

# Let me choose: my life, my support

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## Family Mosaic: an introduction

Family Mosaic is one of the largest housing associations in London and Essex. As well as providing affordable homes, we also provide support and care services to over 4,000 people to help them live independently.

We're driven by our customers. We want to offer them more control, and more choice. We do this because we're financially strong, and because it's central to the way we work.

It means we want to make our customers feel valued in everything we do for them.

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## SUMMARY Let me choose

*We've always believed our care and support services were person-centred. We decided to challenge this assumption, by running seven personalisation pilots. The results have provided inspiration and insights, not just for our care and support service, but for us as an organisation.*

The aim of the pilots was to test how personalisation might work for a range of different customer groups, and across different types of schemes. With the support of commissioners, we ran pilots at seven schemes for a period of six months. At each one, we tested a different mix of core and flexible services.

So what were the outcomes? Perhaps of most importance, personalisation isn't the right word. For our customers, personalisation is all about **choice and control**.

It makes sense. By giving them more choice around the services they want, they told us they felt more in control. As a result, they felt more empowered, more confident and more independent. Ultimately, this is what we all want.

Customers also told us **the support they received was more varied, more flexible and more appropriate**. They had more say in what support they wanted, when it was delivered to them and, as a result, believed people were listening to what they wanted, as individuals.

Finally, **customers said their relationship with staff changed**. Before the pilots, they felt they were the users of a service designed by staff. Now, they felt staff had to shape the service to meet the demands and requirements of the customer.

So what were the lessons for service providers?

First, **don't be afraid of choice**. Before we started, there were fears choice would result in unrealistic and unfulfilled expectations. It didn't. The choices requested were reasonable, simple and deliverable.

Secondly, customers don't care where funding comes from. **They have one life** and we need to develop services from that perspective to meet their needs.

Thirdly, **customers want a normal life**: this might mean they choose to not clean up their rooms or they want more group activities. It means we need to be more flexible and adaptable in our processes.

Fourthly, as providers and commissioners, **we have to work together to simplify our approach**. Many customers felt the whole support planning process wasn't part of ordinary life: they want it to be focussed on them, not biased towards the needs of the organisation and our commissioners. They want staff who can help them holistically: not staff whose hands are tied by restrictive commissioning criteria.

Finally, **choice can save money**. It can reduce time spent on paperwork. It makes providers more creative. It requires fewer specialists, and more flexible staff. It means a mix of group work and individual work.

All the pilots were successful. All wanted to continue this approach. As a result of their success, we're now introducing **choice and control** across all our services. We want it to be at the heart of everything we do.

# 1 The pilots

Each pilot involved a different customer group or type of service. Customer groups included young people, people with a dual diagnosis, and Afro and Caribbean elders. The pilots took place in a mixture of settings, including accommodation based and visiting or floating services. All pilots were required to identify the essential core service needed for all customers (for example, ensuring safety and security, and person focused assessments). This accounted for a proportion of the funding.

Our staff were then required to calculate how much of the remaining support budget – ranging from

30-70% of the total – could be spent according to the choices made by the individual. We devised different ways of presenting these choices: at one scheme we used a Sky TV-type package, consisting of core services and a bundle of services chosen by the individual. At another, we used Family Mosaic banknotes that customers could choose to spend on additional time from support workers.

Each pilot had its success stories. Some worked better than others. The overall experience has been very positive, for customers, staff and, we believe, for the commissioners of these services.

## COACH HOUSE THURROCK

Coach House is a service for people who need nursing care as a result of an accident, serious trauma or a degenerative health condition that has caused severe disabilities.

*What we tested:* a shift in care and support provision from a traditional approach based around team nursing and static shift patterns, towards a more person-centred, rehabilitative approach. Staff used multi-media support planning to assist customers tell their story and express what was important to them about their lives and their support. This gave very disabled people a voice so they could be more in control of how our staff help them.

