

**Organisation Guide** 





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needed

is an invaluable too for our sector

Support is more ystematic and structured

**We have** incorporated it into assessment and three It helps identify

**We can now assist** clients better - we love the Star!

**6** Some people can't understand written reports, but can understand this

The Star is collaborative, rather than something that is done to people

It enables a clear direction for collaborating with a client

### his tool? esstar.org.uk

olistic approach direction to the port

**C** The feedback was overwhelmingly positive and in some cases life changing

272 8765 Developed by Sara Burns and Joy MacKeith of Triangle Consulting **Social Enterprise** 

consulting.co.uk

#### **Published by**

Triangle Consulting Social Enterprise Ltd The Dock Hub Wilbury Villas Hove BN3 6AH United Kingdom

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Edition 1.1 published April 2017

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Please contact info@triangleconsulting.co.uk to enquire about buying a licence and training.

Licences are also available for those wishing to translate the document into other languages.

#### The Outcomes Star™

This Star is part of a family of Outcomes Star tools. Each tool includes a Star Chart, User Guide or Quiz and guidance on implementation and some have visual and other resources. For other versions of the Outcomes Star, good practice and further information see **www.outcomesstar.org.uk**.

#### Acknowledgements

Many people have contributed to the development of the Outcomes Star over its long evolution and we would like to thank all the clients, workers, managers, funders, academics and commissioners who have generously given their time and expertise.

The original commission for an outcome measurement system came from St Mungo's, with financial support from the London Housing Foundation, and Triangle recognises their vital roles in the development of the Outcomes Star. We would also like to acknowledge Kate Graham's important contribution to the development of the suite of Stars, both as a founding partner of Triangle and as co-author of the original Outcomes Star (now called the Outcomes Star for Homelessness).

We would particularly like to thank the following people and organisations for their contribution to this version of the Star:

- United Response
- Partnerships in Care
- The Huntercombe Group
- Tees, Esk and Wear Valleys NHS Foundation Trust
- Dorset Healthcare Foundation Trust
- Derbyshire Community Health Service

- Cheshire and Wirral NHS Trust
- Warrington Borough Council Learning Disability Partnership
- Avon and Wiltshire Mental Health Trust
- Advance UK and KeyRing for initiating and supporting the scoping study.

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## Visit www.outcomesstar.org.uk



## Introduction to the Life Star<sup>™</sup>

The Outcomes Star is a family of tools for supporting and measuring change when working with people. The original version of the Outcomes Star was developed for the homelessness sector and tailored versions are now available for a wide range of client groups including people with a mental health condition, people receiving support with work and learning, teenagers and vulnerable families. These can all be viewed and downloaded at www.outcomesstar.org.uk.

The Life Star is a version of the Outcomes Star for people with learning disabilities. It enables organisations to measure and summarise the changes made by the people using your services. It is also a keywork' tool that can support service users and staff to work together to maximise the service user's independence, choice and wellbeing. It does this by providing them both with a clear picture of the steps on the journey and of their progress.

The Life Star focuses on ten core areas that collaborators have identified as critical in enabling people with a ofte onr learning disability to maximise their independence and well-being:

- 1. Your health
- 2. How you spend your time
- 3. Being responsible
- 4. Being safe
- 5. Money and letters
- 6. Living skills
- 7. Communicating
- 8. Feeling good
- 9. People you know
- 10. Mental health and other conditions.

For each of these core areas, there is a ten-point scale that measures where a person is on their journey towards independence, choice and well-being in that area. The ten points are based on an underlying model of change: an understanding of the steps people go through on their journey to greater independence and wellbeing. We call this model the Journey of Change and it is summarised below.

#### Blue stage (9-10) – it is right for me (maintaining)

The person has as much choice and independence as possible. This means they are managing as much as they can for themselves, with minimal restrictions, while remaining safe and well. The things they cannot manage are being done for them in a way that is sensitive to their preferences.

The person has the right level of support and is using the right type of service. 'a.uk

' In this guide we use the term "keywork" to refer to a professional relationship in which a worker and a service user meet on a regular basis to review the service user's situation, set goals and plan actions to meet these goals. In other settings this may be referred to as "casework". The term "keyworker" refers to the person who takes lead responsibility for assessing, and reviewing a client's support needs and co-ordinating that care. The aim for the service is to **maintain** things at this level so that the person can continue to learn and fulfil more of their potential.

At 9 on the scale they are close to having their independence and well-being maximised but there are still some areas where things could be improved. At 10 they are as independent as they can be and their well-being has been maximised.

#### Green stage (7-8) – it is more how I like it (enabling)

The aim for the service at this stage is to **enable** the person to achieve their full potential.

The service encourages the person to be more active and to learn to self-manage and self-advocate where possible, to the extent that is feasible for them. The person is participating in things, having a go and getting the chance to try things and make mistakes.

If the person is not able to self-manage or do more for themselves, the people around them are learning more about their preferences and organising their life and care so that these preferences are taken into account and they can exercise as much choice as possible over how things are done.

