



# Khiron Clinics Annual CORE Outcomes Report 2018

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**Independent Data report prepared by CORE IMS**

**A report for clients recorded in CORE Net with a '*Closed*' status and a last session date between 1<sup>st</sup> January 2018 to 31<sup>st</sup> December 2018**

## The 2018 Cohort

To be included in the report, clients were audited to have a 'Closed' status to indicate the completion or cessation of treatment, along with a last session date recorded within 2018. At the time of analysis, baseline profile data included a total of 31 cases for 2018, comprising 24 (63%) inpatient only, 5 (23%) outpatient only and 1 (15%) both.

### Gender

Overall female to male gender % ratio was (84:16) which represents a greater proportion of female clients relate to 2017 (69:16), 2016 (69:31) and 2015 (70:30).

Table 1: Proportion of gender and inpatient/outpatient status

	All	Inpatient Only	Outpatient Only	Both
Female	26 (84%)	20 (87%)	5 (71%)	1
Male	5 (16%)	3 (13%)	2 (29%)	0
Total	31	23	7	1

### Proportion of clients above/below cut-off pre-therapy

29 clients (91%) were above the clinical cut-off (CORE-Outcome Measure (OM) score of 10) at intake, with 3 clients (9%) reported as below clinical cut-off.

### CORE OM Severity Profiles

All 32 clients had a valid pre-therapy CORE outcome measure completed. The average intake CORE score at assessment was 22, which was identical to the profile in 2017 (22) and similar to the profile in 2016 (21). This falls within the *Moderate-to-Severe* CORE severity banding (Barkham et al., 2010), with over 90% of cases rated as *Moderate* or above.

Table 2: Pre-therapy CORE assessment profile

Simple Score Range	Clinical Category	N	%	Cum %
0 to 5	<i>Healthy</i>	0	0	0%
6 to 9	<i>Low</i>	3	9	9%
10 to 14	<i>Mild</i>	3	9	18%
15 to 19	<i>Moderate</i>	4	13%	31%
20 to 24	<i>Moderate-to-Severe</i>	7	22%	53%
25 to 40	<i>Severe</i>	15	47%	100%

## CORE Outcome Profiles

This analysis includes those clients with a valid pre- and post-therapy outcome measure completed (n=23, 72% of those with a pre-therapy score).

Table 3: Pre-Post outcome measure score change by gender

	All (n=32)		Female (n=27)		Male (n=5)	
	Mean	Severity	Mean	Severity	Mean	Severity
Pre-therapy	22	<i>Mod-to-Severe</i>	23	<i>Mod-to-Severe</i>	19	<i>Mod</i>
Post-therapy	21	<i>Mod-to-Severe</i>	22	<i>Mod-to-Severe</i>	17	<i>Mod</i>
Pre-post change	-1		-1		-2	

The average change in scores for female clients was -1 and the average change score for male clients was -2. Each of these figures were lower than the pre-post change score of -6 recorded for female clients and -5 recorded for male clients in 2017. Overall, this service recorded a reduction in average scores of 1, meaning there was no change in the severity ratings in this 2018 cohort of clients. The proportion of female clients with valid post-therapy outcomes scores (70% of 27) was more or less comparable to male clients (80% of 5) given the relative size of samples.

The proportion of cases with a valid post-therapy outcome score is 5% lower than 2017 and 5% lower than 2016. The total number of clients with valid CORE outcome profiles (i.e. 22 with valid pre- and post-therapy scores) was significantly lower than 2017 (n=36), which in turn had been higher than 2016 (n=30).

Table 4: Pre-Post outcome measure score change by inpatient/outpatient status

	Inpatient Only (n=25)		Outpatient Only (n=6)		Both (n=1)	
	Mean	Severity	Mean	Severity	Mean	Severity
Pre-therapy	23 (25)	<i>Mod-to-Sev</i>	19 (6)	<i>Mod</i>	31	<i>Severe</i>
Post-therapy	22 (19)	<i>Mod-to-Sev</i>	17 (4)	<i>Mod</i>	24	<i>Mod-to-Sev</i>
Pre-post change	-1		-2		-7	

