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# **‘User-focussed’ – *what does it really mean?***

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The London Housing Foundation launched the Impact through Outcomes Programme in 2001 to help homelessness organisations in London take an outcomes approach to their work. At that point, the focus was on providing evidence of the outcomes of service delivery, both to account to funders and to develop organisational learning. However, as the programme has developed – from individual training, through organisational support to influencing at the policy level – it has become clear that taking an outcomes approach means a lot more than simply evidencing and learning from success.

We have learnt that genuinely engaging in an ‘outcomes approach’ does so much more than establish methods of recording change in service users. When an organisation focuses less on measuring what it does and puts the emphasis instead on what changes as a result, there is a fundamental change in organisational orientation – a paradigm shift from being a service-focussed organisation to a user-focussed one.

## **Most organisations are service focussed**

What does it mean to be service-focussed? It means that the focus of management attention is the activities of the organisation, and the project is described in terms of what is delivered – for example ‘housing support’ ‘drop in facilities’. Performance monitoring focuses on the amount and quality of the delivery. Service audits assess the project against quality standards. Targets are about numbers of service users seen and/or percentage of quality standards met.

Most organisations are service oriented – this is the dominant paradigm. It has many advantages. Service specifications ensure that everyone knows how the service should be delivered and commissioners know what they are buying. They can easily be written down and systems put in place to monitor whether they are met. And it comes naturally to focus on what we are doing and hold people accountable for what they have done.

## **Service focus has one very important disadvantage**

A service focus has one very important disadvantage, which is that attention is not focussed on the ultimate goal of service user change and how best to achieve it.

It is a bit like servicing a car, ensuring that everything is working exactly as it should, counting the number of passengers and miles travelled, but not making sure the car is on the right road, heading to the right destination.

This has lots of knock-on effects. It is difficult to learn and improve if you don’t know when you are succeeding and when you are not. It can be de-motivating to always be travelling (ie focussed on delivery) and never arriving (ie recognising that a goal has been achieved). The case to funders relies on assertions of effectiveness rather than

real evidence - on faith rather than fact. At its worst service users may start to seem peripheral or an inconvenience in an organisation that is highly focussed on itself and what it does.

## **User-focus means more than user satisfaction surveys**

In a user-focussed organisation, in contrast, management attention is focussed on service users and how they and their circumstances are changing. This isn't the same as user satisfaction surveys or user involvement. These can be important tools for listening to service users' perspectives, but on their own they don't ensure that an organisation is user-focussed.

In a user-focussed organisation, projects are specified in terms of the client group and the changes the project aims to help them achieve - for example to enable people who are street homeless to engage with appropriate services and build their motivation to work towards a more stable life-style. Performance monitoring, targets and reports to funders focus on the outcomes achieved by service users rather than the quality of the service delivered. But it isn't just about monitoring and forms....

## **Staff and service users are clear why they are there – and what is expected of them**

A service user orientation means being very clear within staff teams and with service users what changes the project is there to achieve and being focussed on this all the time. Our experience of working with organisations in the homelessness field is that this changes the actual work with service users. Staff and service users are clear why they are there and what is expected of them. This provides a much greater clarity and purposefulness and tools like the Outcomes Star enable client and worker to monitor progress towards their end goals on a regular basis. They also provide data that can be used to assess success. When different projects are compared the data can provide valuable information about what works.

For example, in a study of St Mungos hostels for homeless people it emerged that women made less progress in mixed hostels than in single sex ones and that the most important predictor of positive outcomes was the level of individual service user engagement in hostel activities and outings. The practical implications for improving hostel effectiveness are clear.

Focusing on results has a significant impact on the motivation of staff and service users. Martin Kinsella, Chief Executive of social inclusion charity P3 feels that a focus on outcomes helped to turn P3 around from a failing organisation to a multi award-winning one:

*“The development of the P3 outcomes tool played a major part in the positive transformation of our organisational culture. Staff stopped thinking about what they were going to have for lunch and started being motivated about the work they were doing with service users”*

The table below summarises the way in which a user-focussed organisation differs from a service focussed one.

