



**Site ID**

letters only   numbers only

**Client ID**

Therapist ID    numbers only (1)   numbers only (2)

**Sub codes**

D D / M M / Y Y Y Y   /   /

**Date form given**

**Male**  **Female**

**Age**

**Stage Completed**

S Screening  **Stage**

R Referral

A Assessment

F First Therapy Session

P Pre-therapy (unspecified)

D During Therapy

L Last Therapy Session  **Episode**

X Follow up 1

Y Follow up 2

**Total Score**  **Risk Score**

**IMPORTANT – PLEASE READ THIS FIRST**

**HOW DO YOU FEEL?**

This form has 14 questions about how you have been OVER THE LAST WEEK.  
People with a learning disability helped make these questions.  
Please tick the box that fits how you feel.

**Over the last week**

*Not at all*      *Sometimes*      *A lot*

**1**  **Have you felt very very lonely?**  
Have you felt really alone?

**2**  **Have you felt confused?**  
Has it been hard to think straight?

**3**  **Have you felt happy with the things you have done?**

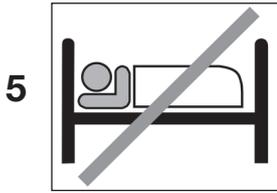
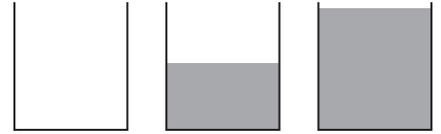
**Please turn over**

# Over the last week

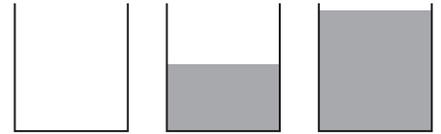
Not at all      Sometimes      A lot



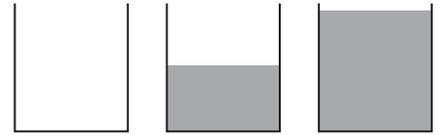
**Have you found it hard to say how you feel?**



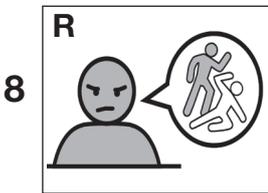
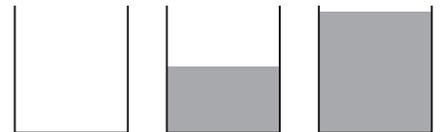
**Have you had difficulty getting to sleep or staying asleep?**



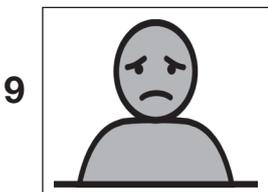
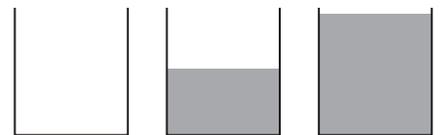
**Have you felt frustrated or upset with your learning disability?**



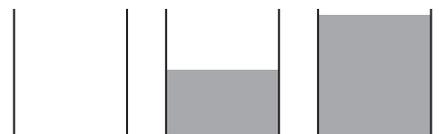
**Have you felt sad about people you have lost?**  
For example family, staff, friends



**Have you threatened or shouted at someone?**



**Have you felt unhappy?**



Please turn over

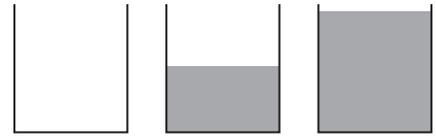
# Over the last week

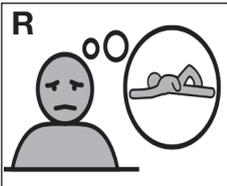
Not at all      Sometimes      A lot

10 

**Have you felt people are getting at you?**

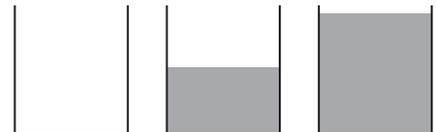
Have you felt people were picking on you?



