

JUST ENOUGH  
SUPPORT



# Paul's story

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## Introduction

Just Enough Support is a planning process to explore how we can provide just the right amount of support for people, and increase the opportunities for people to be connected within their community and especially with their neighbours. If we use resources effectively and actively reduce reliance on paid support, whilst working in ways that enhance relationships and people being part of their community, then we can achieve a 'win, win, win' situation - for the person (who may have a wider variety of connections and relationships), the organisation (able to target scarce resources most effectively) and the community (benefiting from the contributions and presence of disabled people in the community).

Through using Just Enough Support you will explore ideas and options for providing support through assistive technology, natural and community supports, and finally staff support. The process also offers a way of evaluating the ideas, and action planning the final decisions.

## Meet Paul

Paul is an absolute gent and a pleasure to be around, he has impeccable manners, is great fun and a very caring person.

Paul is supported by a provider in the Northwest. He formerly lived in a hospital for people with a learning disability and was resettled in 2005 after spending most of his life in hospitals. During his life in hospital Paul had become, at times, frustrated with the system, the people he lived alongside and has lost his identity and trust in people. When I was first introduced to Paul I was informed that he had challenging behaviour (this was the first thing that I was told about him before being handed three files). On meeting him the first thing that he said was that he was not a danger to others and just wanted to be listened to.

Paul was involved in all decisions about his future resettlement and used person-centred thinking and planning as a basis for this. He helped to create the person specification for his staff and was involved in recruitment. Through the multi-agency resettlement assessment process it was deemed that Paul would be more successful in his resettlement if he lived in a single tenancy with 24 hour support. It was very clear early on that Paul was very happy in his tenancy and started to grow in confidence.

Two years ago, during one of Paul's person-centred review meetings, he began to talk about having some time on his own, both at home and out and about. The past behaviour that had been demonstrated in the hospital around challenging behaviour had not surfaced so we were not worried about that.



The team had a number of concerns about his request, but they were also very supportive of a more independent life for him.

