

Talking Points

Personal outcomes approach

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Why are we talking about outcomes?

There is widespread recognition that systems need to shift from an exclusive focus on what they do to include consideration of what difference they make to the people using services and support. A personal outcomes approach can support that. This means working with the person to identify what is important to them or what they want to achieve, and then working backwards to identify to how to get there. It means supporting the individual to be as independent as possible, while paying attention to their quality of life. Staff comment that working like this means a shift from 'ticking boxes' to engaging with people.

Defining personal outcomes

Outcomes are defined as what matters to people using services, as well as the end result or impact of activities, and can be used to both plan and evaluate activity. Personal outcomes are distinct from outcomes for services, organisations or indeed nations. In taking forward an outcomes focussed approach it is vital that outcomes *for individuals* are the primary driver for activity. An example of the links that can be made between different levels of outcomes is included in this table.

From personal to national outcomes

Outcome Level	Focus	Examples
Individual/ personal	Defined by the person as what is important to them in life	I want to be able to get back to the bowling club
Service/ project	Defined by a project or service as a key focus to work towards with people	We work with older people to improve their ability to get out and about
Organisational	Defined by a local authority, NHS board or provider as a key area to work towards. Will increasingly be required to be defined across organisations	Improve the social inclusion of the older people we work with
National	Defined by government to focus activity across sectors and organisations	We live longer, healthier lives Our people are able to maintain their independence as they get older and access appropriate support as they need it

What is the Talking Points personal outcomes approach?

There are three components to the Talking Points approach which together aim to put the outcomes important to people using services at the heart of those services. So focusing on outcomes means:

Engaging with the person to identify what is important to them in life and what they need to change, and planning how everyone is going to work together to achieve those outcomes.

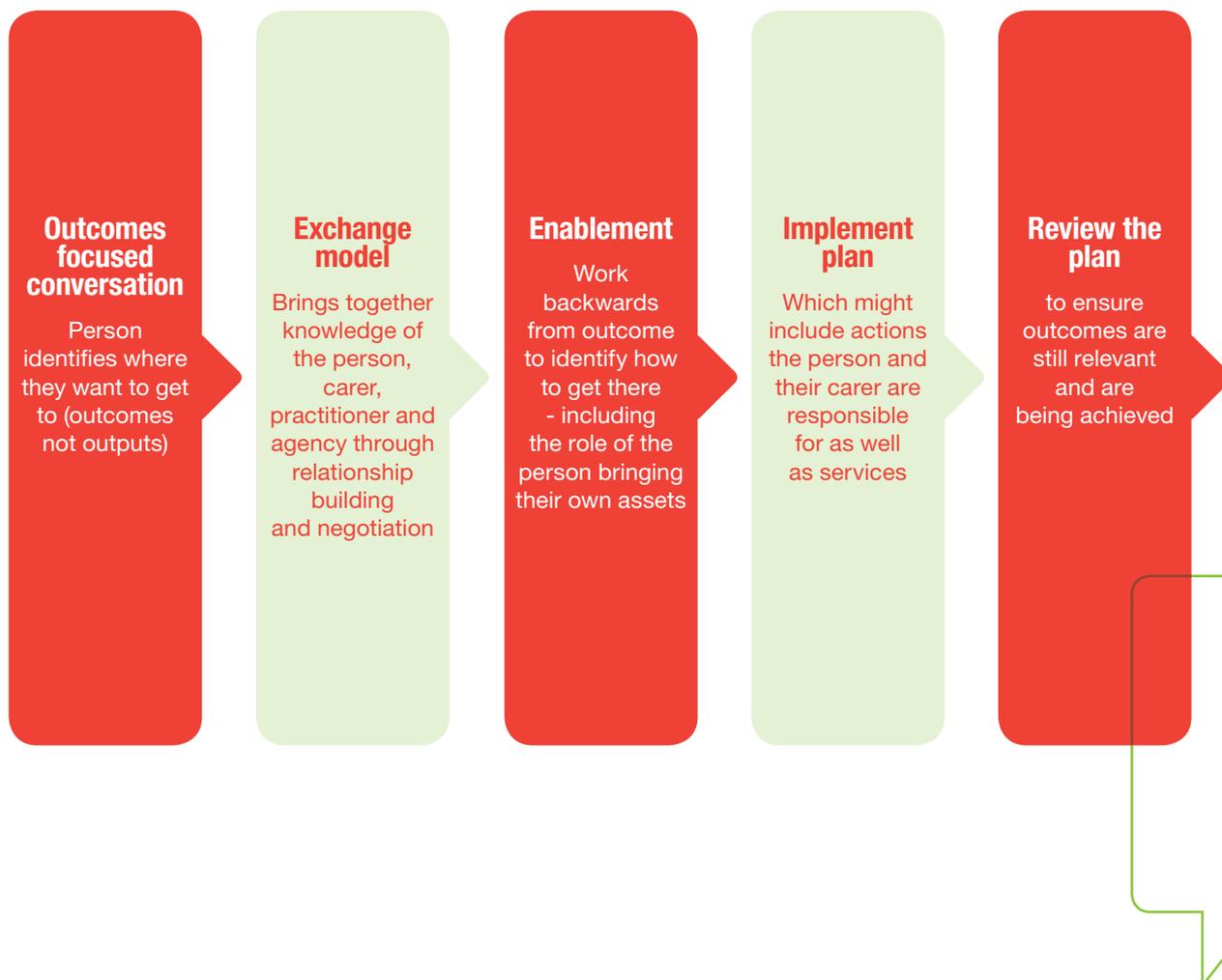
This means that the conversation is important, to work out what is important to the person and what needs to change. Often, being listened to and having the chance to think about their life from a different point of view can already make a difference to people.

