

# Support Related Housing

Efficiency Delivery: supporting sustainable transformation

## Nottingham Community Housing Association - SMaRT Enabling Independent Living Through a Combination of Assistive Technology, Supported Housing and Urgent Response Services

### Background

All 600 Nottingham Community Housing Association's (NCHA) housing with care support (HWCS) users can access support from SMaRT 24/7 by simply pressing the SMaRT button in their home to speak with an experienced support worker. If necessary, a mobile response team can swiftly attend in person using one of the team's vehicles. HWCS also supports 420 people via floating support 24/7 using a traditional telephone contact with the SMaRT team.

SMaRT began in 2003 in response to feedback from service users and in line with the policy to provide person centred and individual services. The aim was to enable service users to increase their confidence and independence and to reduce trigger events that lead to a crisis.

The service has now has 25 staff who work a three shift system to provide a 24/7 service to more than 1,000 vulnerable adults who are living in different degrees of independence across the East Midlands in both rural and urban areas.

Funding for SMaRT is through existing funding streams inc. housing benefit and Supporting People, but it benefits a wide range of public services that would, without it, have much more frequent, unplanned and costly contact with SMaRT service users.

### Description of the initiative

When the day support staff finish work, SMaRT takes over. Users include people with learning difficulties, those with mental health issues, homeless people, female victims of domestic violence, ex-offenders and people with drug and alcohol issues.

SMaRT has transformed traditional support services (with staff on site at schemes) into a tailored service that responds flexibly to individual needs. From the outset NCHA understood that the telecare technology used by SMaRT changes the way in which services are delivered, rather than being an add on to existing services. SMaRT is fully consistent with "Putting People First" as it places the independence of the customer and their right to have choice, dignity and respect at the very centre of what it does. The service:

- Works closely with other agencies inc. health, police and probation,
- Uses telecare technology, CCTV and a dedicated support worker team to provide a rapid response service,
- Supports service users to make their own decisions, take responsibility for themselves and helps them develop their daily living skills and resilience, and
- Involves taking risks in a managed way. As one user said *"It is on my terms and only when I need it. It allows me to live like any other member of the community."*

Although SMaRT is technology enabled, its success is largely due to the skills and flexibility of its staff i.e. the technology is merely an enabler, albeit an important one. SMaRT team members are skilled in working with:

- Vulnerable people with complex and multiple needs who need a stable home as a platform to build up their daily living skills and personal resilience, and
- Other agencies and across boundaries to co-ordinate support for service users.

**The drivers for the initiative**

SMaRT was developed primarily to meet changing customer needs with a modern approach encouraging personal growth and responsibility. The aim of SMaRT was to provide all HWCS client groups with a service appropriate to their individual needs. SMaRT was specifically developed as:

- Service users said they did not want staff sleeping in or using their homes as offices, but they still wanted access to support when they needed it 24/7 in order to feel safe,
- There was a desire to provide a person centred and individual service to help service users increase their confidence and independence and to reduce trigger events that lead to needs escalating tenancy breakdown, hospital admissions, contact with the criminal justice system etc.
- NCHA was not confident that it met employment law as traditional services where staff slept in had a sleep-in allowance that it thought might not meet minimum wage requirements and could breach the working time directive,
- A reliable out of hours maintenance service for the whole of NCHA was required, and
- Transitional housing benefit provided an opportunity to fund improved security measures at the homes of vulnerable tenants.

**Innovative features of this initiative?**

**A new use for existing technology**


The “SMaRT button” is used to call for support. It uses technology that is commonly used in schemes that support older people.

The Tunstall 4000 technology was designed to enable an older person to contact someone for advice or in an emergency e.g. if they fall or if they are worried about an unexpected caller. Similarly, the call centre can contact the user if, for example, an alarm has been triggered or a neighbour reports a concern.

SMaRT has simply harnessed this technology for use by a wider range of vulnerable adults in supported living to make it more sustainable. Users told us that the ability to make immediate contact with support workers via SMaRT when they felt anxious greatly reassured them.

This project has been categorised as an “innovation” as it has taken existing technologies and combined them to create a new service for a group who are often **NOT** well served by traditional services.

**Scheme: SMaRT**

New	Leverage	Innovation 
Old	No Change	Efficiency
	Old	New

Is what is be done new or old?  
  
Is how we are doing things new or old?