Service-focussed	User-focussed
Focus on service deliverer	Focus on service user
Focus on how you deliver service	Focus on how service user changes
Focus on quality of services	Focus on effectiveness of services
Emphasis on improving quality	Emphasis on improving effectiveness
Measure amount of what you do	Measure benefit of what you do
Evidence of activities (weak case with funders)	Evidence of results (strong case with funders)
The task is never finished (and so staff get de-motivated)	Service users achieve goals (which is motivating for staff and service users)
Service specified in terms of what is offered	Service specified in terms of service user need and intended outcome

What are the implications of all this for organisations in the homelessness field and beyond?

## User-focussed organisations are tomorrow’s sector leaders

Central government is becoming more interested in the outcomes and impact of services and less interested in process and quality information. This change has already been felt within the voluntary sector but is likely to continue and grow. The shift in focus is here to stay and the sector-leaders of the future will be those organisations that embrace this change early and fully.

However, it’s about much more than an organisation’s monitoring systems and the statistics it reports to funders. These are the tip of the iceberg – the bit that is most visible from the surface. The iceberg is the paradigm shift – from focussing on services to focussing on service users. Organisations that adopt outcomes superficially – adding another monitoring form but remaining service focussed ‘beneath the surface’ may be able to tick the outcomes box but won’t really achieve the benefits of increased focus and motivation and ultimately greater effectiveness. After a while this will start to show and they risk being left behind.

## Change must be driven from the top

This is an issue for Chief Executives and their service managers to get their teeth into. Whilst it may be tempting to delegate the implementation of outcomes lower down the management chain, this will not give it the profile and momentum it needs within the organisation to create a genuine change of orientation. It will not facilitate the kind of cross-departmental working that is necessary to implement all aspects of the change. There is a risk that the initiative will get stuck when it runs into difficulties that have to be addressed in another department. Our experience has been that the organisations that make the change most fully are those in which it is driven from the top.

There are also questions for the homelessness sector as a whole to grapple with here – and for other sub-sectors such as mental health, drugs, learning disabilities etc. How can these sectors, as well as the organisations within them become user-focussed? What needs to be put in place to achieve this? The London Housing Foundation’s experience within the homelessness field indicates that there are two key elements:

1. **A shared outcomes framework:** This would mean agreement on a common way of defining the key outcomes and the development of an agreed model of change – the stages service users typically move through in the journey towards the end goal. The table below briefly describes two such models.

Outcomes Star (developed for homelessness)	Cycle of change (developed for alcohol/drugs field)
<i>Not engaged</i> (with self, with others, with services)	<i>Pre-contemplation</i> Not considering changing drinking/drug use
<i>Wanting change and accepting help</i>	<i>Contemplation</i> Considering change but not taking action
<i>Actively taking part</i> (taking responsibility and initiative in making change happen)	<i>Decision</i> Resolving to change
<i>More self-motivated</i> (reaping the rewards of changing behaviour and building new habits)	<i>Action</i> Changing drinking/drug use
<i>Towards independence</i> (sustaining new habits in the face of challenges so no longer need professional help)	<i>Maintenance</i> Maintaining changes made in the face of challenges

2. Without an outcomes framework, individual organisations may be user-focussed but it would be difficult for them to work together, benchmark findings or take a shared approach with funders because each is speaking its own slightly different outcomes language.
3. **An evidence base:** The burden of proof currently falls on individual projects. Each local authority wants each project to demonstrate that their service is worth funding – that the benefits outweigh the costs. How much more sensible to follow

the health service model of clinical trials to assess the effectiveness of an intervention. Once the trials are over, the value of the drug or other therapy is established and there is no requirement of each individual hospital to demonstrate that a treatment has value. Instead they can simply monitor their own success record and compare with established benchmarks.

If sector leaders could get together to address these two strategic issues what a difference it could make.

## Can we rise to the challenge?

The voluntary sector has traditionally boasted its responsiveness to the service user as one of its key virtues. When voluntary organisations initiate new services and reach groups ignored by the state this is undoubtedly the case. But in the modern era of service contracts and state funding, achieving a genuine service user orientation is a challenge. Is it one that the sector can rise to?

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