

# Transdiagnostic Decision Tool

## Objective

The Transdiagnostic Decision Tool is a six-item clinician-administered screening measure designed to facilitate the early identification of patients with mental health problems in need of highly specialized care during. The Transdiagnostic Decision Tool contains six domains (severe primary diagnosis; treatment-interfering psychiatric comorbidity; treatment-interfering somatic comorbidity; treatment-interfering psychosocial dysfunctioning; severe or longstanding childhood trauma; previous unsuccessful treatment of the current primary diagnosis in specialised care). Response options are "Yes" and "No", scored as 1 and 0, respectively. The total score is calculated as the sum of the individual items scores and, hence, ranges from 0 to 6.

The instrument is a tool for the assessment of highly specialised care need. It is possible to reasonably deviate from the outcome of the Decision Tool, taking the patient's individual circumstances, patients' preferences, the individual's level of motivation and the available treatment resources.

Completing the decision tool will take approximately 5 minutes.

Your findings are both relevant for discussion in a multidisciplinary consultation and in a consultation with the patient.

NB The Dutch translation of the Transdiagnostic Decision Tool was tested for its psychometric properties; the psychometric properties of other translations are to be tested in future studies.

# Transdiagnostic Decision Tool

Name of patient:

Date:

Name of clinician:

1. Does the patient have a severe primary diagnosis?

Note:

- The primary diagnosis is the most resource-intensive diagnosis.
- Indication of severe: SCL-90 high or very high in comparison to a normative sample of outpatients; BSI high or very high in comparison to a normative sample of outpatients; DSM-5 severe.

- yes  
 no

Comment

2. Does the patient have at least one diagnosed comorbid psychiatric disorder that interferes with the treatment of the primary diagnosis?

Note:

- Also think of personality disorders, development disorders, addiction, and intellectual disabilities.
- There is interference if the diagnosed comorbid disorder complicates the clinical presentation of the primary diagnosis, or the treatment of the primary diagnosis.

- yes  
 no

3. Does the patient have somatic comorbidity that interferes with the treatment of the primary diagnosis?

Note: There is interference if the somatic comorbidity complicates the clinical presentation of the primary diagnosis, or the treatment of the primary diagnosis.

- yes  
 no

4. Does the patient exhibit severe psychosocial dysfunctioning that interferes with the treatment of the primary diagnosis?

Note:

- Indication of severe psychosocial dysfunctioning: GAF $\leq$ 50 or WHODAS $\geq$ 130.
- There is interference if the psychosocial dysfunctioning complicates the clinical presentation of the primary diagnosis, or the treatment of the primary diagnosis.

- yes  
 no

5. Does the patient have a history of prolonged trauma/neglect in childhood?

- yes  
 no

6. Have there been any unsuccessful evidence-based treatments in specialized mental healthcare for the primary diagnosis?

- yes  
 no

**Total amount of positive (=yes) scores  $\geq$  3?**

Yes  $\rightarrow$  Indicated for highly specialized care on the basis of the Decision Tool

No  $\rightarrow$  Not indicated for highly specialized care on the basis of the Decision Tool