

# Outcomes for children and young people seen in specialist mental health services

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# Key questions to address

- What are the main issues that children and young people are seeking help with from mental health services?
- How well are we currently addressing these issues?
- What does this mean for the future shape of service provision?

# Plan of talk

- Overview
- Methods
- Findings
- Implications

# Overview

# Notes on terms

- Youth shorthand for children and young people.
- Parent shorthand for parent or carer.

# About CORC

- Leading membership organisation that collects and uses evidence from everyday practice to improve children and young people's mental health and wellbeing
- Members include mental health service providers, schools, professional bodies and research institutions
- CORC's **vision** is for all children and young people's wellbeing support to be informed by real-world evidence so that every child thrives
- [www.corc.uk.net](http://www.corc.uk.net)

The screenshot shows the homepage of the CORC website. At the top left is the CORC logo (Child Outcomes Research Consortium). To its right is a search bar and a 'Join Us' button. A navigation menu includes: About CORC, What CORC Does, Information Hub, Outcomes & Experience Measures, Training & Events, Features, and Head Start. The main banner features a photograph of a woman with short blue hair and glasses, looking to the side. Overlaid on the left of the banner is a dark teal box with the text: 'Member's Forum: Building an outcomes-focused service', a 'Sign up here' button, and a paragraph: 'Join CORC members to consider how to best address the challenges of measuring outcomes in a variety of settings across child and young person mental health care.' Below the banner is a light blue section titled 'I am a...' with a horizontal list of categories: Member, Practitioner, Organisation, Young Person, Parent or Carer, School, Researcher, and Commissioner. A white tooltip box below the list contains the text: 'Select which category best suits you from the list above to be shown content and information most relevant to you!'.

# CORC support for use of ROMS

- Annual member reports
- Practice development
  - Consultation
  - Regional meetings
  - National forums and conferences
- Programme of training & learning events
- Analysis of data & further research
- Information and guidance on [www.corc.net.uk](http://www.corc.net.uk)



# CORC Best Practice Framework

- Developed in 2015; Piloted in 2015/16
- Structured process for working towards best practice
- Whole system self-assessment
- 4 Themes:
  - Leadership & Management
  - Staff Development
  - Infrastructure & Information Management
  - Service User Experience



# Challenges for outcome collection and use in child mental health

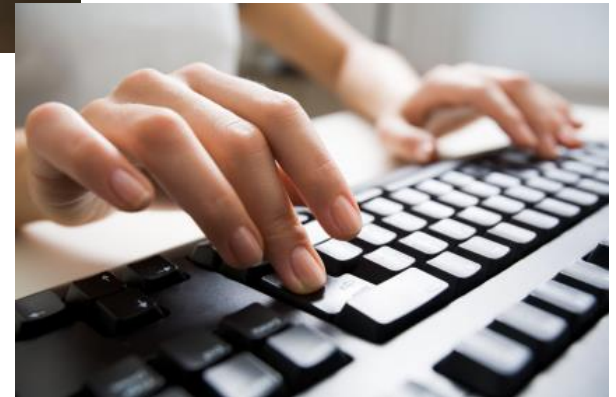
- Diversity of
  - Population
  - Measures
  - Metrics
- Lack of
  - Control groups
  - Comparison data
  - High quality data

# Measurement hard and not clear



# FUPS data

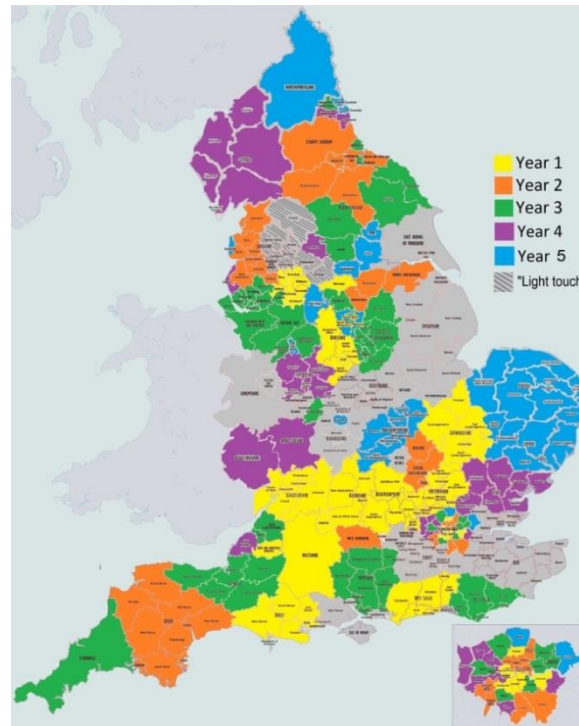
- Flawed
- Uncertain
- Proximate
- Sparse



# Methods

# Where data came from

- Analysis of routinely collected outcomes and experience data from 75 mental health services in England 2011-15 which were part of best practice service transformation (CYP IAPT)



# Acknowledgements: Outcomes and Evaluation Group

2011		2015	
1. Miranda Wolpert (Chair)	11. Kathryn Pugh	1. Miranda Wolpert (Chair)	11. David Clark
2. David Clark	12. Paul Wilkinson	2. Duncan Law	12. Paul Stallard
3. Margaret Oates	13. Claire Maguire	3. Cathy Troupp	13. Stephen Scott
4. David Wells	14. Damian Hart	4. David Trickey	14. Philippe Mandin
5. Bill Badham	15. Paul Stallard	5. Margaret Murphy	15. Rabia Malik
6. Duncan Law	16. Stephen Scott	6. Cathy Street	16. Anne York
7. Margaret Murphy	17. Andy Fugard	7. Barbara Rayment	17. Emma Morris
8. Jessica Deighton	18. Kevin Mullin	8. Margaret Oates	18. Peter Stratton
9. Ann York	19. Raphael Kelvin	9. Ro Rossiter	19. Jessica Deighton
10. Amandeep Hothi		10. Anne O Herlihy	20. Jenna Jacob

**Expertise in:** outcome monitoring in CAMHS, methods of collection and collating data, analysis and review of outcome measures, data handling and management, service delivery, meaningful involvement of children and young people, use of outcome measures across range of modalities, use with a range of groups including BAME.