11 

**Have you thought about ending your life?**

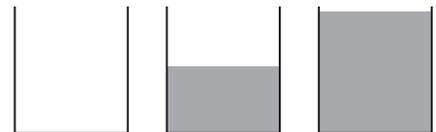
Have you wanted to be dead?



12 

**Have you bottled up angry feelings?**

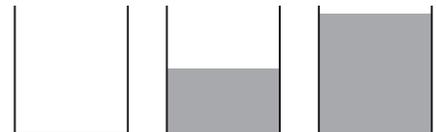
Have you felt ready to blow inside?

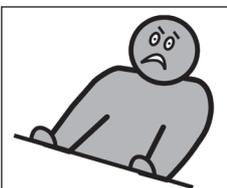


13 

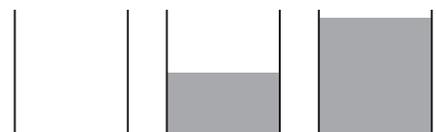
**Have you hurt yourself on purpose?**

eg. cutting, picking, hitting yourself, not taking tablets, drinking lots of alcohol



14 

**Have you felt really scared or frightened?**



**THANK YOU FOR DOING THIS QUESTIONNAIRE**

**Scoring – all questions except question 3:**

Not at all = 0      Sometimes = 1      A lot = 2

**Question 3 only**

Not at all = 2      Sometimes = 1      A lot = 0

*Add together the item scores for the Total Score.*

*Divide by the number of questions completed to get the Mean Score, multiply by 10 to get the Total Clinical Score*

**Total Score**

**Mean**

**Total Clinical Score**



## **CORE - LD Learning Disabilities**

### **INSTRUCTIONS FOR USE**

CORE-LD is a validated self report outcome measure for use with clients with a learning disability receiving any form of psychological therapy.

It is designed to be used as part of the therapeutic process and completed with the therapist ideally between the first and third session. Services may well repeat the questionnaire at intervals during therapy and always at the end of therapy.

#### **INTRODUCING CORE-LD TO YOUR CLIENT**

You and your client will both need a copy of CORE-LD.

It is expected that your client will mark their answers on their copy.

Tell the client this is a special questionnaire because it was made together with people with a learning disability who understand what it's like living with a learning disability and the problems people face.

Emphasise there are NO right or wrong answers the questions are simply about how they feel.

Use the first question to model the process, show how the picture supports the question and how the scoring beakers range from 'not at all' (empty) to 'sometimes' (half full) to 'a lot' (full).

Encourage the client to answer all the questions but where this is not possible reassure the client and go onto the next question.

On completion of the questionnaire explain you will ask the client to do the questionnaire again to help see if things have changed. It is helpful to discuss these changes within the therapy relating back to the relevant items.

#### **USING THE MEASURE**

**1. clinically on a single score for one person:** don't base any major clinical decisions on scores alone, i.e. don't say "low score, doesn't need anything"

As yet there are:

- NO clinical/non-clinical cutting points
- NO "clinically improved" criteria
- NO "reliably improved/deteriorated" criteria

However with increased data collection it is hoped these will be available within the next two years. It should be noted there will probably be greater variability with CORE-LD and people with a learning disability than with CORE-OM and the non LD population. Therefore services should always use data with greater caution.

**2. clinically looking at change:** it is safer to use changes in scores within an individual alongside other clinical indicators to decide things like changing therapy, adding other interventions, positively connoting and supporting progress. Ideally, discuss with client.

**3. data collection:** always attempt to contribute data, ideally item data, with age, gender, location, date and where in services, to some national database to improve on the guides the data can provide.

**4. for research:** use cautiously to explore both the measure but also substantive questions about things that affect wellness in people with a learning disability.

**5. for service management and reporting:** aggregate data and report to practitioners first and foremost: encourage them to own and think about the data; then share with commissioners, referrers and above all, user & carer groups. See (3): always share anonymised data including item data.

**6. for commissioning:** too early to use as evidence for reliable commissioning. In a few years however, when there are some good sized clinical and non-clinical datasets, it should become a part of good commissioning.