National Disability Authority Resource Allocation Feasibility Study

Executive Summary

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# Executive Summary

1. In November 2011, SQW was appointed by the National Disability Authority (NDA) to evaluate the first phase of a feasibility study to examine the use of the Support Intensity Scale® (SIS) and the In Control Resource Allocation System (RAS) support needs assessment instruments in Ireland.

## Background and context

1. The Irish Government has committed to the implementation of individual budgets for a proportion of all service users with a disability, with the aim of ensuring better quality services and outcomes for people with disabilities. The development of individual budgets requires a method for allocating budgets based on an assessment of need. In light of this, a feasibility study was designed to identify the strengths and weaknesses of two resource allocation tools (SIS and RAS).
2. The purpose of the study was to compare the implementation costs, feasibility and acceptability of the two assessment tools. We cannot make any judgement as to which is the better or more accurate assessment tool – only the differences and similarities between them, based on feedback from those involved in the study.
3. A total of 112 adult service users participated in this study by completing both the RAS and SIS questionnaires. They were recruited to ensure coverage of a range of circumstances including age, gender and nature of disability.
4. The RAS and SIS interviews were conducted by a team of 15 interviewers all of whom had extensive experience of working in the provision of supports to people with disabilities, as well as a relevant qualification in this field. They were supported by a team of 21 project liaison officers whose role was to recruit service users to the study, gain their consent and co-ordinate the timetabling of interviews. The project liaison officer was also a key contact point for service users and their families, dealing with any queries or concerns regarding participation in the study.
5. Training in using the two supports needs assessment tools was provided to interviewers. The actual interviews were delivered by individuals that had no prior knowledge of the service user and their support needs. The interviews were timetabled to take place in the course of a single day and the sequencing of interviews (i.e. whether the RAS or SIS was undertaken first or second) was rotated across the sample. Service users had the option of being accompanied by a family member or key worker. Service users with cognitive impairments and intellectual disabilities were routinely joined by a key worker.
6. In evaluating the first phase of the feasibility study to examine the use of the SIS and RAS support needs assessment instruments, we collated and analysed data from six key sources as outlined below:

* **Monitoring sheet** – this was developed by the National Disability Authority and was designed to capture anonymised baseline data on the characteristics of the service users participating in the study, as well as coding the interviewer conducting each assessment, the date of the assessment, and who was present. The National Disability Authority also collated indicative data on the costs of service users’ current support packages.
* **Timesheets** – we designed an online timesheet for interviewers to capture information on the time involved (e.g., training, travel, administration and interview) in administering the two assessment tools. This information was collected in real time by the interviewers.
* **Quick response sheets** – we captured feedback from all participants (interviewers, service users, key workers and family members) immediately after each SIS or RAS interview was completed. We did this in the form of a short quick response sheet (QRS) which comprised a series of mainly closed questions which asked respondents to rate satisfaction with the interview process as well as the assessment tools themselves.
* **RAS/SIS assessment results** - As interviewers completed SIS interviews they entered the results into an online reporting tool (SISOnline). This data was anonymised and service users’ unique identifier codes were included so that information could be linked back to the characteristic data collated in the monitoring sheet. RAS interview results were recorded in paper form by interviewers who then sent this on to the National Disability Authority to be entered onto a central spreadsheet (again service users’ unique identifier codes were included). This data has formed the basis for a comparison of the results of the two assessment tools.
* **Detailed response questionnaire** - in addition to the quick response sheet SQW undertook an online survey once all the interviews were complete, providing a further opportunity for interviewers and project liaison officers to reflect on their overall experiences.
* **Focus group** – with interviewers involved in the feasibility study, giving them an opportunity to reflect upon and share their experiences of the SIS and RAS interviews more generally.

## Key findings

1. **There was a very strong overall correlation between RAS and SIS scores for individual service users**. This was also true when we correlated scores in relation to gender and age. There was a slightly weaker correlation between RAS and SIS scores for some groups of service user (based on type of disability). A National Disability Authority desk-based review of 15 cases where the correlation between service users’ RAS and SIS scores was weaker suggested reasons for this that were not directly related to the tools, but instead highlighted variations in their use:

* **Inconsistencies in the interpretation of questions** – this relates to both support needs assessment tools. For example, there were different interpretations as to whether questions relate to the existing support provided to the service user, or the support they would like or need to receive in order to engage in particular activities.
* **Conflicting responses to questions in the assessment tools –** in one instance explained by different people being present at the two interviews, in another however, the service user highlighted a support need in one interview but not the other.
* **Challenging behaviour –** where a service user has challenging behaviour, they might require constant supervision with all daily activities. They might indicate they can do these tasks without support- which they can – but it does not capture the fact that they need constant supervision while they are doing these tasks (this additional need was not captured as clearly in the RAS).

