





# What is Necessary to Embed Active Support in Supported Living Services

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Acknowledgements to collaborators

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### Outline

What is Active Support

Why is it important to PBS and quality of life outcomes in supported living services

What's the problem

Propositions about sustaining Active Support – and good outcomes

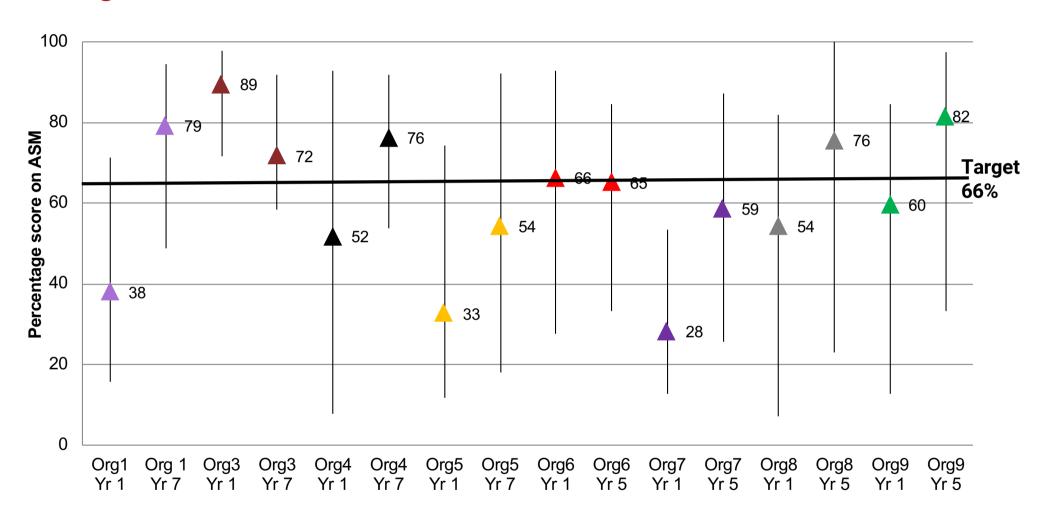
Findings from large scale Australian study predictive factors of good Active Support

Implications for services

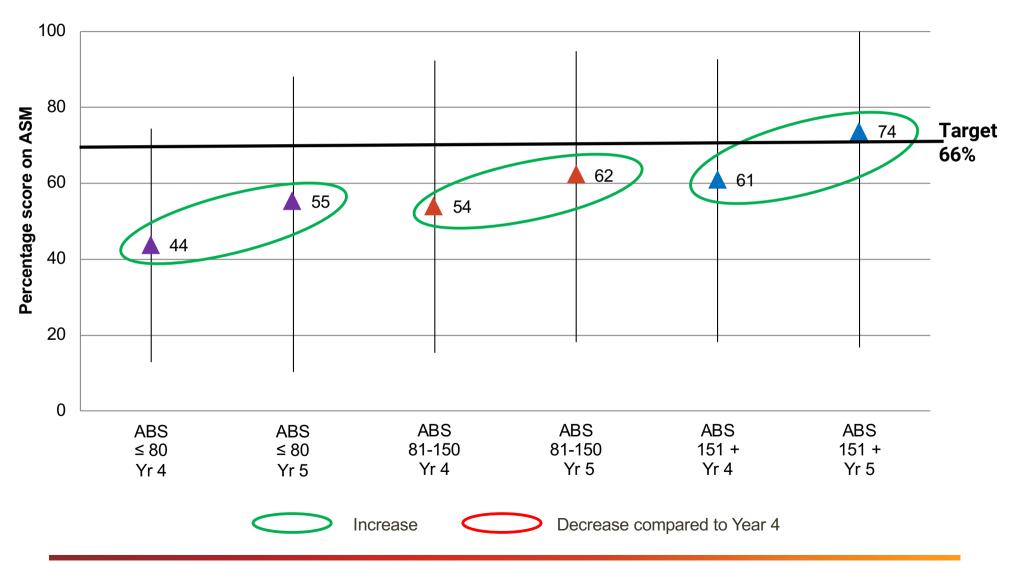
## Background

- Small group homes default option in Australian since early 1980s
- Approx. 17,000 people with intellectual disabilities live in these services in Australia.
- Numbers will not decline any time soon
- Significant variability in quality of support
  - Over time
  - Within services
  - Between organisations

