

Supported Living Case Studies



The activity monitoring system
that supports independence



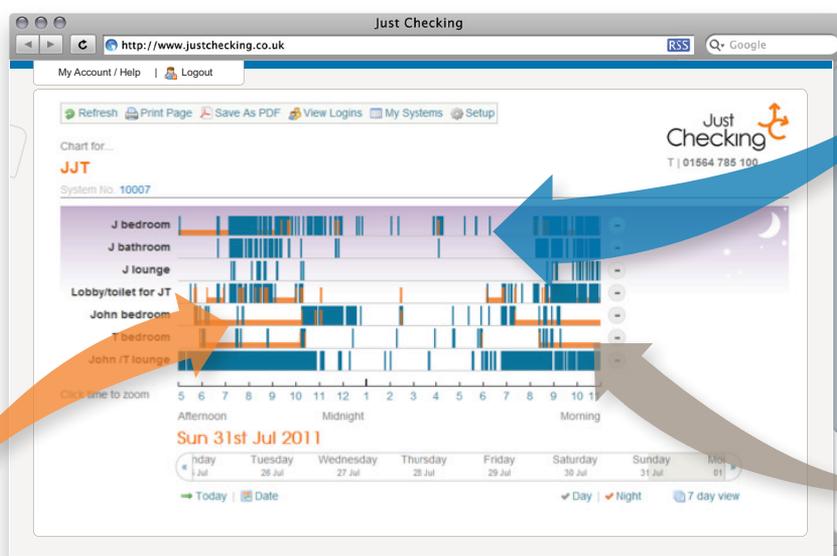
Just Checking monitors activity in a dwelling and provides a 24 hour chart on-line. It is a powerful assessment tool for commissioners and care providers who are working together to re-shape services.

Just Checking helps to focus on the most effective combination of staff and technology to empower service users to be more independent. Coupled with staff recordings and care plans, Just Checking brings an enhanced understanding of complex cases and the supported living environment. The result is that significant cost savings are achievable, whilst the quality of care is maintained.

The Just Checking system

- Confirms the optimum level of support
- Allows individuals to demonstrate their capabilities and have more control
- Leads to individualised care packages and improved quality of care
- Shows the effect of staff activity, encouraging them to focus on enablement
- Provides objective evidence on which to make changes and justify budgets

Jenny is in her bedroom with door closed



Staff assist Tim to the bathroom

John visits the bathroom and returns to his bedroom

Just Checking Multi-Person for shared living

A portable, reusable kit to monitor up to 3 or 5 service-user rooms, a staff room, and shared living rooms.



Just Checking Professional

A smaller kit with fewer sensors for individuals living alone.



Just Checking has two elements:

- The kit, installed in the property
- Web-service, which receives the activity data and gives on-line access to authorised users

Working together to optimise care services

Jack and Simon

Background

- Live in shared accommodation with waking night support
- Just Checking was installed to assess the safety of reducing night support to sleep-ins

Findings

- Both Jack and Simon slept well at night from midnight/1am to 7am
- Late bedtime was a result of learnt behaviours with waking night staff

Outcomes

- Sleep-in support was introduced, and within 2 weeks the sleep pattern had changed to 11.30pm -7am

Benefits

- Assurance that sleeping night support is appropriate
- Savings of £38,755 per annum



Jenny, John and Tim

Background

- Share a supported living house. Some nights are highly disturbed, so there is currently waking night support
- Just Checking was installed to identify any underlying cause for the disturbances

