

# St Helens – Local authority in-house home improvement agency

## Good practice themes

- 1. Comprehensive range of discretionary services within Regulatory Reform Order policy**
- 2. Partnership working with emergency services via St Helens Hospital Avoidance Car**
- 3. Support for self-funders through local care and repair service**
- 4. Accessible and clear information on a wide range of services**

## Context

St Helens Council is a Metropolitan Borough in Merseyside. It serves a population of just under 180,000 with projections of a 4% increase by 2025. The largest proportional increase is anticipated to be in the over 80 years age range. This element future demographic profile is recognised within several council strategy documents as one of the contributory factors leading to an increase of age related co-morbidities and increasingly complex needs being presented to the health and care sectors.

A targeted focus of housing led interventions for vulnerable households are accepted locally as one route through which this demand can be managed and where individuals can experience improved health and wellbeing.

The Housing Assistance Policy delivered by the St Helens Home Improvement Agency (HIA) (launched in 2009) reflects this way of working with resources prioritised on helping older, disabled and vulnerable homeowners, private tenants and social housing tenants to repair, maintain or adapt their home. The prime purpose is to directly help or enable people to continue living in their own homes in comfort, safety, security and independence for as long as possible.

The HIA operates a very flexible system of referral routes into its services and offers an increasingly comprehensive range of assistance to meet presenting individual housing need and emerging local priorities, including addressing housing conditions in the private rented sector and delayed transfer of care. The HIA consciously strives to make the best use of their own financial resources that reflect the priorities expressed by local people, including older people, but also to refer to other sources of funding for specific theme based interventions such as energy efficiency and fuel poverty where health outcomes are linked to that intervention.

The HIA reports that it takes a client centred approach the current suite of services it offers, including advice and information, welfare benefit checks, home maintenance advice, handyperson, assistive technology, provision of a range of adaptations, retail sales of equipment and signposting to other services.

## 1. Housing Assistance policy (2017)

Priority for direct financial support is given to interventions which reduces the risk to individuals' health and potential demand for NHS, particularly hospital, services resulting from unsatisfactory housing conditions and/or disability. The widely accepted national health/ housing evidence base upon which the chosen focus has been determined is included as an integral element of the policy.

The full detail of the policy including eligibility, terms and conditions can be seen via [www.sthelens.gov.uk/media/5986/housing-assistance-policy-jan-2017.pdf](http://www.sthelens.gov.uk/media/5986/housing-assistance-policy-jan-2017.pdf)

In addition to mandatory disabled facilities grant the policy main components include the following:

- **Disabled facilities 'top up' grant** – up to £10,000 for mandatory works
- **Disabled facilities 'other' assistance** – in cases of hardship where there is a risk that the scheme will not proceed cases are considered on an individual basis for either a zero interest loan or grant
- **Disabled facilities grant (shared custody)** – unlikely to apply to older people but can be up to £15,000 to enable adaptations to be undertaken at the child's secondary residence
- **Fast track disabled facilities grant** – non means tested up to £2,000 for owner occupiers and private tenants or up to £30,000 for partnership housing association tenants on basis of 50:50 funding between the local authority and the social landlord.
- **Disabled facilities relocation/support assistance** – up to £10,000 in cases where existing home cannot be adapted or does not represent a value for money option to cover professional fees. A disabled facilities grant can then be processed for the new home which has to be more adaptable than the original one
- **Emergency adaptations** – for cases involving hospital discharge or end of life care as identified by an occupational therapist. This does not involve the grant process at all and whilst there is no prescribed maximum value there is a focus on recyclable adaptations like lifts, hoists and removable ramps

The agency have also developed a range of services that provide Added Value to older people including:

- **St Helens council loan product** – up to £5,000 to remove significant Category 1 hazards in the home in the high priority areas of excess cold, falls, fire/CO2, access by intruders and having regard to existing health needs, financial assessment and other social care packages in place and where the intervention would be improved by that intervention
- **Minor works grant** – up to £5,000 aligned to council loan product scheme as targeted at category 1 hazards but applicable in cases where works are under £2,000 so loan administration not cost effective or for emergency works to prevent imminent health and safety risk or where householder not able to meet loan criteria. A health need is necessary as is a confirmation that other sources of funding are not available
- **Scheme based grant provision** – small scale interventions targeted at blocks of properties to reflect core client base and potential positive health outcomes. Usually related to energy efficiency measures using external funding sources
- **Emergency fund** – up to £1,000 with no conditions for the most vulnerable householders often linked to hospital discharge cases where individual has no ability to meet necessary costs

Underpinning the ambitions of the Housing Assistance Policy are other services including handyperson services, general advice including affordable warmth and housing options, plus assistive technology especially for those at risk of falling or entering hospital. If issues are identified that cannot be met directly from the agency signposting to other services is available including Age UK, utility companies, Foundations, Trading Standards and FirstStop.

## **2. Partnership working with health via the 'Hospital Avoidance Car' initiative**

This is an initiative that complements the ambitions of the HIA to improve health outcomes and reduce demand on NHS and hospital services, especially accident and emergency departments.

The hospital avoidance car responds to North West ambulance service 'green calls' to those over 55 who fall, are frail or are at risk of a hospital admission. The project utilises a rapid response vehicle which is enhanced with specialist lifting equipment. A paramedic and occupational therapist travel in the vehicle and provide a holistic approach to care by medically assessing an individual upon arrival, safely lifting an individual where appropriate, and providing therapy based intervention/treatment and signposting to appropriate services for on-going support.

