

A home of my own

The transition from residential care to supported living at Oakfield Community

February 2026

A study conducted and written by Dr Alison Hulme

AH Research Consultancy

www.researchconsultancy.co.uk

alison@researchconsultancy.co.uk



Executive summary

*The transition from residential care to supported living at Oakfield Community has been a huge success. Tenants, their families, and the Oakfield staff have all benefitted from the changes put in place. The independence and confidence of tenants has improved without exception. Families have been amazed at what their loved ones can now do. Staff have also been impressed and gained deep satisfaction from seeing the positive changes in tenants. Despite a few relatively minor concerns from tenants, families, and staff at the beginning of the changes, the over-riding story is one of everyone working together to make the transition work. As one staff member said, ‘we do together now, not for’, and there is a genuine sense that this community has deepened its roots. This has created a strong sense of ownership and belonging, and for many tenants, it had been a turning point in their lives. All involved keenly feel the potential for the Oakfield Community to go from strength to strength in the future and are looking forward to seeing it grow and develop. In addition, it is clear that **the Oakfield Community Model of Supported Living¹ is genuinely ground-breaking and can inform others in the sector who aspire to move towards supported living.***

Research context

Oakfield Community is a residential community for adults with learning disabilities and autism. It has two locations in rural Northamptonshire - Easton Maudit and Yardley Hastings. Since, 2021 it has gradually been moving from a residential care model, to one of supported living. This has seen its premises undergo a huge change from a set up with single bedrooms and all meals being provided, to flats with en suite bathrooms and kitchens, that enable the tenants to be more independent in their daily lives. Large communal areas for socialising and group activities have been maintained in each location setting.

Since Spring/Summer 2025 Oakfield have been collecting data with their tenants, using Outcomes Star™ software (see [Home - Outcomes Star](#)), in order to evaluate the impact of the transition from residential care to supported living. Outcomes Star™ enables users to choose the ‘star’ most appropriate to them and/or those they work with and complete a set of feedback options at regular intervals. This report is based on data from 11

¹ The Oakfield Community Model of Supported Living (OCMSL) - the ‘Oakfield Model’ – refers to the unique hybrid nature of Oakfield Community which retains the communal aspects of traditional residential care set-ups, and the greater independence of purpose-built flat set-ups.



tenants, all of whom have flats in the supported living facilities. Oakfield chose to use the Life Star™ for 8 of those 11 tenants, which is specifically designed for people with learning difficulties and those who work with them. For the other 3 tenants they used the Spectrum Star™, which is designed for people on the autistic spectrum (please see annex 1 for further details). All 11 tenants completed a first (retrospective) star, based on their experiences and feelings when they first moved in, and a second star to capture more current views. The data was collected over an eight month period.

In addition, the report author conducted in-depth informal, unstructured interviews with staff members who work directly with those specific tenants. The interviews were conducted online, but the report author had previously visited Oakfield so had insight into the changes that had been put in place. The interviews provided important contextual data and qualitative details that helped fill out the picture provided by the Stars.

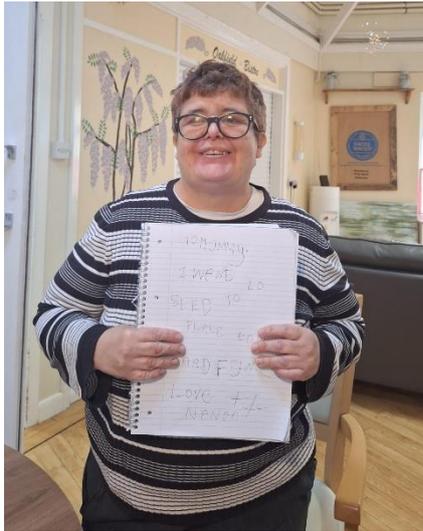
The transition to supported living

The transition to supported living has been a huge change for staff, families, and of course tenants. However, there have been no negative impacts to report and staff, families, and tenants have all managed the change at their own pace and in their own way. Staff **feel the new style of environment triggered ideas for enabling independence that they could not have predicted, as well as enabling the ideas they had planned for going into the transition.** Best of all, the improvements seen since the start of the transition are continuing, and staff believe the rate and level of improvements could not have occurred in the previous style of residential set-up. This report will focus on the impact on tenants, but it is important to acknowledge the impact on the families of tenants, staff, and the wider community too.

Impact on families

Some families were worried about whether their loved ones would cope with supported living, but many have been delighted to find they can now do things they never thought they would see them do. Often the visits of family members last longer now because they can be in the tenant's flat, rather than a small bedroom with nowhere to sit, or communal areas which are not private and may be distracting. This is particularly helpful for large families where siblings want to come and visit the tenant along with parents.





Tenants communicate more with their families now, in both written and face-to-face communication, as a direct result of the transition to supported living. Some tenants have gained skills in writing letters, so are keener to write. Staff feel that some tenants are also positively influenced to write to their relatives due to the fact that letters are now addressed to them at their flat number. **Having their own front door has given them a sense of pride and independence**, and they enjoy mail arriving with their name and their own front door number on.

Some tenants have gained skills in writing letters, so are keener to write.

Impact on staff

The impact on staff has been extremely positive. They are learning more about tenants and what they are capable of doing for themselves. They are often surprised at what a tenant can do and how independent they can be when it comes to certain tasks. Staff are finding that their time is spent differently; while some things now take more time, others take less. However, importantly, **the things that now take more time are those that make more of a positive difference**. In other words, they are spending the time they have in the ways they feel they should ideally be using it. For example, assisting a tenant to make their own lunch takes longer than simply providing it, but the benefits to the tenant, the job satisfaction of the staff member, and the positive input to the overall ethos are huge.

Staff report a real change of mind-set in both themselves and tenants. They have learnt not to do everything for a tenant by default, only when necessary. **Tenants have learnt that they can do more than they thought they could** and that they should not expect to have everything done for them. One staff member reported that the ethos was now one of staff and tenants 'doing together' as opposed to 'doing for/having it done for'.



