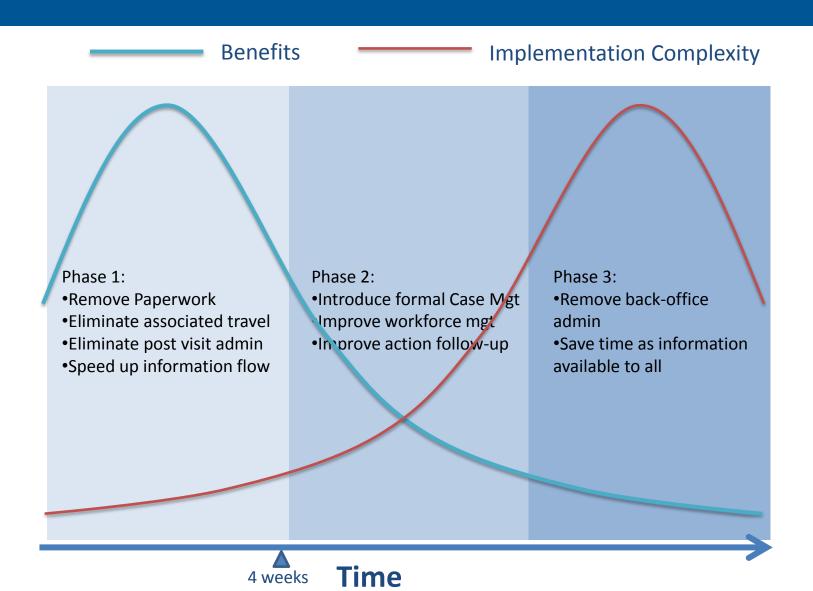
Mobile Working Beyond Repairs



Topics

- Why is the penetration of mobile working so low?
- Common misconceptions
- Case study examples

Why is the penetration of mobile working so low?

- Complexity and cost of mobile projects requires big business case
- Absence of motivation to reduce headcount
- Housing system integration barrier (perception)
- Staff are self-managing
- IT priorities and IT dominated decision
- Misconceptions around solution

Misconceptions

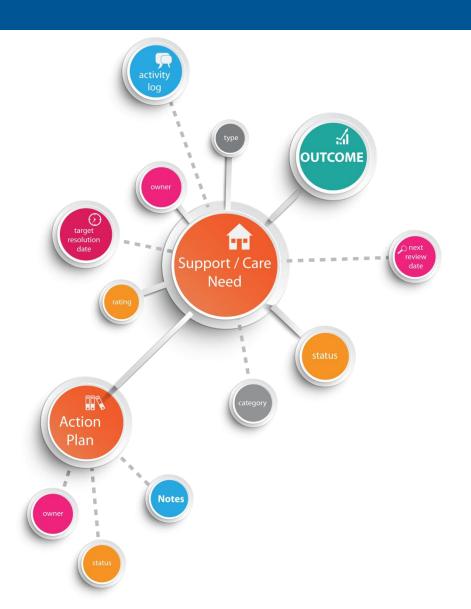
- Dispersal of current 'system'
- Scheduling options v self managing
- Only mobile sometimes
- Case Management
- Cost of paper

Case study: Housing Support

- Debt problems
- Problem families
- Drug and alcohol issues
- Tenancy sustainment
- Homelessness
- Sheltered care
- Independent living
- Social isolation
- Money management

Identify an issue that needs attention Record issue, set resolution target, gather information Agree actions needed to achieve desired outcome Send information to other teams that need to get involved Progress & chase up actions, update notes and logs Update customer / location files and file documents

Report on open issues, outcomes achieved and actions needed



Data structure for Housing needs



How can we support you? (Initial Needs and Risk Assessment)

Tenants Initials:	Tenants Date of Birth: specific contact needs? (translation, large print ect) npleted By: (name, and contact details):					
Date referral received:	Address:					
Date of Assessment:						
Phone number:	Tenants Date of Birth:					
Do you have any specific contact needs?	r (translation, large print ect)					
Assessment Completed By:						
Referrers Details (name, and contact deta	ails):					
National Insurance number:	I Diagonal de la compania del compania de la compania del compania de la compania del compania de la compania del compania de la compania del compania d					
National insurance number:	, ,					
	☐ Sikhism ☐ Other (please state)					
Do you have any dependants in your care	e?					
Children under 16? ☐ (give details, ages e	ect)					
Children with a disability or special education	onalneed? 🗆 (details)					
Lone parent? (details)						
Carer to other adults in the house? (eg sick,	, disabled adult or elderly)					
Providing outside support or care? ☐ (detai	ails)					
Agency Support?						
Name of Agency / Support						
Contact details						

A6. Employment / Education and voluntary work					
Points—Are there any other support needs the applicant would like to include? Is the a training at present? Would they like to be in the future? What are their other future aspirati already, what would they like to get out of receiving the support? Use a separate sh	ons, have	they n			
	Yes	N	lo		on't low
Are you employed?					
If you are of working age, why are not in employment?					
Are you in education?					
Do you take part in any voluntary work?					
(would you be interested in information for voluntary work?) Details:					
What is your employment status?					
Yes, Full time □					
Yes, Parttime □					
No 🗆 If no, fachow long?					
Employment / Education Risk Assessment	1	2	3	4	5

Risk Assessment, Likelihood of Risk with Employment/Education?