**A new take on a “Call Centre”**

SMaRT is enabled by ICT and initial contact is through a call centre, but the response is personal and the aim is to resolve calls if possible rather than just pass the caller on.

A key success factor is that calls are taken by skilled support workers, rather than by telephonists. They are trained to take the time necessary with each caller and the culture is that “SMaRT helps whatever the problem is” even if it appears trivial.

**Scale economies via dual use of technology**

SMaRT also provides an out of hour's emergency maintenance service to all tenants in NCHA stock. This means the call handling capacity is used more intensively than it would be if it were for SMaRT alone.

At present SMaRT has 1,000 users and NCHA plans to extend it to its older people client base. This will double service users and further scale economies are anticipated.

**CSED Comment**

SMaRT was chosen as a case study as it brings several CSED work streams together e.g. support related housing, assistive technology, rapid crisis response and cross agency working. It also provides a person centred service consistent with our re-ablement philosophy and it is very popular with its users. It is efficient in delivery terms as it replaces waking/sleeping night staff and it is designed to deliver support that can flexibly expand and contract as an individual's needs change i.e. it facilitates the right sizing of support packages.

### Independent evaluations

*“The housing with care and support (HWCS) service users experience an excellent support service from the SMaRT Centre. HWCS provides a 24-hour support service for service users whether accommodation based or in receipt of floating support. The service uses assistive technology, remote monitoring of CCTV and a dedicated support worker team to provide security monitoring and a rapid response service. Service users can call trained and experienced support workers, who have access to support plan details, if they have a problem. Straightforward inquiries are dealt with empathetically over the system whilst a mobile response team responds swiftly to emergency calls in SMaRT vehicles. Performance on response to service user telephone contact is high with 93 per cent of calls answered within 15 seconds and no abandonment of calls. Service user surveys found satisfaction with services overall at 100 per cent. The approach ensures service users have 24-hour access to the support they need.”*

Extract from: Housing Association Inspection Report by Audit Commission (June 2008)

### Costs and Benefits

The running costs for SMaRT in 2007-8 were £667k (inc: amortisation of capital set-up costs over a four-year period) i.e. around £655 per user. The three main sources of efficiencies were:

**First**, because people can immediately access support 24/7 via SMaRT, the existing floating support model is more cost effective as it can be right sized rather than being risk averse i.e. without the urgent response element of SMaRT, it is possible that support visits would be more frequent than is actually necessary for risk averse reasons.

**Estimated saving** = It was not possible to calculate this saving accurately, but if we consider that the floating support service supports 420 people, even if it saved just half an hour per week per person, this would save around £280k p.a. (based on £25.34 calculated by SITRA Benchmarking for the National Housing Federation.<sup>1</sup>)

**Second**, because people can immediately access support 24/7 via SMaRT, night staff (waking or sleeping) have been replaced at many schemes at a lower cost per user.

**Estimated saving** = NCHA calculated that this saved £303k p.a. at 2008 prices.

**Third**, SMaRT enables some people (Mainly LD and MH clients) who would traditionally have residential or hospital support (or may even be in prison) to live relatively independently and safely in the community at a much lower cost.

**Estimated saving** = It was not possible to accurately calculate these savings because we did not have access to full details about current care and support in addition to SMaRT, but we are confident that this “substitution” saving would be very significant for both health and social care. For example, a review of the SMaRT client database and call log records by NCHA staff found:

- 15 mental health clients had been in secure hospitals immediately before being accepted into SMaRT supported accommodation based services.
- 230 people were in some form of institutional care before being supported by SMaRT including 18 people who had been in care homes for more than 15 years.
- Over a 3-month period, intervention by SMaRT has significantly changed the course of events in the lives of people at least once a week, thus preventing people ending up in institutional settings such as NHS, registered care homes or prison.

<sup>1</sup> A Review of Year 3 of the Support Benchmarking Project – June 2008.

