



**Service User Feedback on
Supported Living Services within
Hertfordshire: Headline Findings**

Engagement Aug-Sep 2018

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Service User Feedback on Supported Living Services within Hertfordshire: headline findings

1. Background and Context

1.1. Hertfordshire County Council (HCC) is currently working to set up a new contractual framework for external Supported Living providers. Healthwatch Hertfordshire (HwH) assisted this work by supporting the engagement of current service users to understand what they want from Supported Living services and to help their voices inform future commissioned services.

1.2. Supported Living is a term that describes a range of services that enable people with support needs to live as independently as possible in their local community. Supported Living is a flexible model of service delivery and can look very different for different people and has various service models: for one person it may be a few hours support a week to live alone in a rented flat, for another it may be round the clock support to live in a home they own; and for others it may involve living in a shared house with shared support and individual support to meet individual needs. It includes the provision of physical, emotional, social care, and practical support to enable an individual to live well in their own home¹.

The housing involved can be singly occupied or shared; it can also be based on single flats, group flats, or houses, and be supported by paid staff either some or all of the time. Examples of support include: help with running the home and paying the bills; help with getting washed and personal care; help with finding and going to work, and help with getting out and seeing friends.

1.3. The Care Act provides legislative focus on personalisation, which should increase opportunities for greater choice, control and independence, so that people can choose how to live their lives and be supported based on what is important to them and what they want to achieve. The focus of our questions and engagement was to find out how people wanted to be supported, the level of choice they wanted, and the main factors that informed their choice about where to live and how they want to be supported.

¹ Examples of supported living could be help with personal care such as washing, cooking. Help with going out to socialise or work, or help with tasks such as shopping and/or managing money.

1.4. As noted earlier in this report, the feedback from service users will help inform the contractual framework for external Supported Living providers. It will do this by

- Helping to shape the specification (in particular the requirement of providers to involve people in choosing how they are supported and how the service is run).
- Helping to inform the process for agreeing new services and making new placements , including what information is shared as part of this; and
- Helping HCC to understand the support people need in identifying and preparing for a move to more independent accommodation.

2. The Engagement

2.1. The following engagement activity was carried out:

2.1.1. Eight sessions with forty-three service users using a mix of qualitative data collection methods. These included 1:1 semi-structured interviews & focus groups.

2.1.2. The engagement ran over a period of a month, between 13th August and 14th September, and included two focus group sessions held in a community setting away from people's homes, and six held within the property where people lived.

2.1.3. Due to varying levels of communicative ability, as well as the preference of some service users to have staff members present, some interviews and focus groups included the participant's support worker. In these cases, participants were given the opportunity to feedback away from staff members at a later stage if they wished; and there were a number of participants that took up this suggestion.

2.1.4. The service users we spoke to as part of this engagement lived in a range of different housing types and included both people who had recently moved in and/or were looking to move on to a more independent setting. We spoke to people in Supported Living run by externally commissioned providers as well as people in HCC's own 'in-house' services

2.1.5. Individuals had varying needs and received a wide range of support. It is worth noting the unique and complex needs of some individuals which include having a learning disability, mental health condition as well as physical support needs. Individuals ages ranged between 22 -65 years old and both men and women were represented in each focus group.

2.2. Each session encouraged participants to discuss the following:

- The type of support they receive
- Choices around their current accommodation
- How they are involved in decisions about their support and where choice is important
- What they see as positive about the support they receive
- What they feel could be improved
- Their future plans, wants, options for moving, how their support needs may change
- Their views on information sharing

2.3. The Focus Group discussions were recorded and transcribed. The transcripts were analysed to identify key themes.

3. Key Themes

The following reflects the themes that were identified by the engagement:

3.1. Choice and Control

3.1.1. Accommodation tended to be identified by the service user's family or social worker. However, it was acknowledged that accommodation options and available services could be advertised more widely and prominently, to ensure that service users and their families are fully informed of their choices and the range of services available.

3.1.2. Findings showed a mix of residents who had chosen where they currently lived in conjunction with their support worker or family, as well as residents that had not made an active choice. Where residents were not given a choice, the rationale provided was the lack of alternatives within a preferred location, or a lack of options that could meet the individual's requirements.

"It is taking too long to find somewhere else to live - I can be more independent but cannot find anywhere suitable to move to."

