

# Beating the Blues<sup>®</sup>

Health Provider User Guide – July 2012

## About this document

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## Introduction

Welcome to Ultrasis Beating the Blues<sup>®</sup>, the patient-friendly way to help your patients feel better and stay better. The programme provides the healthcare provider with an advanced tool for the treatment of depression and anxiety. It offers access to Cognitive Behavioural Therapy (CBT), thus providing an additional drug-free treatment option to the clinician.

Ultrasis developed Beating the Blues<sup>®</sup> in association with Psychology at Work Ltd, an initiative of the Institute of Psychiatry, King's College, London. It brings to the partnership with Ultrasis a wealth of healthcare skills and expertise honed in one of the world's leading psychiatric research institutions.

Ultrasis Beating the Blues<sup>®</sup> has a number of benefits for the clinician and for patients.

### Delivery of Care Advantages

- Free to patients in New Zealand
- Immediate access to CBT for patients with depression and/or anxiety
- Evidence-based therapy with no known side-effects
- Alternative to medication
- Provides patients with the ability to chart their own symptoms and progress with confidentiality
- Administered with minimal clinical supervision, while helping GP maintain full outcome management

### Benefits for Patients

- Free programme access in New Zealand
- Easy to use
- Teaches practical, life-long CBT skills
- 24 hour availability
- Engages, motivates and empowers
- Offers privacy and control

Broadens patient options – can be used with or without medication

## New Zealand Contact Details

Beating the Blues® is supported in New Zealand by Medtech Limited.

If at any time you need assistance with the programme please contact Medtech Limited our contact details are:

**Address for Correspondence:**

Medtech Limited  
Level 1, Medtech House  
48 Market Place  
Auckland 1010, New Zealand

**E-Mail:** [btb.support@managemyhealth.co.nz](mailto:btb.support@managemyhealth.co.nz)

**Technical Support** 0800 263 3832

(During Normal Business Hours)

**Beating the Blues® Information Website:**

[www.beatingtheblues.co.nz](http://www.beatingtheblues.co.nz)

# Health Provider User Guide

Welcome to Ultrasis Beating the Blues<sup>®</sup>. Before you attempt to refer your first patient, please read the following guide thoroughly to ensure that you understand all elements of the programme. If you have any questions before your first session, do not hesitate to call your Trainer for further assistance.

## Introduction

Ultrasis Beating the Blues<sup>®</sup> is a computer-interactive programme for the treatment of depression and/or anxiety. It is based on Cognitive Behavioural Therapy (CBT), which helps patients to identify and change unhelpful ways of thinking and to learn more effective ways of solving problems. The programme consists of two interwoven strands: the cognitive (or 'thinking') strategies and the behavioural (or 'doing') strategies. Patients are helped to understand the causes and symptoms of depression and/or anxiety and to work on their specific problems.

The programme consists of a 15 minute 'Introduction to Therapy' video plus eight computer-interactive sessions of approximately 50 minutes each in duration. Each session consists of a mix of cognitive and behavioural strategies, which are customised to the patient's individual problems. The eight computer sessions are designed to be taken weekly, or thereabouts, and each session builds on the previous one. Patients can repeat sessions if they wish. The computer keeps track of which session they have reached.

If for any reason, a patient does not complete a session of the programme, the system will remember how far in that session the Patient has reached. It can easily restart the patient where they left off next time they log in.

### Video: Introduction to Beating the Blues<sup>®</sup> (15 Mins)

This introductory video contains a brief description of the programme and provides psycho-educational information about depression and anxiety. It is available online at [www.beatingtheblues.co.nz](http://www.beatingtheblues.co.nz) and should be seen by patients **BEFORE** they commence the first session.

Should you require a local copy, the video can be downloaded from [www.beatingtheblues.co.nz](http://www.beatingtheblues.co.nz) and saved to a computer or burnt to a CD.

### Session 1: Getting Started (50 minutes)

On entering an activation code a new patient treatment episode is set up in ManageMyHealth<sup>™</sup>. Before starting session 1 the patient completes a registration questionnaire.

Before starting Session 1 the patient will be asked to complete a PHQ-9, and/or GAD-7 questionnaire. These questionnaires have been chosen to help measure the effectiveness of Beating the Blues<sup>®</sup>.

## Outline

Session 1 commences with an outline of the structure of Beating the Blues<sup>®</sup> and an introduction to Cognitive Behavioural Therapy. Information is given about depression and anxiety, and video clips of five case study patients are shown (actors are used to preserve patient confidentiality).

Next, patients are helped to identify their symptoms of depression and/or anxiety and to define the problems they wish to work on during Beating the Blues<sup>®</sup>. They are shown how to rate their mood and problems each week in order to chart their progress on the programme. The session concludes with an outline of the link between mood, behaviour and interpretations, and patients start to work on increasing pleasurable events in their lives.

## Tasks for Health Provider

### *At start of session 1:*

1. Register the patient and generate an activation code. Ensure the patient has their activation code which is provided on the Blue Prescription.
2. Inform the patient that their user name will be their email address and they will need to set up a password to activate their account. They will need to use this each time they log in.
3. Explain to the patient that their password is encrypted into the database and it is therefore not possible for anyone to gain access to their password and subsequently nobody will see any other data that they enter into Beating the Blues<sup>®</sup>.
4. Advise the patient that each session they will be asked to rate how depressed and/or anxious they have been during the week, how distressing their problems have been and whether they have had any upsets, disappointments and thoughts of suicide. They will get a Progress Report of these ratings each week. A copy will be made available for their clinician as well. At the end of the 8 sessions an Effectiveness Report will be printed containing more information about the patient.
5. Explain the evaluation questionnaires (PHQ-9, and/or GAD-7) and that they will be asked to complete them at session 1, 3, 5 and 8. These questionnaires are used as part of the assessment of patient progress and their responses will be included in the Effectiveness Report.
6. Anonymised data may be used to provide an overall evaluation of Beating the Blues<sup>®</sup>.
7. Stress that **all the rest of the information they input is completely confidential**.
8. Advise them of how and when you can be contacted if they need assistance.

### *At end of session 1:*

You should check Live Progress Reports on a regular basis to check on each patient's progress. Instructions on how to do this can be seen in the '[Patient Management](#)' Section.

**Please Note:** If used in a surgery or other clinical environment, please draw to the clinician's attention any suicidal thoughts reported on the Progress Report before the patient leaves, or implement appropriate alternative procedures as determined by the clinician or local guidelines.

## Session 2: Goal Setting & Automatic Thoughts (50 minutes)

### Outline

Patients are first assisted to set their goals for Beating the Blues<sup>®</sup> therapy. Next the computer reviews with the patient the individual projects carried out after the first session. Patients are then introduced to the ABC model to demonstrate the impact of their thinking on their mood and behaviour. They are also introduced to the notion of automatic thoughts, and are taught how to catch and record their own thoughts in order to gain more control over them. Patients are encouraged to record their automatic thoughts during the week when feeling depressed or anxious.

The session concludes with each patient being helped to select a behavioural technique, either Activity Scheduling or Problem Solving, to work on within and between sessions 2, 3 and 4.

**Activity Scheduling:** This requires patients to monitor their activity levels, plan pleasurable activities and monitor the effect that these have on their mood.

**Problem Solving:** This technique teaches patients a systematic way of dealing with their difficulties, enhances their sense of control and can also be used to tackle problems in the future. Patients are encouraged to prioritise problems and to decide which one to work on first.

### Tasks for Health Provider

You should check Live Progress Reports on a regular basis to check on each patient's progress. Instructions on how to do this can be seen in the ['Patient Management'](#) Section.

**Please Note:** If used in a surgery or other clinical environment, please draw to the clinician's attention any suicidal thoughts reported on the Progress Report before the patient leaves, or implement appropriate alternative procedures as determined by the clinician or local guidelines.

## Session 3: Common Thinking Distortions in Depression and Anxiety (50 minutes)

### Outline

The 'homework' tasks are first reviewed and any necessary follow-up activities are undertaken. For example, if patients have not recorded some of their thoughts during the week, the computer will assist them to do this in the session.

Patients are then introduced to the types of thinking distortions that are common in depression and anxiety, and they are assisted to select the thinking error they tend to use the most. They are also encouraged to think about the situations in which they are most likely to find themselves using this thinking error, and during the week, to take note of any occurrences of it and the impact on their mood and behaviour. Next they are taught some simple techniques to use when feeling particularly upset, such as controlled breathing, and they work further on their chosen behavioural technique.

