



CORC Member Forum 2020

Recent developments

Kate Dalzell
Head of CORC

Plan



Highlights and signposts..

Recent developments in –

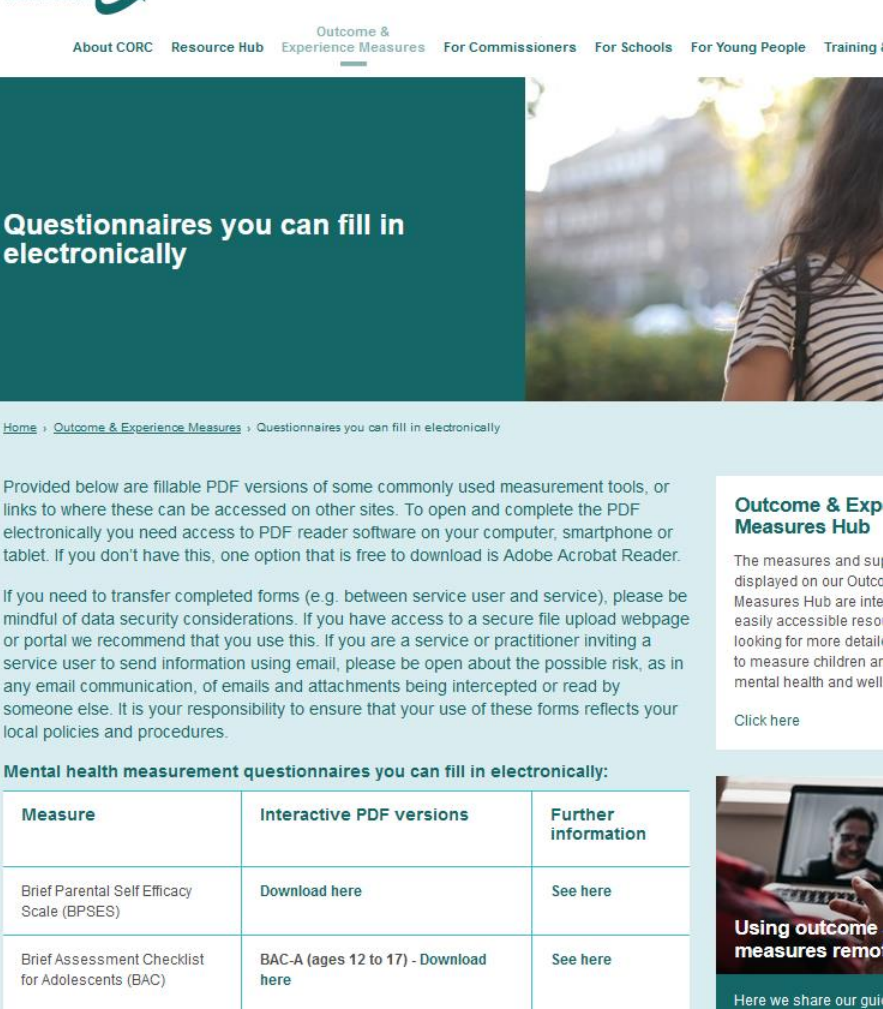
- Support for practice
- Using data from CORC members
- Work on measurement with schools
- Research findings



Support for Practice

Remote working: early guidance – learning together

- Feedback more important than ever
- The key challenge = the measure is integrated and meaningful in the work
- CORC guidance and Roundtable
 - key considerations: technology and infrastructure at both ends; data security; copyright



www.corc.uk.net/outcome-experience-measures/using-outcome-and-experience-measures-remotely/

Editable PDFs at www.corc.uk.net



Introducing new bitesize online trainings

<https://www.corc.uk.net/training-events/online-training-resources/>

Adjusting face to face/ experiential trainings for online

- Ending treatment in challenging circumstances
- Applying the CORC best practice framework to improve routine outcome monitoring



Introduction to working with outcome and feedback measures

[Expand](#) +



Choosing the right measure for your service or intervention

[Expand](#) +



Interpretation and use of outcome data in child and youth mental health

[Expand](#) +



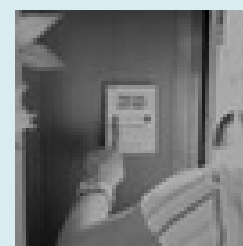
Six Steps to using measures effectively

[Expand](#) +



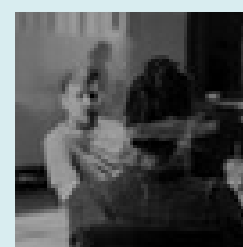
Interpreting aggregated data including statistical considerations / language

