

Implementing the Single Assessment Process: Key findings from the literature

PSSRU

RESEARCH SUMMARY

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As part of a larger study of the Single Assessment Process, PSSRU at Manchester were commissioned to review available literature concerning issues relevant to the SAP. The headings under which the material is summarised reflect issues identified by the Department of Health as critical to implementation. This summary presents some of the key findings. The review considered studies published after 1985 and included both evidence based reports and policy and practice reviews. Sources were predominantly from the UK although some international studies were included. In particular these came from countries with the closest policy frameworks to those in the UK, namely, the US, Australia, and Japan. The international literature served to emphasise the overlap with experiences in other parts of the world.

A NOTE ON METHODOLOGY

The evidence base from which this literature is drawn is large but of variable quality. Many of the studies are qualitative (using narrative or biographical approaches) and although this is not problematic in itself, as such studies can throw light on important areas of practice, when they are also based on small sample size, as is often the case, generalisation is compromised. The literature on assessment also focuses largely at the micro level: that of the individual practitioner and service user,

demonstrating a limited view of assessment. Few studies examined assessment more broadly, for example, how it varies across the country, or its links to performance criteria. Finally, the majority of studies only investigated process measures and did not consider their impact in terms of outcomes for the service user.

PUTTING THE INDIVIDUAL AT THE CENTRE OF ASSESSMENT

The SAP elevates the notion of person-centred care from a desirable idea to a central value and mandatory practice within assessment. The literature on the practice of a variety of professionals involved in the assessment of older people, however, demonstrated that they did not share an understanding of this value and that even when upheld in theory, person-centred care was often not adhered to in practice. The National Service Framework for Older People (Department of Health 2001) outlined a number of concrete indicators to judge whether assessments supported person-centred care. These are outlined in Box 1 below. Table 1 overleaf outlines the findings

relating to one of these indicators in more detail.

Following assessment, the care plan should clearly describe the objectives and outcomes of help. This should be agreed with the older person and they should hold their own copy.

PROFESSIONAL VALUES AND MULTIDISCIPLINARY WORKING

The existence of different professional values or ideologies is identified in the literature as one issue impeding effective multidisciplinary working. Different professional perspectives and styles of working tend to produce differences in practice and in the way in which assessments are conducted (Ross and Tissier, 1997). This has resulted in some entrenchment by professionals concerned to protect their roles and has served to hinder shared practice that might result in better outcomes for service users.

A linked issue is the difficulty around the conceptualisation of 'need' in community care assessments voiced by a number of authors. Evidence from

Box 1. Process indicators by which to judge whether assessment upholds person-centred care

- Assessment should be matched to individual circumstances
- All relevant needs should be identified
- Assessments should not be culturally biased
- Older people should be invited to play a full part in assessment

Source: Department of Health (2001)

The Research Team

The PSSRU staff who conducted this study were Michele Abendstern, Jane Hughes, Paul Clarkson, Caroline Sutcliffe and David Challis at the PSSRU, University of Manchester.

Table 1. Older people should be invited to play a full part in assessment

Professional group	Some findings from the literature
Social workers	Not if user had communication difficulties Consulted rather than involved Emphasis on procedure, agency centred Assessment on rather than with user User involvement central in theory only
Community nurses	Fear of raising expectations that could not be met Client centred assessment practice central in one study
Hospital nurses	Involved users despite their reluctance The majority of service users felt able to express views
Occupational therapists	Agency and professional agenda took precedence Only minority of users were aware that they had been offered an assessment

Sources: Waterworth and Luker (1992), Ellis (1993), Myers and MacDonald (1996), Hardy et al. (1999), Poulton, 1999; Lloyd, 2000; Richards (2000), Worth (2001), Roberts (2002).

practitioner-based studies shows a lack of understanding of the concept of need and how this relates to service provision from the particular agency concerned. Such studies suggest that practitioners of different disciplines lacked a clear framework, both conceptually and practically, for undertaking needs assessments.

DEVELOPING STRUCTURES TO FACILITATE INFORMATION SHARING

The literature draws attention to the fact that a single and collaborative approach to assessment, involving multiple agencies but coordinated by the social services care manager, was the original intention behind the community care reforms. The evidence reviewed, however, suggests that such a pivotal approach was not fully established and that, instead, separate assessments, often with little sharing of information, have taken place. Breakdown in communication between professionals

and agencies was found to be particularly pronounced at points of transition from one care situation to another, such as hospital discharge. This resulted in the repetition of the assessment process performed in hospital, once an older person returned home. The lack of successful structures to enable information exchange was closely linked to and frustrated by inter-professional mistrust.

The introduction of information technology was considered by the majority of those addressing this issue to have huge potential to overcome some of the structural obstacles to information sharing that have existed to date. However, they also acknowledge that this potential will not be fulfilled unless professional values and cultures also merge.

Further Information

For further information on the SAP study as a whole, see the project outline at www.pssru.ac.uk/pdf/p060.pdf, telephone 0161 275 5250 or email pssru@manchester.ac.uk.

REFERENCES

- Department of Health (2001a) *National Service Framework for Older People*. London: Department of Health.
- Ellis, K. (1993) *Squaring the Circle. User and Carer Participation in Needs Assessment*. Birmingham: University of Birmingham/ Joseph Rowntree Foundation.
- Hardy, B., Young, R. and Wistow, G. (1999) Dimensions of choice in the assessment and care management process: the views of older people, carers and care managers. *Health and Social Care in the Community*, 7, 483–491.
- Lloyd, M. (2000) Where has all the care management gone? The challenge of Parkinson's Disease to the health and social care interface. *British Journal of Social Work*, 30, 737–754.
- Myers, F. and MacDonald, C. (1996) Involving users and carers in needs assessments and care planning – views from the practitioner. *Health and Social Care in the Community*, 4, 86–95.
- Poulton, B. C. (1999) User involvement in identifying health needs and shaping and evaluating services: is it being realised? *Journal of Advanced Nursing*, 30, 1289–1296.
- Richards, S. (2000) Bridging the divide: elders and the assessment process. *British Journal of Social Work*, 30, 37–49.
- Roberts, K. (2002) Exploring participation: older people on discharge from hospital. *Journal of Advanced Nursing*, 40, 413–420.
- Ross, F. and Tissier, J. (1997) The care management interface with primary care: a case study. *Health and Social Care in the Community*, 5, 153–161.
- Waterworth, S. and Luker, K. (1990) Reluctant collaborators: do patients want to be involved in decisions concerning care? *Journal of Advanced Nursing*, 15, 971–976
- Worth, A. (2001) Assessment of the needs of older people by district nurses and social workers: a changing culture? *Journal of Interprofessional Care*, 15, 257–266

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