



Measuring the outcomes of community care.

Introduction to the ACCOM

Problems of Measurement. Difficulties with the Use of Outcomes Tools in Case Managed Community Care

[Download final report Measuring the Outcomes of Case Managed Community Care 2013](#)

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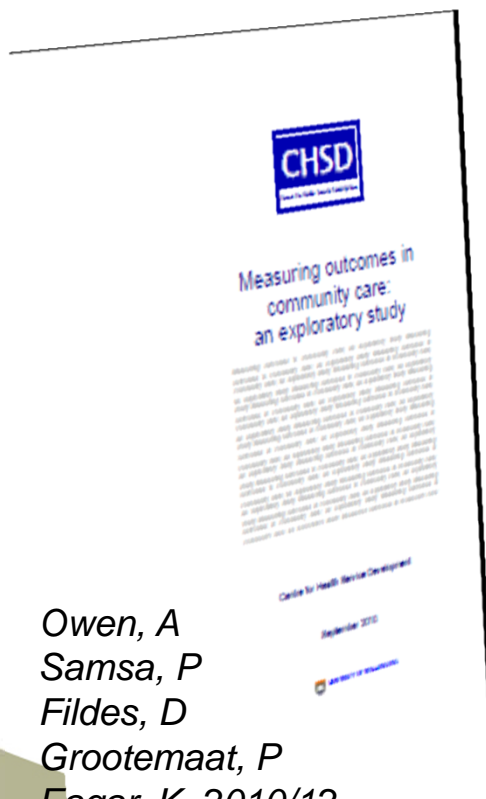
FACULTY OF
ARTS

Partners

- Community Care Northern Beaches Ltd (CCNB)
- KinCare
- The Benevolent Society
- NSW Community Options Projects Inc
- Aged and Community Services Association, NSW and ACT
- Department of Sociology, CRSI, Macquarie University



Key Documents and Preliminary Studies



Owen, A
Samsa, P
Fildes, D
Grootemaat, P
Eagar, K, 2010/12



Measuring the Outcomes of Case Managed
Community Care
Towards a practical instrument for Australian home support

Sarah Redshaw
Michael Fine

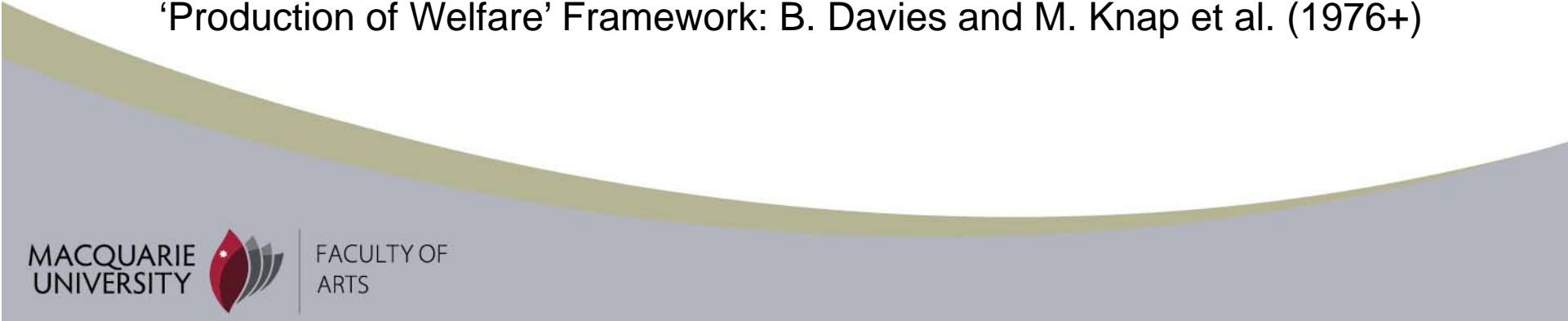
Redshaw and Fine, 2013

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Centre for Research on Social Inclusion
Department of Sociology, Macquarie University, Sydney
ISBN: 978-1-74138-401-7

Outcomes as Generated from the Production of Social Care

Inputs ⇒	Service Production Process	⇒ Outputs	⇒ Outcomes
Includes 1. Funds (public and private) 2. Clients 3. Staff	Organisation and conduct of work (care activities)	Types and amounts of services or other products provided.	eg. Individual wellbeing; Health, Family/carer wellbeing; Residential outcome (stay at home).