### What worked:

- **Stories:** customers were able to share information about their lives before they became disabled: staff found out one customer had a daughter they hadn't known about;

- **Personalised support:** on talking with another customer, staff discovered he used to be a DJ and songwriter before an accident left him severely disabled. With the support of staff, he chose to buy an organ and is now writing music again. He is also participating in regular art sessions (when previously he would have been in bed), and is talking to staff about how he can go on holiday.

### Issues to note:

- **Buy-in:** staff must be engaged and motivated, otherwise personalisation won't work: this requires management time;
- **Family affair:** at times, what our customers wanted clashed with what their family believed was best for them: this caused some tension between staff and family members;
- **Assistive technology:** the pilot highlighted the need to review its use for customers, as many are unable to communicate verbally. We now use multi-media technologies to give customers a voice in the support they are given by staff.

# BELLS PROJECT

LB HACKNEY

At the Bells Project we provide housing support to African and Caribbean people over 55 years old.

*What we tested:* we adopted a three-tier approach: first, of core services; secondly, choosing when to have what had previously been a daily phone call; and, thirdly, an open, flexible, support element chosen by the customer.

## What worked:

- **Personalised support element:** this was very popular with customers, who asked for a range of personal support:
  - three customers asked for a support worker to play ball with them in the communal area;
  - another customer wanted help from a support worker in choosing a burial plot for himself, so he could have peace of mind;
  - another customer asked a support worker to take her to the local park, so she could sit at the cafe, just as she had when she was a younger woman.

None of these are typical housing related support activities. All, however, improved health, wellbeing and, ultimately, independence;



- **Shared experiences:** customers chose to host a BBQ for over 100 family, friends and members of the local community;
- **My life:** customers asked to develop scrapbooks. These served a dual purpose: they helped customers to record memories of their lives, and they enabled staff to assess and support customers' needs more effectively.

*One customer asked a support worker to take her to the local park, so she could sit at the local cafe, just as she had when she was a younger woman.*

## Issues to note:

- **Support when needed:** many customers said they did not want support plans – they just want support as and when they need it;
- **Split provision:** because the care element of customers support is provided by LB Hackney, it wasn't included in the pilot. This caused some confusion to the customers and indicates the need for a holistic approach;
- **Opted out:** some residents chose not to take part in the pilot: this might have been because of communication issues, or because they couldn't see the potential benefits of the pilot. As a result, staff ran two delivery strands simultaneously.

# BRAMBLE COURT

## ESSEX

At Bramble Court, we provide accommodation and support for single homeless young people.

*What we tested:* a three-tier approach comprising core services, group activities chosen by the young people and personal support chosen by each customer (which we called “Take your pick”). We also introduced a customer-led rethink into how we assess them and their support plans, as well as how we could use web-based technology and CCTV.

### What worked:

- **Group activities:** group activities have become unfashionable in service delivery as everything is built around the individual. We found this isn't always what the customer wants. Group activities were very popular and were one of the main successes of the pilot. Examples included cooking and art sessions, a sexual health clinic and a pool night organised by one of the residents at a local service for young people;
- **Take your pick:** this was not as popular as staff thought it would be. Most young people at the scheme are either students, on a low wage or on benefits, and don't have much disposable income. Many also said they didn't want to spend one-to-one activity time with support workers. There were successes, though: one young person



asked to be accompanied to an army careers day and, as a result, has joined the Royal Marines. Another asked for extra support to attend a college interview, which resulted in a placement;

- **Surgeries:** we introduced a new rota to staff morning and evening surgeries. This meant customers could choose when they visited and asked for support from staff, rather than at a pre-arranged time, as had happened previously;
- **Support planning:** customers wanted choice and control over their own paperwork; they don't like traditional support planning. We helped them to develop and design their own to-do lists, making better use of modern technologies;
- **Reaching out:** some hard-to-reach customers engaged for the first time. Previously one customer had resented staff “telling me what to do”. With the pilot, he could choose when he wanted to raise the issues he wanted to discuss;
- **Open Day:** organised by customers and staff together, the Open Day was a huge success and was praised by other agencies.

### Issues to note:

- **Down time:** it took time for the proposed IT suite to come online and a range of related problems – inaccessibility of some websites, slow connections, etc – risked disaffecting customers;
- **CCTV:** using assistive technologies with a more flexible workforce allowed us to free up staff, so they could be at the scheme at times when customers most needed them.