Impact on the wider community

The transition to supported living has made for a more sociable setting. Tenants can now not only socialize more amongst themselves, but also more easily invite back friends from outside Oakfield, i.e. from the wider community. These invitations lead to return invitations to places outside Oakfield, meaning **the links between tenants and the wider community are more numerous and deeper.**

Analysis of Life Star™ data

The Life Star™ helps a person look at the different areas of their life. They complete the Star with their support worker, talking about how things are in each area first, and then using colours to fill in the star. The areas included on the Life Star™ are: Your health (physical), How you spend your time, Being responsible, Being safe, Money and letters, Living skills, Communicating, Feeling good, People you know, and Mental health. For each area the person completing the Star can choose from the following colours/outcomes (see more detailed breakdown in Annex 2.)

9-10 - **Blue – Things are right for you.** You are doing as much as you can for yourself • You have the support that is right for you • You are safe, well and as independent as you can be

7-8 – **Green – Things are more how you like them.** People are listening to you and learning how you like things • If you can, you are learning to do more for yourself

5-6 – **Yellow – Things are OK.** You are safe. You have what you need. You like the people helping you • But you are not choosing how things are in your life • People are thinking about how you can have more choice and do more for yourself

3-4 – **Orange – Things are difficult but you are getting support.** The support is right for you sometimes and you have some of the things you need • You like some of the people supporting you and you sometimes get on well with them • You may feel sad, scared or angry – but not all the time

1-2 – **Red – Things are not working at the moment.** Life is difficult. Maybe there has been a big change • Maybe you feel sad, scared or angry a lot • Either no one is supporting you or you don't want their help



Distance travelled – Life Star™

The ‘distance travelled’ is the progress made from the first (retrospective) star, based on experiences and feelings when tenants first moved in, to the second star, that captured more current views.

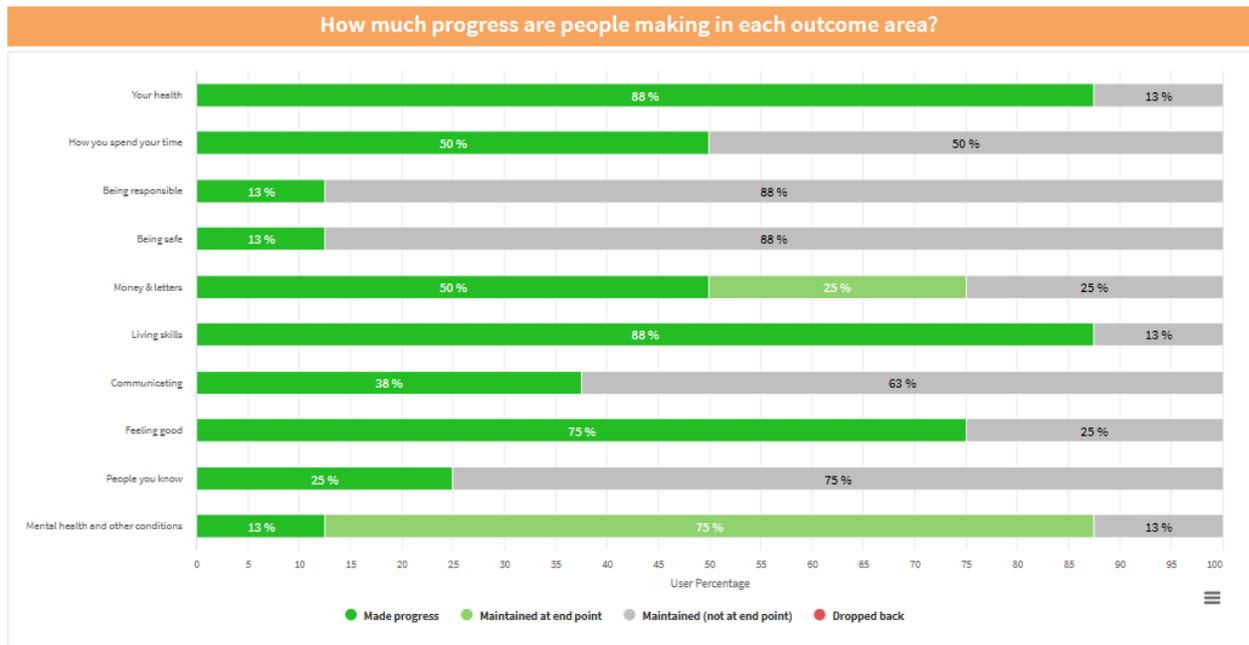


Figure 1: Progress made in each outcome area of the Life Star™

In the **‘your health’ outcome area, 88% of tenants made progress.** This outcome area includes aspects such as ‘letting people know when you are ill, letting doctors and other health staff support you, taking medicine and having health tests’ as well as ‘doing as much as you can for yourself to stay healthy, including healthy food, exercise and good sleep habits’. Staff feel this improvement can be explained by the fact tenants are now planning their meals with the help of support workers and therefore having to consider how healthy their diet is and take responsibility. For some tenants, sleep may also be improved now that they have a space that is quieter once the front door is closed than individual rooms along a corridor were.

50% of tenants made progress in the ‘how you spend your time’ outcome area. So, half the tenants felt things had improved in this area, suggesting their days feel used more in the way they want them to be. The evaluation of ‘spending time’ in a useful or enjoyable way is of course highly subjective. However, staff said there were no instances of disagreement between tenant and staff member, where for example a tenant might be



pleased with how they use their time, but staff may feel it is not good for them. This outcome area relates closely to the way in which staff time is used differently following the transition to supported living, with much more time spent enabling tenants to acquire specific skills and confidence.

When it came to the ‘money and letters’ outcome area, 50% of tenants made progress. Staff explained that this was likely down to the way in which tenants felt much more independent once they had their own front door and door number. So, even though letters were still delivered to a central address, the sender had often put the tenant’s flat number on it, which caused the tenant to be more proactive in asking whether they had any post, rather than waiting for it to be handed to them. When it came to money, staff



gave an example of how one tenant now pays at the shop independently rather than needing a member of staff to complete the transaction for her. This kind of change is directly connected to the heightened levels of independence and sense of autonomy that tenants have following the transition to supported living.

One tenant now pays at the shop independently without staff help.

