

Case study

Small services, one membership: BACP helping their members' data count

Who?

The British Association for Counselling and Psychotherapy (BACP) is a membership organisation and registered charity which represents over 42,000 counsellors and psychotherapists in the UK. A proportion of these work with children and young people in a range of settings including schools, voluntary and community sector (VCS) services, and online. In 2010, BACP set up a Children & Young People Practice Research Network (CYP PRN) for practitioners working with this client group to facilitate networking, communicate research and share best practice. The network now has over 600 members.

What?

In an attempt to build upon the evidence-base for counselling and psychotherapy in this area, BACP produced a '[toolkit for collecting routine outcome measures](#)'. By standardising data collection across similar services, large samples of pooled data could be collected and analysed, which was the rationale behind the development of the toolkit.

This table sets out BACP's recommended 'minimum dataset' for data collection. These specific measures were selected because they are: free to use in paper format; have high levels of validity and reliability; are not disorder specific.

Session	Minimum	Suggested optional measures
First session	Demographic form SDQ YP-CORE/CORE-10 Goal Based Outcomes	RCADS Rosenberg Self-Esteem Questionnaire (SEQ) Child Outcome Rating Scale (CORS)/ORS
Every session	YP-CORE/CORE-10 Goal Based Outcomes	CORS/ORS
Final session	SDQ (follow up version) YP-CORE/CORE-10 Goal Based Outcomes	RCADS SEQ CORS/ORS CHI-ESQ (satisfaction survey)

Through CORC, BACP members had access to [COMMIT](#) – a secure, web-based electronic platform for data collection and storage – where data on all these measures could be stored.

How?

BACP was the first example of a non-individual service to use the COMMIT system and therefore it was important to identify any potential issues before rolling the system out to the wider membership. In 2014, BACP conducted a small scale pilot study to determine the feasibility of collecting routine outcome data (as outlined in the 'toolkit') and inputting them onto the COMMIT system. All CYP PRN members were invited to participate and approximately 30 responded. Five of these were then selected at random to participate (one school and four VCS services), resulting in approximately 30-35 individual practitioners having access to the system.

Data protection

A particular ethical issue surrounding the proposed data collection method was that of data protection and confidentiality. In 'usual' circumstances, services would have an Information Sharing Agreement (ISA) in place between themselves and MegaNexus to allow them to submit client identifiable data to them for data cleaning purposes. In the case of this pilot, there was the added step of getting data from the individual practitioners embedded in services to BACP before it could be submitted to MegaNexus, which required additional ISAs to be in place between BACP and the individual services. This would then 'cover' those practitioners who might also be using COMMIT as a client management system and therefore entering client identifiable data.

Training

Training on how to use COMMIT was delivered by MegaNexus to BACP staff and service managers in the first instance. Service managers then cascaded this training down to individual practitioners within their service. BACP also provided some additional online training resources to supplement this.

Feedback from pilot

In January 2015, BACP submitted their first data set (197 cases) to CORC for analysis. Follow-up interviews were undertaken with some of the pilot study participants to determine the acceptability and feasibility of collecting and submitting data in this manner. Word clouds of some of the responses to interview questions can be viewed below.

How did you find using COMMIT?



