

# **CLEAR Adult Service Evaluation Report**

April 2021 to March 2022

This evaulation and report was completed by Nicola Henderson, Clinical Psychologist and CLEAR Children and Young People Service Lead.

The information which has contributed to this report has been based on the CLEAR adult waitlist referrals and assessments undertaken within the timeframe identified and the routine outcome measures which are completed within the adult service.

During the reporting period, the Adult Service Waitlist had periods of closure in response to sustained high self-referrals; in order to manage the timeframes and funds available the waitlist was closed. The communication of closure and re-opening of the Adult Waitlist was made on the CLEAR website and at point of contact. In these periods, referrals with spot purchase and from the Victim Support pathway were progressed. The waitlist closure periods during the reporting period were 30<sup>th</sup> July 2021 to 14<sup>th</sup> November 2021, and from 23<sup>rd</sup> February 2022 though the end of the reporting period (end of March 2022).

From March 2021, the adult service offer for face-to-face sessions gradually resumed; as at March 2022, 28% of counselling sessions within the month were by telephone. All initial assessments are now completed by telephone.

# Demographic and service delivery information

The total referrals received (includes all referrals to the Adult waitlist, from the Victim Care Unit and Project work referrals e.g., Who Dares Works, Positive People Project, WeAreWithYou) within the year time period of 01 April 2021 to 31 March 2022 was 478.

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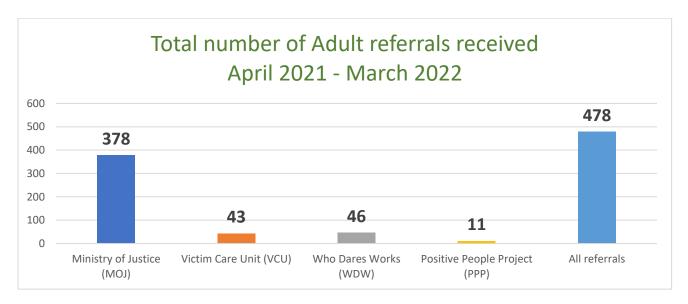




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The total allocation of referrals to counsellors and therapists was 319, with a majority (179) of adults having an initial assessment and being allocated a counsellor to access sessions through the Ministry of Justice Rape Crisis fund (MoJ).

While undertaking the processes of referral coordination, waitlist allocation and management and allocating for assessment and therapist/counsellor, there were numbers of referrals which were signposted as CLEAR was identified as not being the appropriate service, or the client was not ready for a counselling intervention e.g., client in mental health crisis, presenting with psychotic symptoms or physically unwell. Further, at the time of making contact to arrange assessment and/or allocate a counsellor/therapist, there were a number of referrals where there was no contact achieved, or the client declined to proceed with an assessment and allocation of counsellor/therapist.

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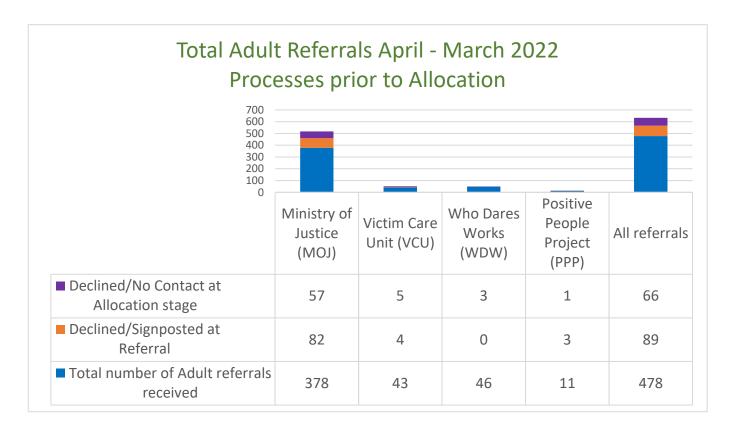




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# Introduction of Waitlist management

From October 2021 through to the end of March 2022, a frame of waitlist management was introduced whereby Adults who were or had been referred to the Adult Waitlist were offered regular contact (e.g., telephone, email or resources) to help manage the wait for therapeutic support to start. This was an opt-in support. On average each week, 23 people were contacted by telephone, two by email and two with provided with resources by post.

# Allocation and Process of Intervention from Referrals April 2021 -March 2022

Within the MoJ Rape Crisis fund, a total of 47 completed their counselling intervention, recording ten or more sessions. While 39 clients disengaged from the counselling intervention after less than 10 sessions, a disengagement rate of . At the time of reporting, three clients remained on hold and 84 clients remained engaged and in progress in the counselling sessions. Within the MoJ Rape Crisis fund, we have recorded 38 males, 111 females and one transgender client.