# Acknowledgments: CORC team and colleagues

Jenna Jacob, Benjamin Ritchie, Kate Dalzell, Jenny Bloxham, Victoria Zamperoni, Elisa Napoleone, Andy Whale, Alison Ford, Sally Marriott, Meera Patel, Carin Eisenstein, Danielle Antha, Rebecca Neale and Mark Helmsley (Common Room). With thanks to past CORC team members: Isobel Fleming, Andy Fugard, Matt Barnard, Amy MacDougall, Craig Hamilton, Claudia Kanow and Lily Levy.

## CORC Board

Miranda Wolpert, Ashley Wyatt, Mick Atkinson, Julie Elliott, Kate Martin, Duncan Law and Ann York. With thanks to past CORC Board members Alan Ovenden and Tamsin Ford.



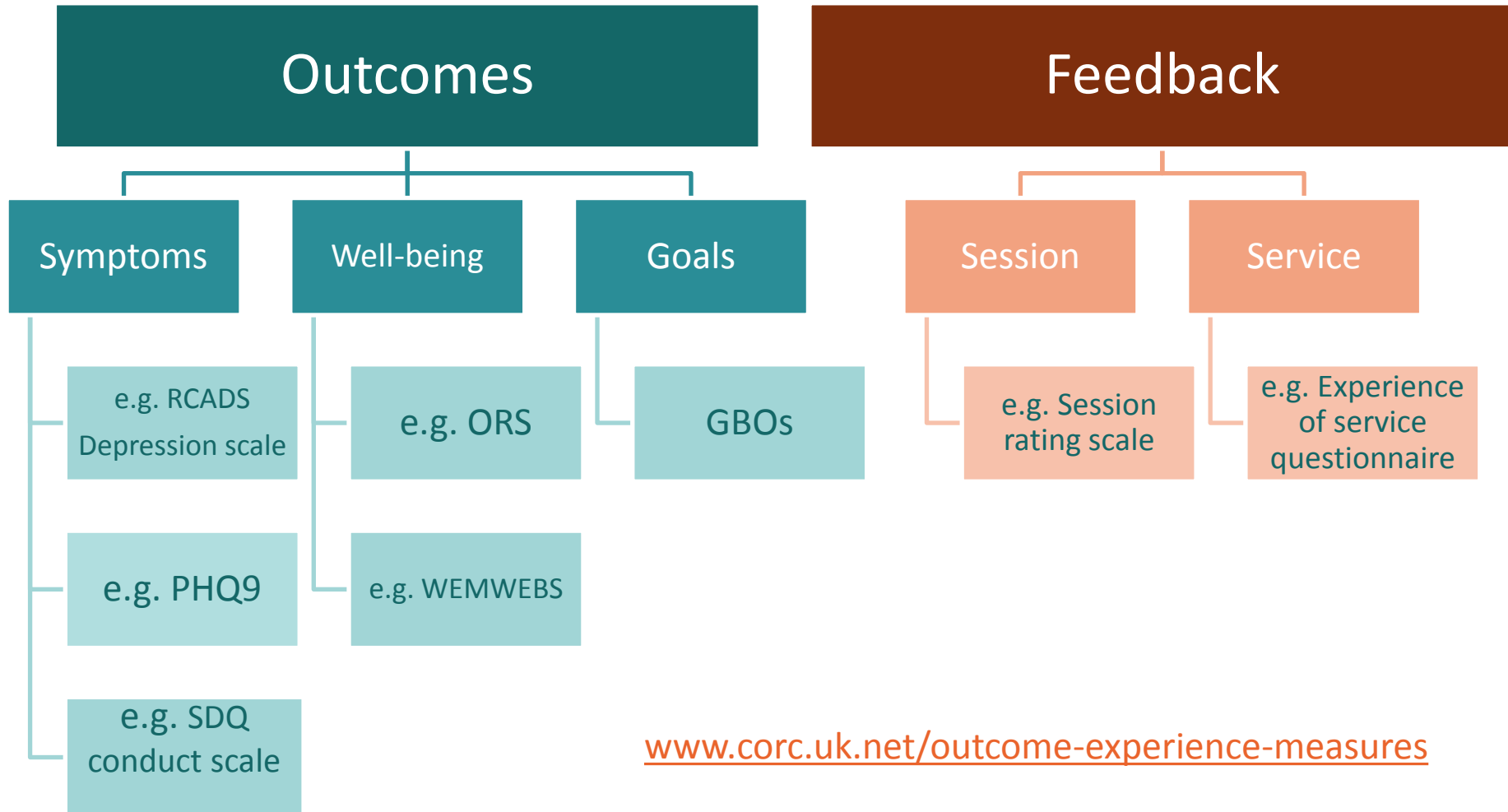
## In collaboration with

Evidence Based Practice Unit (UCL & Anna Freud National Centre for Children and Families): Julian Edbrooke-Childs, Peter Martin, Ana Calderon, Dan Hayes and Jessica Deighton

With thanks to: Lee Murray, Ailin Tarbinian and Dan Brown of MegaNexus, Tim Patterson at Click Databases, Kate Martin of Common Room

