



project

maximising the value of survey
data in adult social care

QORU

quality and outcomes
of person-centred care
research unit

MAX TOOLKIT OVERVIEW

The Planning element

This overview presentation is the second in a series of four. We recommend that these overviews are read in order. Please visit the MAX toolkit main page to access the other overview presentations.

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Why develop a planning guide?

Earlier activities and consultations with LA staff indicated that **minor amendments** to existing planning processes can have a number of benefits.



Most participating LAs experienced barriers and did not use data for local service improvements.

Additional guidance could be useful + help ensure that the considerable resources allocated to the surveys are not wasted.

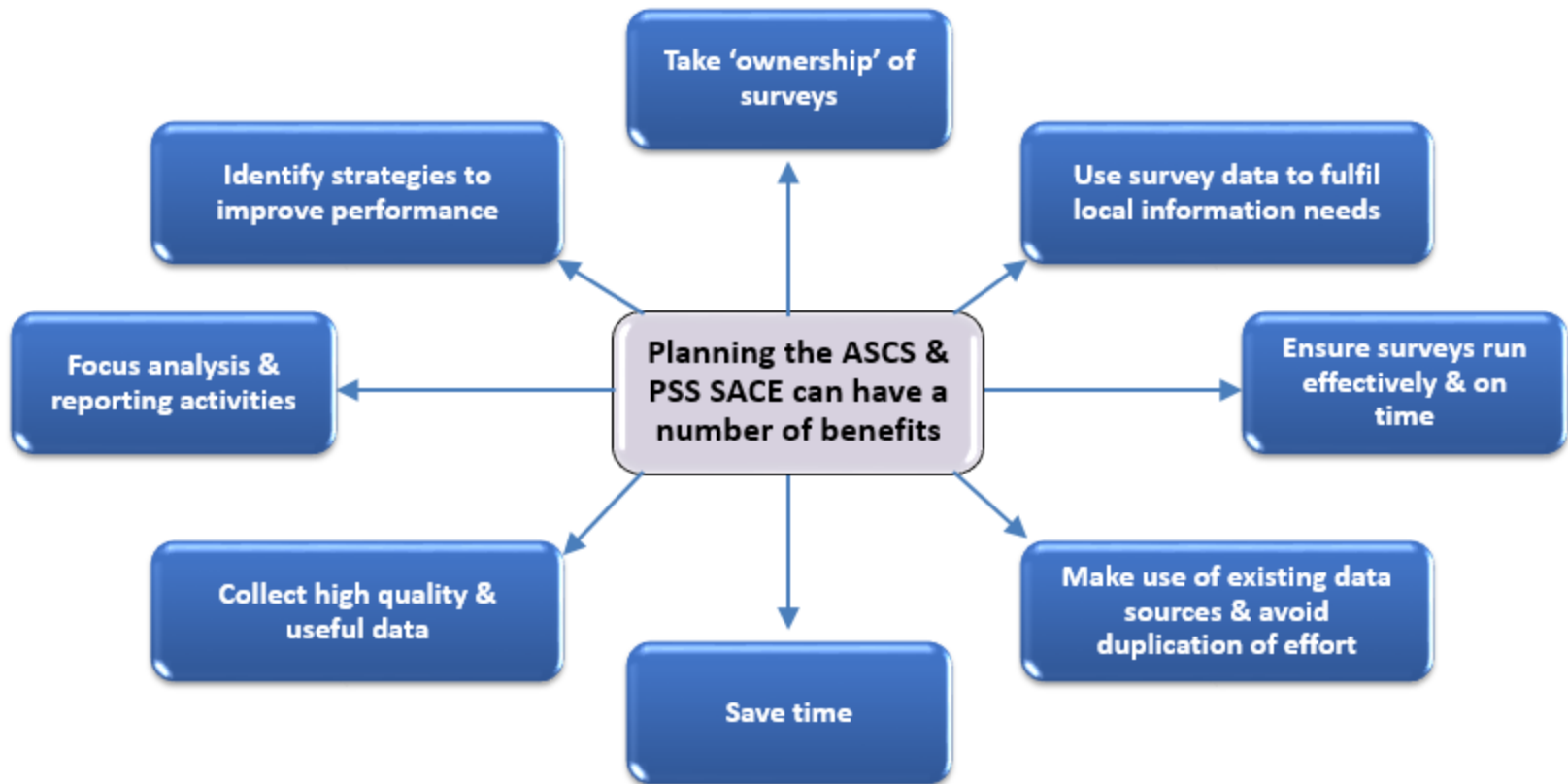
Common barriers to planning

- **Unable to engage with key survey stakeholders** (in particular, potential ‘consumers’ of ASCS and PSS SACE data, such as managers and commissioners); as a result
- **Cannot identify local information needs that can be fulfilled with ASCS and PSS SACE data;**
- **Unable to establish appropriate modifications to the surveys** (e.g. additional questions, sample frame modifications) **to fulfil local information needs.**

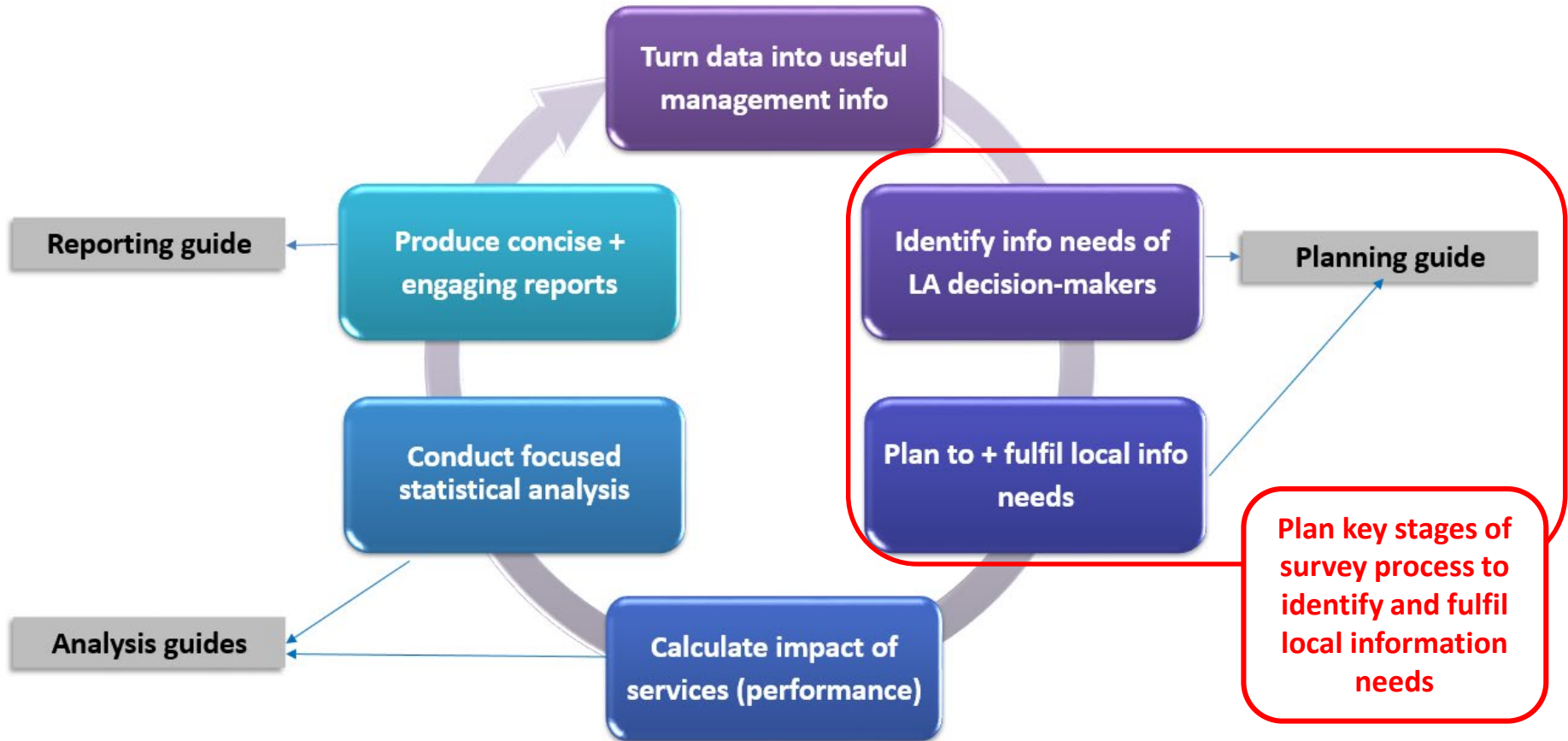
Planning barriers often limit the opportunities to implement strategies (e.g. survey modifications, further analysis) to improve the local relevance and value of ASCS and PSS SACE data for decision-making and service improvements.