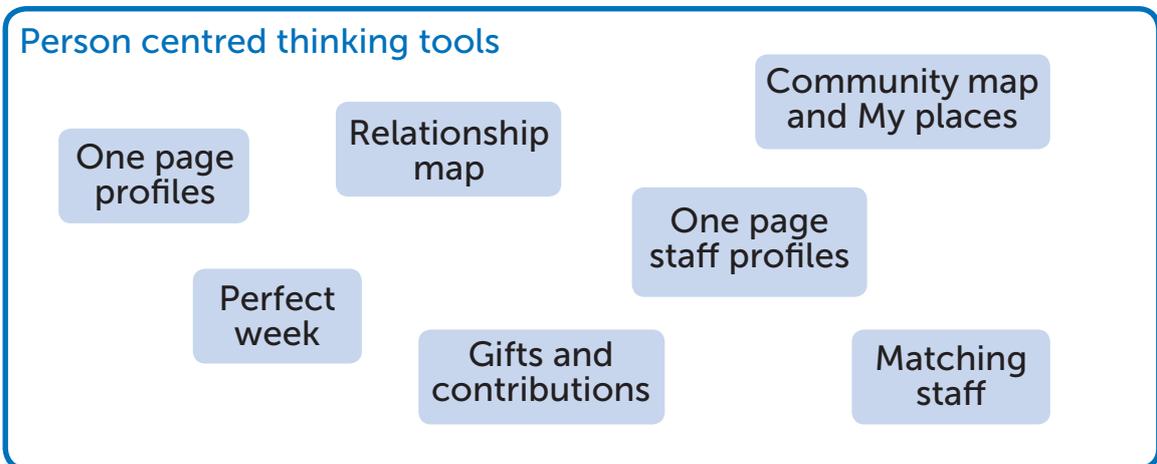
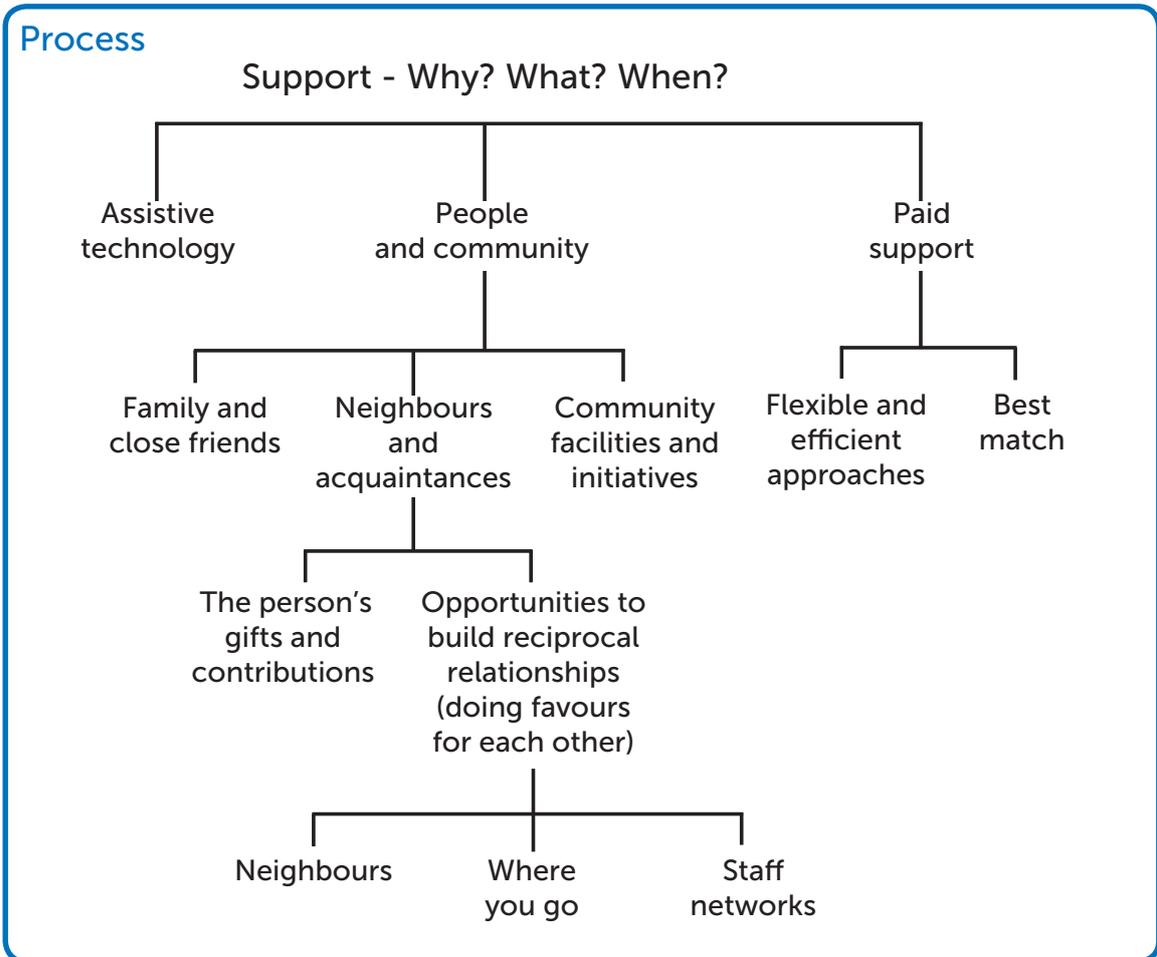
The team and Paul embarked on the person-centred risk process to identify the real risks and to see where support could possibly start to be reduced. Paul's one page profile, person-centred reviews and person-centred risk assessment gave the team lots of great information about what is important to him, how best to support him and how he wants to spend his time. This led very naturally into the Just Enough Support process for Paul. He was very clear about what he wanted to change about his life and how he needed to be included in all conversations and meetings about his future. Paul said that he chose his staff and really liked them all, however it is very difficult always having someone in your home and not having any time alone. He wanted to be like everyone else!

There are four stages to providing Just Enough Support: generating ideas; testing them (Do they work for the person? Do they provide enough support?); trying them and reviewing them.



