

Putting **People First**
Transforming Adult Social Care

Outcome-focused Reviews

A practical guide

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Introduction

In early 2009 a group of disabled people, family carers and people from eight councils worked together to develop a new way to carry out reviews. We called this approach **outcome-focused reviews**. This updates earlier work carried out by the Department of Health to capture the learning from the Department of Health individual budget pilot¹.

What's in this guide

- This document, explaining what we mean by an outcome-focused review process and how we developed the tool.
- A template for an outcome-focused review form which councils can use or adapt to suit local needs.
- Guidance notes for people using the review form.
- Personal stories showing how councils taking part have used the outcome-focused review process.
- A discussion paper about the culture of reviews.

Key principles and assumptions

We have based this work on the social model of disability, which has been adopted by the Department of Health.

Under this definition, disability means the “disadvantage experienced by an individual as a result of barriers that impact on people with impairments and/or ill health²” . This means that the role of support and services is to enable disabled and older people to overcome barriers to independence.

Our starting point is that reviews should focus on the results, or outcomes, experienced by disabled people, older people and their families.

The word outcome can have different meanings. Outcomes which are linked to **policy goals** are measured at the level of large groups of people. Examples of policy goals include increasing employment, reducing hospital or residential care, and improving health. However, when looking at success from the point of view of individual people and their families, it is more meaningful to look at personal goals. These are the things that are important to individuals to achieve. Personal goals may be linked to policy goals, but will be different for every person. Both kinds of outcome need to be measured in order to judge the results being achieved by the social care system as a whole.

In this work, we are using the work outcome to refer to **personal goals**. These are the results or changes that individual disabled people and their families want to achieve.

¹ A Person Centred Individual Budget Review Process, Department of Health, 2008.

² www.dh.gov.uk/en/SocialCare/Deliveringadultsocialcare/Disability/DH_079426

An outcome could be an important life change (such as moving house or getting a job). Or it could be something which seems small but which is important to the person – such as walking to the shops to get the paper each morning.. An outcome could also be about keeping something unchanged – such as not being forced to give up work to look after a relative, or keeping the garden well-maintained.

Outcome-based performance indicators

Until now, there has been very little information about the outcomes that people experience through social services. Performance measures have counted activities such as the number of people getting a service, or how long it takes to carry out an assessment. It is important that better ways are found to judge the results of the system. This will mean we can tell if the social care enables people to achieve what is important for them, and whether it achieves policy objectives that are important for everyone.

The Department of Health is working with councils to develop better, more outcome-based performance indicators. As part of this project, we have tested the idea that personal goals could be used as the basis of a performance measure. The proposed measure counts the percentage of people who have been helped to achieve their three most important outcomes.

This has the potential to be a very powerful measure of the success of social care. As a performance indicator it could be used to measure the success of individual services or the performance of a council as a whole.

The review tool developed in this project is designed to provide the information which would be needed for this measure.

Co-production – working together with disabled people and families

From the start we decided that this work could only succeed if it was done by disabled people and families together with people working for councils. The purpose was not to consult a group of stakeholders. Instead, we worked together as a group of individuals each with relevant experience to design a review process that would work for people as well as for councils. We saw it as essential to ensure that the end product will be acceptable to disabled people and families, who sometimes find assessments and reviews to be bureaucratic, patronising and stressful experiences.

The working group included three disabled people and two family carers, along with managers from eight councils. The disabled people and family carers had all taken part in training as citizen leaders. All were involved with user-led organisations and had experience of working with councils.

Citizen leaders were valued as individuals with an expert contribution to make. They were paid a fee along with expenses.

The work was facilitated by two people. One has expertise in person-centred approaches. The other has experience as a family carer and as a citizen leader. The facilitators had a common vision and purpose, and had clear roles and responsibilities. The lead facilitator had a clear understanding of the task, and a well-developed facilitation style ideally suited to this kind of group work. The citizen leader facilitator also had a grasp of the issues, and the ability to participate fully in the programme. The facilitators spoke to every citizen leader before the start of the events to ensure that access requirements had been met, and to set the scene for the events.

We spent time at the start agreeing ground rules. The facilitators created a welcoming, inclusive environment in which all felt comfortable. We used rounds (where each person takes it in turn to speak) to make sure that everyone had their say and helped us to check that the whole group was happy with the progress being made.

We did have some problems with access issues – some parts of the venue were not accessible for wheelchair users, and the room temperature was hard to get right. Working with partially sighted people meant we had to get the facilitation right – for example we asked each person to announce their name before speaking. When the group voted on options, we made sure there was time allowed to read these out.

The council staff were treated in exactly the same way. We worked to make sure everyone's needs were met – whether it be a table to put papers on or custard creams with the coffee.