‘Production of Welfare’ Framework: B. Davies and M. Knap et al. (1976+)



Concept of 'outcomes' widely used | social field

BUT

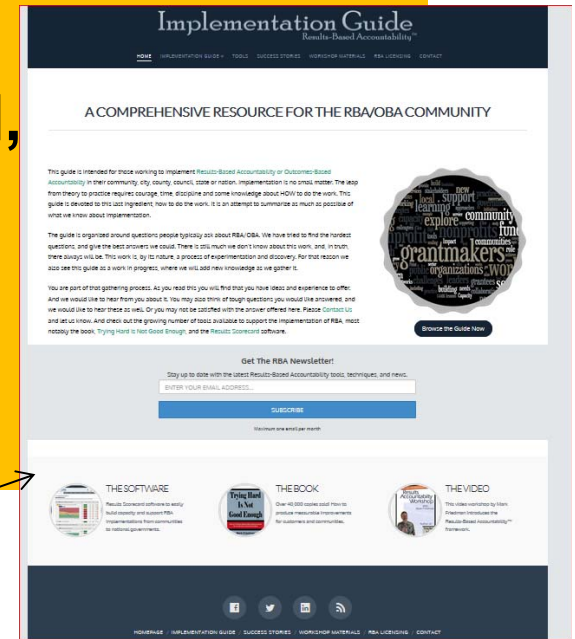
+ Frequently misconstrued, misapplied,

+ Often reinvented, renamed,

+ Typically fudged in many

human service areas

Is it another program fashion?



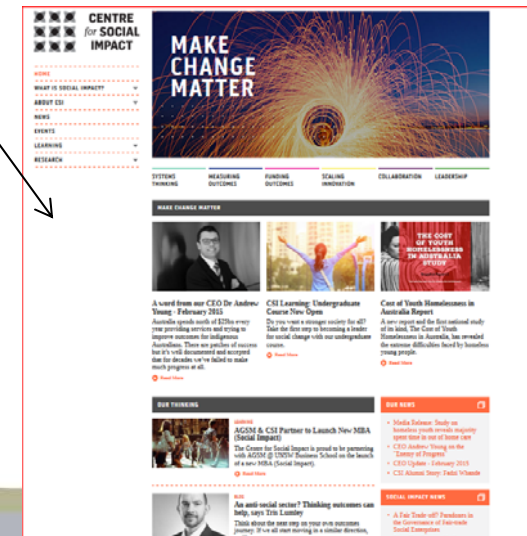
- **RBA:** Results Based Accountability

<http://raguide.org/>

- **Social Impact Assessment**

<http://www.csi.edu.au/>

- Social Return on Investment (SROI)
- GRI Guidelines, Social Accounting
- Most Significant Change
- Third Sector Performance Dashboard
- SE Balanced Scorecard
- Results Based Accountability
- Project Logic and Developmental Evaluation



Outcome measurement



- **Result, impact or consequence** of a process of service provision
- Provide **evidence of impact** of service delivery
- Objective definition and measurement
- Documentation of **change over time in crucial dimensions of the lives of service recipients or their carers**, such as personal wellbeing, health, capacity to participate in activities and sustain meaningful personal relationships, and the viability of continued residence at home

Understanding the impact of particular interventions

Match samples (eg clients) at T_0 (time zero)
Compare outcomes at T_1 (time one)

Standard T_0 \longrightarrow T_1

Innovation T_0 \longrightarrow T_1

Outcome measures used in a range of studies

- Improved personal, domestic and community activities of daily living (ADL and IADL);
- reduced decline in personal and domestic activities of daily living;
- improved subjective quality of life;
- increased social participation;
- reduced caregiver burden;

- decreased incidence of falls;
- improved health status;
- reduced symptoms of depression and anxiety;
- increased social integration;
- decreased mortality rates;
- decreased use of hospitalisation; and delayed nursing home admission

Ryburn, Wells and Foreman, 2009: 228



Levels of outcome

These include:

1. **Client/patient experiences**, assessed using a validated measure.
2. **Staff experiences**, including retention rates, job satisfaction, and “burnout.”
3. **Process of care**, including:
 - a. **Access to care** (e.g., timeliness of response to patient inquiry, appointment timeliness, and availability of telephone or email appointments).
 - b. **Guideline-concordant care processes**, or scores on broadly accepted performance measures (e.g., rate of depression screening) eg. endorsed by the National Quality Forum or National Committee on Quality Assurance).

