

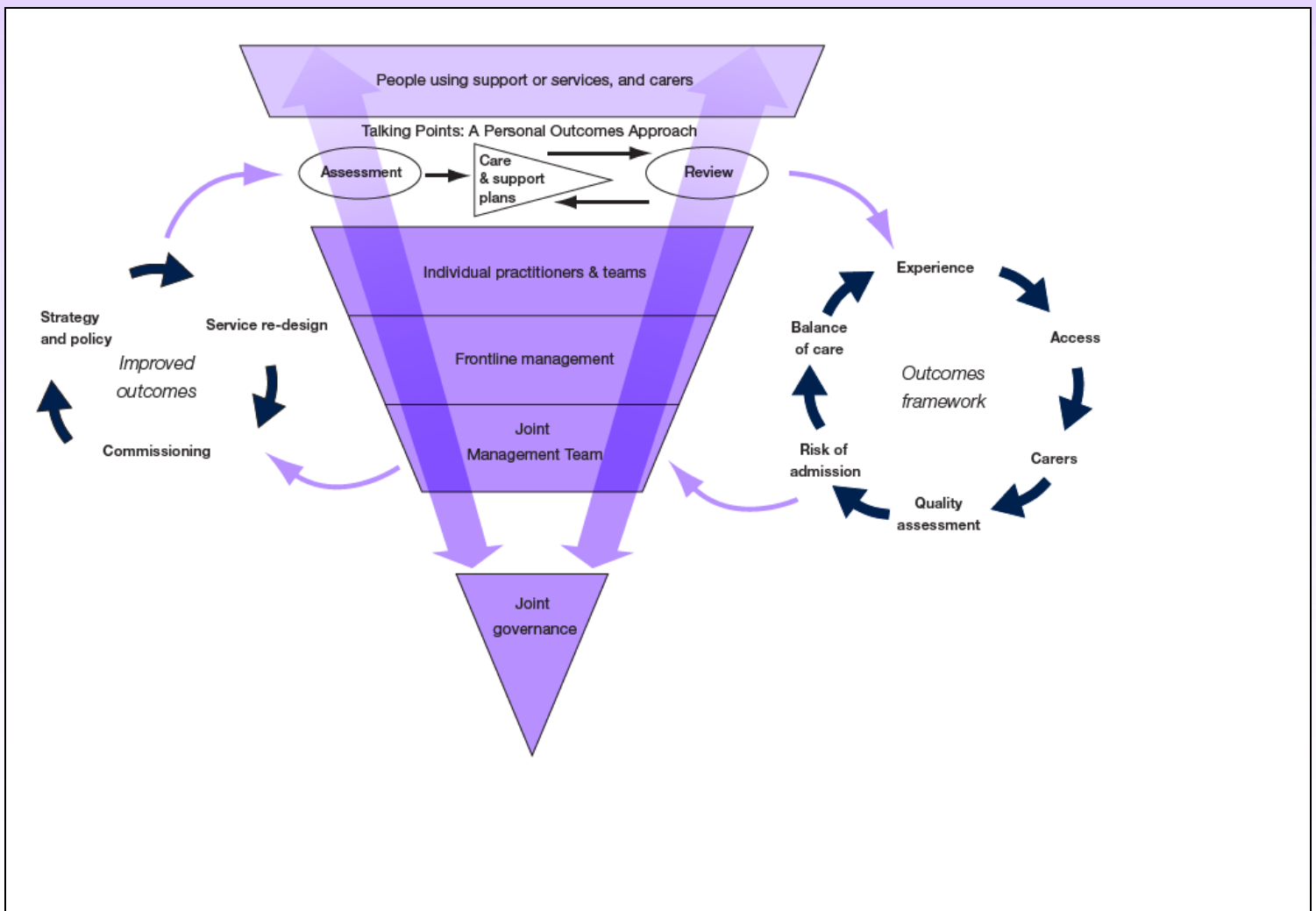
## PUTTING INDIVIDUAL OUTCOMES AT THE HEART OF COMMUNITY CARE

### Background

Understanding the quality of our services means that we have to understand how individual people experience those services, and what the impacts of those services are on people's lives.

The Talking Points: Personal Outcomes Approach is a way of putting the outcomes that individuals want from services or support at the heart of our community care assessments, care plans and reviews.

