¹, Robert D Cantor¹, Erin E Nicholas¹, Amy H Cheung¹, Rachel Morehouse², Rajanarane Ramasubbu³, Latimri K Yehann¹, Scott M Tam¹

Affiliations: ¹ Island; ² ³

PMID: 26543207 DOI: 10.1001/jamapsychiatry.2015.2235

Erratum in

Omission in Byline and Errors in Affiliation Table. The authors listed: JAMA Psychiatry. 2015 Jun 7;173(6):doi:10.1093/jamapsychiatry.2015.2235. PMID: 26497297. See errata website.

ABSTRACT

Importance: Bright light therapy is an evidence-based treatment for seasonal depression, but there is limited evidence for its efficacy in nonseasonal major depressive disorder (MDD).

Objective: To determine the efficacy of light treatment, in monotherapy and in combination with fluoxetine hydrochloride, compared with a sham-placebo condition in adults with nonseasonal MDD.

Design, setting, and participants: Randomized, double-blind, placebo- and sham-controlled, 8-week trial in adults (aged 19-60 years) with MDD of at least moderate severity in outpatient psychiatric clinics in academic medical centers. Data were collected from October 7, 2009, to March 11, 2014. Analysis was based on modified intent to treat (modified patients with at least 1 follow-up visit).

Interventions: Patients were randomly assigned to (1) light monotherapy (active 10,000-lux fluorescent white light box for 30 mins in the early morning plus placebo pill); (2) antidepressant monotherapy (inactive negative ion generator for 30 mins plus fluoxetine hydrochloride, 20 mg/d); (3) combination light and antidepressant; or (4) placebo (inactive negative ion generator plus placebo pill).

Main outcomes and measures: Change score on the Montgomery-Åsberg Depression Rating Scale (MADRS) from baseline to the 8-week end point. Secondary outcomes included response (≥50% reduction in MADRS score) and remission (MADRS score ≤ 10 at end point).

Results: A total of 122 patients were randomized (light monotherapy, 32; fluoxetine monotherapy, 31; combination therapy, 29; placebo, 30). The mean (SD) changes in MADRS score for the light, fluoxetine, combination, and placebo groups were 13.4 (7.5), 8.8 (9.5), 16.9 (9.2), and 6.5 (9.6), respectively. The combination effect size (d) = 1.17 (95% CI, 0.84 to 1.54) and light monotherapy (d = 0.80 (95% CI, 0.28 to 1.31)) were significantly superior to placebo in the MADRS change score, but fluoxetine monotherapy (d = 0.28 (95% CI, -0.27 to 0.74)) was not superior to placebo. For the respective placebo, fluoxetine, light, and combination groups at the end point, response was achieved by 10 (33.3%), 9 (29.0%), 16 (50.0%), and 21 (75.0%) and remission was achieved by 9 (50.0%), 8 (19.4%), 14 (43.8%), and 17 (55.6%), respectively. Combination therapy was superior to placebo in MADRS response (d = 1.70 (d = 1.19 = .001) and remission (d = 1.33 (d = 1.19 = .002), with numbers needed to treat of 2.4 (95% CI, 1.4 to 3.8) and 3.8 (95% CI, 2.0 to 29.9), respectively. All treatments were generally well tolerated, with few significant differences in treatment-emergent adverse events.

Conclusions and relevance: Bright light treatment, both as monotherapy and in combination with fluoxetine, was efficacious and well tolerated in the treatment of adults with nonseasonal MDD. The combination treatment had the most consistent effects.

Other Types of Depression

- **Perinatal depression**
 - which occurs when a woman experiences major depression during pregnancy or after delivery (postpartum depression).



Other Types of Depression

- **Depression with symptoms of psychosis,**
 - which is a severe form of depression where a person experiences **psychosis symptoms,**
 - such as
 - delusions (disturbing, false fixed beliefs)
 - hallucinations (hearing or seeing things that others do not see or hear)



Dry Eye Syndrome Linked to Depression

Original Investigation

March 10, 2022

Association Between Depression and Severity of Dry Eye Symptoms, Signs, and Inflammatory Markers in the DREAM Study

Yi Zhou, BA¹; James Muroough, MD, PhD²; Yimei Yu, MS³; et al

> Author Affiliations | Article Information
JAMA Ophthalmol. 2022;14(4):392-399. doi:10.1001/jamaophthalmol.2022.0140



Key Points

Question Is severity of dry eye symptoms and signs associated with presence of depression?

