

## Defining outcomes

Throughout this workshop we will refer to outcomes, outputs, needs etc. Often, in practice these terms can be confused or used interchangeably. To help avoid this we have provided some definitions of what we mean in each case.

Most importantly we need to first define what we mean by outcomes?

- Outcomes refer to the impacts or end results of services on a person's life
- Outcomes-focused services therefore aim to achieve the aspirations, goals and priorities identified by people
- Outcomes are by definition individualised, as they depend on the priorities and aspirations of individual people

Glendinning, et al (2006)

The definitions given below are all taken from [www.oxforddictionaries.com](http://www.oxforddictionaries.com) unless stated otherwise.

Outcome	The impact or end results the person wishes to achieve (Glendinning et al, 2006) The way a thing turns out; a consequence
Need	Require (something) because it is essential or very important rather than just desirable Circumstances in which something is necessary The state of requiring help, or of lacking basic necessities such as food The reason the person needs support or the thing they need support with (Research in Practice)
Fact	A thing that is known or proved to be true An event or thing known to have happened (Collins) A truth verifiable from experience or observation (Collins)
Opinion	A view or judgement formed about something, not necessarily based on fact or knowledge A statement of advice by an expert on a professional matter
Hearsay	Information received from other people which cannot be substantiated. (Hearsay evidence – the report of another person's words by a witness, which is usually disallowed as evidence in court)
Output	The amount of something produced by a person, machine or industry The action or process of producing something
Input	What is put in, taken in or operated on by any process or system A contribution of work or information

# research in practice

Bear in mind that a need can be factual, or might be opinion, so requires appropriate substantiation. Both can be checked out by, for example, via discussion or observation with the person, their family, friends, or other professionals. With appropriate regard to consent, confidentiality and information sharing.



It is worth noting that the person's desired outcome should link to the eligibility outcomes defined under the *Care Act 2014* but these are two separate things.

Notes:

# research in practice

**Exercise: Part 1. What is an outcome?** Which of the definition (or definitions) best describe each of the statements below?

Statement	Suggested answers (i.e. Need, Outcome, Fact, Input, Output etc.)
I can't open tins, jars or packets or do up buttons and zips without help because my fingers are so bad with arthritis.	
To be able to stay in my home and be able to keep looking after it like I have always done.	
Provision of information on local art and craft clubs and activities.	
Mrs Ali is lonely, she said "I really miss visits from Bavinder. I hardly see anyone now and it's getting me down".	
Margaret was worried about Joan as Joan has appeared very forgetful and disorientated.	
I observed Mrs Nowak making a cup of tea. She hesitated frequently and appeared confused, I felt she was unsure of the order of the tasks.	
Mum loves tomatoes. She often asks for them when. We have salad she eats the tomatoes first.	
Mrs Hope's neighbour said that a friend told him Mrs Hope was out in her nightclothes near the shop last week.	
To understand what is happening now that I have been told I have dementia.	
Supply of a raised toilet seat.	
Dr F has suggested that gentle exercise like walking to the end of the garden and back, would be beneficial to Mr Young.	
I think Mr Young would struggle with making meals himself	

# research in practice

**Exercise Part 2: Below are some example needs with suggestions for the potential impact on wellbeing.**

What outcomes might you expect the people in these scenarios to express? How might you record these?

Need	Impact on wellbeing	Outcomes (person's words)
<p>I can't go to the library, shopping or pop for a coffee anymore without asking for help and waiting until someone can come – I get really upset and angry.</p>	<p>I've got no control over what I can do and when. My family and friends don't understand how frustrated and useless that makes me feel and I get cross with them. I don't like asking for help so go out less and less. [e.g. Dignity, control, relationships, participation in social activities].</p>	
<p>I have COPD and so get tired really easy when doing anything – being clean, having a shave and cleaning my teeth is really important to me but it takes a long time for me to do this and I get exhausted so can't use my shower safely.. My daughter showers me but that is embarrassing for a Dad.</p>	<p>I don't like my personal care being done by my daughter it is really embarrassing and neither of us feel comfortable – she doesn't have time before work to support me and it ends up rushed and I'm exhausted afterwards. I'm only washing once week or twice at the most, but this means often I don't feel clean and I look scruffy. I've never looked scruffy my whole life. I'm feeling really low and have started getting sore with skin problems and infections. [e.g. Dignity, control, physical/mental health].</p>	

# research in practice

Need	Impact on wellbeing	Outcomes (person's words)
<p>I sometimes forget things and I can get mixed up. I've missed some appointments with the doctor and lost some tablets. Jem says I'm not looking after myself because I have lots of out of date food and am not eating enough but I don't agree. He says I'm not safe on my own.</p>	<p>Edith's memory lapses and need for prompts mean that she is not getting enough to eat and drink. This may be compounding her memory problems and putting her at risk. She is finding it difficult to get out and about or to have a routine for my daily life. It is affecting her decision making and safety. [e.g. Abuse/neglect, physical/mental health]</p>	
<p>I've been in residential care since I fell back in July. They said to come here for a while as my home wasn't safe because of the steps and stairs. I don't like it here so stay in my room most of the time – my friends don't visit as it is too far out for them. I want to go home I miss my own things and routine. I think I can manage fine with some help.</p>	<p>Being in the residential home has made Maura withdrawn and isolated – my opinion would be that she may be depressed. She does not engage much with the carers and as a result most of the areas of her life are affected negatively. [e.g. Dignity, control, physical/mental health, suitability of home, relationships, participation]</p>	