

community links INTERMEDIATE HOSTELS

Evaluating the Social Return on Investment



community links

Community Links Intermediate Hostels: Evaluating the Social Return on Investment

Community Links conducted a Social Return on Investment (SROI) study to evaluate the impact of their 'Intermediate Hostels':

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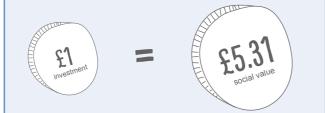
The Intermediate Hostels provide a recovery service for people with mental health issues, aiming to support their clients to achieve more independent lives.

The study looked at the difference the Hostels made to their clients, carers and other health and social care agencies. It also looked in depth at what changed for residents at the Hostels, and at the key aspects of the service which make it successful.

In addition, it provided recommendations to Community Links and partner organisations on how the Hostels can be even better.

KEY FINDING

The study found that for every £1 invested, the Hostels generated a headline figure of £5.31 worth of social value through the outcomes they achieved.



This social value was mainly generated through:

- Improved quality of life and lasting improvements in mental health and independence for clients
- Savings to public funds achieved through clients returning to independent living in the community rather than requiring long term residential or acute care, and wider NHS services

About Social Return on Investment (SROI)

SROI studies aim to provide an assessment of the financial value, of the impact of a service or intervention, relative to the investment it receives. The following methodology was applied:

- Background information and desk top research gathered.
- 2 Workshops held at each of the three hostels with current and former clients, carers and staff.
- Comprehensive information and feedback gathered through interviews. Preliminary conclusions were discussed at further meetings at each of the three hostels.
- 4 Information was brought together in a 'theory of change', summarising the change experienced by clients and others as a result of the hostels' work. These changes were first quantified and then given equivalent financial values, or 'proxies', in accordance with SROI principles.
- 5 The SROI ratio was calculated from these figures. More significantly, the calculation also established the key factors through which the hostels generate social value, and hence where further improvement efforts might be focused.

About the Hostels

The Community Links hostels provide both resettlement and prevention services:

Resettlement is for clients with severe, enduring mental health problems or personality disorders, usually transitioning from a hospital ward or rehabilitation unit. Clients can be referred for resettlement for up to 8 months, with the aim of improving mental health and wellbeing, selfmanagement and living skills to achieve more independent living in the community.

Prevention is for people with mental health issues living in the community to come to the hostels for short stays of around 4 days, in order to prevent their mental health deteriorating and avoid further hospital stays.

Clients generally have high support needs and often challenging backgrounds including offending and violence. Due to the high risk which is often involved, the hostels are a route to independent living where no alternative route would be available.

KEY FINDING

The report concluded that the Hostels are very different to a NHS hospital or an in-patient rehabilitation unit.

Relationship building and engagement with staff is intrinsic and while clients are given considerable freedom, there is an expectation that they take responsibility for their actions and behaviours.

Often this provides an opportunity to test out learning in a safe and supportive environment.

- The Hostels are staffed 24/7 and provide intensive rehabilitation with a focus on recovery and therapeutic risk taking to improve self-management.
- Intensive 1 to 1 support and group sessions are backed up by informal interactions between clients and staff through communal living.
- Staff also give practical support on aspects such as welfare benefits, housing and managing medication in order to build capabilities and self-reliance.

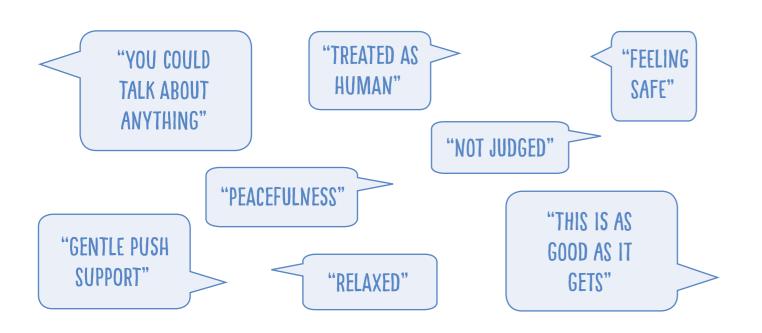


How do the Hostels Make a Difference?

