



Extending a Personal Outcomes Approach within the NHS

Karen Barrie

Personal Outcomes and Quality Measures

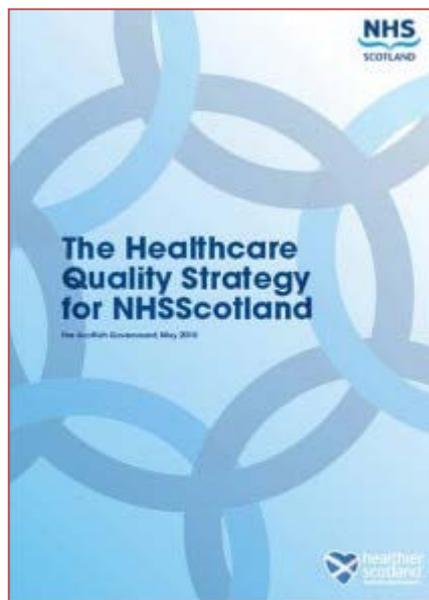
31st May 2013



ALLIANCE
HEALTH AND SOCIAL CARE
ALLIANCE SCOTLAND
people at the centre



We've got to talk about outcomes.....



Patient Reported Outcome Measures



Personal Outcomes Approach





The Personal Outcomes and Quality Measures Project

- Aim: To establish how the *concept of 'personal outcomes'* might be incorporated within the Healthcare Quality Measure Framework.
- Project objectives:
 - Determine whether and how *a Personal Outcomes Approach* can be embedded within different healthcare services supporting people living with one or more long term conditions
 - Test the applicability of the *Talking Points Outcomes Framework* in different care contexts / scenarios and refine if necessary



We need to talk about outcomes ...

approaches, frameworks & measures...

4. Are we using outcomes data to change the way we do things and to rethink what we do ?

3. Can we evidence that people are being enabled to feel, be and do the things that **people** value?

2. Are we doing it well?

1. Are we taking a person centred, outcomes-focussed approach to care and support assessment and planning?

Overcoming the UDSET Legacy....

UDSET	Users Defined	Users and carers have distinct outcomes, which both need to be considered, therefore two separate overarching frameworks of outcomes are needed	
	Service	Focusing on outcomes means engaging with the person in the context of their whole life , not just through the filter of the services they fit into	Talking Points
	Evaluation	Focus on service evaluation alone ignores the contribution the person makes to their own outcomes, missing the realisation potential of outcomes based working	Personal Outcomes
	Facilit	There has been an excessive attention to filling in tools and box ticking. A challenge is to restore staff communication and relationship building skills and to recognise the importance of leadership and culture	Approach

Emma Miller (2011) Getting Back to What Matters, Dunedin

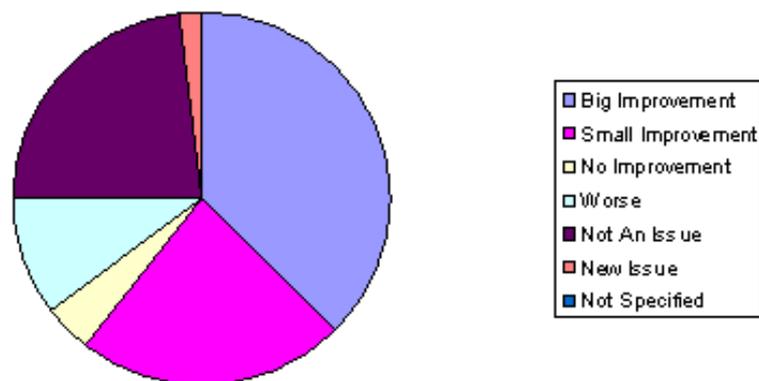


The Talking Points Personal Outcomes Approach



3. Changes by Outcome Type and Contributing Factors

3.1 Feeling Safe



OUTCOME TYPE	Improvement				(Or Issue Type)		
	Big	Small	None	Worse	Not an Issue	New Issue	Not Discussed
Feeling Safe	18	11	2	5	11	1	0

The factors contributing to the changes in *Feeling Safe* are summarised below. The biggest improvements were attributable to *interpersonal contact* and *supportive relationships* with the nurses, in particular *being checked upon regularly, feeling able to phone with any concerns, no matter how trivial and seeing the same person*. Various factors were also cited as enhancing psychological security, including *fewer admissions to hospital* and *having future treatment preferences documented*. Having *access to equipment and medication*, coupled with *knowing what to do* (or not) also exerted an influence, both positively and negatively.