[Expand](#) +



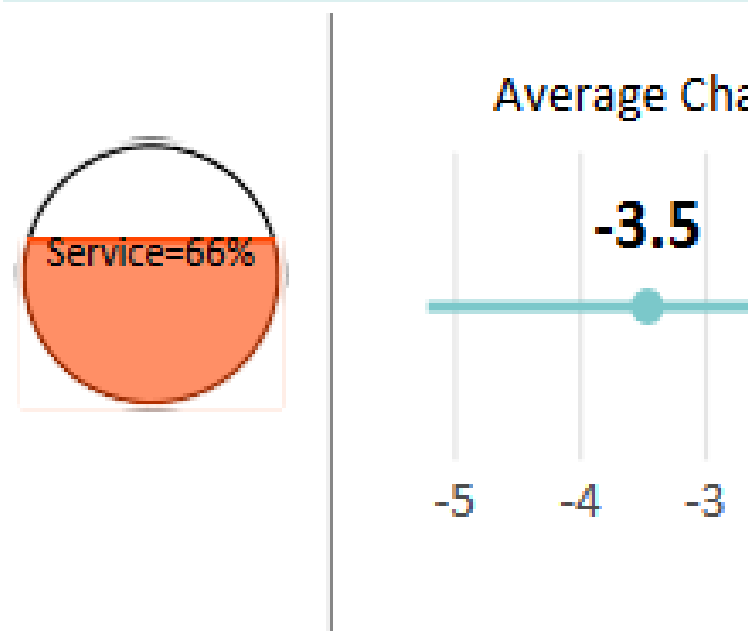
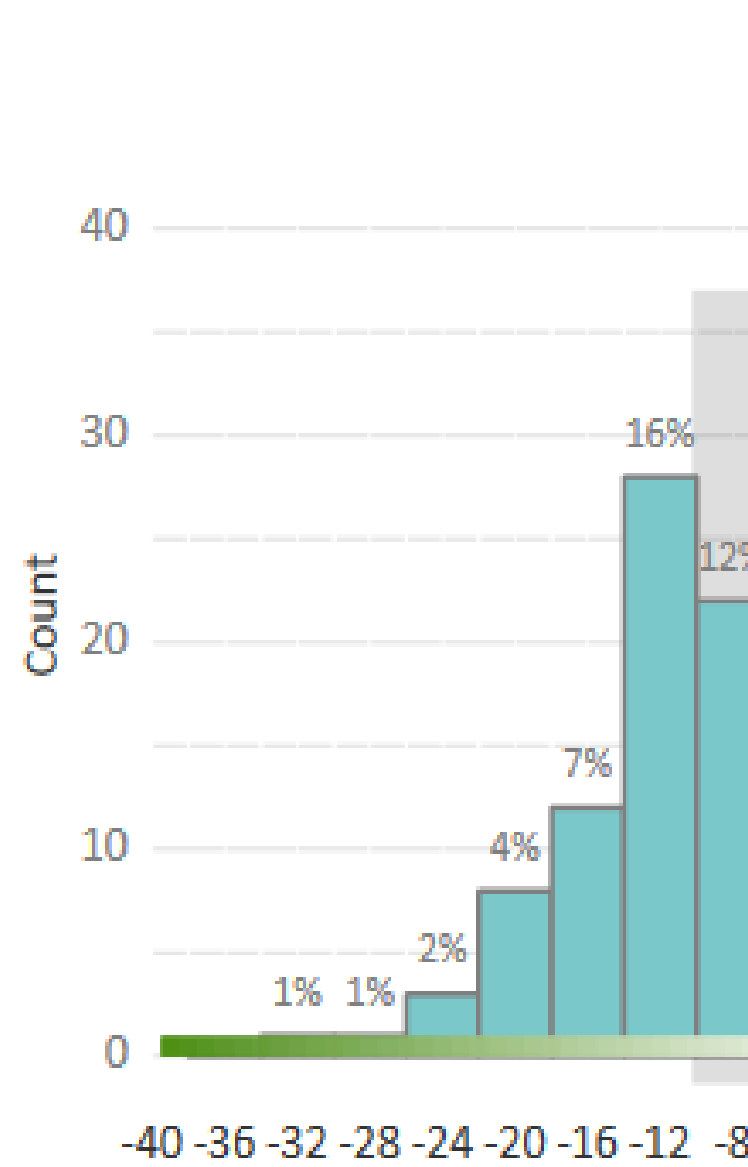
For Schools: Measuring and monitoring children and young people's mental wellbeing

