



Implementation of the Talking Points: Personal Outcomes Approach in Orkney (formerly UDSET) Learning from the first two years

July 2009

Background

Over the past three years the Joint Improvement Team have been working with partnerships across Scotland to develop and implement the Talking Points: Personal Outcomes Approach (formerly UDSET). Orkney was one of the first partnerships in Scotland to integrate outcomes into their mainstream review processes and as such have been at the forefront of developing the approach.

This short report documents progress with implementation of the outcomes approach in Orkney and presents some key lessons and messages for future implementation both in Orkney and nationally.

The evidence presented in this report was gathered by Dr Ailsa Cook (JIT) in June 2009 over two days of meetings with:

- Social work and OT staff using the outcomes review form
- Team Manager, Adult Social Work, Orkney Islands Council
- Service Improvement Manager, Adult Social Work, Orkney Islands Council
- Interim general manager CHP
- Assistant Director, Community Care, Orkney Islands Council
- Manager of the Carers Centre
- Information Systems administrator, Orkney Islands Council

Development of the Personal Outcomes Approach in Orkney

In late 2006 representatives from Orkney Health and Social Care Partnership, including a representative from a local provider organisation (the Carers Centre) started working with the JIT to examine how information from service users and carers could be routinely collected to inform performance management and service improvement. There were two key drivers for this work:

- Local commitment to developing a streamlined and systematic approach to collecting the views of service users and carers and avoiding over-consultation.
- The inclusion of Talking Point outcomes within the Community Care Outcomes Framework and an interest in including these measures within local performance reporting systems.

In early 2007 the team identified their review process as an opportunity to systematically collect evidence from service users and carers as to the difference that services were making to their lives. Over the following months they worked with some support from the JIT to develop an outcomes focussed review form for service users and a version for carers.

In April 2007 the Orkney outcomes focussed review form was launched and since then has been used routinely by the Community Care Team with adult users of community care services. Between 200 and 250 reviews are conducted each year using this tool. The carers' version of this form was completed shortly afterwards and since July 2007 has been used routinely by staff at the Orkney Carers Centre, who conduct reviews of carers on behalf of the Council.

Late in 2007 work was carried out with funding from the JIT to embed the review form into the local PARIS IT system. Whilst the form has been specified and built, the IT infrastructure is not yet in place to enable workers to input review material electronically into the system and reviews are written up in word documents and appended electronically onto client's files.

Despite these technical limitations, a report on the data was produced at the end of the first year of implementation (Forbes-Mathison, October 2008). The Adult Social Work Team Manager analysed a sample of 25 reviews and reported on key qualitative and quantitative findings. The report from this exercise was circulated widely, including to the Directorate.

At the end of the second year of implementation, the team are starting work to embed the outcomes approach into assessment and care planning and have sought some support from the JIT to achieve this. To date, use of the review form has been predominantly by the Community Care Team and Carers Centre. However the home care team are about to start conducting their own six monthly outcomes focussed reviews and it has been proposed that the Care Homes should also do this. As the outcomes work moves to focus on assessment, colleagues from health and community mental health will be included in the next phase of development work, with a view to rolling out the outcomes approach more widely.

Learning Points: Impact on staff practice

After two years of using the Outcomes focussed review form, staff at both the Community Care Team and Carers Centre were broadly very positive about the form and its impact on their practice. In particular they highlighted the following:

- Although the reviews took longer than the format they used previously, staff reported that this was time well spent and they valued the permission to spend this time that the approach gave them. Each review conversation would take about an hour (as opposed to 20 – 30 minutes previously) with an additional couple of hours to write up.
- Staff highlighted that this way of working challenged them to be more confident and assertive in their practice as it demanded that they both

engage and negotiate with service users, carers, and service providers during the review process itself.

- The approach discouraged them from passing decisions about individual care plans back up the hierarchy and made them more likely to deal with issues there and then.
- There was some concern amongst the community care team that this semi-structured, everyday approach was not valued by health colleagues, who may feel that it did not provide the correct tool to address specific health issues. This was perceived as being part of the reason for their non-engagement to date. Staff thought that when health colleagues did engage they would find that this way of working would meet their needs and, as Community Care Team staff had found, would be more challenging but also more satisfying.
- It was suggested that some of the cultural change needed to embed an outcomes approach in assessment and care plans was already happening through the use of outcomes in reviews. Doing outcomes focussed reviews makes staff think about outcomes in assessment and where needed, staff can fill in much of an SSA following a review conversation.
- Following an outcomes focussed conversation, staff felt able to reliably record how well key outcomes were achieved for service users and carers using the scale summary outcome measures.

A review of some of the forms completed showed that staff were consistently recording high quality information about the impact of services on individuals. There was a tendency for review forms to be focussed on outputs, as opposed to outcomes. Staff acknowledged the challenges in truly focussing on outcomes within a service context with limited choice and thought that these conversations would be easier to have as the whole system changes over time to support an outcomes approach.

