

Measuring outcomes that matter

Current NPF

The Review

Issues; Draft Outcome Example ?

Other Elements and Indicators ? Exercise

Nesting and Golden Thread Model

References

The review- to catalyse greater impact for the NPF

- Big Picture

- Seeing Outcomes as a 'Golden threads' from top to bottom across all forms of government and for all stakeholders
- Clearing the "cluttered landscape" that may be hampering delivery of the NPF.
- Address key things such as Wellbeing and Sustainable Development, Covid recovery, the eradication of child poverty and the achievement of net zero, all of which are embedded in the national performance framework
- Money/resource. Local authorities are responsible for a large proportion of the National Outcomes but consider they do not receive proportional funding to support that work

- Details

- Building into organisational reporting "a statement about what we are committing to and how that ties in with the national performance framework.
- Capturing the importance of the NPF but also how budgeting should be aligned with it
- Promoting Collaboration
- Accountability with time-bound milestones/objectives
- Measuring Contribution and Indicators
- Leadership- officials and public bodies are held accountable for the NPF outcomes along with examples of where this has been done successfully

Developing A National Outcome on Care

NPF

Purpose and Values

Current National Outcomes

1. Poverty
2. Children and Young People
3. Culture
4. Education
5. Fair work and Business
6. Human rights
7. Communities
8. Economy
9. Environment
10. Health
11. International

An NPF Outcome approach is one that helps answers key questions

- Do we know where we want to go ?
- How to get there ?
- How we are doing ?

Integrating health and social care enablers	NPF Can Influence?
Collaborate and coordinate	Yes
Engage with a compelling vision	Yes
Empower and enable at the local level	Potentially
Innovate and improve by adopting technology	Potentially
Reflect and learn	Yes

Care is invisible in the NPF

List of Enablers (edited for brevity) from; Hendry A, Thompson M, Knight P, McCallum E, Taylor A, Rainey H, Strong A. Health and Social Care Reform in Scotland – what Next? *International Journal of Integrated Care*, 2021; X(X): X, 1–14. DOI: <https://doi.org/10.5334/ijic.5633>

The formatting of primary/beacon outcomes and indicators for social care should;

- Be relevant, simple and clear
- Ultimately be aligned with other outcome indicators referring to a 3 scale model of improving, maintaining or worsening
- Draw on existing items in datasets where possible
- Have a sub-set of related indicators which also meet the above criteria

Challenging to meet 'good indicators' criteria.

- Core facts are often unclear, such as the amount spent on social care in different countries (Dodsworth & Oung 2023)
- Judgements about what constitutes a good benchmark for current performance; 9 outcomes for HSCPs to report on
- Lack of directly relevant items data in existing datasets
- Capturing sub-set indicators which encompass all forms of care and carer types and contexts.
- Care is 'nested' in Scotland within other 'strategic action fields' of integrated care and wellbeing economy thinking.

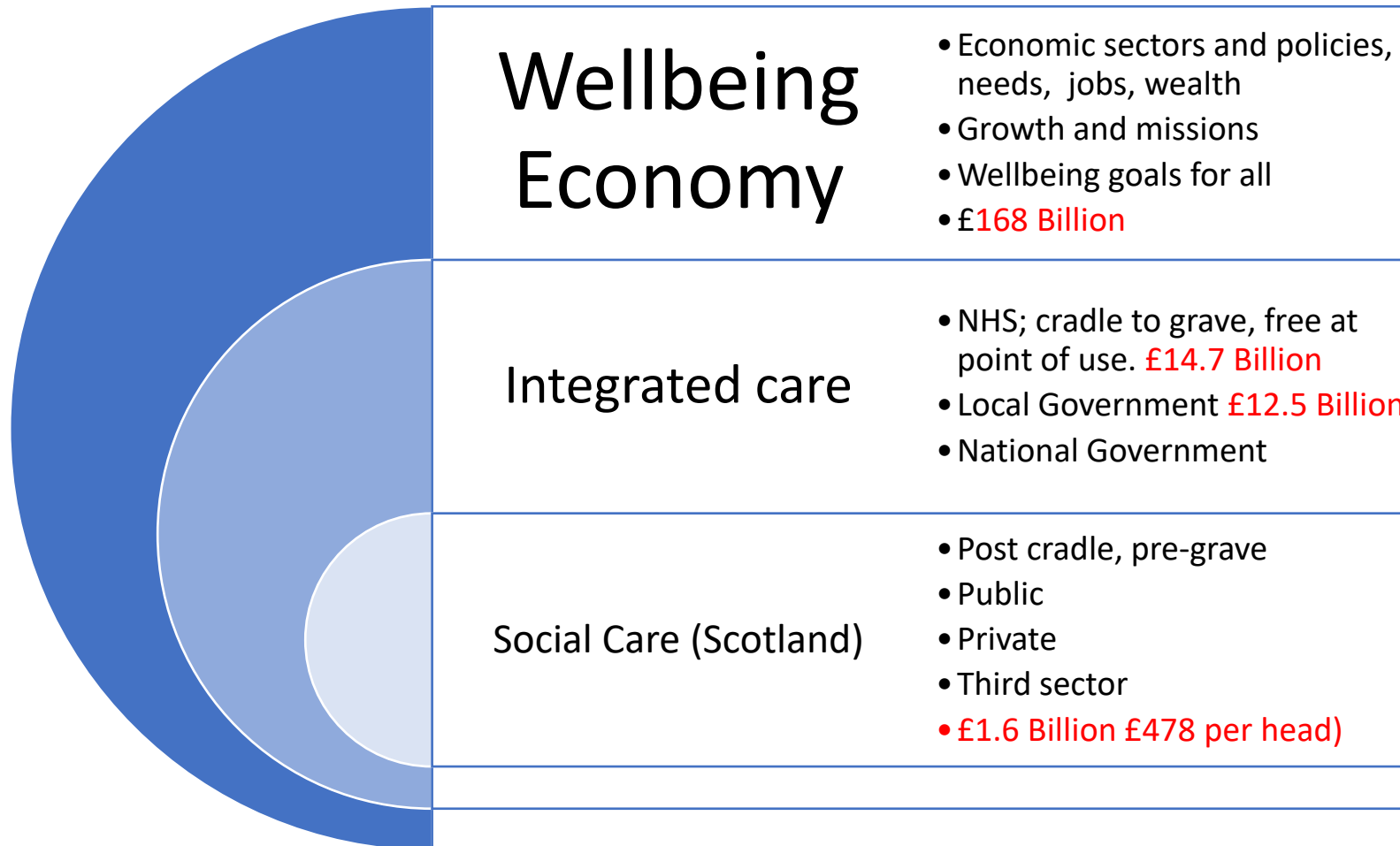


Figure 1 Nested Strategic Action Fields in Scotland

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Appendix; Health and Wellbeing Outcomes for IJBs

1. People are able to look after and improve their own health and wellbeing and live in good health for longer.
2. People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.
3. People who use health and social care services have positive experiences of those services, and have their dignity respected.
4. Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.
5. Health and social care services contribute to reducing health inequalities.
6. People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and well-being.
7. People who use health and social care services are safe from harm.
8. People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.
9. Resources are used effectively and efficiently in the provision of health and social care services.