# LLOYD HOUSE

THURROCK

At Lloyd House, we provide accommodation and support for people with a learning disability.

*What we tested:* a mix of core services, plus flexible support, including life skills and community-based activities. We presented this to our customers as a Sky TV-type package, consisting of a core element, along with a range of bundles they could choose from, depending on their needs.

## What worked:

- **Personalised support:** the Sky TV-type package worked well: customers understood the concept of having a package made up of core services plus a selected bundle of services. The most popular bundles were socially focussed;
- **Group activities:** customers chose to do more activities together with staff support: these included trips to Wembley, to the local radio station and to the Grangewater activity centre. This focus on social activities enabled staff to get to know customers better, increased customer confidence, promoted independence and resulted in stronger friendships;
- **Life books:** scrapbooks put together with staff support helped staff to understand the lives customers had before they moved to Lloyd House, as well as their aspirations for the



future. Staff discovered one customer, who had been in the scheme for ten years, used to knit. He's now doing workshops for other tenants. Another customer had worked at Debenhams, been a milkman and a bricklayer, but this had never been noted before in the formal assessment and support plans;

- **Self-support:** as the pilots evolved and confidence grew, customers needed staff less and began to support one another by, for example, going to the bingo together.

*Staff discovered one customer, who had been in the scheme for ten years, used to knit. He's now doing workshops for other tenants.*

## Issues to note:

- **One life:** there was a clear message from customers that whatever funding streams contributed to their overall support funding, they viewed their life as just that – one life, requiring holistic support;
- **Male staff:** customers had specific requirements around the staff they wanted to support them. At times it was challenging to ensure we could provide staff who met their specified profile;
- **Language:** people at Lloyd House didn't like being called 'customers': they also changed the name of the 'financial assistance' bundle to 'help sorting my bills' bundle.



# CAMBRIA ROAD

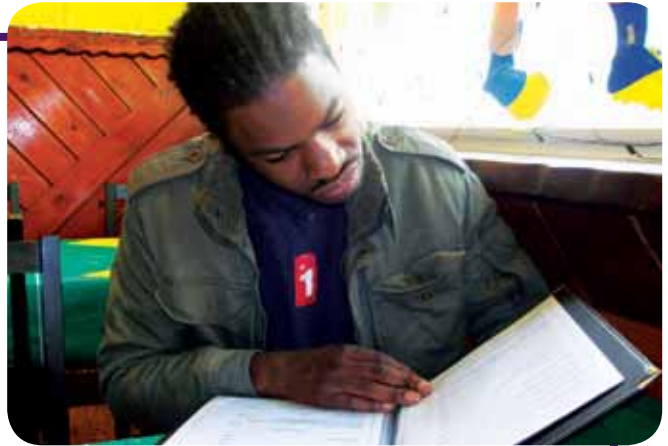
LB LAMBETH

At Cambria Road, we provide accommodation and support to people with dual diagnosis.\*

*What we tested:* each month, we gave customers Family Mosaic-branded banknotes to the value of £50. They could then use them to buy support from the scheme's workers for activities of their choice. The banknotes could not be exchanged for money.

## What worked:

- **Personalised support:** customers used the banknotes for various uses, including 'paying' for staff to go with them to eat out at a local cafe, or to take them to a barber to have a haircut. While these might appear to be small requests, many customers had spent much of their life in institutional care. As a result, they hadn't experienced community based services before. The banknotes meant they were able to decide where they could go, in the knowledge that a support worker would be with them;



- **My choice:** one customer 'bought staff time' to accompany him on walks: he said this helped take his mind off drinking and reduced his alcohol intake;
- **Self confidence:** customers said this focused support increased their self confidence and, as a result, they felt less institutionalised. Incidents at the scheme were significantly reduced;
- **Staff contact:** a more flexible approach allowed support workers to spend more time getting to know customers.