We planned and carried out specific and achievable tasks between the four sessions, such as testing out the draft materials. Councils sent the same members of staff to each event which was essential to maintaining the group dynamic and generating commitment. We made sure that the council staff included people with different jobs – social workers, team leaders, performance managers and commissioners. This helped to ensure that the end product would meet the needs of everyone and was simple to understand and use.

In short, a great group of people were placed in an open, transparent and supportive environment, and given time to build shared respect. This resulted in highly-focused work activity and agreement on the end result.

Here are some things people said about the experience of this work:

"All have made a positive contribution. It shows that changes can be made."

"Very unusual to feel so integrated after such a short time. Everyone had equal value."

"We worked well as a team. Good to meet so many people from various backgrounds and status. Thank you everyone! Proof co-production works."

"We have modelled the balance of power shift that needs to take place in social care."

What is a review?

A review is a process carried out (or commissioned) by a council, and involves a person who has a package of support or services which includes social care. The purpose of a review is set out in statutory guidance from the Department of Health. Reviews should:

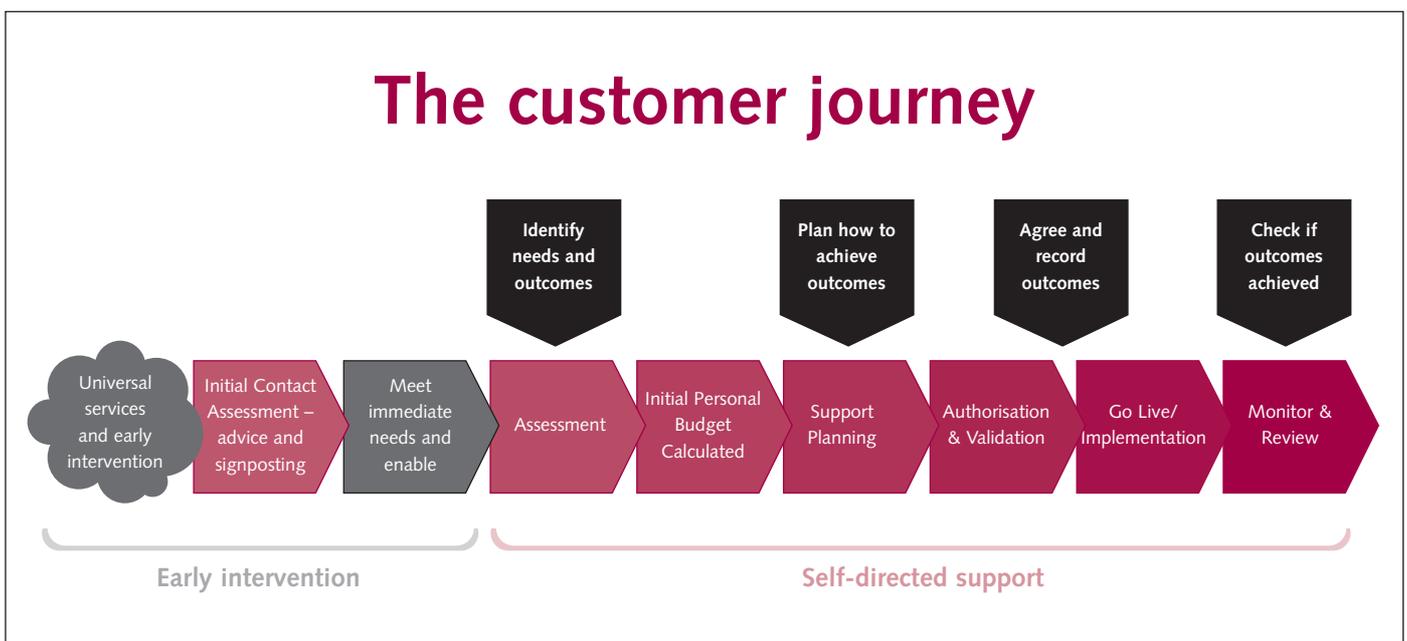
- establish how far the services provided have achieved the outcomes, set out in the care plan
- re-assess the needs and circumstances of individual service users
- help determine individuals' continued eligibility for support
- confirm or amend the current care plan, or lead to closure, and
- comment on the effectiveness of direct payments, where appropriate.

Fair access to care services, paragraph 58³

The process we have developed for outcome-focused reviews is in line with this guidance.

What is an outcome-focused review?

As part of the Putting People First policy, councils in England are putting in place a new approach to social care known as self-directed support. The diagram below shows how this works. A key part of the process is that a person develops a support plan. This shows the outcomes that he or she wants to achieve and how support will be arranged to achieve these. The personalisation website⁴ gives more information about the self-directed support process⁵.