The study found that the Intermediate Hostels provide a "unique and largely very successful service in Leeds".

When asked about what aspects of the hostels clients found most helpful, there were a number of recurring themes:

- Staff being there 24/7 and available to provide support when needed. Even if they did not need support at a particular time, the presence of staff was very reassuring for clients.
- The nature of the support provided by staff was much more informal, practical and accessible than clients experienced elsewhere, and many clients valued the practical as well as the therapeutic aspects of this. Several clients specifically mentioned the value of 1:1 support from staff; others mentioned more general aspects of support and communication.
- The structure and routine of hostel living, together with the development of practical skills to assist in independent living, such as cleaning, shopping, cooking and dealing with outside agencies.
- The development of social skills and 'camaraderie' of hostel living. Clients learn to manage conflict and regulate aspects of their behaviour that could negatively impact on meaningful relationships. This supports their ability to live successfully in the community.
- The hostels also generate a safe and relaxed environment which clients clearly benefit from.
- Fundamentally, feedback from clients was that the hostels were an essential 'stepping stone' from hospital, rehabilitation or an unsustainable situation in the community, to a more stable and independent life.



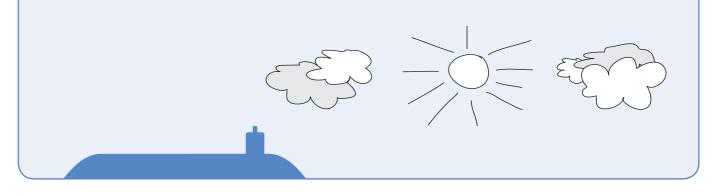
What Difference is Made to the Client?

KEY FINDING

The study found that the top three changes reported as a result of a stay at the Hostels were:

- taking responsibility
- 2
- 3 Increased socialisation and social skills

Other changes included: greater confidence, better use of time, practical problems being sorted, gaining new tenancies, and simply a place where they could rest and "escape".





CLIENT A stayed initially for resettlement, followed by intermittent prevention stays.

He had been living with, and dependent on, his elderly parents, but over time successfully developed the capability and confidence to manage by himself.

He now lives by himself in his parent's former home (they are both in a residential care home) and manages very successfully with minimal support.

He attributes this success to the structure, routine and living skills that the hostel gave him over a sustained period.

Better mental health - including reduced reliance on medication, better motivation,

Improved living skills - practical skills and the ability to cope with independent living

CLIENT B came direct from a hospital ward to the hostel for resettlement as part of his recovery from a "catastrophic nervous breakdown".

On arrival he still felt very unwell but felt that his stay at the hostel allowed him to progress "from rock bottom to face the world again and commune with it".

Therapeutic aspects of his stay at the hostel were aided by external advocacy support and by continued contact with his CPN.

Ultimately he felt able to move into his own flat where he now lives with a very modest amount of external support.



Benchmarking and Data Analysis

The Intermediate Hostels use the 'Outcomes Star' to track clients' progress towards goals which they identify at the beginning of their stay. Outcomes Star benchmark data indicates that the Intermediate Hostels outperform the average of other services nationally. There is strong evidence that these outcomes, where successfully achieved, are lasting. It is this aspect of the hostels' work that delivers the greatest value, both for clients themselves and for other parts of the healthcare system.

OUTCOMES STAR BENCHMARK COMPARISONS

Organisation	Average Initial Assessment Score	Average Score for Last Star Chart in Chosen Period	Average Change Achieved
Community Links	5.1	6.3	1.2
Benchmark	5.7	6.6	0.9
Difference	-0.6	-0.3	0.3

WHAT DO THESE FIGURES HIGHLIGHT?