38% of tenants made progress in communicating. Staff were keen to point out that this was almost certainly due to the way Oakfield Community had become a much more sociable place once the supported living model was in place. In some ways, this runs contrary to expectations, as tenants can now stay and eat in their flats – they are not guaranteed a moment in the day when they would need to come out and communicate. However, what tends to happen with the new model is that tenants invite other tenants to eat in their flat with them, and then they get invited back to that other tenant’s flat. They can also invite friends from outside Oakfield to their flat and are therefore also



getting invitations to people's homes in the local community. Staff felt sure this was behind the improvements in communicating, and indeed **in the 'people you know' outcome area in which 25% of tenants made progress.** This is particularly heartening as it is about the quality and depth of relationship tenants have with family and friends. Again, this is directly related to the style of accommodation and the ways interaction has become easier and more frequent in the new supported living model. Pleasingly therefore, there is a link between improvements in the 'people I know' outcome area, and improvements in communicating, and both are directly tied to the transition to supported living.

Not surprisingly, **there was huge improvement in the 'living skills' outcome area, in which 88% of tenants made progress.** This is to be expected when moving to a supported living model, but the level and speed of that improvement is notable. Many of the most poignant anecdotes mentioned by staff fell into the 'living skills' outcome area, which includes getting dressed, cleaning your teeth, washing yourself, cleaning your home, shopping and cooking, laundry, and getting around. For example, staff related how one tenant was supported to make a cup of tea and eventually was able to make it himself. When his mum came to visit him, he made one for her. She was amazed and extremely moved as she had not thought he would ever be able to do that.



One tenant was supported to make a cup of tea and eventually was able to make it himself... and for his mum.

Another tenant would overfill his washing machine when he first moved into his flat and wash clothes regardless of whether they were clean or dirty. With staff support, he has learned to only wash worn clothes and not to put too many items in at once. He has also learned to make himself a glass of squash with the correct ratio of concentrate to water. Similarly, a different tenant can now make hot drinks and toast in his flat without the need for staff support.



One tenant has learned to make himself a glass of squash with the correct ratio of concentrate to water.

13% of tenants made progress in ‘being responsible’. Staff felt it was logical that progress was less in this outcome area than others because it is a more difficult outcome area to get improvement in for many of their tenants. It takes more time to see the improvement than some of the other outcome areas, and it is more reliant upon staff capacity as it requires very bespoke one-to-one help. This is also true for the fact that **13% of tenants made progress in ‘being safe’.**



When it came to the **'feeling good' outcome area 75% of tenants made progress.** Feeling good is defined in the Outcomes Star™ framework as 'feeling content and at ease, knowing that you are important and can make a contribution, doing things that help you feel positive and happy, expressing difficult feelings, and standing up for yourself.' It is important to recognize therefore that it differs from both physical health and mental health, although could be related to the latter for some people. Staff report tenants being much more patient when something cannot be done immediately and believe that this is because tenants now feel they have more choice in general, so cope better on the occasions when choice is limited. This sense of choice is reflected in the greater confidence tenants show. Staff related how one tenant spoke up about his desire to go and choose a car – he took the initiative and went with staff to the showroom to choose it.



One tenant spoke up about wanting to choose his car and went to the showroom.

Progress in the **mental health outcome area was lower at 13%**, but this is in part simply because many tenants do not have mental health issues so do not need to progress in this area. For those who do have mental health issues, progress is slower than other outcome areas, as would be expected with long-term and often complicated issues.

Finally, it is important to note that there were no outcome areas in which participants dropped back between the first and second stars. In money and letters 25% maintained their level at the end point; and in mental health 75% maintained their level at the end point.



Snapshots – Life Star™

The snapshots back up the ‘distance travelled’ findings, with the same outcome areas moving into the green and being ‘more how I like it’ as the charts below show.