3.1.3. Where residents lived in shared accommodation, not all were happy with who they were living with or their outside neighbours. As part of this some participants felt that their disability or likes had not been accommodated for. Examples of this included residents living with people that do not share the same interests, living with people who they find it very difficult to communicate with, as well as living with people

who have more severe support needs and varying ability. One participant noted that they had a physical disability rather than a learning disability and felt that some people he/she lived with couldn't interact with them which made them feel isolated. Some participants had been able to move from shared housing into independent flats, and were happier for it.

"I would like to move somewhere where I can be more independent; it is sometimes hard to live with other people and share everything."

3.1.4. It was noted by staff members that a lot of the residents in some schemes had never experienced living by themselves so may not know if they would prefer to live differently. This was seen as a limitation to this question. However, there was also consistent feedback from people that they valued support that helped them become more independent and able to do things for themselves - but that this was not always the case with the way they were currently supported.

"I would like more help to be able to do the things I need to do for myself to live more independently"

"I find travel training and help to manage my money most helpful. This helps me do things for myself which is very important to me."

3.1.5. Staff also noted the difficulty of providing equitable support hours across all individuals within shared housing. This was seen as challenge to the way support hours are commissioned.

3.1.6. Participants wanted to choose the support they get, and who provides this support, but were very clear the most important thing for them was the individual staff member that supports them. It was felt by service users that it was important that they had a good relationship with their support workers, and that they understood them and their needs. This indicated that service users preferred continuity in their support workers, especially where service users had mental health conditions such as anxiety.

"Sometimes we are not told who will be helping us. It's really important to me that I know what is happening and who will be helping me"

- 3.1.7. Sometimes participants felt that staff could support them to be more independent, maximise what they could for themselves and be more focused on achieving outcomes. For example some participants felt staff do things for them even when they feel able to do it by themselves.

“Sometimes people do things for me when I can do it by myself”

“I needed a lot of support when I first moved in to help me feel settled, but now I don’t need as much”

3.2. Important Factors for Accommodation

- 3.2.1. Participants stressed the importance of being close to family. This was a driver for why some people wanted to move within Hertfordshire as well as outside of area. A concern raised was the length of time assessments for moving take; some participants stated the process took over 12 months.
- 3.2.2. Participants also stressed the importance of being within walking distance to local amenities, close to the town/city centre, and having ease of access to public transport. These were all seen as very important factors that contributed to them being happy where they live. Participants felt this gave them freedom and support to live their life as independently as possible. Where participants had to rely on staff to transport them to and from outdoor activities, there was frustration due to “the right staff not always being on shift”, staff not being available, or lack of access to shared transport.
- 3.2.3. Activities offered by schemes that give people ‘a sense of purpose’ such as running a gardening group, providing work in an onsite café, arrangement of events such as concerts and performances were seen as good practice.

“I really enjoy it when I can do things in the local community”

- 3.2.4. If moving into/living in shared accommodation residents expressed the importance of getting along with other people in the house. One participant described the best thing about his/her accommodation as “the company”. Good practice included current residents meeting with new residents before they moved in, as well as schemes organising visits such as tea visits and overnight stays so people can make an informed

decision about the accommodation, and get to know the other house members. These practices were highly valued by the service users who used them.

3.3. Flexibility of Support

3.3.1. There was a feeling across most schemes that flexibility depended on who was assisting them and which staff members were on shift. It was felt by most participants that they could not choose who supported them. However, they did not usually mind this unless it restricted what they could do and their activity choices. It was suggested that more could be done to match the right support worker with the needs *and* wants of the service user. An example of good practice was ad hoc support given outside normal hours, as well as collaborative activity planning.

“My support sometimes changes if different people are supporting me - I would like to be able to have more choice about when I am supported.”

3.3.2. For some schemes particular sections of the days e.g. afternoons, or parts of the week e.g. weekends, meant less support for planned activities. This was partly due to shift patterns and capacity, the staff members’ skills and ability, as well the lack of authority of some staff members. There was also concern that staff members were too risk adverse and would limit outdoor activities because of this.

‘I sometimes feel wrapped in cotton wool.’

3.3.3. Most participants were not aware of their support workers’ shift pattern and found it frustrating (and sometimes distressing) not knowing who was working one day to the next. Nearly all participants felt staff rotas could be communicated better. There was one example of good practice where staff rotas were printed in easy read for an individual in single occupancy flat. It was felt this communication was needed for shared housing just as much as individual flats.

