



# Agenda SSM-D

14:00 - Introduction

14:15 - Training part 1

15:30 - Break

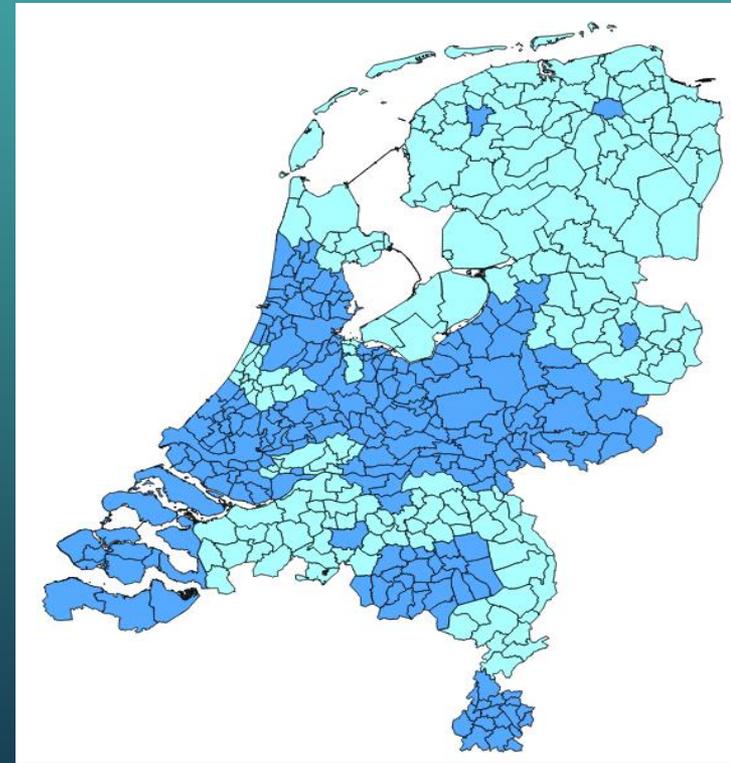
16:00 - Training part 2

→ Implementation: some points of attention



# SSM-D in The Netherlands

- The SSM-D is implemented in a growing number of institutions.
- Public health services, Mental health /Substance Abuse care, Youth care, and Social care
- Applied in screening, treatmentplanning, monitoring, care allocation and -coördination





# SSM-D & The Street Support Project

*“Does the project do what it is supposed to do?”*

- Using the SSM-D to monitor expected changes in outcomes related to the Street Support Project