3 www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4009653

4 www.dhcarenetworks.org.uk/personalisation

5 Self-directed support process, Department of Health, 2008.

An outcome-focused review is part of the self-directed support process. It is a way of carrying out reviews that puts the main focus on the results being achieved for the person and his or her family.

The purpose of an outcome-focused review is to:

- review progress in using a personal budget to achieve the outcomes set out in the person's support plan
- share learning about what has been tried and worked or not worked
- identify next steps to achieve these goals
- update the support plan
- make clear if the person's support needs have changed, and
- help the council to check if the person is still eligible for social care.

The outcome-focused review process is designed to be used for people who already have a personal budget. However, it can work effectively for people who have not yet completed the self-directed support process, for example people who have an existing direct payment and those with a traditional care package.

How are outcomes identified and recorded?

Outcomes are a "golden thread" which runs through the self-directed support process.

Outcomes are identified during the assessment and support planning process, and are the basis of the review.

a) Assessment

The initial assessment will identify areas where a person has an eligible need for social care. This covers questions such as:

- Which areas of your life do you need assistance with that are eligible for social care money?

b) Support planning

For each of the needs identified in the assessment, the person then decides how they want this to be addressed in their support plan, and the outcomes they want to achieve. To develop a support plan, the person will need to discuss questions such as:

- Within these areas of your life, what is important to you?
- What is working and not working for you at the moment?
- What do you want to change?
- What are the most important goals that you want to achieve?

c) Agreeing the support plan

To complete a support plan, the person needs to record the outcomes highlighted in the support planning process.

The support plan shows for each goal, how the support arrangements will enable these changes to happen. The council and the person agree the plan to confirm that the money can be used in this way.

d) Review

The review process looks again at the outcomes. It asks what is working and not working for the person and checks how much progress has been made towards the goals.

Carrying out the review

An outcome-focused review will normally involve a visit by a person working for the council, such as a care manager or reviewing officer. In the work to develop an outcomes-focused review process, we developed a form that can be used to guide the process and to record information. More information about using the form is in the guidance notes.

The form is based on the outcomes set during the support plan. This part of the form can be filled as part of the process of completing the support plan. Later on the rest of the form can be used as the basis of the review.

The development group designed and tested the form through a series of steps:

- Sharing local best practice.
- Agreeing success indicators (see What is a successful review?).

- Matching best practice against the success indicators.
- Choosing the elements from the best practice and voting on ones to build into the process.
- Designing the first draft of the process.
- Testing this out with 10 people across the councils taking part.
- Reviewing and redrafting.
- Testing out with a further 35 people.
- Reviewing and amending.

The elements of the review form are shown in the table below.

Using domains as categories

The development group decided that it would be helpful to organise outcomes by a set of domains. These are general headings under which outcomes take from the support plan can be organised.

The outcome domains have three purposes:

- To check that the support plan is covering the full range of needs identified in the person's assessment
- To enable the council to understand how a person's goals relate to local and national policy aims and objective measures such as reducing hospital admissions.
- To make the information more useful to inform performance management and commissioning.

The development group suggested a set of outcome domains for councils can use. The guidance notes provided with the review form explain these domains more fully.

- 1) Community life: leisure, learning and work
- 2) Managing money
- 3) Family and relationships

- 4) Choices and changes
- 5) Living safely and taking risks
- 6) Health and wellbeing
- 7) Everyday tasks

Councils could choose to use a different set of domains, in line with any changes in national requirements.

What is a successful review?

A successful review is much more than a piece of paper. These are the key elements of a great review:

1) A great review ensures that people are living the life they want to

The review process should be a way of acknowledging and celebrating what is working well. It encourages the person to aspire to improve their life, and identifies what is not working well, and what needs to change.

2) A great review maps a journey

The review looks at the steps already taken, and what needs to happen to build and sustain this. The review process identifies next steps and sets realistic actions to achieve by the next review.

3) A great review is outcome-focused

The review looks back at the outcomes or changes that the person wanted to achieve in their support plan, and checks whether these have been achieved. Decisions are made about how the support plan needs to be

updated, and whether a more detailed re-assessment is needed.

4) A great review gathers and shares information

The review is a way to ensure that people have all the information that they need, and that the council has the information it needs.

5) A great review looks at money

The review is an opportunity to check that the person is getting all the money needed, and that the amount of the personal budget is right.

6) A great review gathers any necessary data

The review is a way for councils to ensure that they have the data they need so that records can be updated as necessary.

7) A great review is person-centred

The review goes at the persons pace, keeping them at the centre. It supports the person to think about their life – what is working, what could be possible, and what needs to change.

