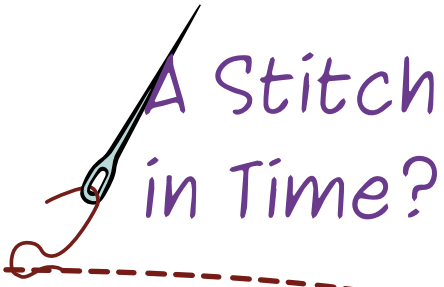

Indicator Bank for third sector outcomes for older people and carers

Evaluation Support Scotland

jit joint improvement team
creativity, collaboration and continuous improvement

The Scottish Government

Indicator Bank for third sector outcomes for older people

Introduction

This paper is one of several from A Stitch in Time? to show the contribution of the third sector to Reshaping Care for Older People (RCOP).

Our overall paper[1] presents a logic model to explain the third sector contribution to older people's quality of life and wellbeing. This paper presents example indicators, drawn from third sector practitioners' experience.

What are outcome indicators?

Outcome indicators help determine whether you have made the differences that you hoped in the lives of the older people or carers using your services (your outcomes).

Some outcomes can be measured in numbers. For example if your outcome is to improve someone's financial situation an indicator might be how much money that person has.

Some outcomes are soft and are more difficult to measure. With soft outcomes you need to set proxy indicators. These are things that might reasonably show that your outcome is happening. For example if your outcome is that people manage their health conditions better, indicators might be that people are taking their medication, making healthy lifestyle choices or sleeping well.

Once you have identified indicators you can collect information about these in questionnaires or other evaluation methods.

How to use this bank of indicators

The indicators in this paper have been identified by practitioners involved in Stitch in Time working groups[2]. We take each outcome from the third sector logic model. And we give example indicators – things that older people and carers might say or do, or that practitioners might observe, which would **indicate** the outcome is happening.

We offer this list to inspire you to think about your own indicators. It is not an exhaustive list and you may be able to come up with better ones for your project, particularly where you have expressed your outcomes in slightly different ways. Feel free to adopt or adapt these indicators to fit your own circumstances.

Why not have a go at developing your own indicators? See Evaluation Support Scotland's Support Guide to Developing and Using Indicators, but in essence we suggest:

- For each outcome brainstorm what success might look like for the individual, the group or the community
- Chose 2 or 3 indicators to measure (easiest to measure or most important)
- Check these out with others (funders, partners and people who use the service)

Top Tip

When developing indicators it's a good idea to involve front line staff and people using your services. They really know what success looks like in your context.

1 'A model to explain the third sector contribution to Reshaping Care for Older People' can be viewed on ESS website www.evaluationsupportscotland.org.uk

2 Primary and secondary prevention working groups, transport operators in Edinburgh, Optima Day Care Providers in West Lothian, projects funded by Midlothian Change Fund supporting those at risk of social isolation, Community Connecting projects.

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- Appropriate and timely referrals so people get the right information at the right time
- Ready and able volunteers

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- Organisations and groups have better awareness of different groups and communities, have appropriate policies and resources to support service users
- Older people and carers trust and use services
- Older people and carers feel they have a voice and can shape services

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- Warmer, safer, more accessible housing
- Affordable and accessible food and leisure options
- Feel safe at home and in the community
- Affordable and accessible transport

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- Make/maintain friends and connections
- Carer/cared for improve their relationship
- Older people contribute to their community
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- More able and willing to address issues
- Better placed to take part and make informed choices
- Maintain/increase sense of self worth
- Recognise what I can do (not can't)
- Less anxious/more confident

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- Maintain/improve financial situation
- Ability to pay for basic commodities, food, fuel and rent

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- All groups can access and feel able to use services
- Organisations and services are better able to meet local and individual need

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- Have fun and enjoyment
- Eating well
- Maintaining or more physical and social activity
- Managing health conditions better
- More financially, socially and emotionally resilient

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- Physical health and function optimised
- Positive mental health and wellbeing optimised
- Independence optimised