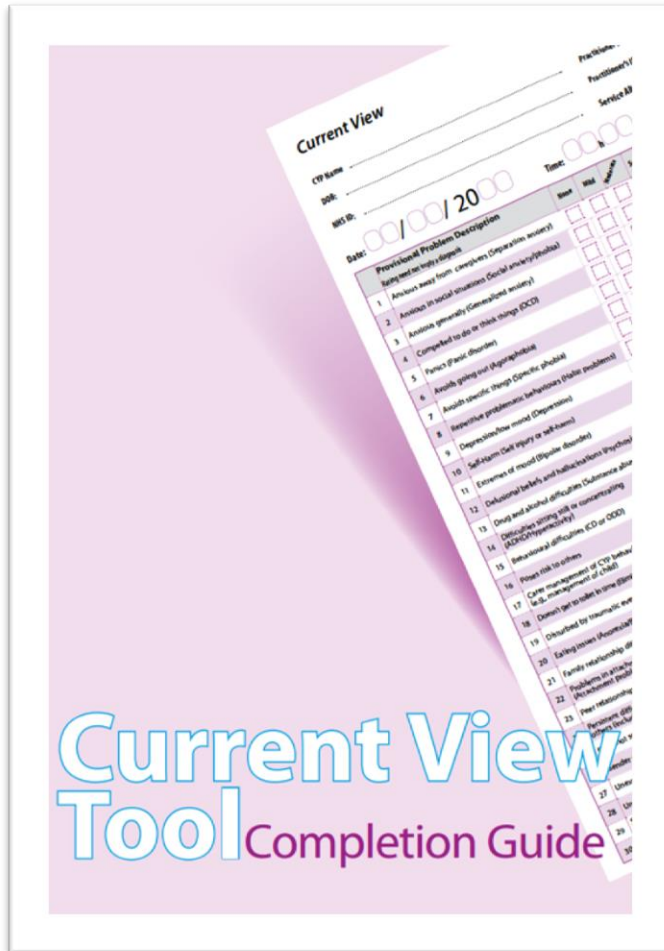


# Self and parent report measures



[www.corc.uk.net/outcome-experience-measures](http://www.corc.uk.net/outcome-experience-measures)

# Clinician measure of youth seen



## Current View

CYP Name \_\_\_\_\_ Practitioner's Name \_\_\_\_\_ Please indicate your reason for completing this form:

DOB: \_\_\_\_\_ Practitioner's ID \_\_\_\_\_  First Contact

NHS ID: \_\_\_\_\_ Service Allocated Case Id \_\_\_\_\_  Changed Situation

Date: / / 20 Time: 

Changed Understanding

Provisional Problem Description	None	Mild	Moderate	Severe	Not known
1 Anxious away from caregivers (Separation anxiety)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Anxious in social situations (Social anxiety/phobia)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Anxious generally (Generalized anxiety)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Compelled to do or think things (OCD)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Panics (Panic disorder)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Avoids going out (Agoraphobia)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Avoids specific things (Specific phobia)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Repetitive problematic behaviours (Habit problems)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Depression/low mood (Depression)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Self-Harm (Self injury or self-harm)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Extremes of mood (Bipolar disorder)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Delusional beliefs and hallucinations (Psychosis)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Drug and alcohol difficulties (Substance abuse)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Difficulties sitting still or concentrating (ADHD/Hyperactivity)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Behavioural difficulties (CD or ODD)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Poses risk to others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Carer management of CYP behaviour (e.g. management of child)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Doesn't get to toilet in time (Elimination problems)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19 Disturbed by traumatic event (PTSD)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Eating issues (Anorexia/Bulimia)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21 Family relationship difficulties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22 Problems in attachment to parent/carer (Attachment problems)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23 Peer relationship difficulties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24 Persistent difficulties managing relationships with others (includes emerging personality disorder)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25 Does not speak (Selective mutism)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26 Gender discomfort issues (Gender identity disorder)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27 Unexplained physical symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28 Unexplained developmental difficulties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29 Self-care issues (includes medical care management, obesity)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30 Adjustment to health issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SELECTED COMPLEXITY FACTORS	Yes	No	Not known
1 Looked after child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Young carer status	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Learning disability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Serious physical health issues (including chronic fatigue)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Pervasive Developmental Disorders (Autism/Asperger's)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Neurological issues (e.g. Tics or Tourette)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Current protection plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Deemed 'child in need' of social service input	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Refugee or asylum seeker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Experience of war, torture or trafficking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Experience of abuse or neglect	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Parental health issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Contact with Youth Justice System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Living in financial difficulty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CONTEXTUAL PROBLEMS					
	None	Mild	Moderate	Severe	Not known
HOME	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SCHOOL, WORK or TRAINING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COMMUNITY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SERVICE ENGAGEMENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EDUCATION/EMPLOYMENT/TRAINING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ATTENDANCE DIFFICULTIES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ATTAINMENT DIFFICULTIES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

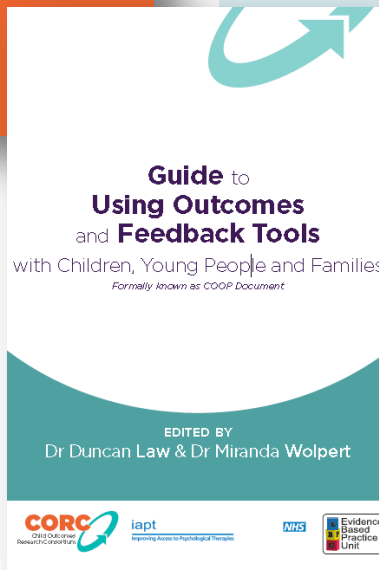
# Presenting Problems: Current View

1. Anxious away from care givers (Separation anxiety)	11. Extremes of mood (Bipolar disorder)	21. Family relationship difficulties
2. Anxious in social situations (Social anxiety/phobia)	12. Delusional beliefs and hallucinations (Psychosis)	22. Problems in attachment to parent/carer (Attachment problems)
3. General anxiety (generalised anxiety)	13. Drug and alcohol difficulties (Substance abuse)	23. Peer relationship difficulties
4. Compelled to do or think things (OCD)	14. Difficulties sitting still or concentrating (ADHD/Hyperactivity)	24. Persistent difficulties managing relationships with others (includes emerging personality disorder)
5. Panics (Panic Disorder)	15. Behavioural difficulties (CD or ODD)	25. Does not speak (selective mutism)
6. Avoids going out (Agoraphobia)	16. Poses risk to others	26. Gender discomfort Issues (GID)
7. Avoids specific things (Specific phobia)	17. Carer management of CYP behaviour (e.g. management of child)	27. Unexplained physical symptoms
8. Repetitive problematic behaviours (Habit problems)	18. Doesn't go to the toilet in time (Elimination problems)	28. Unexplained developmental difficulties
9. Depression/low mood (Depression)	19. Disturbed by traumatic event (PTSD)	29. Self-care issues (includes medical care management, obesity)
10. Self-harm (Self injury or self-harm)	20. Eating issues (Anorexia/Bulimia)	30. Adjustment to health issues

# Training in use of “patient-reported” outcome measures

Dr Duncan Law and Jenna Jacob  
**GOALS AND GOAL BASED  
OUTCOMES (GBOs)**  
Some Useful Information

Third Edition



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## Training Videos: Use of outcome measures



[Home](#) > [Information Hub](#) > Training Videos: Use of outcome measures

CORC have developed the following videos to be used in training on the use questionnaire outcome measures used in CORC+ and CYP IAPT. They are not intended to present perfect practice but rather to stimulate discussion. How might you do it differently or better? The scenarios are based on real clinical examples although the young people are played by actors in the videos. Copyright is owned by CORC and the therapists jointly who all give permission for the videos to be used in non-commercial training and CPD events.