Findings

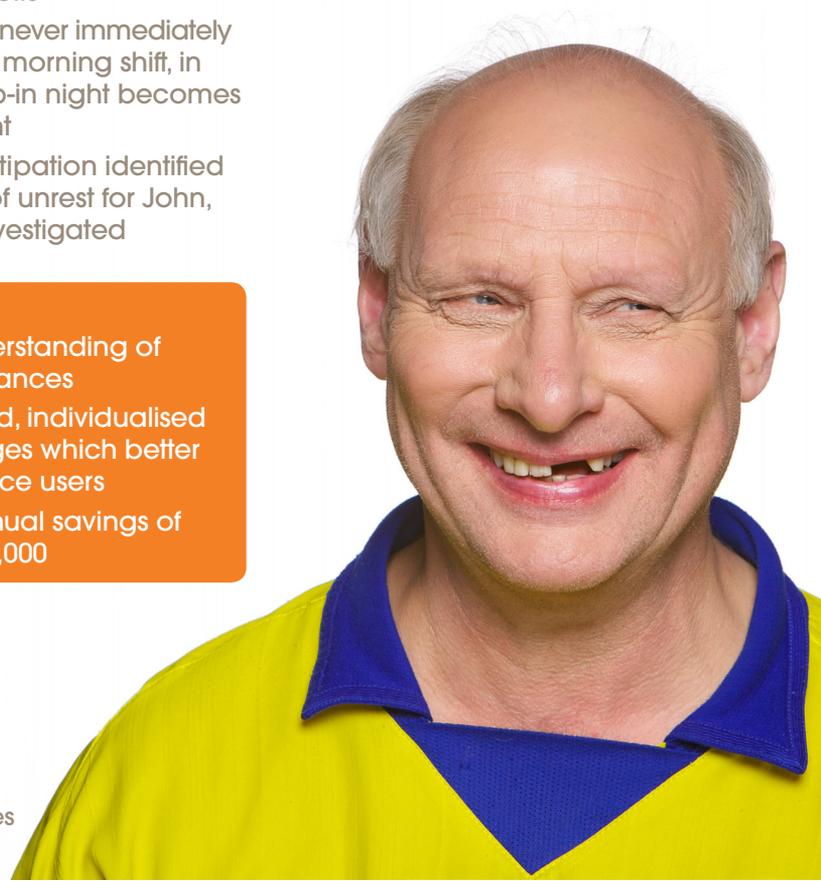
- Jenny was independent and did not need any night support
- Tim was also independent, but waking by 5am
- Both Tim and John were normally in bed by 9pm
- Over a 7 week period John had 9 unsettled nights, but his disturbed behaviour seemed to be ameliorated once he had visited the bathroom
- A lack of day time activity may be reinforcing early mornings and bedtimes

Outcomes

- Night support changed to a sleep-in night from 9pm-5am, with occasional disturbed nights billed as one offs
- Sleep-in shift is never immediately followed by a morning shift, in case the sleep-in night becomes a waking night
- Possible constipation identified as a source of unrest for John, so this was investigated

Benefits

- Clearer understanding of night disturbances
- More focused, individualised care packages which better support service users
- Potential annual savings of £20,000 - £30,000



Sally and Matt

Background

- Live in adjoining purpose-built flats with staff room in between. Matt is autistic and has epilepsy
- Care package stipulates hourly checks on both during the night, and staff report frequent night disturbances
- Package is to be reviewed, so Just Checking was installed for a more objective picture

Findings

- Only Matt was disturbed at night, not Sally
- Disturbances often correlated with hourly checks; staff used Matt's more comfortable living room rather than the staff room, meaning they had to walk through his bedroom to reach Sally's flat
- Not much of the day time was spent out of the flats
- Predominant issue was epilepsy monitoring for Matt

Outcomes

- Night checks reduced to every two hours and staff area made more useable, which reduced night-time disturbance
- Day staff worked on increasing activities
- Move to sleep-in nights possible if Matt's epilepsy can be reliably detected

Benefits

- Highlighted need for epilepsy monitoring to move to sleep in night support
- £30,230 annual saving if change can be made to sleep-in nights

Gary

Background

- Severely autistic Gary shared a supported living house with several other adults
- Service provider recognised that his challenging behaviour was probably caused by overwhelming stimulus in the busy house
- Just Checking was installed to monitor a trial period in a single-person flat

Findings

- Gary was more at ease in a quieter, more predictable environment where he had more control
- Challenging behaviour was greatly diminished
- Confirmation that Gary was safe spending some time alone

Outcomes

- Gary remained in his own flat
- Support was reduced to less than full time. Gary appreciated some time alone

Benefits

- More suitable environment for Gary's needs.
- Care provider's recommendations justified by objective evidence



“We believed the system would prove Colin needed more support. In fact it showed that he had plenty. Colin turned out to be more capable than everyone thought.”

