### How to switch to My Wellness Star™

# Guidance for organisations who piloted the Well-being Star (Healthy Living)

Thank you very much for participating in the pilot of this Star. Your feedback was valuable in informing changes made in the improved published version – renamed 'My Wellness Star'.

We encourage you to switch to the published version as soon as possible and this document explains how to go about this as well as the main differences between the pilot and final versions.

The pilot version will remain available on Star Online until the end of 2027 to enable flexibility in switching over.

### 1 What has changed in the final version of My Wellness Star?

For the published version we have created 'talking points' which add more detail on the issues that may be relevant to discuss when covering each outcome area with a client. These can be found in the *Guidance for Practitioners* document.

The main differences to the outcome areas are the splitting of the **Healthy lifestyle** area into three separate areas and a new **Daily living** area, which incorporates what had been covered in **Where I live**. Some of the outcome area names were also changed as shown below:

Pilot version outcome areas	Published version outcome areas
1 Healthy lifestyle (food, exercise, sleep)	1 My food and drink
	2 Getting moving
	3 My sleep
2 My health	4 My physical health
3 How I feel	5 How I feel
4 Unhealthy habits	10 Unhealthy habits
5 My finances	9 My money
6 Social connection	6 Feeling connected
7 How I spend my time	7 How I spend my time
8 Where I live	8 Daily living

Further information on the changes is provided here – divided into changes that do and do not significantly affect the meaning of the scales:

## Changes that affect the comparability of the data from each version ('structural changes')

The components of Healthy lifestyle area were split into three outcome areas
(Getting moving, My food and drink and My sleep) – this was due to the
importance of capturing needs/changes in each individual aspect and the possible
differences in how clients are doing in each aspect

- Having a suitable home and looking after it, which was previously covered in Where
   I live, was moved to Daily living alongside shopping and personal care
- The Unhealthy habits area was expanded from drinking, drugs, smoking and sexual health to include vaping, gambling, gaming, online shopping and excessive screen time – and any other habits 'that are unhealthy for you'. The talking points also went beyond sexual health to cover 'anything else about your sex life that could be a risk to your health and wellbeing'
- Feeling angry was added to the How I feel scale.

## Changes that do not affect the comparability of the data from each version ('non-structural changes')

- In the **Getting moving** area, more emphasis was given to physical activity in daily life in addition to formal exercise as well as to activity 'that is right for you'. Barriers that can make physical activity harder were also added to the talking points
- The wording in the My food and drink talking points and scale was changed to allow for differences of opinion and more tailoring to the individual – e.g. 'what a healthy balanced diet might look like for you'. A note was added in the Guidance for Practitioners to clarify that unhealthy eating should be covered here rather than in Unhealthy habits
- Factors that can support having a nutritious, balanced diet were mentioned in the My
  food and drink talking points and scale (meal planning, cooking, shopping, food
  routines and having enough money for healthy food). Barriers such as lack of access
  to healthy foods or knowledge of what is healthy were also added to the talking
  points
- Issues with crime and language barriers were added as possible difficulties in the How I spend my time areas
- Barriers to social connection were added in the talking points for Feeling connected and in the *Guidance for Practitioners* (getting to places, issues with communication, crime)
- In Unhealthy habits the wording was changed to allow greater flexibility for individuals to define/understand with the practitioner the 'habits that are unhealthy for you'
- More specific aspects of looking after health were mentioned in the My physical health area scale and talking points – health checks, screenings and appointments including registering with/attending the dentist and optician
- In the **Daily living** area, independent living skills and support needed with daily living
  were mentioned in the talking points. The scale was also changed slightly to refer to
  the client being able to manage this (which might be by bringing in outside help)

- In the **Daily living** area, accessibility where the client lives was also added to the scale description and talking points. Aspects of the local area were also added to the talking points for this area (safety, air quality, green spaces)
- Having a sense of meaning, control over how time is spent and positive aspects of work and learning were mentioned in the talking points for **How I spend my time**.
   Creative activities were also added here
- Spirituality was mentioned in the talking points for How I feel as well as in the Feeling connected scale
- Wider cultural connections were added to the Feeling connected scale
- Feeling comfortable with oneself including gender/sexual identity was added in the talking points for How I feel
- Being accepted by others was added in the talking points for Feeling connected
- In the My sleep area, the emphasis was changed slightly from 'getting enough sleep' to getting the right amount – not too much or too little
- A note on **the role of the service** at different Journey of Change stages was added to the *Guidance for Practitioners* to clarify that in stages 2-4, support may or may not be provided by the service but at 5 the service is not needed.