### Tasks for Health Provider

#### *At the start of session 3:*

You should check Live Progress Reports on a regular basis to check on each patient's progress. Instructions on how to do this can be seen in the ['Patient Management'](#) Section.

**Please Note:** If used in a surgery or other clinical environment, please draw to the clinician's attention any suicidal thoughts reported on the Progress Report before the patient leaves, or implement appropriate alternative procedures as determined by the clinician or local guidelines.

## Session 4: Changing Unhelpful Thinking (50 minutes)

### Outline

The session commences with a review of the projects the patient has carried out since the previous session, e.g. catching their thinking errors. Patients are then introduced to four techniques to help them challenge their distorted thoughts and substitute more helpful thoughts. The techniques are modelled by the case study patients and patients are assisted, in a graduated fashion within the session, to try out the techniques on a hypothetical example and then on their own thoughts. They are encouraged to use the techniques during the week, noting the impact on their mood and behaviour.

A second behavioural technique is offered to patients to help them cope with one of the specific problems they entered in session 1.

### Tasks for Health Provider

#### *At the start of session 4:*

You should check Live Progress Reports on a regular basis to check on each patient's progress. Instructions on how to do this can be seen in the '[Patient Management](#)' Section.

**Please Note:** If used in a surgery or other clinical environment, please draw to the clinician's attention any suicidal thoughts reported on the Progress Report before the patient leaves, or implement appropriate alternative procedures as determined by the clinician or local guidelines.

## Session 5: Inner Beliefs (50 minutes)

### Outline

The session commences with a review of the weekly projects (including the thought challenging) and patients are shown some common mistakes people make when challenging their thoughts, as well as ways to overcome them. This leads to the introduction of the concept of 'inner beliefs' which is outlined with examples. The characteristics of inner beliefs are highlighted and patients are taught some techniques for accessing inner beliefs. They try out one of the techniques in a graduated fashion with assistance. Patients are encouraged to take an experimental approach to one of their inner beliefs, looking for evidence against it during the week.

Patients continue working on their behavioural technique and the session concludes with a look at the importance of recognising one's successes, and taking credit for a small part of them.

### Tasks for Health Provider

You should check Live Progress Reports on a regular basis to check on each patient's progress. Instructions on how to do this can be seen in the ['Patient Management'](#) Section.

**Please Note:** If used in a surgery or other clinical environment, please draw to the clinician's attention any suicidal thoughts reported on the Progress Report before the patient leaves, or implement appropriate alternative procedures as determined by the clinician or local guidelines.

## Session 6: Inner Beliefs (continued) and Attributional Style (50 minutes)

### Outline

This session focuses on beliefs. Patients work further on the inner belief they identified in the previous session, learning how to collect evidence against it and to formulate an alternative more helpful version of it, which they begin to test during the week.

Patients are also introduced to the concept of attributional style and how it impacts on their mood and well-being. Video clips of case study patients are used to model and comment on the material in this session.

Patients are also offered a choice of one of three behavioural techniques: Sleep Management, Graded Exposure and Task Breakdown, to work on in the final sessions of the programme.

### Tasks for Health Provider

You should check Live Progress Reports on a regular basis to check on each patient's progress. Instructions on how to do this can be seen in the ['Patient Management'](#) Section.

**Please Note:** If used in a surgery or other clinical environment, please draw to the clinician's attention any suicidal thoughts reported on the Progress Report before the patient leaves, or implement appropriate alternative procedures as determined by the clinician or local guidelines.

## Session 7: Attributional Style (continued) (50 minutes)

### Outline

After reviewing their weekly projects, patients work further on testing their inner beliefs. They also learn how to check their Attributional Style to see whether it is exacerbating their depression and they are presented with strategies for modifying Attributional Style in order to reduce depression and improve confidence. They try out some of the new 'thinking' strategies during the week. The session also includes work on the patient's behavioural technique selected in the previous session.

### Tasks for Health Provider

You should check Live Progress Reports on a regular basis to check on each patient's progress. Instructions on how to do this can be seen in the ['Patient Management'](#) Section.

**Please Note:** If used in a surgery or other clinical environment, please draw to the clinician's attention any suicidal thoughts reported on the Progress Report before the patient leaves, or implement appropriate alternative procedures as determined by the clinician or local guidelines.

## Session 8: Conclusion and Coping with Setbacks (50 minutes)

### Outline

In the final session of the **Beating the Blues**<sup>®</sup> programme, patients are helped to look back over the techniques they have learnt in the programme, and to check their progress on the goals they recorded at the beginning of therapy. They are also helped to develop an action plan to build on changes they have made and to continue tackling their problems. They consider possible difficulties or setbacks they might encounter in the future and they formulate some ways to cope with them. An invitation is extended to them to repeat any sessions of Beating the Blues<sup>®</sup> in the future should they wish.

### Tasks for Health Provider

You should check Live Progress Reports on a regular basis to check on each patient's progress. Instructions on how to do this can be seen in the ['Patient Management'](#) Section.

**Please Note:** If used in a surgery or other clinical environment, please draw to the clinician's attention any suicidal thoughts reported on the Progress Report before the patient leaves, or implement appropriate alternative procedures as determined by the clinician or local guidelines.

## Suicidal Thoughts

Each week, patients are asked if they have had any suicidal thoughts; and, if so, how often and how seriously they have planned to carry it out (0 to 8 rating scale). If patients indicate that they are very seriously considering suicide (scores 5 to 8), the programme urges them to seek help immediately from their doctor or someone else who can help. To help in managing suicidal ideation the System Administrator has set a function so that the health provider is emailed when a high level of risk is indicated.

If they are less serious in their intention (scores 0-4), they are advised that, if their plans get any more serious, they should stop using Beating the Blues<sup>®</sup>, and see their doctor or someone else who can help them.

The programme provides a weekly Progress Report to feed this information back to the clinician responsible for the patient. It is important that if reports will be reviewed by other than a GP, that any procedures to be followed in relation to a patient's suicide risk have been specified by the clinician responsible for the patient.

You should check Live Progress Reports on a regular basis to check on each patient's progress and whether they have had thoughts of suicide.

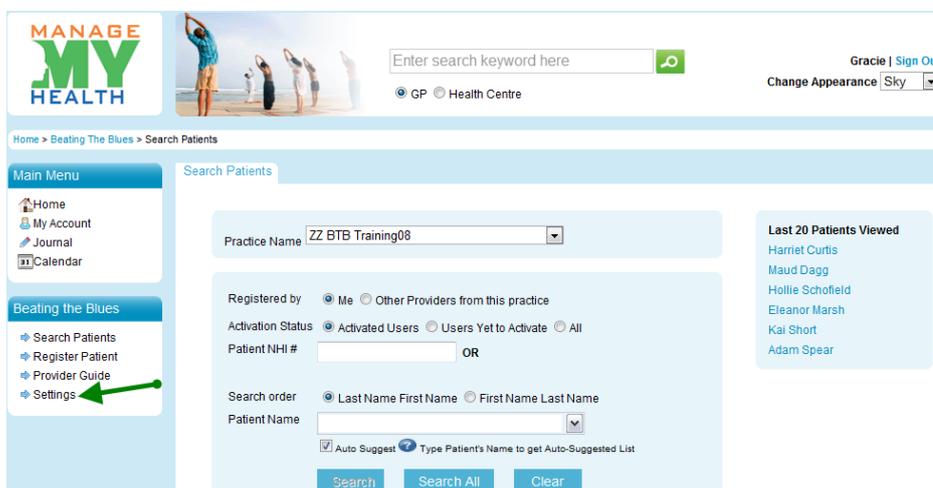
Instructions on how to do this can be seen in the ['Patient Management'](#) Section.

## Suicide Risk Alert - Secondary Email Address

In circumstances where a Clinician will not have access to email or another clinician is supporting the client, Practices and Clinicians have the option to have a copy of this Patient Alert Email to be sent to a secondary email address.