Elements of the review form

Element	Purpose	Resulting action
Recording the most important outcomes from the support plan	To make clear the goals that the person wants to achieve	Agree the support plan
Organise the outcomes into categories using outcome domains	To show how outcomes are linked to policy aims and objective outcomes	Provide data for council performance management systems Provide information to inform commissioning decisions
Review what is working and not working for each of the personal outcomes that the person chose when developing their support plan	To review each outcome and reflect on what has worked well and what needs to change. To acknowledge and celebrate success To think about what may be needed to maintain what is working. To identify what is not working to begin to think about what needs to change.	Identify any safeguarding concerns that need investigation.
Ask how people are spending their budget	To review how the money is being spent. This is not a detailed audit of receipts. It is a light touch review of the ways that people said that they would spend their money in their support plan. It is designed to show whether more detailed financial checks are needed.	Decide whether more detailed financial checks are needed Identify any financial concerns that need investigation Provide information to inform commissioning decisions

Element	Purpose	Resulting action
Ask whether the way that they are using their money is improving their quality of life	To keep the focus on quality of life To check that the money available is being used to improve their life	Update the support plan with any new outcomes and any changes needed to support arrangements and use of money
Support plan review	To think with people about what is important to them now, and what their aspirations are for the future.	Update the support plan (as above)
Ask if support needs have changed	To find out whether there have been significant changes that indicate the need for a more detailed re-assessment	Decide whether a more detailed re-assessment is needed Decide whether eligibility for social care has changed.
Find out about carers and others views about what is working and not working	To ensure that there is a full a picture of possible about what is working and not working.	Decide whether a carer's assessment is needed Update the support plan (as above)
Comments	Space for comments from the person, carer or others, or the reviewer	
Identify whether the three most important outcomes from the support plan have been achieved	To see if the most important outcomes have been achieved	Provide data for council performance management systems and performance indicators Provide information to inform commissioning decisions
Actions	Clear actions that the person commits to, and the reviewer commits to	
Next review	Decide on the date of the next review and who is responsible for making sure that this happens	Plan next review
Signatures	Signatures of the person who the review is about, and the reviewing officer	

Recording the three most important outcomes.

The form provides a means to record the three goals in the support plan that the person feels are the most important.

This information is a way to measure whether the person's support plan is working. This can be used as the basis of a performance measure.

This approach requires the top three outcomes to have been identified and recorded at the support planning stage. Progress is checked at the review.

As part of the review, the person is asked the following question:

"Thinking of the three things most important to you in your support plan, has the way you have spent your money helped you to achieve them?"

For each of these goals, the person can answer:

- Yes – I have fully achieved this goal.
- Yes – I am successfully working towards this goal.
- No.

The second category allows people who have chosen demanding, long-term outcomes to respond positively if there is good progress towards the goal.

How can information from the review be used?

An outcome-focused review can lead to further action by the council:

- The review may indicate that the person requires a re-assessment.
- The review can also identify safeguarding issues that need action by the council.

Outcome-focused reviews also can provide important information for councils to use systematically:

- The review can provide information that contributes to performance management and performance assessment.
- The review can provide information that can be aggregated to inform commissioning.