# 1 The ideas stage

To generate ideas, we first of all clearly identify what, how much and when the person needs support, then think about three possible ways of people getting support – starting with assistive technology, then people and relationships, and finally paid staff.



## Who to involve

Paul was a part of every meeting that was held, he wanted to be the master of his own destiny. He has a very dedicated team and team leader around him who truly believe in his capacity to grow and develop. This was very important and affirming for him and he would say he has a great bunch of people on his side. This worked exceptionally well for him.

Paul also has a circle and circle facilitator who have been instrumental in supporting the decisions and offering subtle challenges to others if they became a little overprotective. As we knew that assistive technology was going to be a key factor, the local person responsible for this was also asked to contribute. There are some health concerns regarding Paul spending time alone at home and in the community, so it was vital to engage someone from health to be in at the early stages.

## Exactly what support does Paul need?

In this Just Enough Support process we accurately describe exactly what support the person needs, how much and how often, not what we currently provide.

Paul described what would be his perfect day, week, and then month. We were then in a position to balance this against what he currently received. This was done using an hour by hour look at his life. He pointed out to us times where he was watching TV and staff didn't need to be around, having a lie in with staff downstairs in his home, and it became apparent that night time sleep-ins were questionable. Interestingly when we unpicked Paul's nighttime routine we were told that Paul was the last person to go to bed at night as he liked to stay up later than the staff, but they would always come down and check he had locked up. This they admitted was unnecessary as he had always done a good job; they thought it was their duty of care. The next time they would speak to Paul or physically see him, was when he came down the morning after. One of the justifications for Paul having a sleep-in was that he had epilepsy. The staff member sleeping over would not have known if he had had a seizure so were surplus to requirements.

Paul knew his community and neighbours well and is positively seen in his local shop, bookies and when walking his dog. It was very clear that Paul was being over supported on many occasions.

## Could assistive technology help?

When we know exactly what support the person needs, how much and how often, we then need to think about whether assistive technology could help. Paul visited a smart house (a house with lots of assistive technology in place) in his local area to see what technology was available. An anxiety from the staff was the possibility that Paul could let strangers into his home, as he is



such a welcoming character and in addition, there were the dangers of his seizures at night with no staff around.

As a result of this, Paul has installed a camera and intercom so that he can see who is at the door before opening it. There is an epilepsy sensor in Paul's bed to alert the on call duty manager and this alert also goes through to emergency services, so that they can be deployed if needed.

## Are there other people or community initiatives that could help?

There are some person-centred thinking tools that can help here. We used the relationship map to start thinking about the people already in Paul's life.

- **Family.** The first place to start is with family. Owen Cooper suggests that we should talk to families about their own resources – time, connections, interests, skills and money, and think together about whether any of these could be used in ways to support the person.

*"Asking families to think about their own resources pays dividends. Worrying about offending people by asking, gets in the way." Owen Cooper<sup>1</sup>*

For Paul his only family is his nephew who lives in New Zealand. Paul keeps in touch with him through his computer, he uses Skype and email to let his nephew know the changes in his life. Paul always says that his mum would be very proud if she could see him now.