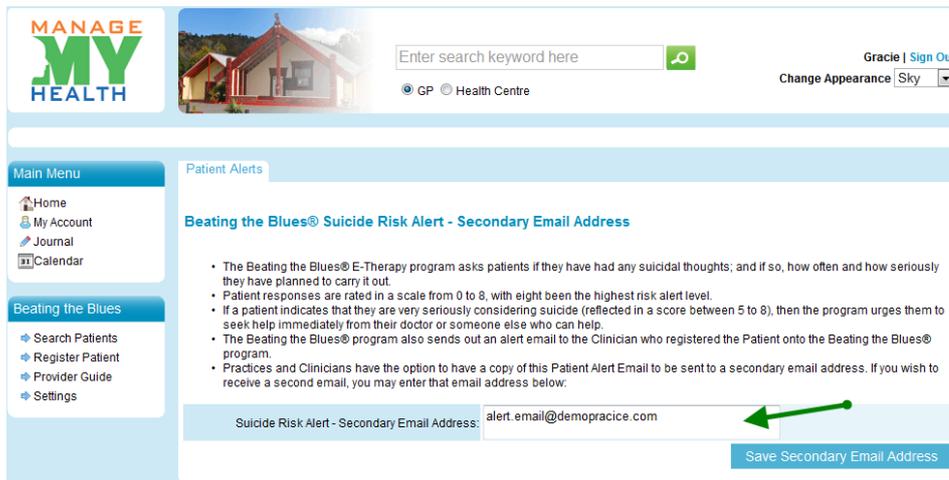
To set up Secondary Email Address:

- *Login to ManageMyHealth<sup>TM</sup>.*
- *Click 'Setting' in Beating the Blues Menu.*



**Figure 01 Click Settings in *ManageMyHealth<sup>TM</sup>***

- Enter 'Suicide Risk Alert - Secondary Email Address'.



The screenshot shows the 'Patient Alerts' section of the Manage My Health website. The main heading is 'Beating the Blues® Suicide Risk Alert - Secondary Email Address'. Below this, there is a list of bullet points explaining the program's risk alert system. At the bottom, there is a form field labeled 'Suicide Risk Alert - Secondary Email Address:' with the text 'alert.email@demopractice.com' entered. A green arrow points from the right side of the form field to the 'Save Secondary Email Address' button.

**Figure 1 Enter Secondary Email Address**

- Click Save 'Secondary Email Address'.

## Progress Reports for Clinicians

In addition to suicidal thoughts, the Progress Reports document the patient's self-reported increase or decrease in depression and/or anxiety week by week, and the severity of their problems. The patient automatically receives a copy of his/her Progress Report at the end of each session. If Progress Reports are reviewed by other than a GP they should be printed, put in an envelope, and given to the doctor responsible for the patient. (Instructions on how to do this can be seen in the '[Patient Management](#)' Section).

An Effectiveness Report is also available which should be printed out and filed, once a patient has completed Beating the Blues<sup>®</sup>. This summarises the patient's feedback on Beating the Blues<sup>®</sup>.

## End of Session Emails

At the end of each session the Patient will receive an email with a reminder of what was covered in the session, some information about their projects for the week and a brief outline of what to expect in the next session.

## Printouts

The computer prints out notes and worksheets for each patient throughout the sessions. Patients can print out further copies by going to the printouts section when they log on to the programme.

They will only be able to print forms for the sessions they have already reached.

## **What to do if a Patient Drops out of Beating the Blues<sup>®</sup>**

Patients may repeat a session or part of a session if they wish. They can do this by clicking on 'Review Previous Sessions' when they log on. When reviewing a session, patients will be unable to edit any of the data they have previously entered. If they wish to overwrite previously entered information, they'll require your intervention to restart them at an earlier point. You'll be shown how to do this in the [Patient Management](#) Section.

## **Computer Questions or Problems**

If you or your patients have any technical problems with using the software, first consult the [Technical Support Guide](#) section of this document. If you still cannot solve the problem, please contact Medtech Limited, using the contact details (see [New Zealand Contact Details](#) section).

## **Clinical Questions or Problems**

For questions about the content of the programme, please call Medtech Limited.

# Administrative Functions

## Health Provider Role

The health provider is responsible for patients under their guidance and has access to the following functions:

- Patient Activation
- Account Management
- Usage Report
- Patient Progress

## Getting Started

### Setting up Your Account

As a health provider, the first thing you will need to do is register for ManageMyHealth™.

#### Medtech32 users

Click the ManageMyHealth™ tab in Medtech32. The menu is displayed:

- Select 'Register Staff for Beating the Blues®'
- Registration form will be displayed
- Provider details will be pre-populated
- Check details and enter any missing mandatory fields
- Click 'Register'.
- You are now ready to prescribe Beating The Blues for your Patients

#### Non-Medtech32 users

The registration process for those practices using Patient Management Systems (PMS) other than Medtech32 will differ depending on whether the PMS vendor has implemented ManageMyHealth™ links within their software. To date no other PMS has implemented these links.

The process for registering in the absence of direct links to ManageMyHealth™ is:

- Trainer collects required practice details and forwards these to Medtech Support to complete ManageMyHealth™ registration. This may be done prior to or at the time of training.
- Once the Practice is registered, Trainer Adds Provider to Practice

- The Provider is ready to prescribe BeatingTheBlues for their Patients

## Logging in

Having set your account up, when you return to ManageMyHealth™, you can login from the homepage using your email/user name and password.

## If you Forget your Password

If you forget your password, click on the 'Forgot Password' link on the login page.

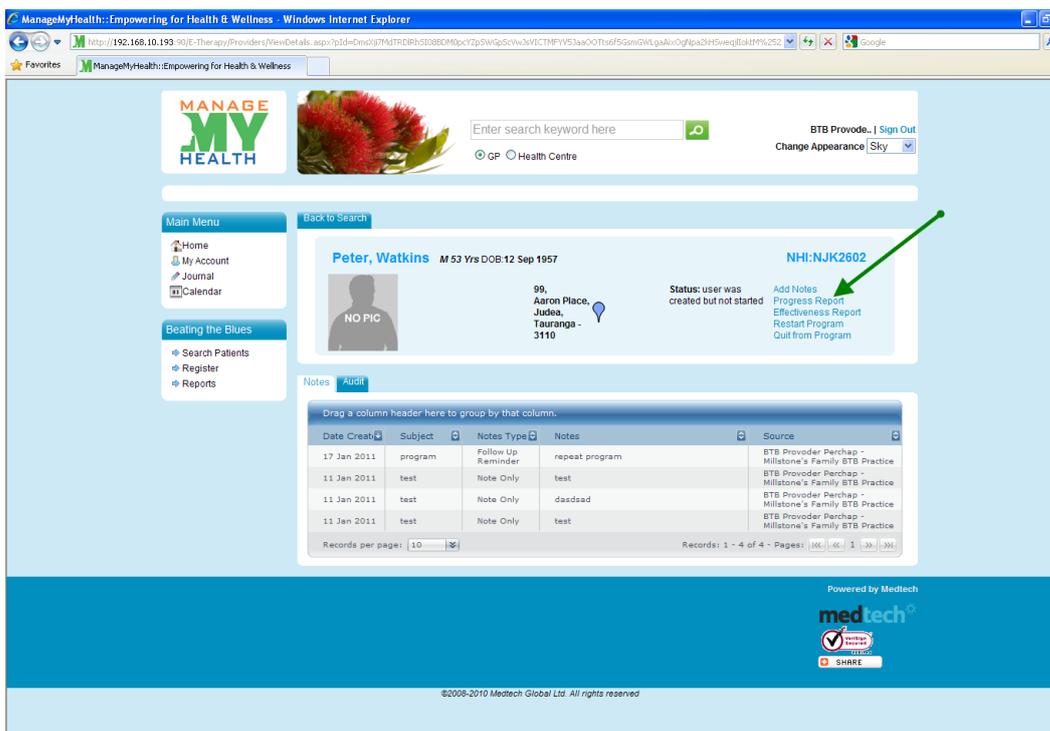
Enter your user name/email address and type the characters you see in the picture and the system will send you an email confirming your user name and password.

# Patient Management

Within ManageMyHealth™ you are able to:

- View Existing Patients' information
- Restart a Patient at an earlier session in Beating the Blues<sup>®</sup>
- View Progress Reports
- View Patient Summaries
- View and edit Patient's Status in Beating the Blues<sup>®</sup>

These functions are available by searching for the patient and using the links on the patient banner.



The screenshot shows the ManageMyHealth interface in a Windows Internet Explorer browser. The page displays patient information for Peter Watkins, a 53-year-old male born on 12 Sep 1957, with NHI: NJK2602. The patient's address is 98, Aaron Place, Jukes, Tauranga - 3110. The status is 'user was created but not started'. A green arrow points to the 'Add Notes' link in the patient banner. Below the banner is a 'Notes' section with a table of notes.