### 2 What do these changes mean for me?

The published version is a significant improvement, which supports acceptability, implementation and good practice. However, because the content/meaning within some outcome areas has changed, the data from the pilot and published versions cannot be combined or treated as being produced using the same version of the Star.

For these reasons, we cannot simply replace the pilot version with the published version and will initially publish it as a separate version of the Outcomes Star, alongside the pilot version Star to allow time for organisations to switch.

Below we set out the options for switching to My Wellness Star.

3 What are the options for switching to the published version?

The two main options are:

1. Set a date to start using My Wellness Star for *all* clients – current and new. We recommend this option

#### The advantages of this approach are:

- The published version includes the talking points and many improvements so using it as soon as possible for all clients is beneficial
- It is simpler for practitioners to only be using one version of the Star
- It will be guicker to build a data set for the published version than option 2.

#### Potential challenges or considerations are:

- Current service users need to adapt to a different version of the Star
- Current service users will have earlier readings on the pilot version and then be reviewed using the published version so it may be harder to understand change at an individual level, until the Star is reviewed again using the published version
- You will not be able to report change for current clients for a period of the time until you have a sufficient number of reviews completed using the published version.

## 2. Initially use the published My Wellness Star only for *new* service users and continue using the pilot version with service users who used it previously.

#### The advantages of this approach are:

- You can continue to report outcomes for current clients and to produce reports without a gap while making the switch
- Understanding change is easier at an individual level as each service user will only use one version of the Star
- This option may be preferable for services that are relatively short term or have a high turnover of clients, so where all service users will be new to the service within 6-12 months, as it won't take so long for all clients to be using the published version.

### Potential challenges or considerations are:

- Practitioners will need to use more than one version of the Star
- Delaying moving to the published version is less desirable from a keywork perspective
- It will take longer to build a data set with the published version.

You may decide that another option is to do nothing and not switch. This is OK in the short term, but because the published version is a substantial improvement, we plan to retire the pilot version at the end of 2027.

### 4 What happens on Star Online?

From 10 March 2025, My Wellness Star will be available on Star Online as a new Star. If you use <u>Star Online</u>, your Account Lead will need to accept My Wellness Star to your account, then link it to the relevant services. If you choose Option 1 (all clients) in terms of the roll-out, the Account Lead can also deactivate the pilot version (Well-being Star – Healthy Living) to prevent new data from being added and use the 'Start multiple engagements' function to start new engagements for My Wellness Star. The Star Online Helpdesk can support you through these steps.

Star Online cannot create reports that combine data from the Well-being Star (Healthy Living) and My Wellness Star. This means that for a period of time, you will have historical data showing change using the pilot version and initial readings only on My Wellness Star. Depending on the length of time people spend in your service and the turnover of clients, it will take a while for your service to build a good body of data and be able to report detailed change using My Wellness Star.

#### 5 What happens if we use the Star in another software system?

If you use the Star in other software, My Wellness Star will need to be added as a new Star version. Contact your software provider or internal IT or systems team in the first instance

or contact Outcomes Star for support. Due to the substantial differences between these versions of the Star, it is not meaningful or accurate to combine the data to report on specific outcome areas (even if technically possible).

### 6 Next steps and further information

From 10 March 2025, as a licensed Star user you can start any time to:

- Access the new materials on Star Online and familiarise yourself with the new Star and changes
- Discuss internally the timing and options for switching
- Draw together any internal materials which mention this Star and plan when and how to update them

For more details, please see our website <a href="www.outcomesstar.org.uk">www.outcomesstar.org.uk</a> contact us on +44(0)207 272 8765 or <a href="mailto:info@outcomesstar.org">info@outcomesstar.org</a> or speak to your Outcomes Star Implementation Lead or other contact person.