### Introducing measures

- Introducing measures (example of Goals and RCADS with a young person with eating difficulties; introducing the measures, using the tools to find other information that might not have emerged from the clinical discussion and explaining what the measures are used for)
- Introducing measures and selecting symptom trackers (example of introducing Goals and RCADS and selecting symptom tracking measures with a young person with difficulties with mood)

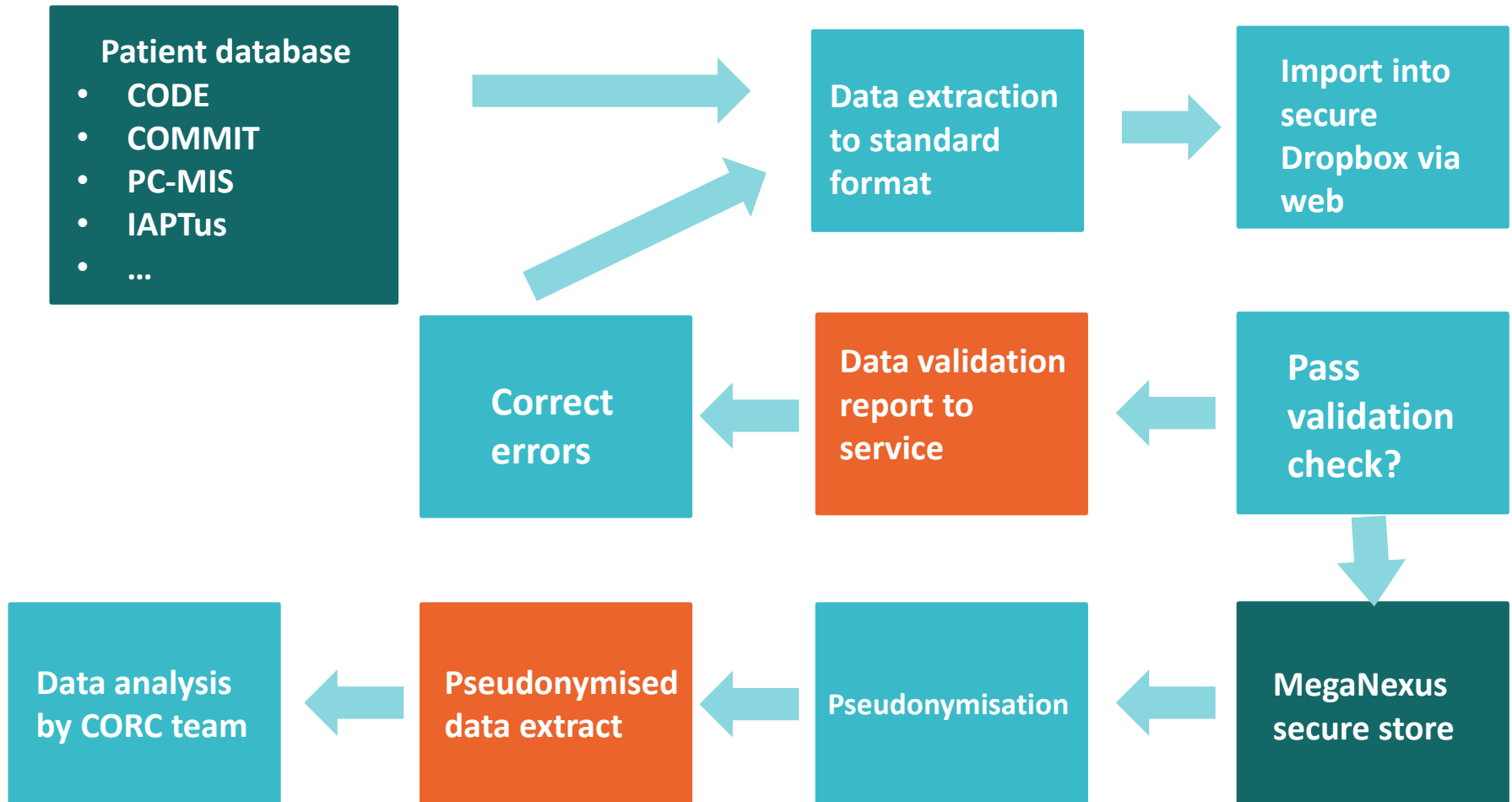
### Choosing measures

- Choosing a tracking measure (example with a young person with mood and sleep difficulties and self-harming)

### Scoring/completing measures with young people

- Completing questionnaires with young people (example of RCADS and SDQ with a young person with mood and sleep difficulties and self-harming)
- Using measures to help focus the session (example of using the symptom trackers with a young person with anxiety difficulties)