3.3.4. Some participants noted that to apply for funding for activities, as well as to obtain support for new activities could be quite a lengthy process. An example of this was where an individual wanted to be supported into work, but had been waiting over three months for the first appointment. Participants and support workers also noted that in these instances the onus was on them to chase, and the lack of communication from other parties involved.

3.4. Involvement in Decisions

3.4.1. Most schemes ensure monthly meetings between service users and their assigned support worker to discuss maintenance, changes to the living environment, as well as reviews of the individual's support. These meetings were also an opportunity for participants to plan or change their activity schedule. Most schemes also held residents/house meetings either weekly or bi-monthly where residents could have a say and get involved in deciding how support is provided as well as house issues. However, there was an example of one scheme that had not had a residents meeting in 12 months due to staffing and capacity.

3.4.2. An example of good practice was one scheme setting up a house group called "Power to the people". This group includes residents that wanted to be more active in improving services and developing their own activities. As part of this group members take the lead on setting up projects and arranging opportunities for residents to get involved and link up with others in the area.

"I like getting involved - it helps me feel included and listened to"

3.4.3. A common theme across most sessions is that people felt that they were not always listened to, and they did not have enough choice or involvement in exactly how they were supported. A number of participants said they would like to be involved more in decisions and in the running of the service and that the people/organisations providing their support should create opportunities for this. People also felt that regular communication about the support they receive and any changes

3.5. Information Sharing

3.5.1. Most participants were happy to share information about them to new providers if that would benefit or help them e.g. their disability and support needs. Some said they would not want personal details shared such as their name. The consensus was that information should be shared on a need to know basis.

3.5.2. It was noted by some support workers that the concept of sharing information can be challenging for those service users that have not moved within the last 10-15 years. It was also noted that in order to say what information people are happy and unhappy to share, participants would need to know what was currently being shared about them, which many did not know. These points were seen as a limitation to this question. However, as noted above, there was support for the general principle that only information that providers need to help them decide whether they can meet an individual's needs and want to provide support should be shared.

4. Recommendations

4.1 Based on the key findings outlined in this report, it is recommended that Hertfordshire County Council consider the following actions:

- i. As part of the Framework, include standards on what providers should do to ensure choice, opportunity and involvement for their service users, as well as hold them to account if this is not happening.
- ii. To ensure service users feel listened to, develop a model that is led by the service user voice and the findings within this report.
- iii. To commission services that ensure service users are empowered to live as independently as possible, and consider HCC's role in facilitating this.
- iv. Commission a range of Support Living services that reflect the kind of services people want, not just their support needs.
- v. To feedback to all participants of this work what has changed as a result of their involvement in this project.

HCC Response to this Report

We had already identified the need to update our previous requirements and give a clear statement to potential providers about the kind of services that are needed in future. This included the need for service that:

- Are more flexible
- Are more enabling, helping people to do things for themselves and be as independent as they can be
- Are truly person-centred and responsive to changing needs
- Support people to lead meaningful lives in the community

The findings in this report and the feedback given by the people who participated in this engagement have been used to help us set out clear requirements for new Supported Living Services that will better meet the needs of people in future.

We have created a new Service Specification that Providers will need to demonstrate they can meet when they apply to join the new Supported Living Framework. This sets out the key requirements for any new service and we will monitor providers against these requirements to make sure they are supporting people in the way that they want and need.

We have set out in the table below the specific actions we have taken in response to the recommendations and feedback in this report. In addition to the below, HCC will continue to work with providers and partners including District/Borough Councils, housing providers, developers, Herts Care Providers Association to address the system-wide issues that have been identified such as a lack of accommodation capacity and wider issues affecting the care and support sector (for example, HCC made it clear as part of provider engagement that a range of accommodation options may be appropriate, but that there is also a clear identified need for clusters of individual flats. This gives people their own independence but also enables peer support opportunities and socialisation to be considered.

Recommendation	Response / action(s) taken
i. Set out clearly how providers must ensure choice, opportunity and involvement for people - and to hold provider to account if this is not happening	Included a separate section in the specification with very clear requirements in relation to engaging, involving and co-producing services with service users and their families/representatives where appropriate (see annex 1). Specific questions on service user involvement and carer/family involvement have been included in the tender documents, which providers must address sufficiently to get on to the Framework A specific Key Performance Indicator has also been included to test providers in this area and this will be reviewed during monitoring visits.
ii. Develop a model that is led by 'service user	We have built choice and control into the way the Framework will work.