Findings In this multicenter study of 535 participants with dry eye disease, those who screened positive for depression had worse dry eye symptoms and overall dry eye signs but similar inflammatory markers compared with those of participants with dry eye who screened negative for depression.

Meaning In this study, patients with dry eye disease and depression may have more severe dry eye symptoms and signs than those without depression.

Lithium Carbonate & Dry Eyes

> Iran J Psychiatry. 2012 Fall;7(4):191-3.

Tear Film Break-up Time in Bipolar Disorder

Parin Dibaşnia¹, Mohadeseh Mohammadiani, Marjam Moghadasi,
Mohammed Aghazade-Amiri

PMID: 23408791 PMID: PMC3570379

Free PMC article

Abstract

Objective: Ocular dryness is a well-recognized adverse side effect of many topical and systemic medications. In psychiatry, patients who have consumed such drugs as lithium carbonate and sodium valproate frequently experience dry eye symptoms. The purpose of this study was to compare tear film stability between patients who use these drugs with those patients who are not on medication.

Methods: After obtaining informed consent, the tear film break up time (TBUT) test was performed in 96 eyes of 48 subjects. The subjects were placed in to three groups. Participants included two groups of euthymic bipolar disorder patients (16 cases each) with history of pharmacotherapy for more than two years. Patients in each group were taking only one type of mood stabilizer (lithium carbonate or sodium valproate). In addition, 16 age-matched bipolar patients who did not take any topical or systemic medications were included in a control group. Values of TBUT were compared between the three groups using the student's t-test.

Results: The mean tear film break up time (TBUT) in test groups were 4.88 seconds (0.34(lithium group), 4.81 seconds \pm 1.60 (valproate group) and 15seconds 2.0(control group), respectively, no statistically significant differences were observed between the first and the second group in TBUT values, but significant differences were found between the two groups and the control group ($P < 0.0001$).

Depressed Patients Examples

- **Non-compliant patient**
 - “I’ll get to it one day”
- **Hopeless Patient**
 - “I mean what’s the point”
 - “I just can’t do it”



Bearing Bad News

SPIKES Embrace a Patient-first Approach to Advance Care Planning Conversations

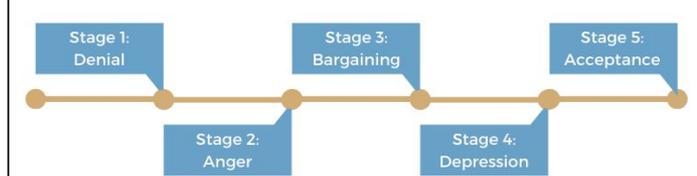


Source: Baile, W. F., Buckman, R., Lenzi, R., Glober, G., Beale, E. A., & Kudelka, A. P. (2000). SPIKES—a six-step protocol for delivering bad news: application to the patient with cancer. *The oncologist*, 5(4), 302-311.

The Grief Cycle (Kubler-Ross's Theory)

The Five Stages of Grief

According to Kubler-Ross's theory, the five stages of grief don't always happen in order and don't only happen once for each person. For example, someone may experience denial, then depression, and then denial again.



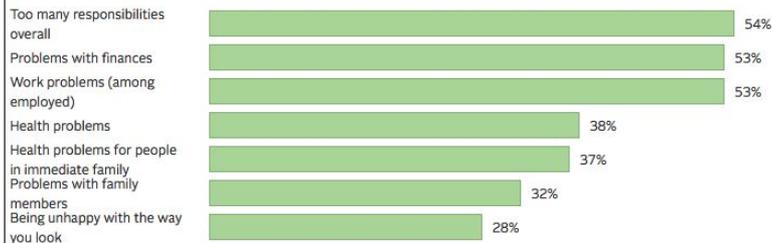
Stress

Stress

- **Stress** is a normal reaction to the pressures of everyday life.
- Worry, fear, anger, sadness and other emotions are also all normal emotional responses.