[Expand](#) +

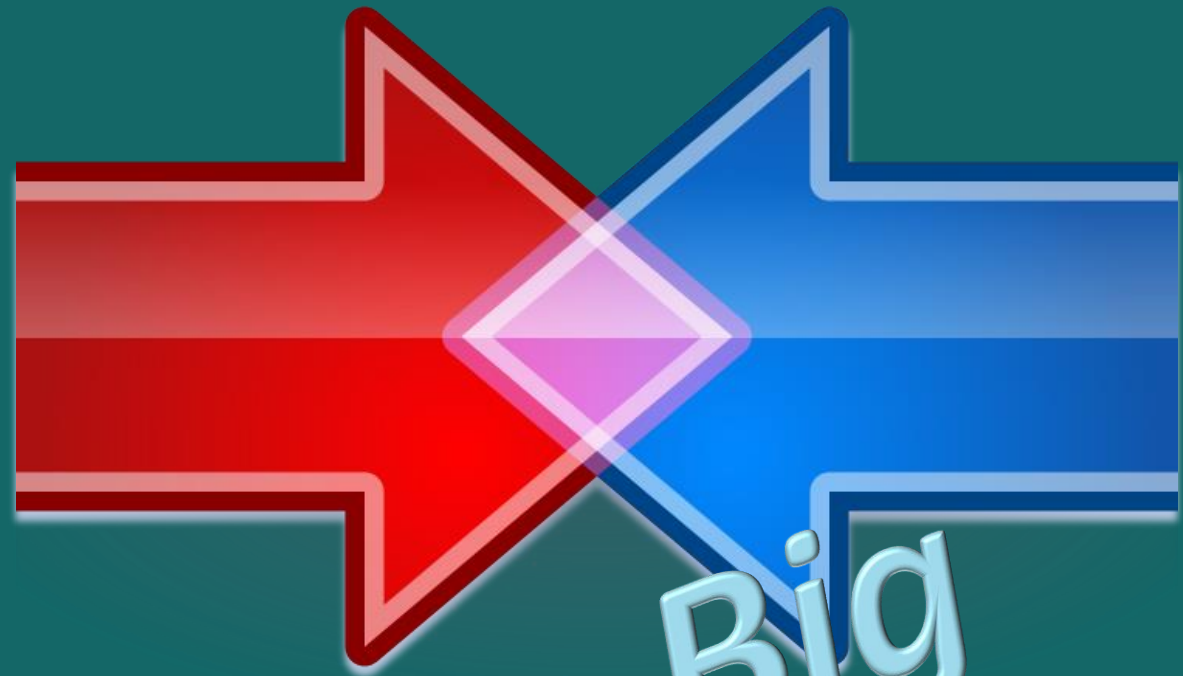


Using service user feedback and outcome tools - training videos

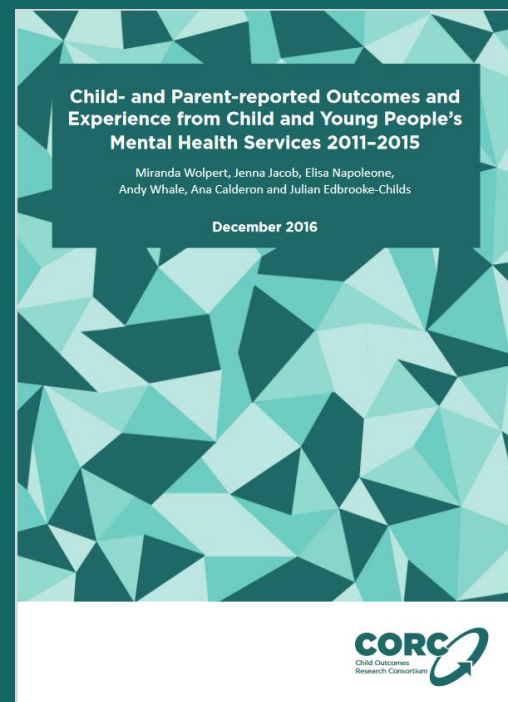
[Expand](#) +



Using data shared by CORC members



The Big Merge



Merging of the CORC+ and CORC Snapshot data sets achieved.

Coming soon..

- Updated analysis of rates of meaningful change
- Stronger benchmarks for CORC reports, based on data from both formats
- Analysis planned to look at
 - Change for sub-groups
 - Benchmarks for specific measures, based on measurable change in the CORC data

Methods for linking anonymous data-sets



Measurement in schools

Wellbeing Measurement for Schools

The Wellbeing Measurement for Schools Approach:



Find out how pupils in your school are feeling with a validated pupil survey that assesses their emotional wellbeing, mental health and resilience.



