The Child Outcomes Research Consortium

The Child Outcomes Research Consortium (CORC) is the UK's leading membership organisation that collects and uses evidence to improve children and young people's mental health and wellbeing.

Our members include mental health service providers, schools, professional bodies and research institutions from across Europe and beyond.

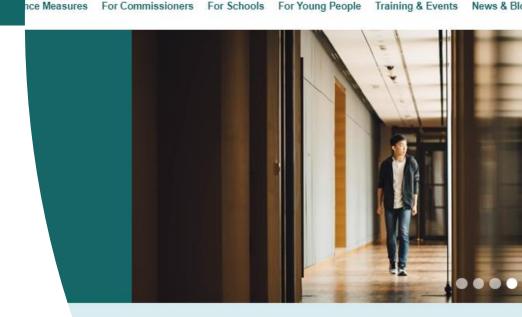




www.corc.uk.net

CORC's **vision** is for all children and young people's wellbeing support to be informed by realworld evidence so that every child thrives.

Our **mission** is to promote the meaningful use of evidence to enable more effective childcentred support, services and systems to improve children and young people's mental health and wellbeing.



Vho we are

tcome &

at collects and uses evidence to enable more effective child-centred d young people's mental health and wellbeing. We have over 15 'edge on outcome measurement and relating this to the insights ing with children and young people on the ground.

7 & events



Today

- Some research highlights
- Collaboration with our four main audiences – what's new and what's next
 - Commissioners
 - Practitioners
 - Schools and colleges
 - Young people





https://www.corc.uk.net/resourcehub/research-library/



Contextualising reliable improvement and deterioration in mental health services – what do we see in a school

sample?



What is the trajectory of change, and factors associated with change in depressive symptoms for young people

seen in routine mental health services?



How much can variation in non-consensual drop-out be explained at the service level - and how much at the

practitioner level?





What measures of outcome are being used in clinical research?





Don't miss our regional seminars!

- 2019 Measuring what matters in child and youth mental health: what's a fair way to measure a service?
 - Devising a meaningful measure for comparing services
 - Evidence from young people's goal-setting
 - Ethnicity and service access
 - How would young people measure things?

Save the date

London, 13 May 2020 Doncaster, 19 May 2020 Birmingham, 21 May 2020



Reaching out to commissioners A common language for meaningful change?

"Of all CYP, aged 0-18, discharged after treatment from a CYP MH Service, how many show measurable improvement"



Outcomes for all?: leveraging the new metric

What does the outcome metric say about services across your area? - and what doesn't it say?

What is the quality of the data?

What other information fills out the picture?

- Who is accessing the service? Context and benchmarks
- What experience are they having?
- Are they moving towards their goals?

What can be learned or hypothesised?

Working as a system of support: who should you be thinking about this with?



Thinking from CORC

- How do we analyse and get the most from data?
- How do we work meaningfully with FUPs data?
- What can we learn from goals?
- How can we improve data quality?



Introduction

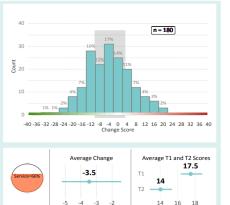
Researchers, clinicians and other mental health professionals hope that looking closely at large datasets can improve the quality of mental health services. In particular, it is hoped that routinely collected data can be used to establish

However, such data are frequently flawed, uncertain,

to use these data. Consideration of such data can be a spur to better quality data collection, and we can also use FUPS data to have more informed debates about what outcomes

CORC is aware that reporting on data where there are questions about the quality, and a high degree of missing

How have Child SDQ scores changed between T1 and T2?



All paired scores for the Child SDQ (n = 180).

How representative is this sample?

66% of those with a time 1 score, had a corresponding time 2 score. The follow up rate suggests the sample is representative of about two thirds of the children and young people who completed the SDQ at the first time point.

What do the plots show?

The middle 50% of children and young people (C&YP) either had a similar score at time 2, or improved by up to 10 points (on a scale of 1 to 40). The top quarter improved by between 10 and 30 points, however the bottom guarter deteriorated by up to 23 points. In the long run, we estimate that the average improvement of C&YP like those contained in this sample would be between 1 and 6 points.

Most of the C&YP we have data for have made modest improvements in their SDQ score. With a higher follow up rate, these results could be generalizable to all children and young people who completed the SDQ at a first time point in Erinsborough.



What kind of themes to goals reflect?

- Relationship/interper sonal: listening and understanding
- Personal growth & functioning: understanding and improving self
- Coping with specific problems and symptoms

- Listening, talking, understanding and relationships
- Managing specific difficulties
- Improving self or life
- Parent-specific goals

- Managing specific issues
- Talking and listening; communication with family and peers
- Self-confidence and understanding; hopes for the future
- Parent-specific goals
- Hobbies

Child led



Joint



Analysis of goals from 8 services 2007 to 2011 - 678 goals from 180 case records



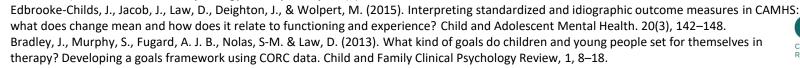
Meaningful change in goals?

- Bespoke in nature, so questions about aggregating/ looking at scores alongside standardized measures
- Internal consistency findings suggest that goals may work in a similar way to standardized measures
- Proxy of reliable change, 2.5 points
- Based on this, services in the CYP IAPT dataset saw
 - 70% reliable improvement in goals based outcomes
 - 3% deterioration in goals based outcomes

Watch this space..