How confident do you feel with Employment/Eductaion? (self assessment)

Az. Pilysicai neailli										A3. Welltal Wellbeilig and / 0	и сеа		Disabil						
Points - Are there problems usin pregnant, any issues attached wit have any issues surrounding you	ththep	regnan	cy, hyg	giene issues, do you have an	y eatir	ng iss	ues,	do y	ou	Points – Any problems affecting health/LD issues, are there any t self neglecting an issue? Does	riggers	wen	eed to kr	now about, how long is your ment					
developing your life skills, e.g.	cookir							D		Mental Health	Yes	No	Don't Know	Learning disability/difficulty	Ye	es	No	Dor	ı't
	Yes	No K	Jon't			Yes	No	Dor Kno		History of mental health needs			Know	Specific communication needs	_	+		Kno)W
			KIIOW	Unable or unwilling to acces	22			MIIU	/ VV	and/orcurrent mental health				or difficulties (reading, writing,					
Physical mobility problems				required medical services	~					needs/hospital admission				verbal). Require easy read or					
	_	-		Issues around taking	-		-		-	•				user friendly documents					
Alcohol/substance misus e				prescribed medication						Lack of contact with MH				Unable to cope with day to day	$\overline{}$	\top			
Acquired Brain injury (memory loss, seizures, medication, triggers and symptoms' of							\neg			services (i.e. not established,				tasks (using facilities around					
seizures or any other information	require	ed to pro	ovide a	ppropriate support)						unwilling or unable to access).				home or a pin service at a cast	1				
Record any specific conditions										Not taking medication.	_			machinefor example)	_	\rightarrow			_
Details									Feelings of anxiety, depression, generally not coping				Social interaction - how do the make friends, not aware of	/					
										generally not coping				'stranger danger'? Lack of					
														understanding of tone and bod	v				
														language	' I				
										Previous attempts on life	1			Short attention span and lack	of	+	\neg		_
										Expressing suicidal feelings				concentration					
										History of self harm				Struggles to process	\top	\top			
								Expressing thoughts of self				information, finding it							
								harm				overwhelming-requires							
													paperwork to be completed over a number of visits	r					
										Record specific conditions here (i					_	_			
									¬՝	Details		7,		,,					
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					_		_												
Physical Health Risk Assess	ment				1	2	3	4	5	Physical Health Risk Assess	sme <u>nt</u>				1	2	3	4	5
Risk Assessment, Likelihood of R					4		\dashv	\perp	\perp	Risk Assessment, Likelihood of Risk with mental wellbeing and / or learning									
How confident do you feel with assessment)	your F	Physica	il Healt	th in your home? (self						disability?	h war-	mart	alwolle	oing and / or loarning	+	+	+	+	_
Is there a need to refer to aids a	nd ada	aptation	ns?							How confident do you feel with your mental wellbeing and / or learning disability in your home? (self assessment)									

A1. Budgeting and Finar	nce																
				1	2	3	4	5									
Risk Assessment, Likelihood of Risk with Finances	s and Budgeting?								1 2 3 4 5								
How confident doyou feel with Budgeting and Fina	ances? (selfassessment)									te Complete arning Disability 1 2 3 4 5 r learning disability? earning disability in your home? (self							
		By who E	By when				С	omplete									
	A6. Employ	ment / E	ducation				<u> </u>										
	Risk Assessment, Likeli	ibood of Risk with	TBC2						1 2	3 4	5						
	How confident do you								+ + +								
		rt and risk need				By who	Dyw	hon	Undata		Complete						
	Заррог	rt and risk need					•		•	a Disa	ability						
														1	1 2	1 2 3	1 2 3 4
				Risk Asse	ssment Li	kelihood o	fRiskwit	hmentaly	 Ibeing and / or learnin	n disability	?				- - -		
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				assessme											~~		
					Sup	port and	risk ne	ed action	greed	By who	By when			U	Update	Update	Update
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			-									+					
												1					
			-									+					

Understanding mobile #1 data access

You can't keep a copy of all data on the mobile device

You can't rely on having connectivity when you need it

Not all visits are preplanned So you need an easy but robust way for users to request information

Understanding mobile #2 data access

Data connectivity is patchy

Too much latency causes connections to time out

It is important to minimise the links in the chain So you need to be able to stage data ready for staff to access

Understanding mobile #3 visit mgt

Some mobile teams have explicit work lists for each day Some have work that has to be completed over a period

Some are selfmanaging and reactive So you need very flexible work allocation

Understanding mobile #4 Case mgt

Many housing services involve follow-up actions

Users need to be able to define as many actions as needed

It must be easy to see what needs doing, when and by whom

So you need flexible CRM capabilities