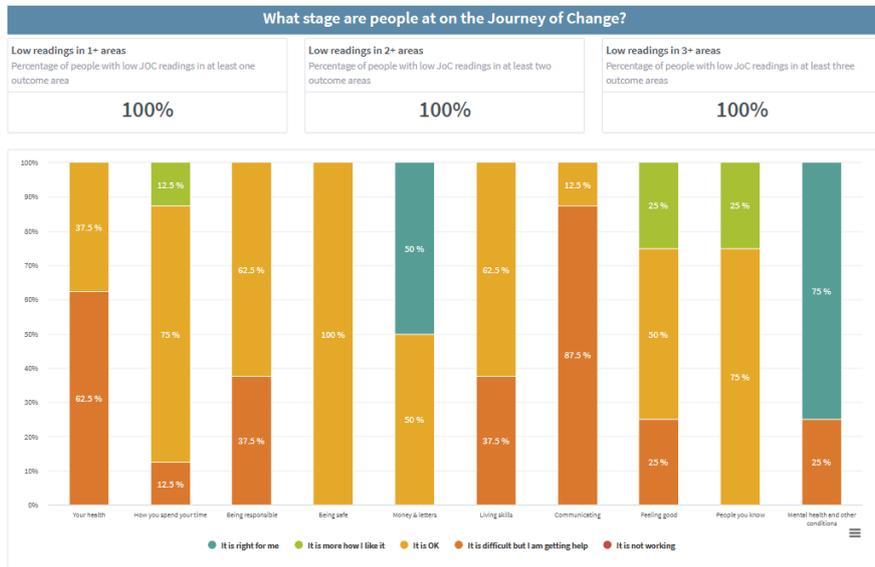


Figure 2: First Life Star™ snapshot

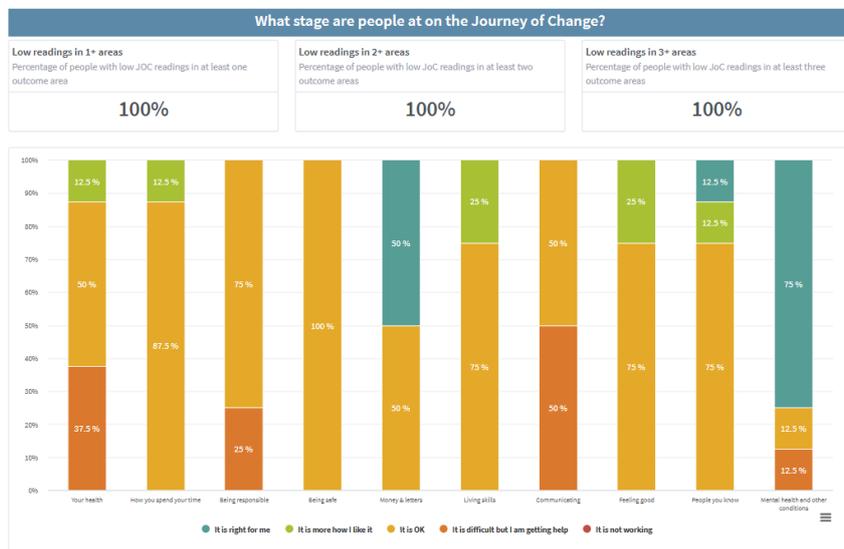


Figure 3: Second Life Star™ snapshot



In the first snapshot 3 outcome areas are in the green – ‘how you spend your time’, ‘feeling good’, and ‘people you know’. **By the second snapshot 2 additional areas have moved into the green – ‘your health’, and ‘living skills’ – and the ‘people you know’ area has moved into the blue ‘it is right for me’.** Those areas that were already in the blue on the first snapshot, maintained their level in the second, with 50% saying of ‘money and letters’, and 70% saying of ‘mental health’ that ‘it is right for me’. ‘How you spend your time’, ‘living skills’, and ‘feeling good’ outcome areas all improved hugely with no orange appearing in the second snapshot. **The ‘communicating’ outcome area is the big story though, with 12.5% yellow and the rest orange in the first snapshot, moving to 50% yellow and the other 50% orange in the second.**

Average improvements across outcome areas – Life Star™

As the chart below shows, the average level of change for those who moved forward was 1.14 for health; 1.25 for how you spend your time; 1 for being responsible; 1 for being safe; 1 for money and letters; 1.86 for living skills; 1.67 for communicating; 1.17 for feeling good; 1.5 for people you know; and 2 for mental health. So, although this backs up the previous findings in that the most common way of making progress is in the health and living skills outcome areas, it shows that the **those who experience progress in their mental health experience the biggest change.**

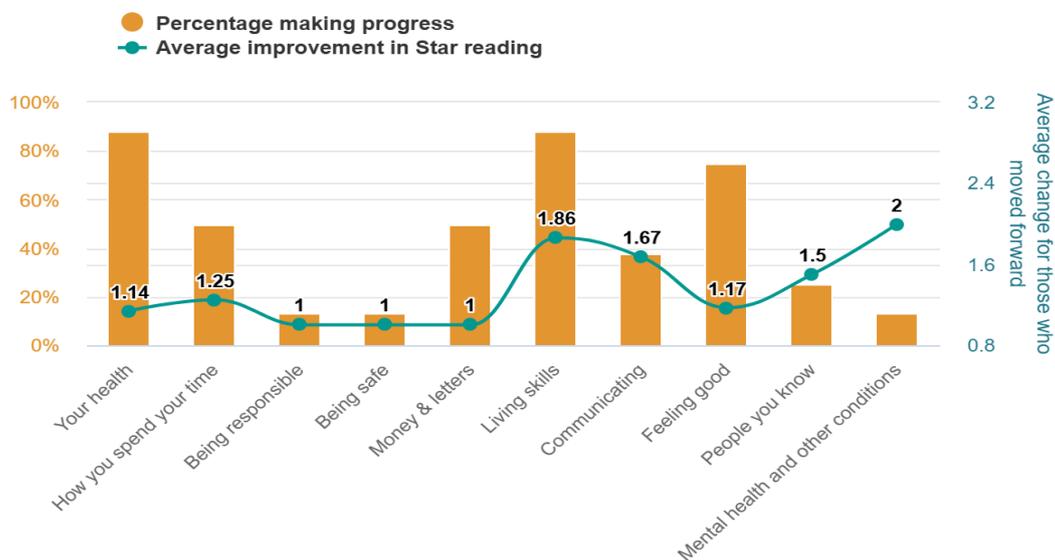


Figure 4: Level of improvement in each outcome area of the Life Star™



Analysis of Spectrum Star™ data

The Spectrum Star™ aims to help a person understand their autism so that they can have a positive and fulfilling life and make the choices that are right for them. It helps the person and their support workers to focus on what needs to change in order for them to do that. As with the Life Star™, a person completes the Star with their support worker, talking about how things are in each area first, and then using colours to fill in the star. The areas included on the Spectrum Star™ are: 'physical health', 'living skills and self-care', 'well-being and self-esteem', 'sensory needs', 'communicating', 'social skills', 'relationships', 'being safe and responsible', 'time and activities'. For each area the person completing the Star can choose from the following colours/outcomes (see also more detailed breakdown in Annex 3.)

9-10 - **Blue – Choice and self-reliance.** You have the understanding and skills that you need to make choices for yourself and to be as independent as possible.

7-8 – **Green – Learning for yourself.** You are learning for yourself about your autism and how it affects you. You are beginning to understand more about what you need and what works well for you.

5-6 – **Yellow – Stable.** Your life is more stable. You are being supported and your basic needs are mostly met, but not entirely.

3-4 – **Orange – Getting some help.** You are starting to get some help. The people supporting you understand a bit about what you need.

1-2 – **Red – Stuck.** You are stuck. Autism might feel like a major barrier to you leading a positive life.



Distance travelled – Spectrum Star™

As with the Life Star™, the ‘distance travelled’ findings for the Spectrum Star™ relate to the progress made from the first (retrospective star) based on experiences and feelings when tenants first moved in, to the second star, that captured more current views.