Jacob, J., Edbrooke-Childs, J., Law, D., & Wolpert, M. (2015). Measuring what matters to patients: using goal content to inform measure choice

and development. Clinical Child Psychology and Psychiatry. 22(2), 170-186.



Data quality. Good news!

THIS RESEARCH IS PRE
PUBLICATION SO WE CAN'T
SHARE PUBLICLY AT THIS STAGE

- PLEASE KEEP AN EYE ON OUR NEWSLETTER AND WEBSITE TO STAY UP TO DATE ON THE LATEST RESEARCH!





CORC Best Practice Framework



LEADERSHIP & MANAGEMENT

- Organisational vision
- Organisational commitment
- Organisational culture



STAFF DEVELOPMENT

- Staff confidence in understanding the data and using the measures
- Measures reviewed in supervision and team
- Training and CPD



INFRASTRUCTUR E & INFORMATION MANAGEMENT

Enables use of data in -

- direct practice with clients
- for individual practitioners
- at team level
- at service level



SERVICE USER EXPERIENCE

Service users -

- Understand the role of the measures and how they are used
- Are involved in the choice of measures and in collaborative goal-setting
- Have opportunities to see, discuss and feedback on support, and on data

Practitioners - specialist perinatal mental health services

- The majority of women felt positive about SPMH services collecting ROMs and could see value in them: want measures to be part of clinical conversations
- Practitioners feeling 'clunky'
- Considerations specific to perinatal services
 - sleep and anxiety questions
 - Differences between Community and MBU
 - Relapse prevention work

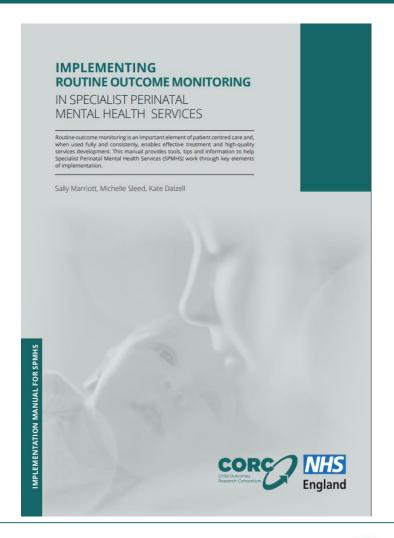




Practitioners – specialist perinatal mental health services

Recommendations for implementation

- Clinician Rated Outcome Measure
 - HoNOS
- Patient Rated Outcome Measure
 - CORE-OM
 - CORE-10
- Patient Rated Experience Measure
 - Patient rated Outcome and Experience Measure (POEM)





Practitioners

Don't miss out

New training programme

Looking forward to learning from

- Looked After Children mental health assessments
- Evaluation FCAMHS and Secure Stairs



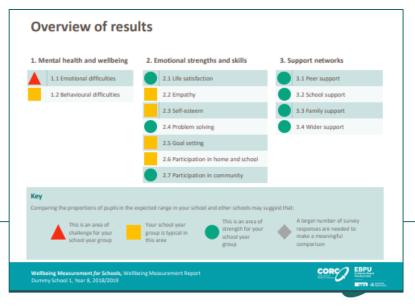


Education – what's new?

Responding to learning and feedback on our online wellbeing measurement..

- Expansion: age-appropriate surveys for children from Year 4 to Year 11
- Simplification: opt-out consent





Education – what's new?

A staff survey, looking at

- Knowledge and confidence –
 of mental health, and in
 engaging with students and
 parents/ carers
- Own wellbeing (SWEMWBS and Perceived Stress)
- Support at school, factors ameliorating or detracting from wellbeing at work





Education – what's next?

- Continuing to work with schools on discussing and responding to their survey results
- Learning with the HeadStart Learning
 Team
- Building on our college trials
- Tailored support and resources for schools

https://www.corc.uk.net/forschools/tailored-support-andresources-for-schools/



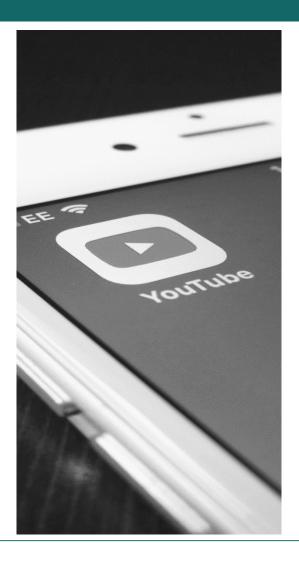


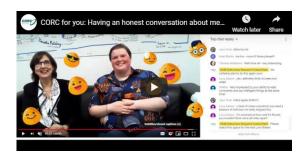
Young People

- New board member
- Youtube chats/ direct work: what matters most and how would like to be involved with CORC
- Ask young people to co-produce and advise on specific projects
 - Video project
 - Work on more a more meaningful measure including opportunities for measurement to support self-care
 - Work more closely with member services



CORC LIVE CHAT







February 2019



CORC for you: What would young people measure?

April 2019



CORC for you:
Do mental health
services work?
What are the
alternatives?

October 2019



Collaboration at CORC

Please stay in touch, and share through us!

@CORCCentral
www.corc.uk.net
corc@annafreud.org



Thank you

Kate.dalzell@annafreud.org CORC@annafreud.org