Outcomes from activities to reach people

Outcomes	Indicators
Appropriate and timely referrals so people get the right information at the right time	**Professionals say** We know what support is available We refer to relevant services and opportunities **Services** There are increasing referrals from X, Y or Z There are increasing care assessments There is increasing use of services **Older people/carers say** I am kept informed and updated of any relevant services I know where to go for information, advice and support I am connected to people who can help me I got the help and information I needed when I needed it I am better informed/supported
Ready and able volunteers	**Volunteers say** I have learnt new skills I have an understanding of challenges faced by older people I know what's happening in my area I get satisfaction from helping others

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Outcomes from activities to inform other services

Outcomes	Indicators
Organisations and groups have better awareness of different groups and communities, have appropriate policies and resources to support service users	**Policies** Our equal opportunities policies and resources are understandable, relevant and up to date Our policies support our practice Our policies are referred to and used Our policies are regularly reviewed and discussed as a workforce/service **Support** We regularly have awareness raising sessions and learning is shared with the team We are connected into specific equality networks to improve practice We actively represent the needs of different interest groups in service design and/or delivery **Process** Our assessment process makes the service accessible Our process is not bureaucratic We are responsive to the needs of protected groups We provide literature for a wide range of protective groups in various formats **Staff abilities** We care about equalities I know how to deal with issues when they arise I feel supported to challenge inappropriate behaviour **Client satisfaction** We have increased satisfaction levels amongst protected groups We are receiving increased referrals from protected groups
Older people and carers trust and use services	**Older people/carers say** I feel welcomed and understood I receive information and support in a way that is appropriate for my needs I trust the service as a good quality service I feel well treated and valued I feel comfortable accessing X information/services I am taking part in activities I feel settled **Service statistics** People come back: attendance and activity records
Older people and carers feel they have a voice and can shape services	**Older people/carers say** I feel informed and knowledgeable about issues that affect me I feel supported and connected to the services I need I feel understood and listened to I can assert my rights I make informed choices about my own health I am consulted/asked my opinion about services that I use

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Physical and social environment is age friendly

Outcomes	Indicators
Older people have warmer, safer, more accessible housing	**Older people/carers say** I can afford to heat my home when I need to I have adaptations in my home which help me to heat my home/make my home safer for me I have taken up energy/efficiency measures I know where to go for help with household items
Older people have affordable and accessible food and leisure options	**Older people/carers say** I can access healthy food I know what food is healthy I know where to get help with eating/heating issues I can afford to eat healthily I have access to activities I enjoy
Older people feel safe at home and in the community	**Older people/carers say** I feel confident going out on my own I feel secure in my own home – see warmer, safer outcome above I feel comfortable living on my own in my own home I know who to call if I need help I have the ability to manage particular household tasks (e.g. cooking/boiling a kettle/vacuuming/taking bins out/cleaning windows) I feel people are looking out for me I have the physical abilities to manage balance in everyday activities such as walking/climbing stairs/getting on and off the bus/reaching to a shelf etc. I am not likely to fall at home
Older people have affordable and accessible transport	**Older people/carers say** I can access transport when I need it I can shop/get to health appointments/meet friends I don't have to wait too long for transport to where I want to go I don't have to walk too far to access transport I have help to get on/in the vehicle I get help out of/into my house I can afford the fare I feel safe The journey is comfortable

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Keeping/more socially connected

Outcomes	Indicators
Older people make/maintain friends and connections	**Older people/carers say** I keep in touch with old friends I talk to my neighbours I feel safe in my community I have made new friends I enjoy spending time socialising I am able to get out I don't feel lonely I have someone to talk to when I want I feel less alone I feel respected and valued I feel understood I feel listened to I have friends who support me in being active I have a peer support network I know people who are in the same/similar position to me **Count** Number of times person takes part in activities/community events Number of times person sees people they don't live with
Carer/cared for improve their relationship	**Older people/carers say** We have time for each other outwith the caring role We can be individuals when doing things together I have family who support me We have things to look forward to I have things to look forward to
Older people contribute to their community	**Older people/carers say** I attend community events I feel involved and included in … (family/friendship groups and communities) I feel valued I am treated with respect I have shared my skills with others I feel that I am giving something back
Older people/carers have stronger support networks in the community	**Assessment of community** Attendance at community groups Variety of groups available Variety of groups attended Use of local amenities (library, pool, shops) Use of local information services Involvement in neighbourhood planning