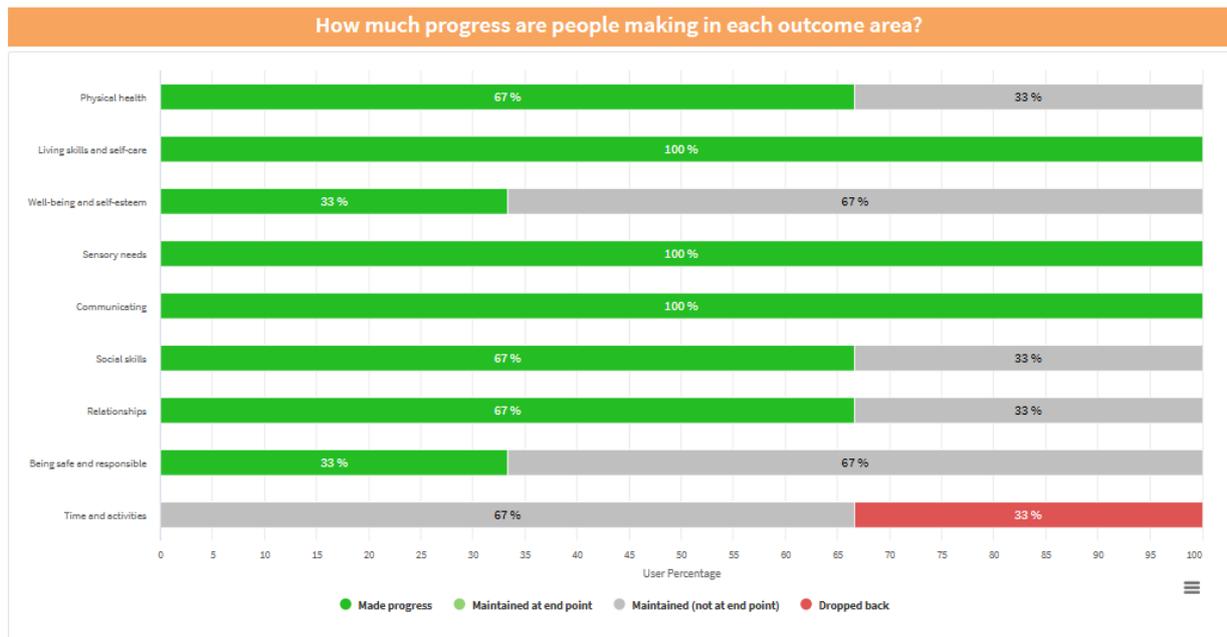


Figure 5: Progress made in each outcome area of the Spectrum Star™

The big story with those on the Spectrum Star™ is that 100% made progress in ‘living skills and self-care’, in the ‘sensory needs’, and in the ‘communicating’ outcome areas. Although based on only 3 tenants, this is powerful evidence that the transition to supported living has addressed the key challenges often faced by those on the autistic spectrum. Staff felt that as with the Life Star™, communication had improved due to the supported living set-up being more sociable. Also, importantly for those on the autistic spectrum, supported living provides calmer spaces to be on one’s own when necessary, which helps with sensory needs.



In terms of living skills, staff were keen to explain how the fact tenants now have their own kitchens has opened up a whole range of new skills. For example, each tenant now has support to write their own weekly menu, to plan what shopping they will need to do, and then to go shopping and buy the food they need. Other living skills have also improved due to the more independent nature of supported living. For example, staff related how a tenant who had previously waited for staff to turn on his TV and change channels for him had been helped to learn how to turn it on and navigate the channels himself.

One tenant who previously waited for staff to help him, can now navigate the TV channels himself.



In the **‘physical health’ outcome area, 67% of tenants made progress.** ‘Social skills’ and ‘relationships’ also both had 67% progress, but in both these two areas it is important to note that the snapshots show a huge move into the yellow ‘stable’ category, out of the orange ‘getting help’.

33% of tenants made progress in ‘well-being and self-esteem’. Again, as with the Life Star™, staff felt it was logical that progress was less in this outcome area because it is a more difficult outcome area to get improvement on for many of their tenants and requires greater staff capacity. Again, this is also true for the ‘being safe and responsible’ outcome area in which 33% made progress.

Finally, the ‘time and activities’ outcome area was maintained at 67%, although there was a drop-back of 33%. However, it is important to note that this essentially represents 1 of the 3 tenants using Spectrum Star™ and that it therefore appears as more of a factor than it may be, especially over time.



Snapshots – Spectrum Star™

When it comes to the Spectrum Star™, the snapshots show just how positive the transition to supported living has been. On the first (retrospective) snapshot there were no areas in the green ‘learning for yourself’ or the blue ‘choice and self-reliance’ categories. As the chart below shows, all outcome areas were in the orange or yellow categories. ‘Time and activities’, ‘social skills’, ‘sensory needs’, ‘living skills and self-care’ all fell 100% into the ‘getting some help’ category.

