

Talking Points



Key Challenges and Strategies in Community Care :
focusing on Outcomes

An outcomes approach to community care

This overview will cover:

- Research on barriers relating to assessment and review, and recruitment and retention in community care in England
- Key challenges and strategies in focusing on outcomes in Scotland
- Staff perspectives on the outcomes focus
- Data challenges
- Findings from research and implementation

Overcoming barriers in community care assessment

More recent research identifying barriers to outcomes focused services for older people:

- Assessment important in establishing eligibility and can establish outcomes for individuals against which progress can be checked
- Staff want to move from bureaucracy to spend time with people
- Staff have juggled roles of facilitator, advisor and gatekeeper
- Outcomes approach involves a move away from a service-led model
- Need to avoid language emphasising deficits/dependence
 - **Caroline Glendinning et al 2006**

Overcoming Barriers: Outcomes in Review

- Outcomes focused approaches are facilitated by regular review – can identify whether outcomes identified have been met or reflect changed circumstances
- Workload pressures mean reviews have slipped of the agenda – not happening at all in many areas. Without reviews, how do we know we are getting it right?
- Fragmentation of reviews may occur due to performance indicators, reviews and satisfaction surveys that take place as separate activities
 - **Glendinning et al 2006**

Recruitment and Retention

Reasons for entering public sector work (around 30-40% for each of the following)

- *'Making a positive difference', 'working with people', 'its what I always wanted to be'*

Why did people leave? (around 65-80% for each of the following)

- *'Bureaucracy and paperwork', 'lack of resources', 'workload/hours'*
- *Not being valued and pace of change also very important. –*

A public service workforce for the 20th century, Audit Commission; 2002

Challenges: gatekeeping and resources in community care in Scotland

- Community care staff tired of gatekeeping role – concern about resource implications hinders communication
- Matching needs to services hinders creativity
- Gatekeeping presents particular barriers to engaging with carers
- Initial fears that outcomes approach will raise expectations that cannot be met
- Concerns about spending time with people - discussions about outcomes (assessment, care planning and review)

Partnership for Care: Scotland's Health White Paper 2003

- If we are serious about improving health and healthcare, then we have to be serious about supporting, valuing and empowering the staff who deliver care. The key to change is giving healthcare teams support to solve old problems in new ways. This means giving staff the opportunity and incentive to design and deliver integrated services around the needs of their patients. It also means investing in staff, freeing them to do things better and equipping them with the tools they need to do the job.

Changing Lives: Report of the 21st Century Social Work Review in Scotland

- "Services should meet the needs of people. People shouldn't have to fit services. Social workers should be allowed the time to get to know their clients really well, so that they really understand the different needs of each individual." (*Changing Lives*)

Impact of focusing on outcomes

Work in Scotland since 2006 identifies that staff:

- Welcome a move away from focusing on needs and services – tick box approach and previous difficulties with SSA - to outcomes
- Staff understandably wary of context of constant change, innovation and improvement – but it seems – outcomes are here to stay
- Welcome opportunities to have conversation and build relationship with users and carers
- Identify that in some ways an outcomes focus builds on existing good practice
- But also requires a shift in focus - recording different information - and systems need to support that

Recording information about outcomes



- Clear and consistent recording is important!

“Oh, no! Not more paperwork!”

Reasons for recording outcomes information clearly:

- Transparency in decision making
- To ensure a common sense of purpose
- For ongoing monitoring/evaluation:
 - Checking outcomes with users and carers
 - Capturing positive & creative work
- Informing service development

How tools support outcomes



Seeing forms as 'tools', e.g. to:

- assist discussion
- clarify outcomes
- record decisions
- brief providers
- gain feedback
- aggregate info for planning and evaluation

Key challenges and strategies: Managing data

Gathering and recording data –

- Talking Points being implemented alongside National Minimum Information Standards for assessment, care planning and review
- Work underway to support electronic data sharing
- Fluidity and flexibility essential in working with people with cognitive and communication issues
- Outcomes prompts to encourage consistency of definition
- Scale measures to provide quantifiable data as by-product – to avoid interrupting flow
- Data standards in NMIS support outcomes data gathering

Key challenges and strategies: Managing data

Analysis and reporting of data –

- Quantifiable data from scale measures can be recorded in Excel spreadsheets to support analysis
- Qualitative data more of a challenge –guidance from JIT available to support analysis
- Already linked to contract management and performance management

Impact of focusing on outcomes



- Identify the outcome and work backwards – staff talk about clarity of purpose
- People identify their priorities and efforts are targeted appropriately
- Involves consideration of the role that everybody plays – not always about services or resources
- Think wider than health and social care
- Creative thinking – ‘outside the box’
- Time spent with users and carers a valuable input

Findings from interim evaluation of Talking Points

Staff satisfaction evident

“It gets right to the source really of what the person feels and what needs to be done. They might not know it needs to be done but that’s what we’re here for.”

On carers assessment

“There is more paperwork but I would rather do it than not because it’s useful and there is something about the carer having their own copy that brings down defences and helps them recognise their role.”

Findings from interim evaluation of Talking Points



- *‘This is a shift away from processing people to engaging them.’*
- *‘Assists in developing creative options and meaningful intervention.’*

Evidence from staff and managers that the time invested is time well spent