## Case Studies

### A Carer's Perspective

*"I never thought that when my daughter was born with a learning disability she would be able to achieve the level of independence she has today.*

*I always wanted her to live her own life and, when the time came, I accepted her moving from our family home into a registered care home as the next step. She certainly knew her own mind and wanted to leave home like her sister had!*

*After a while my daughter got the chance to move from the care home into supported housing where there were staff on site and always available, but she could do more for herself. I thought this worked well and didn't want any more changes.*

*When my daughter told me about the new SMaRT service, I was very concerned and worried that something would go wrong. I was partly reassured by what the staff told me, but I still felt a little apprehensive. My daughter, however, was really enthusiastic and has just got on with the new service and the equipment she now uses to live her life. She knows there is help when she needs it, 24 hours a day. She is happy that she is living her own life independently, but with support when she needs it and she makes decisions just like any other adult. Sometimes things don't go so well and she doesn't always make the decisions I think she should (but then that's the same as my other daughter!)*

*Because my daughter is happy with the service and support she gets I can get on with my life too! I am so proud of what she has achieved."*

### A User Perspective

"X" is 45 years old and has Asperger's syndrome and significant complex communication needs. She has lived in supported housing for nearly two years and has had support from the SMaRT team throughout this period.

For many years, before moving into HWCS, X had significant issues around alcohol abuse. Since the alcohol abuse happens exclusively at night, the SMaRT team has provided her with appropriate support. X's diagnosis means that she finds it very hard to communicate with people she is not familiar with, and the SMaRT team has spent significant time building professional relationships with her to enable them to support her effectively.

"X" aims to live more independently in the future. During the day, staff work with X on a wide variety of daily living skills with a view to supporting her to gain independent accommodation of her own in the future. To this end, the support staff meet regularly with the SMaRT team to discuss how best to meet X's specific needs and X has formulated all her support plans with the involvement of individuals from both of these teams.

The impact this has had on X has been significant. She no longer drinks to excess as often as she did, instead finding the emotional support she needs from contacting the SMaRT team, either through the Tunstall system, or face to face on their regular visits. In addition, when X does become drunk and distressed, the SMaRT team are able to ensure that all the potential negative impacts on X and other service users at the project are minimised.

All external agencies involved in X's support have commented on how invaluable the input from the SMaRT team has been. Working together has been crucial in giving X a solid base from which she can look to move on into independent living within the community.

### An example of a successful outcome

One of the major successes of using SMaRT has been the amount of people successfully moving on to independent housing. Peter is an example of one of them. In the winter of 2006, Peter was homeless, frequently sleeping in doorways or on a friend's sofa. With alcohol dependencies, Peter was desperate for help. He was referred to a NCHA Supported Housing scheme by the Drug Alcohol Action Team. With his own flat and now fully involved in planning the support he needs to get his life back on track, Peter said:

*"I don't think I would have survived without SMaRT being on hand. SMaRT provides a 24-hour hot line, which I could call if I needed help when support workers couldn't be on site. I was suffering with depression and sometimes self-harmed. On one occasion, I called the SMaRT team who thankfully got to me quickly enough to get an ambulance out and provided first aid whilst they arrived. It was good to know they were there for me yet they supported me to make decisions for myself."*

#### Implementation Advice

Conversations with NCHA staff led to us identifying the following keys to success:

- **Understand that Telecare technology changes the way a service is delivered, rather than being an add-on to existing services.** SMaRT releases efficiencies as independence can be maximised in the knowledge that support and advice is just a call away. This allows care packages to be less intensive but still safe.
- **Clear information.** It was essential to explain the benefits of SMaRT to commissioners and potential users/ carers, as there was often an initial fear/concern that the technology could not replace on-site support. It is important to demonstrate how risks can be effectively managed.
- **Reliable technology.** When people need help or support they need to access it quickly and reliably. Since 2003, NCHA has learnt what technology works consistently well and it has learned how to deploy it effectively. For example, the initial communications equipment did not work well and some early CCTV cameras were not positioned in the best of positions.
- **Training.** Technology reliability is, in part, dependent on how it is used, so it is important to train new users how to use the technology. Similarly, staff training is also important, as they need to give consistent information and help about how to use the technology.

#### CSED Conclusions

We wanted to publicise the SMaRT initiative as it brings several of our work streams together e.g. it is housing based support, enabled by assistive technology and it includes a rapid response element and facilitates cross agency working.

These elements all combine to provide a flexible person-centred service consistent with our re-ablement philosophy. Hence we concluded that SMaRT is:

- Efficient in delivery terms for NCHA as cost efficient technology has replaced expensive night staff
- Efficient at the wider system level as people with high needs, who traditionally have intensive support and were sometimes in hospital, are being supported effectively and safely in the community, and
- Effective at the level of individual users as they each get tailored support when they want it and many who prior to SMaRT could not cope with living independently are now living independently with appropriate right sized support packages.

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