*One customer 'bought staff time' to accompany him on walks: he said this helped take his mind off drinking and reduced his alcohol intake;*

## Issues to note:

- **Time:** staff were concerned from an early stage that six months might not be long enough for the pilot to have lasting impact;
- **One-off:** we had to think about leaving a legacy of change, however small: this meant talking with and engaging staff and customers from the beginning of the pilot.



\* a person considered to be suffering from a mental illness and a substance abuse problem



## HOWARDS LANE

ESSEX

Howards Lane is a shared home, where we provide support for people with a learning disability.

*What we tested:* people were already in receipt of their own budgets and the existing activities were heavily influenced by the parents of the customers. They had invested into making the service work, and felt they owned it. We wanted to encourage the young adults to express their own views and take control of their choices, including how much time they spent both within and outside of the home.

### What worked:

- **Personalised support:** staff supported the young adults to make them feel safe in expressing their choices and trying new things, despite some reservations from their parents. One young person was able to get a job in a local cafe, but was unable to take up the post for other reasons;
- **It works:** although just small steps were taken, the young adults became more confident and adventurous in their choices, trying new activities like music and clubs.

### Issues to note:

**Family affair:** this was a sensitive pilot, because the family relationships were very important and the young adults didn't want to go against their parents' wishes. They were, however, able to develop a more adult dialogue with their parents, who were more reassured as the pilot progressed.

## FLOATING SUPPORT

LB KENSINGTON & CHELSEA  
HAMMERSMITH & FULHAM

We provide floating support to people in their homes in West London.

*What we tested:* a two-tier model combining traditional housing related support with more hands-on work, including befriending, life-skills, etc.

### What worked:

- **Hands-on:** the demand for more hands-on support by customers increased. Many had needs that were not met with 'grant restrictions' and the whole person approach was appreciated. One customer was accompanied to an eye sight test, which gave the staff member greater insights into his general wellbeing and his poor memory;
- **Choice:** being able to do what the customer needed, particularly supporting them to get out, helped to reduce isolation and build their confidence, with noticeable physical and mental health improvements.

- **Befriending:** customers valued having a normal conversation with staff: it helped combat loneliness. Some were sad when the pilot ended, so staff pushed for befriending to continue.

### Issues to note:

- **Funding:** hands-on support might not be considered a future priority by local authorities. The outcomes of this pilot suggest it should be;
- **Boundaries:** introducing new types of support raised ethical considerations. For example, while providing housing and benefit advice, a support worker maintained a clear professional to customer relationship. Showing the same customer how to cook, however, changed the dynamic. To the customer, there was now a social element to the support.

## 2 The outcomes

The data on these two pages comes from the Supporting People outcomes (below) and the post-pilot evaluation questionnaire completed with customers from all of the schemes (next page). In every area, the personalisation pilots had a positive impact on the lives of our customers.

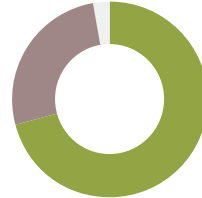
### Supporting People outcomes



## Results from post-pilot evaluation questionnaires

### Having more choice

**71%** said the personalised service made a difference to the amount of choice of service I get

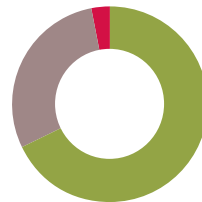


#### KEY

- Has improved
- Stayed the same
- Made it worse
- No answer

### Being supported with dignity

**68%** said the personalised service made a difference to my being treated with dignity and respect



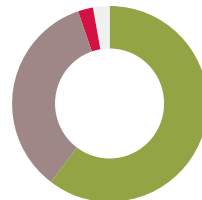
### Feeling safe at home

**66%** said the personalised service made a difference to how safe I feel at home



### My happiness with life

**61%** said the personalised service made a difference to my general happiness with life



### Having more control

**58%** said the personalised service made a difference to the control I have over my support



### A better social life

**50%** said the personalised service made a difference to my social life



*NB - quantitative data taken from returns to the post-pilot evaluation questionnaire completed by customers with the assistance of staff, as appropriate. There were 38 responses in total. Some customers chose not to answer some questions.*

### 3 The customer perspective

For our customers, personalisation isn't the right word. To them, it's all about choice and control.