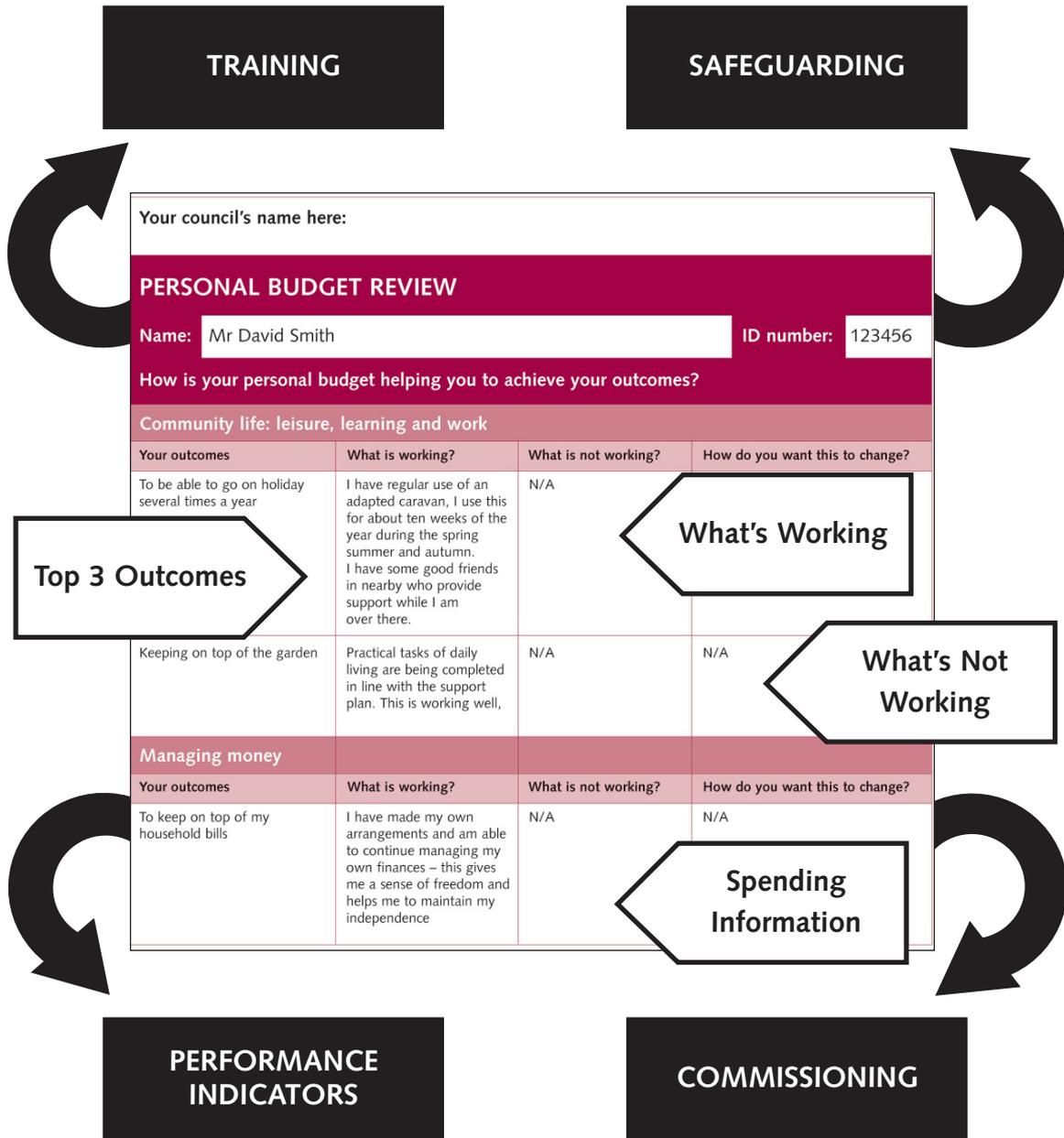
Some councils have taken part in a project to develop better ways to use evidence from reviews to inform commissioning. They worked together with disabled and older people, their families and provider organisations. This approach is called co-producing commissioning.⁶

The following diagram shows the how information from the support plan and the review can be used.

⁶ Co-producing commissioning, Department of Health 2009.

Information Flow Map

Using information from outcome-focused reviews to make wider changes



Using the data about the three most important outcomes

The main benefit of recording the three most important outcomes is to keep what is important for individual people at the forefront throughout their contact with the council, and to make sure that priorities for organisations clearly reflect what people want to achieve.

Data from this question can be collated and used to help ensure that the right kind of support is available – and that it does what people really want.

The data can be used to check the effectiveness of self-directed support, the quality of support planning and the quality of the services that people use.

Councils could use this information in a range of ways:

- It can be the basis of a local performance indicator for the council (the percentage of people achieving their three most important outcomes).

- The same measure can be used as a performance indicator for individual services and as evidence of the effectiveness of support planning.
- Analysing the link between domain headings and the goals can provide information to inform commissioning (the percentage of goals set under each domain heading, the percentage of goals under each domain heading that are achieved).
- This same information can be used to show whether self-directed support is contributing towards the achievement of policy aims such as reducing residential care and hospital admissions.
- The detailed data available from reviews can be collated to understand the reasons why people are achieving their goals – or not.

Next steps

The councils that took part in this project are planning to build in the learning from this work into their local self-directed support process.

Personal stories

This is a collection of stories showing how councils have used the outcome-focused review process. Trying out the tools in practice was an essential part of the development process. Councils used the tool with older people, people with mental health problems, people with learning disabilities and people with physical disabilities. Family members were also asked for their views.

Each council has provided a pen picture of a person, and the comments of the person, family and social worker carrying out the review. We have also included an example of a completed review tool, showing how outcomes can be recorded, and how the working/not working and action sections are used.

Mr Walker

"I am now in my seventies. I was a policeman prior to my retirement, and have always enjoyed fixing things in my spare time and still have a small workshop that is adapted for my wheelchair. I live with my wife and both our children live on the same road as us, I have lots of friends in my home town and we meet up on a Friday night at the local working men's club."