# Variability of outcomes over time, within and between organisations



# Variability by level of impairment: People with higher support needs consistently have poorer support



# Propositions about factors affecting quality of life outcomes in supported living

- Lots of propositions level of individual, service and organisation
  - Font line staff and managerial working practices
  - Culture
  - Organisational characteristics, policies and processes
  - Resources and settings
  - External environment
  - (Individual characteristics of service users)
- Realist review found little research on many of these factors (see Bigby & Beadle-Brown, 2018)

## Strongest – or most promising evidence in the literature

- Staff practice reflects Active Support
- Staff are trained in Active Support, with class room and handson components
- Adequate resources for sufficient staff with the right skills to enable participation but not too many that they obstruct it
- Settings are small (1–6 people) dispersed, homelike

### **Emerging evidence**

- Type of staff culture
- Practice Leadership
- HR policies
- Specialist staff practice in addition to Active Support that responds to the specific needs of individual - communication - positive behavior support

## **Active Support**

- Active Support practice that enables people with intellectual disabilities to engage in meaningful activities and relationships (Mansell & Beadle-Brown, 2012).
  - Every moment has potential Little and often Graded assistance Choice and control
- Effective in changing the way staff interact, moment to moment
- "Significant increases in the amount of time residents spent engaged in all types of activities at home" systematic review 14 studies (Flynn et al., 2018, 994)
- Some evidence re skills improvements, self-determination, mental health issues such as depression, reduction in challenging behaviour
- But a foundational element of Positive Behaviour Support, provides context for successful implementation (Ockendon, Ashman and Beadle-Brown, 2014)
- Associated with staff job satisfaction and a lower propensity to leave employment (Beadle-Brown, Hutchinson & Whelton, 2012; Rhodes & Toogood, 2016).



Clip 5 See http://www.activesupportresource.net.au/

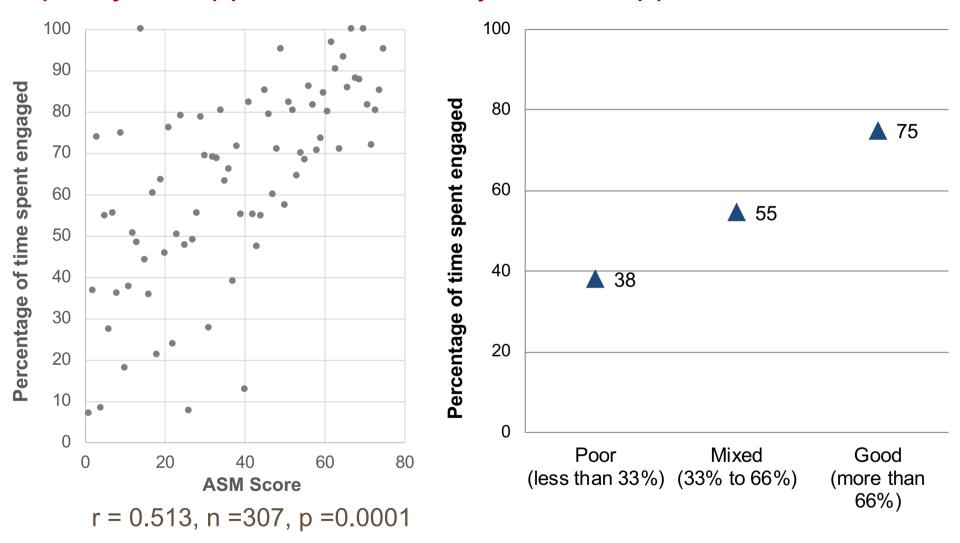
# Why Active Support

- To address the low levels of engagement, especially for people with more severe intellectual disabilities:
  - On average, people are disengaged waiting for something to happen - for 50 minutes in every hour.
  - People are engaged in social activity (e.g., talking to support workers or other residents) or non-social activity (e.g., cooking, cleaning, watching TV) for an average of 10 minutes in every hour.