The Community Care Outcomes Framework takes data from those individual interactions and aggregates it to provide consistent, robust information on outcomes for joint management teams to consider on a regular basis. This in turn will impact on service provision and commissioning.



## community care outcomes

The above diagram represents an example of a local joint management system, from joint governance to frontline practitioners. Assessment is the main interface with people who need services or support, carried out using the Talking Points approach to glean qualitative and quantitative outcomes data through a 'semi-structured conversation'. Culture change throughout the hierarchy is prompted by the changing focus on outcomes in response to the continual process of assessment, care planning and reviews. Simultaneously, 10 of the 16 measures in the community care outcomes framework are populated with robust data captured through compliance with the National Minimum Information Standards. This can then be used to inform decisions taken at the level of joint governance around commissioning and service planning, supporting the emerging culture change throughout the system as a whole.

### How were the outcomes chosen?

The Talking Points: Personal Outcomes Approach is built on two outcomes frameworks, developed through widespread interactive research with people using community care services or support, and (separately) carers. The following tables distil the research evidence down to lay out the fourteen key outcomes that matter to people who use services or support and their unpaid carers. These in turn fall into three broad areas.

#### Outcomes important to service users

Quality of Life	Process	Change
<ul style="list-style-type: none"> <li>• Feeling safe</li> <li>• Having things to do</li> <li>• Seeing people</li> <li>• As well as can be</li> <li>• Life as want (including where you live)</li> </ul>	<ul style="list-style-type: none"> <li>• Listened to</li> <li>• Having a say</li> <li>• Respect</li> <li>• Responded to</li> <li>• Reliability</li> </ul>	<ul style="list-style-type: none"> <li>• Improved confidence</li> <li>• Improved skills</li> <li>• Improved mobility</li> <li>• Reduced symptoms</li> </ul>

#### Outcomes important to unpaid carers

Quality of life for the cared for person	Quality of life for the carer	Managing the caring role	Process
<ul style="list-style-type: none"> <li>• Quality of life for the cared for person</li> </ul>	<ul style="list-style-type: none"> <li>• Maintaining health and well-being</li> <li>• A life of their own</li> <li>• Positive relationship with the person cared for</li> <li>• Freedom from financial hardship</li> </ul>	<ul style="list-style-type: none"> <li>• Choices in caring, including the limits of caring</li> <li>• Feeling informed/skilled/equipped</li> </ul> <p>Satisfaction in caring</p> <ul style="list-style-type: none"> <li>• Partnership with services</li> </ul>	<ul style="list-style-type: none"> <li>• Valued/respected and expertise recognised</li> <li>• Having a say in services</li> <li>• Flexible and responsive to changing needs</li> <li>• Positive relationship with practitioners</li> <li>• Accessible, available</li> </ul>