Care provider

60 year old Colin, who had lived most of his life in hostels and residential care, was moving to his first supported living flat. An insulin dependent diabetic, Colin was to receive 4 hours of support worker time a day, 8am-10am and 4pm - 6pm, during which time a community nurse would also call to administer his insulin.

Colin's sister was worried whether he would cope in his own flat. The care provider manager initially thought it was unlikely that 4 hours support a day would be sufficient.

Just Checking showed that Colin was using the kitchen and bathroom but he spent the first night on the sofa; he wasn't clear that all the rooms were 'his'. He went out occasionally and returned safely. On two occasions he missed the community nurse call, but when the system showed he had arrived home, the care provider was able to arrange for a later call to administer his insulin.

From time to time, the front door was left ajar first thing in the morning, but Colin explained that he propped it open "to let out the cooking smells" when he prepares breakfast.

Benefits

- Confirmed correct level of support
- Demonstrated Colin's capabilities



Delivering person-centred care more efficiently

Chris and Adam

Background

- Live in a terraced house with full time care
- Adam has severe epilepsy so waking night staff carry out half hourly checks throughout the night and assist him to the toilet
- Neighbours complained of excessive noise at night and the tenancy agreement was at risk

Findings

- Chris and Adam usually in bed by 10pm and don't wake until 6am
- Sometimes a great deal of staff activity in lounge at night as well as long periods of no activity
- Care varied with who was on duty; sometimes there was a lack of toileting routine and seizure checks

Outcomes

- New night contract structured so that staff spent some time in other parts of the property and better practise evidenced with regards to staff protocol
- A 'meet and greet' with neighbours helped with community acceptance and support
- Verification of time of a night-time fall and resulting staff action

Benefits

- Invaluable input to quality of care at night and safeguarding incident
- Helped to strengthen service users' voices and tenancy agreement was not terminated unfairly

Katie

Background

- After managing independently in a shared house, Katie moved to her own flat
- The Community Support Team noticed that she wasn't engaging in daily living tasks like showering and accessing the kitchen, although an OT assessment indicated that she was capable
- Just Checking was installed to ascertain Katie's routine

Findings

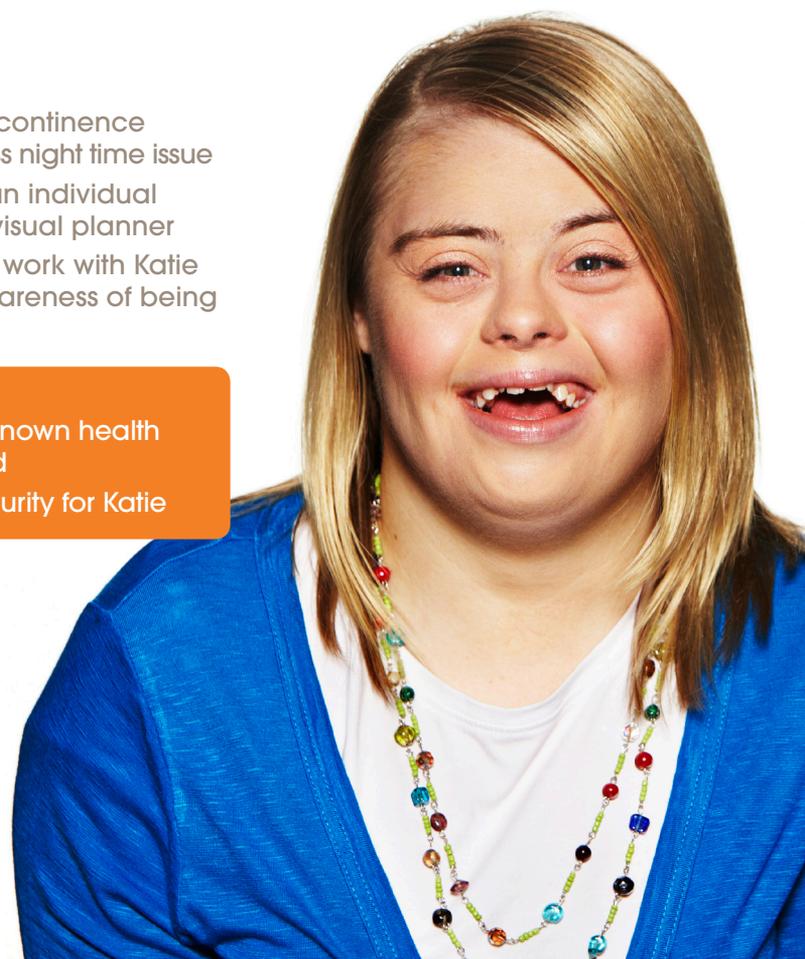
- Nights were highly disturbed due to toileting need
- There was a lack of structured routine: Katie was aimlessly pacing around the property for long periods of the day
- The front door was often left open