Most common contributors to stress among Americans with great deal of stress



Source: NPR, Robert Wood Johnson Foundation, and Harvard School of Public Health



Stress Symptoms & Signs

- Bodily Pains
- Chest Pain
- Rapid Breathing
- Insomnia
- Headaches
- Dizziness
- High Blood Pressure
- Muscle Tension
- Jaw Clenching
- Digestive problems
- Weakens Immune System



FIGHT

Self-preservation
Anger outbursts
Demanding perfection from others
Demanding way of speaking to others
Controlling others
Sense of entitlement
Narcissistic tendencies
Bullying

FLIGHT

Obsessive or compulsive
Feelings of anger
Workaholic
Can't sit still
Rushing
Perfectionist
Over-achiever

Trauma Stress Responses

FREEZE

Feeling unreal
Brain fog
Spaced out
Difficulty in making decisions
Difficulty in taking action
Wants to hide from the world
Couch potato

FAVORITISM

People-pleaser
Loss of self
Codependent
Stays in a victim role
Little or no self-esteem
Easily exploited
Flatterer
Can't speak up

The Effect of Stress on Physical Health

- If the stress interferes with your ability to do the things you want or need to do, this stress has **become unhealthy**
- **Body Systems**
 - Musculoskeletal
 - Respiratory
 - Cardiovascular
 - **Vision**
 - Endocrine
 - Neurological
 - Gastrointestinal
 - Reproductive



Panic Attack

- These are **sudden periods of intense fear, discomfort, or sense of losing control** even when there is no clear danger or trigger.
- Not everyone who experiences a panic attack will develop panic disorder.
- **Hallmark Features**
 - Pounding or racing heart
 - Sweating
 - Trembling or tingling
 - Chest pain
 - Feelings of impending doom
 - Feelings of being out of control



Functional Neurological Disorder

- **FND**
 - is when there a problem in the function of the nervous system
 - *Patient appears healthy*
 - *Absence of structural or functional cause*
 - Example
 - **Streff Syndrome (Psychological Amblyopia)**
 - Streff non-malingering syndrome, also referred to as **juvenile bilateral functional amblyopia**,
 - **occurs in children and adolescents** who are having behavioral and academic difficulties.
 - It's often the result of emotional stress in the child's environment
 - *such as divorce, neglect, low self-esteem or separation of family members.*



Streff Syndrome

- **Clinical Characteristics**
 - Reduced distance and near visual acuity
 - Reduced stereopsis
 - Emmetropia to low hyperopic refractive status
 - No change in BCVA
 - Color vision deficiencies
 - Lack of concentration
 - Eyestrain
 - Headaches



Anxiety Disorder

- Defined by American Psychiatric Association (2022)
 - Is characterized by a **persistent feeling of doom or dread**, which can interfere with daily life
 - It is not the same as occasionally worrying about things or experiencing anxiety due to stressful life events
 - People living with GAD experience frequent **anxiety for months or years**



GAD Signs & Symptoms

- Feeling irritable
- Easily fatigued
- Troubles concentrating
- On-edge
- Having headaches, muscle aches, stomachaches, or unexplained pains
- Difficulty controlling feelings of worry
- Sleeping Problems
- Withdrawal from social life



What's the Difference between Stress and Anxiety?



STRESS VS ANXIETY

STRESS



short term

in response to a
recognized threat

ANXIETY



can linger

may not have an
identifiable trigger

SPAN
CAUSE /
ORIGIN

Other Types of Mental Disorders

Obsessive Compulsive Disorder (OCD)

- A type of anxiety disorder characterized by intrusive and frequent **obsessions** and repetitive **behaviors**
- Often confused with being a perfectionist or “Type A”
 - However,
 - OCD can be a debilitating condition that can impact work, relationships, or school and is very different to a quest for flawless results in a task
- **Often misdiagnosed as autism or ADHD**
- **DDX: Pediatric Autoimmune Neuropsychiatric Disorder Associated with Strep (PANDAS)**
 - S/S: anxiety, mood swings, obsessive-compulsive behaviors, difficulty sleeping and eating, tics, and decrease in school performance
 - **Consider immunological workup** to r/o toxins and infection (Group A Strep)



Types of Mental & Psychotic Disorders

- **Bipolar**
 - formerly called manic depression, is a mental health condition that causes **extreme mood swings** that include emotional highs (mania or hypomania) and lows (depression)
- **Schizophrenia**
 - a **serious mental disorder in which people interpret reality abnormally.**
 - May result in some combination of hallucinations, delusions, and extremely disordered thinking and behavior that impairs daily functioning, and can be disabling.
- **ADHD**
 - ADHD is **one of the most common neurodevelopmental disorders of childhood.**
 - It is usually first diagnosed in childhood and often lasts into adulthood.
 - Children with ADHD may have trouble paying attention, controlling impulsive behaviors (may act without thinking about what the result will be), or be overly active.