Understand the wellbeing of your staff and how they feel about the support systems in school as well as their knowledge of mental health and wellbeing and confidence to support pupils.



Compare your data with data from children in other schools. Our analysis and reporting help you to identify successes and strengths as well as challenges and areas to develop further.

Wellbeing Measurement for Schools extended to years 4 and years 10/11

Working with the Anna Freud Centre '5 Steps to Mental Health and Wellbeing'

Sharing learning between schools about how evidence can be used to help strengthen mental health support

Starting to get interested about the data we are collecting

5 STEPS TO MENTAL HEALTH AND WELLBEING

A Framework for Schools and Colleges

November
2020

Wellbeing Measurement for Schools

Staff Report

All schools

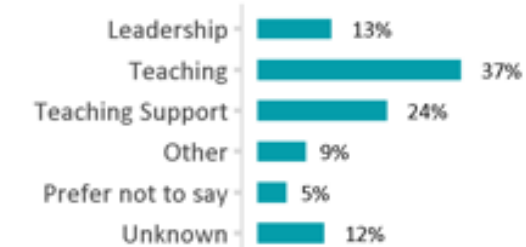


Overview of results

Survey participants

4089

staff in your school participated in the survey.



#1 Wellbeing

73%

of respondents reported 'medium' or 'high' wellbeing

#2 Stress

Three biggest causes of stress were:



#3 Knowledge

50%

of respondents say that they are knowledgeable of a wide range of mental health issues.

#4 Confidence

61%

of respondents feel confident to support children that are experiencing difficulties with their mental health and wellbeing.

#5 Talking mental health

69%

of respondents feel confident to talk to children about their mental health and wellbeing.

#6 Support

Three of the most frequently suggested initiatives by staff that would improve wellbeing were:



November
2020

Wellbeing Measurement for Schools

Staff Report

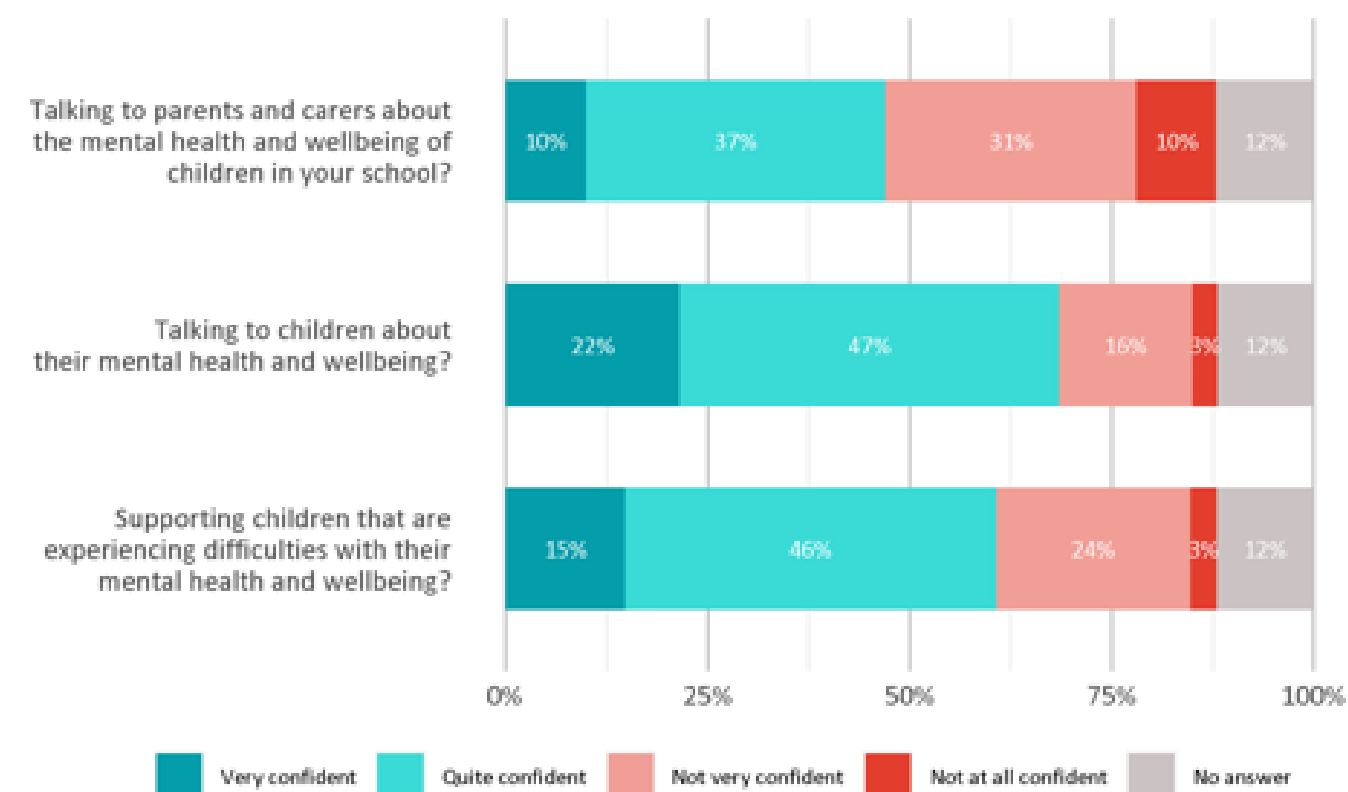
All schools



#4 Confidence

Staff were asked about their own confidence to support young people that are experiencing difficulties. They were also asked about their confidence in talking to children and to parents and carers about mental health and wellbeing.

How confident do you feel...





Research Highlights

Outcome measurement

Findings on outcomes of routine care – meta-analysis, anxiety and depression

Bear, H., Edbrooke-Childs, J., Norton, S., Krause, K. & Wolpert, M. (2019). [Systematic Review and Meta-Analysis: Outcomes of Routine Specialist Mental Health Care for Young People With Depression and/or Anxiety](#). *Journal of the American Academy of Child & Adolescent Psychiatry*. doi: 10.1016/j.jaac.2019.12.002

- Self-report change: 38% reliable improvement, 44% no reliable change, 6% reliable deterioration.

Digging into deterioration – what are harmful effects of therapy?

Castro Batic, B. & Hayes, D. [Exploring harm in psychotherapy: Perspectives of clinicians working with children and young people](#). *Couns Psychother Res*. 2020;00:1–10 (2020). DOI: 10.1002/capr.12347

- Clinical deterioration and retraumatisation. Mechanisms: administrative factors; relationship factors; therapist factors; contextual factors

Is research covering the important outcomes?

Krause, K., Midgley, N., Edbrooke-Childs, J. et al. [A comprehensive mapping of outcomes following psychotherapy for adolescent depression: The perspectives of young people, their parents and therapists](#). *Eur Child Adolesc Psychiatry* (2020). DOI: 10.1007/s00787-020-01648-8