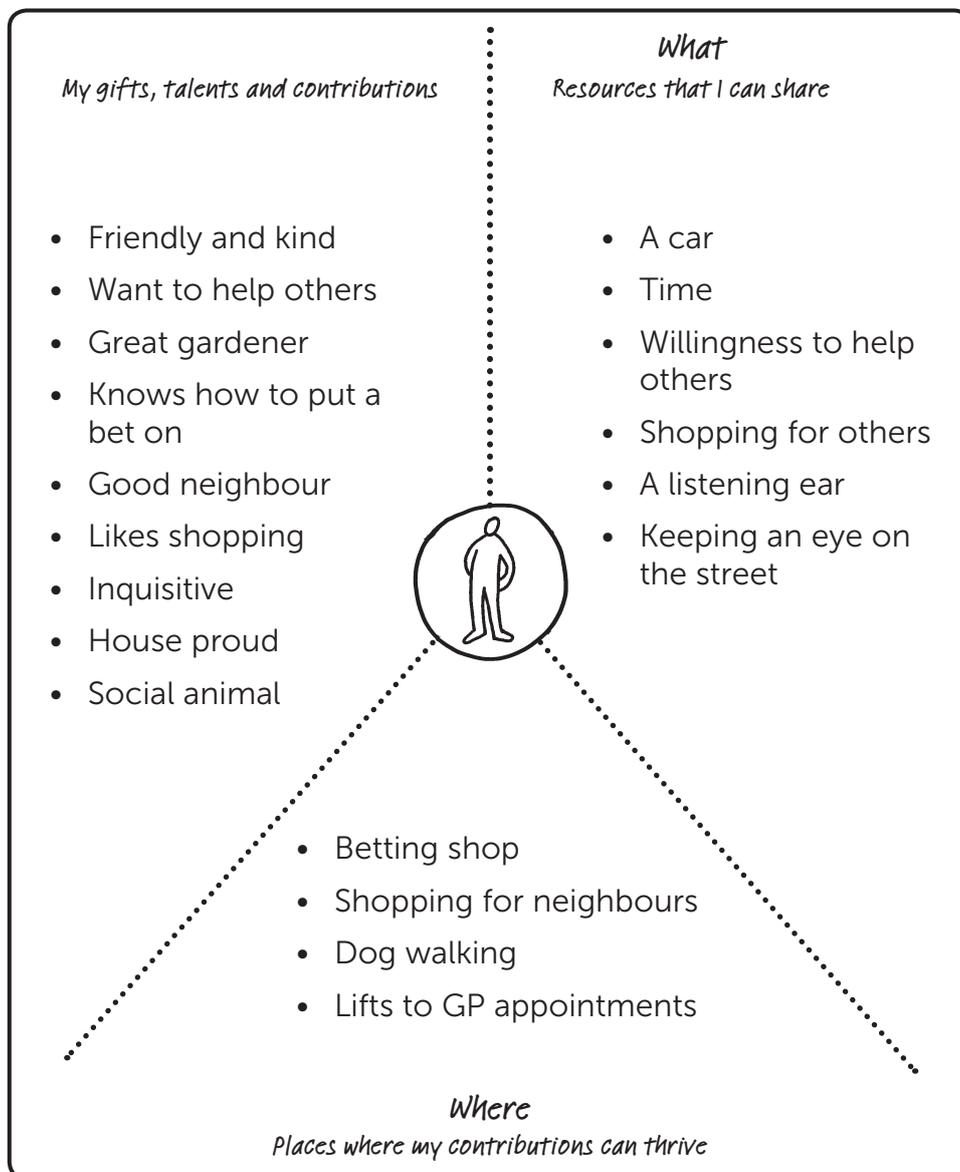
One relationship that was identified by Paul and his team as being crucial is his dog Poppy. The staff noted that they were worried about Paul getting distracted when out in the community on his own as this sometimes happens when he has support. "What if he walks into the road?" was asked. This created a great conversation and as the discussion unfolded it seemed that Paul never did this when he had Poppy with him as he was worried about her getting run over. Could Poppy become the companion when Paul is out and about, and act as a fantastic natural support?

- **Neighbours and acquaintances.** After family, we think about neighbours who live locally, and people who share the same interests or who go to the same places. The gifts and contributions person-centred thinking tool helps us to consider whether there any gifts or resources that could be shared, and possibly lead to reciprocal favours.

<sup>1</sup> All Together Now



Paul had tried many times over the years to build a relationship with his neighbour and it could be a possibility that because he always had a staff member with him that in itself had become the barrier. Sadly the neighbour's wife died and Paul worried that this elderly neighbour was not going out as much as he had. Paul started to knock at the door when he was going to the local shops to enquire if he needed anything; for a long time the neighbour refused. It was only during one of these conversations one day that Paul mentioned also going to the betting shop to place a bet that the commonality became apparent. They discovered that this was the thing that they had in common and soon broke down barriers. Paul regularly shops and places bets now for both of them and the neighbour is someone Paul can go to if he needs assistance, during the day or night. This is a real reciprocal relationship that is borne out of a mutual interest and respect.