Date	Created	Subject	Notes Type	Notes	Source
17 Jan 2011		program	Follow Up Reminder	repeat program	BTB Provider Parchap - Millstone's Family BTB Practice
11 Jan 2011		test	Note Only	test	BTB Provider Parchap - Millstone's Family BTB Practice
11 Jan 2011		test	Note Only	dasdsad	BTB Provider Parchap - Millstone's Family BTB Practice
11 Jan 2011		test	Note Only	test	BTB Provider Parchap - Millstone's Family BTB Practice

Figure 03

From this screen it is possible to add notes, view Progress Reports and Effectiveness Reports, and Quit and Restart patients on the programme.

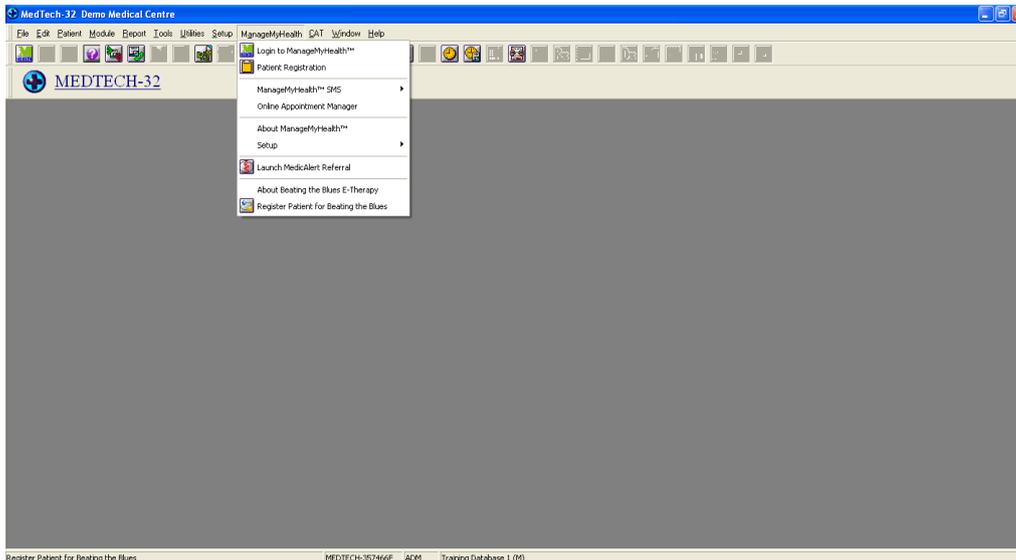
By clicking on the 'Add Notes' you can make notes about the patient. Notes can be seen by all health providers that have been assigned to this patient.

## Add New Patient

Each patient using Beating the Blues® will require their own account which includes a user name and password in order to logon to the system.

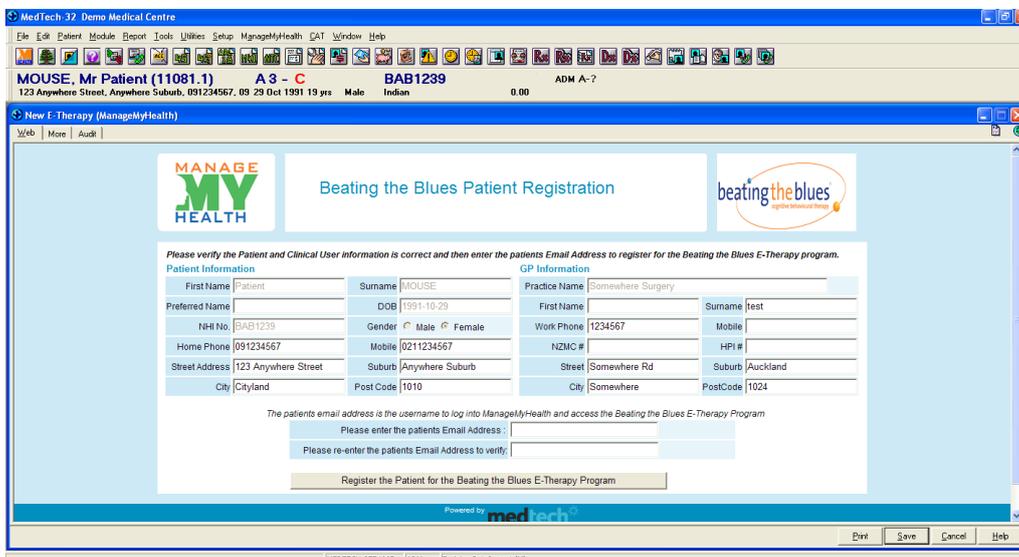
### Medtech32 Users

- Search and open a patient record by clicking on the ManageMyHealth™ menu in Medtech32. The following menu is displayed.



**Figure 04**

- Select 'Register Patient for Beating the Blues®'. The registration form will be displayed. In Medtech32 patient details (except email address) and provider details will be pre-populated.
- \*Enter email address and re- enter address to verify.
- Click 'Register to Beating the Blues®' (at bottom of registration form).



**Figure 05**

NB. The process is the same irrespective of the whether or not the patient already has a ManageMyHealth™ account.

Once you have added the patient, you will be provided with an activation code for that patient on a Blue Prescription. This is printed out and a copy sent to their email address. The Blue Prescription provides the patient with a step by step process of how to activate their account.

The Patient then has 30 days to activate their account – after this period the activation code becomes invalid.

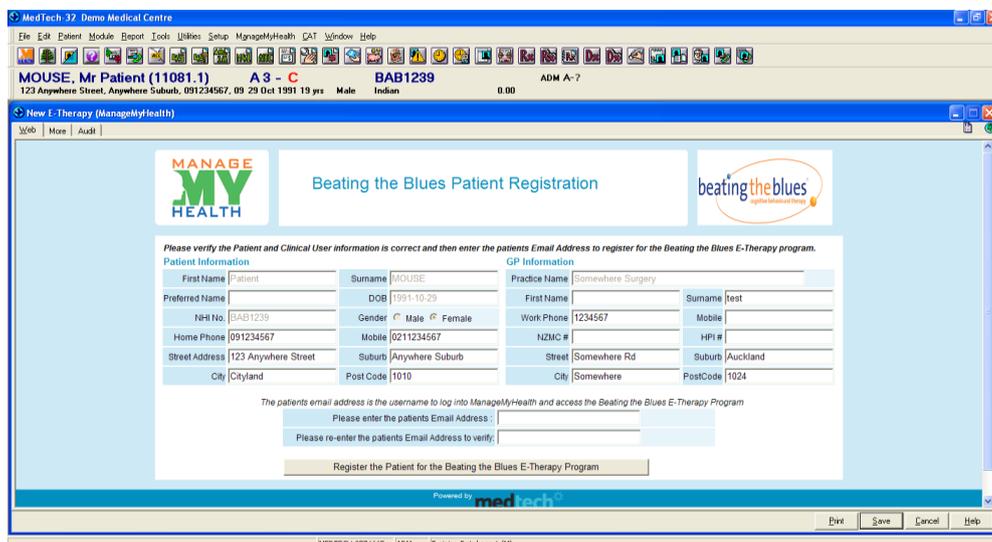
On the registration page the patient will need to accept the 'Terms and Conditions' in order to create their account.

### Register a New Patient: Non-Medtech32 Users

- Click the ManageMyHealth™™ tab in the Patient Management System (PMS).
- Select 'Register for Beating the Blues®'. The registration form will be displayed.
- Complete form with patient details.
- Click 'Register to Beating the Blues®' (at bottom of registration form).

If the PMS system does not have a ManageMyHealth™ link, registration can be completed from within ManageMyHealth™.

- Login to ManageMyHealth™ using email/username and password.
- Select 'Register' from the left menu.
- Registration form will be displayed.
- Complete the form with patient details.
- Click 'Register to Beating the Blues®'



MedTech 32 Demo Medical Centre

File Edit Patient Module Report Tools Utilities Setup ManageMyHealth CAT Window Help

MOUSE, Mr Patient (11081.1) A 3 - C BAB1239 ADM A-?

123 Anywhere Street, Anywhere Suburb, 091234567, 09 29 Oct 1991 19 yrs Male Indian 0.00

New E-Therapy (ManageMyHealth)

MANAGE MY HEALTH Beating the Blues Patient Registration beatingtheblues

Please verify the Patient and Clinical User information is correct and then enter the patients Email Address to register for the Beating the Blues E-Therapy program.