# Collection and collation of data

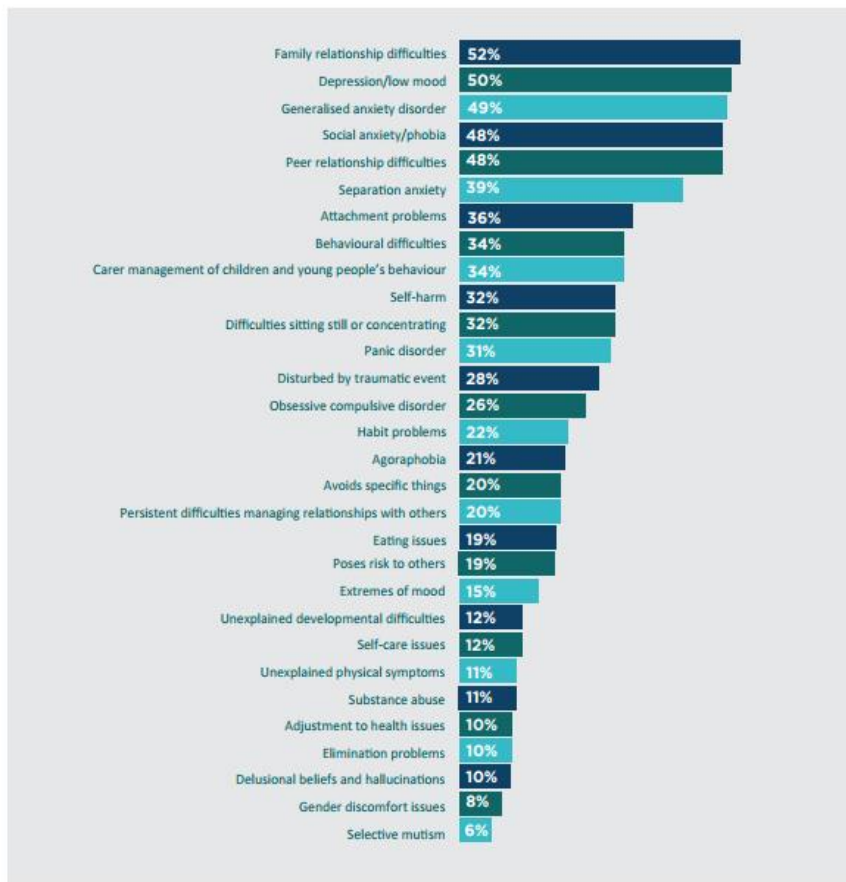


# Sample

- 96,325 records of care
- 81 (out of 82) partnerships
- Represent 91,503 youth because each separate episode of care creates a different case record

# Findings

# Who was seen: Presenting Problems



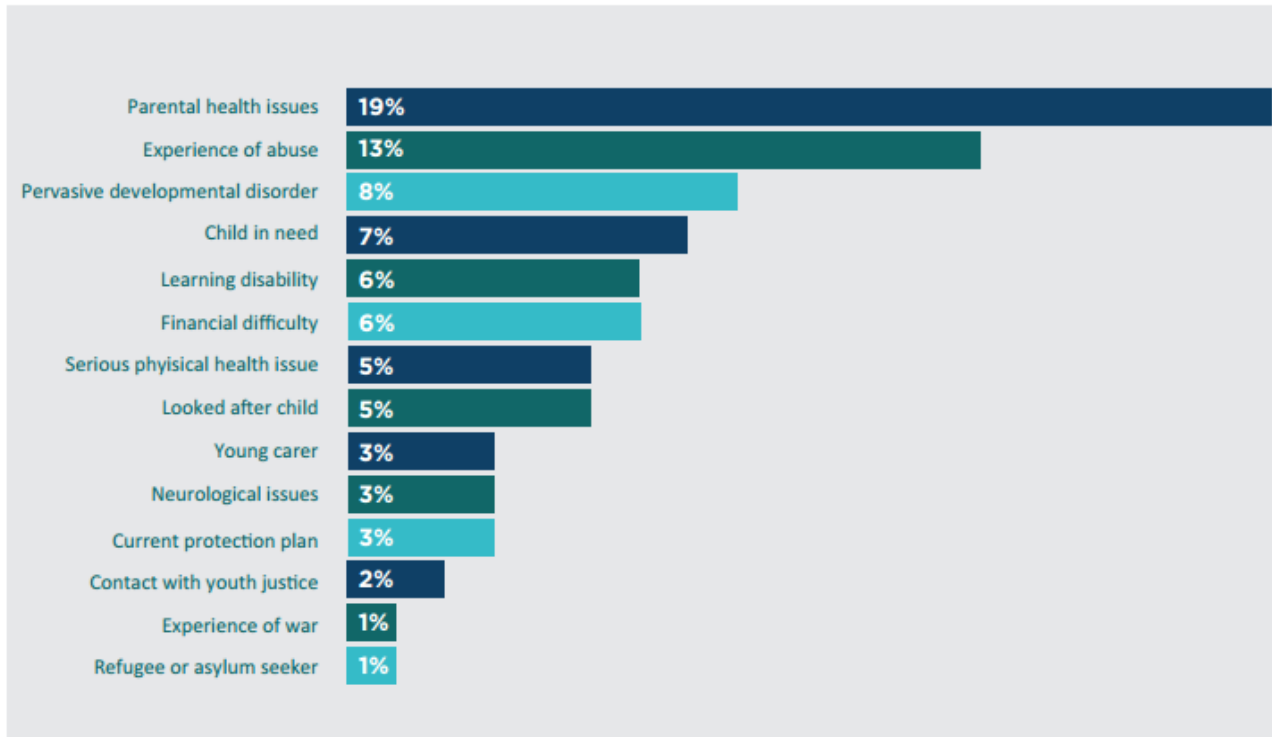
N = 42,798 (44% of the sample)

Percentages are out of those with a completed Current View form; categories are not mutually exclusive

Figure 3: Percentage of cases with a provisional problem descriptor endorsed as mild or above in the first recorded Current View.