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Staying positive and in control

Outcomes	Indicators
Older people/carers are more able and willing to address issues	**Older people/carers say** I know how I feel I have a problem with … I know where to find help I feel able to ask for help I'm thinking through the pros and cons of doing … I feel I can do something about … I want to do things for myself I am motivated to do X I have a responsibility to do X to manage my situation
Older people/carers are better placed to take part and make informed choices	**Older people/carers say** I have a voice I feel informed and knowledgeable about issues that affect me I feel supported and connected to the service providers I need I feel understood and listened to I feel able to take preventive actions to help myself or my carer I can assert my rights I make informed choices about my health I'm thinking through the pros and cons of doing …
Older people maintain/increase sense of self worth	**Older people/carers say** I feel useful, valued and listened to I can assert my rights I take pride in how I look I look after myself I feel normal I have been feeling good about myself I have been feeling valued/welcomed/cared for I realise I am not the only one I realise I have the opportunity to change/influence my situation
Older people recognise what they can do (not can't)	**Older people/carers say** I can get out by myself I found out about … I would like to … I will … I'll give it a go I'm thinking through the pros and cons of doing … I can no longer do X but I can do Y
Older people are less anxious/more confident	**Older people/carers say** I enjoy learning and sharing my experiences I feel able to take part in activities I feel valued I feel motivated to spend time on myself/my appearance I feel able to take part in activities I feel confident in expressing my opinion I know how to … I am willing to try new things I have a support network/friends in similar situations

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Keeping/more financially and materially secure

Outcomes	Indicators
Older people maintain/improve financial situation	**Older people/carers say** I know where to go for help with advice about money, debt, welfare benefits I am receiving the right benefits I have claimed a benefit I am better off financially I'm not worried about money
Older people are able to pay for basic commodities, food, fuel and rent	**Older people/carers say** I know where to get help with eating/heating issues I can access healthy food I can afford to heat my home when I need to I can afford to eat healthily I'm able to pay for the other things I need

The system works better for older people and carers

Outcomes	Indicators	
All groups can access and feel able to use services	**Older people/carers say** I know where to go for information, advice and support I know how to get there I have help to get me where I want I make choices about the services and opportunities I want to use I am satisfied with the help I got	**Services say** We have increased satisfaction levels amongst protected groups We are receiving increased referrals from protected groups We are retaining/signposting service users effectively
Organisations and services are better able to meet local and individual need	Services comply with legislation and good practice	
Older person benefits from improved care pathways	**Older person says** I get the support I need when I need it I have more choice over where I live and the care I receive I am connected into relevant services to support my health and wellbeing including psychological, social, practical and spiritual needs	**Service information** Fewer people are admitted to hospital when it is inappropriate More people are cared for and die in a place of their choice
Older person/ carer has a reduced risk of crisis	**Older person/ carer says** I/we have an emergency care plan (details of medication, support needs, daily routines, risks, family and friend contacts) I have a card that informs people that someone vulnerable relies on me I have card that tells people who to contact if I'm unwell I have a future or anticipatory care plan in case my condition deteriorates I have given someone power of attorney	**Service information** Contact details in case of emergency Needs of person clearly detailed
A more open culture around end of life issues	**Older person/ carer says** I can talk to friends and family about dying I have opportunities to discuss and plan decline and death with health professionals I can make plans for future care, whether I want to be resuscitated and after my death	**Service information** I am comfortable talking to someone about their needs as a dying person and their family My organisation supports me in responding to the needs of a dying person and their family (training, time, emotional support)