Bigby, C., Bould, E., & Beadle-Brown, J. (2016).

# Positive relationships between levels of engagement and quality of support measured by active support measure.



## Active Support is difficult to embed in services

- Many organisations in UK and Australia have adopted Active Support
- Few are doing it consistently well quality declines over time.
  - UK study 72 services only 53% of service users were receiving good Active Support (Mansell et al., 2008)
  - Australian study 41 services in 6 organisations
    - 50% service users receiving good Active Support
    - only 2 organisations providing good active support to more than half of service users (Bigby et al., 2017)

# Outcomes and staff practice high and lower performing organisations

Sample average and people with higher support needs – variability across and between groups

	Whole Sample	Org 9	Org 11	UK study Good active support (Ashman, Beadle-brown, 2006)
Engagement in meaningful activity and relationships	65% (52%)	86% (83%)	55% (49%)	60% (54%)
Quality of Person Centred Active Support	67% (59%)	82% (74%)	53% (50%)	79% (79%)
Time spent receiving assistance or contact from staff	15 mins (15)	29 mins (30)	11 mins (8)	23 mins (25)

## What impacts on delivering good Active Support

- Staff training type, take up and coverage (Qian, Tichá and Stancliffe (2017)
- Staff motivation qualifications, competing demands and quality of leadership (Mansell et al., 2008; Mansell & Elliott, 2001)
- Management commitment. support from managers and organisational processes (Fyffe, McCubbery, & Reid., 2008; Mansell et al., 2008).

### But little research or strong evidence

- Tentative influence of classroom and interactive training, low staff-toresident ratios, relatively more residents (up to 6 max), management support and processes, such as team meetings.
- Weak evidence for the influence of organisational leadership in systematic review 10 studies re implementation (Flynn et al., 2018)
- Limited by use of staff self-report data about strength of practice leadership differ from use of an observational measure (Beadle-Brown et al., 2014; Mansell et al., 2008), (Bould, Beadle-Brown, Bigby & Iacono, 2018b).
- Limited by statistical methods that have not accounted for multi-levels of data, individual, service and organisational increases the likelihood of Type 1 error

# Aims of Australian longitudinal study of group homes 2009 - 2017

- What factors predict good active support?
- What factors predict increases over time?
  - Individual service user
  - Service/group home
  - Organisational

Sub-sets of data

## Longitudinal

same services over time

#### Cross sectional

- different services at different times
- different services at one time

4 organisations 2009 - 2017(7 years) 4 organisations 2013 - 2017(5 years) 14 organisations 2-7 years 3 organisations 2015 - 2017(3 years) 3 organisation 2016 - 2017(2 years)

### Methods

#### Data about Individuals and Services

- Service user characteristics
- Quality of staff support (Active Support Measure 15 items)
  - Direct observation of staff practice and resident engagement
- Staff training, satisfaction, perspectives about management (staff survey)
- Staff culture (GHCS on line self report survey)
- Strength of practice Leader (Observed Measure of Practice Leadership) Demonstrated importance of observational methods rather than staff self report