It makes sense. By giving them more choice around the services they want, they felt more in control. They felt more empowered, more confident and more independent. Ultimately, this is what we all want.

Customers also told us the support they received was more varied, more flexible and more appropriate. They had more say in what support they wanted, when it was delivered to them and, as a result, believed people were listening to their individual needs more. And they felt closer to staff.

#### Choice means I decide

"I can say when and how I get supported."

"We have more say in the support we receive. And we're being listened to more."

#### Choice has changed how I feel

"The pilot has given me the confidence to achieve my aims, to live a happier life."

"It's changed my life."

"Now, I'm very enthusiastic and motivated."

#### Choice means we feel closer to staff

"I can ask staff for different kinds of support."

"Personalisation gets everyone out of their rooms instead of slouching around all day. Now staff can't get me out of the office."

#### Choice is more varied

"We're getting support with things we didn't previously get support for."

"There are lots of opportunities to get together. No one is isolated."

#### Choice has changed us

"It's changed the atmosphere here – it's a lot calmer and people seem happier."

"When we do our activities together, it's quite peaceful. It chills people out, particularly the artwork. I would hate for it to go back to what it was before."

#### Choice means control

"I have more say over things."

"I feel more in control than I did before."

"It's better: we can go in and meet staff when we need the help, rather than just meeting for the sake of it."

*The quotes here are taken from post-pilot customer questionnaires.*

## 4 The lessons

*First, don't be afraid of choice. Before we started, there were fears choice would result in unrealistic and unfulfilled expectations. It didn't. The choices requested were reasonable, simple and deliverable.*

Before the pilots began, staff at one scheme had real doubts as to whether the proposals would be effective. They were concerned about the perceived chaotic nature of most of the customers at this scheme, and the likelihood that it would be impossible to pin them down to specifics.

The reality was different. Across all the pilots, people didn't want to make major changes to their lives. What they wanted was to make things a bit easier and a bit better. And their choices reflected these desires.

At Cambria Road, we introduced Family Mosaic banknotes, entitling customers to spend £50 per month on additional support. One resident asked for a support worker to accompany him to get his hair braided. Another decided to spend the money buying t-shirts, which she wanted to paint and sell.

Martin's choice was to go on regular walks in the neighborhood with a support worker. The walks were extremely beneficial, both to his physical and mental health. "When I received formal support," he said afterwards, "I felt like I was being a burden. On the walks I felt more useful, doing things together. In an ideal world, I'd like more time and more flexibility, more time to stop and talk."

At the Bells project, the sheltered housing scheme we run in Hackney, the choices for support were

similarly easy to fulfil: some customers wanted staff to throw a ball with them; another wanted to be accompanied to the local park, so she could sit at the cafe and watch the world go by, just as she had when she was younger. Previously, staff would not have been able to support these activities because of time and funding restrictions. Yet these simple activities had a significant impact on their wellbeing.

"The customer requests were quite practical," one member of staff said after the pilots. "No one asked for anything outlandish. The only thing I couldn't do was to install curtain rails for someone, but I arranged to get that done by someone else."

As part of their group work, a young man from Bramble Court who had a history of being homeless and leading a chaotic life offered to run an exercise club for his fellow tenants. Emboldened by the experience, he then asked for a support worker to accompany him to an Army careers day. He has now left the scheme and joined the Royal Marines.

The changes he made were exceptional. In most cases, progress was gradual and quite subtle. Staff were able to spend more time talking with customers about their lives and their history, about what interests them and what they'd like to do in the future. That, and the choices customers made, had a real difference on their lives.



*Secondly, customers don't care where the funding comes from. **They have one life.** We need to develop services from their perspective to meet their needs.*

When you introduce choice, you have to engage customers from their perspective. As a consequence, we found there is no one model of personalisation that will suit everyone's needs.

"We don't say, 'this is our model for personalisation'," Yvonne Arrowsmith, Operations Director at Family Mosaic, said. "We tried various different approaches so people had a choice about the services they need. We need to stop being restricted by funding streams or grant conditions. People's needs can't be put into compartments. They need what they need."

