



QORU

quality and outcomes
of person-centred care
research unit

MAXIMISING THE VALUE OF SURVEY DATA IN ADULT SOCIAL CARE (MAX) PROJECT

ASCOT users' workshop 2014
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OF ECONOMICS AND
POLITICAL SCIENCE ■

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Why MAX?

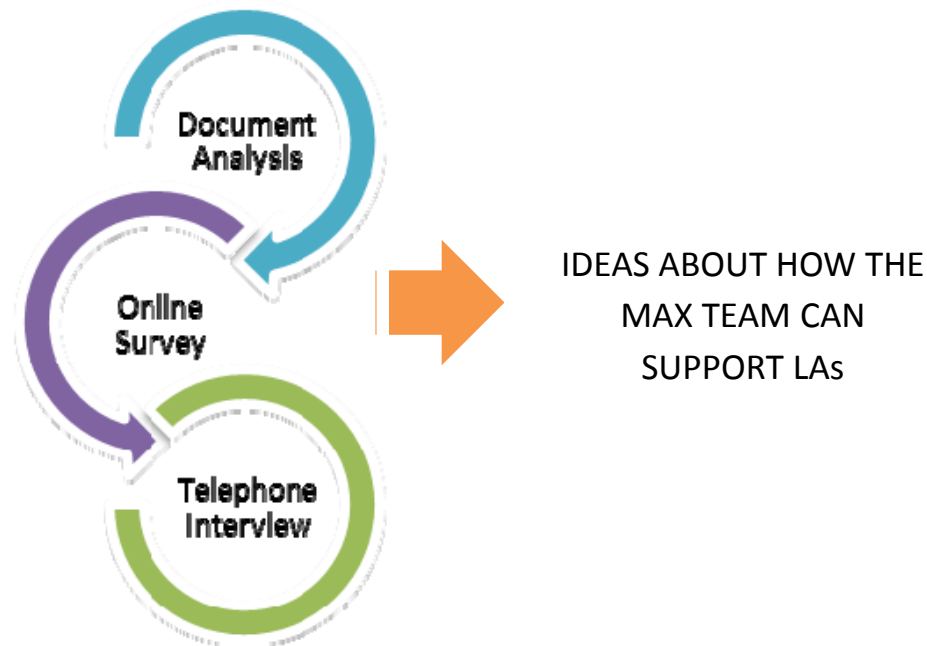
- Funded by the Department of Health via Quality and Outcomes of person-centred care Research Unit (QORU)
- ASCOF should support local policymaking and guide local decision-making
- **Adult Social Care Survey (ASCS)** and **Personal Social Services Survey of Carers in England (PSS SACE)** not being used in this way
 - Survey doesn't ask the right questions
 - Data too complicated to analyse
 - Local analysts under multiple pressures
- Understand extent & nature of problems and find solutions

Relationship with ASCOT

- ASCOT (SCT4) is included in the ASCS
- ASCOT-carer is included in PSS SACE
- ASCOT measures feed into outcomes framework
 - Overall quality of life indicators
 - Various domains (safety, control over daily life, social participation)

Phase 1: Fact Finding

Objective: to establish the key challenges faced by LAs to using the survey data and their ideas about how they would like the MAX team to support them.



High level of support for the surveys

Described as “a significant resource to undertake” but majority of online survey respondents (93%) see them as useful...

“Without the view of customers and carers, service and support development would not always deliver what was needed”

[Director of adult social care, online survey]

“really we should be learning as much as we can from what people are telling us”

[information officer, telephone interview]

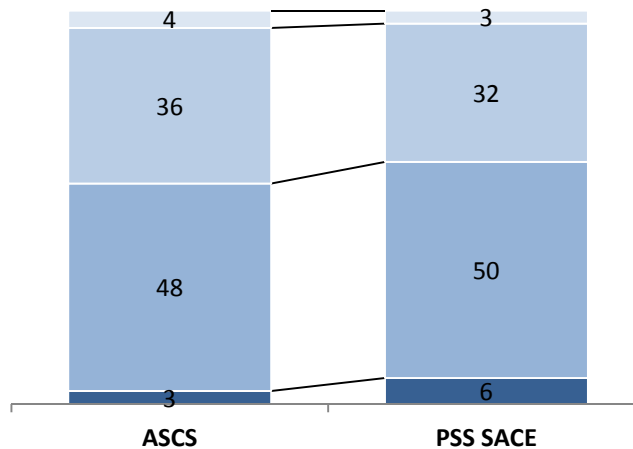
Analysts and managers, however, are more supportive than frontline staff and commissioners

What problems do LA staff face?