"I really enjoy going on holiday and have regular use of an adapted caravan. I use this for about ten weeks of the year during the spring summer and autumn. I have some good friends who provide support while I am over there."

I no longer drive so my daughter drives me and my wife over there and will pick us up in case of emergency. My daughter helps out a lot; she and her son provide a lot of support, to both me and my wife. I need help in several areas of my life, particularly around personal care and I use part of my budget to employ a care agency."

About the review, Mr Walker said: "It was good to have an opportunity to think about what is and isn't working". Mr Walker's social worker said: "This was really straightforward"

Mr Lewis

Mr Lewis is an older person who lives independently in the community. He has had a very active working life engaging in various physically demanding jobs. He previously lived in a very industrial area of the country but after retirement he moved with his wife and daughter to this area.

Mr Lewis has poor mobility (two knee replacements which were not wholly successful) and requires two walking sticks to aid mobility plus a range of small equipment, sciatica and osteoarthritis, tinnitus, a hearing impairment and diabetes. Mr Lewis also has short term memory problems and takes a large amount of medication. He recently had a stroke and is under investigation for heart and bowel problems.

Mr Lewis's wife died quite recently but he continues to live in his own home with his

dog for company. Things that are important to him are his dog, his independence, regular contact with his family, taking medication appropriately, having a holiday at least once a year, keeping on top of his garden and keeping his house tidy.

Mr Lewis has been supported by his daughter and the broader family. Unfortunately his daughter was not in a position to continue to provide the level of support that he needed as she has a young family and needs to take on some paid work. Mr Lewis accessed a personal budget paid through a direct payment with which he pays his daughter to support him. Mr Lewis is able to direct the support he receives. He feels in control of the situation – it is very important to him that someone he knows and trusts is able to support him.

Mr Lewis's daughter feels that the personal budget is very good as it enables her to continue to support her father and for her father to continue to live independently.

Mr Lewis's social worker has seen a big benefit from the personal budget: 'This has enabled a much more flexible approach. A traditional service would not really have helped – neither party would have been satisfied.'

Mrs Peterson

Mrs Peterson is a 90 year old person who lives in her own home in the community. Mrs Peterson identified that her friends and family are very important to her.

"It is important that they are able to visit and my support from care workers is arranged around this. I make all my own choices with support from my family, friends and care team. The decisions that I make are appropriate to my life and the way that I choose to live."

Mrs Peterson uses her individual budget as a direct payment. She has chosen to have her care support from an agency and employs them to visit three times a day, and she also has her hairdresser visit once a week. Mrs Peterson wants to remain in her own home even though she is housebound. She states that this is and will remain very important to her and she does not want to move to a ground floor flat. She has made the decision that she does not want to go out. At 90, she feels that this is the right decision

The feedback below identifies some of the strengths of the review template. Mrs Peterson said: "The review worked well for me! I enjoyed going through all of the sections and sharing my life choices with the social worker. I liked having time alone with the social worker to explore my care support and to check that things are still working well." Mrs Peterson's social worker said: "The form provided me with a person-centred format. Mrs Peterson provided me with so much more information that previous review formats would not have captured."

Tom

Tom is 42 years old and sustained severe spinal injuries in a motor cycle accident when he was just 16. For many years Tom was supported by his mother with no involvement from the local authority. However she died in 1999 and Tom reluctantly accepted support from the council. Over time he has developed skills to manage a substantial direct payment, employing personal assistants from his local community.

The social worker who completed the new reviewing tool stated, "Clearly defining service users' personal outcomes in a support plan gives a much clearer focus for reviewing than our current review document". Tom said, "I have had lots of assessments and reviews and I think I am good at making my views heard, but having a form that actually ensures that your views and preferences are central is a great idea, particularly for those who are less assertive". Tom's PAs felt that the review document was really useful in keeping them centred on what is important to him.

Patrick

Patrick is a young man with learning disabilities and symptoms of Asperger's Syndrome. Patrick initially lived with his mum following his return home from college. He moved into a tenancy with another friend, but this did not work out. He currently lives by himself in his own home, having a tenancy with a private landlord.

Patrick would prefer to live with other young adults of a similar age as he feels lonely and a bit isolated living by himself. He's looking to move into a shared house. His social worker is currently helping him to make the move.

Patrick has a direct payment, which he uses to pay for a personal assistant. Patrick uses this support to help him to keep his flat clean and tidy, to shop and prepare meals and to keep in contact with friends in social and leisure settings. Patrick particularly likes going to his local snooker club and local youth clubs/discos. Patrick also goes to a supported work placement.