The potential benefits of planning

Earlier work with LA staff confirmed that **planning the key stages of the survey process** can have a number of benefits.



The planning element of the MAX toolkit



MAX PLANNING GUIDE covers three main stages of the survey process (so should be read first) and is accompanied by **planning and engagement tools** and **promotional materials**.

Why are engagement tools included?

Earlier work confirmed that engagements with survey stakeholders – in particular, potential ‘consumers’ of ASCS and PSS SACE data (e.g. managers, commissioners, practitioners) – can help to:

- **Overcome reported barriers to collecting and using survey data** (e.g. identifying local info needs);
- **Improve local relevance, value and use of survey data** (e.g. by fulfilling local info needs).

Optional engagement tools are therefore provided in the MAX toolkit to further support LA staff to plan the survey process.

The MAX planning guide

The **MAX PLANNING GUIDE** provides suggestions on how to plan the key stages of the ASCS and PSS SACE survey process.

Focuses on two activities:

1. **Identifying local information needs**; and
2. **Planning to and fulfilling local information needs** (note: actions can be implemented throughout survey process).

The guide also consolidates LA practices + strategies recommended in the wider literature, and includes links to a range of potentially useful **planning + engagement tools**.

What are local information needs?

The information decision-makers and practitioners in your organisation need to inform local practice and service improvements

Are any service users or carers reporting poor outcomes?

What may explain this?

How do we compare to other LAs and the national average?

What may explain any variations?

What factors are associated with good QOL?

What do we need to do to improve reported outcomes?

Why do some of our service users feel unsafe?

Identifying & fulfilling local information needs

Strategy	Stage of survey process		
	Planning	Analysis	Reporting
Step 1: identify local information needs			
Engage with potential 'consumers'	✓	✓	
Conduct a document review	✓	✓	
Refer to general information needs	✓	✓	
Step 2: fulfil local information needs			
Add local questions*	✓		
Modify the sample frame*	✓		
Conduct further analysis		✓	
Draw on supplementary sources of info		✓	
Produce a concise report	* Subject to approval by NHS Digital		

Identifying local information needs

Local information needs are the **data that LA decision-makers and practitioners need to inform local practice and performance improvements** and can often be answered using ASCS or PSS SACE data.

As time + resources available for these activities will vary between organisations, three possible strategies are provided.

Strategy	Description
Engage with stakeholders	Speak to decision-makers (e.g. managers, commissioners) - ideally at a senior management meeting
Conduct a document review	Review previous survey reports, local accounts, corporate plans
Draw on general info needs	Refer to the general needs identified during earlier work with LA staff (good strategy if limited time + opportunity)

Fulfilling local information needs

A number of strategies can be implemented during the survey process but potential options should be considered and planned for (where possible) during the planning stage.