The young people at Bramble Court, for example, didn't want to use the cash allowance part of their package, as they were worried they wouldn't be able to sustain it once they moved on. Mental health customers, on the other hand, felt empowered by being able to control their support represented by the cash allowance element.

"One of the lessons from the pilots was the need for staff and management to be more flexible so they can respond to these differing support needs," Yvonne Arrowsmith adds.

Taking a holistic approach means looking at the person as a whole and then determining the support they, as individuals, need. One key way we found out about people was, on reflection, simple: we threw out the tick box forms and we listened to them.

"From the pilot, we learned that the standard needs assessment forms can be a barrier," a member of staff said. "Instead, we just sat down with people and listened to them talk about their lives."

"We found out so much about people lives through this," another member of staff concurred. "Previously the focus was on going forward and future plans, not looking into the past."

By listening, staff felt better able to provide appropriate support to that individual. "It's helped us to support them better," one staff member confirmed. Using this approach, staff discovered, for example, that a customer at Coach House used to be a DJ and songwriter before he had his accident. Given the choice and support, he decided to buy a keyboard and is now playing and composing music again.

There was also a recognition from staff that this listening approach signals a move away from the perception that staff always know what's best. In one scheme, a previously hard-to-reach customer was given the choice of when to raise issues he wanted to discuss. As a result, he became less confrontational and more engaged.

For staff, this meant they were able to treat the person, rather than just provide criteria-driven support options. As one noted, "it's what we came into the job for in the first place".

*Thirdly, customers want a normal life: this might mean they choose not to clean up their rooms or they want more group activities. For us, as providers, it means we need to be more flexible and adaptable in our processes.*

Some of the choices customers made went against the norm. Take the example of Gayle: she decided she no longer wanted staff to support her manage her housework in her flat. Staff had their doubts, but understood this was her decision. After a few weeks, it became apparent that, while she might not want support with her housework and laundry, she needed it. After talking about it with staff, she made the decision to have the support reinstated.

“To a certain extent it made me laugh,” Yvonne Arrowsmith commented. “Staff were concerned about the situation, but to me, as anyone who’s had a teenager would know, this is normal behaviour. When teenagers begin to exert their independence, one of the first things to suffer is their bedrooms. Pizza boxes lying around, cups growing mould, half-eaten Pot Noodles. It’s all normal behaviour to them and generally they grow out of it.”

Initially there was a similar reaction around group work. Since the introduction of Supporting People, group work has become less fashionable, with the focus instead on one-to-one interactions. For many of our customers, however, doing activities in groups was exactly what they wanted.

Customers from Cambria Road, some of whom have substance abuse problems, chose to have a day trip to Brighton accompanied by support staff. It was very successful and had important lessons for staff.

“We all have family networks and friends,” a staff member reflected afterwards. “A lot of our customers don’t have these kind of relationships. They have specific peers, with whom they share the same issues. Going to Brighton meant they could get away from that daily cycle. No-one drank anything the whole day. No-one absconded. When they came back, they slept for hours.”

“The visit to Grangewater activity centre presented a totally different way of working with our customers,” a staff member at Lloyd House recalled. “We offered very informal support and as a result saw sides to customers we never knew before: people could relax and laugh while doing things together.”

Young people at Bramble Court also chose more group activities: to them, socialising in groups is part of normal life. It meant many felt less isolated. They also chose to have morning and evening support surgeries, where they could drop in and seek advice when they wanted, rather than having to turn up for regular appointments.

As providers of these services, of course, it means we have to be more flexible, more adaptable and more creative in the way we manage and organise our staffing. And we have to be more inventive in the activities we offer and recognise that, as a provider, we’ll lose an element of control. That, though, is also part of normal life.

*Fourth, as providers and commissioners of services, we have to work together to simplify our approach. Many customers felt the whole support planning process wasn't part of ordinary life: they want it to be focussed on them, not biased towards the needs of the organisation and our commissioners.*

The pilots would not have been successful without our ability to work together: with the commissioners of the pilots; as staff and management; and with our customers. We need to continue working together as providers and commissioners to simplify our approach.