The service is doing everything it can to enable the person to do more for themselves and have a more varied, rewarding life. This may include moving to more suitable accommodation. If the person is doing more for themselves then the service is reducing support where possible or focusing it on new areas and the service they receive is likely to be moving from specialist professional support to more generic support.

At 7 on the scale, the person and staff are just starting to take action to enable greater independence and choice. At 8, significant progress has been made.

## Yellow stage (5-6) – it is OK (stable and managed)

The person feels settled where they are and trusting of the people around them. Things are **stable and managed** but they have not reached their full potential for independence and well-being. This might be because they could do more for themselves; or they could be less restricted and have more freedom; or the way their life is organised could be more responsive to their needs and preferences.

This is the time for the emphasis of service provision to move away from assessment and management to creating the best possible fit between the person's needs, preferences and potential and the service they are receiving.

At point 5 on the scale, no one is thinking about how to maximise the person's independence and well-being. At 6, staff are beginning to think about how to help the person reach their full potential.

### Orange stage (3-4) - it is difficult but I am getting help (stabilising)

Staff are starting to understand what the person needs and how to help them but their needs are still only partially understood. The person accepts help some of the time so some of their needs are met, but there are still lots of ups and downs and one or more of the following are still issues: distress, apathy, neglect or violence.

Substantial specialist input is still needed to design, implement and refine programmes to meet the person's needs and manage their behaviour. The priority for the service at this stage is **stabilising** and managing the person's behaviour.



At 3 on the scale, there is some understanding of their needs and they accept some help. At 4, this is greater.

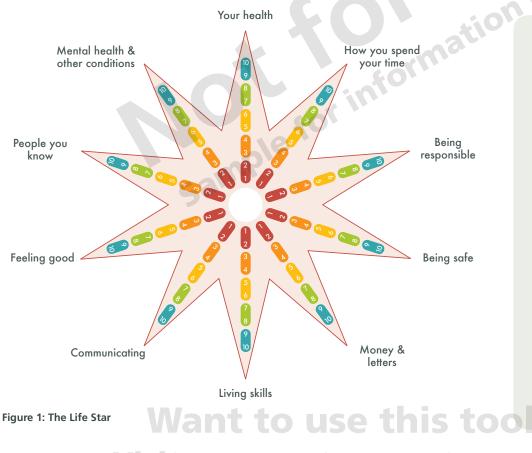
#### Red Stage (1-2) – it is not working (assessing)

The person is not receiving adequate services and they are at risk of harm, or their needs are not well understood by staff, and the person does not go along with the help that is offered.

They may be distressed, violent or verbally aggressive, or they may be passive and apathetic due to a lack of control or insufficient stimulation.

From the service's point of view, the priority at this stage is to **assess** their needs and manage their behaviour – and the service probably needs to draw on specialist, professional input to do this.

At 1 on the scale, they reject all help that is offered. At 2, they accept some help occasionally.



The Life Star can help create a simple, visual representation that can help workers to rapidly identify which areas are going well and where needs are not being addressed.

Psychiatric consultant for learning disabilities, Tees, Esk and Wear Valley NHS Foundation Trust

The Journey of Change clearly identifies the stages of development that the patient needs to reach. It helps both patients and staff to understand that these changes can only take place if they work together.

Compliance team co-ordinator, The Huntercombe Group

### Visit www.outcomesstar.org.uk

# Values and assumptions underpinning the Outcomes Star<sup>™</sup> family of tools

#### New approach

The approach underpinning the Outcomes Star family of tools is, we believe, an original approach to assessment and outcomes measurement. The Star approach can be described as Participatory Assessment and Measurement (PAM)<sup>2</sup> because it draws on and extends Action Research and Participatory Action Research (PAR), both of which place empowerment, collaboration and integration at the core of research methods<sup>3</sup>. In the same way, the Outcomes Star seeks to empower people within a collaborative process of assessment and measurement that is integrated with support work, rather than a separate activity.

#### **Empowerment**

A key emphasis of the Life Star is the importance of empowering people with learning disabilities to have as much choice and control in their life as possible. Underpinning the Life Star is an understanding that, in order for this change to take place in people's lives, two options exist. Either the service provider's role is to support people with the motivation, understanding, beliefs and skills that are needed for them to create that change for themselves, or it is to understand service users' needs, communication and preferences so that their lives are as they choose them to be as much as possible, while keeping them safe and well.

This contrasts with other assessment and outcomes measurement tools that focus on the severity of a defined problem, such as the number of units of alcohol consumed in the case of substance misuse, or on external circumstances, such as whether a person has a job or a home or not. The Outcomes Star approach assumes that these things are important and should be measured but that the picture they give on their own is limited.

This emphasis of the Life Star of empowering people to have choice and control in their life is compatible with person-centred planning and personalisation which emphasise the person's choices in their care. Stages 4 and 5 of the Journey of Change focus on this aspect.

