Self-Directed Support – Self-Evaluation Tool

How well are we doing?

Introduction

Self-directed Support (SDS) is an approach that seeks to improve outcomes for people by offering greater choice and control over the ways in which social care support is delivered. The aspirations of the National SDS Strategy 2010 – 2020 are of empowered citizens with greater choice and control over their own support through the development of accessible and responsive services and communities. Self-directed Support is a key component of the Scottish Government approach to wider public service reform.

The policy, supported by legislation requires a shift within organisations to more collaborative and co-produced ways of designing and delivering support. There has been significant transformation within organisations over recent years to responsd to the requirements of implementing a self-directed support approach and this journey is still ongoing.

Purpose

This self-evaluation tool aims to provide a framework to help measure how well your organisation is doing with embedding self-directed support into practice. Self-evaluation is a helpful way to check progress, celebrate and evidence what has already been achieved and identify areas you wish to develop further. This tool can be applied at any time to help inform progress. It is intended to complement exsisiting monitoring and evaluation processes.

Self-evaluation, and the outcomes on which it is based, is forward looking. It's about change and improvement, whether gradual, small or significant. It should support us to identify and measure the positive impact for the people with whom we engage with. At the heart of self-evaluation we want to know:

How well are we doing?

How do we know?

What are we going to do now?

This framework is divided into 10 themes that highlight critical factors for successful implementation. The outcomes/indicators used in this tool are not exhaustive but are based on key factors for success which have been identified over time as a good measure of what success looks like and informed through a number of sources, including the experience of supported people, local partnerships and 3rd sector

partners. The tool offers a framework of evaluation which attempts to provide a common language and shared understanding of what successful implementation of Self-directed Support looks like for organisations and most importantly the people who require support.

Using the Self-Evaluation Tool

Organisations can choose to use this tool to help measure where they are in their Self-directed Support journey. Organisations should consider who is best to complete the self-evaluation, when and where the information will go and how it will be used to inform planning for improvement. It is important to acknowledge the evolving nature of Self-directed Support and that this tool is intended to be used as a sense check, to prompt reflection on how well your organisation is doing and which areas you need to prioritise.

Organisations should reflect on the following outcome statements in each section, consider what evidence there is to support current practice and identify what if anything still requires to be done.

You may wish to indentify a person or a small group of individuals to complete the tool who can give a number of perspectives. Working through the tool consider the outcome statements, record evidence of reflection and achievements in the appropriate boxes available, record what still needs to be achieved and what can be done to help support a move toward fully achieving the outcome. Evidence should come from a variety of sources including feeback from supported people.

1. Leaderhip

Our organisation has a clear strategy on self-directed support which is **communicated** and understood at all levels.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)
Self-directed Support is now the **mainstream** way of delivering social care support for all in our area.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

1. Leaderhip

Our organisation supports a **culture of learning** and innovation in how social care support is delivered.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)
Our leaders are confident, informed and committed to the vision for Self-directed Support and actively promote the **culture change** required.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

Staff at all levels have opportunities to helpfully **inform** the organisation of the impact of Self-directed Support.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

2. Access & Information

We have a clear pathway and **referral system** in place for people who may require support.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

We have published **accessible information** which helps people understand the process and timescales for accessing support.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)
Our information explains how **eligibility**, resource allocation and any contributions policy are applied.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

We signpost people to **impartial independent sources of information** i.e. support organisations/advocacy where appropriate.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

3. Assessment & Support Planning

Assessment and support planning are **collaborative** and explore all available **assets** and resources (individual, family and community).	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

Our assessment tools are **outcome focussed** and support conversations which help explore **what's important** "to and for" the supported person	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)
Assessments and support plans are recorded in a **meaningful and accessible** way for the supported person.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

Supported people feel **involved** and listened to and help **co-produce** their assessment	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

4. Systems & Processes

Our systems and processes (including IT) are **simple and effective** and staff report they support outcome based practice.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

Our method of allocating resources and determining the relevant amount is **simple, fair and transparent** for both staff and supported people.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)
Our monitoring and decision making processes are **robust but proportionate** and takes account of any professional assessment.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

We have robust but proportionate arrangements in place to **enable support** to be delivered under each of the 4 options (*consider/evidence each option separately*).	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

5. Compotent & Skilled Workforce

Our staff have a good **understanding of self-directed support** and how it links to wider public service reform.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

Frontline staff are trained and skilled in supporting people to identify their **outcomes** and explore how best these can be achieved.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)
Staff are confident and supported to explore **creative solutions** with supported people which will help achieve outcomes.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

We support **positive risk-taking** which enable people to achieve their outomes whenever possible and appropriate.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)
We provide staff with opportunities for **learning and reflection** on how evolving Self-directed Support implementation impacts on practice.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

6. Innovation-Investment in Prevention/Community Assets

Our organisation actively supports the development of **community solutions** and understands how building community capacity links to self-directed support.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)
Our organisation has a clear strategy for investing in **community responses** to social care and communicates this clearly.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

Our organisation actively encourages **innovative responses** to meet individual outcomes, alongside more traditional responses.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)
Our organisation supports opportunities to develop **preventative/early intervention approaches** which may reduce or delays the need for further support in the future.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

7. Supported Persons' Experience

Supported people are helped to understand the **assessment process**, how it works and supported to consider all available options in a way that makes sense to them.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)
Supported people feel **listened to** and are supported to explore what's important to them.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

Supported people are helped to consider all available **assets/resources** and identify how these can best support them.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)
Supported people know how much **financial resource** is available to them.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

Supported people feel **in control** of how their individual budget is used to meet agreed outcomes.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

8. Choice & Control – Flexible Responsive Support

We collaborate with 3rd sector partners and others to ensure a wide **range of support** is available in our local area for supported people to choose from.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

Support provided under any option is (as much as possible) arranged around the **needs of the supported person** not the needs of the service.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)
Our organisation welcomes **innovative responses** and approaches to meeting outcomes (e.g. micro enterprises, pooled budgets).	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

We are aware of external challenges which **impact on choice** in our local area ie rurality and seek innovative ways to respond to these challenges.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

9. Strategic Commissioning

Self-directed Support is a **central** part of joint strategic commissioning decisions-making taken by our integrated joint board (IJB).	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

Our commissioning arrangements are focussed on **meeting outcomes** for people who require support.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)
Our commissioners work **collaboratively with communities and providers** to identify gaps in current and future provision to help inform what future support arrangements will be required.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

10. Measuring Success

We have systems in place to measure both **qualitative and quantative** information on the impact/benefits of SDS.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)
We capture and communicate evidence of how SDS is **making a difference** and use this to inform practice.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)

We provide opportunity to **reflect on the impact** of SDS with people, providers and the workforce.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)
We actively seek the views of the workforce, providers and people on impact of SDS and use the **learning to improve** experience.	How well are we doing? How close are we to achieving this?
	How do we know? What evidence do we have?
	What would we like to improve? (Key areas for development)