### **Data about Organisations**

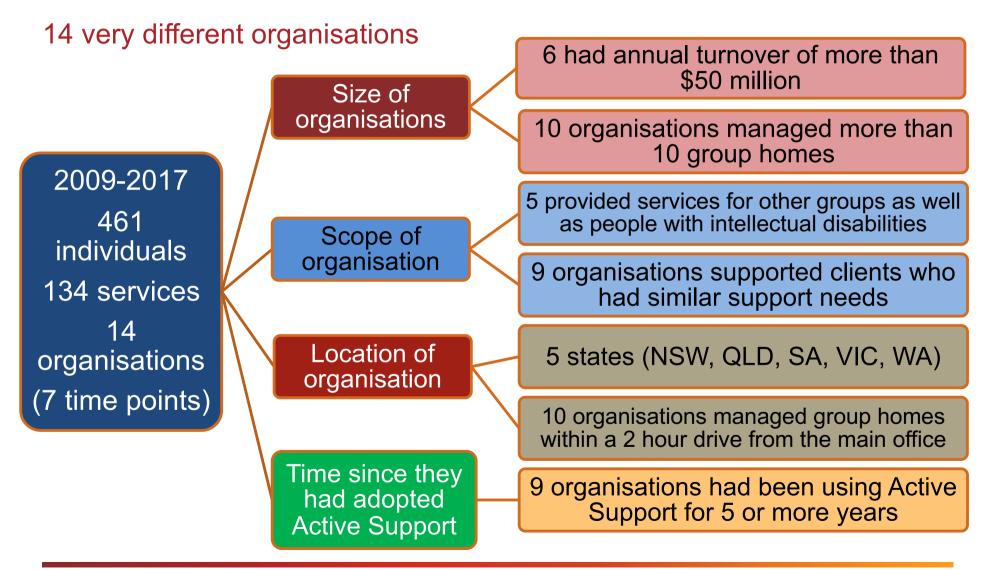
- Interviews with senior managers first and last year
- Document review

# **Practice Leadership**

- QUALITY OF LIFE
- Focusing on the quality of life of service users
- Allocating and organising staff
- Coaching staff
- Regular one-to-one supervision
- Regular team meetings

(Beadle-Brown et al., 2014; Mansell, Beadle-Brown, Ashman & Ockendon, 2004)

# What predicts good Active Support Large cross sectional data set



# What predicts good Active Support?

Large data set – but limited organisational data

Cross sectional data set - 461 residents, 134 services, 14 organisations 7 time points

Multi-level modelling

Size of the service 6 or less residents

Similarity of residents' levels of adaptive behaviour

Smaller number of services managed by the organisation































Higher levels of adaptive behaviour

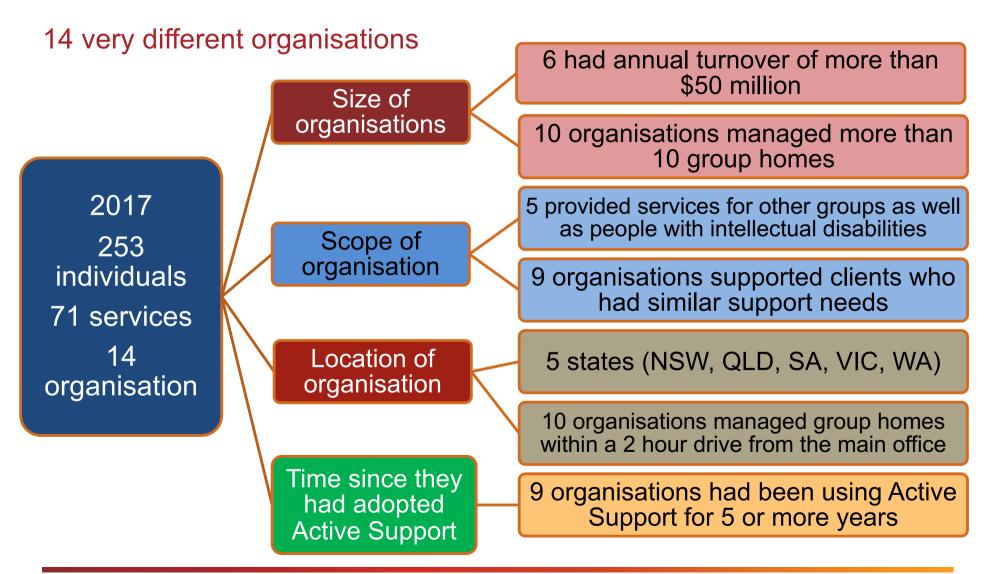
Better practice leadership More staff trained in Active Support