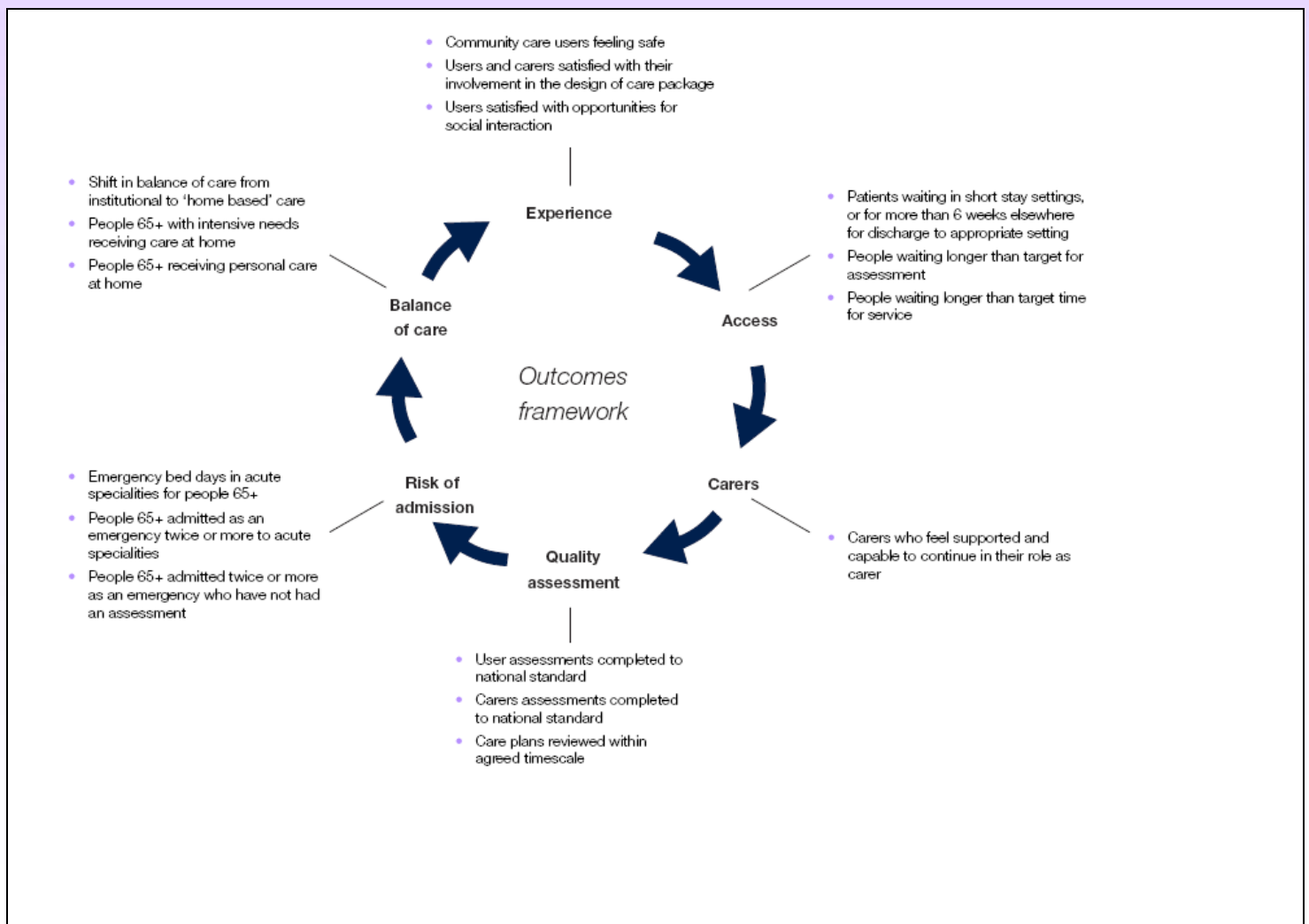
# community care outcomes

and free at point of need

Work to improve the outcomes-focus and performance management of Community Care has been carried out in a collaborative manner between Scottish Government and local partnerships.

The Assessment and Review Co-ordinating Group developed National Minimum Information Standards (2008) which set out the range of information which should be collected (as appropriate to individuals' needs) during shared assessment, care planning and review. The level of assessment should reflect individual needs and circumstances.

The Community Care Outcomes Framework (below) was developed over 18 months through active work with 7 Early Implementer Partnerships and a variety of other stakeholders, answering calls from local partnerships who wanted to see an outcome-focussed approach to monitoring joint performance in community care. Definitions were tested and refined and 13 were published in December 2008. The use of the Framework is on a voluntary basis through local partnerships, with no new national reporting.



# community care outcomes

## Current Support Arrangements

A Community Care Benchmarking Network is in the early stages of development. It boasts membership from all 32 local community care partnerships, and will initially focus its activities on the data generated through local use of the Community Care Outcomes Framework.

The Community Care Outcome Community of Practice is open to all. Its members receive regular updates, provide mutual support and meet through focussed events as an Integrated Learning Network.

Other key strands of work at the present time include the implementation of the Integrated Resource Framework, which will feed into work to develop and promote joint commissioning for individual outcomes.

## How does this fit with the National Performance Frameworks?

The Community Care Outcomes Framework underpins the national performance framework – 2 measures in the framework are in the set of 45 National Indicators - and a considerable amount of work has been carried out to ensure it compliments the National Performance Framework wherever appropriate. There is also a good degree of overlap with the NHS HEAT targets and work is ongoing to look at ways of achieving further synergy to support effective partnership working at the local level.

In addition, while Single Outcome Agreements are focussed at the strategic level, the guidance (2008) refers specifically to the community care outcomes framework as a useful supporting tool which local partners may wish to use “below the waterline”. The aforementioned Benchmarking Network and Community of Practice provide useful forums for shared learning and further development of the framework.

## Who to contact?

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