#### Collaboration

When using the Outcomes Star, the worker and the service user assess the service user's needs together or, in some cases, it may be a collaboration between the multidisciplinary team working with the service user and perhaps their carers as well. The different parties each bring their unique knowledge and understanding to bear to create the fullest possible picture of where that person is at that time. The intention is that the assessment emerges through a dialogue between service user and worker, or the multidisciplinary team and carers, if relevant, and this is likely to involve all parties gaining new perspectives and shifting their views.

The Outcomes Star makes the model of change explicit and the information that is collected (the Star reading) is immediately presented back to the service user, or multidisciplinary team, in the form of the completed Star. This makes it possible for all those involved to take an overview together and to reflect on the completed Star as a basis for deciding what action to take.

<sup>&</sup>lt;sup>3</sup> O'Brien, R. (2001) "An Overview of the Methodological Approach of Action Research" in Roberto Richardson (ed.) <u>Theory and Practice of Action Research</u>, Joao Pessoa, Brazil: Universidade Federal da Paraiba (English version)



<sup>&</sup>lt;sup>2</sup> MacKeith, J. (2011) The Development of the Outcomes Star: A Participatory Approach to Assessment and Outcomes Measurement, Journal of Housing, Care and Support, 14, 3, pp 98-106

This contrasts with extractive approaches to assessment and measurement in which one professional, in the role of expert, collects data from the service user and takes that data away to make an assessment on their own. The expert may then decide what course of action is most appropriate and try to persuade the service user, and possibly professionals from other disciplines, that this is the best way forward.

#### Integration

The process of completing the Outcomes Star is an integral part of working with the service user, and the team of people working with them, and it is intended to support as well as measure change. The process of completing the Star, engaging with the model of change and reflecting on the data as presented in the Star can, in and of itself, result in a change of attitude and understanding within the service user and the staff and carers working with them. As a result, the assessment is a part of the intervention. In addition, discussion of where a person is on the Outcomes Star scales or on the Journey of Change naturally leads to discussions about next steps and action planning. This is why it is recommended that the Outcomes Star is used as an integral part of keywork and multidisciplinary working.

This contrasts with traditional approaches in which the collection of data is seen as a separate process to the intervention and may be regarded as intrusive by workers and service users.

### Values and assumptions underpinning the Life Star™

Building on the above, the core value underpinning the Life Star is that people with a learning disability should have the opportunity to play as full a role as citizens as possible and reach their full potential. This means:

- Being recognised and valued as individuals with their own particular needs and preferences
- Being able to control their lives as much as possible
- Being as healthy and active as possible and spending their days in enjoyable and meaningful ways
- Having the opportunity to make a contribution and receive the contributions of others; being allowed and enabled to do things for themselves where they can.

The Life Star is intended to be used collaboratively with service users where their level of ability makes this possible. The materials are designed to be accessible, and workers are encouraged to be flexible and creative when presenting the Star to service users to facilitate collaboration. If this is not practical, the Star is best completed by a number of people who know the service user well, potentially drawing on a number of professionals and also family members.

Where the Star is used directly with service users, professionals can use it flexibly, drawing on their skills and judgement and the understanding and trust they share with the service user. In this guide, there is advice for workers on using the Star tools with service users. These pointers are intended to complement the skills of professionals and are not a fixed set of instructions. The Star should never be used in a way that undermines the effectiveness of the work between the professional and the service user.

Another assumption underlying the Life Star is that positive progress depends both on the efforts of the service user and the efforts of those people helping them. Problems often arise when a person's needs are not understood or met, either by the people working with them or by the person themselves.

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In the early stages of a person's journey, progress relies on professionals determining someone's needs and setting things up to meet those needs as much as possible. In the later stages of the journey, progress towards greater independence is dependent on the severity of the learning disability, or other relevant conditions or disabilities:

- If possible, the person learns more about their own needs and interests and builds a life that works for them
- If this is not possible, the professionals working with them understand and respond to the person's preferences and interests so that, as far as possible, things are organised in a way that respects their choices and their likes and dislikes.

### How the Life Star<sup>™</sup> was developed

The Life Star was developed in collaboration with a wide range of organisations working with people with learning disabilities, including four NHS trusts and both voluntary and independent sector service providers. It was extensively tested by service users, workers and mangers.

Like other versions of the Outcomes Star the methodology was based on Action Research<sup>4</sup> and the Existential Phenomenological (PE) research method<sup>5</sup>. Action Research is a collaborative process of identifying issues, trying out solutions and assessing what works. This phenomenological method places a strong emphasis on understanding the subjective experience of the person or people being researched and the meaning of the nformat experience for them.

#### Scoping the Life Star<sup>™</sup>

The process began with an initial scoping study in September and October 2010. This was carried out by Triangle in collaboration with Advance UK and KeyRing. Based on initial interviews and research into policy frameworks and other relevant documents, Triangle identified scoping questions and hypotheses that were addressed at a consultation event with Advance UK, KeyRing and other potential collaborators. Paradigm, a specialist consultancy working in the field of learning disability, also contributed their experience of the sector.