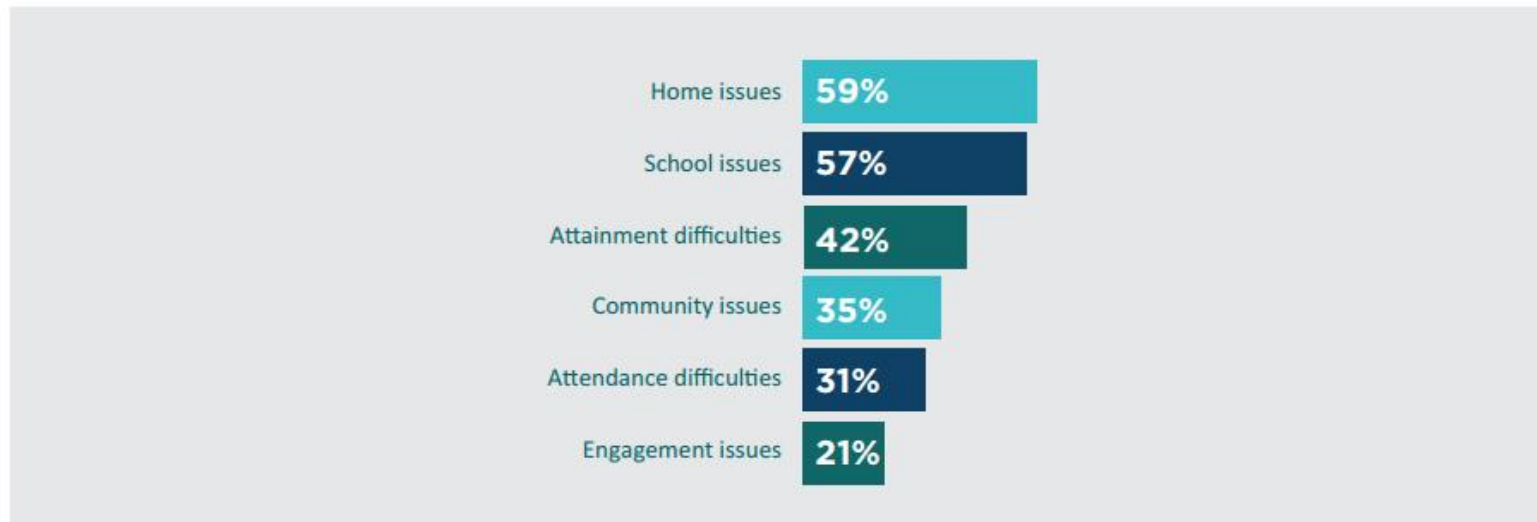
# Who was seen: Complexity factors



n = 42,798 (44% of the sample); percentages are out of those with a completed Current View form; categories are not mutually exclusive

Figure 4: Percentage of cases with a complexity factor endorsed in the first recorded Current View.

# Who was seen: contextual factors



**Figure 5: Percentage of cases with a contextual or attainment factor endorsed as mild or above in the first recorded Current View**

n = 42,798 (44% of the sample); percentages are out of those with a completed Current View form; categories are not mutually exclusive

# Who was seen in terms of presenting problems with NICE guidance for children and young people

1. Anxious away from care givers (Separation anxiety)	11. Extremes of mood (Bipolar disorder)	21. Family relationship difficulties
2. Anxious in social situations (Social anxiety/phobia)	12. Delusional beliefs and hallucinations (Psychosis)	22. Problems in attachment to parent/carer (Attachment problems)
3. General anxiety (generalised anxiety)	13. Drug and alcohol difficulties (Substance abuse)	23. Peer relationship difficulties
4. Compelled to do or think things (OCD)	14. Difficulties sitting still or concentrating (ADHD/Hyperactivity)	24. Persistent difficulties managing relationships with others (includes emerging personality disorder)
5. Panics (Panic Disorder)	15. Behavioural difficulties (CD or ODD)	25. Does not speak (selective mutism)
6. Avoids going out (Agoraphobia)	16. Poses risk to others	26. Gender discomfort Issues (GID)
7. Avoids specific things (Specific phobia)	17. Carer management of CYP behaviour (e.g. management of child)	27. Unexplained physical symptoms
8. Repetitive problematic behaviours (Habit problems)	18. Doesn't go to the toilet in time (Elimination problems)	28. Unexplained developmental difficulties
9. Depression/low mood (Depression)	19. Disturbed by traumatic event (PTSD)	29. Self-care issues (includes medical care management, obesity)
10. Self-harm (Self injury or self-harm)	20. Eating issues (Anorexia/Bulimia)	30. Adjustment to health issues

# Findings: who was seen- allocations to NICE-guided treatment

Table 5: Potential allocation to support guided by NICE guidelines

Index difficulties as indicated on current view	Percentage in CYP IAPT dataset	Relevant NICE guideline (at time of development of algorithm 2014)
Difficulties sitting still or concentrating (ADHD)	6%	ADHD NICE guideline 72
Pervasive developmental disorder (autism)	2%	Autism spectrum NICE guideline 170
Behavioural difficulties (conduct disorder or oppositional defiant disorder)	4%	Anti-social behaviour and conduct disorders NICE guideline 158
Extremes of mood (bipolar disorder)	1%	Bipolar disorder NICE guideline 185
Depression/low mood (depression)	5%	Depression NICE guideline 28
Anxious generally (generalised anxiety disorder, GAD) and/or panics (panic disorder)	5%	GAD and/or panic disorder NICE guideline 113
Compelled to do or think things (obsessive compulsive disorder, OCD)	1%	OCD NICE guideline 31
Disturbed by traumatic event (post traumatic stress disorder)	2%	PTSD NICE guideline 26
Self-harm (self-injury or self-harm)	6%	Self-harm NICE guidelines 16 and/or 133
Anxious in social situations (social anxiety or phobia)	2%	Social anxiety disorder by NICE guideline 159
Eating difficulties (anorexia, bulimia)	2%	Eating disorders NICE Guideline 9
Delusional beliefs and hallucinations (psychosis)	1%	Psychosis NICE guidelines 155 and/or 185
Co-occurring emotional problems	10%	One or more of NICE guidelines above
Co-occurring emotional and behavioural difficulties	2%	One or more of NICE guidelines above

n = 31,037 cases ; current view completed within 56 days of the recorded start of therapy .

Categories are mutually exclusive

# Findings: who was seen- not possible to allocate to evidence based guided treatment

**28%** Potentially assignable to “advice/signposting”

- Doesn't fit into any of the groupings
- No indication of significant problems i.e. all mild or only 1 moderate
- If moderate this not one of the “index” problems associated with the “NICE informed Groupings”

