

Assessment, Performance Measurement and User Satisfaction in Older People's Services

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This programme, based at PSSRU Manchester, has developed considerably since the previous Bulletin. The three programme components relate to concerns both about service delivery and effective monitoring of these services. Recent work in particular recognises the central role played by assessment in improving care and monitoring effectiveness, both nationally and locally.

Improving assessment processes

Assessment is crucial to improving the collection of information on older people's needs. Policies seeking to improve assessment therefore offer unrivalled opportunities for more effective monitoring of those needs and for judging the success of innovative ways of meeting them. A project recently commissioned by the Department of Health is examining the development and impact of the Single Assessment Process (SAP) in England. This policy aims to bring together previous disparate approaches to assessment across health and social care and improve the quality of information (Department of Health, 2002). It aims to enhance the care received by older people and lead to more person-centred care. We have completed Stage I of this project, which has investigated the development and implementation of the SAP in England. A literature review and focus group of those responsible for leading on the policy in localities has shown that structural, as well as professional, barriers are likely to impinge on implementation. (See page 31 for more on the literature review.)

Stage II of the project, which is to examine the impact of the SAP from the perspectives of multiple stakeholders, requires answers to questions concerning the processes of implementation, the nature and extent of involvement of professionals such as specialist clinicians, and the impact of these new integrated assessment procedures on older people, including an evaluation of their own experiences. Data collection is under way.

Evaluating this policy will require the measurement of impact along multiple dimensions. Here, linking assessment practice to data collected routinely by professionals and held, at a higher level of aggregation, by managers would provide a way of judging service performance. However, the material reviewed in Phase I of the SAP project shows that the potential for assessments to generate information concerning the performance of providers and to inform policy evaluation has not been adequately realised. In the UK, research has often focused on the face to face interactions of professionals with older people. A view of assessment as also offering information for use in evaluating changes to practice has not yet emerged. Other work conducted from this programme, however, hints at how this could be achieved.

Linking assessment to performance monitoring

Research on this programme has drawn on insights from other countries where assessment is viewed as crucial to providing more efficient and effective care for older people. In the US, work has considered multiple assessment domains, often using standardised tools, to provide a systematic view of assessment employed for different purposes, including that for management monitoring (Kane and Kane, 2000). Much can be learned from this

Further information

For further information on the SAP study see the project outline at www.pssru.ac.uk/pdf/p060.pdf

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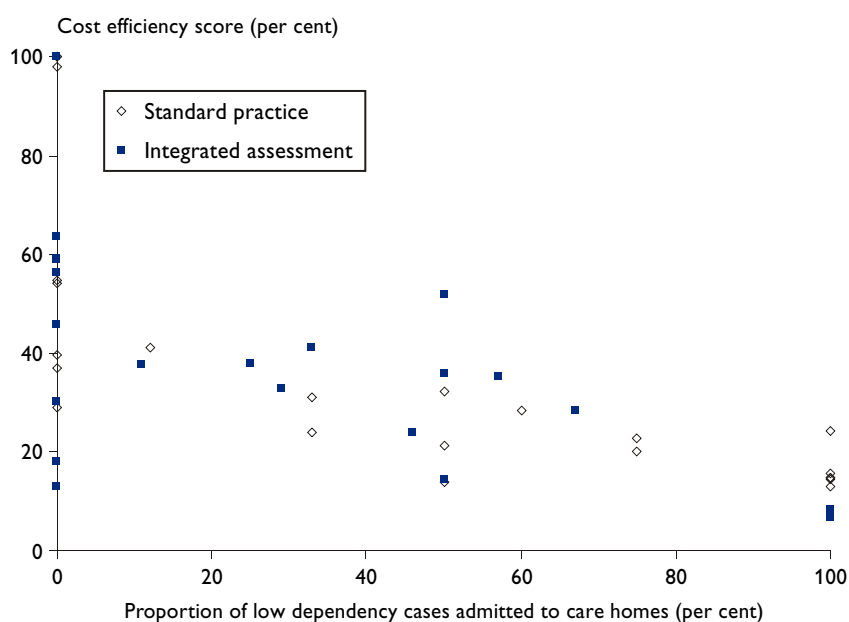
standpoint in implementing the SAP. Likewise, policy in Australia has made more systematic assessment a requirement at critical care points. There, a national strategy to integrate professional assessments at critical care events has been implemented along with mechanisms for reimbursement and ongoing monitoring of the outcome of assessments (Otis and Butler, 1997).

The extent to which such monitoring could occur in the UK depends on the quality of assessment data and the degree to which this is held electronically. The SAP, along with other policies attempting to provide more consistency to assessments (such as Fair Access to Care), offer opportunities to move closer to a shared framework for assessment. A recent study has demonstrated that integrated assessments by care managers and specialist clinicians (Challis et al., 2004) can improve the effectiveness and efficiency of care delivered to older people. Further work, using the managerial technique of data envelopment analysis, has addressed the question: with what combinations of services are care managers able to support older people with different levels of dependency at the least cost? Data from assessments were used to identify care managers who could act as benchmarks for others in achieving more efficient practice. Figure 1 illustrates that when operating under an integrated model, which included the provision of clinical information, care managers were more efficient overall than under standard practice. One reason for this

was that they tended to admit fewer of their low dependency cases to care homes. This technique offers a means of uncovering such influences on routine practice. It may also facilitate monitoring the impact of policies such as the SAP on the important dimension of efficiency.

Other work within a social services department, outlined in the forthcoming book *Performance Indicators in Social Care for Older People*, shows that a fuller picture of performance is possible when examining data from assessments. In contrast to currently available national data, such information can reflect a more user-centred perspective, such as ensuring that the system meets users' expectations of timeliness and choice in service delivery.

Figure 1 Efficiency of care managers operating under an integrated assessment model versus standard practice



The potential of linking assessment information to performance analysis has also been raised by our work in care homes using a UK version of the Minimum Data Set/Resident Assessment Instrument (Stewart et al., 2003). Such work could enable the standardisation of assessments in such settings, extending the approach of the SAP, and the use of assessment data to inform decision-making and to judge quality of care across homes.

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