- **Community initiatives and opportunities.** Paul has a love of gardening and has started his own micro enterprise. He produced a business plan with some support from his team and applied for a small set up grant from his provider. The fund that he applied for was the community innovation fund that had been set up to support such initiatives. Paul now grows salad, vegetables and flowers and undertakes gardening for others. He has gone to other neighbours in his street to give some of his produce away and feels like he is really contributing and the rest he sells. He would describe himself as a fair weather gardener though, so spring through to autumn only.

Paul has been thinking through the idea of setting up a home watch scheme and will continue to consider that.

## **Are there ways we could think differently about paid support?**

From Paul's perspective the ideas that we had started to implement and all the additional new ones were fantastic. Previously Paul had support with him 24 hours a day and that needed to change, everyone recognised and acknowledged this. Paul did understand this could and would have implications on his staff team.

Staff would have to become much more flexible. They would no longer be working in large blocks of time as Paul was clear where and when he wanted his support. It was, at times, difficult for the staff, as although they felt that this was great for Paul, they were being replaced by a dog, neighbour and technology. Naturally there was a sense of loss as Paul had chosen them to work with him. This was not a barrier that stopped the implementation but a factor to consider. The provider had to then accommodate the change in hours, rotas and the flexibility around this to enable it to happen.

In addition, Poppy has become the natural support when out and about and as any dog lover knows, you always get to chat to others who also have dogs. This has enhanced his community presence.