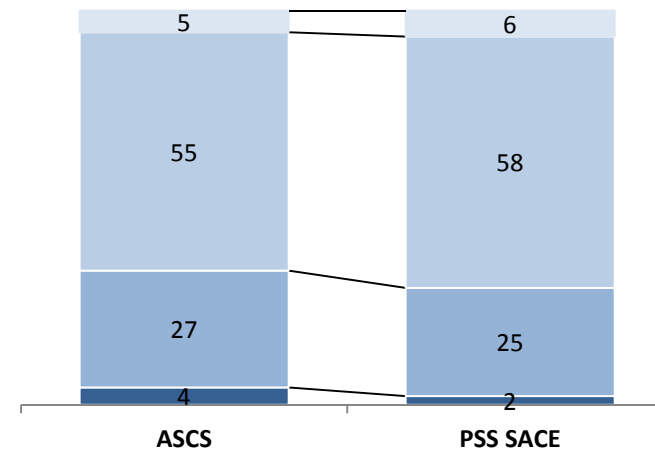
- Time and resources
 - Survey frequency, skilled staff, specialist software, some requirements time consuming
- Staff interest in the survey
- Timeliness of surveys
- Limitations of the data
 - Broad questions difficult to interpret – actionable?
 - Sample size / representativeness

Fit with local needs?