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The referral pathways for the MoJ Rape Crisis fund referrals are predominantly self-referral (62%). This reflects the reopening of the Adult Waitlist in November 2021 accepting only self-referrals. There were 12 referrals from GPs directly and a further two referrals from Outlook South West and 40 referrals from Community Mental Health teams. Seven referrals cam from Victim Liaison and Sexual Assault Referral Centres (SARC) while thirty-five referrals came from the charity and voluntary sector, mental health and substance abuse support services. The referrals and allocations were appropriate for this funded pathway as the historical experiences of the clients were 38% reported rape/sexual assault and 58% reported childhood sexual abuse.

The outcome for the Victim Care unit referrals during the reporting period was a total of 43 referrals received, nine declined or where not responsive to contact, 34 referrals were allocated a counsellor/therapist with 19 completing sessions, ten disengaging after less than ten sessions and five referrals remaining in progress. The referrals were made for 32 females and 11 males.

Within the Project works for CLEAR, a total of 57 referrals were received; 46 Who Dares Works and 11 Positive People Project with seven declining sessions or not responding to contact made. Fifty referrals were allocated during the reporting period with 22 clients completing a counselling intervention of 10 sessons or more. A total of five disengaged from counselling in less than 10 sessions. The referrals were made for 38 females, 13 males and two transgender clients (Four clients gender not recorded) with histories of emotional trauma.

There is an overall disengagement rate of 20.5% for allocated clients across all funding pathways.

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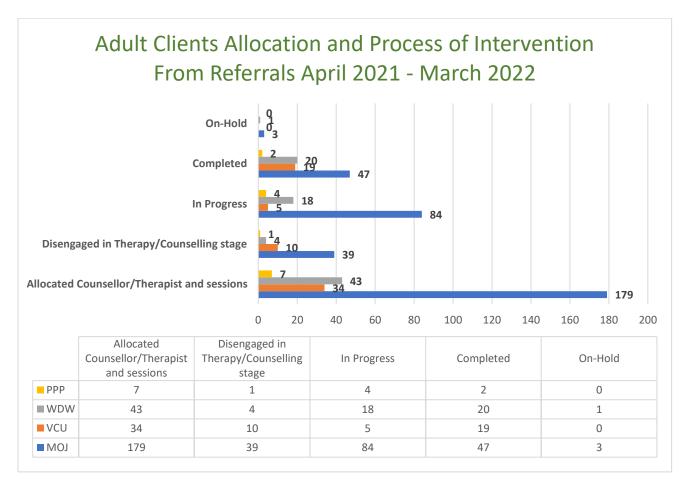




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## Outcome and effectiveness of service

The CLEAR adult service routinely uses The Warwick-Edinburgh Mental Wellbeing Scale — Short form (SWEMWBS)<sup>1</sup> which was developed to enable the measuring of mental wellbeing in the general population and the evaluation of projects, programmes and policies which aim to improve mental wellbeing. Clients are asked to complete this measure on assessment and sessionally throughout the counselling intervention; the routine measures are voluntary and the choice to complete these is made each session. We are able to then measure preand post counselling mental wellbeing to examine differences at the individual level and compare outcomes to those reported in community.

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<sup>&</sup>lt;sup>1</sup> For further information and published research on the SWEMWBS, you can refer to https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/

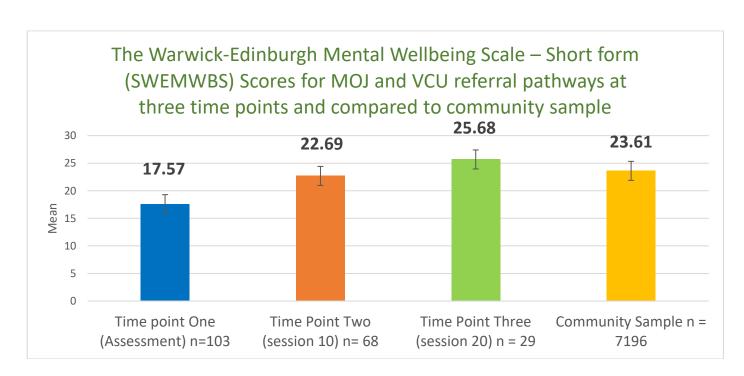


Within the reporting period, the data collection rate for the SWEMWBS was 68% for those who were engaged within the MoJ Rape Crisis (MoJ) and Victim Care Unit (VCU) referral pathways. The data collection rate for the SWEMWBS was 83% for within the project work allocated.

