

**Title: Developing an Integrated Adult's Performance Assessment Framework, 2005-06-2006-07**

**Discussion paper for Performance Coordinating Group:**

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## **Introduction**

1.1. CSCI welcomes the opportunity to share emerging ideas of how performance assessment might develop over the next three years. This paper outlines short and medium term strategies for moving towards an integrated health and social care model.

## **Proposals**

2.1. The adults' performance assessment framework should be modernised over the next two years to reflect:

- Current and emerging policy drivers focusing on improved outcomes for people who use services across health and social care, particularly in relation to choice and control
- Changing structures across health, housing and social care and associated developments in how services are now delivered
- Better Council "in-house" performance assessment systems
- A climate of improved performance across councils

## **Short term strategy: 2005-06**

3.1. Re-structure the DIS so that it is organised around a set of headings that reflect government priorities and has an increased number of outcome questions developed jointly with the Healthcare Commission. The existing Social Care performance assessment framework and domains will remain. (Re-structuring in line with Green Paper outcomes has been undertaken in the report back on performance from the DIS and APA for 2004/05 (forthcoming)).

- 3.2 Establish governance arrangements with the Healthcare Commission to oversee joint assessments that focus on the contribution of social care and health to improved outcomes for users.
- 3.3. Initial stages: expand the improvement review fieldwork component of the community mental health assessment to allow for broader analysis of health and social care information that focuses on the experience of the users.
- 3.4. Explore different models of service inspection activity that are proportionate, non-burdensome and explore the impact of services on users.

**Medium term: 2006-07 Performance Year (2007 Performance Assessment process)**

- 4.1. The star ratings system is replaced with a set of user group judgments that feed into an overall adult social care rating. This could range from 'excellent' to 'poor' and would need to be in line with CPA. (See attached example at Annexe 1).
- 4.2. Design and consult on performance indicators during 2006 for the 2007-08 performance year that take into account existing policy drivers, the need for joint indicators wherever possible and the proposed direction outlined in the Green Paper.
- 4.3. Why change?
  - The current model provides a generic adult social care judgement that can mask poor performance in the more marginalised areas of physical and sensory disability, learning disability and mental health whilst, conversely, failing to pick up areas of innovative practice.
  - The provision of a more sophisticated analytical model that focuses on specific user groups supports CSCI's commitment to an improved service user focus.
  - The potential for better use of regulatory information enhances CSCI's potential to do this.
- 4.4 Design a methodology for joint performance assessment and develop a range of enquiry methods with the Healthcare Commission that enable evidence to be used in the annual performance assessment of councils.

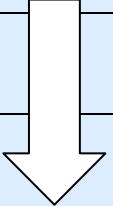
## Questions for Discussion

- 5.1 Does the proposed disaggregated approach provide the right balance between a service user focus and the requirements of an overall adult social care judgement?
- 5.2 Are our current methods of collecting evidence through the DIS, service inspections, regulatory activity and business monitoring meetings compatible with a modernised framework? Should these be reviewed in the light of the potential that IT offers to streamline processes, reduce delays and provide real-time information?
- 5.3 What are the key principles that should underpin the development of a shared approach with the Healthcare Commission to performance assessment of 'whole systems'?
- 5.4 What have we missed?

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Attached: Annexe 1  
Annexe 2

Annexe 1 : possible outcome based model for 2006-07 DIS (for completion May 2007)

	SAFETY	CHOICE AND CONTROL	HEALTH	PREVENTION	SOCIAL INCLUSION	USER FOCUS	<ul style="list-style-type: none"> <li>▪ CAPACITY FOR IMPROVEMENT</li> <li>▪ ORGANISATIONAL LEADERSHIP</li> <li>▪ COMMUNITY INVOLVEMENT</li> <li>▪ PARTNERSHIP</li> </ul>
OLDER PEOPLE							
PHYSICAL & SENSORY DISABILITY							
LEARNING DISABILITY							
MENTAL HEALTH							
CARERS							
HIV/AIDS							
DRUGS AND ALCOHOL							

## Annexe 2 : How the model might work and timeline for development

Each section scored as follows: 'excellent', 'good', 'satisfactory', 'poor'
Set of descriptors provided for each category.
Overall judgement produced that takes account of all scores but provides a ceiling so that a council cannot receive an 'excellent' rating if it has x number of 'poor' or 'satisfactory' scores.
Outcome: users would be able to look across a council's services and identify strengths and weaknesses in order to inform choice.

<b>January 2006</b> Agreed framework in place following informal consultation and involvement of key internal and external stakeholders in its development
<b>January to May 2006</b> Development of detailed model and start of building the tools
<b>June to October 2006</b> Consultation
<b>October 2006 to January 2007</b> Model amended, built and piloted
<b>February 2007</b> Model launched