Patient Information		GP Information	
First Name	Patient	Surname	MOUSE
DOB	1991-10-29	Practice Name	Somewhere Surgery
Preferred Name		First Name	
NHI No.	BAB1239	Surname	test
Gender	<input checked="" type="radio"/> Male <input type="radio"/> Female	Work Phone	1234567
Home Phone	091234567	Mobile	
Mobile	0211234567	NZMC #	
HPI #		Street	Somewhere Rd
Street Address	123 Anywhere Street	Suburb	Auckland
Suburb	Anywhere Suburb	City	Somewhere
City	Cityland	PostCode	1024
Post Code	1010		

The patients email address is the username to log into ManageMyHealth and access the Beating the Blues E-Therapy Program

Please enter the patients Email Address:

Please re-enter the patients Email Address to verify:

Register the Patient for the Beating the Blues E-Therapy Program

Powered by medtech

MEYTECH-957466F AZM Training Database 1 (0)

Figure 06

## If a Patient Gets Locked Out

If a patient gets their password wrong 5 times in succession, they will be locked out of their account. This mechanism is designed to protect the patient against people attempting to access their account.

## Changing a Patient's Password

On the ManageMyHealth™ homepage there is a 'Forgot Password' link. The patient is asked to type in their user name/email and enter the characters they see on the screen. A new password is then emailed to them.

## How to Restart a Patient

Patients are expected to go through Beating the Blues® 1 session at a time, moving through the sessions in order from 1 to 8.

Patients may go back and review any session at any time they wish, so there shouldn't be a great need to restart patients on a regular basis. However, when a patient reviews a previously completed session, then that session becomes 'read only', meaning that the patient is unable to change any of the data they have previously entered for that session.

A patient may therefore want to restart in the following scenarios:

- If they need to go back to a previous session and change the data they have entered. You should remember if a patient wants to return to an earlier session, they will then need to move through the sessions in order from where you have restarted them. They will not be able to jump forward to where they were before they were restarted.
- If a patient has quit Beating the Blues® and wants to restart, then the health provider can restart them. Note that any patient who has been quit can restart themselves by simply logging on and continuing with the programme.

It is not possible to restart a patient further forward in the programme than they have already reached. So for example, if a patient has completed session 4, they can only be restarted at Session 1, 2, 3 or 4.

To restart a patient:

- Search for patient

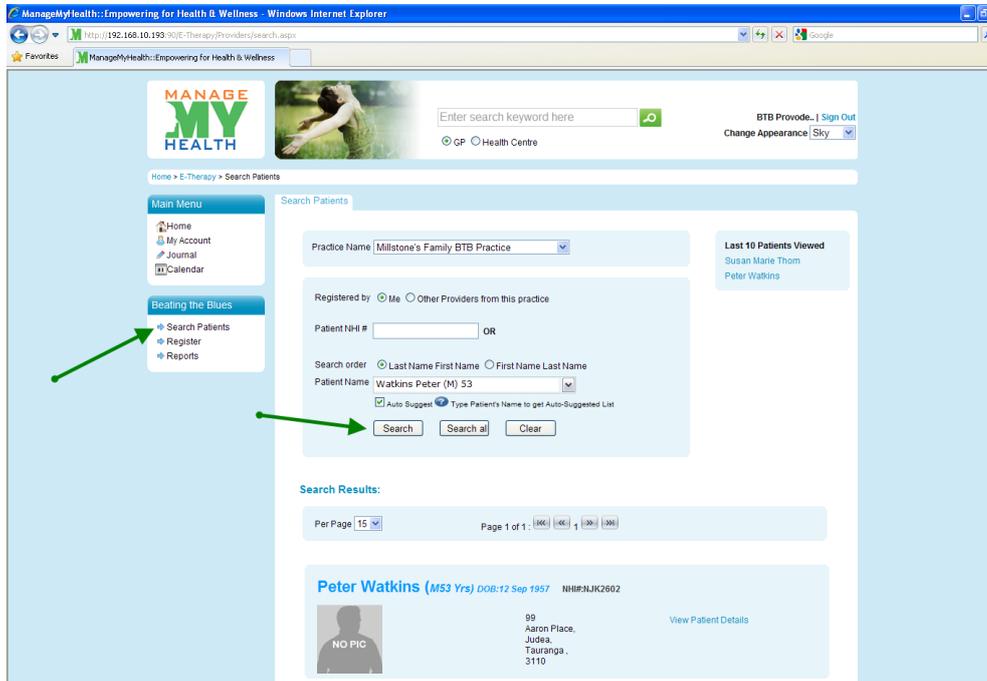


Figure 07

- Click on 'Restart Program'

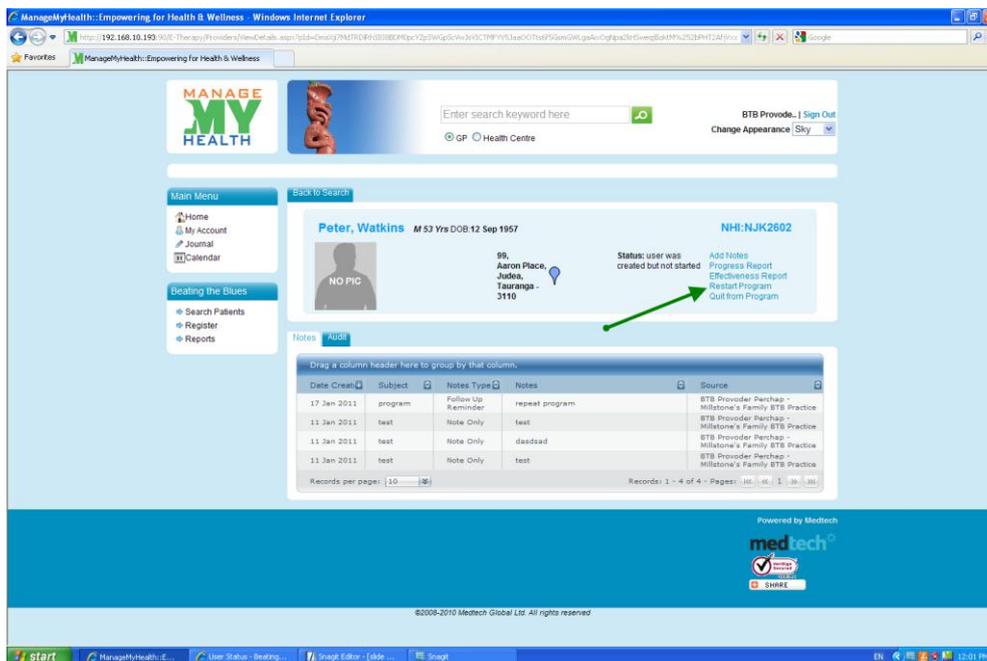
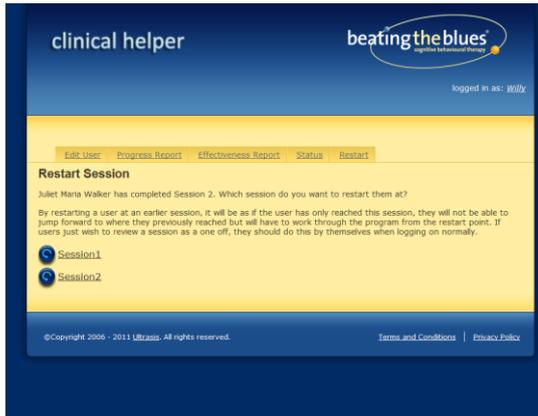


Figure 08

- Select an earlier session to restart



**Figure 09**

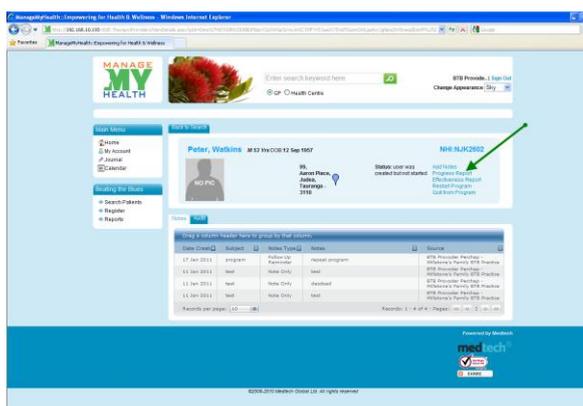
1. The system will then send an email to the patient.

**Note:** If you restart a patient, the information they have entered which measures their progress will be deleted from the database and they will be asked to indicate their progress in terms of depression, anxiety, problem distress levels and session feedback as they redo each session. All other information entered will remain in the database but the patient will be able to overwrite this should they wish as they redo each session.

