



making *the* links

summary

Developing services which address the housing, health and care needs of older people:

A study of diversification in home improvement agencies



Published by Care & Repair England

Overview

The work of Care & Repair England is founded on the observation that most people want to live in their own homes for as long as possible, even when age and disability make day to day tasks more difficult.

For the past 15 years Care & Repair England has promoted the concept of Home Improvement Agencies (HIAs). Working predominantly with older owner occupiers, HIAs have helped thousands of people carry out repairs, improvements and adaptations to their homes thereby enabling them to 'stay put' in greater comfort. There are now over 200 such agencies in England.

Whilst principally tackling "bricks and mortar" work, HIAs have recognised that other housing related help is often needed to enable clients to live independently at home. Many have diversified into new service areas in order to meet those needs.

About "Making the Links"

This report details and analyses the expansion into new areas of provision by home improvement agencies.

It is the result of a 3 year research study funded by The Housing Corporation and Anchor Trust as part of their joint initiative "Crossing the Housing and Care Divide".

This initiative sought to support the development of innovative services aimed at meeting both the housing and care needs of older people.

One of the main objectives of the "Crossing the Housing and Care Divide" programme was to impact on housing, health and social care policies at both national and local levels. It aimed to stimulate changes in policy and practice through the demonstration of effective interagency working, enhancement of service user involvement and development of frameworks for high quality, cost effective services.

Since the programme's inception there have been major changes in Government policy. The principles behind the programme – joint working, co-ordination across departments to produce cross cutting services and greater community involvement – are now in many ways reflected in these new policies. As a consequence, the value of "Crossing the Housing and Care Divide" and related projects has shifted from influencing the national policy agenda to informing local implementation.

Aims of “Making the Links”

This report is a practical resource for both current and potential providers and commissioners of services for older people. The case studies detail the work involved in developing and managing new initiatives and profile a wide range of service options.

From the perspective of service commissioners it is hoped that the demonstrable benefits to older people of the various services profiled will encourage closer joint working between the health, housing and social care sectors.

The report aims to encourage all parties concerned to work together to take a more strategic approach to the development of services which address the housing and care needs of older people.

Policy context

Examination of a wide range of Government policy documents including the recent NHS Plan, Housing Green Paper, Supporting People proposals and joint statement on Older People’s Housing, reveals many common objectives with regard to the housing and care of older people including;

- i) enabling individuals to remain as independent as possible within the community*
- ii) meeting individuals’ needs via flexible, responsive, accessible services*
- iii) working across departmental boundaries*
- iv) involving service users in the planning of services*
- v) developing close working partnerships between all commissioners and providers of services.*

Proposals in the above Government policy documents bring the possibility, as yet untested, of more coherent strategic development of, and funding systems for, many of the services highlighted in this report and related initiatives which cross the housing and care divide.

The research

One of the objectives of this research project was to investigate the extent and types of additional services being provided by HIAs. To achieve this, 3 mapping exercises were undertaken between 1997 and 2000.

In order to meet the broader objective of stimulating good practice, 3 experimental additional services were funded within HIAs and were closely monitored and evaluated. These three additional projects were a hospital discharge scheme, a new deal meeting housing and care needs project and a daily living support service.

Profiles of the 3 experimental projects and case studies of the 13 additional services identified can be found in Making the Links Book 2.

The overall conclusions drawn from the study of the diverse range of services being provided by home improvement agencies of relevance to the planners, commissioners and providers of services for older people are included in Making the Links Book 1.