The scoping report addressed five key questions:

- 1. Was there a need for a learning disability Star? Which clients and service types it would be designed for and where it would sit within existing ways of working?
- 2. What might the end point of the scales and the steps on the journey be?
- 3. What would make an Outcomes Star as accessible as possible to a wide range of people with learning disabilities and encourage their engagement in support planning
- 4. What frameworks and tools had already been developed and how would a Star link with them?
- 5. Who were the possible collaborators for the development of the Star?

This scoping study found that: WWW.Outcomesstar.org.uk

• No existing tool filled the same role that a version of the Outcomes Star would do, and a Star for people with a learning disability should be developed leconsulting.co.uk

\* O'Brien, R. (2001) "An Overview of the Methodological Approach of Action Research" in Roberto Richardson (ed.) Theory and Practice of Action Research, Joao Pessoa, Brazil: Universidade Federal da Paraiba (English) McCall, R. (1983), "Phenomenological Psychology", Madison, The University of Wisconsin Press, Wisconsin



- None of the existing frameworks were quite right in terms of setting out the key outcome areas that the Star should measure
- Triangle should set out to develop one sector-wide version of the Outcomes Star that could be used with – or on behalf of – people across the full range of learning disabilities, rather than creating different versions for different settings or levels of ability. The challenges of developing such a tool were recognised, but most people participating in the study felt these were outweighed by the potential benefits for both the services and the people using them.

The scoping report is available for those who are interested. Contact Triangle for a copy.

There was great amount of interest in developing an Outcomes Star for people with learning disabilities with around 30 organisations expressing an interest. Nine organisations collaborated fully in the development of the Life Star; providing funding, people and expertise during 2011. Those organisations are:

- United Response
- Partnerships in Care
- The Huntercombe Group
- Tees, Esk and Wear Valleys NHS Foundation Trust •
- Dorset Healthcare Foundation Trust •
- Derbyshire Community Health Service •
- Cheshire and Wirral NHS Trust
- mation Warrington Borough Council Learning Disability Partnership
- Avon and Wiltshire Mental Health Trust.

The London Housing Foundation contributed additional funds and carried out follow-up work to explore the relevance of the tool in the homelessness sector.

#### **Developing the Life Star**<sup>™</sup>

The process of developing the Life Star consisted of three main stages.

#### 1) Data gathering

An initial all-day workshop was held in March 2011 with a working group comprising managers, front-line workers and other professionals from the collaborating organisations and from Camphill.

The workshop explored the following key questions that are common to all versions of the Outcomes Star: use

• What are the main areas in which services and service users are seeking to create change? These outcome areas become the points of the Star, outcomesstar, org. UK

- What is the desired end point of the change process? This becomes the end point on the model of change that underpins all the scales
- What model of change describes the core steps that service users take on the journey towards the end point? This is described in a series of steps showing a clearly discernible, qualitative difference between each stage of the journey.

A range of techniques were used in order to draw out participants' experience and knowledge including:

- Using an Outcome Triangle tool to identify the overall aim of services, the specific changes they are trying to bring about and the activities the service carries out to achieve these changes
- Bringing to mind an individual who has undergone a substantial change and identifying the key areas of change for that person
- Structured questioning exercises to draw out the steps, one by one, in each outcome area. The focus with this session is on concreteness – drawing out information about the signs of change in detail.

#### 2) Data analysis and the development of the draft Life Star™

Triangle then compiled all the material gathered at the workshop and the research carried out during the scoping phase and reviewed them to allow the meanings and common strands emerge. Existing material on learning disability, including outcomes frameworks, workshops and course content along with other versions of the Outcomes Star were born in mind, but the intention was to allow the raw data to speak for itself rather than to organise it according to existing models or frameworks. On the basis of this material, a draft version of tor into the Life Star was developed.

#### 3) Consultation and piloting

Through an iterative process of sharing, listening, refining and sharing again, the outcome areas, the Journey of Change and descriptions of the steps towards change in each outcome area were honed until they truly resonated with the service users, support workers and managers participating in the development process. This involved six main steps:

- Testing the first draft with service users four of the collaborating organisations participated in this process; Triangle also consulted a user group convened for this purpose by Your-Say Advocacy near Bristol
- Consulting a steering group consisting of the leads from each of the collaborating organisations on the first draft of the Star at a meeting in April 2011. Specific questions were addressed relating to individual scales. Following this consultation, the draft was revised by Triangle
- Presenting the revised draft to a second workshop of the full working group in May 2011 and gathering their feedback, in light of which further improvements were made
- A four-month pilot, from July 2011 to October 2011, during which workers and service users tested the Star in eight of the nine collaborating organisations (Avon and Wiltshire Partnership NHS Trust were unable to participate)
- A final workshop in November 2011 with the eight pilot organisations at which the results of the pilot were reviewed and participants' experiences were shared. Following the workshop, further revisions to the Life Star were made or 020 7272 8765



• The final draft was circulated to steering group members for comment in advance of publishing the first edition. The last stage involved editing and design.

All these stages ensure the tool is as clear, accessible and user-friendly as possible.

### **Pilot Findings**

#### Highlights from the pilot

A total of 193 service users completed two readings of the pilot Life Star during the four-month pilot period.