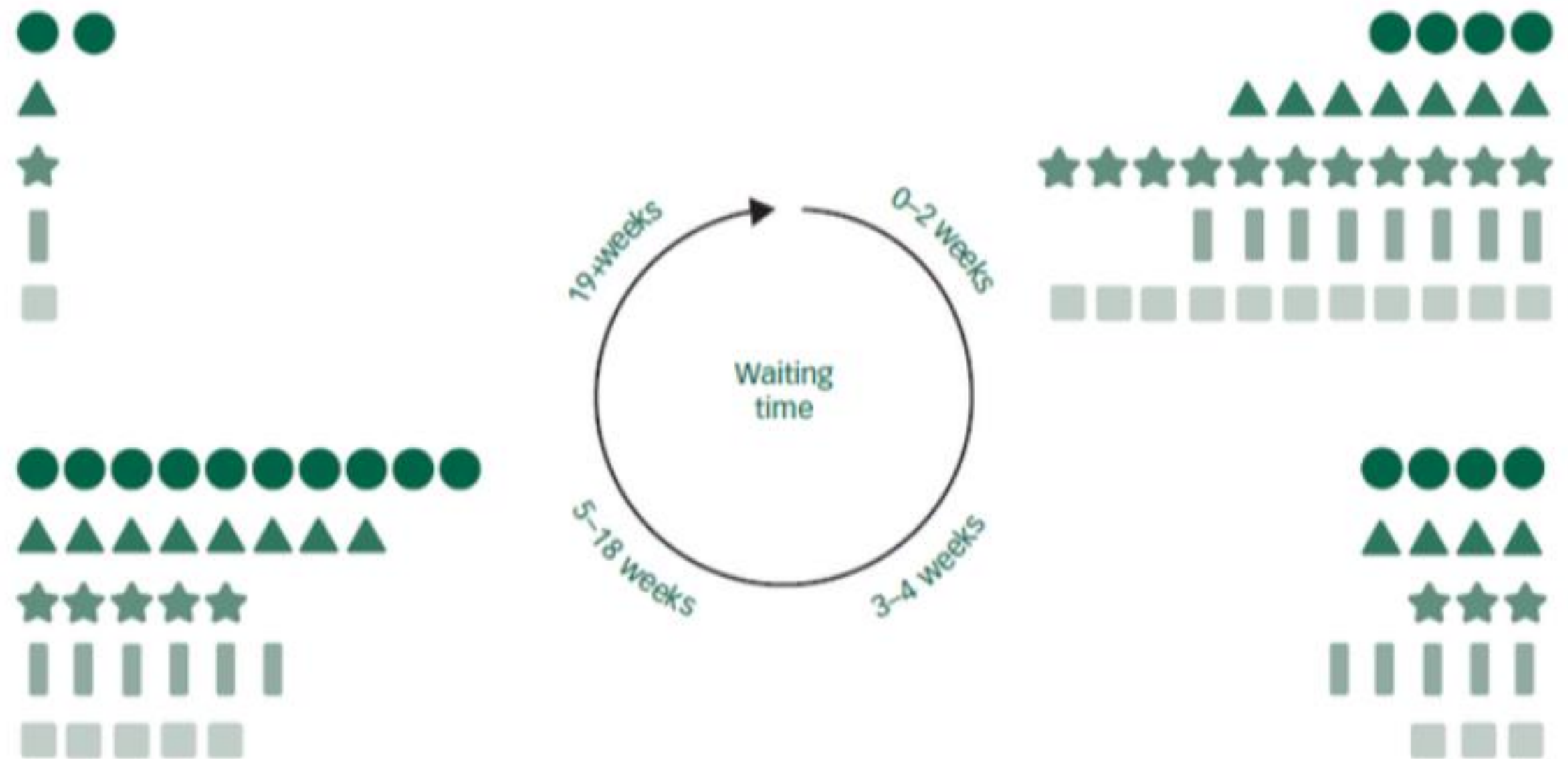
- Focuses on depression: the qualitative data in the study identifies family functioning, coping and resilience, academic function or social functioning as important outcomes. 94% of treatment efficacy and effectiveness study tracked change in depressive symptoms.

Service waiting times

Waiting times and problem severity

Edbrooke-Childs, J., & Deighton, J. (2020). [Problem severity and waiting times for young people accessing mental health services](#). *BJPsych Open*, 6(6), E118. DOI: 10.1192/bjo.2020.103

- Mean waiting time 51 days; median waiting time 32 days
- Less likely to have a longer waiting time:
 - = severe problems (self-harm, psychosis or eating disorders)
 - = referred outside of primary care (especially A&E).