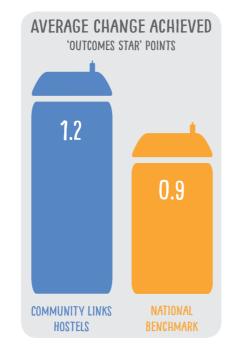
- The average change achieved by the Intermediate Hostels exceeds the benchmark by a factor of one-third
- Clients arrive at the Intermediate Hostels with greater support needs than other comparable hostels nationwide - this is indicated by the lower than average initial assessment score

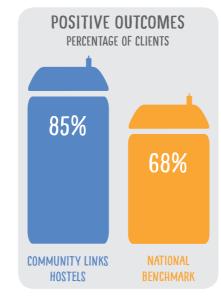
POSITIVE AND NEGATIVE OUTCOMES (% OF CLIENTS)

Organisation	Positive Outcome	Negative Outcome	No Change in Score
Community Links	85%	6%	9%
Benchmark	68%	27%	5%
Difference	17%	-21%	4%

WHAT DO THESE FIGURES HIGHLIGHT?

- 17% more clients achieve positive outcomes than the national benchmark
- Just 15% of clients had either no change or a negative outcome compared with a benchmark figure of 32%





Outcomes for Other Stakeholders

FAMILIES AND CARERS

The Intermediate Hostels benefit clients' family members partly through providing respite from their caring responsibilities, and also through improvements in clients' mental health, which in turn helps to improve family relationships. These improvements too can be long-lasting.

NHS AND OTHER SERVICE PROVIDERS

The Intermediate Hostels provide a route out of hospital and back into the community for clients with serious mental health problems. This alleviates pressure on NHS wards in the short term and enables re-integration back into the community, reducing the need for long-term institutional care.

Savings are also accrued through reductions in repeat admissions to NHS wards and interventions by the emergency services as the Hostels improve clients' ability to self-manage.

When are the Hostels of Most Benefit?

Evidence shows that hostels are most effective for clients who:

- Are on a pathway to recovery, and are genuinely committed to achieving that recovery
- aspects of the hostels
- Have a mental illness as their primary diagnosis (i.e. rather than drugs or alcohol)

Where hostels have not worked for particular individuals, it is usually where one or more of these three criteria has not been met.

There are a number of reasons for this, many external to Community Links in that they relate to the mental health care system as a whole, but this nevertheless constrains the Hostels' overall level of achievement.

About The Outcomes Star

The Outcomes Star is a nationally recognised and benchmarked tool used to measure and support progress with service users against agreed goals. These may include; managing mental health, social networks, work/training, relationships and physical health. The star is completed collaboratively between worker and service user and reviewed regularly.

· Benefit from the rehabilitation model of an ordered routine and communal living

Recommendations

- Community Links should explore further ways to reduce the proportion of clients whom the hostels are not able to help.
- Community Links should continue to explore, with NHS Leeds and Leeds Adult Social Care, alternative options for those whose long-term conditions mean that they will not benefit from the Intermediate Hostels or other forms of transitional support.
- 3 Community Links should discuss with commissioners the possibility of making prevention periods more flexible so that two years becomes an average rather than a fixed period.
- 4 Community Links should discuss with commissioners ways in which resettlement and prevention beds might become more interchangeable, so that for example additional short prevention stays could be offered if this averts voids in resettlement beds.
- 5 Community Links should review the point at which prevention clients are considered as being discharged from the service and ensure that discharge summaries are appropriately completed for these clients.
- 6 Community Links should liaise with its partners on the Accommodation Gateway Forum, aiming at some appropriate point to review the impact of this forum on referrals to the Intermediate Hostels, and whether any change in the balance of provision is indicated.
- 7 Community Links should discuss with NHS commissioners the possibility of sharing more detailed data on individuals' hospital admissions and A&E attendances, in order to better ascertain the effectiveness of prevention stays at the Intermediate Hostels.

Acknowledgements

This report was commissioned by Community Links and undertaken by Andy Bagley of Real-Improvement. Andy is an Accredited Practitioner on Social Return on Investment (SROI).

The evaluation was greatly assisted by many people including Community Links clients, carers and staff, and representatives from other organisations including; voluntary sector providers, NHS Leeds & York Partnership Foundation Trust, NHS Leeds North Clinical Commissioning Group and Leeds City Council Adult Social Care services.

The full report is available from Community Links:

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