Patrick, his mum and his social worker were asked to test out the review form for an annual review. The comments below indicated that the review form is easily transferable and useful for other settings. Feedback from Patrick was: "It involved me more and was easier to understand". Patrick's mum said: "It felt more specific to what Patrick does and could break things down into smaller actions for Patrick to undertake, which would then be easier to review. There seemed to be a bit of overlap and repetition." Patrick's social worker said: "The review felt more positive by looking at Patrick's goals and how he can work towards them. The review could be tailored to make it relevant to Patrick rather than set questions that may not apply. It was a better review process than the one we currently use – much less formal and enabled more general discussions to take place."

How the review form can be used to record information gathered

This document shows how the review form can be used to record information gathered in a reviews. The examples are based on a number of reviews carried out by the councils that helped to develop the template.

Your council's name here:

PERSONAL BUDGET REVIEW

Name: Mr David Smith

ID number: 123456

How is your personal budget helping you to achieve your outcomes?

Community life: leisure, learning and work

Your outcomes	What is working?	What is not working?	How do you want this to change?
To be able to go on holiday several times a year	I have regular use of an adapted caravan, I use this for about ten weeks of the year during the spring summer and autumn. I have some good friends in nearby who provide support while I am over there.	N/A	N/A
Keeping on top of the garden	Practical tasks of daily living are being completed in line with the support plan. This is working well,	N/A	N/A
Managing money			
Your outcomes	What is working?	What is not working?	How do you want this to change?
To keep on top of my household bills	I have made my own arrangements and am able to continue managing my own finances – this gives me a sense of freedom and helps me to maintain my independence	N/A	N/A

Family and relationships			
Your outcomes	What is working?	What is not working?	How do you want this to change?
To keep in touch with my friends and family.	I regularly see the people who are important to me, and am looking forward to a family holiday.	N/A	N/A
Choices and changes			
Your outcomes	What is working?	What is not working?	How do you want this to change?
To make decisions that are appropriate to my life and the way that I choose to live it.	I simply feel in control of my life	N/A	N/A
Living safely and taking risks			
Your outcomes	What is working?	What is not working?	How do you want this to change?
I want my personal assistants to respect my lifestyle choices & my preferred routines.		Health and safety can impact negatively on disabled people being safe & independent.	I need a profiling bed to enable my PAs to help me get up with decreased risk of back pain.
Health and wellbeing			
Your outcomes	What is working?	What is not working?	How do you want this to change?
To keep well.	My diabetes is under control. My daughter is attending hospital appointments with me	I have been quite unwell since Christmas, and my holiday may have to be cancelled.	I want to be able to plan my next holiday.
To feel good about the way my house looks.	My health and wellbeing have improved due the knowledge that basic tasks are being met effectively – things like cleaning the house	N/A	N/A
Everyday tasks			
Your outcomes	What is working?	What is not working?	How do you want this to change?
I need some help to have a shower four times per week.	The agency staff are now supporting me to have a shower twice a week, and my daughter supports me twice a week.	The agency do not want their staff to carry keys to people's houses. There isn't anywhere for a key safe to be sited.	I need a better key arrangement.
I need support with getting up and getting back into bed.		There are some difficulties surrounding timings and names of carers who are coming in.	I would like to request regular carers at agreed times.

What are the views of your family and other people who support you?

Who	What is working?	What is not working?
My daughter	Really happy that don't have to support Dad with a shower four times a week.	Worried about what will happen if Dad doesn't go to the caravan for the agreed amounts of time.

How have you spent your personal budget?

Item	How has this made a difference to your life?	Cost (per year)
Agency staff (£160.33 per week for 42 weeks per year)	Having a shower and doing other household tasks.	£6,733
Paying for a meal out for friends who support me while on holiday (£20 per week for 7 weeks)	I use this to thank them for the support they offer to me and my wife while we are on holiday	£140
		TOTAL £6,873

Your top three personal outcomes

Thinking of the three things most important to you in your support plan, has the way you have spent your money helped you to achieve them?	Yes	Yes – helped towards it	No
To be able to go on holiday several times a year	a		
To make decisions that are appropriate to my life and the way that I choose to live it		a	
To keep on top of the garden	a		

What needs to change in your support plan?

What do you want for the future?

Comparing my life now to an unfortunate period of time in short term care, I need my monies to employ my PA's so I can continue to live at home. Care at home is crucial to my quality of life.

What three personal outcomes are most important to you in the next year?

To go on a cruise

To be well enough to be able to go on holiday

For my personal assistants to respect my choices

Have your support needs changed?

No, although my health is changeable at the moment.