1. The strength of the correlation between the scores suggests either would give very similar assessment results. Thus, the decision on which assessment tool to rollout nationally is likely to be driven by the acceptability and cost implications.

### Acceptability of the two support needs assessment tools

1. **The acceptability of both support needs assessment tools was good**. Service users were overwhelmingly happy with the length of interviews (despite the SIS taking twice as long to complete), and they did not identify one assessment tool as being better than the other in allowing them to describe support needs. Interviewers had a clear preference for the SIS assessment tool which they perceived to be more comprehensive, but service users and others did not clearly identify a preference for one tool over the other.
2. One area in which service users did differentiate more clearly between the tools (and which was statistically significant) was that service users with a physical disability were more likely to say that there were parts of the SIS questionnaire which did not apply to them, compared to service users with mild to moderate intellectual disabilities. This may well be a reflection of the fact that the SIS needs assessment tool was specifically developed for service users with intellectual and related disabilities.
3. The implication from the findings was that either assessment tool could be rolled out nationally and would be acceptable to service users. As yet, neither tool has been used to undertake resource allocation in Ireland, and the overall acceptability of either tool may be affected in the longer term by the extent to which service users feel the tool results in them being allocated a budget which they regard as acceptable in meeting their support needs.

### Cost implications for rolling out the RAS or SIS support needs assessment tool

1. The indicative rollout cost for the SIS would be more than twice that of the RAS, at just under €2.9m compared with just under €1.3m.[[1]](#footnote-1) These figures do not include costs for appropriate IT systems and associated hardware. They are based on the assumption that 42,000 assessments are completed by 70 interviewers, over a three year period. Whether or not these figures represent a cash cost or an implicit cost would depend on whether the assessment process becomes part of the core duties of existing staff or if staff are hired for the purpose of carrying out assessments. The difference in cost between the SIS and RAS is largely driven by the amount of time needed to complete the SIS assessment (average 125 minutes) versus the RAS assessment (average 55 minutes).

### Summary of the strengths, weakness and similarities between the RAS and SIS Needs Assessment Tools

1. In Table-1 below, we provide a summary of the relative strengths and weaknesses of the two assessment tools, as well as highlighting areas of similarities. This Table builds upon earlier work done by the National Disability Authority [[2]](#footnote-2) (items indicated ‘(NDA)’ in the Table), complemented with key findings from the feasibility study.

**Table-1: Strengths, weaknesses and similarities between RAS/SIS, incorporating earlier work by the National Disability Authority and findings from the feasibility study.**

|  | Strengths | Weaknesses |
| --- | --- | --- |
| Similarities | Satisfaction levels with both assessment tools is high amongst service users  Service users did not differentiate between the two assessment tools with respect to which was better in helping them to say what their support needs are  Service users were happy with the length of both RAS and SIS interviews  There is strong overall correlation between RAS and SIS scores for individual service users. This remains when correlating scores by age and gender  There was a relatively weak correlation between either the RAS or SIS scores and the value of current service user packages.  Both tools identify non-clinical supports[[3]](#footnote-3)  Both tools would incur an annual charge related to usage | |
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| **RAS** | * Developed for use in social care system but flexible enough to extend to other areas such as health care needs (NDA) * Existing track record in being used for resource allocation for people with a range of disabilities (NDA) * The template can been modified to appreciate local configuration of available resources (NDA) * RAS could be adapted for use with children (NDA) * Assessment quick to complete (average 55 minutes – excluding travel) * National rollout costs including training and interviewing time are estimated to be less than half that of the SIS assessment tool | * Psychometric data not publicly available to confirm the reliability and validity of the In Control RAS 5 as a support measure, or to determine the predictive power in determining cost (NDA) * With the focus on resource allocation for social care services it is not clear how this tool would align with Ireland’s needs assessment processes under the Disability Act (NDA) * Service users with mild to moderate intellectual disabilities were the group most likely to score more highly on the SIS when compared with the RAS * Interviewers did not think the RAS was as comprehensive in gathering information on service users’ support needs as the SIS (although service users did not report similar issues) |
| **SIS** | * A comprehensive comparison of support needs measures identified the SIS as the most robust (NDA) * Has widespread use both within the US and internationally (NDA) * Its predictive power to determine costs associated with supports for persons with intellectual disability has been established (NDA) * Version for children is under development (NDA) * Interviewers felt that the SIS was very comprehensive in gathering information in service users’ support needs (although service users did not make this distinction between the two assessment tools). | * Its intended audience is people with intellectual disabilities, as a tool in identifying support needs and resource allocation * As a standardised tool, the SIS cannot be modified to accommodate the Irish context (NDA) * With the focus on resource allocation for social care services it is not clear how this tool would align with Ireland’s needs assessment processes under the Disability Act. (NDA) * Assessments take a relatively long time to completed (average 125 minutes- excluding travel time) * Service uses with a physical disability were significantly more likely to state that parts of the SIS questionnaire were not relevant to them*[[4]](#footnote-4)* and a more general concern was raised by interviewers as to the applicability of all SIS questions for service users with physical disabilities. * Service users with physical disabilities were the group most likely to score more highly on the RAS when compared with the SIS. * National rollout costs based on licensing fees, training and interviews likely to be at least twice as high as RAS |
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Source: SQW/NDA