n = 42,798 (44% of the sample); categories are mutually exclusive

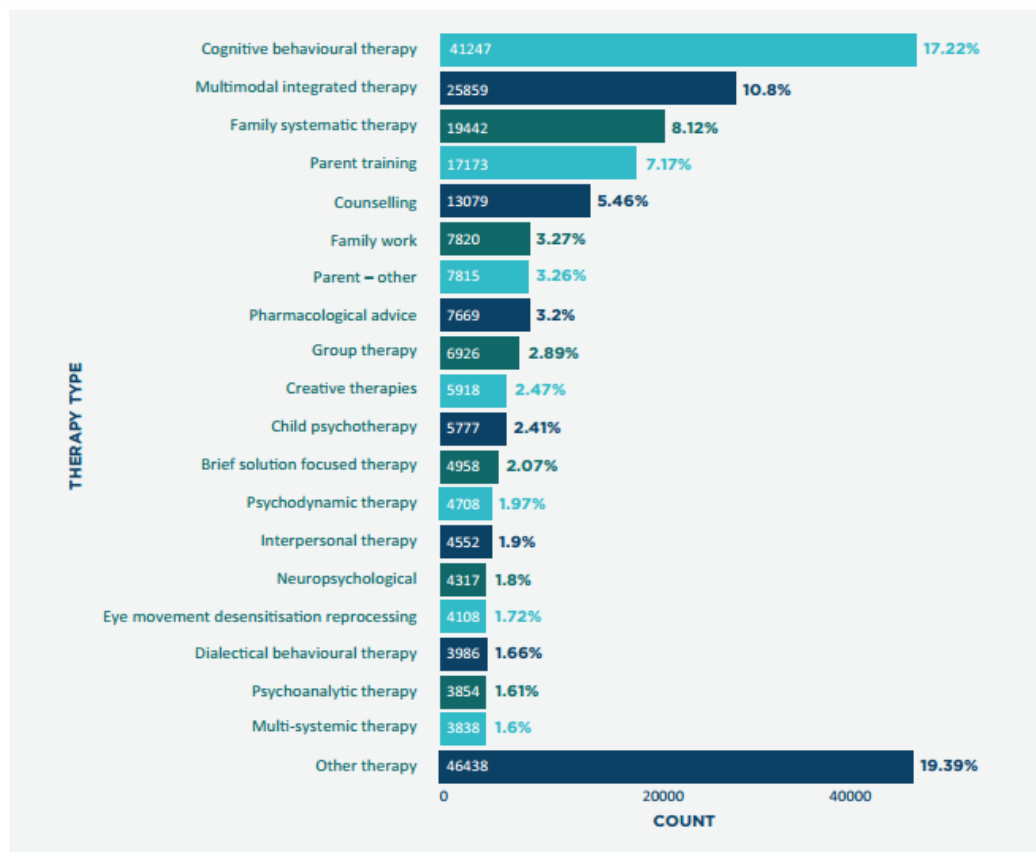
# Findings: who was seen- not possible to allocate to NICE- guided treatment

**25%** require clinician judgment as don't fit into any of the groupings but have:

- **19%** 2+ moderate or 1 severe (not assignable to NICE guideline suggested cluster)
- **9%** 2+ severe, and/or moderate or severe Delusional and/or Eating Issues and/or severe Extremes of Mood

n = 42,798 (44% of the sample); categories are mutually exclusive

# Findings: treatment provided



N=62,611 (65% of full sample)

**Figure 6: Therapy types for events attended for all cases**

Notes: Categories are not mutually exclusive.

# Treatment length

- 41,068 closed cases with at least 1 recorded event
- Mean no of events= 5.3 (SD = 7.8)
- Median = 3
- Range 1 – 268 events



# Self reported experience of care



**4 in 5 strongly agreed  
“good help”**

**82%**



**3 in 5 strongly agreed  
“convenient appointments”**

**62%**

N= 3196 (12% of closed treatment cases)

# Parent reported experience



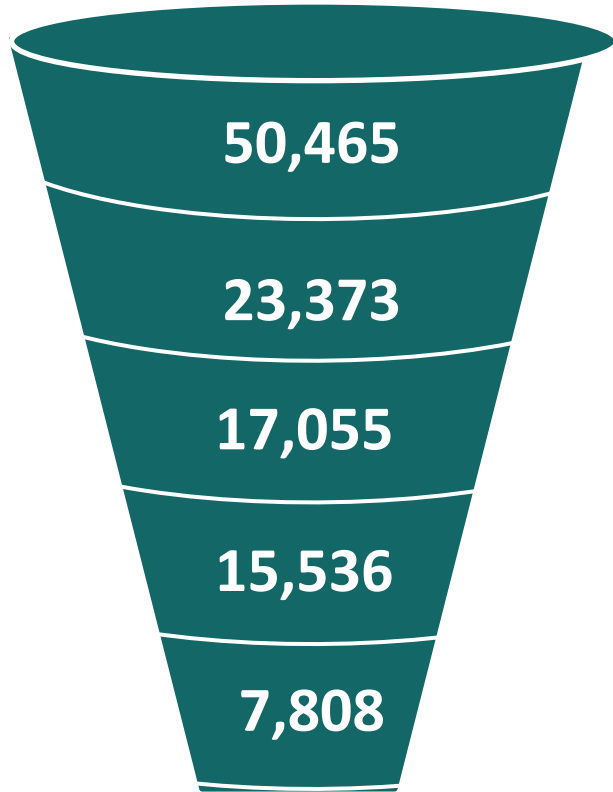
**9 in 10 strongly  
agreed “good help”  
88%**



**7 in 10 strongly agreed  
“convenient appointments”  
69%**

N= 2698 (12% of closed treatment cases)

# Sample for considering outcomes



Ended referrals

Closed treatment cases

Measured closed treatment cases sample

Above threshold closed treatment sample

Paired outcomes for above threshold

# FUPS data

- Flawed
- Uncertain
- Proximate
- Sparse



# Demographics

**Self-reported** outcomes were more likely to be from older and female respondents than being representative of the full sample.

Mean age 14, 72% female .



**Parent-reported** outcomes were more likely to relate to younger and male children than being representative of the full sample.

Mean age 11, 54% female.



# “Recovery” (crossing threshold/symptom free)

- Scores having moved from above the threshold on a measure to below the threshold on a measure.
- “recovery” referred to in inverted commas to differentiate from broader concept as reflected in the lived experience (e.g. Leamy, et al 2011).

# Note on “recovery”/symptom free

- Different measures used different ways to establish thresholds
- Where multiple measures used (mean = 4), no measure at end scored above threshold to be categorised as “recovered” (symptom free)

# Reliable change/measurable change

- Amount of change in scores on a scale
- Amount of change needed to be confident change is unlikely due to measurement fluctuation
- It tells us whether change reflects more than the fluctuations of an imprecise measuring instrument (Jacobson & Truax, 1991).