4. **Clinical outcomes:**

- a. Intermediate patient outcomes (e.g., change in HbA1c for diabetic patients).
- b. Clinical outcomes (e.g., mortality, symptom scale).

5. **Economic outcomes:** (service and system outcomes)

- a. **Overall health care utilization.**
- b. **Specific categories of utilization** (e.g., decreased emergency department utilization for asthma).
- c. **Incremental cost-effectiveness**

Agency for Healthcare Research and Quality (2012)

Research Stages

The collaborative research project:
to test, document and apply standard measures for the
determination of client outcomes in case managed community care
for older people.

- ✓ **Stage One, the first year of the research program, a pilot study undertaken in three well established and experienced case management services in NSW.**

Pilot

ARC Linkage 2015-2016

- ~~Stage Two, to be conducted~~ over two years to further trial the successful approaches identified in the first stage through case managed and other suitable services for older people across the State.

Larger data sets made available used to examine the outcomes of case managed care and address the project's other aims and objectives.

Focus on easy to use tool

- **initial priority: one for use by staff**

- **later stages: 'consumers'**

i.e. clients/ service users; carers

Challenges:

- Commonly agreed goals (outcomes) to be measured**

Which domains?

- Simple to use, valid and reliable measures**

Validation. Is data held? If not, is it v. easily collated?

How to capture it? Is a common score system possible?

- Trust vs Risk of Misuse**

Self-report systems open to bias. How to manage this?



Australian Community Care Outcomes Measure

16 Domains

Outcome Domains	Aim/Goal from assessment	Review result: 1 Goal achieved 2 Goal partially achieved 3 Goal not achieved	Goal for next period
Home tenure Secure tenure/residence – own or state housing Appropriate housing		1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	
Home maintenance and comfort Manage housework Maintain home and garden		1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	
Personal cleanliness/Comfort Dress/groom Bathing Toileting		1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	
Mobility Within home Outside home Access to transport as desired		1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	
Food and nutrition Shop/obtain the food desired Prepare food and eat when desired Has nutritious diet		1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	
Social/Family Connection Lives with family/partner Has family/friends who visit Has no family/friends		1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	
Future Planning Will Power of Attorney Advanced care directive		1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	
Safety and security Secure in home (fire, fall, entry risk) Secure in neighbourhood - feels safe in street/local area		1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	
Health Manage health issues Manage medications Referrals required, transport assistance		1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	
Communication Able to use phone, internet ... Able to communicate needs effectively Language issues		1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	
Occupation/ Activities Going to local club, church, activity of interest Meeting with language/cultural group Engaged in hobby		1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	
Carer wellbeing Able to manage Access to respite Needs supported		1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	

- +
- Occupation/Activities
 - Carer Wellbeing
 - Control/Independence
 - Dignity

Intention - A Practical Tool



- Develop measure that will be simple to use
- NOT be administratively time consuming
- Require minimum extra data
- Objective measure based on existing data

Practical and identifiable outcomes for service users and carers

Quality of life	Process	Change
Feeling safe	Listened to	Improved confidence and skills
Having things to do	Choice	Improved mobility
Seeing people	Treated as an individual	Reduced symptoms
Staying well	Reliability	
Living life as you want	Responsiveness	
Living where you want		
Dealing with stigma		

Miller, E., Whorisky, M. and Cook, A. (2008) Outcomes for Users and Carers in the Context of Health and Social Care Partnership Working: From Research to Practice, *Journal of Integrated Care*, 16, 2, 19-26.
The Joint Improvement Team of the Scottish Government linked with the development of the emerging National Outcomes Framework for community care in Scotland work on the outcomes-based piloting currently under way in Scotland.



Domains ordered by most to least common domains

Domains by demand	n/69	%
Personal care	56	81
Health	52	75
Home maintenance	48	70
Mobility	46	67
Food nutrition	46	67
Occupation	43	62
Connection	32	46
Communication	30	43
Control	27	39
Safety	24	35
Carer wellbeing	23	33
Home tenure	22	32
Dignity	13	19
Future Plan	12	17



Next Steps?

- Continue partnerships with existing and other research partners
- Extend research team through collaboration of MQ with AHSRI Outcomes Programs
(Prof Kathy Eager, Peter Samsa, Cathy Duncan et al.)
University of Wollongong
- Work with
 - Industry partners
- Seek
 - Government support
 - Research funding
- Plans for future industry controlled scheme.





Thank you

Special thanks

to all who contributed

to the pilot and the research workshops