Main findings

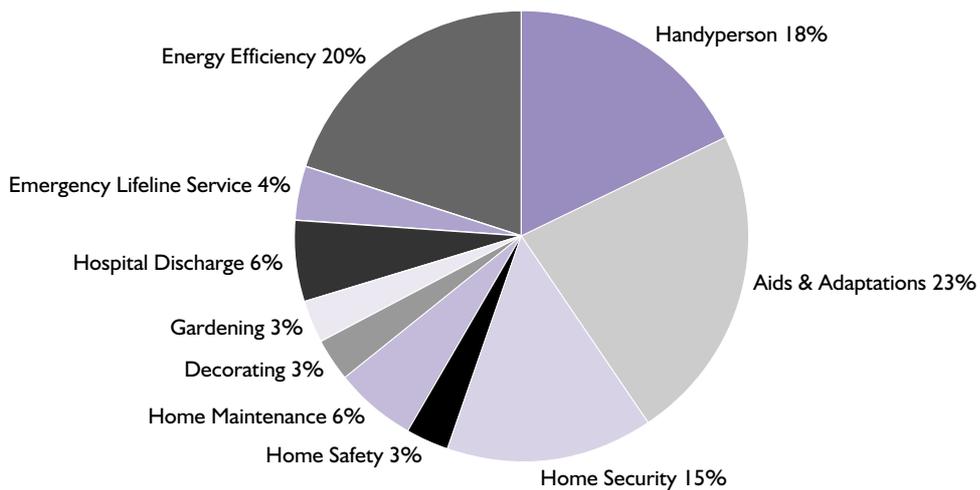
Additional services – a widespread phenomena

The snapshot view of the national picture in 1997 revealed that diversification was widespread amongst HIAs, but that there were variations in levels of activity dependent upon regional, management model, and core funder factors. 13 different types of additional service were identified;

Hospital Discharge Scheme, Handyperson Service, Disabled Peoples Housing Service, Disabled Peoples Project, Aids and Adaptations Project, Emergency Lifeline Service, Integrated Home Maintenance, Painting & Decorating Training Project, Energy Efficiency Project, Home Security Service, Gardening Service, Decorating Service, Unsolicited Calls Helpline, Home Maintenance Project

- The past 3 years have seen a very significant growth in the number of agencies providing additional services with 93% of HIAs reporting provision of at least one additional service in 2000 compared with 58% in 1997. The extent to which HIAs have diversified is an indication that at least some of these services are fast becoming far from 'marginal' to core activity, but are part of a holistic service for HIA clients.

FIGURE 3: ADDITIONAL SERVICES OPERATED BY HOME IMPROVEMENT AGENCIES IN 2000



Impetus for new developments

The majority of additional services operated by HIAs have been initiated by the agency as a result of service requests from clients or in response to needs identified by HIA staff, although a significant number of additional services have been developed in response to a request from a funder and/or commissioning body, such as social services.

Often, the additional service is started up some time after need has been identified in response to availability of a new source of funding; HIAs are responding to a changing policy and funding environment in order to meet the identified needs of their clients as fully as possible.

- *HIAs have a long track record of working across housing, health and social care sectors and have demonstrated their ability to remain locally flexible whilst operating within a broad national framework.*
- *The degree to which commissioning bodies are requesting agencies to deliver new services demonstrates a recognition of how well placed HIAs are to operate in the environment of “joined-up thinking” and cross-departmental working.*

The changing face of home improvement agencies

For the purposes of this research, and also for the allocation of government funding, the “core service” provided by an HIA is specifically defined and relates to the repair, renovation or adaptation of clients homes.

However, the research identified that the separation of services into core and additional does not necessarily reflect the ways in which agencies and clients perceive the overall service. Many HIAs believe that the core service and additional services are closely linked or even part of one holistic service seeking to meet their main objective; that of enhancing independent living amongst older and disabled people through addressing housing related needs.

It would seem that different types of services are sometimes separated more by funding related definitions than by actual operational factors.

- *The role of the additional services appears to be one which enhances, adapts, expands and improves on the core service, fulfilling the same objectives in altered, different or new ways and thus can be seen as a development of the HIA service.*
- *When an organisation sets out to fulfil a broad objective it often begins this task in one way. As time goes on, things change and new situations and experiences come to light. In order to continue to meet their objectives, meet them in a fuller way, or in a more effective way, organisations expand and adapt. This is what underlies the diversification of HIAs.*

Case Study

A referral was made to the Sefton Home from Hospital scheme by the hospital OT requesting an extra stair rail to be fitted for Mrs G who is 87 years old and lives alone. She was due to be discharged from hospital that same day following a fall which had left her with a broken arm and shoulder.

