# The costs and the benefits of *Small Support* organisations in England

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# 1. Introduction

This document explores the costs and benefits of individuals with a learning disability, mental health condition and/or autism receiving support from a *Small Support* organisation in England. *Small Support* organisations are unique support providers that have a number of things in common, including: planning and delivering support in a truly person-centred way; person-led staff recruitment and training; structuring and using funding around the person; a separation of housing and support; strong partnerships between the individual and family, commissioners, and providers; and staying small.

Due to the amount and detail of the data needed, it has not been possible to conduct a full cost benefit analysis of *Small Support* organisations in England. Instead, this document illustrates, via five costed case studies, the value for money and benefits such organisations offer through an exploration of the potential costs to the public purse they help avoid (the fiscal value<sup>1</sup>). Where possible, the social value<sup>1</sup> (the wider gains to society such as improvements to health; educational attainment; access to transport or public services; safety; or reduced crime) of the support provided has also been calculated.

The individuals and scenarios described in the five case studies in this document are based upon real people who are currently supported by a *Small Support* organisation in England. The unit costs used to calculate the costs and benefits of the services these individuals receive, have been taken from the *Small Support* organisations themselves for financial year 2018/19, trusted published sources<sup>1</sup> and, where appropriate, have been adjusted to 2018/19 prices for comparison<sup>2</sup>. Actual costs have been used where available, with estimated costs (based on published sources<sup>1</sup>) highlighted with an \* within each case study.

Curtis, L. and Burns, A. (2018), Unit Costs of Health & Social Care 2018, Kent: PSSRU <a href="https://www.pssru.ac.uk/project-pages/unit-costs/unit-costs-2018/">www.pssru.ac.uk/project-pages/unit-costs/unit-costs-2018/</a>

Foster, D. (2016). Who gets housing benefit and what does it cost? The Guardian <a href="https://www.theguardian.com/housing-network/2016/jun/22/housing-benefit-cost-claimants-single-mothers#:~:text=How%20much%20does%20housing%20benefit,average%20%C2%A3110.34%20a%20week.">https://www.theguardian.com/housing-network/2016/jun/22/housing-benefit-cost-claimants-single-mothers#:~:text=How%20much%20does%20housing%20benefit,average%20%C2%A3110.34%20a%20week.</a>
GMCA (2019), Unit Cost Database v.2.0 <a href="https://www.greatermanchester-ca.gov.uk/what-we-do/research/research-cost-benefit-analysis/">https://www.theguardian.com/housing-network/2016/jun/22/housing-benefit-cost-claimants-single-mothers#:~:text=How%20much%20does%20housing%20benefit,average%20%C2%A3110.34%20a%20week.</a>
GMCA (2019), Unit Cost Database v.2.0 <a href="https://www.greatermanchester-ca.gov.uk/what-we-do/research/research-cost-benefit-analysis/">https://www.greatermanchester-ca.gov.uk/what-we-do/research/resear

<u>calculator?number.Sections%5B0%5D.Fields%5B0%5D.Value=6138&current\_year=986.7&comparison\_year=1</u> <u>139.3</u>

<sup>&</sup>lt;sup>1</sup> Burns, T., et al. (2016). 'Chapter 7: OCTET Economic Evaluation'. In T. Burns et al. Coercion in mental health: a trial of the effectiveness of community treatment orders and an investigation of informal coercion in community mental health care. <a href="https://www.ncbi.nlm.nih.gov/books/NBK401957/">https://www.ncbi.nlm.nih.gov/books/NBK401957/</a>
Curtis, L. and Burns, A. (2018), Unit Costs of Health & Social Care 2018, Kent: PSSRU <a href="https://www.pssru.ac.uk/project-">www.pssru.ac.uk/project-</a>

<sup>&</sup>lt;sup>2</sup> Bank of England Inflation calculator (2020). Bank of England <a href="https://www.bankofengland.co.uk/monetary-policy/inflation-">https://www.bankofengland.co.uk/monetary-policy/inflation-</a>



The information on previous costs were provided by the small supports organisations so are offered here to present an indication of the cost rather than a detailed breakdown. We are aware that for many people in or having left secure settings would have funding packages that include dowries, 117 and pooled budgets. We are also aware that we have not been able to include many of the hidden costs to individuals and families. It is our intention, as we progress with the small supports programme, to record, monitor and publish all the costs of some people leaving secure accommodation and moving into small supports type provision'

# 2. Costed Case Studies

### Claire

Claire is an autistic young lady. In 2014/15 Claire was inappropriately placed in a service with two other autistic people who shared nothing else in common. In this placement Claire's outcomes were considered to be poor; she had high levels of anxiety that required significant professional input and was unable to progress to college or develop skills in her own home. Claire received 15 hours and overnight sleep in support each day. In this placement, the estimated fiscal cost of Claire's support per year was:

	Cost	To whom
Social Care	125,580.00	Local Authority
Housing Benefit	£5,749.00	Dept. of Work and Pensions
Psychiatric Support*	£2,632.62	NHS
Total	£133,961.62	

In 2016, a *Small Support* organisation assisted Claire to move into her own flat. Claire chose the flat and the support organisation matched staff to her and her needs. As a result of this move and change in support, Claire has become more confident. She now speaks out for herself, has developed skills to enable her to live increasingly independently and is able to ask support staff for help if she needs it. She has also begun attending college, is making new friends, takes an active role in drama and singing groups in her spare time, and is enjoying social events. Claire now receives 86 hours a week of support during the day and no longer needs overnight support as she will call the manager of the service if she has a problem. The estimated fiscal cost of Claire's support per year is now:

	Cost	To whom
Social Care	£80,236.00	Local Authority
Housing Benefit	£5,749.00	Dept. of Work and Pensions
Total	£85,985.00	

This is an estimated total saving to the public purse of £47,976.62 per year

In addition, Claire's attendance at college may allow her to contribute to the economy in the future. It is estimated, based on Claire achieving level 2 qualifications at college, that she will contribute £2,000 per year (or £75,902 over her lifetime) to HM Treasury.

### **Paul**

Paul is man with a brain injury and associated learning disability, as well as a history of paranoia, aggressive behaviour and causing physical harm to others. Before being supported by a *Small Support* organisation, Paul was living in an out of area Assessment Treatment Unit (ATU). The actual fiscal cost to the NHS and local authority (LA), of Paul's time living in the ATU was £338,000 per year.

When Paul was able to leave the ATU, a *Small Support* organisation in his hometown worked with him to find the 'new luxury flat by the sea' he longed for, with a matched staff team to support him. Unfortunately, after a short time, Paul was given notice on the first flat he moved into due to complaints from his neighbours. However, due to the good relationship the *Small Support* organisation had with the landlord of this flat, they were able to find Paul another flat that met his needs and desires. Furthermore, due to the relationships Paul had developed with the staff supporting him, he was able to move into his new flat without any undue distress; something that would not have happened previously. Paul has now been living in this flat for some time with no complaints from his neighbours and he feels his life is a 'success!'. Paul does still have periods where he becomes paranoid and aggressive towards others, but this does not lead to physical harm being caused like it used to.

In this new arrangement, the estimated fiscal costs of Paul's support are:

	Cost per year	To whom
Social Care	£164,528.00	Local Authority
Mental health*	£2,303.00	NHS & Local Authority
Offending behaviour*	£3,108.00	Police
Housing benefit	£5,749.00	Dept. of Work and Pensions
TOTAL	£ 175,688.00	

This is an estimated total saving to the public purse of £162,312.00 per year

# **Anthony**

Anthony is a man in his 40s with a learning disability and a history of offending, including behaviors which put him and others at risk, and problem drinking. Before being supported by a *Small Support* organisation, Anthony was on a Community Treatment Order (CTO) and received 15 hours support per day and overnight support that he shared with the person he lived with (Anthony shared his tenancy with this person and they both chose this arrangement). In this set up, the estimated fiscal cost of Anthony's support per year was:

	Cost per year	To whom
CTO (including alcohol dependency costs)*	£40, 019. 25	NHS and Local Authority
Social Care	£106,801.24	Local Authority
Offending behavior*	£5,749.00	Police
Housing Benefit	£5,467.59	Dept. of Work and Pensions
TOTAL	£158,037.08	

When Anthony came off his CTO and was placed under a Guardianship Order, a *Small Support* organisation was able to carefully and steadily work with him to reduce his direct support and enable his access to the community without supervision. This was very much what Anthony wanted and was developed over time through careful negotiation with Anthony and support from his clinical team.

As of June 2020, Anthony has support for 38 hours per week and overnight support that he still shares with the person he lives with. As a result, the estimated fiscal cost of Anthony's support per year is currently:

	Cost per year	To whom
Social Care	£44,646.68	Local Authority
Offending*	£2,103.00	Police
Housing Benefit	£5,467.59	Dept of Work and Pensions
Alcohol dependency*	£1,100.00	NHS
Learning Disability Nurse*	£1,457.70	NHS
TOTAL	£54,774.29	

This is an estimated total saving to the public purse of £103,262.79 per year

In addition to the financial impact, the change in Anthony's support has made an exponential difference to his life. The matched staff team that are supporting Anthony have worked hard with him to develop a strong and trusting relationship. As a result, Anthony's confidence has visibly improved, he is more at ease in himself and his past 'high risk' behaviours have all but diminished (although some careful and honest conversations about daily challenges do sometimes have to take place). Prior to the Covid 19 Lockdown (which he has coped really well with), Anthony was enjoying going to town on the bus, taking craft and cookery classes, being a member of a walking club, and attending and organizing social events for the groups he is now part of.