At its most basic level this means we have to rationalise the amount of paperwork involved. "I've always been very positive about Supporting People," Yvonne Arrowsmith, said. "It has pushed up quality and brought in new money to the sector. Over the years, though, it's also resulted in mountains of paperwork, which has taken away our ability to be flexible, while simultaneously eating into our direct support time."

Customers got frustrated about this: about the need for ticking boxes and for filling in endless forms. If joint care packages are to work, they need to have one set of bureaucratic requirements to complete. It's about not having to fill in multiple forms with the same information when one will do.

Take the example of support plans. Young people at Bramble Court challenged staff about the need for them to have formal support plans. They felt that the whole support planning process wasn't part of ordinary life. Some asked staff whether they had them as well.

"Why would the old style support plans seem appealing to you if you were 17 years old?" one member of staff asked. "Our caretaker says he finds piles of them thrown into the flowerbeds."

So staff worked with the young people at Bramble Court to redesign them. Instead of support plans, they developed to-do lists. They also designed how they looked. "Now the customers own them," a member of staff commented. "They feel the form relates to them, rather than being something other people have told them to use."

Customers at other schemes shared these sentiments. "They told us that, previously, support sessions could feel like form filling exercises," another member of staff stated. "During the pilot, the informal approach was appreciated: it felt more like life."

"We need to remember that we're dealing with people, not paperwork," another manager commented. "Their needs change and we have to be adaptable and flexible."

For staff, this change has its rewards: "before the pilot, I felt like an administrator doing some support," one support worker said. "Now, I feel like a support worker who has to do some administration."

*Finally, **choice can save money.** It can reduce time spent on paperwork. It makes providers more creative. It requires fewer specialists, and more flexible staff. It means using group work and individual work.*

One of the assumptions before the pilots began was that providing personalised services to your customers would cost more. We found this wasn't necessarily the case. Many of the changes we made haven't cost anything: indeed, there are indications that choice can save money.

The pilots made us think more about how we spend our resources: we had to develop some innovative ways of freeing up staff time to enable more one-to-one time with our customers. At one scheme, for example, we'd always assumed a member of staff had to be present in person, 24 hours a day. During the pilot, we questioned whether this was necessary, or whether it was because we felt we had to have someone there, "just in case".

So we opted for a different approach, using CCTV to monitor any activity, and having a named member of staff on call not only at this scheme, but for other locations as well. There was some initial scepticism about the approach, but it worked: there were no incidents throughout the six month pilot period.

Introducing group work also made a real difference. It was something that customers wanted at all the schemes. And it costs less to provide this type of support – with, for example, one member of staff overseeing an art session – than it does to provide support to individuals on a one-to-one basis.

Faced with funding cuts, many support providers are already examining how to introduce different staffing models. One approach has been to use fewer higher paid trained staff, and more staff at a lower grade who would focus on encouraging life skills and providing community-based support. It was this type of approach that customers found really helpful during the pilots. This isn't, though, about dumbing down provision.

Services will still need skilled and experienced support staff to carry out needs and risk assessments, to monitor support plans and to respond to crises. One lesson from the pilots, though, is that we might not need so many of them.

Of course, this shouldn't be used as an excuse to cut budgets. We do, though, have to recognise that there are scarce resources available. We have to look at ways of making sure we can continue to offer our customers choice at no extra cost. This might be by, for example, introducing more service-based activities.

Or it might be by encouraging customers to support one another when going out. This, in turn, helps people to build social relationships and means they become more independent. In the process, it can create a virtuous circle that has a significant, positive and lasting impact on people's lives.

## 5 The future of choice

*The pilots demonstrated that giving people choice and control works. Indeed, none of the seven schemes wanted to return to their previous ways of working once the six month pilot period ended.*

All the pilots have had to develop imaginative ways of maintaining this new way of working. And we're using the lessons to roll out choice and control throughout our care and support services. We're calling this, Let Me Choose (Change) and, as with the pilots, the way this is done in each service will vary, according to a number of factors.