Types of Mental & Psychotic Disorders

- **Substance Abuse**
 - Refers to the abuse of illegal substances, such as marijuana, heroin, cocaine, or methamphetamine
 - Or it may be the abuse of legal substances, such as alcohol, nicotine, or prescription medicine
 - **6 types of abuse**
 - Prescription Drug Abuse.
 - Illegal Drug Abuse.
 - Alcohol Abuse.
 - Solvent Abuse.
 - “Legal High” Abuse.



Beware of “Doctor or Pill Shoppers”

- Obtaining controlled substances from multiple healthcare practitioners without the prescribers’ knowledge of other prescriptions.
- **Caution With:**
 - Appears to be **taking too much medication or finishing prescriptions early**
 - Visiting multiple doctors for various reasons **without any real medical need**
 - Saying their prescription drugs **were misplaced**
 - Prescriptions for the **same medication from different physicians**
 - Paying for prescriptions with **cash**
 - **Crossing state lines** to visit doctors

Types of Mental & Psychotic Disorders

● Suicide

- More than **700 000 people die due to suicide every year.**
- For every suicide there are many more people who attempt suicide.
 - A prior suicide attempt is the single most important risk factor for suicide in the general population.
- Suicide is the **fourth leading cause of death among 15-19 year-olds.**

Suicide

- Many suicides happen impulsively in moments of crisis with a breakdown in the ability to deal with life stresses

- **Examples strongly linked to suicidal behaviors**

- *Financial problems*
- *Relationship break-up*
- *Chronic illness*
- *Experiencing conflict*
- *Disaster*
- *Violence or abuse*
- *Loss*
- *Sense of isolation*



Types of Mental & Psychotic Disorders

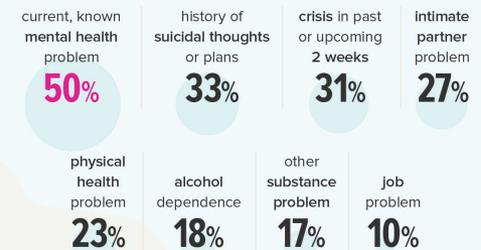
● Suicide

- Every suicide is a tragedy that affects families, communities and entire countries and **has long-lasting effects on the people left behind.**



Understanding Suicide

SUICIDE CIRCUMSTANCES



Source: Centers for Disease Control and Prevention (CDC)

healthline

Suicide

- By far the strongest risk factor for suicide is a **previous suicide attempt**.



See Something, Say Something

5 Action Steps for Helping Someone in Emotional Pain



ASK

"Are you thinking about killing yourself?"



KEEP THEM SAFE

Reduce access to lethal items or places.



BE THERE

Listen carefully and acknowledge their feelings.



HELP THEM CONNECT

Call or text the 988 Suicide & Crisis Lifeline number (988).



STAY CONNECTED

Follow up and stay in touch after a crisis.



nimh.nih.gov/suicideprevention



NATIONAL[®]
SUICIDE
PREVENTION
LIFELINE
1-800-273-TALK (8255)
suicidepreventionlifeline.org



988
SUICIDE
& CRISIS
LIFELINE

Social Determinants of Mental Health



- Recognition that individuals have needs beyond the healthcare system
- Only 40% of U.S. adults with mental health conditions AND 60% of adults with serious mental illness, receive treatment
- Factors
 - Stigma
 - No insurance or poor coverage
 - Attitudinal Factors
 - Limited access to healthcare providers

Doctors, Are You Okay?

Burnout in the Workplace

Physician Burnout Has Reached Distressing Levels, New Research Finds

Nearly two-thirds of doctors are experiencing at least one symptom of burnout, a huge increase from before the pandemic. But the situation is not irreparable, researchers say.