Greater time implementing Active Support

- •Bigby et al., submitted
- Individual level accounts for 16% of variance
- Service level accounts for 48% of variance
- Organisational level accounts for 88% variance

# Exploring organisational factors further

2017 data set deeper analysis of organisations Using qualitative methods and transforming qual data into quant



# Qualitative analysis organisational documents and interviews - 3 categories – 8 sub categories

Focus on practice and Active Support of among senior leaders

Shared prioritisation of practice and Active Support (9)

'Practice is really really important' 'shared language'

Strongly supporting practice leadership (7)

'Isn't just what we' like you to do this is a must'

Different and competing priorities (5)

'I'm flying the flag a bit solo at the moment'

Still in early stages of adopting Active Support (5)

'its just time and getting all the stuff in place'

Some lamented shifts caused by changes in senior personnel and external factors

# Organisation of practice leadership

#### **Coherence of documentation**

Close to every day service delivery (10)

Concentration of practice leadership tasks (10)

Clearly documented practice framework (4)

Active Support evident in support worker position descriptions (11)

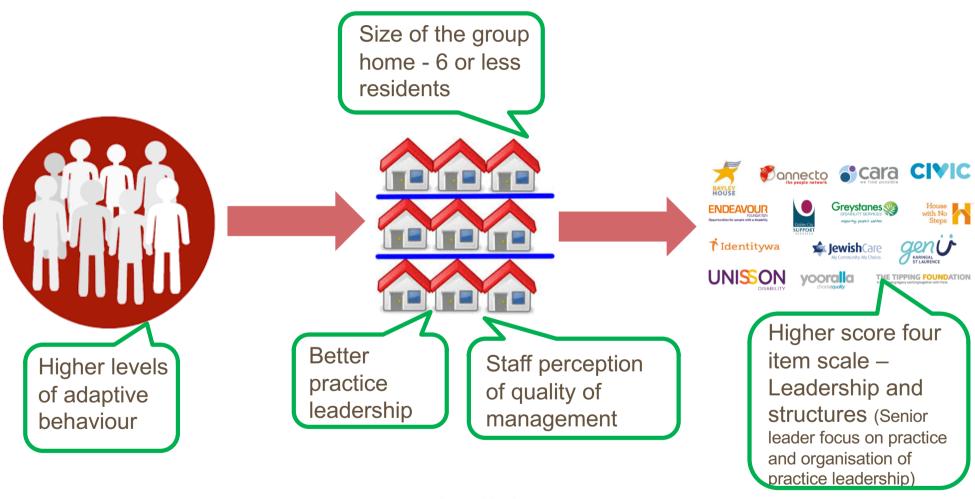
							3. Coherent d	ocumented
	1 Senior leaders' focus on practice and AS				2 Organisation of PL		expectations about AS	
% services					2.1			
(SU's) with					Close to	2.2		
majority of	1.1 Shared		1.3	4 Still	every	Concentration		
service users	prioritisation	1.2 Strongly	Different	early	day	of PL and line	3.1 AS in	3.2 AS central to
receiving	•	supporting	competing	stages	service	management	practice	expectations
good AS	and AS	PL	priorities	AS	delivery	tasks	framework	way staff work
100% (93%)	1	1	0	0	1	1	0	0
100% (92%)	1	1	0	0	1	1	0	1
86% (88%)	1	1	0	0	1	1	0	1
83% (70%)	1	1	0	0	1	1	1	1
71% (71%)	1	1	0	0	1	1	0	1
71% (62%)	1	1	0	0	1	1	1	1
57% (48%)	0	1	1	0	1	0	1	1
57% (42%)	0	0	1	1	1	1	0	1
50% (62%)	1	0	0	1	0	0	0	1
50% (55%)	1	0	0	1	0	0	1	1
40% (41%)	0	0	1	0	0	1	0	0
33% (35%)	0	0	1	0	0	0	0	1
33% (31%)	0	0	1	1	1	1	0	0
29% (21%)	1	0	0	1	1	1	0	1