Primarily, it'll depend on what works best for our customers. Each service, though, will also have to consider issues such as funding, staffing levels and local authority priorities and requirements. We will leave each scheme to develop its own ideas, in consultation with their customers, but if any service says it needs to retain a high core service, then we'll challenge this.

We're also introducing Let Me Choose (Direct) which is aimed at individuals in receipt of direct payments and personal budgets. We already support a number of customers in this way, people, for example, living in their own homes who require some support to help them be independent. We'll need to determine what services we should deliver in the future, to whom and where.

We don't, though, believe choice and control is limited to our care and support services. We think it has lessons for everything we do. So we've also been running pilot schemes in our general needs housing provision, as well as our asset management.

The initial results from these pilots are encouraging. One area we've been looking at is how we can provide a more personalised housing management service, by developing individual housing plans for new tenants, as well as working with existing, high demand tenants. We've had some successes already, for example, with a more personalised approach helping to resolve an ongoing ASB case.

We've also been looking at how to introduce choice into our cyclical works. When redecorating a block, for example, we've talked with tenants and said, 'there's some extra money available, what do you want to spend it on?' The choices have been simple, deliverable and have resulted in a greater sense of ownership for our tenants. Although initially sceptical, once they realised there would be an end product, they have joined in.

We're also trying to ensure our staff don't perceive choice as being something our care and support services 'do'. Every new member of staff is now briefed on our approach to choice and control as part of their induction at our academy. It's critical, because we know that without the involvement of our staff, choice and control won't work, wherever we try to apply it.

For our staff, the pilots were an interesting, and at times, challenging experience. "I thought I had a lot of patience before the pilot started," one member of staff from our older people's home said,



“but have realised I’ve needed more patience under personalisation.” This came after she had helped a customer walk up and down a corridor repeatedly. It was very slow and required a lot of patience. Crucially, though, it was the customer’s choice of support.

The pilots were successful because of the flexibility and enthusiasm of the staff teams involved. Where there was clear enthusiasm in a staff team, so the pilots progressed at a faster rate. “To be honest,” one said, “no one will ever realise the work the team did to make this successful. They were so flexible, willing to change their approaches and their shifts. They all co-operated and worked their socks off. Without that, we could never have done it.”

By contrast, in one of the other schemes, a small minority of staff believed they were already providing a personalised service and were less enthusiastic. As a result, the overall motivation of the staff was undermined, underlining the importance of ensuring staff have a shared understanding of what personalised working means.

It’s one of the lessons around staffing we’re now applying across our services. The others include:

- **it takes time:** celebrate small successes, keep staff informed, and give yourself enough time to engage with customers with complex needs;
- **who owns it:** allow frontline staff and customers to determine – as far as possible –

how the choice is implemented. As one staff member said, “get support workers involved in the initial meetings”;

- **it’s about choice:** staff need to be aware that it’s not about “doing personalisation” – choice and control is a new way of working that needs time to become the norm;
- **be prepared:** there will be change and there might be risks, and you’ll need to ensure staff are aware of this. As a consequence, the oversight and ownership of the process by senior management is critical.

Team leaders played a critical role in ensuring staff had the guidance they required, so they knew what needed to be done and how the specifics of personalisation could be applied locally.

Similarly, the flexibility of housing support commissioners was critical. It enabled staff to focus on helping individuals to achieve their outcomes in a way that might not otherwise have been possible.

“Our Supporting People Commissioners were very positive about us undertaking these pilots,” Yvonne Arrowsmith, Operations Director at Family Mosaic, stated. “Without their support, it would have been difficult. Now the pilots have finished, we’re hopeful they will continue to support flexibility and innovation going forward.”

*“The pilots wouldn’t have been a success without numerous people, all of whom I’d like to thank. They wouldn’t have worked without the flexibility and enthusiasm of the staff teams involved. They couldn’t have happened without the flexibility of housing support commissioners. And they became a success because of our customers: their enthusiasm, trust and belief helped us with a new way of working.”*

*Yvonne Arrowsmith,  
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