Outcomes

- Referral to the continence nurse to address night time issue
- Structuring of an individual routine with a visual planner
- CST is going to work with Katie to raise her awareness of being safe at home

Benefits

- Previously unknown health issue identified
- Increased security for Katie



Kevin and Jane

Background

- Kevin and Jane share a supported living house
- Staff suspected that Jane, who has Pradi-Willi Syndrome, was taking food at night
- Installed to understand nightly routines and assess the need for waking night support

Findings

- Jane did access the kitchen 8 out of 15 nights
- Kevin regularly slept from 8pm-5am, getting up rarely to use the toilet and returning to bed promptly
- There was little call on the staff overnight

Outcomes

- Staff have now reduced the amount of food available
- As 8pm-5am is not a normal sleep-in time, an individualised night shift of 7pm-7am was arranged. This is independent of the morning and evening care which concentrates on social activity

Benefits

- Assisted staff to manage risk for Jane
- Allowed for a highly individualised care plan
- Savings of £47,000 per year

Stephen, Josie and Mary

Background

- Share a supported living house
- Just Checking installed by Care UK to assess the support needs and abilities at night

Findings

- The good intentions of the staff, leaving the staff room door open and making regular checks throughout the night, were disturbing all 3 service users
- Busy use of the utility room at night was also disturbing sleep
- Stephen took himself to the toilet a couple of times each night, and returned to bed without assistance
- Mary was very restless at night

Outcomes

- Staff routine changed to respond to need rather than 'patrol'
- With no checks, Josie sleeps right through the night
- Mary continues to be restless at night, but remains in her room
- None of the service users require assistance during the night

Benefits

- Allowed Care UK to look at individual needs in a long term high support service
- Provided evidence of where support is no longer needed, while maintaining security for the individuals



“It is quick and easy to install and I found the Just Checking support centre very helpful and approachable.”

Jess Dunne, Occupational Therapist

Dorset County Council wanted to assess the safety of reducing Pauls’ night time care from waking to sleep-in nights.

Paul wasn’t going to bed until around 1.30am, getting up several times to go to the toilet, and then waking at 7.30am.

Just Checking showed that there were no clear routines for Paul or the staff. Night shifts started at 10 or 11pm, with handovers lasting from 5 to 60 minutes. On unsettled nights Paul was in the bathroom for long periods. It was also evident that Paul didn’t participate in evening activities.

The night shift was firmly scheduled for 10pm with a 15 minute handover. Staff were asked to encourage Paul to participate in evening activities to help tire him out, and an investigation about potential bowel problems was instigated. If the new routine is established, Paul could be supported with sleep-in nights and a bed occupancy sensor to alert the carer.

Benefits

- Identified possible health problem linked to unsettled nights
- Helped support staff to be clear about their role
- Potential saving of £27,300 per year

Jess Dunne, Occupational Therapist
at Dorset County Council:

“I initially piloted Just Checking as an assessment tool in ensuring value for money is being achieved in learning disability packages. Over 4 months, I completed 10 assessments ranging from 2 - 7 weeks, and the equipment was in use at all times. The system demonstrated significant savings and facilitated improved quality of care.”





Just Checking is a web-based activity monitoring system. Small wireless sensors in a dwelling generate a chart of activity, which is accessed via a secure website. Just Checking is used to plan and deliver care in supported living.



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 Government
Procurement
Service *supplier*

All names have been changed. Photographs are of actors