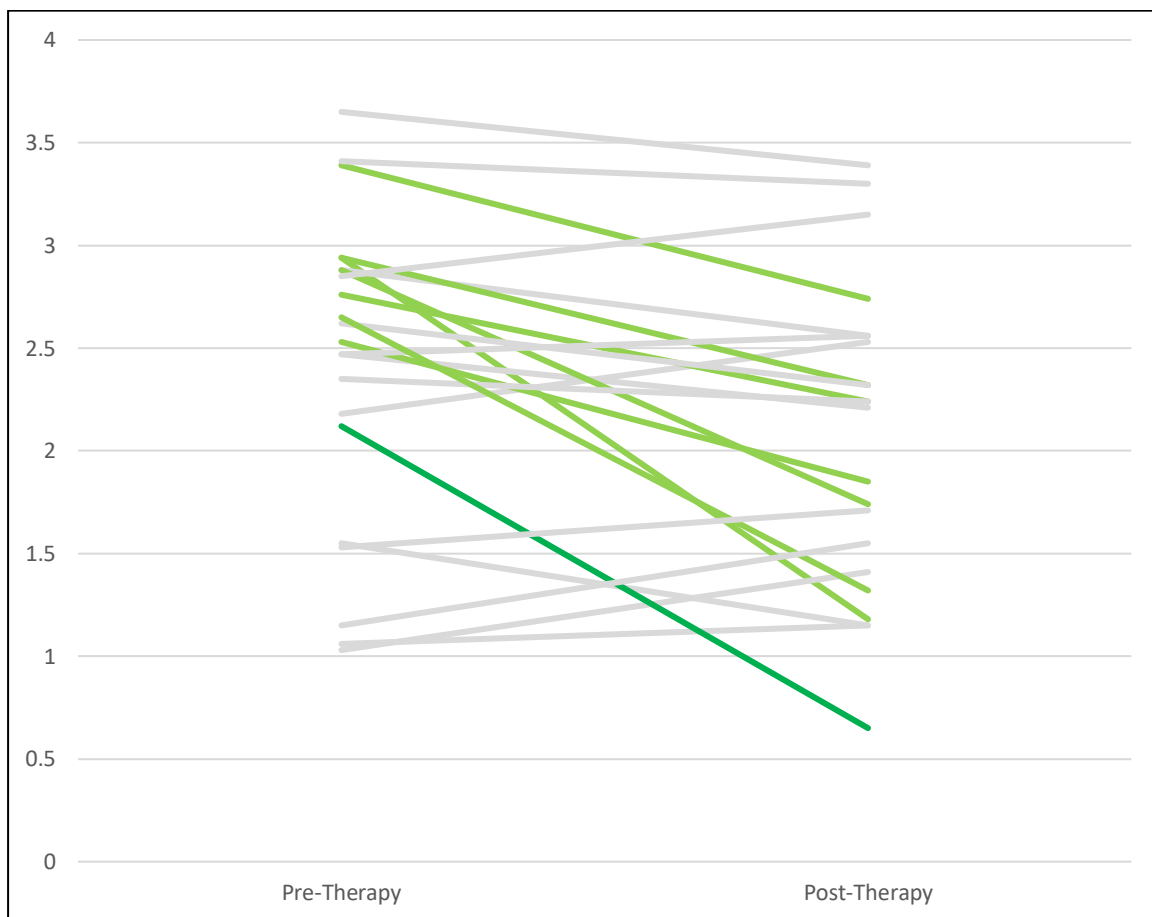
The average change in score for inpatient only was a reduction of 1 (lower than the 2017 figure of 5 and the 2016 figure of 6), while for outpatient only this was a reduction of 2 (lower than the 2017 figure of 7 and the 2016 figure of 3). For those attending both there was a reduction of 7 (which was the same as the single case in 2017). Having a valid post-therapy outcome score was more likely for inpatient only (76% of 25) than outpatient only (67% of 6).

Table 5: Recovery and Improvement rates

Clinical Outcomes	N	%	Cum %
Reliable AND clinically significant change (e.g. recovery)	1	4%	4%
Reliable Improvement	7	30%	34%
No reliable change	14	61%	95%
Deterioration	1	4%	99%

The overall recovery and improvement figures of 34% benchmark less well than the 2017 profile where 50% figures compared favourably against published secondary care comparators of 54% (e.g. Barkham et al., 2001). Individual (change) score trajectories are summarised in Figure 1 below. In terms of recovery and improvement profiles, the overall rate of 34% is significantly lower the figure of 63% in 2016 and the highest rated year in 2014 when the recovery and improvement figure reported was (72%).