## MoJ Rape Crisis and Victim Care Unit referral pathways

The analysis of observations showed a significant difference in the direction of improved mental well-being between pre-counselling SWEMWBS and post-counselling SWEMWBS scores (t = -8.05, p = 0.00). The Cohen's d effect size of (-)1.69 demostrates a large effect of the counselling intervention on the basis of improved mental wellbeing.

Further analysis comparing three data points (On assessment, at 10 sessions and 20 sessions) across the counselling intervention found consistency in the improvements of mental well-being, with the mean SWEMWBS score reported by clients on assessment to be M = 17.57, SD = 4.75, compared to 10 sessions to be M = 22.69, SD = 5.37 and 20 sessions to be M = 25.68, SD = 4.91. This is comparable to the SWEMWBS scores from the 2011 Health Survey where the mean mental wellbeing scores of the community were reported as M=23.61, SD=3.9.



### Project referral pathways

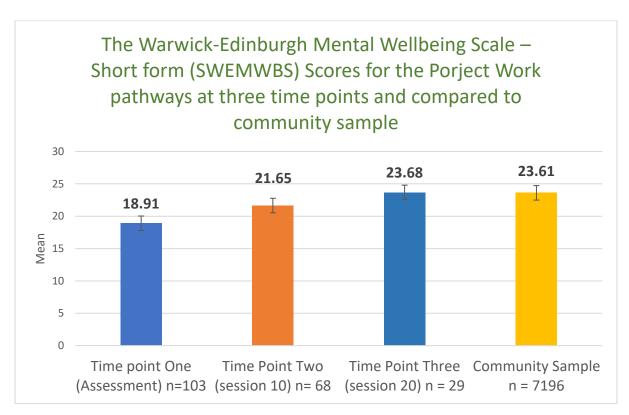






On analysis, the pre and post-counselling scores based on a 10 sessions counselling model showed improvements in wellbeing which were significant (t = -1.87, p = 0.03, n = 19). Further, the pre and post-counselling scores based on 20 sessions showed significant difference and improvements in mental wellbeing (t=-2.24, p=0.02) however to be aware that this is based on a small number of clients n=8 where an extension of sessions has been undertaken.

Further analysis comparing three data points (On assessment, at 10 sessions and 20 sessions) across the counselling interventions found consistency in the improvements of mental well-being, with the mean SWEMWBS score reported by clients who completed 10 sessions to be M = 21.65, SD = 4.84 and 20 sessions to be M = 23.68, SD = 6.26. This is comparable to the SWEMWBS scores from the 2011 Health Survey where the mean mental wellbeing scores of the community were reported as M=23.61, SD=3.9.



#### In-service questionnaire

The CLEAR Adult service routinely asks for clients to complete a 16-item questionnaire pre and post counselling intervention which explores the client's perspection of self, confidence, and future. It also asks the client to reflect on their experiences of counselling. This measure is not standardised; a sample of ten was randomly selected from the total

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questionnaires submitted within the reporting period, and two item questions analysed to explore if any differences were shown.

#### Question 7.

I don't feel like I can change anything in my life						I feel I have made some positive				
										changes
0	1	2	3	4	5	6	7	8	9	10

A significant improvement was found within the sample on this item from pre (M=5) to post counselling intervention (M=7.5; t = -2.71, p = 0.01).

#### Question 16.

I don't feel confident to focus on my future							I now feel confident to focus on my				
										future	
0	1	2	3	4	5	6	7	8	9	10	

A significant improvement was found within the sample on this item from pre (M=5.1) to post counselling intervention (M=8.4; -3.51, p=0.00).

The reflections given post-counselling intervention from the clients within the sample I feel gratitude for your professionalism and support. Also grateful to CLEAR for allowing me 20 weeks of counselling that has helped me come through this difficult time in my life. I felt believed and accepted which I am truly thankful for.

I am really grateful that I finally had the chance to work through it. Not like I expected but has really made a difference and has been hugely beneficial. wow!

Thank you. Thanks for your kindness, I didn't realise I was on this journey until I reached my destination. I now feel ok to be ok. I don't feel alone. I am happy and know who I am. I'm also happy to be contacted at any time for my feedback.

