

People as Partners Project



MAKING SENSE OF SDS A SERIES OF GUIDES FOR PROVIDERS

Guide 3: Outcomes assessment in self-directed support services

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<http://www.scottishcare.org/people-as-partners/>

Making Sense of SDS

A series of guides for providers

This guide is part of a series which is designed to introduce providers of older people's care and support services to the Social Care (Self-directed support) (Scotland) 2013 Act which came into effect on 1 April 2014.

This particular guide will explore one of the key themes within the Act and its accompanying Statutory Guidance. Changing the way in which individuals are assessed for social care services lies at the heart of the new legislation. Moving from a tick-box assessment model which identifies tasks and outputs to one where quality of life indicators and personal outcomes are identified is central to person centred social care and support.

This brief guide explores what the Act and Guidance documents say about outcomes assessment and in so doing highlights the range of ways in which older people care and support providers can become more involved.

What does the Act and Guidance say about assessment?

The SDS Act presents a major shift change in relation to the role of the supported person in the assessment and planning process. Although over the last few years many local authorities have been developing models of outcomes assessment the Act makes it a statutory requirement to ensure that assessment procedures fully involve the individual being assessed. The model is one of full participation not mere consultation. The new duty in the Act embeds a model of co-production, of involving the supported person in their assessment to the extent and degree that they may wish to be involved.

The Act also describes the purpose of the assessment – not to create a service package but to ensure the individual is able to achieve the sort of life which they need given their changed circumstances and need for support.

An assessment should help to ensure that the individual is supported to obtain the maximum independence/wellbeing and quality of life that is possible. It should also provide consistency and transparency in how decisions are reached with reference to budgetary and statutory constraints, including the duty of care.

The statutory principles which are a fundamental part of the outworking of the Act also have a critical role to play in the development of assessment models and best practice. The practical effect of these principles is described in the Guidance as follows:

Collaboration

The professional must collaborate with a supported person in relation to the assessment. They should work with the person and towards a shared goal, in this case the identification, development and subsequent delivery of the supported person's outcomes. They should facilitate the active contribution of the person as a partner in working towards a shared goal.

Involvement

The supported person (adult, child or carer) must have as much involvement as they wish to have in the assessment.

Informed Choice

The supported person must be provided with any assistance that is reasonably required to enable them to express their views about the assessment.

Providers will be increasingly familiar with the language and emphasis on personal outcomes in social care policy and practice. The stress on personal outcomes is illustrative of the way in which social care has changed and is changing in Scotland. As providers we now quite rightly emphasise the personal service which we offer to an individual. A good provider does not expect an individual to 'fit in' to the service they are able to offer but rather the effective provider attempts, as far as possible, to mould the service and supports they offer to the individual needs of the person.

This process means that the individual being supported has much more control of the support relationship not just at the point of initial choice but in its delivery. For this to be achieved assessment processes must be as person centred as possible. As the Guidance states:

'It also involves more control being retained by the person, who is viewed as a partner in identifying and achieving their outcomes, rather than a passive service recipient. This is a significant system and culture change. It requires development opportunities and on-going support for practitioners.' (Guidance section 69)

It is at the assessment stage that the supported individual works with the professional practitioner to identify the needs which they have and what it is that he/she wishes to achieve by being supported. This is obviously against the backdrop of being assessed as meeting the eligibility criteria of the local authority and in relation to available resources.

For many individuals who are new to social care services the process of assessment is one that can create anxiety and concern. The Guidance makes it clear that an individual must be supported as much as they require during the assessment process and that information should always be communicated to them in a way that they understand.

For many people especially those without natural networks of support or family their point of contact is often a worker who has provided them with previous support. It is therefore important that providers are aware that their staff may be asked to accompany an individual at the assessment stage. This should be considered an important part of service delivery and offer. In supporting an individual to exercise their choice and make their mind up at what might be a stressful time a staff member is fulfilling an invaluable role. This is especially true of circumstances where an individual's needs are changing rapidly and where a support worker might be the person best able to articulate those changes.