The caseworker arranged for contractor to go out late afternoon same day to fit a stair rail. She also visited the client herself two days later to check that the work had been carried out satisfactorily and the client was finding the adaptation suitable/helpful.

The caseworker found the stair rail in place, and Mrs G said that she would not have been able to get up and down the stairs without it. However, the caseworkers main concern was the state of the electrics in the housing, which were at least 50 years old, very worn and appeared to be in a dangerous condition.

Outcome

Caseworker arranged for a report from an electrician who confirmed that the wiring throughout the house was in a very dangerous condition and recommended an immediate rewire.

A successful application for a home repairs assistance grant was made on the client's behalf and the work organised by the HIA to make Mrs G's home a safe place to live. The client was very pleased with the service and now feels much more secure.

Funding additional services

At the time of the main mapping exercise in 1997-8, the main funders of additional services were local authorities generally and social services specifically. Whilst many additional services have demonstrable health benefits and are often valued and respected by health sector staff, health authorities were found to fund relatively few HIA additional services. In the light of recent policy changes this situation may be changing. Pooled budgets and new funding systems should increase the possible funding options for services which cross the housing and care divide.

HIAs are diversifying despite funding constraints. HIAs often have to put together a complex patchwork of funding in order to get a new service off the ground and then maintain it in the longer term. This can lead to an unsatisfactory “stop-start” situation for additional service provision. Whilst the range of funders is evidence of interagency working, it can also result in problems of poor co-ordination of funding streams.

- *HIAs are attempting to address complex and long-term needs. The insecurity of funding makes a long term vision and strategy difficult to implement and creates a necessity for short termism.*
- *HIAs are carrying out groundbreaking work in their attempts to work cross sectorally, but until a more coherent interdepartmental framework for service planning, commissioning and funding is developed, there will continue to be constraints on effective inter-agency delivery of services which cross the housing and care divide.*

The impact and value of cross cutting services

In order to assess the effects of the 3 experimental projects on service users, as well as on other service providers, the potential impact on each client of not providing the additional service was examined.

In many cases, had the additional service not been available there would have been a decrease in independence for the client leading ultimately in some cases to the person having to leave their own home. In the case of additional services which particularly impact on hospital discharge there were benefits with regard to hospital waiting lists, staff pressures, financial costs and ability of statutory providers to meet performance targets.

- *As well as benefiting individuals, additional services can have a broad positive impact, enabling service providers and commissioners to meet their own service standards. The provision of services which cross the boundaries of housing and care has beneficial and far reaching outcomes for clients, their families and friends and for other voluntary and statutory agencies.*
- *The effects of the additional services on the lives of older people are often much wider than originally envisaged. Feedback from clients revealed that the services were having a more general positive social impact on clients confidence and ability to deal with day to day problems. Knowing that there was someone to turn to for help should the need arise appears to be particularly important.*

Quote from Agency Manager

“It’s not my job to take over but to help them (the service users) get back the control of their own lives which has been slipping away because of falling income, diminishing savings, a home that is deteriorating around them and a body which can no longer get in the bath or up the stairs without assistance.

Repair without the Care is only half the story, and often the repair is the easy bit. The skill of the home improvement agency is to combine the two so that the clients have some choice and independence which after all, is only what we wish for ourselves.”

Diversification, partnership and inter-agency working

Whilst there are still lessons to learn with regard to effective inter-agency working, a range of working relationships have developed through the diversification of HIAs including;

Joint responsibility for service delivery, referral relationship, joint service development and funding arrangement only.

The relationships which HIAs have with partner agencies has a crucial impact on the delivery of the additional service; in most cases the relationship which an agency has with another organisation is an enabling factor but in some cases it can be a constraint.

