

PERSON-CENTRED CARE IN CHILDREN AND  
YOUNG PEOPLE'S MENTAL HEALTH SERVICES

# Embedding the use of outcome measures and feedback tools

Guidance for practitioners working with children and young people  
around their emotional health and mental wellbeing



**EBPU** Evidence Based  
Practice Unit

A partnership of



**Anna Freud**  
National Centre for  
Children and Families



**CORC**  
Child Outcomes  
Research Consortium

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## What do we mean by person-centred care?

Person-centred care places the individual receiving the service or support at the heart of their care.

The Health Foundation identifies four principles of person-centred care:

1. affording people dignity, respect and compassion
2. offering coordinated care, support or treatment
3. offering personalised care, support or treatment
4. being enabling

## What are outcome measures and feedback tools in children and young people's mental health services?

Outcome measures are tools that can measure aspects of someone's mental health and wellbeing, for example how they feel or are functioning.

In children and young people's mental health, outcome measures generally take the form of standardised and validated questionnaires which are filled in by a child or young person themselves or by a parent, peer, clinician, teacher or similar professional.

Feedback tools and questionnaires can also focus on capturing children and young people's experience of the overall service, or their sessions individually.



# What is the role of outcome measures and feedback tools in person-centred care?

Outcome and feedback measures are tools practitioners and young people can use together to help understand the difficulties a child or young person is experiencing. They can help identify what is important to children and young people – what their goals are – and can track how they are feeling and functioning, and how they are progressing towards those goals over time. They can also provide information that helps in making collaborative decisions about next steps in the course of care or support.

<p><b>Understanding what's important to the child/young person</b></p>	<p><b>What's the problem?</b> <i>Understanding the issue the child/young person and/or family have come for support with.</i></p> <p><b>What do you want to change?</b> <i>Understanding the specific goals the child/young person/family have; what they want to work on.</i></p>
<p><b>Making decisions about support and intervention</b></p>	<p><b>How are things going?</b> <i>Symptom and goal tracking to see how things are progressing during support.</i></p> <p><i>Collaborative decisions around support and intervention.</i></p> <p><b>How are we getting on together?</b> <i>Monitoring our working relationship and agreeing anything that needs to change.</i></p>
<p><b>Have the child/young person's goals been achieved?</b></p>	<p><b>Have we done as much as we can/need to?</b> <i>Collaborative decision to close or move onto different support.</i></p> <p><b>How has this experience been?</b></p>

## Types of outcome and feedback measures

Some outcomes measures look at the severity of the **symptoms** the child or young person is experiencing; others look at their **wellbeing** more generally, or how well they are **functioning**. These measures can be helpful in developing a shared understanding of the problem and choosing the right support, tracking progress, and thinking about when it is time to end the work.

Formulating shared **goals** can play a key role in personalising care and has been advocated by service users. Clear, agreed goals can support collaborative, shared decision making about support or treatment options that will best fit the needs and wishes of the child or young person. This will lead to better clinical outcomes and better experience of support. One example of an outcome measure that supports shared decision making and person centred care is Goal Based Outcomes.

Measures that ask children and young people for **feedback** on a specific session, or on their experience of their therapist or practitioner, can help with early identification of issues that might lead to them disengaging or dropping out of care. **Experience of service** questionnaires can also provide important information on organisation-level issues, such as suitability of appointment times and facilities. Commonly used questionnaires, such as the CHI-ESQ, also ask explicitly about components of person-centred care, for example whether the person felt listened to and was treated with respect.





## The evidence from practice

By using outcome measures and feedback tools practitioners can offer children and young people another way (aside from spoken feedback) to communicate how things are going for them. The questionnaires may pick up on aspects of a difficulty that might otherwise be missed. Outcome and feedback measures can also be helpful in empowering children and young people where they are struggling with the language or confidence to verbalise how things are going for them.

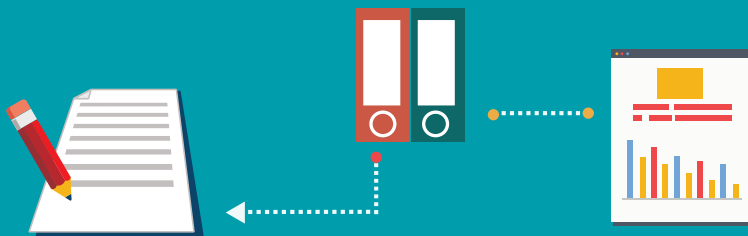
## The research evidence

Research also identifies a number of relevant benefits to using feedback:

- improved communication
- giving service users a better understanding of their condition and the care they receive
- improving collaborative practice, facilitating discussion between children and young people and practitioners about support goals, progress, and interventions
- opening up space for a greater involvement of patients and their families in treatment
- increasing patient autonomy and self-confidence.

## What does it mean to children and young people?

Children and young people say that outcome measures create a shared understanding of the issues they are facing, help them feel there is a point to the support and that they can make progress, and gives them a greater sense of control and partnership.



## Using measures in a person-centred way

Used the right way, outcome and feedback measures can be powerful tools in supporting children and young people to be actively engaged in making decisions about their support, and in ensuring that interventions and services are person-centred. Based on feedback from young people and practitioners, we have identified some top-tips for using measures in a person-centred way:

- ✓ Think about tools which are appropriate to what you are working on and the support being offered.

*For example consider if the language and questions fit the age/ capability of the child or young person, and the context you are working in.*

- ✓ Explain what the measure is for, how you will use it, why you are suggesting use of it, and who will see the information.