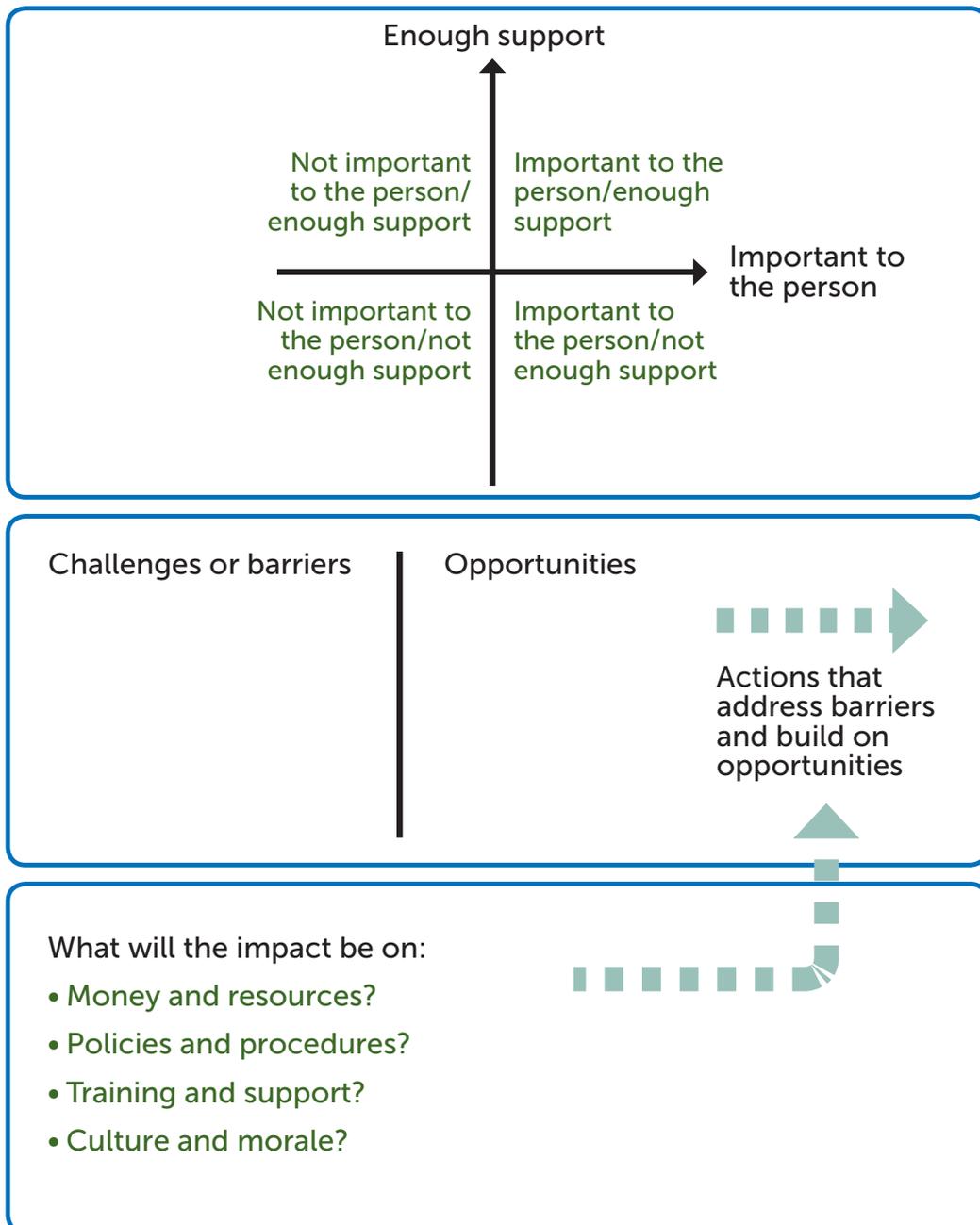


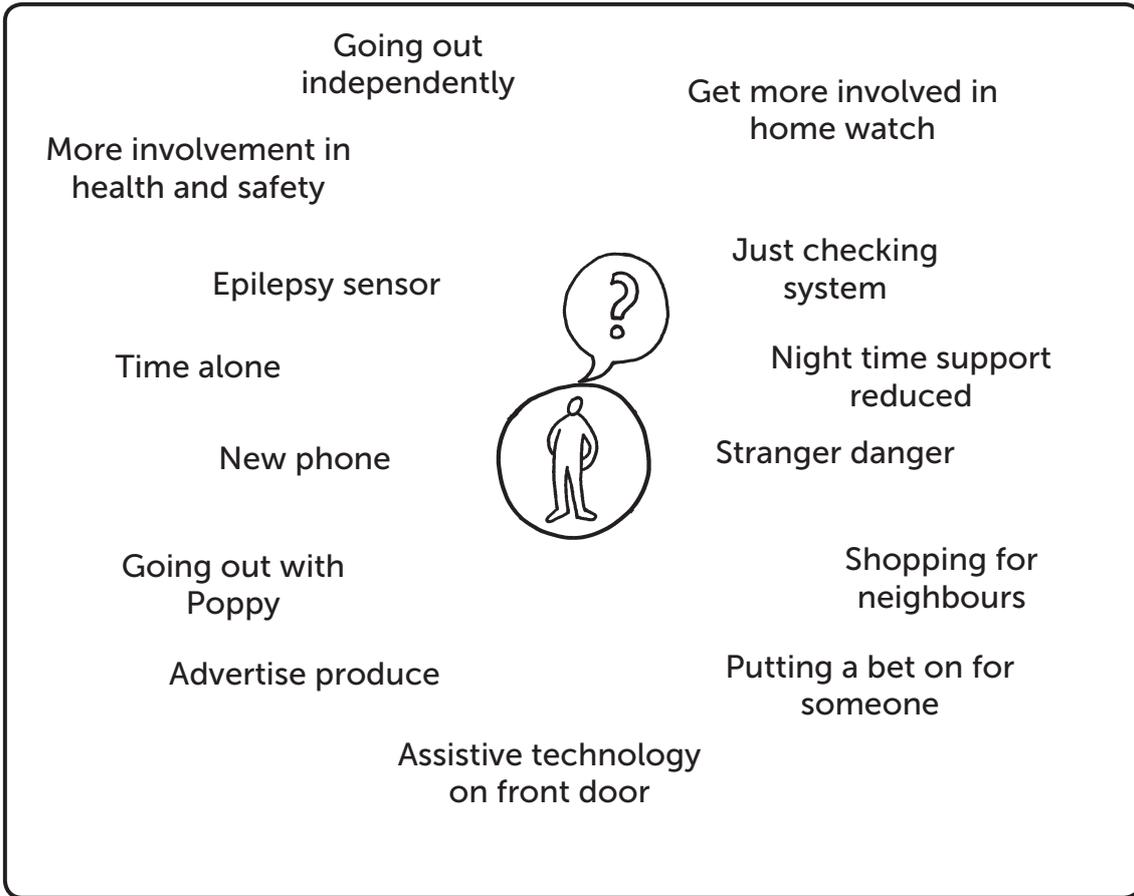
## 2 Testing the ideas

One way to test the ideas is to plot them onto a grid like the one here. Along one axis is what is important to Paul, and on the other axis is providing enough support.