These improvements in Anthony's life are not only hugely beneficial to him, they also provide further savings to wider society. It is estimated that the social value of Anthony being supported by a *Small Support* organisation saves a further £5,006.50 per year, due to the reduction in his alcohol dependency and offending behaviour.

# Georgina

Georgina has a learning disability, mental health condition and a history of offending, including behaviors which put her and others at risk. Before being supported by a *Small Supports* organisation, Georgina lived in an ATU away from the area she knew as home, for over 10 years. In the ATU Georgina received a lot of professional intervention due to her mental health deteriorating and her behaviour becoming increasingly challenging. In the ATU the actual fiscal cost to the NHS and LA of Georgina's support was £319,450.56 per year.

When Georgina left the ATU, she was able to move back to the area she knew as home. A *Small Support* organisation began working with Georgina to help match a support team to her and her needs. Georgina now lives in an area she knows, with family and friends nearby. She is involved in her local community and tells the *Small Support* organisations that she is happier. Georgina does still experience some challenges with her mental health (self-harming/suicidal behaviour, threatening others), but these are much reduced and well supported. In this set-up the estimated fiscal cost of Georgina's support is currently:

	Cost per year	To whom
Social Care	£145,600.00	Local Authority
Offending behaviour*	£2,072.00	Police
Self-harm/suicidal medical treatment*	£850.00	NHS
Mental Health Support*	£2303.00	NHS & Local Authority
TOTAL	£150,825.00	

This an estimated total saving to the public purse of £ 150,505.55 per year

### **Steve**

Steve is blind and has a learning disability. Before being supported by a *Small Support* organisation, Steve lived in an out of area ATU. Whilst in the ATU, Steve did nothing; he sat on the sofa all day, often significantly self-harming. The ATU reportedly couldn't find any staff to work with Steve as he was 'too challenging'. The actual fiscal cost to the NHS and LA of Steve's support in the ATU was £234,000 per year.

Steve was supported to move out of the ATU by a *Small Support* organisation. This organisation helped Steve move into his own home in his hometown, near to family and friends, with a closely matched support team. Within four weeks of moving into his new home, the instances of Steve's self-harming were down by 25%. Now, almost 2 years on, Steve no longer self-harms. Steve also now lives an incredibly active life, swimming, climbing, cycling, walking and learning circus skills most weeks, as well as regularly spending time with his family, who are integral to his life. Steve also raises money for charities that matter to him by taking on challenges, like walking and cycling long distances across Europe.

The estimated fiscal cost of Steve's current support is:

	Cost per year	To whom
Social Care	£ 166,400.00	Local Authority
Housing Benefit	£5,467.59	Dept. of Work and Pensions
TOTAL	£171,867.59	

This an estimated total saving to the public purse of £62,132.41 per year

In addition to this saving, Steve's fundraising is felt to offer invaluable social value benefits to the charities that he collects money for. His current fundraising activity sits at over £900.



# 3. Summary

It is important to remember that reducing costs to the public purse is not the primary aim of any *Small Support* organisation. Each organisation's purpose is to improve the lives of people with a learning disability, mental health condition and/or autistic people, through bespoke support – and that can come at a cost. However, consideration of whether something represents value for money is of inevitable interest to those providing and commissioning services, where organisations can both improve people's lives and potentially reduce costs to the public purse it is important to highlight this.

In the absence of sufficient data to conduct a full cost-benefit analysis of a *Small Support* organisation in England, the costed case studies outlined here provide an illustration of the fiscal and social value of such organisations. We can see from this analysis, that *Small Support* organisations are providing highly person-centred, bespoke support that leads to improved outcomes for individuals. When this is compared to the ATU or previous organisations an individual was supported by, *Small Support* organisations are not only improving the quality of life of the individuals they work with, they are doing so with much less impact on the public purse. In fact, in some cases, the support an individual receives from a *Small Support* organisation also reduces the social cost of their support as well as allowing them to contribute to the economy.

The five case studies in this paper represent a saving of over half a million pounds to the public purse a year; particularly to health, social care and police budgets in England. This information suggests that *Small Support* organisations offer both good value for money as well as improved outcomes for those they support. As a result, *Small Support* organisations should be considered more widely as an option for individuals with learning disabilities, mental health condition and/or autism.