- *HIAs promote increased inter-agency working through the development of services which cross the housing and care divide insofar as such diversification enables the development of relationships with a wide range of partners in addition to those involved with the core HIA service,*
- *A hospital discharge service for example may aid the development of the HIAs relationship with the health authority. By bringing together individuals from health, social services and housing for a specific project there is the potential for wider benefits in terms of better working relationships being forged between service commissioners and policy makers.*
- *Joint working can enable each organisation to improve their effectiveness and efficiency, it can help all parties to be responsive to changing needs and demands and it can provide some consistency in service delivery across the fields of health, care, housing and others.*

Mr S is 63 years old. He is partially sighted and has been diagnosed as suffering with Alzheimer's disease. On discharge from hospital a referral was made to Home from Hospital by the OT requesting handrails outside the rear door and adjustment to flagstones on the front path. When the caseworker visited to check the work, a number of issues gave rise to concern, mostly with regard to the clients wife and the general state of their home.

Mrs S had paid all of their savings to a builder to have her kitchen and utility room knocked through to make more space in the kitchen. A very poor, unsafe job had been done. Whilst Mrs S had taken the builder to court and won her case, the builder had gone bankrupt and so Mrs S couldn't get any compensation or have the bad work put right.

Furthermore, the roof was in a poor state of repair, leaking in parts and causing Mrs S great distress, as the clients had no money left to put it right and as they are living on a very low income they had no prospect of saving enough for such work.

Mrs S was trying very hard to look after her husband, sort out the problems in her house and manage on a very low budget, but she was obviously feeling depressed, isolated and lonely and worried that she would never be able to 'put her house in order'.

Outcome

The caseworker arranged for the HIA technical officer to visit to assess the kitchen defects then applied successfully to the Social Fund for grant of £700 to pay for the remedial work.

She also contacted Sefton Carers for support for Mrs S. They have encouraged Mrs S to join free classes and groups and are giving her ongoing advice and support, including working with the HIA to try to raise money from charities to pay for the roof repairs.

Mrs S is now a very different person and although she finds it difficult to cope with her husband's illness at times, life is easier with the help and support she now receives. She is also 'over the moon' with her kitchen. The caseworker feels that Mrs S's improved health and well being is bound to have a knock on effect on how she cares for, and copes with her husband.



- *In their efforts to meet the housing and related care needs of older and disabled people, the majority of HIAs are moving into new areas of service provision, but to varying degrees. They are also adapting to a different political outlook and consequently changed policies and strategies for service provision which stress closer joint working between service commissioners and providers across the housing, health and social care sectors.*
- *The HIA core service already addresses some housing and care needs by carrying out work to enable people to live independently at home. By addressing individuals' housing needs through adaptations, improvements and repairs, the core HIA service increases the safety, security, accessibility and comfort of peoples' own homes thus reducing the need for residential or non-residential care and improving the lives of older, disabled and vulnerable people. Through development of a wider range of additional services, HIAs can meet the housing and care needs of older people in a more holistic way.*
- *By breaking through the barriers of traditional housing and care services, HIAs are able for example, to offer daily living support alongside the provision of grab rails and equipment advice as demonstrated by the Daily Living Support experimental project. HIAs are able to carry out minor repair or adaptation work at the same time as decorating or gardening, as some handy person schemes do. They are able to address both housing and care needs within one project, or between a variety of inter-linked projects within one agency.*
- *Through the provision of a wide range of practical services which help older people remain independent within their own homes for longer, HIAs could help to deliver savings in state expenditure through reduced demand for residential care and specialist housing provision.*
- *Given how much has been achieved by HIAs at a local level in the face of ad-hoc funding and rapidly changing policy and practice, the potential for even more significant results is enormous if a strategic approach was taken to service development and delivery.*

There are both dangers and opportunities ahead – will the new Supporting People funding framework adequately address prevention and support services, particularly for people living in the general housing stock, or will this sector lose out to special needs housing provision?

With the bringing together of health and social care services, will a limited, medical model of service provision predominate and will housing related/preventative services lose out?

The challenge for all concerned with the development and delivery of services for older people is to ensure that the needs of the vast majority of older people who live and who wish to continue to live in their own homes, are given adequate priority as these new funding systems come into place.

If you would like to obtain a copy of **Making the Links** contact:

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About Care & Repair England

Care & Repair England is a national charity established in 1986 to improve the housing and living conditions of older and disabled people. It aims to innovate, develop, promote and support housing policies and initiatives which help older and disabled people live independently in their homes for as long as they wish.

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