## Viewing Patient Progress Reports

You can view a patient's Progress Reports at any time. To view a Progress Report:

- Log on to ManageMyHealth™
- Enter patient's name; Select 'Search'
- Click 'View Patient Details' within the patient banner
- Select 'Progress Report'
- Click 'Progress Report'

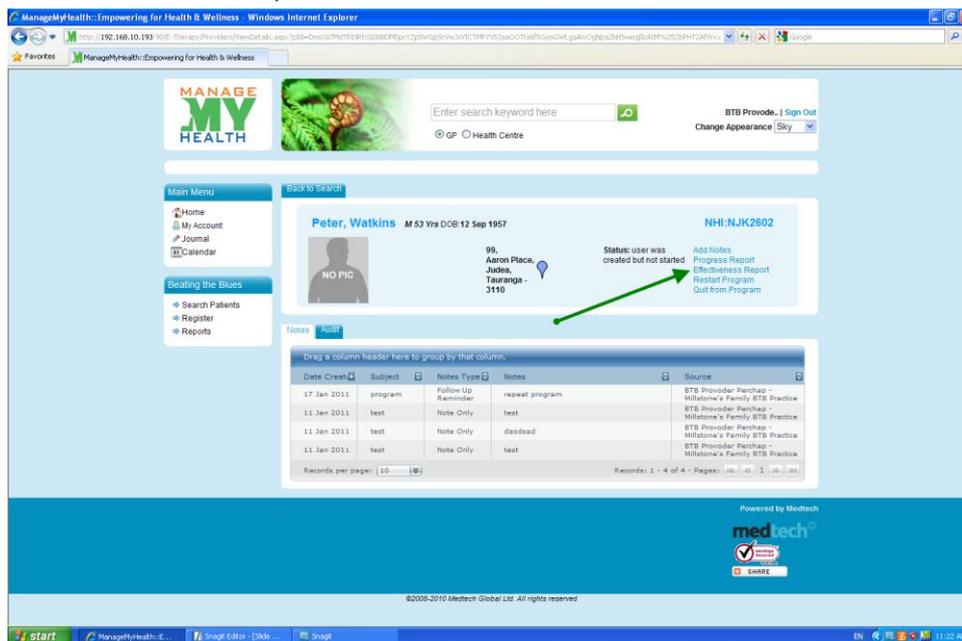


**Figure 10**

## Viewing Effectiveness Reports

You can view an Effectiveness Report at any time. To do this:

- Log on to ManageMyHealth™
- Enter patient's name; Select 'Search'
- Click 'View Patient Details' within the patient banner
- Select 'Effectiveness Report'
- Click 'Effectiveness Report'



**Figure 11**

The Effectiveness Report contains information on how the patient has answered the Evaluation Questionnaires (PHQ-9, and/or GAD-7). If you want to see how they have answered each question, click on the 'Individual' link and you'll be presented with the full information on their questionnaires.

Please note, Effectiveness Reports are intended for use once the patient has completed Beating the Blues®. While it is possible to view them when a patient is still using the programme, they provide most information, when the patient has completed all 8 sessions, or after completing an effectiveness questionnaire.

## Changing a Patient's Status

From time to time it will be necessary to change a patient's status within Beating the Blues®. There are three patient status categories:

- Active – Patients are 'Active' between starting session 1 and completing Session 8
- Completed – Patients who have completed all 8 sessions.
- Quit – Patients who have stopped using Beating the Blues® before completing all 8 sessions, and have been officially marked as Quit.

It is important that Patient Status is managed effectively as this will affect the data provided by the reports produced by Beating the Blues®.

If patients are no longer using Beating the Blues® – they should be marked as ‘Quit’. They will then be included in reports on the system usage.

Patients should only be deleted if they are not a correct patient registration for the programme. This may be because an account has been set up in error, or a duplicate account has been set up. Deleted patients will not be included in any reports.

Depending on the patient’s current status it is only possible to assign certain new status categories, as follows:

Not Started – can only be deleted

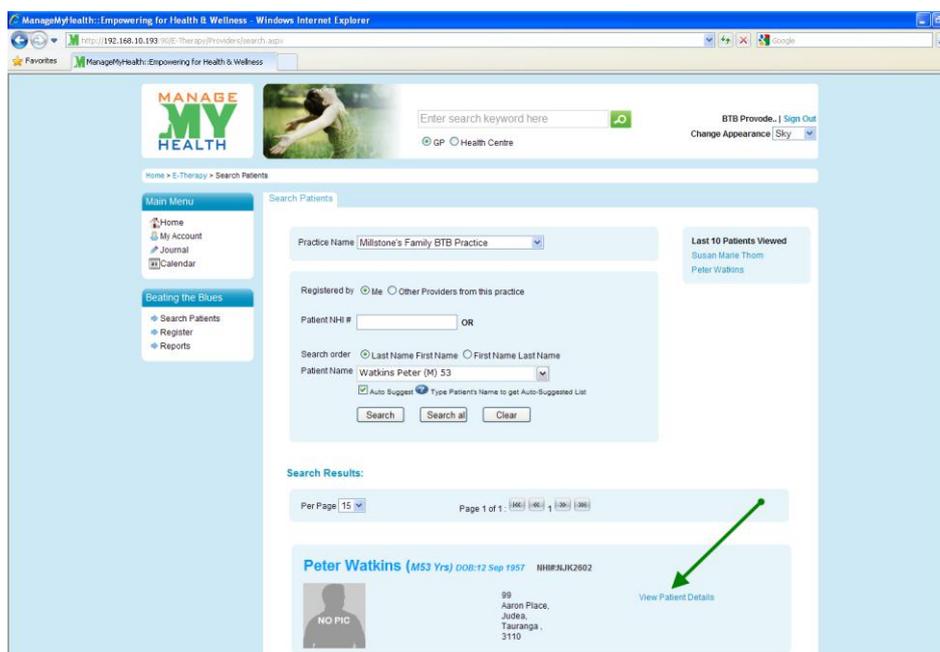
Active – can be deleted or Quit

Completed – can only be deleted

Quit – can be restarted or deleted

To change a patient’s status:

- Log on to ManageMyHealth™
- Enter patient’s name; Select ‘Search’
- Click ‘View Patient Details’ within the patient banner



• **Figure 12**

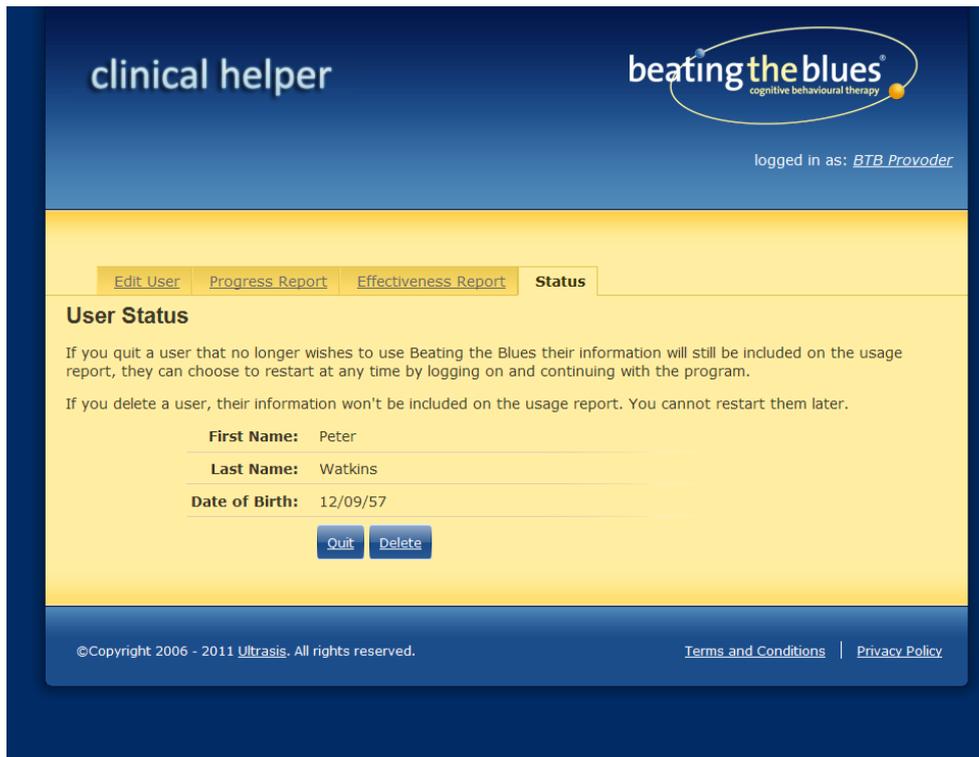
- Click on 'Quit from Program' button

The screenshot shows the ManageMyHealth web application interface. At the top, there is a search bar and a 'Sign Out' button. The main content area displays the patient profile for Peter Watkins, including his name, age (53), date of birth (12 Sep 1957), and NHI number (NJK2602). A green arrow points to the 'Quit from Program' button in the right-hand menu. Below the profile, there is a table of notes with columns for Date Created, Subject, Notes Type, Notes, and Source.