How does your support plan need to be changed?		
To have a contingency plan so that if I can't go to my caravan, I will be able to purchase additional care support		
Does your personal budget need to change (either up or down)?		
I need a contingency of £400 per year in case I get unwell and need to buy more support.		
Actions		
What will happen next?	Who will do it?	By when?
See my doctor to review my medication and to discuss my holiday in more detail	Me	31 May
Contact the agency about house keys	Jane Brown	8 May
Liaise with PCT about health equipment.	Jane Brown	31 May
We need to keep the following information about you up to date:		
Date of birth	01/01/1900	
Gender	Male	
Ethnicity	White British	
Religion	Roman Catholic	
Sexual orientation	Not given	
Client category	Older person	
Accommodation	Owner-occupier	
Employment	Retired	
New services starting	None	
Services ending	None	
Date of next review	01/05/2010	
Person responsible for review	Jane Brown	
Your signature	David Smith	
Reviewer's signature	Jane Brown	
Date	01/05/2009	

The culture of reviews

Stuart James, who works as a team manager in Staffordshire, explains what a person-centred approach to reviews means in practice:

The culture of reviewing has been inextricably linked to the way in which assessment and care management has been undertaken since the NHS and Community Care Act was implemented in 1990. Fundamentally, it has been driven by the fact that councils have a duty to carry out an assessment of individual need. Professionals have been given the duty to use their expertise to determine what the needs are and how those needs should be best met. At the unconscious level it may be that professionals have believed that they know best and that their knowledge of the care system (domiciliary care, residential care, day services) puts them in the best place to make judgements about people's needs. This lends itself to a professional gift model where some workers feel the need to offer services and advocate (sometimes quite vigorously) that people should have a certain amount of support and care usually in the form of hours.

The concentration and desire in relation to getting the detailed information to produce lengthy, comprehensive assessments and care plans has been seen as central to the role of care managers. In many cases reviews however, have been given little attention and have been seen as a distraction from the real business of assessment and care planning.

Barriers to achieving quality reviews:

- The considerable numbers of reviews that need to be undertaken have not been conducive to encouraging quality reviews.
- Reviews have tended to focus on present needs or a set of static services as opposed to looking to the future. The view that people's lives remain static and that there is little hope of people moving forward. This usually results in the main focus being about the amount of support needed, usually in relation to services. The aspirational/goal orientated approach has often been neglected.
- The attitude and skill of workers vary. The tendency to use the review template as a method for gaining information as opposed to adopting a person-centred approach. This paired with the lack of training for new and existing staff in relation to 'what makes a good review?' A poor review is likely to be conducted by someone who may have already developed preconceived ideas around solutions. This can inevitably lead to a lack of options being explored and a likely result of taking services from a set menu, as opposed to a custom-built personalised solution. Those workers who think outside the box and go the extra mile, generally enable individuals to move forward. They help suggest new ways of working regardless of the constraints a form or care management system creates. They tend to be innovative, creative and help individuals to combat barriers.

- Reviews have been viewed as a performance indicator by staff. The primary aim as opposed to gaining information and views ...

... 'something that my manager pressures us to carry out and his/her manager pressures him/her to meet or exceed targets. It's about the numbers'.

- These pressures are real and create tensions between management and fieldworkers and can devalue and undermine the review process. The flip side of this is that the performance indicator encourages the undertaking of reviews and therefore enables contact, support and advice to be maintained.
- Reviews have been used as a mechanism for 'clawing back' resources in times when managers forecast possible overspends. This creates tensions around the review process for workers and individuals and directly conflicts with a professional gift model.

However, there is a shift in the culture of undertaking reviews which has started in line with personalisation. The very notion that customers should carry out their own self-assessment and support plans (with support if necessary) immediately changes the dynamics away from a professionally-led and controlled system. The types of questions asked are much more about the individual and person centred.

Previously assessments, care plans and reviews have concentrated on what people can't do, or what their strengths are, identify whether these needs meet FACS and then suggest ways of remedying and provide interventions.

A tremendous amount of work has already been undertaken through the uptake of direct payments and this has offered increased choice, independence and control. With the implementation of a 'lighter touch' for auditing, the growing use of personal budgets paired with increased activity in the 'place shaping' agenda (enabling community readiness), there are likely to be increased opportunities for community involvement and access to universal services for vulnerable people.

Person-centred plans paved the way for reviews to be much more outcome-focused and address how people can reach certain goals and aspirations. The shift involves looking at barriers to achievement and looking at ways of overcoming these both on an individual level but also at a structural level e.g. challenging disabling environments. The crucial factor is that the individual decides what he/she feels is important. The individual is in control. The increased profile of advocacy and the emergence user-Led organisations supporting self directed support will also help to empower and strengthen people's control over their own lives.