*This is ethical, respectful and will encourage the honesty that will make the data helpful.*

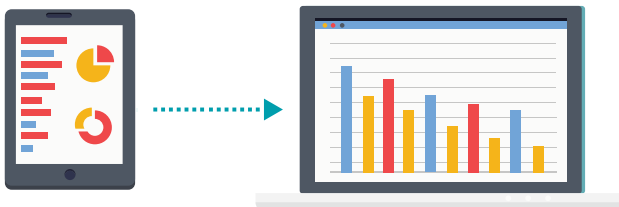
- ✓ Explore and choose the questionnaires you will use jointly with the child or young person.

*The measure should be one you both agree will provide meaningful data that is relevant to the young person's care, and one that they feel comfortable completing.*

- ✓ Have follow-up discussions with the child or young person and their parent/ carer.

*Depending on the context and the stage of engagement you might want to reflect on:*

- *how scores have changed over time*
- *how scores relate to average population scores, or other research about norms or thresholds for that measure*
- *how the child or young person interprets the score*
- *whether the score has any implications for the support they are receiving e.g. should anything change or stay the same?*



# Supporting person-centred care at service level

The Child Outcomes Research Consortium (CORC) has developed a **Best Practice Framework** based on evidence to-date of effective use of outcomes and feedback measures to inform quality service provision. It identifies four areas that organisations need to address for outcomes data and feedback to be collected and used in a meaningful way.

Here are some key elements that are in place where outcome measurement is embedded in a way that supports person-centred care:

LEADERSHIP & MANAGEMENT	<ol style="list-style-type: none"><li>1. An organisational vision for using outcome measures and feedback tools</li><li>2. An organisational approach to using these in a person-centred way</li><li>3. Commitment, support and leadership at a senior-level to using feedback and outcome information</li></ol>
STAFF DEVELOPMENT	<ol style="list-style-type: none"><li>4. Staff training to use outcome measures and feedback tools to support personalised care</li><li>5. Reflection on feedback in supervision</li></ol>
INFRASTRUCTURE & INFORMATION MANAGEMENT	<ol style="list-style-type: none"><li>6. The systems in place help practitioners to access, score and interpret responses for use with children, young people and families</li></ol>
SERVICE USER EXPERIENCE	<ol style="list-style-type: none"><li>7. Children, young people, parents or carers are involved in how measures are used in their care</li></ol>

Further information on CORC's Best Practice Framework can be found at <http://www.corc.uk.net/about-corc/best-practice-framework/>





## Ideas and learning from child and young people's mental health services

The case studies below share some ideas and learning from services that have been exploring different ways to embed the use of outcome measures and feedback tools as part of a person-centred approach.

**Sheffield Children's NHS Foundation Trust** introduced the use of iPads so that children and young people's feedback could be processed and used in a meaningful way with the child or young person in real time during their session. They used a Goals measure, the Child Outcome Rating Scale and the Session Rating Scale to capture feedback.

**Sheffield Children's**   
NHS Foundation Trust

A report from **two cross-service learning events** makes recommendations about which measures are best suited to getting valid, meaningful feedback in work with children and young people with learning disabilities. They highlight some principles to help ensure the voices of this group do not go unheard, including: drawing on multiple perspectives; using multiple media; looking at multiple time points; and identifying appropriate levels of resource to support this process.

**Bromley Y** use questionnaires as part of **triage** to help understand the way a young person is presenting and to assess their level of need. They find that this is helpful early information for the practitioner, and starts to build a relationship with the young person while they are waiting for treatment. Most importantly it allows the service to start working collaboratively with the young person and focus both them and the practitioner on what they want to get out of accessing the service.

  
Bromley Community  
**wellbeing**  
Service for Children and Young People

**Tees, Esk and Wear Valley NHS Foundation Trust** developed a Champion Network to support the use and understanding of outcome measures by practitioners, and the implementation of the supporting system by team managers. They set up a weekly outcome measurement "clinic", refresher training, internal discussions and case-studies about clinical use of routine outcome measurement and intra-team feedback to overcome any barriers.

**Tees, Esk and Wear Valleys**   
NHS Foundation Trust



## Conclusion

Outcome and feedback measures are powerful tools in supporting children and young people, and their families, to be actively engaged in making decisions about their support, and can ensure that interventions and services are person-centred. Outcome measurement can be used at a practice level with children and young people to develop a shared understanding of the problem, facilitate choice in getting the right support, jointly track progress, and agree when it is time to end the work. At a service level best practice outcome measurement helps to ensure that an organisation cultivates an enquiring, participatory culture and uses real world evidence and feedback to improve services and enhance person-centred care.



**The CORC website hosts a range of learning and case studies sharing the experiences of services working to embed the use of outcome measures and feedback tools. Take a look at [www.corc.uk.net](http://www.corc.uk.net).**





## **The Health Foundation Person-centred care resource centre**

Information about person-centred care together with resources from The Health Foundation and recommendations from around the web.

[personcentredcare.health.org.uk](http://personcentredcare.health.org.uk)



**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.

[www.corc.uk.net](http://www.corc.uk.net)

## **EBPU** **Evidence Based** **Practice Unit**

Founded in 2006 as a collaboration between UCL Faculty of Brain Sciences and the Anna Freud National Centre for Children and Families, the **Evidence Based Practice Unit (EBPU)** bridges cutting-edge research and innovative practice in children's mental health. We conduct research, develop tools, provide training, evaluate interventions and disseminate evidence across four themes: risk, resilience, change and choice. Our vision is for all children and young people's wellbeing support to be informed by real-world evidence so that every child thrives.

[www.ucl.ac.uk/ebpu](http://www.ucl.ac.uk/ebpu)