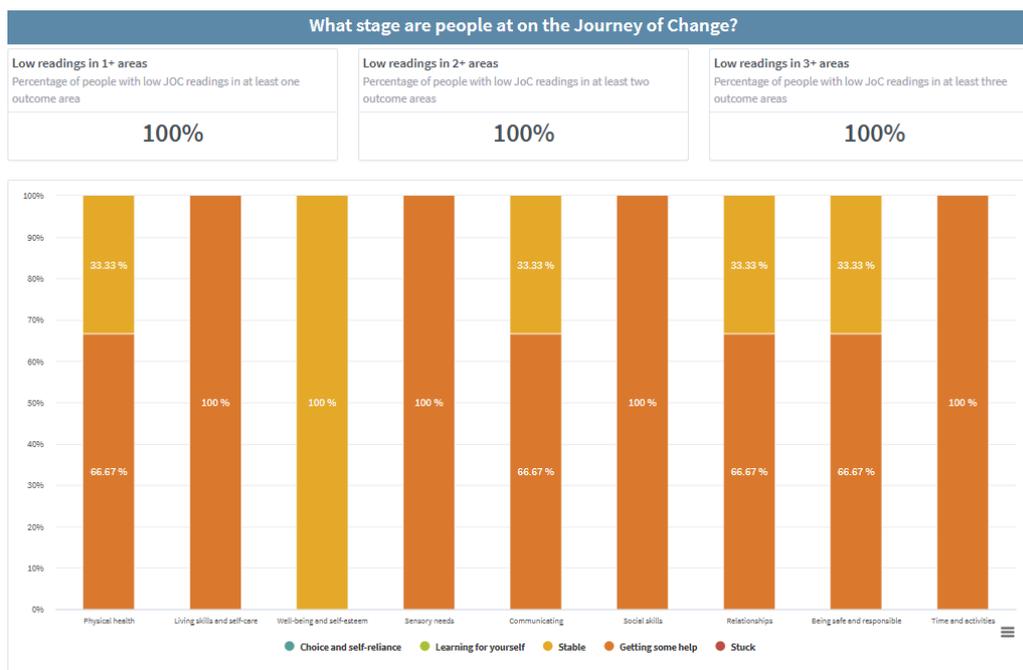


Figure 6: First Spectrum Star™ snapshot

Data from the second snapshot reveals that apart from ‘time and activities’ those **most challenging outcome areas improved vastly**. ‘Social skills’ moved to 66.67% ‘stable’; sensory needs to 66.67% ‘stable’; and ‘living skills and self-care’ to 66.67% ‘stable’ and 33.3% ‘learning for yourself’ (green). ‘Physical health’ also moved into the green by 33.3%. ‘Relationships’ moved 100% into the yellow ‘stable’ category. Most noteworthy is that ‘**communication**’ gained 33.3% to move into the most positive 9-10 blue category of ‘choice and self-reliance’.



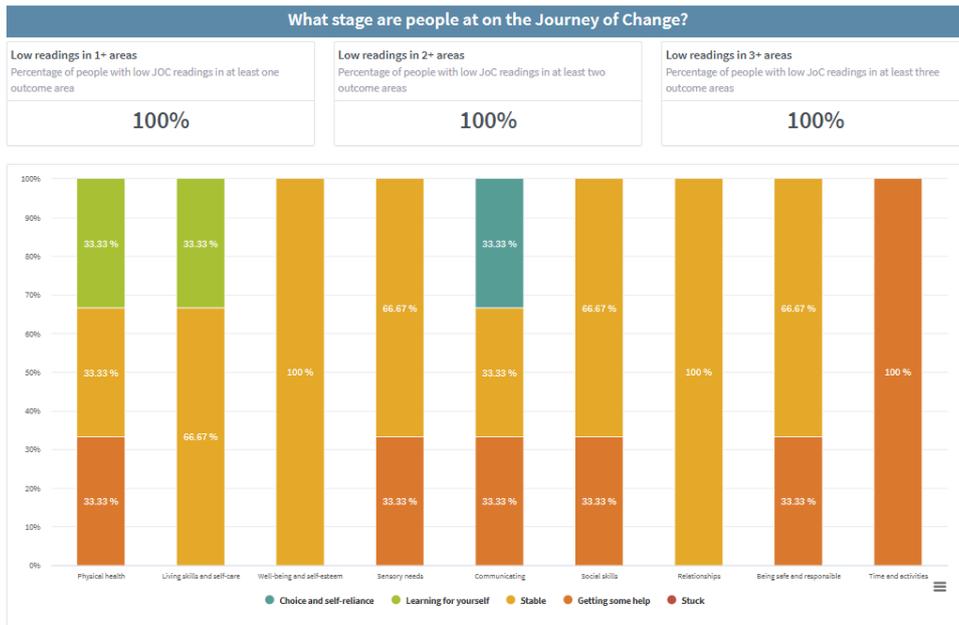


Figure 7: Second Spectrum Star™ snapshot

Average improvements across outcome areas – Spectrum Star™

In terms of the extent of the improvement, the biggest improvements come in the ‘living skills and self-care’ – 2.33, communicating – 2, and in ‘sensory needs’ – 1.67.

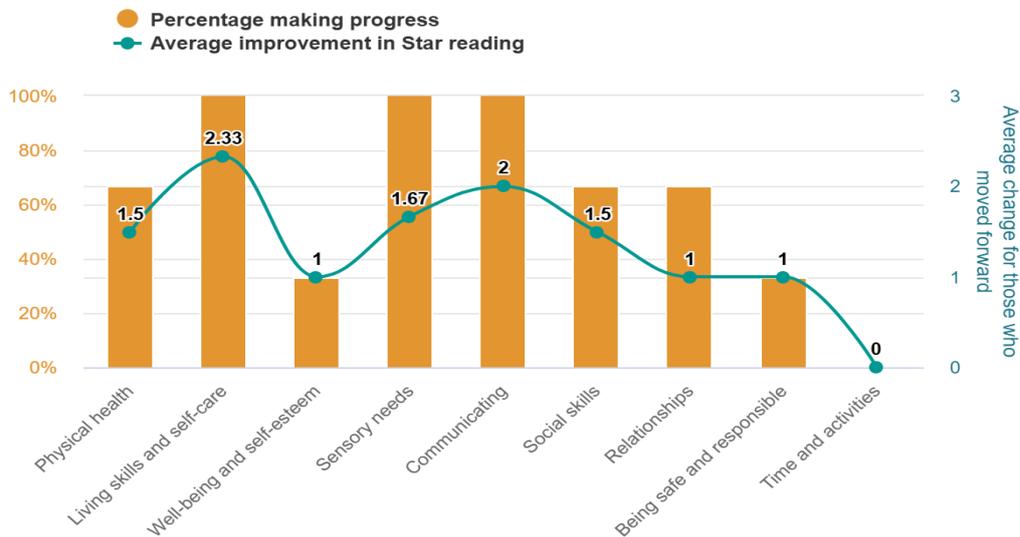


Figure 8: Level of improvement in each outcome area of the Spectrum Star™



Theory of change

A 'Theory of Change'(ToC) is designed to address the gap in evidencing how specific activities undertaken by an organization are contributing to broader social outcomes. For example, it might help prove how an organisation's activities are helping social aspects such as community cohesion, employability, or civic participation. A ToC is a framework that sets out a clear pathway from what an organisation does, to the difference they make. It does this by explaining how and why specific activities are expected to lead to specific changes or outcomes in people's lives and in their communities. A ToC is intended to be adapted the needs of an organisation, reflecting their goals, activities, and available resources – in other words it is a bespoke, flexible tool. The draft Theory of Change below provides a high-level overview of how the Oakfield Community Model of Supported Living contributes to social gain.