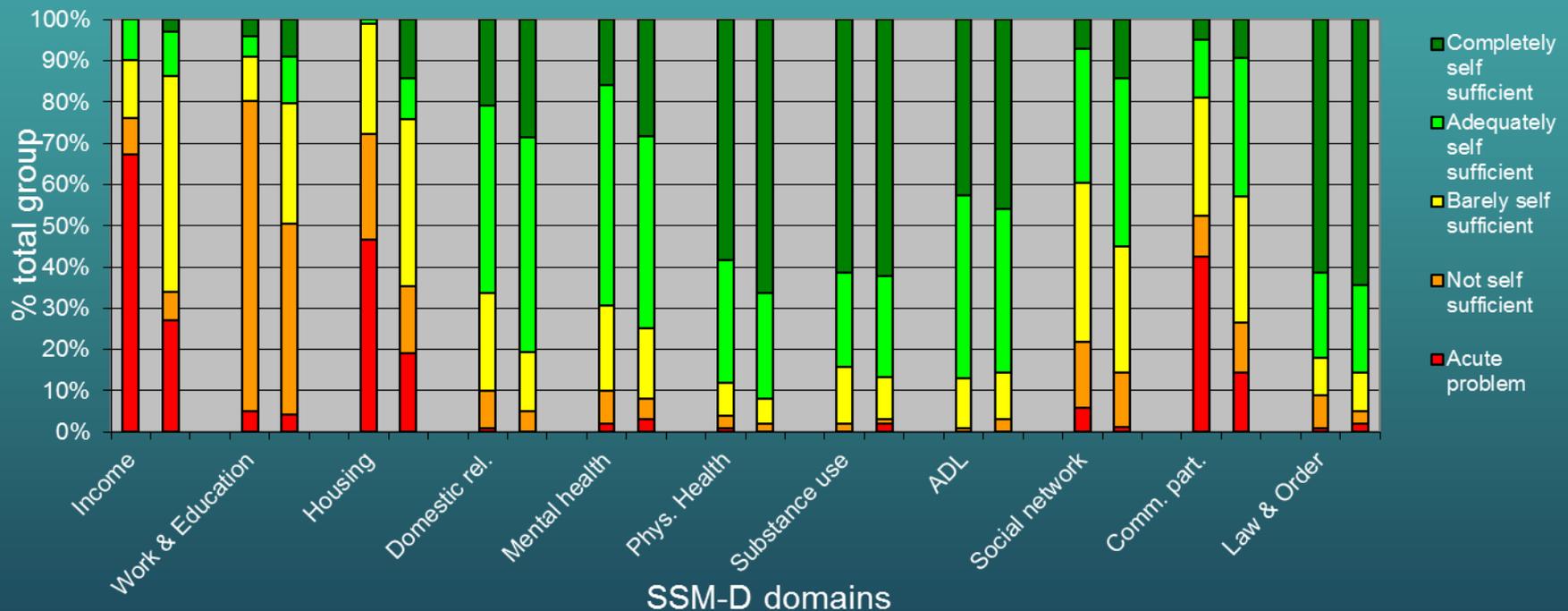


Less nuisance?  
More social  
inclusion? Higher  
degree of  
employability? – Less  
substance use? ... ?



# SSM-D: An example

SSM-D scores at intake (T0) and last contact (T1)



- 100 vulnerable clients were offered a social work intervention focused at stabilisation of socioeconomic problems
- Trained SW's scored the SSM-D at the first and last meeting with the client



# SSM-D: obtaining “good” data

- Prerequisites to obtain reliable and useful data with the SSM:

- *(proper study design)*
- **Proper rating**
- Proper registration
- Proper analyses
- Proper interpretation



**Well  
informed  
raters**

Quality control

Certified  
trainers

**Proper  
training**

*Lets get started!*



# Self-Sufficiency Matrix - Dutch (SSM-D)

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Comprehensive screening of functioning of vulnerable clients



# Self-sufficiency

## Self-sufficiency is:

The realization of an acceptable level of functioning with regard to important life domains, organizing adequate help and support when a need develops that a person can not fulfill autonomously



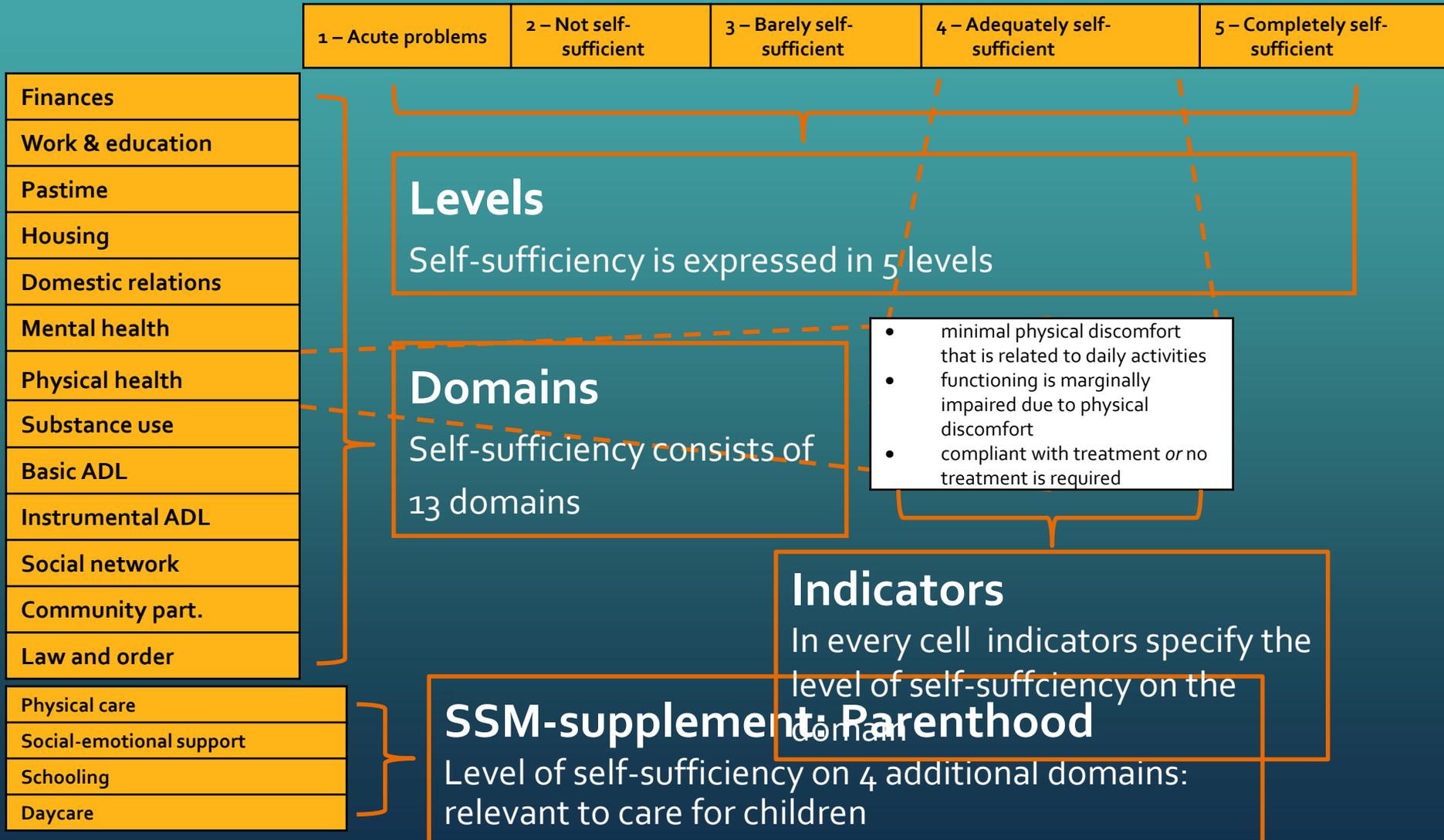
## The Self-sufficiency-Matrix measures:

The level of self-sufficiency at a certain point in time: this is an outcome (result) of personal attributes and environmental attributes such as skills, personality, motivation, culture, economic situation, infrastructure, and formal and informal support at that point in time.

All these (interacting) attributes have enabled the person to reach a certain level of functioning. The SSM-D is a measure of this level of functioning



# The Self-sufficiency-Matrix

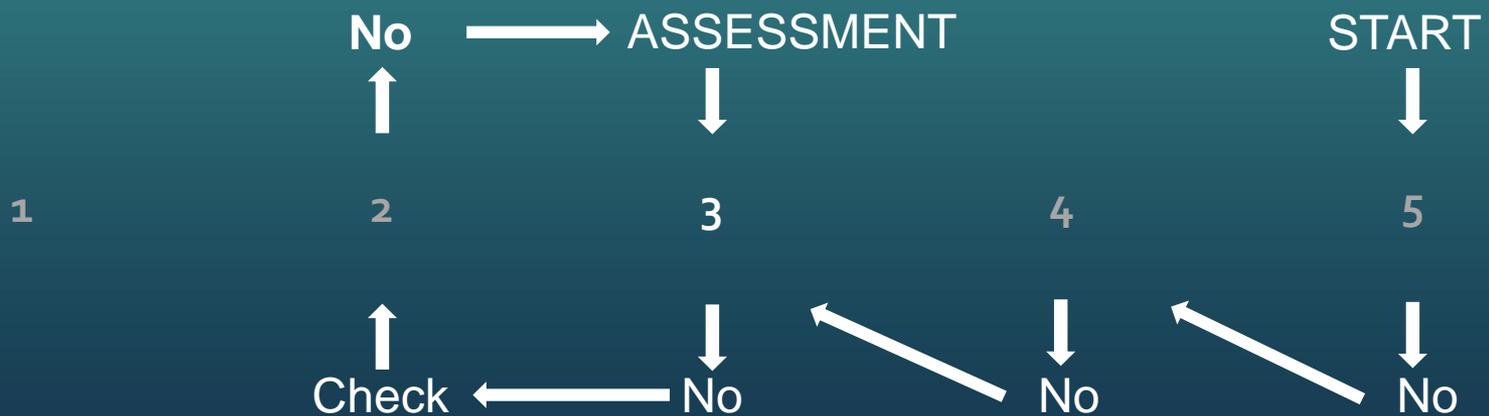




# Scoring the SSM-D

Indicators within each cel define the level of self-sufficiency on that domain

1	2	3	4	5
Acute problems. The situation is untenable.	Not self- sufficient. Situation will deteriorate if there is no intervention.	Barely self- sufficient. Situation is stable, but barely adequate	The client is adequately self- sufficient.	Completely self- sufficient. Self-sufficiency is above average.





