

# Co-design an outcomes measure

## Reporter

Victoria Hulstrom-Allen at [Milton Park Therapeutic Campus](#), Brookdale Healthcare on 28 January 2015.

## What do you do<sup>i</sup>?

We worked in collaboration with service users and other stakeholders to adapt an established outcomes measure for use with people with Autistic Spectrum Conditions. Then we embedded it into our regular reviews, performance monitoring and supervision systems.

## What is excellent about it?

Traditional outcome measures tend to reduce the richness of life to numbers or are imposed upon the subject for the benefit of commissioners. We wanted to create something which made sense to the person themselves, offered a graphic representation and captured meaningful changes for the person. Some people with autism find abstract discussions difficult and so we wanted to use an instrument that helps people focus on concrete changes and goals. The [Outcomes Star](#) created by Triangle Consulting formed a useful starting point.

We drew together a group of stakeholders to help us adapt the Outcomes Star and create the new [Spectrum Star](#). We included staff and residents using our services, Triangle Consulting, staff from the university of Cambridge and other service providers in a series of three development workshops. The resultant draft Spectrum Star was then piloted across our therapeutic campus and in our residential service and revised in a further meeting. The resulting outcomes measure has been added to the suite of measures available from Triangle Consulting and adopted by some other services as well as in our own provision.

In our own services, Triangle helped us to develop and accredit a training programme for staff to make appropriate use of the measure and we have made this a mandatory course for all clinical staff and administrators. Everyone starts with the introductory half day course, and then after a year does 'the next level' half day that acts as a refresher and helps staff to reflect on their habits and approach to using the measure.

## Stories of Striving for Excellence in Locked Rehabilitation Services

Some service users were involved in the design workshops, and everyone was kept informed about the progress of this project via the Patients Forum.

### Even better next time?

The initial design workshops took place three years ago and the Spectrum Star was launched soon after this. The 'next level' course helps to safeguard the approach and stop it sliding into a tokenistic, perfunctory practice that misses the point.

We have redesigned our agenda for supervision meetings and a key aspect of the session is now a consideration of how the staff member is using the Spectrum Star and how they are working with the person between assessments to achieve positive change.

In addition, the multidisciplinary team meetings always use the Spectrum Star to structure their review of how the person is progressing and the effectiveness of current and planned approaches. As a result of these discussions, we have recently rebadged each part of our therapeutic programme to show how it contributes to progress on a specified aspect of the Spectrum Star.

We are clear that working with the Spectrum Star is a collaborative process between staff and the individual concerned. Each person holds a copy of each assessment and we record their engagement in the assessment process. We wonder if it might be possible to shift the balance further towards the person, so that it is even more strongly 'owned' by the person themselves rather than the staff team.

The pattern of achievement across the whole group of services user is routinely reviewed by our clinical governance group. This aggregated data might provide the evidence base for an academic publication, and there has already been media interest.

We may hold a review of the overall impact of the project with all stakeholders to find out if any further improvements can be made.

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<sup>i</sup> [NDTI](#) was commissioned to deliver a staff development programme promoting a more personalised and inclusive approach for those living and working in locked rehabilitation services in the English East Midlands. While the current inspection routine has a focus on risk prevention, our job is to focus on sharing positive practice and innovation. Peter Bates led the programme and wrote up these stories.

## Stories of Striving for Excellence in Locked Rehabilitation Services

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*The Excellence Programme is for independent and voluntary sector providers of locked residential rehabilitation services for people with mental health issues or learning disabilities living in the East Midlands. It has delivered:*

- *A series of seminars for key staff and people using services to promote a more personalised and inclusive approach*
- *A shared sense of what excellent services look like, captured in an [Excellence Framework](#) document.*
- *Learning exchange visits between members which lead to individual action plans for each service*
- *Excellence stories that capture and share ideas for service improvement.*

*These case studies have arisen from members of the Excellence programme and NDTi has not independently verified what we have been told. Some are radical and ambitious approaches that transform the whole service, while others consist of small steps that may not seem especially exciting to other readers, but make a difference to one person. Some readers might even question whether progress is being made at all! The overall purpose is to stimulate reflection and celebration for every step forward, whether large or small.*