<p>voice' and the findings in the report</p>	<p>The main way that work will be awarded under the Framework and service agreed is by service user choice. There will be an initial evaluation by the Council but ultimately - if they want to - service users will choose where they want to live and who they want to support them.</p> <p>HCC have also ensured that, in order for providers to get on to the Framework and be able to deliver new services in future, they must be able to demonstrate that they can deliver high quality services</p> <p>The key findings in this report are also reflected in the principles in the service specification.</p>
<p>iii. Commission services in a way that ensures service users are empowered to live as independently as possible, and consider HCC's role in facilitating this</p>	<p>We have made a clear statement to providers in the tender document that HCC wants to commission service that:</p> <ul style="list-style-type: none"> - Help people be and remain as independent as possible - Are enabling and empower people by developing their skills and supporting them to make decisions and develop a range of relationships and networks - Are flexible to people's needs and that can change the amount of support that is delivered - Ensure best use is made of technology to improve people's quality of life and assist them to live independent - Use the least restrictive practice possible <p>HCC have also made it a requirement that providers who are applying to join the Framework must be able to demonstrate that:</p> <ul style="list-style-type: none"> - they understand the services required - they are committed to working in a way that empowers people and involves them in decision making - they see people and their carers/families as able to self-determine their future and choose how they are supported - they will co-produce services with people
<p>iv. Commission a range of Supported Living services that reflect the kind of services people want, not just their support needs</p>	<p>See responses above. Service user choice has been built in to how the Framework will operate, both at the initial stage when deciding who provides services and in how providers then work with people to deliver those services.</p> <p>Referrals will also include any 'essential requirements' that providers must meet for their service proposals to be considered</p> <p>In order to help make sure that there is a balance between choice/wants and needs, HCC have included requirements around value for money as the Council must do all it can to ensure it is able to help as many people as possible with care and support needs.</p> <p>The service model developed covers a range of accommodation options and makes it as straightforward as</p>

	possible to confirm new services. HCC has given a clear message to care and support providers that they have a role in identifying and developing new accommodation that will ensure the right services are delivered.
v. Feedback to all participants what has changed as a result of their involvement	HCC plans to do this following the end of the tender process when they will be able to give a more detailed response and be able to report more fully on the impact of this work (the outcome of the Framework tender process).
vi. Improve the information available to better inform their choices	<p>HCC is developing better information that can be shared with service users and families about:</p> <ul style="list-style-type: none"> i. Supported Living and other accommodation options ii. Provision in different areas of the county iii. How to access services iv. Eligibility v. How to choose services vi. Expectations of support providers vii. Direct Payments and Individual Service Funds

Annex 1 - Extract from Service Specification

3A.11 Service User involvement and co-production

3A.11.1 The Provider must involve Service Users – and where appropriate their families/carers /other representatives – in the delivery of support and how the service operates. Providers must be able to demonstrate that Service Users (and, where appropriate, their personal networks):

- Are at the centre of decision making about issues that affect their life, the support they need and the outcomes they want to achieve
- Are fully involved in how their support is provided and organised, using the principles of co-production, including involving the Service User's personal network as appropriate
- Can build on their strengths and make informed choices about risks they wish to take and the skills they want to develop
- Can gain confidence and ensure self-determination and wellbeing
- Are supported through change and around transition to other support/services.
- Any proposed changes to the service are fully explained to them and carers/family members as appropriate

3A.11.2 Individuals will be both supported and actively encouraged to be involved in all decisions about their support. Providers will be expected to demonstrate how this is implemented and evaluated in relation to improved outcomes for the individual. Providers will also have regard to the need for independent advocacy where appropriate.

3A.11.3 Service Users will be given the opportunity and appropriate support and training to take part in or influence the management and/or organisation of the Service relating to:

- The daily running of the Service;
- Recruitment and selection of Staff;
- Planning activities;
- Monitoring the quality of Support and Care;
- Developing plans for future services/activities

Family members or other advocates will also be consulted about the development of the service wherever possible and relevant.

3A.11.4 The Provider will ensure proactive and responsive communication between themselves and the Service User and their family. Where Service Users have complex communication needs and are unable to speak for themselves, the use of additional ways of communicating with families should be considered.