- The average overall starting reading on the Star at the beginning of the pilot period was 5.2, indicating that on average people were in the it is OK stage of the Journey of Change
- Service users needed most help at the start with Your Health (4.9), How you Spend your Time (5.0), Feeling Good (4.9) and Being Responsible (5.1)
- The average starting reading for Living Skills was relatively high at 5.9.
- 73% of service users showed improvements within the timeframe of the pilot, showing an increase in their average combined reading for all scales
- Overall progress made was an average of 1.8 across the ten areas of the Star •
- Most change was made on the Communicating scale (2.1)
- Lower levels of change were made in Money and Letters (1.4) and Living Skills (1.5).

These findings varied considerably between organisations as some measured the amount of change during the pilot period and others carried out a current and retrospective reading, looking at change over a longer period of time.

### Pilot feedback from workers and service users

#### Highlights from the feedback on the Star<sup>™</sup> from service users and workers

103 service users completed brief feedback forms on their experience of using the Star:

- 83% said they enjoyed completing the Star with their worker
- 78% said they understood it
- t to use this tool? • 79% said it helped them see what they were good at and where they needed support
- 74% said it showed the progress they had made OMESSTATOTOLUK
- 49% said the pictures helped.

89 feedback forms were received from workers:

- 95% said the Life Star described service users' needs well (28% said very well)
- 80% said it helped them get an overall picture of service users' needs
- 61% said the scales help them to understand what to focus on (27% were unable to answer the guestion and 12% said they did not help)
- 16% said it took too long (26% did not respond one way or the other)
- 60% found the progress people had made encouraging.

## Which people and services is the Life Star<sup>™</sup> suitable for? natior

#### People

The Life Star is suitable to be used with people who have any level of learning disability – from mild to severe. It is suitable for people with complex needs, including learning disability and mental health issues, and those on the autistic spectrum. However, services that are working primarily with people on the autistic spectrum may find the Spectrum Star more suited to their needs. This version of the Outcomes Star has been developed specifically to meet the needs of people on the autistic spectrum and was developed in parallel with the Life Star. It is available at www.outcomesstar.org.uk.

#### **Services**

The Life Star is suitable for use in services that:

- Aim to support people with a learning disability to maximise their independence and well-being
- Are holistic and take an overview of the person's life rather than focusing in-depth on just a few aspects
- Take a keywork approach and work with people over a period of Concount of time
- Have an understanding of the change process for service users that is consistent with the Journey of Change underpinning the Life Star.

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The Life Star provides an assessment tool that is patientfocused and complements our care programme approach process.

Clinical nurse. The Huntercombe Group

Designing the Life Star as a collaborative process has meant that it fits with other systems and processes that we use. Service users have a framework within which they can feedback their views on their progress and journey of recovery.

Consultant, Tees, Esk and Wear Valley NHS **Foundation Trust**  The Star is therefore most likely to be useful in:

- Residential services for people with a learning disability
- Community facilities for people with a learning disability that take a keywork approach to support.

The Star is not likely to be suitable for drop-in services or services providing one-off or short-term advice.

### How the Life Star<sup>™</sup> fits with other tools

#### **Diagnostic tools**

The Life Star is not a diagnostic tool. It is assumed that people will be diagnosed with learning disability before the Star is used.

#### **Keywork tools**

The Life Star is a keywork tool and has been designed to support discussions between staff and service users about their well-being and development. However the Star is a broad, holistic tool that covers a wide range of areas. It may be helpful to draw on other, more specific tools to facilitate the discussion of particular areas such as Living Skills and Your Health, which involve quite a number of different specific skills and knowledge.

#### Assessment and risk assessment tools

In high-risk cases, such as people with a court order or who are detained under the Mental Health Act, specific risk assessment and management plans should be implemented before using the Life Star. The Star can then be used to broaden the areas being looked at and to measure outcomes.

The Life Star may replace a substantial amount of assessment and review paperwork. However, there may be specific information that needs to be collected that the Star does not cover, such as a person's financial situation, their health status, their family context or any current legal issues that need to be addressed. This information still needs to be gathered by the service as part of the wider assessment.

We suggest that agencies using the Life Star identify the core information to a streamlined assessment and information sheet that can be used to record this. This sheet could be used alongside the Star and would use the same headings.

### Contact info@triangleconsulting.co.uk or 020 7272 8765

My advice is to see the implementation of the Outcomes Star as a change management process. It is vital to communicate to keyworkers how it will help them to do their job and that it will help the organisation as a whole to make its case to the outside world. It is also vital to integrate the Star fully into keywork processes and training.

Manager at St Mungo's on the implementation of the Outcomes Star for Homelessness

#### Service quality standards

The Life Star measures the progress of the individual as opposed to the standards of the service. There are a number of tools available that measure quality, including the Reach Standards. We recommend that quality tools use the outcome areas that form the points on the Life Star as a framework so that measurement of service user progress and service progress can be carried out alongside one another. Triangle is exploring the possible development of such a quality framework. Please get in touch with Triangle if you would like to collaborate in this.