Date Created	Subject	Notes Type	Notes	Source
17 Jan 2011	program	Follow Up Reminder	repeat program	BTS Provider Penhamp - Milstone's Family BTS Practice
11 Jan 2011	test	Note Only	test	BTS Provider Penhamp - Milstone's Family BTS Practice
11 Jan 2011	test	Note Only	deadkad	BTS Provider Penhamp - Milstone's Family BTS Practice
11 Jan 2011	test	Note Only	test	BTS Provider Penhamp - Milstone's Family BTS Practice

Figure 13

- Click 'Quit' or 'Delete'



**Figure 14**

Any patient who has been quit can restart themselves by simply logging on and continuing with the programme – if they do this their status will automatically be returned to 'Active'.

## Managing Patients who want to Quit

If a Patient wants to Quit Beating the Blues® they can indicate that they want to do so by responding to one of the reminder emails that are automatically sent when they haven't logged on for over a week. If a patient indicates that they want to quit then they will appear on the 'Quit Request' tab of the patients lists.

- Search for patient
- Click 'View Patient Details'
- Click on 'Quit from Program' button

If they have requested to quit online, there will be a reason the patient has selected. If they haven't requested this online you'll need to choose a reason from:

- I feel Better
- Other

If you or the patient chooses 'Other' then you must enter some text in the text box to explain why.

If a patient has reached the end of Session 2 and states that they feel better, then this patient will be included in the usage report as a 'completer'.

Any patient who has been quit can restart themselves by simply logging on and continuing with the programme – if they do this their status will automatically be returned to 'Active'.

## Managing Patient Progress

It is necessary to monitor a patient through Beating the Blues®. This is required for several reasons.

To get the best use from the programme patients should complete a session a week. They should therefore be monitored to ensure they are logging on to the sessions on a regular basis.

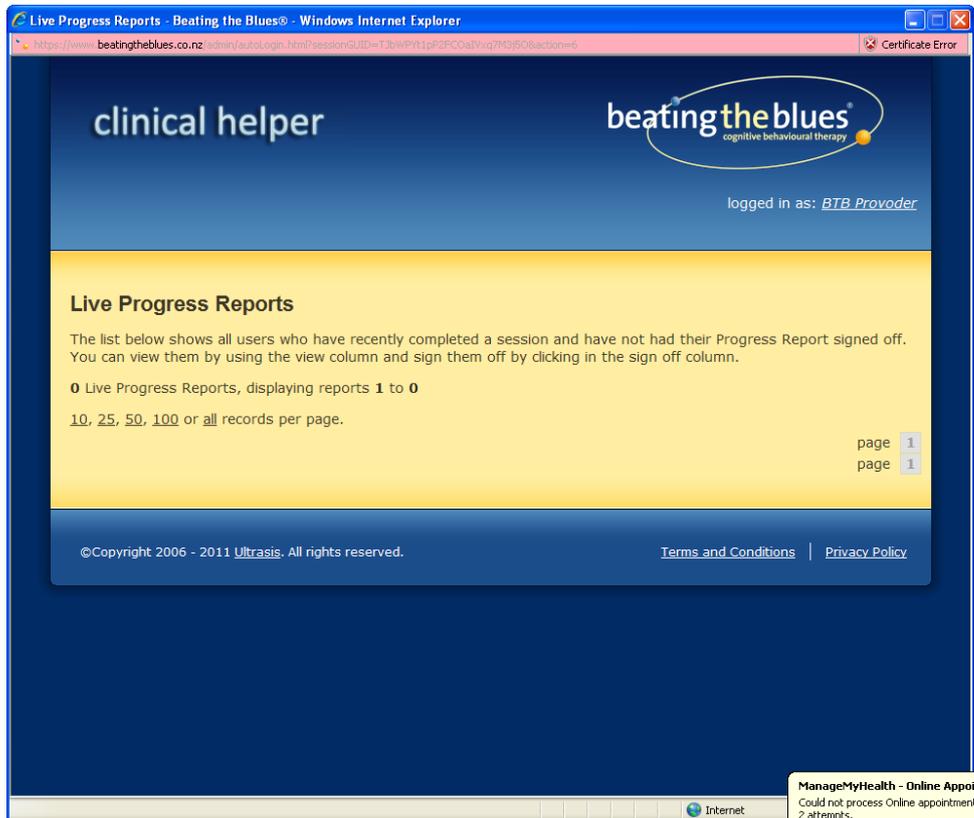
It is also important to sign off each patient's Progress Report after they complete each session.

## Signing Off Patient Progress Reports

All Progress Reports need to be signed off by a health provider. Until they have been actively signed off they are kept in the Live Progress Reports Screen.

To Access this screen:

- On the Beating the Blues® homepage, click on 'Reports'



**Figure 15**

This screen shows all reports which are yet to be signed off and some key data including: name, birth date, session completed and the date it was completed. It also includes whether the patient reported suicidal thoughts and how strong they rated those thoughts to be.

Please Note: if a patient has suicidal thoughts it is up to you to decide how to act upon this information.

You can view a report by clicking on the 'View' button.

To Sign Off the reports, tick 'Sign off' on the appropriate line(s). Once a report has been signed off, it will be removed from the list and the patient's latest report will be available from within their account page.

We recommend reviewing and signing off the outstanding Progress Reports on at least a weekly basis.

If your patient has more than 1 live Progress Report, the reports will be listed in session order.

## Saving Reports

To save a report outside the Beating the Blues® system. First go to the report in the system.

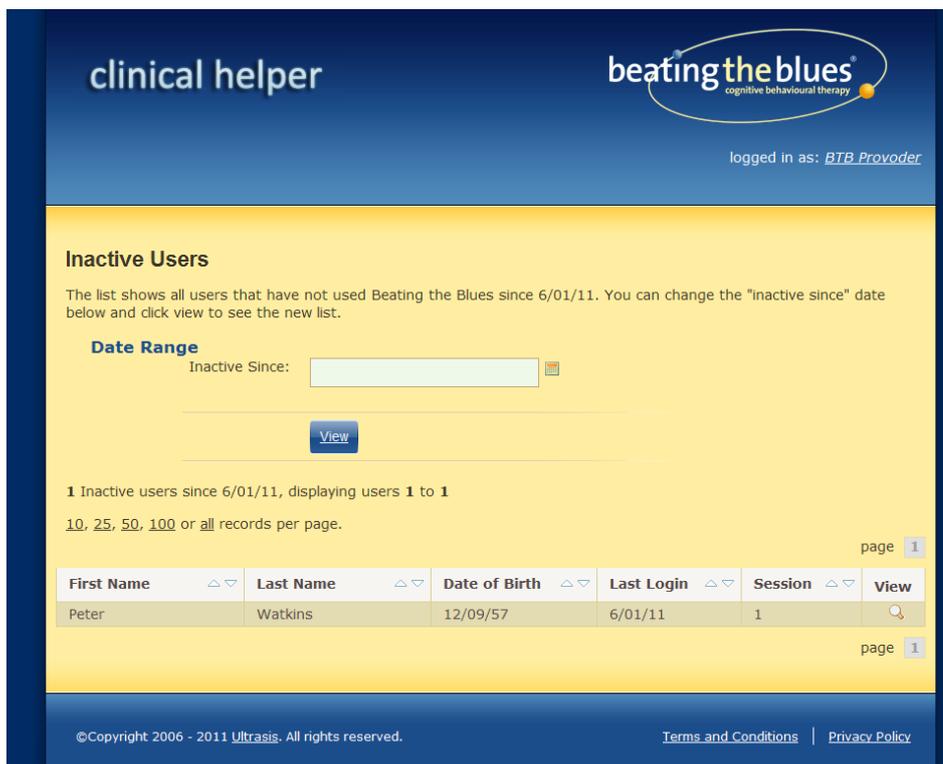
In the explorer window, click on File/Save As. This will bring up a dialogue box. Choose the file name and location and set 'Save As Type' as 'webpage complete'. Then click Save. This will save the report at your selected location and allow you to access the report without logging onto Beating the Blues®.

