CORE Partnership

The CORE Partnership consists of the CORE Benchmarking/ User Network, the CORE System Trust (responsible for the copyright of CORE measures), CORE Information Management Systems Ltd (CORE IMS - responsible for change agency and software support) and associated researchers. This Occasional Paper provides an update to the previously published benchmarks on completion rates (Bewick et al, 2006).

Data source

Data were drawn from the updated version of the CORE National Research Database for Primary Care, collected between 1999 and 2008. The data was cleaned to remove clients with basic demographic details missing; aged less than 16 or over 65 years or with a therapy modality other than individual therapy. Clients with no therapist assessment of risk or CORE-OM risk score (n=11 008) were removed from the dataset, yielding a final sample of 53 602 clients, seen by 11 009 therapists in 35 services. Of these clients, 53 405 had therapist assessment of risk and CORE-OM risk score and 53 224 had therapist assessment of risk and CORE-OM suicide risk score (Item 16).

The sample

The majority (70%) of clients were female and the mean age was 38.5 years (SD 12.00). 91.5% were White/Caucasian.

This paper uses the therapist rating of client risk (as detailed on the Therapy Assessment Form (TAF)) and client ratings of risk items on the CORE-OM. Comparison is made between the two ratings, and discrepancies between the two reported.

When clients attend for assessment, practitioners provide a rating of their Risk levels in four areas: Suicide; Self-harm; Harm to Others and Legal/ Forensic. Each area of Risk is assessed as 'None'; 'Mild'; 'Moderate' or 'Severe'. For the purposes of these analyses, attention is focussed on the first 3 Risk categories, i.e. Legal/ Forensic Risk is not included. Clients were classified as 'at risk' by practitioners if they scored 'moderate' or 'severe' on any of the three practitioner-rated risk items. Clients scoring 2 or more (i.e. 'Only occasionally' on 2 or more items or 'Sometimes' on 1 or more items) on the CORE-OM scored above the Risk cut-off and were classified as 'at risk'.

The mean levels of agreement, or otherwise, between practitioner and client ratings of risk were measured overall and for each service. The service-level mean data was then analysed to obtain values for the 25th, 50th and 75th percentiles. These in turn were used to create service-level benchmarks.

Results

Overall Risk Scores

The mean CORE-OM clinical risk score for the whole sample was 4.7 (SD = 6.3), with means of 5.2 (SD = 6.6) for males and 4.4 (SD = 6.2) for females.

Using clients' responses to the CORE-OM risk items, 24 707 clients (46.1%) were 'at risk'. There were significant differences in the proportions of males (n=8141 (50.7%)) and females (n=16 566 (44.1%)) reporting risk symptoms (z=14.08, p<.0001).

By contrast, using a therapist rating of 'moderate' or 'severe' risk on any of the risk items as an indicator practitioners identified only 9.5% of clients as being at risk.

As discussed in the original benchmarking paper (Bewick, McBride and Barkham, 2006), discrepancies between client and therapist ratings of risk should always be followed up within a service.

Risk: Differing by degree

Table 1 gives details on the risk categorisation based on CORE-OM risk scores and TAF ratings. A total of 38% of clients (42.5% of males and 38.0% of females) were above cut-off on the CORE-OM risk scores while being classed by practitioners as below risk ('none' or 'mild'). The proportions differed for males and females (z=9.039, p<.005).

Table 1: Self-versus practitioner-rated assessment of risk

		TAF-risk (practitioner rating)	
		Moderate or severe	None or mild
CORE-risk (client rating)	Above cut-off	4 075	20 632
		7.6%	38.5%
	Below cut-off	464	28 431
		0.9%	53.0%

Overall, the total difference between CORE-OM risk and TAF-risk levels was 39% (n=21 096). There was a significant difference between the total difference for males (42.5%) and females (38.0%): z=9.834, p<.005.

Risk: Present versus absent

Percentage of clients identified as 'at risk' by the CORE-OM but 'no risk' by the TAF

For the overall sample, 20% of clients (n=10 935) scored at least 2 on the risk items of the CORE-OM but were not rated 'at risk' by the therapist on ANY of the risk items of the TAF. This represents 44% of those clients who were above risk cut-off on the CORE-OM.

Percentages were similar for males (20.6%) and females (20.3%)

Percentage of clients identified on TAF as 'at risk' but 'no risk' on the CORE-OM

For the overall sample, 1% (n=464) of clients were classified by the practitioner as 'at risk' (moderate or severe) while the client's response on the CORE-OM put them in the 'no risk' category. The percentages differed slightly by gender (males 1.1%, females 0.8%).

Suicidality

In all, 6% (n = 3 375) of clients who were identified as being 'at risk' of suicide using their score on I16 of the CORE-OM were not judged to be at risk by practitioners. However, 829 (25%) of these clients were deemed by their practitioners to be at some risk of self-harm.