Learning Points: Impact on service users and carers

Staff identified three main ways in which the implementation of the outcomes focussed reviews in Orkney had made a difference to service users.

1. Improvements to care plans. Staff identified a wide range of improvements to care plans that were identified during outcomes focussed reviews, that would not have been picked up during the previous review process. Often the issues identified were small, such as changes to activities during a placement, and could be easily adjusted by the service provider (who was present during the review and therefore compelled to act).
2. Feeling included: Staff felt that the outcomes focussed reviews gave service users and carers more of a voice than they had had previously, which was something they valued. Not only did a very high proportion of service users report feeling included in their package of care (in a review of 25 cases, of the 19 people who could respond to this question 100% felt partially or fully included), but complaints had also gone down.

3. Being able to talk: Staff reported a number of instances of service users and carers reporting very distressing or difficult incidents and life events to them in the course of doing the outcomes focussed reviews. They had not routinely experienced these kinds of interactions with service users and carers using the previous forms and felt that whilst difficult to deal with, it was significant and important that individuals felt able to open up to them in this way.

Learning Points: Impact on whole systems

Staff within the partnership identified a number of instances where information gathered during the reviews had been used to inform the planning and commissioning of services as well as service improvements. For example:

- Evidence from reviews showed a considerable number of cases where it appeared that the service user might benefit from intervention under the Adults with Incapacity (Scotland) Act 2000 to properly manage and protect their finances. This evidence contributed to the overall case for additional resources to be allocated to a dedicated AWI post, this post was duly funded and appointed to.
- In response to reports of social isolation of older people living in care homes, a conversation club has been set up in partnership with a local voluntary organisation.
- Evidence from the reviews carried out with service users who are placed out of Orkney was fed into the formal Best Value review of the Council's use of Out of Orkney Placements. This enabled the Department to show quite clearly that almost all people in out of area placements are happy and settled and do not wish to return to Orkney. This evidence played a key role in persuading local elected members that the overall use of out of area placements was appropriate and that returning those individuals to Orkney was not necessarily where the Council should focus its efforts.
- Evidence from the reviews was used to develop case examples around the use of telecare for a seminar for elected members.

In addition, two of the summary outcome measures are included in the partnership's Single Outcome Agreement.

Issues for future development and implementation

This brief review of implementation of the Talking Points: Personal Outcomes Approach in Orkney points to a number of key areas for future development:

1. Embed outcomes in assessment and care planning.
Whilst service users and carers are already experiencing benefits of the application of the approach in reviews, it is only by embedding an outcomes approach in assessment that whole packages of care can be outcomes focussed. This development work is already underway.
2. Extend implementation of the approach to health colleagues

To date implementation has been focussed on the Community Care Team and Carers Centre, with some recent activity by the Home Care Team in the Council. There is a need to get Community Nursing and Community Mental Health Team colleagues bought into the approach to ensure the outcomes approach is mainstreamed and support joint working.

3. Get support from business, planning and information teams.
Using the outcomes focussed review form, detailed qualitative and quantitative information is being systematically collected on whether user and carer outcomes are being achieved. This information is not as yet being used to its full potential for several reasons. Firstly the review forms have not been embedded in the PARIS IT system, which means reports cannot be generated electronically. Secondly all analysis and reporting is being conducted by the Adult Social Work Team Manager, who has received no support in tailoring reports to key audiences within the partnership.
4. Get buy in from senior management and national buy in
Staff reported that the lack of focus on outcomes across the whole system both locally, and including some of the structures and reporting formats imposed on a national level, was a significant barrier to them supporting service users and carers to achieve good outcomes. The implementation of the outcomes focussed reviews has provided a rich body of evidence to both support a move to a more outcomes focussed partnership and also to evidence progress against strategic objectives.

Summary and recommendation

Overall progress in implementing the Personal Outcomes Approach in Orkney is significant and progressing well. The Community Care Team and Carers Centre have overcome a number of practice issues to embed this process in their day to day work. Not only is the process improving services for individuals, but the very rich body of information gained through this work has been used to inform decision making in relation to services more generally.

There is, however, a need to extend awareness and understanding of this work across the whole organisation. This could be addressed through a workshop for key stakeholders, including senior managers and training for front line practitioners, including those from community nursing and community mental health teams.

In addition, the use of data on user and carer outcomes for performance reporting and service improvement should be included in the overall review of performance management systems scheduled for July 2009.

Update September 2009

Following the review of performance management systems in July, an outcomes focussed performance management framework has been developed

for consideration by the newly constituted Orkney Health and Care Board. This framework includes the user and carer experience measures within the Community Care Outcomes Framework and builds on the work implementing Talking Points to date.

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