Aesthetics and Well-being: At home with our Values in Mental Health

Symposium: Social Aesthetic
INPP Hong Kong - 5th October, 2018

KWM (Bill) Fulford
Aesthetics and Well-being: At home with our Values in Mental Health

1. A VBP challenge
2. Two VBP stories

Conclusions: At home or just homesick?
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1. A VBP challenge
2. Two VBP stories

Conclusions: At home or just homesick?
It’s your decision …

• Imagine you have developed early symptoms of a potentially fatal disease …
• NICE has approved two possible treatments
• TREATMENT A - gives you a guaranteed period of remission but no cure
• TREATMENT B - gives you a 50:50 chance of ‘kill or cure’
• Your decision – what minimum period of remission would you want from Treatment A to choose that treatment rather than go for the 50:50 ‘kill or cure’ from Treatment B?
It’s your decision …

“How long a period of remission would I want from Treatment A to choose that treatment rather than go for the 50:50 ‘kill or cure’ from Treatment B?”

• Write down your own answer thinking about your decision from own point of view and in your own present circumstances

• Then compare your answer with your neighbours’ answers
Choosing treatment A over B ...

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No! | >6m | >1y | >1<5 | 5-10 | >10 | >25 | >80
It’s your decision...

Same evidence
It’s your decision...

Same evidence + different values
It’s your decision...

Same evidence + different values = different decision
What are values?

Anything that matters or is important to you
What are values?

Anything that matters or is important to you … complex and conflicting
Values-based practice is ....

....... a process that supports clinical decision making where complex and conflicting values are in play
Evidence-based practice is ....

....... a process that supports clinical decision making where complex and conflicting evidence is in play
Values-based practice

Ten Key Process Elements

- 4 Clinical Skills
- 2 Aspects of the model of service delivery
- 3 Strong links between VBP and EBP
- Partnership in decision-making

Together these support balanced dissensual decision making within frameworks of shared values
Values-based practice

Ten Key Process Elements
- 4 Clinical Skills
- 2 Aspects of the model of service delivery
- 3 Strong links between VBP and EBP
- Partnership in decision-making

Together these support balanced dissensual decision making within frameworks of shared values.
Values-based practice

Ten Key Process Elements

• 4 Clinical Skills: awareness of values
• 2 Aspects of the model of service delivery
• 3 Strong links between VBP and EBP
• Partnership in decision-making

Together these support balanced dissensual decision making within frameworks of shared values
Partnership between EBP and VBP in Person-centered Care
Valuesbasedpractice.org

Collaborating Centre for Values-based Practice, St Catherine’s College, Oxford
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Conclusions: At home or just homesick?
Partnership between EBP and VBP in Person-centered Surgical Care
Mrs. Jones’ Knee

• Referred with painful arthritic knee for prosthetic joint
Mrs. Jones’ Knee

- Referred with painful arthritic knee for prosthetic joint
- ‘I’m so pleased I will be able to garden again!’
Mrs. Jones’ Knee

- Referred with painful arthritic knee for prosthetic joint
- ‘I’m so pleased I will be able to garden again!’
- ‘… but your mobility may be less post-op’
Mrs. Jones’ Knee

• Referred with painful arthritic knee for prosthetic joint
• ‘I’m so pleased I will be able to garden again!’
• ‘… but your mobility may be less post-op’
• Conservative management
Mrs. Jones’ Knee and VBP
Mrs. Jones’ Knee and VBP

VBP (listening to ‘what mattered’ to Mrs. Jones)
Values-based practice

Ten Key Process Elements

• 4 Clinical Skills: communication skills
• 2 Aspects of the model of service delivery
• 3 Strong links between VBP and EBP
• Partnership in decision-making

Together these support balanced dissensual decision making within frameworks of shared values
Mrs. Jones’ Knee and VBP

VBP (listening to ‘what mattered’ to Mrs. Jones) + EBP (understanding the evidence-base for the options available)
Mrs. Jones’ Knee and VBP

VBP (listening to ‘what mattered’ to Mrs. Jones) + EBP (understanding the evidence-base for the options available) = •Improved clinical outcome
Mrs. Jones’ Knee and VBP

VBP (listening to ‘what mattered’ to Mrs. Jones) + EBP (understanding the evidence-base for the options available) =

• Improved clinical outcome
• Better patient experience
Mrs. Jones’ Knee and VBP

VBP (listening to ‘what mattered’ to Mrs. Jones) + EBP (understanding the evidence-base for the options available) =

• Improved clinical outcome
• Better patient experience
• Huge cost savings
Partnership between EBP and VBP in Person-centered Psychiatric Care

Values Based Practice

Evidence Based Practice
Prescribing antipsychotics

Same structure as surgery but
Prescribing antipsychotics

Same structure as surgery but

More Challenging Evidence-base

Psychosis and schizophrenia in adults: prevention and management

Clinical guideline
Published: 12 February 2014
nice.org.uk/guidance/cg178
Prescribing antipsychotics

Prescribing antipsychotics

More Challenging
Evidence-base

More Challenging
Values-base
Risk of weight gain
Risk to bodily health
Risk to mental health (recovery)
So weight gain is really important to patients
So weight gain is really important to patients but often not discussed when prescribing antipsychotics.
So weight gain is really important to patients

But often not discussed when prescribing antipsychotics

Reflects clinician’s values (what is important to the clinician)
Comparing the two cases

VBP in surgical care  VBP in psychiatric care

Mrs Jones’ knee  Prescribing antipsychotic

Values pull same way  Values pull different ways
Isaiah Berlin

Professor of Social and Political Philosophy

- The challenge of values pluralism
Isaiah Berlin

Professor of Social and Political Philosophy

• The challenge of values pluralism

• VBP in psychiatric care hits the challenge of values pluralism
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1. A VBP challenge
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Conclusions: At home or just homesick?
Conclusions

1. A VBP challenge
   Forced choice exercise

2. Two VBP stories
   Surgery ~ Mrs Jones’ knee
   Psychiatry ~ Prescribing antipsychotics
Conclusions

1. A VBP challenge
   Forced choice exercise – VBP+EBP is basis of partnership in clinical decision-making

2. Two VBP stories
   ~Mrs Jones’ knee – VBP+EBP in surgery works well
   ~Prescribing antipsychotics – VBP+EBP in psychiatry hits the challenge of pluralism
Paul Gilbert

- A metaphor for wellbeing
  … our experience of
  feeling at home

2018

*Residence, Identity
and Well-being.*

Paul Gilbert

- A metaphor for wellbeing … our experience of feeling at home
- In surgery values-based practice contributes to wellbeing by helping us to feel at home with our values

2018

*Residence, Identity and Well-being.*

Chapter 1 in Kathleen T. Galvin (Ed) Routledge *Handbook of Well-Being.* London: Routledge
A metaphor for wellbeing … our experience of feeling at home
In surgery values-based practice contributes to wellbeing by helping us to feel at home with our values
But in psychiatry the challenge of pluralism risks leaving us feeling just homesick!