#### The Life Star<sup>™</sup> and personalisation

The goal of personalisation is to put the individual at the centre and to enable them to have as much choice and control over their life and the services provided to them as possible. Typically, a needs assessment takes place and a budget is assigned to the person. They are then supported to identify their own personal goals and to decide how to spend their budget to achieve these goals.

The Life Star is compatible with personalisation because it measures people's progress towards the goal of personal choice and control. Stage four of the journey – **it is more how I like it** – specifically asks whether services are oriented around the individual's preferences and identifies this as a key step in the person's journey towards choice and control. However, the Life Star also emphasises maximising independence and is more directive in identifying certain key issues as being important to well-being. For example, in the scale Your Health, having a healthy diet, taking exercise and maintaining a healthy weight are identified as being important issues for workers and service users to discuss and address. These may be issues that the service raises rather than things that the service user identifies as personal goals. So while personalisation focuses primarily on goals that the service user identifies, the Life Star places importance on both service user's goals and issues that the service identifies as being important to the person's well-being.

If the Life Star is being used in a context of personalisation, we recommend that it is completed as part of the process of identifying individual goals. This process is described in detail in part two, section five. Follow-up Star readings can be taken by service providers and also at review meetings. The Life Star encourages the process of looking at the whole person rather than focusing on what we think the person wants or needs.

Group leader, Warrington Borough Council Learning Disability Partnership

## Want to use this tool? Visit www.outcomesstar.org.uk



### Life Star<sup>™</sup> resources

There is a range of resources available to help organisations use the Life Star effectively.

#### The Life Star<sup>™</sup> Chart and Action Plan

The Star Chart and Action Plan includes the Star Chart itself, on which the Star reading is marked, space for notes and a simple action plan that your organisation may also choose to use. It is completed with service users - or by professionals and carers - when using the Life Star as a paper-based system.

There are two versions of the Star Chart, one is illustrated and the other has blank spaces for photos or other images that are meaningful for the individual.

#### The Life Star<sup>™</sup> User Guide

The Life Star User Guide contains concise, user-friendly scales and detailed descriptions for each of the scale points. There is also a brief introduction to the Life Star for service users. The User Guide is essential for all workers using the Life Star and is designed to be accessible for service users who are able to get involved in completing the Star. Again, there are two versions, one with illustrations accompanying the text and another without, to which workers can add photos or other images that are meaningful for the individual, if that is nation helpful, or use unillustrated.

#### The Organisation Guide

The material that follows in this Organisation Guide is intended to support the implementation and use of the Life Star. Part one is for service managers and provides guidance and good practice examples in implementing the Life Star across a service or organisation. Part two presents guidance to support workers in using the Life Star with service users. Sampl

#### Flash cards

The Life Star flash cards are an additional, visual resource that can be used to help explain the outcome areas and Journey of Change to service users.

#### The Life Star<sup>™</sup> Online

This is an intuitive, online version of the Life Star and is available via the Star Online web application. It has a facility for on-screen completion of the Star Chart with service users, incorporating the scales from the User Guide and guidance for workers and service users. Alternatively, the Star Online can be used in conjunction with paper versions of the Star. Workers and service users can complete the Star on paper and then input the reading on the Star Online later. Want to use this tool?

The Star Online is secure and provides a wide range of features allowing organisations to analyse and report on the outcomes data that workers and managers have added to the system, and to compare their outcomes with averages for similar services and client groups. The application is available to organisations using the Life Star for an annual licence fee based on the number of keyworkers and managers using the Star. Alternatively some organisations prefer to incorporate the Star into their own existing client management system. Licences are also available for organisations wishing to do this.

or 020 7272 8765

For more information on the Star Online, or to sign up to use the free trial, go to www.staronline.org.uk. For more information about licences to integrate the Star Online with an existing system contact info@triangleconsulting.co.uk.

#### Incorporating the Life Star<sup>™</sup> into your own paperwork

Some organisations use the Life Star alongside their own paperwork while others prefer to incorporate in their own paperwork. If you wish to take the latter approach, you will require a licence from Triangle. Please contact info@triangleconsulting.co.uk for more details.

#### Outcomes Star<sup>™</sup> website

The Outcomes Star website – **www.outcomesstar.org.uk** – contains all versions of the Stars along with supporting information. Specific areas covered by the website include:

- How the Star was developed
- Research and validation material about the Star
- What people say about using the Star
- The range of training courses provided by Triangle
- ementation urement Support available and good practice on implementation •
- Use of Outcomes Star data for outcome measurement
- Use of the Star as a keywork tool
- Information for commissioners on using the Star.

#### Training

Sample It is essential that workers receive training before using the Life Star. Triangle provides a range of in-house training courses for managers and staff teams and runs a licensed trainer scheme for trainers wanting to cascade training within their organisations. Visit the Outcomes Star website at www.outcomesstar.org.uk, or email training@triangleconsulting.co.uk.

