



Guidance for Outcome Measures
Measuring Progress for Children and Young People



Introduction

Falkirk has been using an outcomes based approach in Children's Services since 2012. Following a successful pilot for those with a child protection plan this has now been developed and introduced for all looked after children and young people.

Getting It Right For Every Child provides the framework to ensure that we focus on improving outcomes for children, young people and their families based on our shared understanding of their wellbeing.

The outcomes that we talk about are centred on the individual child and young person's own lived experiences. They should be what's important to them and what matters in their life. These outcomes can be measured. They are also things that we can influence and we can work towards making positive changes.

This guidance has been written to assist practitioners to understand and use a tool to identify outcomes and keep track of progress. It measures 'distance travelled'.

Why should we use Outcome Measures?

- We want to focus on the impact our support has on a child and young person's life. Measuring outcomes helps us answer the key question "So what difference has it made?"
- We want an easy to use, flexible tool which can be applied across children and young people's experiences.
- We want agreed plans to benefit children and young people. Using Outcome Measures it's possible to track the "direction of travel" in a plan towards an identified outcome over a period of time.

What are the outcomes, who sets them and when?

The outcomes are linked to the wellbeing indicators- Safe, Healthy, Achieving, Nurtured, Active, Respected, Responsible and Included. There are 36 outcomes in total. They are listed in Appendix I and anchored against ideas to consider in relation to each outcome.

Some outcomes are deliberately 'broad brush' and others more specific. It's best to choose a small number of outcomes, perhaps even only one, and have meaningful discussions rather than be overwhelmed.

Using Outcome Measures starts with the lead professional considering what the right outcomes are to work on, that best fit the child or young person's circumstances. The chosen outcomes are recorded on the Child/Young Person's Action Plan (Form 4) under the first heading, 'Desired Outcomes'. Everyone involved should be able to understand and agree why these outcomes matter. At first meetings or when circumstances have changed the outcomes can also be changed. It is good practice to discuss outcomes prior to meetings and for paperwork to be shared in advance with children, young people, parents or carers.



Who scores the outcomes and at what point?

Measuring progress comes from discussions and scoring. It is all about clear communication and everyone's involvement.

Feedback has been that scoring is positive. It's meaningful and the number system is intended to motivate and not to demoralise. A 5 point scale is used, starting at 1. The lower numbers equate to a positive direction of travel and there's no nil score. Occasionally there's discussion around 'it's a 3 heading towards 2' which captures improvement. This is not recorded as a half way score. The range sticks from 1 to 5 and the minutes and recording will note the detailed discussion.

The scale is also given in weather symbols and linked to things to consider around responses and intervention. (Appendix I)

It's explained to families that this is a way which allows us to measure and agree where a child or young person's situation is getting better, and the areas which still need to change if things are to improve for the child or young person.

For example:

'So it's important for (child or young person) to be protected from domestic abuse. Let's talk about this. What score would you give this? What would it take to get this score lower?'

'We wanted (child or young person) to be able to express their feeling appropriately and scored this at 3. Has this improved, stayed the same or become worse. What should we do?'

'Making a successful transition between primary and secondary school is something that we think is important. Are the needs here a 3 or a 2. Let's explain why we think this. What would help get this better?'

Outcome scores are useful as they allow practitioners and families to see what direction needs, concerns or risks are going in. They allow solution focussed discussions to explain what would be required to move to another number on the scale and how to address the areas of need, concerns or risks.

In the above example of being protected from domestic abuse, it could be that the child or young person has been accommodated in a placement where there are very good strengths and no concerns around domestic abuse. So how should it be discussed and scored? Is it a I as the child has been accommodated and is not living with domestic abuse any more or is it higher as the plan is to return home if it's safe to do so? It helps to relate scores to the current plan. So if the plan is rehabilitation, the score matches the family's circumstances. This helps evidence that should scores remain 5 the child, young person cannot safely return home, or better if the scores lower, rehabilitation is likely to be successful.

Who does the score relate to?

When the child is in permanent substitute care the score relates to the child's circumstances

When the child has a rehabilitation plan the score relates to the family's circumstances

When the child is living at home the score relates to the child and family's circumstances



What happens at reviews, case conferences and where do outcomes and scores go in the child's plan paperwork?

Planning for children and young people is an integral part of our work. It is an important investment which holds people accountable for actions and these actions are specific and timely. The Child's Action Plan (Form 4) is critical to using Outcome Measures. We have inbuilt processes to review Form 4's so the next steps fit well with our existing child care review system.

