Appendix 1

Example Outcome Management Template for Home Support Service Schemes

Question 1:
Who are your service users? (Those service recipients worked with in last year)

Services need to know and understand their service users and describe their situation within a demographic and situational framework.

Number	We provide support at home to 90 people each year with an average of 5 new users each month and a similar number moving out of our service. We have 20 service users who have been supported for over 3 years and 10 who have had support for 1 – 3 years. Sixty service users are aged 25 – 40, 20 are under 25 and 10 are over 40.
Sex	65 service users are men and 25 are women.
Race/Ethnicity	80 of our service users self-classify as white British, 6 as black British and 4 as black African.
Mental Health	80 of our service users are diagnosed as having a severe and/or enduring mental illness. 10 are regarded by their GP or social worker as 'highly vulnerable' in terms of mental stability. 70 service users have previous experience of psychiatric hospital admissions. 30 service users have experienced long stays in a psychiatric hospital (2+ years). Each year on average 15 service users have at least one admission to psychiatric hospital and five of our longer term service users have at least 3 hospital admissions per year. 60 service users have significant problems with medicine management. 20 of our service users regularly self-harm. 1 service user commits suicide each year.
Physical Health	70 service users have specific health management problems including debilitating illnesses, diabetes, epilepsy, excessive smoking, obesity, being underweight and managing medication.
Social Inclusion	None of our service users is in paid or unpaid employment; 5 service users attend specialist training or education. 75 service users live alone. 10 service users attend a day service regularly, 10 others attend irregularly whilst the remaining 70 attend no day facility. 60 service users only leave their home to shop or perform essential tasks. 30 service users experience harassment outside the home. 85 service users have no formal qualification. 60 have never had a job. 4 service users access mainstream recreational activities.
Independence	80 service users have significant problems with daily living skills (cooking, budgeting, home maintenance, etc). 30 service users have significant problems with alcohol or drugs.

Question 2
What will your service users achieve by the end of the year? (Performance targets)

Services need to set challenging but achievable performance targets for behavioural change for their service users in at least three different domains of which mental health would be mandatory and the others to be agreed between the services and the commissioners.

Our service users will achieve the following in the coming 12 months:

Mental Health	**60 service users will achieve a mental health gain, which they will sustain for at least three months in terms of the following:**	
	Reduce hospital admissions by 50%	or
	Sustain reductions in anxiety for at least 3 months	or
	Sustain reduction in self harm	or
	Report significant improvement in self esteem	or
	Reduce frequency/intensity of depression for at least 3 months	
Social Inclusion	**20 service users will achieve a significant social inclusion gain, which they will sustain for a minimum of three months:**	
	Access at least one new mainstream service	or
	Increased use of public transport	or
	Sustain reduction in negative personal behaviour	or
	Regular attendance at a day service or leisure activity	or
	Access at least one new mainstream service	
Physical Health	**40 service users will sustain improvements in physical health for a minimum of three months in terms of the following:**	
	Improve weight/diet	or
	Improve management of medication	or
	Appropriate contact with GP/Primary Health	or
	Improvement in physical condition	
Employment etc	**4 service users will make education, training or employment gain:**	
	Access mainstream education	or
	Access training	or
	Access employment	

Question 3
How will you verify the performance targets?

Each area of change identified by the service provider requires a corresponding method of verification to be selected from a menu provided by the commissioners, or alternatives negotiated with the commissioners.

Target	Verification
1. Reduced hospital admissions	1. Primary/secondary health care records
2. Reduced frequency/intensity of anxiety or reduced depression	2. Mental distress severity checklist
3. Improved contact with family	3. Self report or 3rd party (eg family)
4. Increased self confidence	4. Self report
5. Access to new mainstream activity	5. 3rd party verification
6. Improved daily living skills	6. Observation by staff
7. Attendance at careers guidance	7. Attendance records
8. Increased independence	8. Observation by staff or 3rd party
9. Reduced incidences of self harm	9. Personal records
10. Increased satisfaction with quality of life	10. Application & re-application of Quality of Life scale
11. Improved medication management	11. Verification by CPN, GP or self report
12. Access mainstream education or training	12. Records of education or training agency
13. Reduction in alcohol/drug abuse	13. Report from alcohol or drug agency
14. Improved nutrition	14. Weight change

Question 4
What are the core features of your current service?

Providers need to describe what the service actually delivers in terms of four factors: (i) Intensity/Duration; (ii) Essential Elements; (iii) Delivery Strategy, and (iv) Comparative Advantages.

Intensity/Duration	On call emergency service around the clock Dedicated time for each service user averaging 3 hours a week Average length of contact: 4 months, varying from 6 weeks to 4 years
Essential Elements	Key worker for each service user Baseline assessment uses Health Assessment Inventory Quarterly reviews of care plan undertaken Direct links exist with Day Services and Education/Training Practical support given if needed whilst teaching daily living skills Other services can include financial audit from CAB Regular liaison with social workers, CPNs, GPs, etc.
Delivery Strategy	3 Key workers with a caseload of 10 each Most services delivered at home Service users accompanied outside home to develop independence
Comparative Advantages	Service tailored to individual need Flexible in intensity and duration Aims to move service users to less intensive service Will stick with service users who need a longer period to gain confidence

Question 5
What are the milestones your service users will take on the way to achieving their performance targets*?*

Milestones provide a way of projecting the comparative gains made by users as they progress through contact with the service in a 12 month period. In the example these are mapped against the key delivery steps of referral, assessment, target setting, early improvement, specific health/social gains and sustained gains. This approach enables credit to be given at each stage of engagement not simply for attainment of an ultimate goal.

	Service User Milestones	**Numbers**
1.	*Referral stage*	
	Service users referred to service	130
2.	*Assessment stage*	
	Service users agree with key worker the baseline assessment of mental/physical health, social inclusion and independence	90
3.	*Target setting stage*	
	Service users set annual Personal Targets	88
	(a) Mental health targets:	(a) 88
	(i) Reduced distress	
	(ii) Improved self-esteem	
	(iii) Improved medicine management	
	(iv) Reduced hospital admissions	
	(b) Physical health target	(b) 60
	(c) Social inclusion target	(c) 40
	(d) Employment related target	(d) 10
	(e) Self care	(e) 30
4.	*Initial improvement stage*	
	Service users show initial improvement in mental health and at least one other target area	75
5.	*Review stage*	
	Service users maintain improvement in mental health	70
6.	*Target achievement stage*	
	Service users achieve mental health target and at least one other appropriate target	60
	Performance Target 1	
	Service user sustains improvement in mental health for a minimum of three months	60
	(i) Reduced distress	(i) 40
	(ii) Reduced negative behaviours	(ii) 20
	(iii) Improved medicine management	(iii) 20
	(iv) Reduced hospital admissions	(iv) 5

Performance Target 2		
Service user sustains improvement in other appropriate target area for a minimum of three months		50
(i) Physical health	(i)	40
(ii) Social inclusion	(ii)	20
(iii) Employment related	(iii)	4
(iv) Self-care	(iv)	20
Performance Target 3		
Service user moves on to less intensive support		60