

# CORE Benchmarking Network Newsletter

Spring 2006

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Network Chair: Geoff Mothersole, West Sussex Health and Social Care NHS Trust

## Setting the agenda

**Geoff Mothersole, Chair, CBM**

As Chair of the Benchmarking Network, I would like to offer you a warm welcome to our first newsletter. The network was established last June from the 200 plus services using the CORE System and CORE-PC, to give a voice to services interested in making CORE data make a difference, both at individual service and national levels. The network is led by a steering group - which is open to network members - the current membership of which is detailed on the last page.

A broad statement of the network's aims also appears alongside the steering group membership, but let me say here what I think the network is about. It seems to me that its prime purpose is about linking research and practice in the field of routine audit and outcome measurement, identifying and promoting good practice at a service level, and influencing the national picture.

Over the last nine months, we have taken considerable strides, in collaboration with the other key stakeholders in the CORE Partnership – CORE-IMS, the CORE System Trustees and the Psychological Therapies Research Centre (PTRC) at Leeds. These include (as outlined elsewhere) the development of new benchmarks, special “CORE editions” of Counselling and Psychotherapy Research and the European Journal of Psychotherapy and Counselling and responding to the proposal from Lord Layard to recruit 10,000 CBT trained therapists to the NHS – not to mention planning our Spring conference.

If you have ideas to contribute that could support what we're already doing, or if you have suggestions for new activities and/or resources that we could develop to help support CORE System users, then please e-mail us at [network@coreims.co.uk](mailto:network@coreims.co.uk) or take the opportunity to talk to one of the steering group at the conference.

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*Announcing the  
CORE Partnership's*

## **CORE User Spring Conference 2006**

**National Centre for Early  
Music, York**

**Thursday 23<sup>rd</sup> March**

*Further details on page 2*

## CORE User Spring Conference

The CORE User Spring Conference 2006 is timed to coincide with the publication of the CORE special edition of *Counselling and Psychotherapy Research*, which profiles the six new benchmarks developed from the CORE National Research Database (see *New Benchmarks* on page 4).

The day will have a strong practice element, with workshops focusing on three of the newly published benchmarks - pre and post-therapy CORE-OM completion; differences between client self-report and practitioner assessment of risk; and clinical and/or reliable change. Participants will have the opportunity to contrast their own services' data against these key benchmarks and explore their service profile with colleagues in facilitated workshops.



*The National Centre for Early Music, York*

The event will be held on Thursday 23<sup>rd</sup> March at the National Centre for Early Music, York. CORE System users should have already received notification, but in any event details are available from John Mellor-Clark at CORE-IMS by email at [john@coreims.co.uk](mailto:john@coreims.co.uk) or by calling 01788 546019.

## White paper on community services – threat or opportunity?

The Government's White paper on the future direction of community based services was published at the end of January. Covering both health and social care services, the proposed reforms aim to provide better prevention and early intervention, develop the consumer's choice and voice, tackle inequality and improve access, and provide greater support for people with longer term needs.

The White Paper paves the way for the wider involvement of non-NHS providers including voluntary, private sector and social enterprise organisations. Practice based commissioning will be a key mechanism for ensuring that services are responsive to the needs of consumers, as well as the encouragement of open tendering for services, particularly where services fall below expected standards. Central to this process will be Primary Care Trusts' use of benchmarking information to assess service performance.

The Government's attitude to under-performing services is summed up within section 7.85 of the paper - *"We expect PCTs to be robust in their management*

*of services that do not deliver the necessary quality."*

In theory, at least, services routinely using quality and outcomes measurement data – such as that provided by the CORE System and CORE-PC - to profile and develop service quality, are well placed to respond to this new environment.

*"We expect PCTs to be robust in their management of services that do not deliver the necessary quality."*

The next edition of the Newsletter will explore these challenges and opportunities in greater depth. The full text of the White Paper at can be found at <http://www.dh.gov.uk/assetRoot/04/12/74/59/04127459.pdf>

## Network responds to Lord Layard

The network has responded to recent proposals by Lord Layard to employ 10,000 extra therapists working in 250 new treatment centres across the NHS. The response, made by Geoff Mothersole, Network Chair, highlights concerns over the proposal to make the treatment centres CBT based, in spite of the mounting evidence for the equivalence of therapies (see *In Brief* - adjacent). According to Geoff:

“The emphasis on developing services and improving access is to be welcomed. However it seems that there are clear limitations to the strategy, based as it is on a rather simple ‘CBT is best’ reading of the literature.”

The response proposes less emphasis on the model of the therapy being offered, and more on producing data to show the effectiveness or otherwise of services and therapists. These views were conveyed to Lord Layard towards the end of last year but no response has yet been forthcoming.

*“...clear limitations to the strategy, based as it is on a rather simple ‘CBT is best’ reading of the literature.”*

Lord Layard is known to favour CBT trained mental health nurses, social workers or occupational therapists to deliver these services. At the first Sainsbury Centre for Mental Health Lecture last September, Lord Layard said: “It is crucial that these people receive sufficient depth of training to achieve the success rates observed in the clinical trials. There is no point at all in expanding provision via second-rate therapy and it would not be justified on economic grounds – just as there is a major question mark over much of the counselling which GP practices provide...”