# Reliable recovery

- Combines recovery and reliable change
- Score needs to
  - Cross cut-off threshold
  - Change by a reliable amount
- Need to be careful about definition when you have more than one measure

# Movement towards goals

- 10 pt scale
- How close are you to reaching your goals
- 0= nowhere, 10=completely

# Self-reported “recovery”/symptom free



**1 in 3**

***Scores below threshold on all measures***

**36% (95% CI 35% – 37%)**

***Mean no of measures = 4 (SD 2.5 range 1-13)***

**N= 5896 (25% of closed treatment cases)**

# Self reported reliable improvement



**1 in 2**

***Scores improved more than likely due to measurement error on at least one measure and on no measure reliably deteriorated***

***52% (95% CI 51.7-52%)***

***Mean no measures = 4 (SD 2.5 range 1-13)***

N= 5896 cases (25% of closed treatment cases)

# Self reported reliable deterioration



**1 in 10**

*Scores deteriorated on at least one measure more than likely due to measurement error (may have improved on others)*

**9% (95% CI 8.5%-9%)**

***Mean no of measures= 4 (SD 2.5, range 1-13)***

**N= 5896 cases (25% of closed treatment cases)**

# Self reported movement towards goals



**9 in 10**

***Moved towards goals by at least 1 point on a 10 point scale***

**86%**

***Mean change= 4 points***

***NB 5% moved away from goals***

**2784 cases (12%)**

# Parent reported youth “recovery”/symptom free



**1 in 4**

***Scores below threshold on all measures***

***26% (95% CI 25%-27%)***

N= 3707 (6% of closed treatment cases)

# Parent reported reliable improvement



4 in 10

*Scores improved more than likely due to measurement error  
and on no measure reliably deteriorated*

*40 % (95% CI 51.7-52%)*

N= 3707 (6% of closed treatment cases)



# Parent reported reliable deterioration



**1 in 10**

*Scores deteriorated on at least one measure more than likely due to measurement error (may have improved on others)*

**9% (95% CI 8.6%-9%)**

***Mean no of measures= 4 (SD 2.5, range 1-13)***

**N= 3707 (6% of closed treatment cases)**

# Parent reported movement towards goals



9 in 10

*Moved towards goals by at least 1 point on a 10 point scale*

**87%**

**Mean move in scales= 4 points;**

**NB 3% reported movement away from their goals**

N= 686 (3% of closed treatment cases)

# Comparison with other findings

Consistent with findings from other countries and with “recovery” or change rates in areas of physical health:

## USA



**29/32%** reliable improvement,  
**15%/30%** “recovery”  
**13/19%** reliable deterioration

## Norway



‘relatively few children and youth with emotional disorders experience clinical significant and statistical reliable change’

## Paediatric diabetes



Control of blood sugar has moved from nearly **15%** of cases to nearly **24%** of cases over the last 5 years

# Implications

# Provocations

- How do we acknowledge and discuss the findings as a sector and as a society?
- Do we have realistic expectations for mental health outcomes?
- Is a key component of evidence based practice being limitation-aware?
- If someone says their approach always works they are unlikely to be an evidence based practitioner?

# Implications

- Three pronged approach to precision mental health and prognostic focus in practice
  1. Publish
  2. Practice
  3. Learn

# 1) Publish

- Publish failure and success rates and make these available to potential clients, funders and others.
- Include key metrics e.g. % symptom free, % with measurable improvement, % with measurable deterioration and % moved towards goals.

# Publish: Dr Rousmaniere [www.drtonyr.com/](http://www.drtonyr.com/)

2011 Private Practice data (San Francisco & Palo Alto, California) (accessed 12th March 2017)

- Total # of clients in dataset: 42
- Avg # of sessions: 8.58
- Total # of clients with more than one session: 38 (90%)
- Single session clients: 4 (10%)
- Start in clinical range (of clients with 2+ sessions): 25 (66%)





2011 Private Practice data (San Francisco & Palo Alto, California) (accessed 12th March 2017)

## Duration of Treatment

- Avg # of sessions for low distress clients: 5.27
- Avg # of sessions for high distress clients: 10.74
- Avg # of sessions for clinical change to occur:  
3.27

2011 Private Practice data (San Francisco & Palo Alto, California) (accessed 12th March 2017)

## Clinical Outcomes

- Ended Year in Clinical Change: 22 (88% of clients starting in clinical range)
- Ended Year in Clinical Recovery: 20 (80% of clients starting in clinical range)
- Ended Year in Clinical Deterioration: 2 (8% of clients starting in clinical range)
- Average change in ORS score: 7.52 (clients starting in clinical range)
  
- Cohen's D effect size for clients starting in clinical range: 1.22. (Pre-tx std dev=6.14, mean intake ORS=22.27, mean last session ORS=29.79, n=38)

# Publish: outcomes CYP

Use clear lay language to report outcomes (separately for parent and youth perspectives):

- % symptom free (having had symptoms at outset)
- % with substantial improvement and no substantial deterioration
- % with substantial deterioration in any one area (even if substantial improvement in some areas)
- % moved towards their goals by at least one point

## 2) Practice

- Be open from outset with clients, colleagues and funders about the limitations of treatment and likely end points given their level of difficulties
- Focus on self management and ongoing sustainable solutions from the start

# Practice

Consider trajectories and end points from the outset



# Practice

Consider trajectories and end points from the outset

[http://www.corc.uk.net/media/1490/trajectories\\_torch.pdf](http://www.corc.uk.net/media/1490/trajectories_torch.pdf)

## 3) Learn

- Commit to learn from failures and consider what might do differently
- Benchmark against others and use supervision and research to build improved practice
- Be curious
- Guard against biases
- Use FUPS use of data approach

# Learn: supporting use of FUPS data

- Challenge our biases
- Maintain curiosity
- Scrutinise findings that support our assumptions as well as those that don't
- Consider if any actions need to be taken in terms of quality assurance
- Consider possible initiatives that even if not definitively indicated may do more good than harm
- Challenge the assumption that change is always more risky than status quo
- Help ensure agreed rules of engagement are adhered to



# Contact details

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