Inputs	Activities	Outputs	Outcomes	Long-term impacts
Staff time and commitment Oakfield Community infrastructure and facilities Funding and donations Local support and community partnerships	Supporting tenants in their day-to-day lives Supporting skills development and social opportunities Enabling day-to-day running of the community, as well as longer-term improvements Promoting local understanding and community cohesion	Number of volunteers trained and/or given work experience Number of people provided with employment and a career Number of community events	Increased confidence and skills Greater visibility in the wider community (due to increased independence), generating greater understanding between Oakfield tenants and the wider community Enhanced sense of identity, pride and belonging Higher level of interaction and depth of friendships between tenants themselves, and between tenants and other disabled people in the wider community.	Improved individual and Oakfield Community wellbeing Reduced social isolation for tenants (both within Oakfield and in the wider community) More understanding and acceptance from the wider community – social cohesion Different use of staff time and funding



Conclusions

As a result of its pioneering move to a supported living model, Oakfield Community has forged itself as **a unique option** for adults with learning disabilities. The supported living model is enabling **life skills** and **social opportunities** for a wide range of adults with a variety of needs, in ways that other settings cannot or do not provide.

Crucially, Oakfield has managed the transition by **involving tenants at every step**, and in doing so has created a community with deeper roots than previously, and whose **tenants feel pride, belonging and ownership**.

As a direct result of the transition to supported living **tenants have gained skills and independence, enjoy a higher level of interaction and greater depth of relationships with family and friends, feel happier in themselves and are more confident to speak up**, take the initiative, and say what they want.

Evidence suggests the new Oakfield model is having **a far wider impact** than simply on tenants. Families have been amazed and delighted at the changes they see, and now often enjoy longer visits and get to see their loved ones interact with others more. This has an impact on the **whole family dynamics** and happiness as not only parents but also siblings come to visit. Staff are enjoying their jobs even more and **feel super motivated** and uplifted because they can see the progress of tenants, and the pleasure it brings tenants and families. **The wider community is benefitting** as tenants' greater independence has meant they are making new friends at day groups etc. **out in the community** and these friends can come and visit them in their flats.

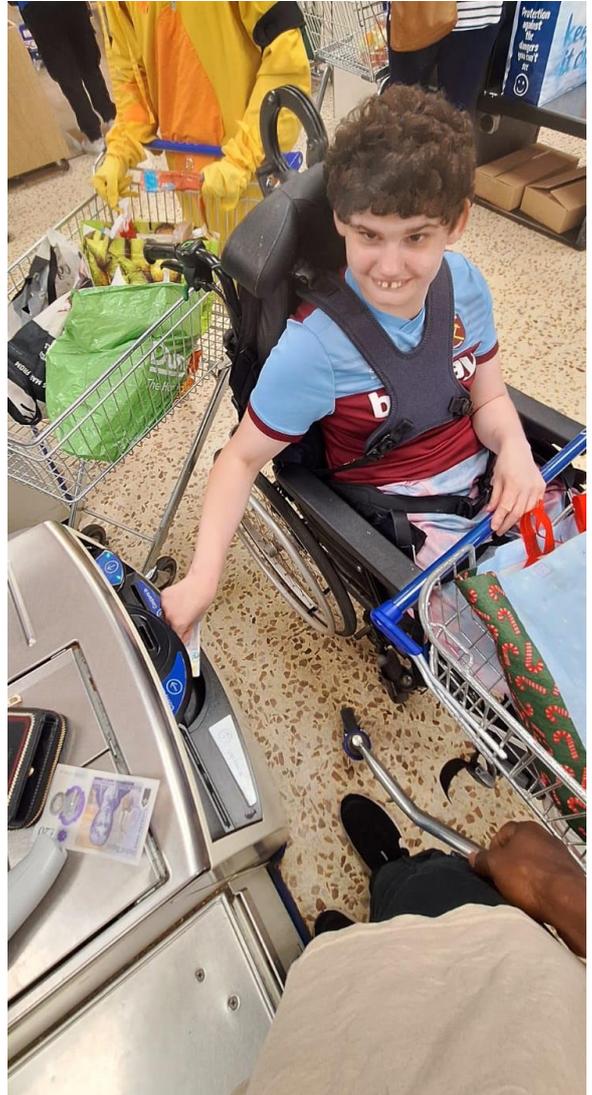
The supported living model delivers huge social gain. In the longer term it will lead to reduced social isolation for tenants and more understanding and acceptance from the wider community, creating much greater social cohesion. In addition, the evolving use of staff time, and therefore funding, is an exciting area of change that Oakfield are monitoring with interest.

Oakfield have seen the proof and are confident in their model – and with very good reason. As innovators in their field, they are now poised to help others transition to supported living.



Future focus

- ❖ As the tenants continue to increase in confidence and life skills, Oakfield will continue to use Outcomes Star™ to measure and understand their journeys. This will provide rich longitudinal data that is of huge value to Oakfield, and also enables them to advise other similar residential settings.
- ❖ Many families are enjoying longer visits now that their loved ones have their own flats they can spend time in with them. They are also getting to know their loved ones' friends and neighbours more as people visit each other's flats. It will be interesting to see if these connections between families forge a stronger support network for them.
- ❖ In the longer term it will be crucial to monitor patterns of how staff time is spent compared to how it used to be spent. This could impact upon how funding is used in order for it to be of most use.