Give this article

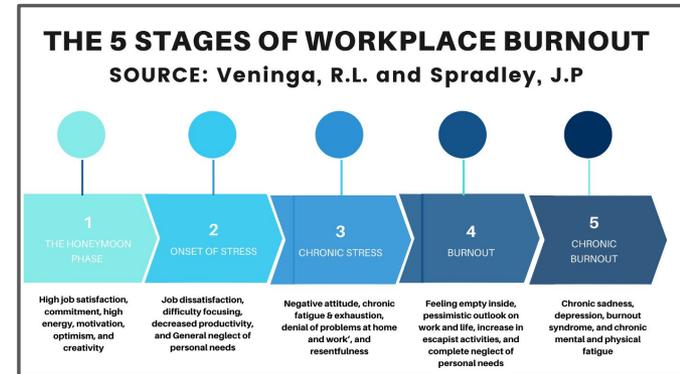


Burnout, in medical literature, is defined by increased emotional exhaustion, a more distant approach to the job and a declining sense of personal accomplishment. Charles Rex Arfegiani/Associated Press

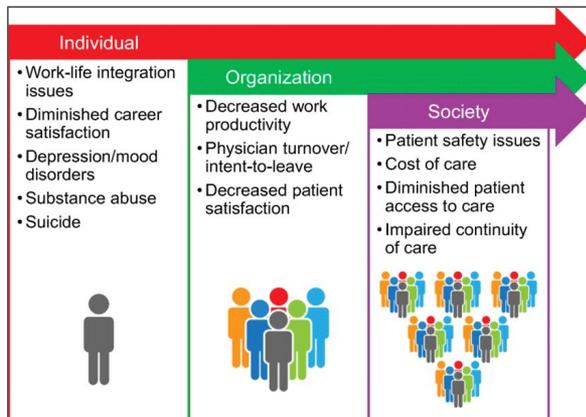
Burnout

- **A specific type of workplace stress** where workers feel general dissatisfaction with their work and multiple levels of exhaustion,
 - Including: Mental, physical, emotional exhaustion
- **Burnout** is a very common problem among employees.
 - The reasons for employee burnout vary widely but the main ones
 - Include: **staff shortage, long hours, lack of control over their job, poor communication between management and staff, and being undervalued by their employer**

Five (5) Stages to Burnout



Consequences of Physician Burnout



In Closing....

Tips for ODs Managing Physician Burnout

- Work Life Balance
- Listen to Your Body
- Common sense has become uncommon practice
- Multitasking=Stress
- Engage in Mindfulness Practices
- The Power of Setting Boundaries
- Try new and different things
- Positive Social Interactions
- Get up and move!



Increased Support Staffing Tops List Of US Physicians' Preferred Methods For Addressing Burnout

Q: Please select the three options which could be implemented by facilities to address burnout.



Source: InCrowd, n=612 physicians, 2019

BUSINESS
INSIDER
INTELLIGENCE

Tips for Managing Mental Health in Optometric Practice

- **Initiate** Friendly Conversations
- **Create** a Safe Space for Discussion
- Power of the **Pause**
- **Take** Your Time
- **Face** the Patient Directly
- **Make** Eye Contact
- **Express** Gratitude & Empathy
- **Provide** Support During a Mental Health Crisis
- Thoroughly **Educate**



How ODs Can Help

- **Listen to your patients!**
- **Monitor** body language
 - Look for vegetative signs of depression and maladaptive behaviors
- **Help** grieving patients by validating their emotional experience
 - Make sure they understand that grief is a process that takes varying degrees of time for different people.
- **Encourage** open communication
- **Avoid** inappropriate gestures or remarks that may suppress emotions
- **Pay attention** to body language

Tap into Your Happy Chemicals

Happiness Chemicals and How to Hack Them

DOPAMINE THE REWARD CHEMICAL

- Completing a task
- Doing self-care activities
- Eating food
- Celebrating little wins

OXYTOCIN THE LOVE HORMONE

- Playing with a dog
- Playing with a baby
- Holding hands
- Hugging your family
- Giving compliments

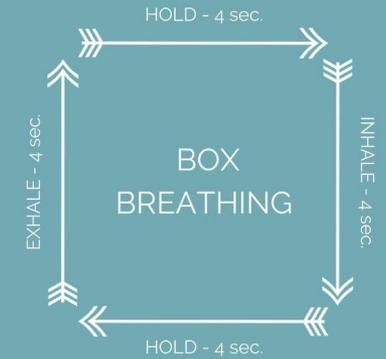
SEROTONIN THE MOOD STABILIZER

- Meditating
- Running
- Sun exposure
- Walk in nature
- Swimming
- Cycling

ENDORPHIN THE PAIN KILLER

- Laughter
- Essential oils
- Watch a comedy
- Dark Chocolate
- Exercising

Stay Calm & Breathe



The end

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