FEELING SAFE								
Theme	Factor	Big Imp	Small Imp	No Imp	Worse	Non Issue	New Issue	N/S
Interpersonal: Contact with IMPACT Team/ Professionals	Regularity of contact	12	4					
	Able to phone for advice / help	5	1					
	Feeling supported / not alone	4	3					
	Seeing the same person	4						



HILLARIOUS

VERY FUNNY

QUIET FUNNY

NORMAL

NORMAL

QUIET FUNNY

VERY FUNNY

HILLARIOUS

OK

NORMAL

NORMAL

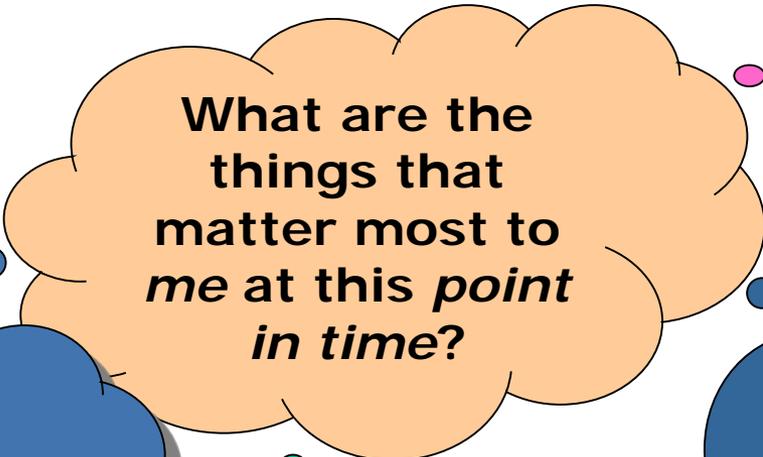
OK

HILLARIOUS



A Focus on Personal Outcomes

Accommodating a broader concern....



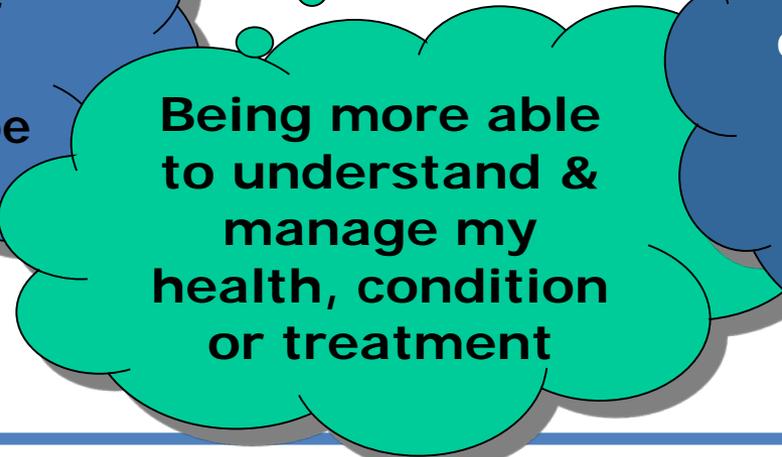
What are the things that matter most to me at this point in time?