# SSM-D - Quick Exercise

Which domain en what score corresponds best with the following characteristics?

3rd YEAR STUDENT OF SOCIOLOGY

*Work & Education (5)*

LIVING ALONE

*Domestic relations (4)*

MISSED COURT DATE INDICATED ON SUMMON FOR OUTSTANDING FINES

*Law and order (1)*

REGULARLY INJECTS WITH INSULIN DUE TO DIABETES, OTHERWISE HEALTHY

*Physical health (4)*

SMOKES 15 CIGARETS PER DAY , THIS HAS NO VISIBLE CONSEQUENCES (YET)

*Substance use (4)*

MAKES ENDS MEET WITH A BASIC STATE PENSION

*Finances (4)*

CHAIRMAN OF HIKING CLUB 'HAPPY FEET'

*Community participation (5)*



# What information do you need?

## Finances

- Level and source of income
- Dynamics and management of debts

## Work & Education

- Type/ level of work and education
- Course of work- and education trajectories
- Work seeking activities

## Pastime

- Pleasurable / useful activities
- Structure in day
- Day-night rhythm

## Housing

- Stability (stay)
- Safety (health risks)
- Adequacy
- Autonomy



# What information do you need?

## Domestic relations

- Composition of the household
- Quality of domestic relations

## Mental health

- Mental illness/disorder / symptoms
- Influence on functioning
- Compliance to treatment

## Physical health

- Physical illness / symptoms
- Influence on functioning
- Compliance to treatment

## Substance use

- Use and dependence on substances
- Influence on functioning
- Compliance to treatment



# What information do you need?

## Basic ADL

- Execution of basic ADL tasks (eating, drinking, bathing, going to toilet)
- Use of (in)formal support or assistive devices for basic ADL tasks

## Instrumental ADL

- Execution of basic ADL tasks (cooking, cleaning, medication management, administration, traveling)
- Use of (in)formal support or assistive devices for instrumental ADL tasks

## Social network

- Contact with family (outside the household)
- Supporting contacts
- Negative social connections

## Community participation

- Participating in community activities (social club, association, council, committee)
- Other activities (care, nuisance)

## Law and order

- Police contacts (frequency / year)
- Status of judicial affairs



# SSM-D Additional information

## SSM-D – Context factors

*Factors to take into account for improving self-sufficiency*

- Healthcare Insurance
- Cognitive ability
- Language proficiency
- Digital skills
- Responsibility for children
- Exempt from participation and work
- Traveling to destinations?

## Self-sufficient with support?

*For each domain can be stated whether (in) formal support is offered*

- Formal or informal



# SSM-D - Exercise

## Instructions

- Read the case
- Assess the self-sufficiency on each SSM-D domain
- Use the scoring form to register your assessment

## General advice for assessment with the SSM-D

- Only use the information you have
- Assess current functioning: how is it **NOW?**
- Start by assuming the highest level of self-sufficiency (5)
- Use the SSM-D manual for explanations and definitions





# SSM-D Applications

- ***Screening***  
Met de ZRM kan een professional relatief eenvoudig een volledig en gestandaardiseerd overzicht krijgen van het functioneren van een persoon
- ***Decision support Care Allocationwijzing en –prioritering***  
De ZRM kan de beslissing van de professional ondersteunen om een persoon toe te wijzen aan een zorginterventie, of in te zetten op specifieke problematiek
- ***Monitoring and evaluation of progress***  
De professional kan de ZRM gebruiken om de ontwikkeling van een persoon te volgen, en de voortgang van een persoon te evalueren
- ***Evaluation of treatment effect***  
De ZRM lijkt te kunnen worden gebruikt als uitkomstmaat in de evaluatie van effect van behandeling of interventie
- ***Management and ‘tuning’ between multi-diciplined supply networks***  
De ZRM draagt bij aan het spreken van ‘één taal’ in een team met hulpverleners met diverse achtergronden



# Points of attention

## How to safeguard quality of data collection?

- *(proper study design)*
  - **Proper rating**
  - Proper registration
  - Proper analyses
  - *(Proper interpretation)*
- Support from SSM-D research team?
- Training by certified trainer
  - Help with translating context specific indicators
  - Advice / platform to register
  - Analyses of data (reference groups ZOOM-database)
  - Reporting



# Questions or remarks?

About training and use of the SSM-D

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About research and development

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SSM-D Website

(mostly in Dutch right now)

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