What are outcomes?

Traditionally, whenever someone presented themselves to social care services the assessment process concentrated on individual needs and whether those could be met within the eligibility criteria the professional was working to. The problem with a needs based assessment is that it results in services oriented around task and time and rarely does it address what is ultimately important to an individual. As an approach it tends to emphasise the deficiencies and needs of an individual – ‘what is not working’ – rather than highlighting the attributes, strengths and abilities – ‘what is working.’ There is also a potential for individuals, whether the supported person or the practitioner, to over-emphasise the needs because that has been the traditional route through which support and services have been achieved.

Whilst it is important for an individual to be fed, warm and safe there are also other fundamental needs which an individual wishes to have addressed. The outcomes an individual wants for their life – to keep in touch with friends, to continue to be engaged in a pursuit or activity, to continue to be involved in their community and its organisations, are as fundamental as the mechanics of food and drink.

Practitioners are encouraged to look at a more holistic approach to assessment. The mechanism for achieving this is through a person centred conversation with the individual. It emphasises the importance of helping an individual discover solutions to their challenges which might not come through traditional service support but from natural, community and social networks.

The ‘Talking Points’ Approach developed by Miller and Cook 2012, suggests it is helpful to explore the following areas during assessment.

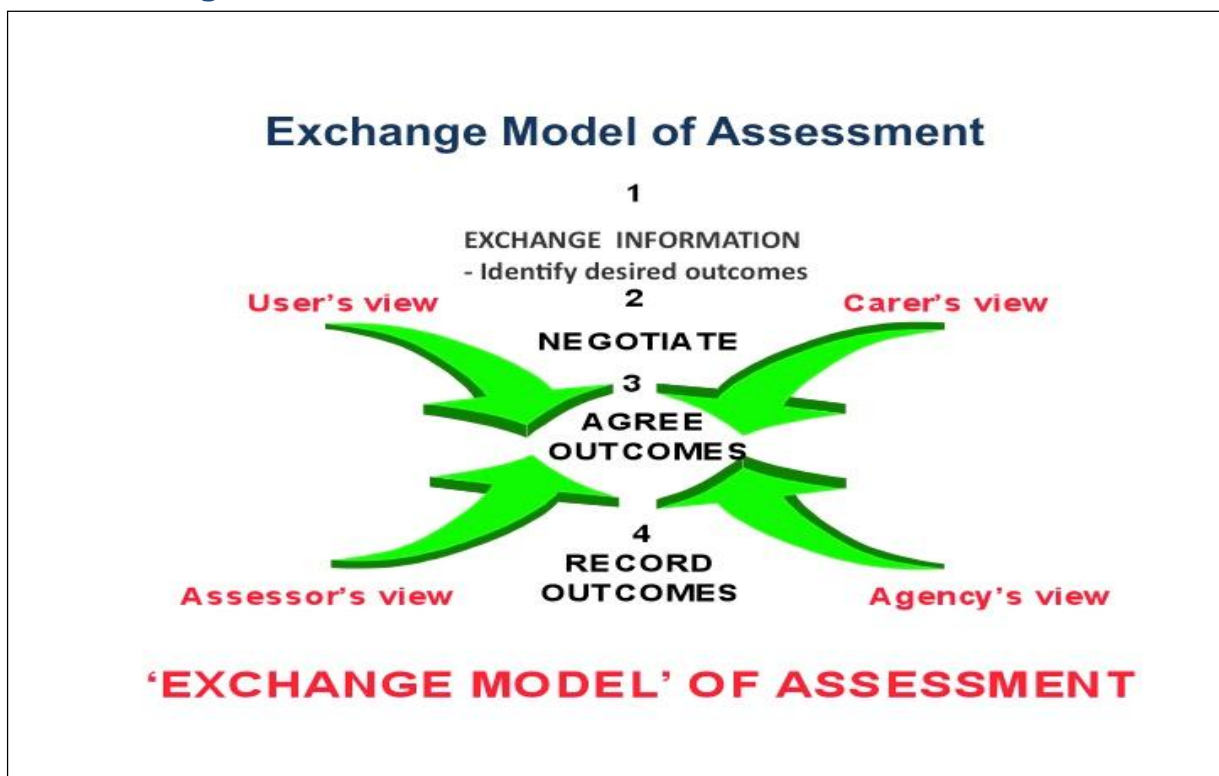
<http://www.jitscotland.org.uk>

- being as well as possible
- improved confidence
- having friendships and relationships
- social contact
- feeling safe
- living independently
- being included.