Figure 1: Clients Outcomes 2018



**Key**

Dark Green = reliable and clinical significant change (i.e. recovery)	Grey = no reliable change
Sage Green = reliable change (i.e. improvement)	Red= deterioration

Table 6: Recovery and Improvement rates by gender

	Female (n=19)		Male (n=4)	
	N	%	N	%
Reliable AND clinically significant change (e.g. recovery)	1	5%	0	0%
Reliable Improvement	5	26%	2	50%
No reliable change	12	63%	2	50%
Deterioration	1	5%	0	0%

The overall recovery and improvement figures were higher for male clients (50%) than female clients (26%) although the absolute numbers with the male gender category was very small and should therefore be interpreted with caution.

Table 7: Recovery and Improvement rates by inpatient/outpatient status

	Inpatient Only (n=19)		Outpatient Only (n=4)	
	N	%	N	%
Reliable AND clinically significant change (e.g. recovery)	1	5%	0	0%
Reliable Improvement	7	37%	1	25%
No reliable change	10	53%	3	75%
Deterioration	1	5%	0	0%

The overall recovery and improvement figures were higher for inpatients (42%) than outpatients (25%). However, the absolute numbers of outpatients were small and should be interpreted with caution.

## Summary

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According to the CORE-OM scores at therapy intake, the majority of clients treated by Khiron House in 2018 were in the *Moderate-to-Severe* range and above. Average intake scores were similar to those recorded in 2017 although there were twice as many scoring in the *Severe* category. This identifies the complex case-mix which continues to be treated at Khiron Clinics.

The proportion of clients with valid a post-therapy outcome score has fallen relative to recent years, with both female and male clients reporting more or less similar response rates. Repeating the profile of 2017, the response rates in outpatient services remains low compared with 2016 and 2015.

Compared with previous years, rates of recovery and improvement were significantly lower with a further increase in the proportion of clients recorded as showing no reliable change compared with previous years. As in previous years, male clients reported higher rates of improvement than female clients – although the very low numbers need treating with caution. In contrast with last year, inpatient clients reported a higher rate of improvement than outpatients.

The 2018 results will reflect a period of Khiron's development in which expansion of services was not fully met by the expansion of the clinical staff team. In late 2018, under new clinical management, the 'Khiron Clinic' residential facilities opened, with 24/7 support and ability to successfully manage more cases in the severe category. The forthcoming 2019 report may cast more light on these changes.

More refined analysis of the CORE Outcome Measure may be useful to help profile any areas of consistent change across domains and individual items for the increasing proportion of clients presenting in the severe category at intake. Equally, an alternative outcome measure may be more suited to demonstrating change across this complex clinical population and/or quantifying changes that's perhaps more in step with the focus of treatment.

## CORE IMS Systems Methodology

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As a leading outcome measure in UK clinical practice, the CORE-OM consists of 34-items designed to help measure psychological distress and change. Structurally, it taps the domains of subjective well-being (4 items), problems (12 items), life functioning (12 items), and risk (6 items: 4 risk to self items and 2 risk to others items). Particular features of the CORE-OM include a balance of high (18) and low (16) intensity items to capture a broader intensity of affect and impact, positive (8) and negatively keyed items (26), and items focusing on both risk to self and to others.

CORE-OM clinical scores are calculated as the mean of completed items multiplied by 10, so clinically meaningful differences are represented by whole numbers. Thus, scores and their respective change range between 0 to 40. The CORE-OM's recommended *clinical cutoff score* is 10 and helps discriminate between a clinical sample and a general population sample to facilitate the measurement of clinical *recovery*. A reliable change index of 5 points helps assess statistically significant change – and is termed *improvement*.

Operationally used for outcomes profiling, clients that have pre- and post-therapy (COREOM) scores that change by 5 or more points are considered (statistically) *improved*, whilst clients that have change scores of at least 5 points and final scores below the cut-off of 10 are deemed *recovered*.

The CORE-OM is complemented by a Therapy Assessment Form to help provide a standardised summary of the clients' presentation and an End of Therapy Form to help provide a summary of the treatment provided along with a summary of clinical outcomes from the practitioners' perspective. The full suite of measurement tools is collectively known as the CORE System.

To help collate CORE System data for rigorous independent analysis, Khiron House uses CORE Net as specialist software supporting CORE outcomes management across UK clinical practice.

For further information and access to resources, including the CORE IMS Systems benchmarks, please visit <http://www.coreims.co.uk/>