The text of the address can be found at:

[http://www.scmh.org.uk/80256FBD004F3555/vWeb/flKHAL6H3D4F/\\$file/layard+lecture+scmh+120905.doc](http://www.scmh.org.uk/80256FBD004F3555/vWeb/flKHAL6H3D4F/$file/layard+lecture+scmh+120905.doc)

## In Brief

### Therapies in routine care equally effective

The April issue of *Psychological Medicine* will contain a paper profiling the relative effectiveness of CBT, person-centred and psychodynamic therapies. The study by Professor Bill Stiles and colleagues compares the relative outcomes of the three therapies in routine care in 58 NHS primary and secondary care sites using CORE and finds them broadly equivalent. (*Fuller details in next issue*)

### European journal and SPR conference

June's *European Journal of Psychotherapy and Counselling* is a special edition exploring the use of CORE and CORE System data in the management, delivery and development of therapy services. Edited by John Mellor-Clark and Michael Barkham, the series of five papers by Richard Evans, Barry McInnes, Geoff Mothersole, Stewart Grant and Kirstie McNaughton, Jane Boyd and Jenny McBride have been also accepted for presentation as a CORE panel at the Conference of the Society for Psychotherapy Research in Edinburgh in June.

### BACP recognises achievement

At its second Recognising Achievement Awards Dinner last October, BACP gave a special award for Advancement of Counselling and Psychotherapy



Research to John Mellor-Clark of CORE-IMS. The award, presented by Professor Glenys Parry (*pictured*), is in recognition of John's innovative work in the development of the CORE System and his contribution to the

development of routine outcome measurement in psychological therapy. Warm congratulations go to John for this richly deserved recognition.

### CORE-IMS Management Research

CORE-IMS is undertaking a potentially invaluable piece of research in association with members of the CORE System Trust and external consultants to explore service management styles and their potential impact on the ever visible challenges of routine evaluation. We look forward to bringing more news in due course.

### CORE-IMS Website Update

Look out for substantial updates between now and June at [www.coreims.co.uk](http://www.coreims.co.uk)

## New benchmarks for primary care

Services now have a series of published CORE benchmarks against which they can contrast their own performance. The new benchmarks - six in all – are for waiting times, CORE-OM completion, assessment outcome, risk assessment, therapy endings and clinical and/or reliable change.

The benchmarks were derived from the CORE National Research Database (NRD), and draw on data for over 35,000 clients from 34 primary care counselling services using the CORE System. They highlight the variations in performance across services against each of the benchmarks, and the generic nature of the benchmarks for CORE-OM completion, risk assessment, and change means they will be relevant to all services irrespective of setting.

John Mellor-Clark of CORE-IMS, commenting on the new benchmarks, said “For the first time these benchmarks open the therapy room door to profile a variable range of service quality. Some, knowing the relative performance of their service against such benchmarks, will feel as if their glass is half-empty. Others will see their glass as half-full and be provided with the necessary thirst for action.”

The size of the sample makes the NRD the largest naturalistic database for psychological therapy in the UK and a key resource for developing research evidence based on routine practice.

The benchmarks are profiled in a series of papers in the forthcoming CORE special edition of *Counselling and Psychotherapy Research (CPR)* due for publication

in March, and will form a key focus for the CORE Partnership conference to be held in York on March 23<sup>rd</sup>.

Together the papers represent a unique collaboration between research analysis conducted by PTRC and practice interpretation undertaken by members of the CORE Network steering group.

## CORE National Research Database

**Geoff Mothersole, Chair, CBN**

Congratulations to the collaboration between CORE IMS and the team of researchers at the Psychological Therapies Research Centre at the University of Leeds for collating, cleaning and exploring the CORE National Research Database that forms the single largest known dataset of practice-based evidence in the UK. The network looks forward to playing its role in the further exploration of this unique and exciting resource over the coming months.

*“...the CORE National Research Database... forms the single largest known dataset of practice-based evidence in the UK.”*

The CORE Benchmarking Network aims to exert influence at national and local levels on policy and practice by developing, sharing and promoting best practice and practice based evidence.

The Benchmarking Network Steering Group are:

<b>Geoff Mothersole</b>	West Sussex Health and Social Care NHS Trust
<b>Mike Carter</b>	North West Wales NHS Trust
<b>Stewart Grant</b>	Dumfries and Galloway NHS Board
<b>Andrew Kinder</b>	Atos Origin
<b>Jenny McBride</b>	Cardiff and Vale NHS Trust
<b>Christine Mead</b>	Terence Higgins Trust

<b>Steve Potter</b>	University of Manchester
<b>Margaret Smith</b>	North Mersey Community NHS Trust
<b>Belinda Wells</b>	Counselling Team Ltd
<b>Richard Evans</b>	CORE System Trustees
<b>John Mellor-Clark</b>	CORE IMS
<b>Barry McInnes</b>	Honorary Secretary