> Want to use this tool? Visit www.outcomesstar.org.uk



## Part 1: Implementing the Life Star<sup>™</sup> in your service or organisation

#### Implementation should be led from the top

Implementing the Life Star can affect the way a service is delivered and managed in a number of ways. For instance, it can:

- Help to change the culture of service delivery from one in which the service users are passive recipients of services to one that aims to empower people and maximise their independence and well-being
- Support multidisciplinary working, providing a shared language for working across the team
- Provide greater clarity about what the service is trying to achieve and the process of change for service users and keyworkers, resulting in more focused keywork
- Change the way that keyworking is carried out, documented and supervised, depending on your existing systems
- Introduce new data collection and therefore the need to consolidate paperwork, avoid duplication, integrate the Star with IT systems and ensure all levels of management have the information they need
- Demonstrate effectiveness and highlight the areas where improvement is needed and with which workers and managers need to engage
- Support accountability to commissioners and provide evidence of effectiveness.

Implementing the Star effectively and achieving the full benefits of using it can therefore take time, continuous attention, and a commitment to follow the process through, addressing issues as they arise. For these reasons, we strongly recommend that the implementation of the Life Star is led from the top of the organisation. Only in this way will the Star receive the profile and backing it requires for developments to be co-ordinated across the organisation. You might find it helpful to set up a steering group made up of managers, professionals with different types of expertise, front-line workers and, in some cases, service users, to oversee the introduction of the Star.

### Visit www.outcomesstar.org.uk

There are eight steps to introducing the Star to your organisation:

- 1. Review your reasons for introducing the Star
- ngleconsulting.co.uk 2. Assess the suitability of the Life Star for your service

The Life Star helps those supporting people with learning disabilities to see how they are doing in providing a service in order to make improvements if they are needed. It is written in a language that service users understand but that the service can use for so much more.

**Consultant** psychiatrist, **Partners in Care** 

- 3. Run a pilot
- 4. Integrate the Star into your ways of working, paperwork and IT
- 5. Train all staff to use the Star
- 6. Ensure quality and consistency in the use of the Star
- 7. Analyse and interpret the data
- 8. Share and act on the learning.

Many organisations find it helpful to have support with the implementation process. Triangle provide a number of implementation support packages that include help with individual aspects of the process, background support, mentoring and staff training, along with Star Online set up assistance and licensing.

To find out more, visit **www.outcomesstar.org.uk**. You can also sign up for the Outcomes Star newsletter via the website or follow @outcomesstar on Twitter

### 1 Review your reasons for introducing the Star<sup>™</sup>

There are a number of reasons why organisations decide to introduce the for in Star.

Internal reasons, for example:

- You want to take an outcomes approach to your work in order to measure success for individual service users, for services and for the organisation as a whole, and to use this information to inform service delivery
- You want change the culture of the service to be more empowering to the people using it, enabling them to have more choice and to do more for themselves.

External reasons:

- To demonstrate the value of the service to funders or commissioners
- Because a funder or commissioner requires that you use the Star as a condition of contract.

#### Visit www.outcomesstar.org.uk

Our experience and research indicates that implementation is smoother and satisfaction is higher when organisations are primarily motivated by internal reasons. Even if you are introducing the Star for external reasons, we recommend that you adopt it in the spirit of learning and service improvement and capitalise on the internal benefits, too.

The Star shows me how far I have come with all aspects of my life.

Service user, **United Response** 

I enjoyed thinking about what I can do for myself and the plans I can make for my future.

Service user. Warrington **Borough Council** Learning Disability **Partnership** 



### **2** Assess the suitability of the Life Star<sup>™</sup> for your service

The Life Star has been designed to be suitable for services whether they work with people with severe, moderate or mild learning disability or a range of abilities, including people who are non-verbal and those able to communicate verbally. It has also been designed to work in both community and residential settings and both secure and non-secure environments. However, there are four questions to ask to assess the suitability of the Life Star for your service:

#### i) Do you take a keywork approach and work with people over a period of time?

The Star has been designed to be used in services that work with people over a period of time and take a careplanning approach. If you only see a service user once or twice for a short period of time – less than six weeks or so – or have a drop-in service with little or no one-to-one contact with people, then the Life Star is probably not suitable for your service.

#### ii) Do you work holistically with service users?

If your service focuses on one or two aspects of a person's life, the Life Star will not be suitable as it is holistic, covering all key areas of the person's life. However, it will work well if you are aiming to help people with all or most of the areas described in the Life Star.

Your service may aim to help people make changes in areas that are not included in the Life Star. If this is the case, you may wish to assess people's progress towards this goal in another way.

## iii) Do you support people's development and growth so they can live as independently as possible without compromising their well-being?

The Life Star Journey of Change underpins the scales for each outcome area. The end point of this journey is reached when a person's well-being and independence are maximised. As such, it is a *relative* end point and any service user could achieve it provided both they and the service are doing all they can to make the best use of support, and the person is enabled to do as much as they can for themselves. At point 5, the person is stable and their basic needs are met – but not in a way that maximises their choice or independence. From point 6, the Journey of Change involves workers exploring and then – from point 7 – trying out a range of ways to enable service users to be more independent and to maximise their choice, while ensuring they stay as safe and well as possible.

## iv) Do all, or most, service users have an ongoing need for support and therefore living independently is not a realistic aim?