Maintaining and enjoying a good quality of life



Being treated, cared about or supported the way I want to be

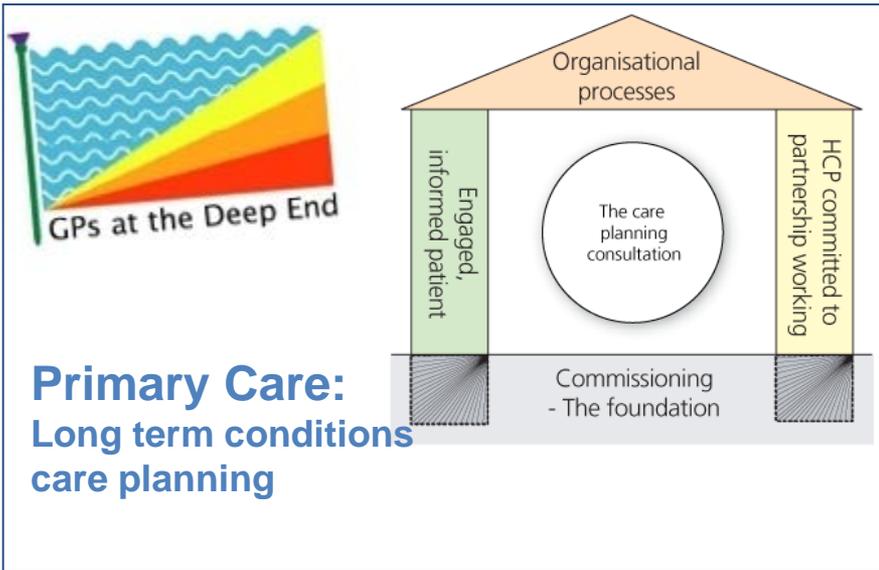


Being more able to understand & manage my health, condition or treatment



Achieving specific changes in my health or wellbeing

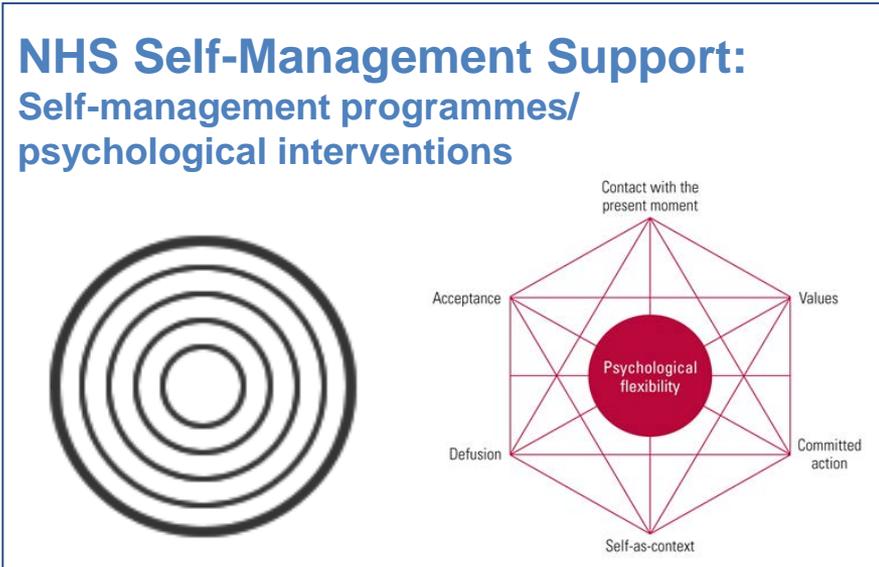
The Care Scenarios



Wrap-around:
(Health & social care partnership working)

Intermediate care:
NHS rehab / enablement at home/day hospital

Care management/ anticipatory care:
Community nursing



Mental Health:
Recovery support

AN OUTCOMES BASED APPROACH

My IROC
What does it tell me?
What are my priorities?
Who are the best people to help me?

I-ROC
hope

The Talking Points Outcomes Framework

Outcomes important to adults living in the community using health and social care services

Outcomes important to adults living in the community being supported to self

Quality of Life	Process	Change
<ul style="list-style-type: none">• Feeling safe• Having things to do• Seeing people• Staying as well as you can• Living where you want/as you want• Dealing with stigma/discrimination	<ul style="list-style-type: none">• Listened to• Having a say• Treated with respect• Responded to• Reliability	<ul style="list-style-type: none">• Improved confidence/morale• Improved skills• Improved mobility• Reduced symptoms

Enabling people to live well

Fresh thinking about collaborative approaches to care
for people with long-term conditions



Original research
May 2013

- “Making care truly person-centred requires *radically* different ways of thinking.....
- If we are to see *truly* collaborative approaches to healthcare, we will need not only those change mechanisms with which we are familiar..
- But also *conversation and space* that enables people to understand, reflect upon and reconsider their purpose, attitudes, roles and relationships “



ALLIANCE
HEALTH AND SOCIAL CARE
ALLIANCE SCOTLAND
people at the centre

Karen Barrie (karen.barrie@alliance-scotland.org.uk)

Project Lead: ***What Matters, What Counts?***

Personal Outcomes and Quality Measures

Health and Social Care Alliance Scotland (The **ALLIANCE**)

Venlaw Building, 349 Bath Street

Glasgow G2 4AA

Website: www.alliance-scotland.org.uk
