

**EFFECTIVENESS
EVALUATION:
HEALTH AND SOCIAL
CARE**

FINAL REPORT

November 2002

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INTRODUCTION

Following the first budget cycle, the Executive Committee in Northern Ireland (NI) decided that there was a requirement for some fundamental analysis of the need for, and effectiveness of, existing patterns of spending to inform decisions on prioritising expenditure. To this end, the Executive initiated five reviews of the need for and effectiveness of key programmes covering health and social care, housing, education, training, and financial assistance to industry. A sixth review, relating to culture, arts and leisure, was added subsequently.

Terms of Reference

The aim of the Department of Health, Social Services and Public Safety (DHSSPS) is to improve the health and wellbeing of the people of Northern Ireland, and its key health and social care objectives are:

- to develop and promote policies, the efficient, economic and effective implementation of which will lead to good health and well being, a reduction in preventable disease and ill-health, and greater social justice, minimizing inequalities and ensuring greater equality of access to health and social services; and
- to ensure the delivery of effective, high quality health and social care.

Taking account of these aims and objectives, the Executive agreed the following terms of reference for the health and social care Needs and Effectiveness Evaluation:

- a. The overall purpose of the Review is to provide an assessment of the needs for and effectiveness of the resources provided for the HPSS in Northern Ireland. This will ensure a better framework for policy decisions, and their link with budget allocations and the achievement of better value for money with due regard to new TSN and equality of opportunity.
- b. The review will focus on the provision and analysis of information, including comparative material. This will include the identification of any constraints on improved performance, as well as provide the basis for the subsequent development of policies, which more effectively meet current and future needs. It will assist with identifying those services where allocations of resources would offer significantly improved outcomes.
- c. The review will aim to identify and analyse the following:
 - i. the trends in needs in the Health & Social Services in NI relative to other regions in GB;
 - ii. the level of resources available in NI, including comparison with other regions, and the outputs achieved;
 - iii. comparisons of activity levels with GB regions and RoI by service type;

- iv. unit costs and investment per capita comparisons by service type, including trends;
- v. the extent to which differences in unit costs and investment levels between NI and GB reflect differences in need, economies of scale, structural differences, rurality, quality of outcome, the differential contribution of private health care and other factors, with a view to providing inputs to a needs assessment exercise;
- vi. the performance measures to be used to assess the economy, efficiency and effectiveness of service provision.

The Project

3. A Steering Committee, chaired by a senior official from the Department of Finance and Personnel (DFP) and drawing membership from the Department of Health, Social Services and Public Safety (DHSSPS), DFP and the Economic Policy Unit (EPU) within OFMDFM, was set up to oversee the project.

4. Sub-Groups were set up to take forward the work in a number of the detailed areas involving personnel from DHSSPS, HSS Boards, Trusts and Agencies. DFP and EPU were invited to join all sub-groups. DFP, as lead on this Evaluation, contributed to most sub-groups whereas EPU selected key areas of interest for involvement. The sub-groups included:

- Comparative Trends in Population Needs and/or Needs Indicators
- Acute & Maternity Services
- Services for Older People
- Family and Child Care Services
- Mental Health Services
- Family Practitioner Services
- Capital Investment and Infrastructure
- Learning, Physical and Sensory Disability Services
- Improving Population Health and Wellbeing
- Workforce Planning and General Workforce Issues

The work and findings of all the sub-groups are presented in the various Chapters contained within the Report.

5. The Report begins with an overview, setting the policy context, describing how the Service works, the services provided and how the various parts interact. It considers factors impacting on need and issues such as the 'Troubles', highlighting financial and workforce issues and initiatives to improve efficiency and effectiveness. It then looks at ways of assessing a population's need and provides information on improving population health and wellbeing. Subsequent chapters summarise findings on specific services or topics.

6. The Needs and Effectiveness Evaluation cuts across a number of key areas of expenditure, and represents an ambitious and challenging piece of work, with each of the separate studies being significant projects in their own right. The health and social care field is a complex one, and this is shown in the Report.

Comparisons

7. To examine needs and effectiveness for NI involves comparison with countries and regions in Great Britain (GB) and where possible with the Republic of Ireland (RoI). Making valid comparisons with GB is always difficult, because services are delivered in a range of ways and activities and costs can be defined differently in particular areas. For example, England, Scotland and Wales do not use the Programme of Care (POC) definitions, which were created for the integrated HPSS in NI. NI includes dementia cases within the Elderly POC, whereas in other areas they are included with Mental Illness.

8. Personal Social Services (PSS) are provided through local authorities in England, Scotland and Wales. The recording of children, elderly and specific client groups is different in NI from other countries and there are inconsistencies in the way data are collected between local authorities in England. The impact of data quality issues must also be considered. Year-on-year changes in expenditure figures and unit costs have to be treated with caution, as non-recurrent amounts can be allocated in a particular year and there can be some variation in the way overhead costs are distributed across other services.

9. Obviously it is necessary to take account, as far as possible, of differences in population size, the costs of different age groups, and the impact of deprivation on need. None of the above issues makes comparison straightforward.

10. It should be noted that a substantial proportion of the information contained in this report and its Appendices is correct as of the end of March 2002. Since then, only a few minor changes have been made to update references. Although a later year's figures are now available, they have not been updated because of the work involved and the expectation that they would not significantly change the position presented.