It will be self-evident that there is a close relationship between the needs that are identified during an assessment and the outcomes which underpin those needs. Outcomes are about purpose and direction and sometimes the needs an individual has are the obstacles and barriers to achieving that purpose. Assessments have a critical role to play in both preventative approaches, enabling consolidation of life conditions and in slowing rates of deterioration.

Some readers may be familiar with the 'exchange model' of assessment which fits well into an outcomes approach. 'This model emphasises the collaborative nature of assessment, showing how the views of the person, carer, assessor and agency are brought together to negotiate, agree and record outcomes. The agency perspective acknowledges the need to operate within statutory, governance, duty of care and budgetary factors. Otherwise, while the range of individuals whose views are included may vary, it is critical within this model that the person's views are represented.'

The Exchange Model of Assessment



Smale et al 1993

Negotiation is of fundamental importance in outcomes focused assessment. There will inevitably be different perspectives on issues in any assessment conversation, especially when there may be a consideration of risk issues.

Assessments in the new model give the control to the supported individual. They are the experts in their own life. They should not be the passive recipients of a professional practitioner exercise. They should be the originator and focus of the outcomes and solutions being identified.

Outcomes assessments and older people

There is an increasing body of research which is highlighting that there is a difference between different client groupings in the use of outcomes focused assessment tools:

‘Evidence shows that many of the outcomes desired by older people do not, on the face of it, appear to be derived from interventions that currently fall within the remit of social care services. There is also evidence that practitioners and services tend to focus on ‘change’ outcomes, while older people place a higher value on maintenance and prevention outcomes.’ (SCIE Knowledge Review 13)

These outcomes for many older people are:

- ‘meeting basic physical needs
- ensuring personal safety and security
- having a clean and tidy home environment
- keeping alert and active
- having social contact and company, including opportunities to contribute as well as receive help
- having control over daily routines’

Providers have a real opportunity in ensuring that individuals are able to achieve and reach their outcomes. Yet sometimes there are also barriers which prevent outcomes focused assessments from being implemented effectively. Some of these barriers relate to service provision. There can be:

- an over-emphasis on performance indicators which do not reflect outcomes in inspection processes
- resource constraints which restrict the ability of providers from embedding personalised delivery of support
- a tendency to foster and nurture dependency as a result of the nature of traditional service delivery rather than encouraging independence amongst older people and
- a limitation of the ability and flexibility of providers working in an outcomes-focused way with service users because of the purchasing arrangements of local authorities.

There is a potentially critical role for the provider to play in supporting, advocating and enabling decision-making on the part of the supported person. This may especially be the case in situations where individuals do not have capacity or have diminished capacity, where the support of a provider or staff members may enable and foster participation and engagement. Providers should seek to explore with local authority practitioners ways in which they could contribute to the assessment process.

Useful further reading

Leading for Outcomes (IRISS)

<http://www.iriss.org.uk/resources/leading-outcomes-guide>

Mental Welfare Commission for Scotland – Good Practice

<http://www.mwscot.org.uk/publications/good-practice-guides/>

SCIE Knowledge review: Outcomes-focused Services for Older People

<http://www.scie.org.uk/publications/knowledgereviews/kr13.asp>

Talking Points

<http://www.jitscotland.org.uk>

www.jitscotland.org.uk/action-areas/talking-points-user-and-carer-involvement/

Wellbeing a Guide to Measuring Meaningful Outcomes

<http://www.scotland.gov.uk/Topics/People/Young-People/gettingitright/background/wellbeing>

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