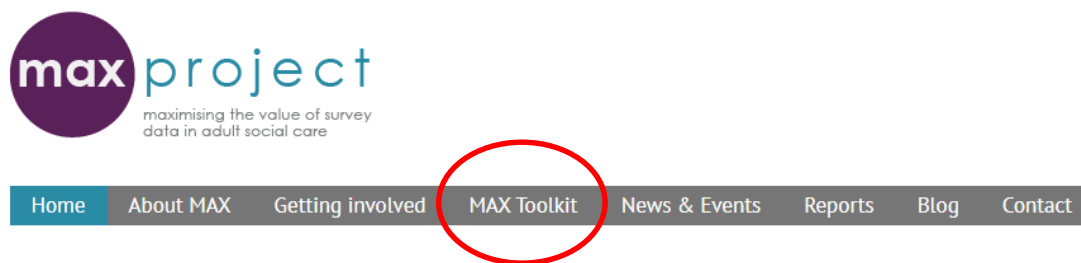
Strategy	Description
Add questions*	Use additional questions + comments boxes to answer local research questions (e.g. <i>why don't you feel safe?</i>)
Plan analysis	Consider how you need to explore data – in particular, which respondent groups are you interested in?
Modify sample frame *	Collect larger samples (if required) of particular groups to support planned analysis
Identify sources of existing data	Explore what other forms of data (e.g. LA records, findings from local research) may support interpretation

* Subject to NHS Digital approval.

Examples of existing LA strategies are included in the MAX toolkit.

Accessing the MAX toolkit

Available via restricted access pages of the project website
<https://www.maxproject.org.uk/>



Alternatively, if you have an account, you can access the MAX toolkit via <https://www.maxproject.org.uk/max-toolkit/zdtgh1974/> [click on the toolkit logo]

Navigating the MAX toolkit

The guides can be accessed via the main toolkit page. The individual tools can be accessed via the guides or the downloads page.

HOW TO USE THE MAX TOOLKIT

The MAX toolkit contains a range of guides, tools and training resources, and is structured around the three stages of the survey process: **planning, analysis and interpretation**, and **reporting**. Links to the relevant elements are provided in the guides detailed below or on the [downloads page](#). An overview of the MAX toolkit can also be accessed [here](#).

Please note that the guides in the MAX toolkit should be read alongside the guidance provided by NHS Digital and are currently in draft form. You will be notified of any updates by email.

1. PLANNING THE KEY STAGES OF THE SURVEY PROCESS

Planning the key stages of the survey process can help you to transform the ASCS & PSS SACE into a large piece of local research.

The **MAX PLANNING GUIDE** summarises a range of strategies that you can use to identify and fulfil the information needs of the decision-makers and practitioners within your organisation using survey data and other existing resources.

Further information about the planning element of the MAX toolkit can be found in the [MAX planning overview](#) and the [importance of planning and stakeholder engagement webinar presentation](#).

2. CONDUCTING FOCUSED EXPLORATORY & FURTHER ANALYSIS

Focused analysis can help you to translate ASCS & PSS SACE data into meaningful results that can guide local service and performance improvement activities.

Overview of the MAX toolkit elements

Further information about the three other elements of the MAX toolkit have been developed and are included in the MAX toolkit:

- Analysis and interpretation overview
- Reporting overview

Pre-recorded presentations focusing on individual analysis tools, conducting further analysis and measuring impact are also provided on the restricted access pages of the MAX toolkit. Registration is required to access these.

Further Information

To find out more about the MAX project, download the reports on earlier research activities or access the MAX toolkit:

Website: www.maxproject.org.uk

Email: maxproject@kent.ac.uk



Disclaimer

Department of Health and Social Care disclaimer: The MAX toolkit and website are based on independent research commissioned and funded by the NIHR Policy Research Programme (Maximising the value of survey data in adult social care (MAX) project and the MAX toolkit implementation and impact project). The views expressed on the website and in publications are those of the author(s) and not necessarily those of the NHS, the NIHR, the Department of Health and Social Care or its arm's length bodies or other government departments.