● 5% of young people in the self-management group

▲ 5% of young people in the severe problems group

★ 5% of young people in the self-harm group

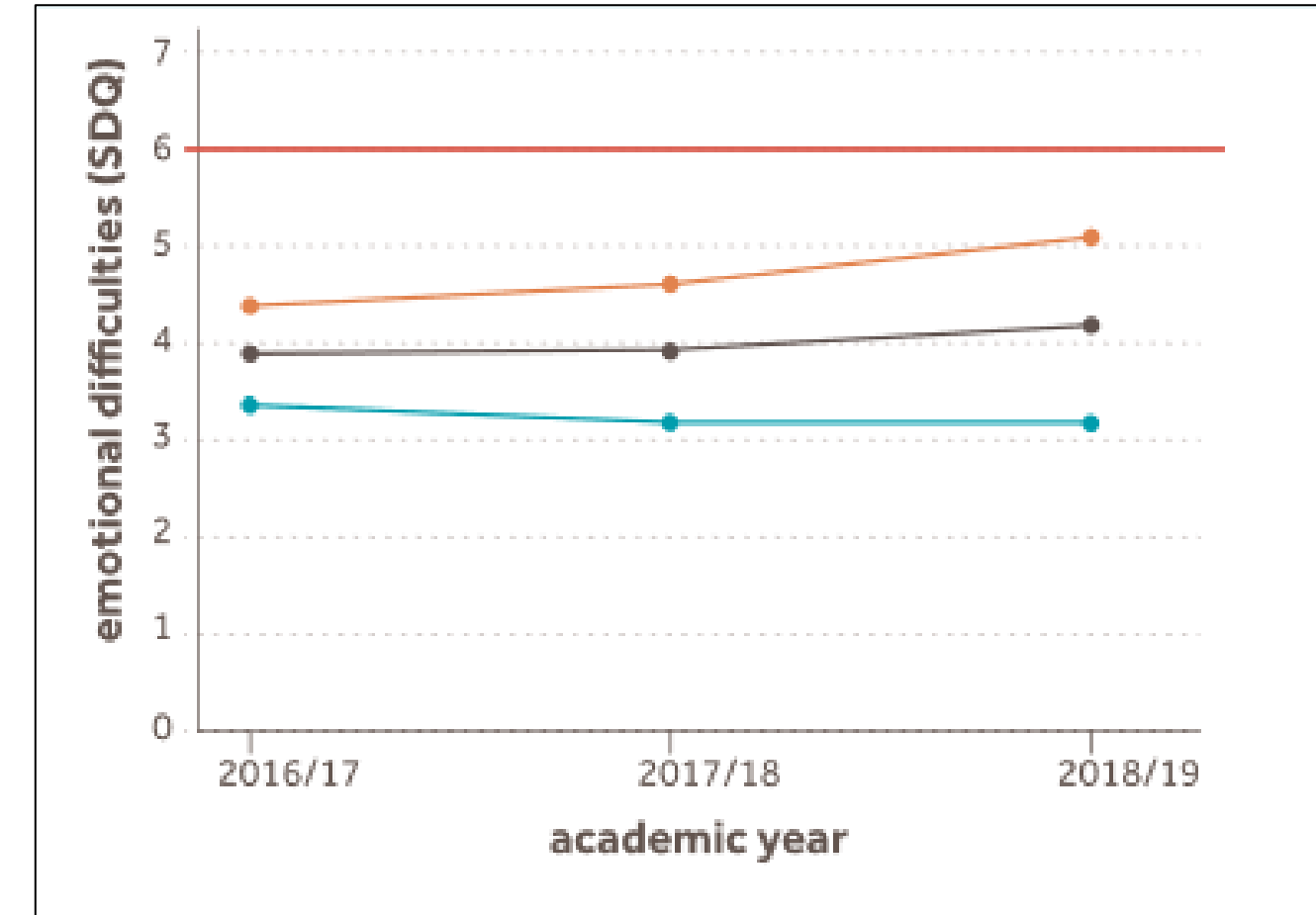
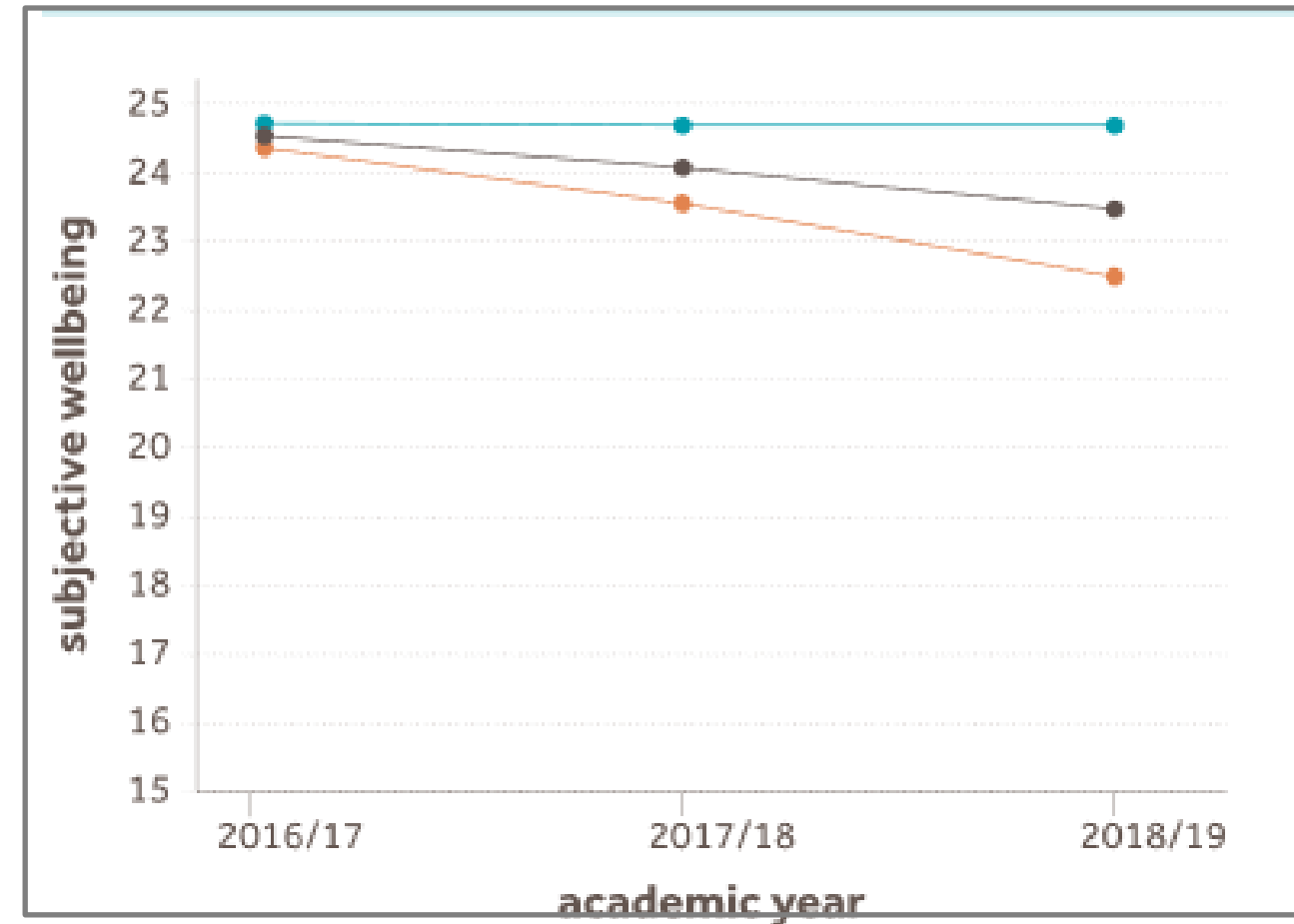
▮ 5% of young people in the eating disorder group