A total of 98 clients (<1%) rated themselves as at high risk of suicide ('most or all of the time') but were assessed by the practitioner as presenting no suicide risk. Of these clients, 28 (29%) were assessed by their practitioner as being at some risk of self-harm (though for 20 clients (20%) the risk was only classed as mild).

10% of clients (n=5528) self-reported no risk of suicide but were reported by their practitioner to be as some risk (i.e. mild, moderate or severe).

27 clients (<1%) reported no risk of suicide on the CORE-OM but were assessed as being at severe risk of suicide by their practitioner. 16 of these clients had some level of risk reported on the remaining three risk-to-self CORE-OM items.

Benchmarks

Risk: Present versus absent

The percentages of clients within individual services who were 'at risk' on the CORE-OM risk items but 'no risk' according to their practitioners' assessment were calculated. These percentages were ranked and details of the percentiles obtained. (see Table 2). These figures were then used to create a series of benchmarks (Figures 1-3) whereby services could monitor the level of difference in their own service relative to other Primary Care services.

Table 2: Descriptives and percentiles for 'present vs absent' differences in risk assessment

	All clients	Male	Female
N	53 602	16 047	37 555
Mean (SD)	18.9 (5.9)	18.9 (6.7)	18.8 (6.0)
Minimum	2.7	4.7	0
25th percentile	16.8	16.2	15.8
Median	19.6	19.6	19.7
75th percentile	22.6	23.0	22.6
Maximum	30.1	31.3	30.1

The benchmarks show that, for the current sample, the services falling below the 25th percentile had less than 17% of clients with CORE-OM risk present and TAF-risk absent (16% for males and females). Services above the 75th percentile had over 23% of clients falling into this category. In contrast to the original benchmarks published in 2006, the gender differences in percentages categorised differently by client and practitioners were very small.

Figure 1: % of all clients identified as 'at risk' by CORE-OM but 'no risk' by TAF

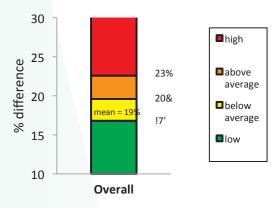


Figure 2: % of male clients 'at risk' by CORE-OM but 'no risk' by TAF

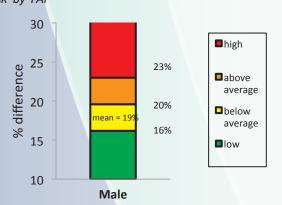
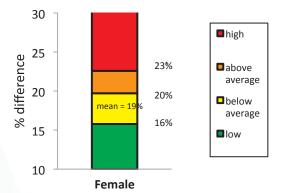


Figure 3: % of female clients 'at risk' by CORE-OM but 'no risk' by TAF



Risk: Differing by degrees

Table 3: Descriptives and percentiles for differences in degree of risk assessment

	All clients	Male	Female
N	53 602	16 047	37 555
Mean (SD)	38.6 (5.3)	41.8 (6.5)	37.0 (5.9)
Minimum	24.3	25.6	12.9
25th percentile	36.0	38.4	34.8
Median	39.2	42.2	36.6
75th percentile	41.1	46.0	39.3
Maximum	49.3	52.9	47.4

The percentages of clients within each service who were 'at risk' based on their CORE-OM risk score, but judged by the therapist to be 'low/no risk' was also used to generate benchmarks Figures 4-6). It is interesting to note that these benchmarks differed by gender in a way which the 'present vs absent' benchmarks did not.

Figure 4: % of all clients classified as 'at risk' by CORE -OM but 'low/no risk' by TAF

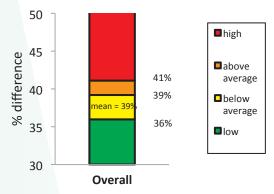


Figure 5: % of male clients classified as 'at risk' by CORE-OM but 'low/no risk' by TAF

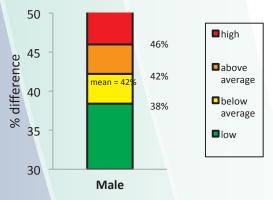
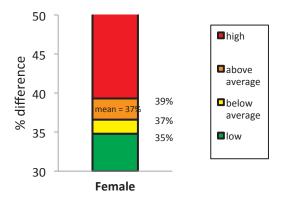


Figure 6: % of female clients classified as 'at risk' by CORE-OM but 'low/no risk' by TAF



In this sample, the 25% of services with the lowest proportion of clients with risk differing by degrees had less than 36% of clients 'at risk' by CORE-OM and 'low/no risk' by TAF (38% for males and 35% for females). The services with the highest proportion of clients with risk differing by degrees had 41% discrepancies or more (46% for males and 39% for females).



Reference

Bewick, B.M., McBride, J. & Barkham, M. (2006). When clients and practitioners have differing views of risk: Benchmarks for improving assessment and practice. Counselling and Psychotherapy Research, 6(1), 50-59.

For all enquiries related to CORE and CORE System Benchmarks please contact admin@coreims.co.uk

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