Issues for consideration in rolling out a support needs assessment tool

1. Based on the findings from the feasibility study we identify a number of issues for consideration for national rollout of a support needs assessment tool. These are discussed below:

* **Refining the tools** – Despite the high correlation, concerns were raised by some interviewers as to the applicability of the SIS tool for service users with physical disabilities. Furthermore, service users with physical difficulties were the most likely to state that questions in the SIS were not relevant to them. This suggests a possible need for some level of adaptation of the tools to best capture the support needs of all users.
* **Training and support for interviewers** – there was demand from interviewers for additional training around how to deal effectively with difficult and/or challenging interview scenarios, irrespective of which tool was rolled out nationally. Furthermore, the review of individual cases where there was less correlation between RAS and SIS scores, suggested that some of this might have resulted from inconsistent interpretation of questions.
* **Independent interviewer role** – interviewers considered the independence of their role as being very important. They suggested that the interviewer should be impartial in the process, and therefore independent of the funding organisation or the service user’s current service provider.
* **Role of key workers/family members in interviewers** – interviewers and project liaison officers identified family members and key workers as important in providing an advocacy role for the service user, as well as providing additional information, but felt that their role in the process should be clarified with them at the start of the interview.

### Moving from assessment scores to resource allocation

1. There was a relatively weak positive correlation between the value of current support packages and both RAS and SIS scores. This could indicate that either the package data might be unsound or that both the RAS and SIS valued needs quite differently to previous assessments. The latter is quite possible given the way allocations have been calculated in the past which we understand has been based on a system of block funding which is not specifically calibrated either to the level of need of service users or to the achievement of quality standards.
2. The weak correlation between both the RAS and SIS scores and the value of service users’ existing support packages will have wider implications for allocating resources through individual budgets. It is likely that if either tool is eventually adopted, this will have implications for the resources allocated to individual users.

* Some service users could see a drop in the value of their existing support packages, while others will see an increase. There is a concern that the scale of change for individuals may be quite large.
* In some cases, existing packages of support were reported to be based on service providers’ perceptions of an individual’s needs. Moving away from a deficit model through systematic resource allocation would alter this and may raise cultural change issues.
* It will be important to manage the resource allocation process effectively, and a transitional arrangement may be needed to limit the extent to which an existing package of services can be adjusted in the short term.

1. **Service providers will also be affected by changing service users budgets** – a move towards a resource allocation driven model could see greater consistency across service providers in relation to the cost of services provided, but this could lead to funding being reduced for some service providers. Again, it will be important to manage the expectations of service providers.
2. **There are also likely to be a series of challenges around allocating an appropriate level of resources based on results from the tool**. In England, the impact of allocation tools is moderated by the need for an indicative budget, which is then subject to change before the final budget is agreed. However, if the agreed final budgets are significantly different from those calculated as indicative, then it will call in to question the extent to which the initial process is robust. The extent of any such variance should be assessed as part of any further testing of the resource allocation process.

1. This includes all training, licencing costs, as well as adaptation costs for the RAS. The total amount has been derived using an average hourly interviewer rate of €30 per hour. [↑](#footnote-ref-1)
2. The Introduction of Individual Budgets as a Resource Allocation System for Disability Services in Ireland,: A Contemporary Developments in Disabilities Services paper (NDA, May 2011) [↑](#footnote-ref-2)
3. They are not designed to predict the need for clinical or therapy supports. Mainstream therapy and clinical supports typically come from separate health services in other jurisdictions. In Ireland, many service providers provide clinical and therapy supports as an intrinsic part of their services. RAS and SIS do not capture these elements in an Irish provider’s cost base. The assessment of need process set out in the Disability Act would include clinical, therapy and disability support services. [↑](#footnote-ref-3)
4. when compared to service users with mild to moderate intellectual disabilities [↑](#footnote-ref-4)