Once there is a baseline outcome and score this is updated at the next review, case conference and so it goes on from there. TAC's and core groups are expected to consider Outcome Measures too as its use isn't limited to statutory reviews and case conferences. There have been good examples in frontline practice of the tool being used in direct work with families, described in assessments and discussed at children's hearings.

Example of frontline practice

The lead professional prepares a proposed Form 4 once for the first looked after review or case conference. The chosen outcomes and proposed baseline scores are included under 'Desired Outcomes'

The chairperson of the looked after review or case conference encourages discussion around each outcome and scoring. The Form 4 is produced from the meeting with the chosen outcomes and scores recorded under 'Desired Outcomes'

For the next review or case conference the lead professional submits the most recent Form 4 with the progress column completed. This should summarise whether actions have been met or have helped. It is also used to propose what the score is now under the heading 'Progress'.

The chairperson of the looked after review or case conference will again facilitate discussions around the outcomes and the scoring. What has been agreed will be written in the Form 4 under the heading 'Desired Outcomes'. This part of the Action Plan will show the outcome and score from the meeting.

How can Outcomes Measures data be used?

One of the key purposes of using this tool is that it provides easily accessible information on the outcomes that matter to children and young people and whether progress has been made. Individual Form 4's will hold this information and there is also a process for recording each outcome and score on SWIS. Local administrators will complete this recording on an outcomes screen developed for this purpose. The outcomes and scores can then be analysed and collated more widely to give a picture of what's happening in Falkirk.



Common Questions about using Outcome Measures

How many wellbeing outcomes should be chosen?

There are 36 wellbeing outcomes to reflect different situations for children and young people. Commonly between 1 and 5 are selected as priority outcomes to measure progress against; a greater number will reduce the focus on key areas.

Is there generally agreement about scores both with families and with other **Practitioners?**

The scoring (I-5) structure is seen as effective and clear. At times debates about scoring levels can be constructive, and to work well a balance must be found between the family and practitioners having their say. The chairperson has the final responsibility to decide the score on behalf of the team around the child.

Should Outcome Measures always be used?

The use of the tool is practicable and effective with most families. Occasionally it has not been used for families where there is a learning disability or English is a second language. A judgement has to be made as to whether or not it would be helpful in any given discussion or review.

How does the scoring work when the child or young person is looked after away from home?

If the child or young person's plan is rehabilitation, then the discussion tracks the parents' circumstances as this will inform whether they can safely return home. If the plan is for permanent care then the discussion will focus on measuring the child's circumstances. It will still be a useful tool in determining the success of the permanent placement in meeting the child's needs.

How are outcomes and scores included in the child's plan paperwork?

One or a small number of outcomes are chosen from the list under the wellbeing indicators in Appendix I. The proposed score is included then Form 4 will be updated from the discussion and the word "proposed" will be removed. At each review the new agreed score will go in here. Outcomes can be changed to suit new circumstances.

This describes specific actions to be undertaken not only by professionals but also the child, young person and family members

Be as specific as possible

Desired Outcomes ()	How will we know this has been achieved	Actions required	By whom	Frequency/ Timescale	Progress ()
Safe b) John is living in a safe and secure place Proposed score 4	All items such as glass bottles, medication are put somewhere safe. John has clean bedding and the	Mr Park to engage with his Community Payback Order	Mr Park Ms Smith	Ends 12.3.17/ Fortnightly	Ongoing – Mr Park has started groupwork
c) John is protected from domestic abuse	bathroom is clean. Safety plan followed	Ms Mill to work with Aberlour and follow a routine for managing the home environment	Ms Mill Ms McNab	Weekly	There have been no concerns regarding the condition of the home
Proposed score 4	No new offending behaviour	Ms Mill to contact police if Mr Park approaches her and breaches bail	Ms Mill Police	If there is contact	Not met – there have been concerns regarding a domestic incident
					Outcomes b) proposed score 3 c) proposed score 4
Healthy d) John is able to express his feelings appropriately Proposed score 4	John's worries about his mum have reduced	Children's worker to support John	Ms James John	6 sessions at school starting on 3.5.16	Summer activity sessions have been offered Outcome d) proposed score 3
Achieving b) John makes a successful transition between primary and secondary school	John is getting to school daily on time Good communication	Mr Derek will meet John and agree what supports would be helpful	Mr Derek John	2 weeks	Met – there has been no lateness and John has made new friendships Outcome
Proposed score 3	between school and home	Ms Mill will visit the support base	Ms Mill	4 weeks	b) proposed score 1

This describes targets for success

Name the individual who has responsibility for each action

At the next review the most recent Form 4 is submitted with short updates in this progress column. The proposed new score is included here. The Form 4 is updated and this column becomes blank with the new agreed score appearing under "Desired Outcomes".