

P-1151 - AUDIT ON CORE COLLECTION AT MAUDLSEY PSYCHOTHERAPY SERVICE

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Introduction: CORE (Clinical Outcomes for Routine Evaluation) has been designed in the UK as an outcome measure for psychological therapies. It is a generic self-report measure of global distress with high internal and test-retest reliability (Evans et al., 2000). It is used widely within the National Health Service as an initial screening tool and for assessing response to treatment and is mandatory for all patients receiving psychological therapies at South London & Maudsley Trust, but anecdotal evidences suggest otherwise.

Objectives: To provide an overview of CORE collection at the Maudsley Psychotherapy Service.

Method: A list of all patients who were referred for individual psychodynamic therapy and discharged between June and November 2010 was obtained and their electronic clinical notes were reviewed.

Results: A total of 258 patient records were analysed. 149 were excluded due to incorrect or missing data. Of the data sampled, the mean age was 39.4 years with a 3:1 female to male ratio. CORE collection at assessment was 79% but only 24% during/at the end of therapy. Possible reasons for CORE not being collected during therapy were identified as patient refusal (2%) and premature termination of therapy (31%). Junior doctors were the treating therapists in 65% cases where no CORE was collected during therapy.

Conclusion: Current trust policy in regards to CORE collection is not being met. Recommendations include increasing awareness among therapists, sending the CORE questionnaires routinely to all patients in active therapy and upon discharge and completing the audit cycle once recommendations have been implemented.