



Evidence Based Brief

Evaluating Personal Support Services to Individual Clients: Demonstrating a Need for Personal Support-Sensitive Client Outcome Indicators

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Why are outcome-indicators for personal support needed?

Currently, there are no accepted, standardized outcome indicators used to measure the impact of personal support services on individual clients. "Client satisfaction" and, for acute clients, "return to self-care" are often the only outcomes of care that are measured. It is particularly difficult to measure the impact of personal support services for chronic personal support clients who will not be returning to self-care.

After many literature reviews, there was little to no evidence available that provided insight into this area, and in particular, into

personal support-sensitive outcome indicators.

Personal support service provider agencies and personal support workers (PSWs) need to know the impact of their services on individual clients in order to assess effectiveness, continually improve services and develop best practices in personal support care. In nursing, where there is extensive research into standardized collection of nursing-sensitive outcomes, the importance of this information to individual practitioners has been well established.

A report on nursing-sensitive outcomes shows that collecting and identifying outcome measures is beneficial to nursing practice. Nurses reported that the information assisted them in identifying patient severity, identifying



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Demonstrating a Need for Personal Support-Sensitive Client Outcome Indicators

patient needs, selecting nursing interventions and evaluating care (Doran, 2004).

In addition, Community Care Access Centres (CCACs) require home support providers to evaluate services to individual clients but neither personal support providers nor the CCACs have identified appropriate measures other than “client satisfaction” and a broad indicator on the rate of client “goals achieved”. The “goals achieved” indicator is neither clearly defined nor applied in a standardized manner across different agencies/settings. Therefore, the goal achievement information monitored currently is not meaningful. The CCACs and providers also track significant events, which could be seen as a negative outcome indicator i.e., “care provision has caused no harm”.

Impact of Personal Support in Ontario by the hours of service:

Hours of Services:

- 1. Estimated Number of Hours of Personal Support in:**
 - Long-Term Care: 47 million/year
 - Home Care: 19 million/year
 - Community Support: 12 million/year
- 2. Number of Personal Support Workers:**
 - 25,000 Home and Community Care
 - 47,000 Long-Term Care
 - 5,000 Hospitals

Relevant Research from Other Disciplines:

1. Some nursing-sensitive outcome indicators may be transferable to the context of personal support services. The original work by Diane Doran (2003) divides possible nursing-sensitive outcomes into three categories:
 - Functional – physical, psychosocial and self-care management
 - Safety – including falls, control of environmental hazards
 - Perceptual – satisfaction with personal care.
2. The Ministry of Health is supporting extensive research through the Health Outcomes for Better Information and Care (HOBIC) project that has tested a variety of nursing-sensitive clinical outcome indicators across hospital, long-term care, chronic continuing care and home care health sectors (2006). This work has proceeded to the testing and implementation phase. The indicator data being collected includes:
 - functional status,
 - symptom status (pain, nausea, fatigue, dyspnoea),
 - pressure ulcers, and
 - falls.

Demonstrating a Need for Personal Support-Sensitive Client Outcome Indicators

3. The impact of community support and supportive housing on clients/tenants has been researched in Ontario (Lum, Simonne, & Williams, 2005). Some of the indicators arising from that research may be applicable to personal support services generally:

- reduction in caregiver burden,
- mental well-being (peace of mind/stress scale),
- increase in personal perception of health, and
- social connectedness.

4. The interRAI tool for community health assessment may also have some relevance (Hirdes, Poss, Costa, & Jutan, 2008).

5. Finally, there may be some increased mobility or safety measures arising from the work of the Canadian Centre for Activity and Aging, affiliated with the University of Western Ontario, Lawson Health Research Institute, and St. Joseph's Health Care London (The University of Western Ontario, 2009). The Centre has developed a Home Support Exercise Program for seniors with a training manual for home support workers and

volunteers. Client progress can be measured.

Recommendations:

The growth in demand for personal support services will increase exponentially over the next two decades. Canadians aged 65 and older needing assistance will *more than double* between 2006 and 2031. (Keefe & Légaré, 2008).

Shortages in the human resources needed to deliver personal support services are already occurring and demand for these services will continue to increase.

In order to meet the growing demand, health planners and researchers need to recognize the contribution of personal support workers in health care and measure the return on investment in personal support. A range of policies to support PSWs and the implementation of outcome indicators for personal support services would ensure these critical services remain available for those that need it and that we are utilizing the right mix of health care professionals at the right time.

We recommend the Ministry of Health and Long Term Care sponsor the research and development of Outcome Indicators for Personal Support Services.

These Outcome Indicators should be developed through an inter-disciplinary approach with input from all Personal Support employment sectors and led by PSW representatives.



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Personal Support Network of Ontario

The Personal Support Network of Ontario (PSNO) is a division of the Ontario Community Support Association (OCSA) which strives to help personal support service professionals carry out their work more effectively by offering access to information, resources and tools as well as providing opportunities to connect with a network of professionals in the field. PSNO's vision is to build a strong, cooperative personal support service sector where providers, supervisors, trainers and employees are equal contributors to strengthening the profession.

PSNO is the lead sponsor of the PSW Community of Practice (PSW CoP) funded by the Seniors Health Research Transfer Network (SHRTN).

For more information on PSNO and the PSW CoP visit: www.psno.ca

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