Scale developed comprising 4 items - Cronbach's Alpha = 0.729

# What factor predict good Active Support?

2017 data

253 residents, 71 services, 14 organisations - Multi-level model



- Bigby et al., submitted
- Individual level accounts for 19% of variance within individual residents
- Service level accounts for 64% of the variance between services
- Organisational level accounts for 88% of variance between organisations

## So what about service culture?

Five dimensions from ethnographic work (Bigby et al., 2012, 2015, 2016)

Basis for Group Home Culture Scale (Humprhries 2018)

Dimension	Underperforming Group Homes	Better Performing Group Homes
1. Alignment of power- holders' values	Misalignment of power holders' values with the organisation's espoused values	Alignment of power holder and staff values with the organisation's values
2. Regard for residents	Otherness	Positive regard, as part of the same diverse humanity
3. Perceived purpose	Doing for	Making the life each person wanted it to be
4. Working practices	Staff-centred	Person-centred
5. Orientation to change and new ideas	Resistance	Openness to ideas and outsiders

Coherent, Enabling, Motivating, Respectful

## Group Home Culture Scale (Humphreys, 2018)

#### 7 Factors

- Supporting well being.
- Factional
- Effective team leadership
- Collaboration within the organisation
- Social distance from residents
- Valuing residents and relationships
- Alignment of staff with organisational values

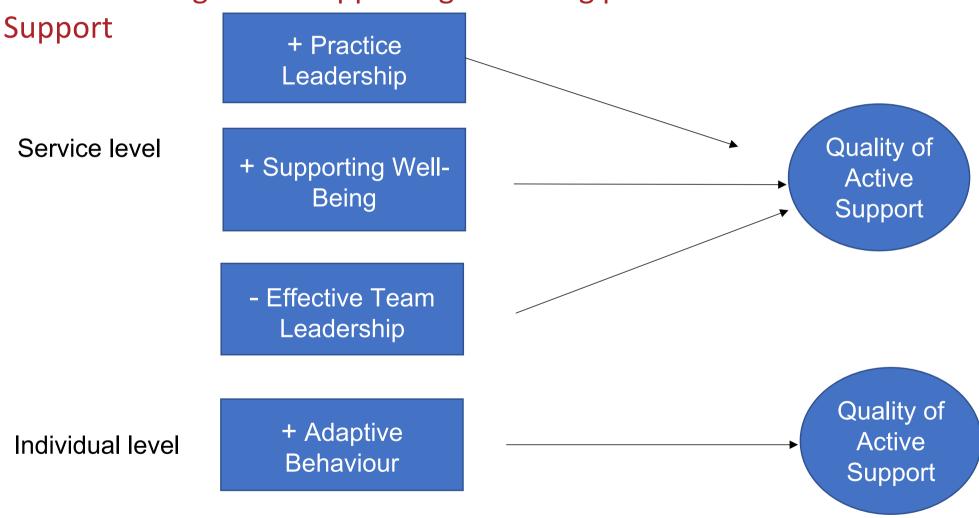
As well as value for analysis

Useful diagnostic tool – for services and organisations

### Sub-set of 2017 cross sectional data

76 service users, 86 front line staff, 20 services, 11 organisations.

Staff teams higher on supporting wellbeing provide better Active



Summary Predictors of good **Active Support** across data sets

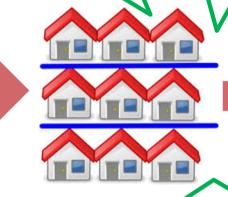
Staff culture Supporting Well-Being

Size of the group home -6 or less residents

Similarity of residents' level of adaptive behaviour

- Smaller number of services
- Greater time implementing Active **Support**



































Higher levels of adaptive behaviour

- Better practice leadership
- More staff trained in Active Support
- Staff perception of quality of management

Senior leader focus on practice and organisation of practice leadership (leadership and structures scale)