Recording the outcomes in a support plan which is shared by everyone involved means that later on, the person, their family and staff can get together to check whether the outcomes have been achieved or if the plan needs to change

The outcomes can be measured for the person – ‘did we achieve what we hoped’. By looking at lots of support plans and reviews, outcomes can be measured for the service – ‘what is working well in our service and what needs to change.’

Using the information that has been recorded about outcomes to ensure that what matters to people who use services influences service planning, commissioning and improvements.

Good conversations



What are the outcomes?

There are lots of different outcomes approaches and models available. The Talking Points personal outcomes approach is based on 15 years of research at the Universities of York and Glasgow. It has been developed by researchers working with the Joint Improvement Team of the Scottish Government, in partnership with services users and unpaid carers, partnerships, providers and other organisations since 2006. There are three types of outcomes in this approach:

Maintenance or quality of life outcomes – includes being as well as you can

Change outcomes – focus on short term removal of barriers to quality of life or improving wellbeing

Process outcomes – focus on how services are delivered, or how people feel they have been treated

Quality of life	Process	Change
Feeling safe	Listened to	Improved confidence
Having things to do	Having a say	Improved skills
Seeing people	Treated with respect	Improved mobility
Being as well as you can	Treated as an individual	Reduced symptoms
Living where you want/as you want	Being responded to	
Dealing with stigma/discrimination	Reliability	

Outcomes for unpaid carers

There is also a table of outcomes for unpaid carers, which emphasises the importance to carers of being included as partners in decisions about the person. The categories of outcomes for carers are:

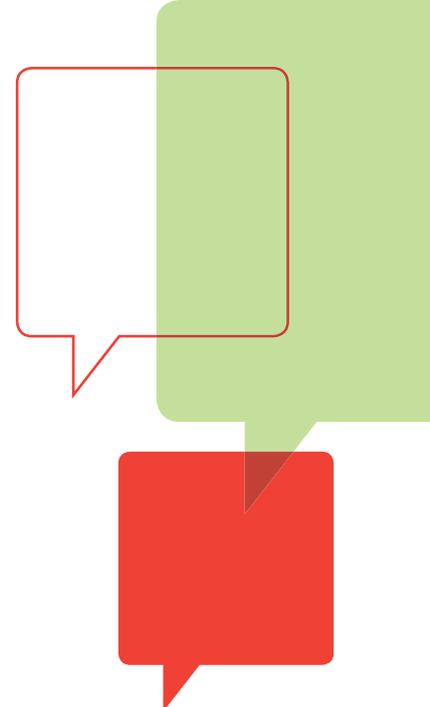
- » Quality of life for the cared for person
- » Quality of life for the carer
- » Managing the caring role
- » Process outcomes

Outcomes for people living in a care home

More recently work was undertaken with people living in care homes to find out what is important to them in life. The outcomes on the whole are similar to other people using services. This work also found that there were some additional aspects of life in a care home that should be included, such as having privacy respected, planning for a good end to life and belonging to a community.

What are the challenges?

Focusing on outcomes involves a shift from the way services currently do business. It means that people who use services have different conversations with staff, in thinking about what is important to them, what needs to change and what role they might play as well as services. Staff have said that they need time for the conversations and that the organisation needs to support them to do this. Staff have also said that their service needs to use the information about outcomes to make the improvements required. Therefore management need to be outcomes focused too.



What difference does it make?

The key objective of Talking Points is to support a shift from service led ways of doing things to focus on the outcome that are important to people, as summarised in the following table.

Service led	Outcomes focused
Tick box approach to assessment and planning	Assessment and planning based on a conversation about what matters to the person
Focus on problems and what the person is unable to do	Focus on strengths and capacities and what the person wants to achieve
Think about a limited range of service options	Think more widely about the people involved in the person's life and community based resources
Services do things to or for people	Services do things with people
Outcomes have been defined by what matter to services e.g. increase numbers of people going through training	Outcomes are what matters to the person e.g. being more confident about the caring role
Staff role is about form filling and completing tasks	Staff role is about engaging with the person and supporting them to identify outcomes
A focus on processing people	A focus on relationships between staff and service users and unpaid carers

The benefits at an organisational level are that Talking Points supports organisations to deliver on policy goals, including increased independence, personalisation, enablement, prevention, improved integration and a shift in the balance of care from hospital to the community. Becoming an outcomes focused organisation involves re-orientation of systems and processes to support new ways of working. Engagement of people across the organisation is vital to make outcomes focussed approaches work. Strong leadership is required to enable people to live through this change at every level of the organisation. There are a range of approaches organisations can take to do this work, including logic modelling, theory based evaluation and appreciative inquiry. Organisational change in turn requires a supportive national context and policy which is joined up and driven by concern for personal outcomes over and above systemic priorities.

Further information

For more information and resources to support implementation visit the Joint Improvement Team website: www.jitscotland.org.uk/action-areas/talking-points-user-and-carer-involvement/

Or join the Community Care Outcomes Community of Practice on the Knowledge Hub (registration required): <https://knowledgehub.local.gov.uk/>

About the authors

Dr Ailsa Cook and Dr Emma Miller started working on a small scale with the JIT in 2006. Their work on Talking Points has developed on a collaborative basis with a wide range of people from across health, social care and housing. For further information contact: Ailsa.Cook@ed.ac.uk or e.miller@strath.ac.uk

About the JIT

The Joint Improvement Team (JIT) was established in 2004 to support health and social care partnerships in Scotland.

It is a collaboration between the Scottish Government, the Convention of Local Authorities (COSLA) and NHS Scotland. Contact Dr Margaret Whoriskey, Director: Margaret.whoriskey@scotland.gsi.gov.uk