The survey is a good fit with local research priorities

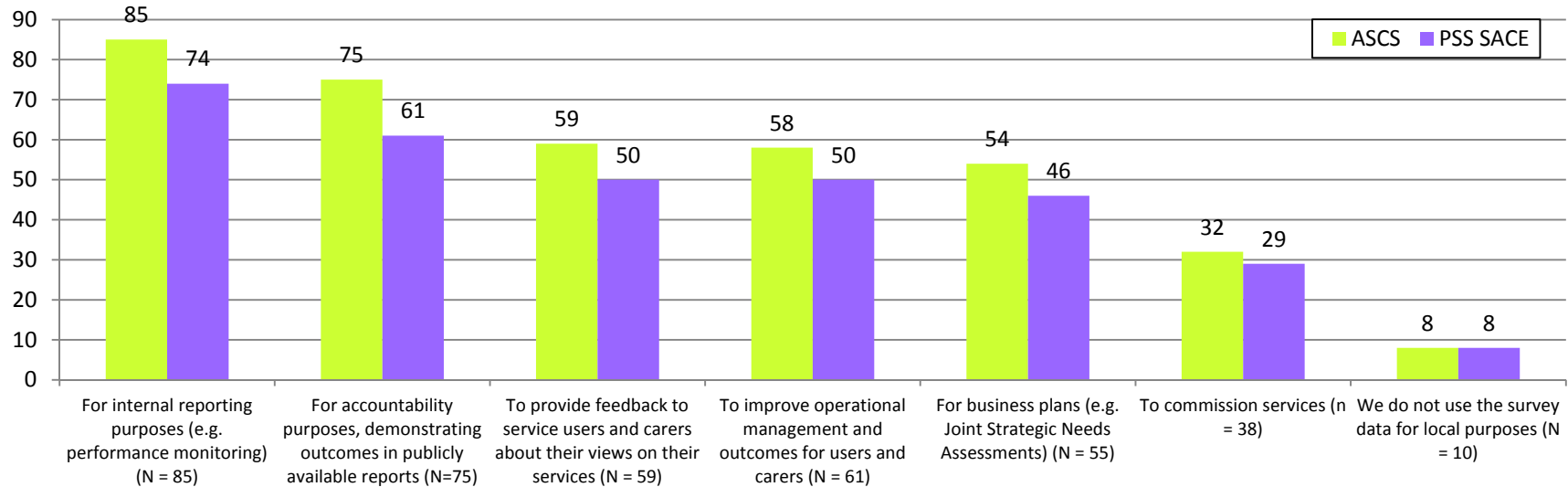


The survey questions are not useful for informing policy and practice



Barriers feed into sense not always good fit with local needs

Local uses of the survey data

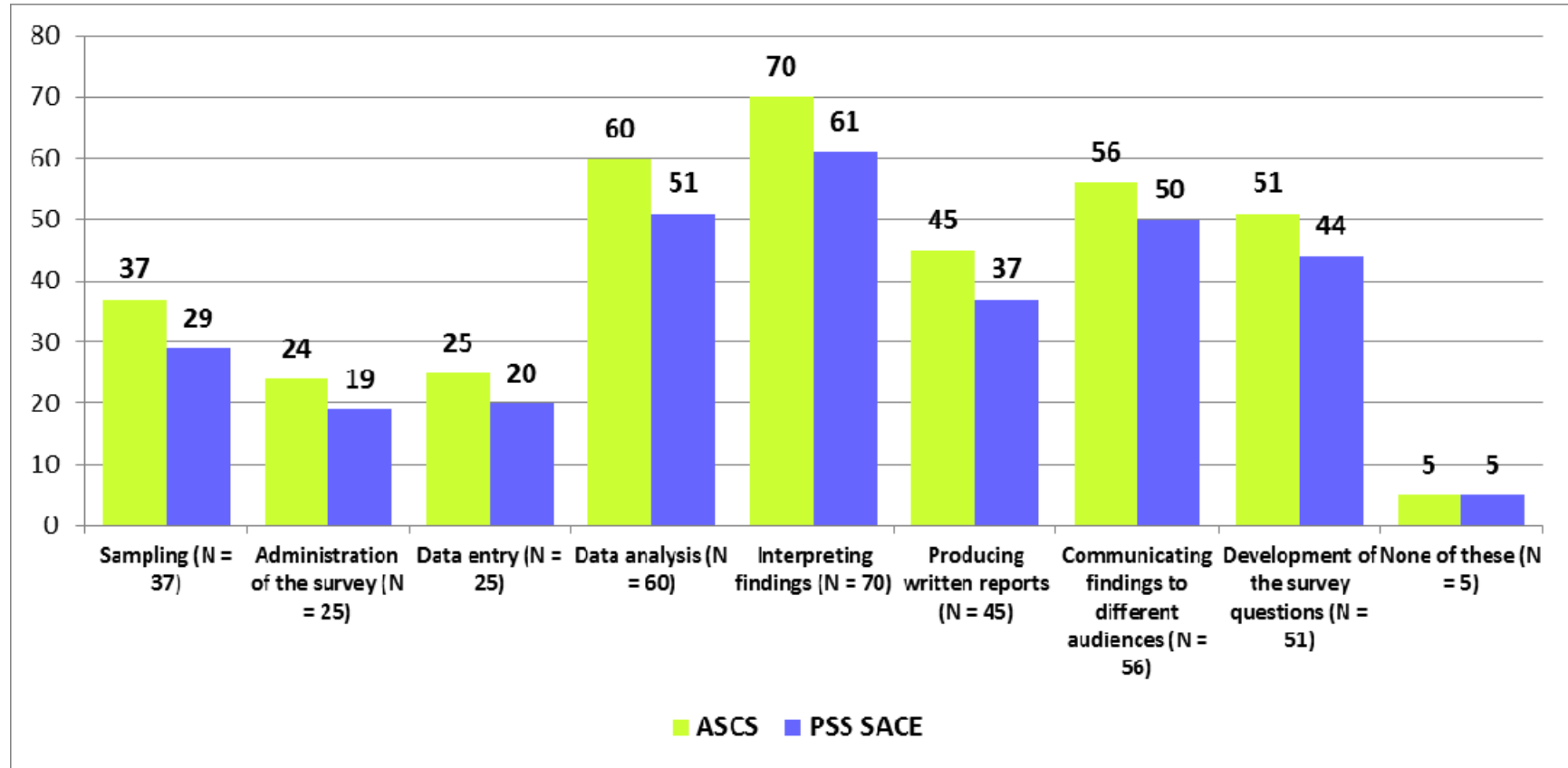


Survey data used for a range of local purposes but performance monitoring type activity dominates

Data also feeds into policy and practice locally but only “to some extent” in most organisations (ASCS N= 76/100; PSS SACE = 60/93)

[source: online survey]

What support would council staff like?



Also interested in knowledge exchange / sharing of good practices

Challenging beliefs?

- Beliefs affect whether and how data are used
 - Designed to inform national policy – do not meet local needs
 - Questions too vague / data too general to be informative
 - Purpose of survey: performance monitoring
- BUT a number of councils
 - Use data “a lot” to inform policy and practice locally
 - Use data for multiple purposes, incl commissioning, business plans, operational management etc

Some examples of what you can do with the survey data

Over to Louise and Louise...

Next steps

- Develop toolkit (from Jan 2014)
 - Practical guides e.g. how to..., worked examples, Dos and Don'ts, handy tips, useful resources
 - Tools to support report writing / communication of results e.g. handy tips, templates, charts & tables
 - Summaries of research evidence e.g. development of the surveys & questions, national studies
- Seminar series (from autumn 2014)
 - Knowledge sharing
 - Skill development

Further Information

To find out more about the MAX project:

Website: www.maxproject.org.uk

Email: maxproject@kent.ac.uk

Call: 01227 823963



@MAXprojectteam

For a fuller commentary on the survey results visit
our blog:

<http://www.maxproject.org.uk/category/blog/>

Disclaimer

The research on which this presentation is based is funded by the Department of Health and undertaken by researchers at the Quality and Outcomes of Person-centred Care Research Unit (QORU). The views expressed here are those of the authors (the MAX project team) and are not necessarily shared by any individual, government department or agency.