ANNEX 1 – EXAMPLE STAR CHARTS

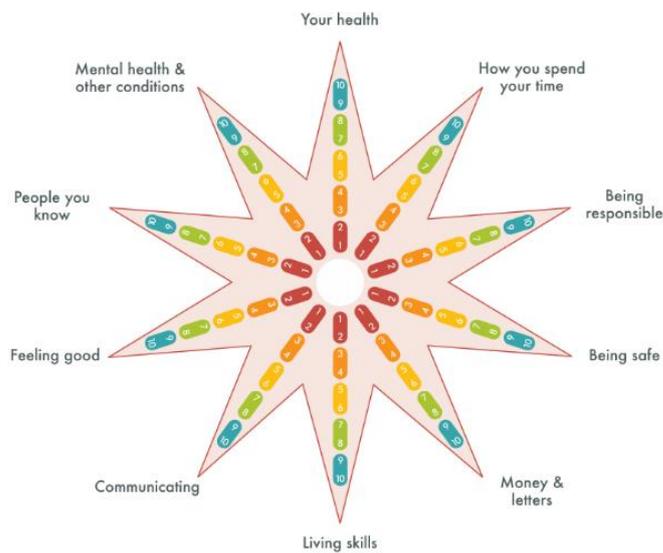


Figure: The Life Star™ chart

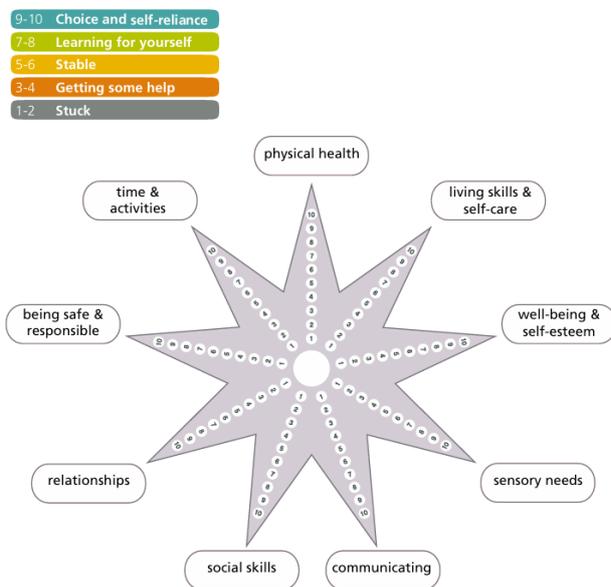


Figure: The Spectrum Star™ chart



ANNEX 2 – SCORES FOR OUTCOME AREAS OF LIFE STAR™

9 - 10 Blue means things are right for you

- You have as much choice, freedom and independence as possible. This means you are managing as much as you can for yourself and the things you can't manage are being dealt with for you in a way that is sensitive to your preferences
- The people supporting you are **maintaining** things at this level so that you can continue to learn and fulfil more of your potential
- At 9 there is a little more that could be done. At 10 you have as much freedom, choice and independence as possible

7 - 8 Green means things are more how you like them

- You and the people supporting you are trying new things to give you more choice, freedom and independence. They are **enabling** you to achieve your full potential
- Choose 7 if this learning is still new. At 8, you or others have learnt a lot already and are putting it into practice

5 - 6 Yellow means things are OK

- You feel settled where you are and trust the people around you. Things are **stable and managed** but you could be more independent than you are and improve your well-being
- The people supporting you are now starting to think about how to enable you to reach your full potential for independence, well-being and choice
- At 5 things are OK but are not yet focused on increasing your independence, well-being and choice. At 6, you or others are looking at how to do things so that you can do more for yourself or have more choice

3 - 4 Orange means things are difficult but you are getting support

- The people supporting you are starting to understand what you need and how to help you. You accept their support some of the time, so some of your needs are met
- You still need a lot of specialist input to create and put in place support that meets your needs. Things are **stabilising** but there are still a lot of ups and downs
- At 3, you often resist support. At 4, you mostly accept support

1 - 2 Red means things are not working at the moment

- You are not receiving adequate support and are at risk of harm, or your needs are not well understood by staff. You do not go along with the support that is offered – this may be because it is not right for you
- You may be distressed, or violent, or verbally aggressive, or you may be passive and apathetic due to a lack of control or opportunities for stimulation or support that works for you
- From the service's point of view, the priority is **assessing** your needs. You probably need a lot of specialist input for them to do this
- At 1 on the scale you reject all help that is offered. At 2 you accept some help occasionally



ANNEX 3 – SCORES FOR OUTCOME AREAS OF SPECTRUM STAR™

The Journey of Change Stuck (grey) At this stage, you are stuck. Autism might feel like a major barrier to you leading a positive life. The beginning of this stage is described by number 1 on the scale. At this point, you either don't get the support that you need, or you feel unable to accept support because it's not right for you. Your life might be chaotic. You may often feel overwhelmed, frightened and confused. You may not be safe on your own and need lots of support. People do not know how best to support you. Perhaps you do not feel you can trust them. Because of this, meeting your basic needs involves conflict or distress. You take a step forward to number 2 when you occasionally get some support.

Getting some help (orange) At this stage of the journey, you are starting to get some help. The people supporting you understand a bit about what you need. They can help organise things for you or offer you advice on what to do to make life feel easier. The beginning of this stage is described by number 3 on the scale. At this point, you sometimes feel able to go along with support. However, lots of things are still difficult. You might need more support or a different kind of support. Your needs are not always met, and you may still be in crisis some of the time. You take a step forward to number 4 when you are getting support most of the time.

Stable (yellow) At this stage of the journey, your life is more stable. The beginning of this stage is described by number 5 on the scale. At this point, you are being supported and your basic needs are mostly met, but not entirely. You are relying on a lot of support at this stage. Because of this, your choices and independence may seem limited. Perhaps you feel content with things this way. Perhaps you want to be more independent or do more of the things that interest you, but that doesn't feel possible now. You take a step forward to number 6 when your basic needs are fully met in ways that work for you. Your goal may be to stay stable at this point.

Learning for yourself (green) At this stage of the journey, you are learning for yourself about your autism and how it affects you. The beginning of this stage is described by number 7 on the scale. At this point, you are beginning to understand more about what you need and what works well for you. You are learning about how to do the things that interest you and perhaps be more independent. You are learning new ways to support yourself and to identify what you need from other people. Ongoing support is still needed



from a service and the support you are getting is right for you. You take a step forward to 8 when you have learnt a lot about what works for you.

Choice and self-reliance (blue) At this stage of the journey, you have the understanding and skills that you need to make choices for yourself and to be as independent as possible. Life may still feel hard sometimes. But you are safe, and you are supported in the right way for you. You might be equipped with technology or other ways to help you support yourself. You can choose to follow your interests and pursue your goals, and your life feels fulfilling for you. The beginning of this stage is described by number 9 on the scale. At this point, you get support and reminders from the support service some of the time. You take a step forward to 10 when you no longer need the specialist support service in your day to-day life. Any reminders or support that you need can be given by your family, friends or wider support network.