Because the Life Star has a relative end point of maximised independence and well-being, it enables services to understand and evidence the changes that are achieved with and for their service users across the full range of abilities and needs. It is therefore an appropriate tool for services working with people for whom independence is not a realistic goal. Want to use this tool?

However, if your service works with people for whom self-reliance is a realistic end point, you may want to consider using the Outcomes Star devised for the homelessness sector, the Spectrum Star (autism) or the Recovery Star (mental health) with those people, or with all service users. These versions of the Star have an absolute end point of self-reliance where a specialist service is no longer needed, and they would be more appropriate to support and evidence progress towards that goal. However, this is an organisational decision and since it is a holistic tool, our advice would be to choose just one Star, taking the Star that best describes

the journey that each service user is about to embark upon and the areas in which you work with them to achieve change.

If you are not sure which version or versions to implement, contact Triangle to discuss how to proceed by emailing **info@triangleconsulting.co.uk** or **call 020 7272 8765**. You can also see the other versions of the Star that are available on the Outcomes Star website – **www.outcomesstar.org.uk**. If no published version fits your service adequately, please contact Triangle to enquire about new versions in development or the possibility of working with us to create a new version to meet your needs. All new versions rely on collaborators contributing the necessary expertise, time and funding for the development process. You can also sign up for the Outcomes Star newsletter via the website or **follow @outcomesstar on Twitter** to hear about forthcoming versions and invitations for individuals and organisations to collaborate on them.

Organisations are not allowed to make changes to any Star tool, including the Life Star, under the terms of copyright for the tool. For more information, please refer to the copyright statements at the beginning of this guide or on the Outcomes Star website.

### 3 Run a pilot

It is advisable to pilot the Life Star in one or more services before rolling it out across your whole organisation. The benefits of running a pilot are that:

- It enables you to test how the tool works for you in practice
- It helps you to answer the practical questions set out on the next page about how to integrate the Star into your ways of working prior to full implementation
- If it goes well, it creates a demonstration project and staff with experience of using the Star who can reassure, motivate and train others
- If there are problems, these can be addressed before the Star is rolled out across the organisation.

Research on the implementation of the Star found that there was resistance from workers within over half of the 25 organisations interviewed. However, in nearly all cases this was quickly overcome. The following are examples of tried and tested options for addressing worker resistance effectively:

 Taking time to allow people to realise the benefits so that keyworkers see that the Star makes their job easier and better – it is not another administrative loop. This can be done through formal training or discussions in team meetings, or both.

or 020 7272 8765

Workers were unsure at first but my approach was to give the Star to those workers likely to be most open and encourage them to just have a go with it in their own way. Almost immediately, positive feedback from those workers and their service users encouraged others to try it too.

Manager, Croftlands Trust referring to the Outcomes Star for Homelessness



- Allowing people to express reservations and ask questions. The Star represents a significantly new • way of working and staff may need to have their concerns and guestions heard and addressed.
- A flexible approach at first. Allowing the more willing and enthusiastic workers to give it a try can work well. If these workers come back to the team with positive experiences, they are more likely to enthuse others. In addition, feedback from the service users they support can provide invaluable evidence of the benefits and popularity of the Star and offset fears that service users will find it lengthy or intrusive.
- **Involving service users in the process.** Involving service users enables them to understand and influence the changes taking place. Their support also adds credibility and legitimacy to the Star within the service.

### 4 Integrate the Star<sup>™</sup> into your ways of working, paperwork and IT

The Star works best as an integral part of the keywork process and recording system, with Star readings taking place when assessment and action planning would normally occur in your service, and Star Charts being stored with other client data. It is important that the Star is fully incorporated into this process so that it does not tion only duplicate other discussions or paperwork, such as needs assessments.

#### When to use the Star<sup>™</sup>

It is up to your organisation to set a policy specifying when workers and service users should complete the Star and how that fits with other processes. This policy will depend on the length and intensity of the service provided, and how guickly service users are anticipated to change. For most types of learning disability service, the following timings are advised:

- First reading a first Life Star reading is completed when a relationship has been developed with the service user and their needs are understood to some extent, preferably at the point when a support plan needs to be developed, and ideally within the first four weeks
- Reviews further Star readings are taken every three, six or nine months, usually at the same time as support plan reviews
- Final reading a final reading is completed on exit from the service, if a service user moves on.

There is a balance between getting to know a service user better before completing a Star and the need to record an accurate start point before too much change happens. If the service user has the ability to complete the Star collaboratively but is not sufficiently settled to engage with the Star in their first month, workers could do a worker-only initial reading to provide a baseline, and complete later Stars in collaboration with the service user. This can be recorded as a worker-only reading on the Star Chart and when entering the data on the Star Online.

For most services for people with a learning disability, it will probably be appropriate to complete the Star at least every six months. However, the frequency can be decided by services and depends on:

• How quickly people change. With service users for whom a considerable amount may happen in as little as six months, readings could be more frequent. In services where change is slow or maintenance is the norm, the gap between Star readings is normally longer.