



GOOD PRACTICE EXAMPLE: EVALUATION OF THE EFFECTIVENESS OF THE WORCESTERSHIRE LEARNING DISABILITY CAMHS TEAM; ANALYSIS OF 5.5 YEARS' WORTH OF OUTCOME DATA

Stream 1 of the wider project: Gathering feedback and measuring outcomes and change with Children and Young People with Learning Disabilities (LD)

June 2021

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Find more information here:

https://www.corc.uk.net/outcome-experience-measures/feedback-and-outcome-measures-for-children-and-young-people-with-learning-disabilities/

Good practice example: Evaluation of the effectiveness of the Worcestershire Learning Disability CAMHS Team; analysis of 5.5 years' worth of outcome data

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NB: All of the outcome measures used by the service are listed amongst the 'core' measures identified in this project



Learning Disability (LD) CAMHS Service Evaluation (July 2018) – a brief summary

How effective has the LD CAMHS Team been over the last 5 ½ years and how satisfied have parents/carers been with it?

Beth Smith and Kiran Badesha (Assistant Psychologists) recently conducted a comprehensive analysis of all outcome data collected routinely by the LD CAMH Service between September 2012 and April 2018. They subjected the data to rigorous statistical analysis and so were able not only to look at trends and changes as a result of LD CAMHS intervention, but also how confident we could be that these were significant and reliable.

Beth and Kiran were able to assess how effective the LD CAMHS team had been in terms of changes to:

- Young people's mental health/behaviour
- Parents'/carers' feelings of competence/confidence and understanding of their children's needs
- The impact of the difficulties on young people and their home/school life
- How close families felt they were to achieving the goals they agreed with the team

They were also able to report on the complexity of referrals, as well as how satisfied parents/carers were with the service received.

The main findings are summarised below.

Main findings

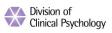
A. COMPLEXITY OF REFERRALS

(Paddington Complexity Scale; not an outcome measure)

The mean score for referrals accepted for Partnership work was 19.0 which indicates that referrals are at least as complex as those found in other LD CAMHS services in the UK (where the mean has been found to be between 15.4 and 17.0). The team therefore is working with young people with needs of sufficient complexity to warrant input from a specialist learning disability service.

B. OUTCOME MEASURES

Questionnaires were completed at the start of LD CAMHS involvement (time 1) then after 6 months (time 2) and 12 months (time 3) if the case was still open (if not then these were completed at closure).







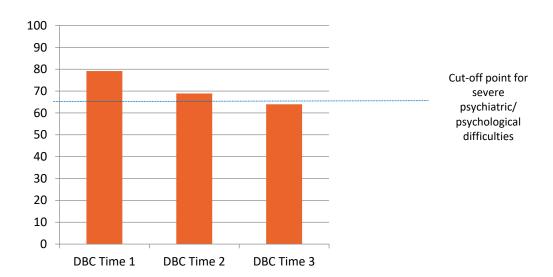
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Values for statistical significance (p) are quoted where applicable – p needs to be less than 0.05 for us to be confident that any changes are significant and reliable; the lower the value for p the more confident we can be in the findings (for example p=0.001 means that there is less a one in a thousand chance that it is wrong).

Children and young people's mental health/behavioural difficulties

(Developmental Behaviour Checklist; DBC)

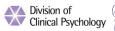
FINDING: Young people's symptoms of mental health/behavioural difficulties decrease significantly as the result of LD CAMHS interventions (and fall below the cut-off point for severe psychological/psychiatric difficulties; p=0.001 between time 1 and 2, p=0.005 between time 2 and 3)



Parent/carer competence, confidence and understanding

(Sheffield Learning Disability Outcome Measure; SLDOM)

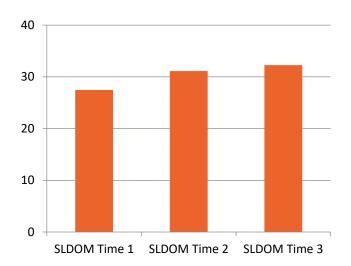
FINDING: Parents/carers feel significantly more confident and competent and understand their child's needs more following LD CAMHS intervention and this continues to improve throughout involvement (p=0.001 and 0.001 respectively)







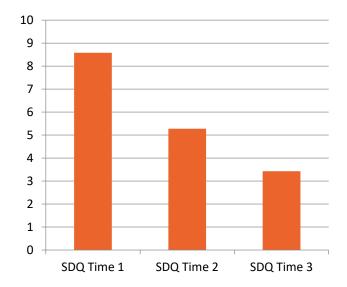
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The impact of difficulties on children and young people and their home/school life

(Strength and Difficulties Questionnaire – impact assessment; SDQ Impact)

FINDING: The negative impact that a child/young person's difficulties have on their home life, learning at school, friendships and leisure time and the burden these difficulties place on their parents/carers all decrease significantly as a result of LD CAMHS involvement (p=0.001 and 0.048 respectively)







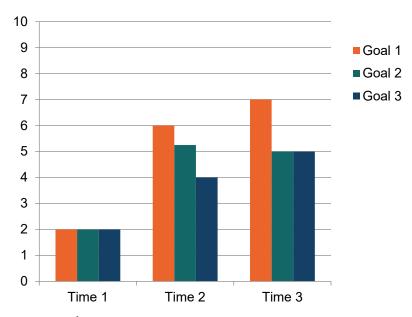
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Achieving goals

(Goal Based Outcome; GBO)

FINDING: Families feel much closer to achieving the goals that they agree for LD CAMHS intervention by the end of the team's involvement (no statistical analysis conducted)



C. PARENT/CARER SATISFACTION

(Experience of Service Questionnaire; ESQ/CHI-ESQ)

Parents/carers felt very satisfied with the service that they had received from LD CAMHS over the 5.5 year period and in particular:

- 93% said it was certainly true that they had received good help overall;
- 93% said they would certainly recommend the service to a friend (only 1% said they would not);
- 95-97% said it was certainly true that they felt listened to and that their views were taken seriously, that it was easy to talk to the LD CAMHS clinicians and that they were treated well by the service; and
- 93% said it was certainly true that appointments were arranged at times that were convenient for them so as not to interfere with work or school.

"What was really good about your care?" - themes from 88 comments:

- Specialist knowledge/skills of the clinicians
- Felt listened to and respected
- Good communication
- Flexible service
- Person-centred
- Multiagency working
- Empowering, and
- Supportive.

"Was there anything you didn't like or anything that needs improving?" – themes from 22 comments:

- Wait between choice and partnership (staff vacancies since filled)
- Quality of some rooms (building has since had a major renovation)

