

TEMPLATE N°1: IDENTIFICATION OF GOOD PRACTICES BY HOST ORGANISATION

Template N°1 facilitates the description and identification of the good practices that will be presented by the host organizations during the TRIADE project. These good practices should endorse the main aim of the project, i.e. the good practice(s) focus on the enhancement of knowledge, skills, competences or attitudes of formal and informal caregivers for a more inclusive and community based care system.

Template N°1 should be completed for each good practice that will be presented and/or shown by the host organizations. PLEASE, SEND THESE TEMPLATES TO ALL PARTNERS AT LEAST 2 MONTHS BEFORE THE ACUAL VISITS!

NAME OF HOST ORGANISATION/INSTITUTION	MUNICIPALITY OF ROTTERDAM
TITLE OF THE GOOD PRACTICE	The Self-Sufficiency Matrix (SSM)
GENERAL OBJECTIVE OF THE GOOD PRACTICE	The Self-Sufficiency Matrix (SSM) is a tool that enables practitioners, policymakers and researchers in public healthcare, social services and related work fields to assess the degree of self-sufficiency of their clients simply and comprehensively.
MOTIVATION FOR CHOOSING THIS GOOD PRACTICE	Complex concept, with a simple assessment. Easy to adopt in other countries.
SHORT DESCRIPTION OF THE GOOD PRACTICE (+/- 500 WORDS)	<p>The Self-Sufficiency Matrix – Netherlands versions (SSM-NL) has 11 domains for which the degree of self-sufficiency is assessed. These domains are closely interlinked, as they all relate to daily life, but they are defined in such a manner that they do not overlap at all or only slightly. The domains of the SSM are: Income, Day-time activities, Housing, Domestic relations, Mental health, Physical health, Addiction, Daily life skills, Social network, Community participation, and Judiciary. These are the essential and non-surplus areas that determine the effectiveness, productivity and quality of life for every adult (in Dutch society).</p> <p>The 11 domains are set out in rows, tiled horizontally. The five answer options are in columns, tiled vertically. This creates a matrix with 55 cells. Criteria have been prepared for every cell that further specify the answer options for the domain under assessment and support the assessor in rating the self-sufficiency for that domain. These criteria help the user to understand what the developers mean by ‘not self-sufficient’ for the domain Income (‘inadequate income and/or spontaneous or inappropriate spending, rising debt’).</p> <p>The eventual rating consists of 11 times a score between 1 and 5. The SSM enables the assessor to obtain a relatively simple and comprehensive overview of a complex concept with various and wide-ranging aspects that play an important role in the degree to which a person can lead a productive and good-quality life - self-sufficiency.</p>
DESCRIPTION OF TARGET GROUP	People who benefit from social services can be assessed with the SSM. The assessment can be used in various ways
MEANS/MEHODES OR TOOLS USED	<p>Completing the SSM can take place following an intake, progress or exit interview. The interview topics need to cover all the domains of the Self-Sufficiency Matrix.</p> <p>The assessment can be used in various ways</p> <p>Screening</p> <p>A tool to chart the self-sufficiency of the individual client</p>

The client is rated once with the SSM; the score provides insight into the self-sufficiency.

Progress and development

A tool to determine the development of an individual client

The SSM is used at least twice for a client at different times. The difference between two scores provides insight into the progress and development of the client.

Allocation

A tool to assign an individual client to an intervention

The client is rated once with the SSM. If the score complies with a criterion that was set for a specific intervention, the client can be assigned to that intervention.

Set treatment targets

A tool to set treatment targets for the individual client.

The SSM is used once with a client. The practitioner determines the probable achievable self-sufficiency and expresses this as a virtual score for a future measurement moment.

Routine Outcome Monitoring (rom)

A tool to monitor the results and outcome of an intervention.

The SSM is used at least twice for a group of clients that is assigned to a certain intervention. The effect of the intervention on the group can be evaluated by comparing group scores over time.

Guidelines for interventions

A tool to set targets for an intervention.

Care providers can express the anticipated results of an intervention in (difference) scores on the SSM. Performance agreements with financiers of care can be specified and standardized in this manner.

SKILLS INVOLVED FOR THE CAREGIVERS

Caregivers should have a good understanding of self-sufficiency as outcome. Caregivers who use the SSM are recommended to practice its use a few times. There are strong indications that this improves the reliable use of the SSM.

ATTITUDES INVOLVED FOR THE CAREGIVERS

None, the SSM is not meant to influence the attitude of caregivers (not directly)

RESOURCES NEEDED

No special resources needed

NOTES

We use the following definition of self-sufficiency:

Self-sufficiency is the ability to carry out activities of daily living independently. These activities of daily living pertain to different domains. For example, daily life requires actions to provide for an income, to remain physically and mentally healthy or to maintain a supportive social network.

Activities of living also include organizing the right help when a need arises that cannot be met by the person themselves. For example going to the GP in time in case of illness, or asking professional advice with completing a tax return.

The degree of self-sufficiency is therefore an outcome of personal characteristics, such as skills, personality and motivation and environmental characteristics, such as culture, economy and infrastructure that enable a person to provide for their own basic life needs to a greater or lesser extent.