I'm more understanding pf myself and my situation - I don't feel like I'm the main problem for myself. When I have my dark times they last for hours now, not days, like before. My care was really good and tailored to my specific needs. I developed a good bond with my counsellor and that enabled me to learn and understand more about my problems. My counsellor explained things really clearly and was very patient and understanding. Nothing comes to mind that I think needs improving, only thing I can say is that Cornwall desperately

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needs more funding for more services like this to help people like myself who are suffering and need treatment. I would recommend my counsellor to anyone.

Feel much more confident. Counselling absolutely brilliant. I feel I can get on with my life and enjoy it. I am so thankful for what [counsellor] has helped me with.

Thank you for your kindess and honesty. You have helped me to be myself, give me back my pride and belief. I am looking after myself and going for jobs that I know that I can manage. I am eating better and am in a serious relationship, I feel happy.

# CLEAR Service feedback by clients

The CLEAR Service Feedback questionnaire is embedded across all referral pathways and interventions for clients to share their thoughts on CLEAR as a service at the end of therapy; what was good about their care, what could be improved, any thing else to feedback and an overall rating of the service.

(Partner feedback) Client found the service really good. It has given a number of coping strategies. I have noticed a real difference and feel that this was beneficial.

Openness, Judgement free environment, Helping to destigmatise the past, Art to help express trauma

It has really helped me understand things such as triggers, and have helped my confidence, self-esteem, boundaries and assertiveness. Overall, it has made me feel much more empowered and more confident to deal with situations. The fact that there were 20 sessions available is excellent and you don't have to rush. Also, that I was able to do the sessions over the phone, which made it much more accessible and able to fit in around work. It has made sense of everything that was affecting me deep down inside, which I didn't really understand, but which was constantly affecting me.

I was given the space and time to explore different experiences in my life when I had wanted to go there. I felt safe enough to do this and I wasn't judged or didn't feel judged. I used to be a therapist and so the internal pressure that I had was immense to "pretend" I had dealt with everything that had happened to me as a child and in my marriage. I felt cared for and heard and this was huge for me.

I felt listened to and not pressured. It was nice to so do some painting, I don't normally like art but I enjoyed it. I have learnt coping strategies too.

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My experience and our connection was wonderful. I felt we could communicate and I felt very heard. We had a similar vibe and I felt we spoke in the same language and creativity and similar values. It was very helpful and we have done some very good work and I now can connect to my feelings much better and feel hopeful about the future.

I do not think it could have been any better – it has changed my life.

Having a safe space to talk about my past trauma and learn to process it and deal with dissociation/flashbacks when then happen.

What was really good about my care was the way it all seemed to be very professional and caring. I felt helped and listened to.

Explaining how past events have affected my life and is common for people who have been through childhood trauma. Being a mechanic, it feels like [therapist] has given me the tools and instruction manual to see clearly the pile of parts in fromt of me so I can get on and put it back together. Thank you!

There's so much, being able to build trust at my pace, exploring new opportunities to help with flashbacks and nightmares, [therapist] was amazing, she really listened to my concerns and supported me through a lot that I haven't had support with before. I've never been able to open up without being shamed or judged and my sessions really changed this, knowing I wasn't alone. I am so thankful for the support I received in and outside of the sessions.

(Partner feedback) Would recommend this service to everyone who shares their life with someone who has experienced childhood and adult trauma.

#### Things that could be improved

(Partner feedback) We had to travel a long way for the sessions – it was made clear from the start and remote/online was offered as an option however client prefers face to face contact.

#### More sessions

I started my therapy on the telephone which didn't work for me. I was able to change to face-to-face sessions however there was a longer wait. Less waiting time for face-to-face sessions would be good.

The stairs were a challenge.

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Had to wait a long time on the waiting list.

The counselling was excellent and helpful but I had expected from my G.P. to have a more targeted form of trauma psychotherapy.

Coming to a new place on public transport was hard for me because of how my brain works.

The overall (averaged) rating given by clients/partners/family members, where 10 = the best a client could hope for in the service was 9.6.

# Learning and Goals from the year

There remains an ongoing impact of the pandemic and subsequent service responses with mental health issues and crisis continuing to increase. Health Services like the CMHT are struggling following the pandemic strain on services which has a knock-on effect on CLEAR. With more complex clients and the funding returning to pre-pandemic amounts, we have not been able to meet the need. Therefore we have had to close the waiting list and implement waitlist management.

A goal from the year is the transition of our client information and records to a CLEAR database which will enable up-to-date clinical information for each client and clients records being central, improving on our risk and safeguarding overview and management.

Further with the database, direct input of outcome measures is prompted and enabled. This could increase the collection of outcome data and allow for the Routine Outcome Measures (ROMs) for the Adult Service to be expanded to include trauma response and recovery measures.

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