<sup>·</sup>Bigby et al., submitted

## Priority Factors To Embed Active Support

- All staff trained in Active Support
- Every individual support worker and team receives strong Practice Leadership.
  - practice of support workers is regularly observed
  - they receive feedback and coaching
  - discuss Active Support in team meetings and individual supervision
  - know what is expected of them on every shift.
  - a focus on the quality of life of the people they support core of everything they and managers
- Practice leadership organised so practice leaders close to front line practice,
- Practice leadership tasks not split between different positions and practice leaders
- Support workers confidence in management of the organisation.
- Services that are small and do not support more than 6 people.
- Optimal mix of people supported in any service, i.e. people whose supports needs are not too different, but who do not all have challenging behaviour.
- All senior managers in the organisation understand Active Support, recognise and value high quality practice.

Attention to staff culture

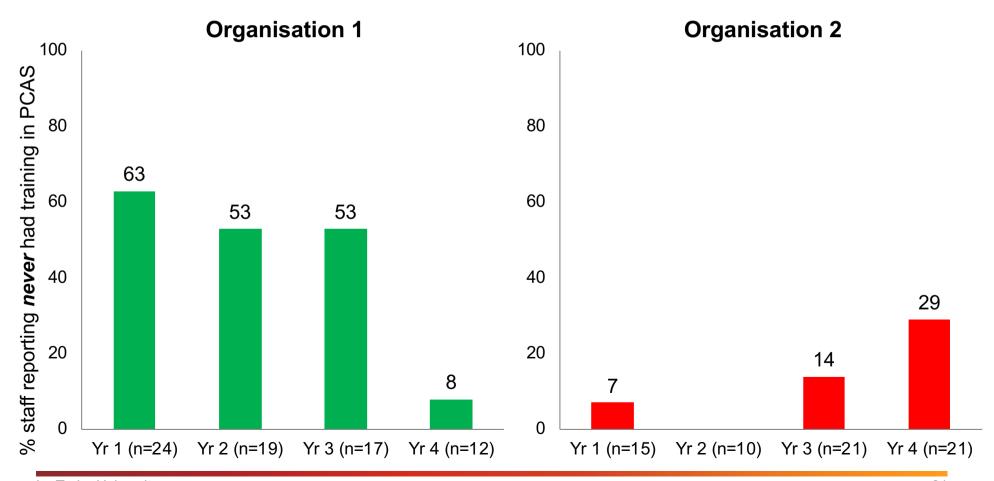
# Good practice is fragile - Time is an interesting factor

- A long time does not guarantee anything
- But a start up period seems necessary for most organisations 5 years?
- Focus of organisational leadership changes over time –as staff change and priorities shift – time confounded by leadership
- External demands create competing priorities

Organisation	2009-2010	2011-2012	2013	2014	2015	2016	2017	
1	0%	0%	20%	60%	80%	60%	100%	Key
2	100%	75%	71%	71%	43%	38%	71%	67% - 100%
3	25%	0%	40%	40%	60%	80%	100%	50% - 66% Less than 50%
4	13%	0%	50%	63%	75%	44%	33%	2000 than 00 /0
5			50%	60%	25%	20%	40%	
6			0%	14%	29%	0%	57%	
7			25%	75%	63%	38%	71%	
8			57%	57%	20%	0%	86%	
9					14%	13%	50%	
10					25%	0%	33%	
11					50%	33%	29%	
12						29%	57%	
13						0%	83%	
14						25%	50%	

# Training needs continuous attention Never had Active Support training

- Decrease for Org. 1: Year 1, 63% vs. 8% in Year 4.
- Increase for Org. 2: Year 1, 7% vs. 29% in Year 4.