■ 5% of young people in the psychosis group

HeadStart

Trends

- HeadStart data found evidence of developmental trends, and divergence between mental health of boys and girls from early adolescence



Key: —●— female —●— male
—●— overall HS pupils

HeadStart



Supporting young people at home: coping strategies that help 80 young people with their mental health and wellbeing

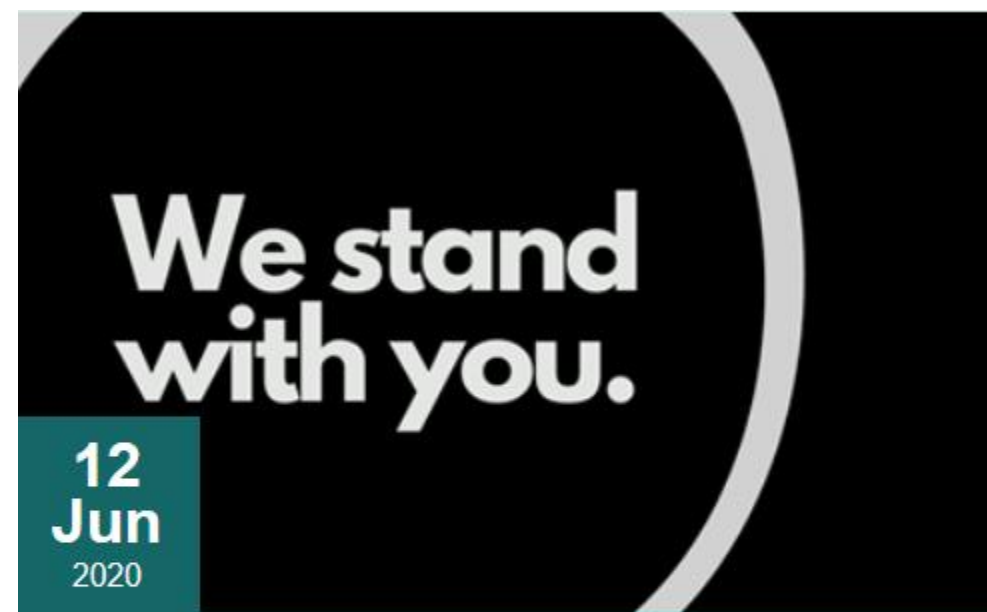
Help in a range of ways, including..

- Soothing, cheering
- Take your mind off things/ time out
- Doing things together – comfort and company
- Supportive presence
- Encouragement or positive thinking
- Communicating or writing down problems and difficult feelings
- Advice on how to cope or handle problems



Black Lives Matter

- Lines of research enquiry using our own data
- Fostering conversations and networking with others with an interest in mental health and racism
- Understanding the potential impact of systematic biases in measurement tools and practices



Black Lives Matter: CORC's statement of support



Using outcome measures with young people from different ethnicities and in different countries

Involving young people

Big welcome to Rachel Piper,
CORC Youth Engagement Officer





Huge thanks to everyone contributing to our new video – please share widely!