There was no shortage of ideas and ways to ensure it provided enough support but not too much support.

Contingency plans were also put in place, covering all the 'what ifs'.





The objective is to look for ideas that fit into the top right hand quadrant. For ideas that fall in the bottom right hand quadrant, you could ask what it would take to move it to the top right hand quadrant (i.e. is there anything that we could do so that this idea would offer enough support?). Ideas that are on the left hand side, that do not fit with what matters to the person should be discounted.

Now that you have a list of ideas that look promising, you can then think more deeply about what the challenges and barriers might be to implementing these, as well as what opportunities they present.

It is also important to think about what this means in implementing them, for the immediate people affected and for the wider organisation. What resources might be required? Is any training or support required? Will taking this idea forward require changes to policies and procedures? Will there be any impact on culture or morale as a result of taking this forward? The end result of this should be an action plan that begins with directly checking the chosen ideas with the person (if they have not been part of the process) and then implementing them.



Paul and the people around him were very clear about what was to happen next and there was a nervous excitement for all.

The provider had to think very carefully about staff morale and currently they are undertaking a piece of work on their policy for friendships and relationships. It is important that the whole process needs to be transparent and engage the right people early in the process to ensure buy in.



## 3 Implement and review

Paul now has a new rota. He completes this on a four weekly basis with the team leader. He no longer has 24 hour support, but support that is tailored to meet his needs. The implementation issues around this are picked up through job consultation and team meetings. Paul lets the team leader know his views beforehand and is included for some of the job consultation and all of the team meetings.

One of the keys in making this approach work was ensuring that all the assistive technology needed was in place, and all possible eventualities covered. We cannot plan for everything and one of the surprising things that happened early on was that Paul's electrics fused. Paul put Poppy on her lead and walked round to another tenancy where we support people and asked for their assistance. Paul did not feel he needed to phone the on call duty manager as he had it under control, which shows his capability for using his initiative.

One of the obvious realities in this process is that if we demonstrate to people that we believe in their capacity the person shines.

Although the staff were initially worried about how Paul would cope, their fears have been alleviated and the staff team has been a shining example of people who truly understand their role and purpose in a person's life. They have since said that they did worry about how this would affect them and their work. We took the time to really engage with them at every point, did not dismiss their fears, either for Paul or themselves, and it has paid dividends.

Effectively if you engage with all concerned in a positive way, it can be a win, win, win.



# Conclusion

The 'win' for Paul is pretty obvious, he was listened to, we acted upon it, he is more independent and confident as a result. He chooses when to have his support and does not feel like he always has someone looking over his shoulder 24 hours a day. His relationship with his neighbour has blossomed as a result, he is seen as a helpful member of his local community and he has his loyal companion Poppy. I know that some will look at this situation and say, "Well what happens when Poppy is no longer with us?" and we feel we will cross that bridge when we get to it. Right now life is as good as it's ever been for Paul and he is in control.

From a provider perspective the 'win' is that we are truly providing a service that is driven by the person. The staff understand their role in his life and are flexible as a result. Paul's story inspires others in the organisation to take more control of their lives. Paul's service was undoubtedly an expensive one when it was originally set up and that was right for him at that time after spending over 50 years in a hospital. However we have been able to say to the local authority that the service he receives is of a much higher quality and the costs of his support has now halved.

The local authority see this as a 'win' because the service is of high quality, Paul is very happy, the risks have been managed in a person-centred way and they now have half of the cost of Paul's package, which can be put to good use to support another person.

