

## Costs, Quality and Outcomes

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There is an increasing demand for information that accurately reflects costs, quality and outcomes. This demand stretches from those involved in monitoring their own performance, be they providers or commissioners, through to those responsible for national accounts. The programme aims to develop and improve measures, investigate factors associated with variations and enhance the value of both research and routine statistical information for monitoring, evaluative and ongoing policy purposes.

For over 15 years we have been compiling and developing unit cost information, reflected in the annual volumes of *Unit Costs of Health and Social Care*. This work has attracted attention from well beyond the social care field and we are currently involved in work investigating and identifying **Unit Costs in Criminal Justice**.

Quality measurement has primarily been through development and analysis of national user experience surveys (UES). Currently this includes further analysis of the UES of **Younger Adults with Physical and Sensory Impairments** and **Extension to the Equipment UES**. We are also conducting an extension to the 2008/09 Older Home Care UES. Some of the key findings emerging from the UES work are described opposite. Again this has led to further work in the form of the development of a **Carers Experience Survey** for Kent County Council. The carer survey development project is building on this work to contribute to a planned national carer experience survey to feed into monitoring the progress of the new Carer Strategy.

In this field as in many others there is increasing emphasis on the importance of monitoring outcomes. The programme has developed an approach to measuring outputs and outcomes that is being taken forward through the **Quality Measurement Framework (QMF)** projects (see page 23) and an NIHR Health Technology Assessment funded study developing a preference weighted measure of **Outcomes of Social Care for Adults (OSCA)**. The approach has been applied in a number of contexts including the Individual Budget evaluation (see page 22), a local evaluation of **Somerset POPP** and ongoing work with the SE ADAS performance network on **Measurement of Outcomes** in practice.

### Publications

- Jones, K., Netten, A., Francis, J., Bebbington, A. (2007) Using older home care user experiences in performance monitoring *Health and Social Care in the Community*, 15, 4, 322–332.
- Netten, A., Jones, K. and Sandhu, S. (2007) Provider and care workforce influences on quality of home care services in England *Journal of Aging and Social Policy*, 19, 3, 81–97.
- Curtis, L. and Netten, A. (2007) The costs of training a nurse practitioner in primary care: the importance of allowing for the cost

- of education and training when making decisions about changing the professional mix. *Journal of Nursing Management*, 15, 4, 449–457.
- Netten, A. and Forder, J. (2007) The costs of what? Measuring services and quality of care. *Social Policy and Society*, 6, 3, 397–409.
- Malley, J., Netten, A. and Jones, K. (2007) Using survey data to measure changes in the quality of home care. Analysis of the Older People's User Experience Survey 2006, in *Unit Costs of Health and Social Care 2008*, ed. L. Curtis, PSSRU, University of Kent.

## User experience surveys

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Over the past five years PSSRU has conducted a number of studies connected to the annual national social care user experience surveys (UESs), known as the UES extension studies. The aim has been to support the development of the UES and explore variations in user assessed quality and satisfaction. Here we report on some key findings and discuss implications for future UESs.

**What is being measured?** A number of concepts have been measured in the UES and used as performance indicators (PIs). These include: satisfaction with services, reports of different aspects of delivery of care related to quality, and of aspects of quality of life related to outcomes. Although we have found a strong correlation between these measures (Netten et al., 2004), they do not measure the same concept. Indeed evidence from the 2006 and 2003 UES suggested that while satisfaction with services remained the same, over the same period quality of care delivery fell (Malley et al., 2007). There could be many reasons for this finding, including gaming of the satisfaction measure which was a PI in both 2003 and 2006. Future work will seek to understand what explains changes in satisfaction and quality over time.

**Non-response** Non-response is a significant issue, with response rates varying from 30 to 80% depending on the authority and client group surveyed. Our analysis indicates that non-response biases PI estimates and the bias varies in magnitude and direction depending on the authority. Variation in bias could be a result of differences between authorities in the process of collecting data although this could not be tested. This analysis suggested the need to be aware of how differences in process, including dissemination of results, may bias PI estimates and that PI estimates should be adjusted for non-response.\*

**The complexity of the population** The population of social care service users is highly varied, which makes it difficult to use a single questionnaire, since it would not fit each individual's circumstances. PSSRU has contributed towards the development of different surveys for different client groups and services, for example equipment users, younger adults and carers (Malley et al., 2006; Smith and Netten, 2008; Smith et al., 2008). There are benefits and disbenefits to this approach. On the benefits side questions can be specific to the types of activities carried out by the service, providing useful information for improvement activities. However, it does make comparing performance across client groups and services difficult. A set of questions covering outcomes may be more appropriate if comparability is the ultimate aim, since these tend to be more similar across services and client groups. However, outcomes questions have their own problems, including issues of attribution.

User surveys are a welcome addition to performance assessment and can be used for a number of different purposes, including monitoring, allocation of resources and supporting the development of the care market. Developing appropriate and valid surveys and measures requires detailed analysis to balance the pros and cons of different options. The future programme of work by PSSRU will help policy makers with these decisions. Plans include investigating the effect of factors beyond the control of the authority on PIs, the characteristics of different types of PI measures such as multiple-item measures, and the effect of workforce characteristics on service quality.

\* See Malley, J. (2007) Non-response – what is going on? Factors associated with non-response and what can be done about it, paper presented at the conference *User Experience Surveys: the process, their value and the future*, sponsored by the Department of Health, London, 12 November 2007, [www.pssru.ac.uk/yaues/ues\\_event.htm](http://www.pssru.ac.uk/yaues/ues_event.htm)

## References

- Jones, K., Netten, A., Francis J. and Bebbington, A. (2007) Using older home care user experiences in performance monitoring, *Health and Social Care in the Community*, 15, 4, 322–332.
- Malley J. and Netten, A. (2008), Measuring and monitoring outputs in social care: the problem of measuring quality, *International Review of Administrative Sciences*, 74, 4, 535–553.
- Malley J., Sandhu, S. and Netten, A. (2006) Younger Adults' Understanding of Questions for a Service Users Experience Survey, Discussion Paper 2360, PSSRU, University of Kent.
- Smith, N. and Netten, A. (2008) Developing Measures of Quality and Outcomes with Community Equipment Services, Discussion Paper 2540, PSSRU, University of Kent.
- Smith, N., Holder, J. and Netten, A. (2008) Measuring Outcomes for Carers, paper presented at the British Society of Gerontology Annual Conference 2008 'Sustainable futures in an ageing world', University of the West of England and the University of Bristol, 4–6 September.