Healthy and active ageing

Outcomes	Indicators
Older people/carers have fun and enjoyment	**Older people/carers say** I have had fun I've been able to do something I wanted I have had time for my own choices/myself I live the life I want I would do it again
Older people are eating well	**Older people/carers say** I know what food is healthy I know how to prepare healthy food/recipes I have a good appetite I eat well I eat a balanced/healthy diet I make the most of my meals at home I eat the recommended number of fruit and vegetables per day
Older people maintain or engage in more physical and social activity	**Older people/carers say** **Physically** I get out I go on holiday I visit family/friends I go to groups/church etc I live an active life through walking/using stairs/doing gardening I do structured activity like swim/use the gym/exercise at home I do housework/cook/shop I have friends who support me in being active **Mentally** I read/do crosswords etc. I volunteer/help others I plan my own activities/make my own decisions
Older people are managing health conditions better	**Older people/carers say** I attend health appointments I have been to the doctor I haven't needed to go to the doctor I have started walking/taking exercise I am active I am taking my medication I am physically able to do the things I need and want I can do the physical tasks that get me through daily life I have a good appetite I eat well I sleep well I make healthy lifestyle choices I feel able to take preventive actions to help myself or my carer
Older people are more financially, socially and emotionally resilient	**Older people/carers say** I feel rested I feel recharged, able to carry on with caring responsibilities I do not feel anxious I feel in control I focus on the 'can do's' (feel positive) I feel motivated I know where to go for help I feel I can get help if I need it I have mechanisms for coping I am coping

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Reshaping Care for Older People outcomes[1]

Outcomes	Indicators
Physical health and function optimised	**Older people/carers say** I feel fitter I've lost weight (or am better toned) I have energy and am able to do things I can… get on a bus, do household chores etc. My medication needs have reduced My need for medical intervention (physiotherapist, doctor, nurse, occupational therapist) has reduced **Measures of physical ability** Fitness tests Capacity tests
Positive mental health and wellbeing optimised	**Older people/carers say** I've been feeling optimistic about the future I've been feeling close to other people I've been feeling relaxed I've been feeling useful I've been dealing with problems well I've been feeling good about myself I've been feeling physically better For other statements see Warwick-Edinburgh Wellbeing Scale http://www.healthscotland.com/documents/1467.aspx
Independence optimised	**Older people/carers say** I can manage my food shopping I can maintain my home I can take care of myself I don't (always) have to rely on others I feel in control of my life Right now, I don't feel I need to go into a nursing home I am not at risk if I live at home I can use transport to get out and about **Statistics** Number of falls Emergency admissions Admissions to care homes

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1 In the RCOP strategy these are long term outcomes, but for some third sector organisations, they can also be short term outcomes. We offer these measures in that spirit. We do not suggest that these are government measures. Nor do we suggest that you should have to prove that you are achieving these longer term strategic outcomes. You should concentrate on evaluating short term outcomes within your control.

A Stitch in Time?

A Stitch in Time? is a partnership project to support the third sector to collect and present evidence about its contribution to Reshaping Care for Older People (RCOP). The programme runs from April 2013 to March 2015 and focuses on third sector organisations working with older people and carers in Lothian.

A Stitch in Time? publications

A model to explain the third sector contribution to Reshaping Care for Older People

Indicator Bank for third sector outcomes for older people

Focus on third sector interventions that make the physical and social environment more age friendly

Focus on third sector interventions to enable older people to keep or be more socially connected

Focus on third sector interventions that allow older people to stay positive and in control

Focus on third sector interventions to enable older people to keep or be more financially and materially secure

Focus on third sector interventions that make the system work better for older people

Focus on third sector interventions that ensure healthy and active ageing

To accompany this series there are **evaluation case studies** and a number of **evidence reviews**.
To see all publications associated with A Stitch in Time please see **Evaluation Support Scotland** website or the **Joint Improvement Team** website

Evaluation Support Scotland (ESS) works with third sector organisations and funders so that they can measure and report on their impact.

Evaluation Support Scotland

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