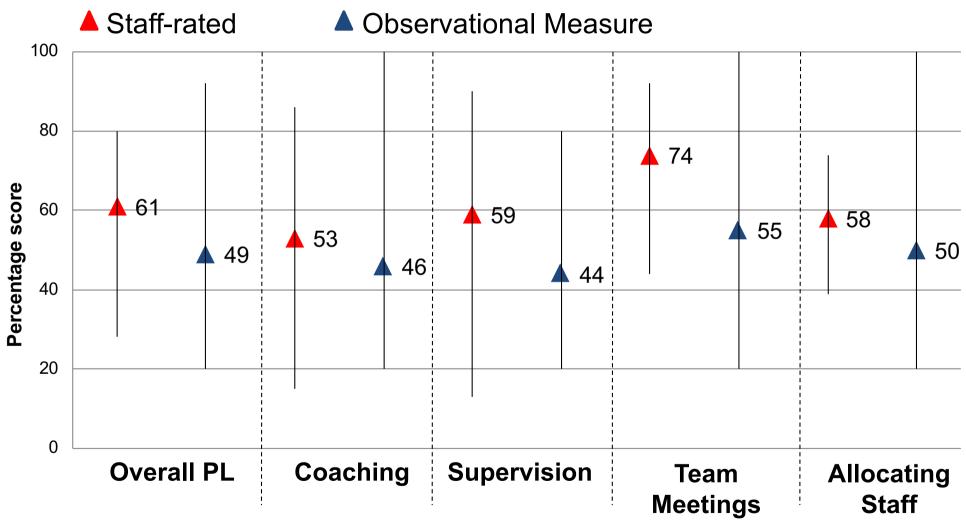
## The need for observation - Unreliable paperwork

Managing content [not big lies] to reflect what should have happened

I know that [the supervisor] wants us to let them [residents] do all of this stuff for themselves....The truth is... if I just say to [one resident]: "Get your own breakfast," we are going to have chaos. Whereas, I can get it [breakfast] for her—I don't mean without her helping; she can get the bowl. ... And she's happy, I'm happy... So then what comes of that is telling lies in the paperwork because, you know, saying "he got his own breakfast." Well, he kind of did.... Yeah, so we're telling lies on the shift. Not big lies, we're not telling bad things. We are just slightly misleading whoever is going to be reading them [the notes]...[On] my very first shift... one of the other workers told me, "Just say [in the paperwork] they did it themselves." (Quilliam, Bigby, Douglas, 2018 p 6)

## The need for observation - Problems with self report

 Strong tendency to over estimate the quality of support and service user outcomes.



Bould, E., Beadle-Brown, J., Bigby, C., & Iacono, T. (2016). Measuring practice leadership in supported accommodation services for people with intellectual disability: Comparing staff–rated and observational measures. *Journal of Intellectual & Developmental Disability*. DOI: 10.3109/13668250.2016.1259466

## Other implications for service delivery organisations

- Skills required to support engagement and choice for people with lower levels of adaptive behavior may be more difficult to learn
- Staff characteristics such as qualifications and attitudes dropped out early may be accounted for by staff training.
- Need for continuous focus on and understanding of practice at all levels of management
- Values and actions of senior managers more important that documents
- Tool for analysis of and addressing problematic staff culture
- Appointment of new leaders Do Boards understand what matters
- How are new leaders orientated to practice
- How do senior leaders know about the quality of practice
- Value of external observational monitoring limited value of paperwork
- Useful data for equipping service users and families what to look for and how to judge organisational leadership

# Using research evidence to improve quality of support and service user outcomes

- Organisations in our study have used this body of evidence & organisational specific data from an annual report on service users Engagement and Quality of staff support to change the way they do things.
- For example
  - Restructured to create better model of practice leadership
  - Redistributed admin work to free up time for coaching
  - Drawn up new job descriptions
  - Rolled out training across the organisation
  - Process of culture change confidence to take risks, stories, reflective practice
  - Changed recruitment practices
  - Changes the messages and narratives to families and board members about their services

### References

- Many of those authored by LaTrobe authors are available on open access in the LaTrobe Research Repository <a href="http://www.latrobe.edu.au/library/research-and-grant-support/research-online">http://www.latrobe.edu.au/library/research-and-grant-support/research-online</a>
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# Thank you

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