This save function works for all report types within Beating the Blues®.

## Viewing Unused Accounts

It is also possible to see whether patients have not logged in for some time. To do this:

- On the Beating the Blues® homepage, click on 'Reports'
- Click on 'Inactive Users'



clinical helper

beatingtheblues<sup>®</sup>  
cognitive behavioural therapy

logged in as: [BTB Provider](#)

### Inactive Users

The list shows all users that have not used Beating the Blues since 6/01/11. You can change the "inactive since" date below and click view to see the new list.

**Date Range**

Inactive Since:

[View](#)

1 Inactive users since 6/01/11, displaying users 1 to 1

10, 25, 50, 100 or all records per page.

page 1

First Name	Last Name	Date of Birth	Last Login	Session	View
Peter	Watkins	12/09/57	6/01/11	1	<a href="#">View</a>

page 1

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**Figure 16**

Here you can see who hasn't logged in for some time. It is defaulted to looking for Patients who have not logged in for 2 weeks. You can change the search date at the top of the page to look for patients who haven't logged in for some time – for example over a month.

You should then contact those patients to find out why this is the case. If they have stopped using Beating the Blues®, then they should be marked as Quit.

## Reminder Emails

The system will send you emails to inform you when your patients do not log in.

If you receive these emails, you should contact the patient to find out why they have not been logging in. If they have stopped using Beating the Blues®, you should mark them as having quit as this will ensure your usage data and reports are accurate.

If a patient has stated they are seriously considering suicide (self-rating from 5–8) in any session, when they complete the session you will be sent notification advising you to view their Progress Report. This should be acted upon according to your systems for managing patients with suicidal ideation.

## Usage Reports

This function provides a printout of the number of patients who have used Beating the Blues® and the total number of sessions completed.

The report is divided into 4 sections

### **Section 1: Patient Data**

This gives an overview of the patients using the system. The reports show how many patients have used the system and break that number down by, Gender, Age, and Ethnicity. They also show how many patients complete the 8 sessions, and how many drop out.

### **Section 2: Feedback**

This shows a summary of the feedback provided by patients by session.

### **Section 3: Evaluation Graphs**

This shows a summary of how patients have reported their anxiety, depression and problem distress levels by session. Additionally, this section contains a summary of Evaluation Questionnaires. It gives a pictorial view of whether overall these levels have reduced as patients go through the 8 sessions.

To view the Usage Report:

- On the Beating the Blues® homepage, click on 'Reports'
- Click on 'Usage report'
- Enter the dates you want the report to cover. If you leave the fields blank you will see all the data on your account.

## Information Security

The security of patient information is extremely important in Beating the Blues<sup>®</sup>.

All Beating the Blues<sup>®</sup> data is held centrally on a securely-hosted server in New Zealand and there are a series of controls to ensure that this data remains secure, available and accurate.

All Patient Identifiable data is encrypted while being transferred from the patient's computer to the server using 256 bit encryption. All patient data is completely confidential and is not accessed by anyone at Medtech Limited unless requested to do so to support a patient with the programme.

## Evaluation Questionnaires

Beating the Blues<sup>®</sup> offers 2 questionnaires to monitor patient progress:

- PHQ-9
- GAD-7

These questionnaires are provided free of charge.

You can see the questionnaire results for the individual on their Effectiveness Report, and for a group of patients on the Usage Report.

### **Why are these Questionnaires in Beating the Blues<sup>®</sup>?**

The questionnaires are validated measurement tools, developed to help providers of treatments for depression and anxiety to measure severity, monitor progress and assess outcomes.

The questionnaires have two purposes in Beating the Blues<sup>®</sup>:

- i. A patient's individual responses can be used to monitor their progress and to estimate the degree of improvement. Questionnaire scores for individual patients are presented in the Effectiveness Report.
- ii. Mean (i.e. averaged) anonymised data, obtained from the questionnaires for all the patients, can be used to provide an evaluation of the overall performance of Beating the Blues<sup>®</sup> in your practice or service. This data is presented in the Usage Report.

Medtech Limited may also use the anonymised information, in confidence, to provide an overall view of the performance of Beating the Blues<sup>®</sup>.

### **About PHQ-9**

The PHQ-9 was developed by Drs. Robert L. Spitzer, Janet B.W. Williams, Kurt Kroenke and colleagues, with an educational grant from Pfizer Inc. It is reproduced with permission of Pfizer Inc. (Copyright © 2005 Pfizer, Inc. All rights reserved.)

The PHQ-9 is a 9 item questionnaire which is based on the diagnostic criteria for depression recognised in the DSM IV criteria.

The questionnaire can be used for diagnosis and as a measure of severity post diagnosis. In Beating the Blues® it is more appropriate for use as a severity measure and is scored accordingly:

Each question has the following options (with their score in brackets):

- Not at all (0)
- Several Days (1)
- More than half the days (2)
- Nearly Every Day (3)

The score for each question is totalled to produce a score between 0 and 27. Scoring bands\* have been defined by Beating the Blues® as follows:

- 0–4: No Depression
- 5–9: Mild Depression
- 10–14: Moderate Depression
- 15–19: Moderately Severe Depression
- 20+: Severe Depression

\*Note that raw PHQ-9 scores only are provided in reports for clinician interpretation. Note also that differing scoring bands are used in current New Zealand guidelines – see box.

Box. PHQ-9 Scoring in current New Zealand guidelines

PHQ-9	Provisional Diagnosis
10–14	Mild depression
15–19	Moderate depression
≥ 20	Severe depression

Source: Identification of Common Mental Disorders and Management of Depression in Primary Care (NZGG, 2008). [www.nzgg.org.nz](http://www.nzgg.org.nz)

Based on scoring used by the MacArthur Initiative on Depression and Primary Care at: [www.depression-primarycare.org](http://www.depression-primarycare.org).

## About GAD-7

The GAD-7 was developed by Drs. Robert L. Spitzer, Janet B.W. Williams, Kurt Kroenke and colleagues, with an educational grant from Pfizer Inc. It is reproduced with permission of Pfizer Inc (Copyright © 2005 Pfizer, Inc. All rights reserved.)

This seven-item scale is used as a screening tool and severity measure for generalised anxiety disorder. In Beating the Blues® it can be used as a severity measure for monitoring symptoms of anxiety, and is scored accordingly:

Each question has the following options (with their score in brackets):

- Not at all (0)
- Several Days (1)
- More than half the days (2)
- Nearly Every Day (3)

The score for each question is totalled to produce a score between 0 and 21. Scoring bands are defined as follows:

0–4: No Anxiety

5–9: Mild Anxiety

10–14: Moderate Anxiety

15+: Severe Depression

# Technical Support Guide

## System Requirements

The following minimum system requirements are needed in order to run Beating the Blues®.

- Internet Explorer 8 (or above) or Firefox 1.5 (or above)
- Flash 9.0.115 or above
- JavaScript Enabled
- Broadband internet connection of at least 512 Kbps
- Intel Pentium 3 running at 1 GHz or Equivalent
- 256 Mb RAM or more
- 64 Mb Graphic card and support in screen resolution of 800x600
- Sound card and speakers or earphones
- Printer
- Regrettably we are unable to support patients using Linux

## Information about internet connectivity

3G mobile broadband cards/USB adapters – we do not recommend the use of 3G cards/adapters for the use of Beating the Blues®. Signals can vary and while they may secure the minimum bandwidth requirements, the availability can fluctuate and is unlikely to provide a seamless service.

If a patient is working on a shared network then the bandwidth available is shared with others using the network. If other network users are using large amounts of bandwidth, that will affect the bandwidth available to the patient.

## Introduction

This guide is designed to provide you with some simple steps to help you troubleshoot difficulties that may arise with the Beating the Blues® package and equipment.

For detailed instructions please refer to the user manuals that accompany the equipment.

## Beating the Blues®

Problem: The programme freezes during a session, and the patient is unable to continue.

Patient should use the refresh button to reload the page.

## Videos

Videos are the largest files on the system and may take some time to download.

If the videos are jumping or sticking, this is probably because the internet connection is not providing sufficient speed. Please check if the bandwidth is adequate with the internet provider.

## Technical Support Line

If you have any problems that have not been addressed in the Technical Support Guide or cannot be solved with the above solutions, please call the Medtech Technical Support Line during normal business hours:

**0800 263 3832**

This number should not be given to patients. You are your patients' first port of call. If you are unable to resolve their issue, please contact Medtech on the number above.

# Appendix 1 – Progress Report



Figure 17