This intervention aims to prevent individuals being conveyed to hospital and also avoids hospital admission. A 'Plan-Do-Act' approach has been implemented during the delivery of the project and some aspects of the interventions have changed to gain better results for the individual. In particular, the operating times have changed and are kept under continuous review.

When the pilot commenced other similar preventative initiatives had demonstrated that of those incidents responded to an average of 71% of individuals were not subsequently conveyed to hospital. By comparison, across St Helens, 77.4% of ambulance service attended incidents resulted in individuals being conveyed to hospital.

The hospital avoidance car pilot commenced on the 5th December 2016 and is a collaboration between North West ambulance service, the Clinical Commissioning Group, local Public Health, the local authority occupational therapy service, falls prevention service and St Helens GP ROTA.

The majority of the referrals come into the service directly from 999 calls and are communicated directly to the staff on the vehicle. Ongoing referrals are made into the HIA for a variety of services, such as handyman services, affordable warmth, careline, occupational therapy and associated equipment, community falls team, ROTA GP visit and often rapid response. All data is captured on the local authority IASH liquid logic database system and weekly activity reports provided by the ambulance service to commissioners. If the service is continued it is recommended that the commissioning support unit also hold this data as NHS numbers would enable further tracking from activity within the acute trust.

The hospital avoidance car was set a target of responding to 20 calls per week (with the original 8 hour shifts) which was changed to 22 when the shifts extended to 12 hour shifts. The car has consistently responded to less than 20 calls a month, and over the lifetime of the project to date has responded to a total 776 calls against a target of 1,048 (as illustrated in Appendix 1), although the activity against target has been increasing as the project has progressed.

Since December 2016 the initial criteria for responding has been amended from responding to falls calls to any calls where there is a risk of an older person being conveyed to hospital. In addition, the service has also extended its operating hours into the weekend at no additional cost (specified operation is 7am-7pm, 5 days weekly).

The hospital avoidance car has a 34% rate of conveying an individual to Hospital in comparison to the 71% conveyance rate following a visit from an ambulance (for similar calls). It is assumed that as there are less people conveyed to hospital there will be a reduction in the number of people being admitted. The conversion rate for admittance for falls over 65 is 69%.

Data was captured and utilised to model the financial impact of the reduction in conveyancing and admission to hospital. The cost saving to the clinical commissioning group (after costs deducted) during the pilot was £99,317. During the 12-month period 5 December 2016 to 20 November 2017 there were 81 properties visited by handyperson services which equated to a cost of £12,801 for handyperson and assistive technology support.

The activity data is shown in the following table.

Activity		Comments
Actual attendances by the car	776	
Average age of patient	80 years	
Number of patients conveyed to A&E	267	
Nmber of patients not conveyed to A&E	509	
Deflection from A&E	356	Assumes 30% would not have been conveyed based on historic conversion rates
Admission deflections based on 69% conversation rate	245	
Percentage of care homes residents	10%	
Number of properties visited by Handyman services	81	£12,801- costs of handyman and assistive technology support- not charged to this service

The quantitative impact has been based on urgent care avoidance. To date it has not been possible to evaluate the financial impact of reducing severity of falls from fractured neck of femur or social care costs such as long term residential care, hence these are unknown, but could be substantial.

### Qualitative Evaluation of the Hospital Avoidance Car initiative

In terms of qualitative impact case examples have demonstrate the wrap around care from community services following service intervention, being further cared for and ongoing interventions.

In terms of resulting referrals into the home improvement agency:

- 81 properties visited and a total of 182 housing interventions carried out at an average of 2 jobs per household. The handyman service provide a unique 2 hour response (when they are operational) to the avoidance car
- 22 properties visited by the technology care team to install assistive technology/careline
- The total costs of these services were £12,801, although these costs are not being recharged to the hospital avoidance car service.

A decision has been made that the hospital avoidance car initiative is to be embedded as a mainstream response service for a further two years from March 2018.

## 3. Support for self-funders

There is a recognition that some householders occupy properties that may not be ideal for their circumstances and whilst they want to adapt, repair or improve them but either do not want to formally apply for grant funding, or may not be eligible for the range of council funded support services.

One notable barrier to older people organising improvements to their home is a lack of knowledge and a worry about rogue traders. These fears are especially prevalent amongst more isolated and vulnerable older people.

All information and advice services within the agency are universally free to local residents and include fire safety checks, accident prevention measures, home safety and maintenance checks and welfare benefit checks. An occupational therapist assessment is also available at no cost for householders who would prefer to self-fund home adaptations.

Hopefully this form of independent and impartial advice enables older people to make an informed decision about taking forward home improvements. Views captured in policy development with the local community indicated strongly that public services, or commercial services endorsed by public bodies, are more trusted than an individual approaching commercial services directly. Consequently one option available to householders intending to self-fund is to access fee based services available through the HIA which currently consist of:

- A full or partial agency service for schemes of adaptation or improvements
- Advice from the Affordable Warmth Unit regarding the availability of energy efficiency measures and assistance to external funding sources
- The handyman service for small scale repairs
- Items of equipment or monitoring/response telecare services

#### **4. Accessible and clear information**

The HIA service has developed incrementally over a number of years and currently provides a wide range of services, some of which are free and some of which involve a cost. Older people, who are the main recipients of many of these services, are known to want to see or receive information that is easy to read and understand and which answers frequently asked questions. The St Helens website in respect of services available through the agency is very easy to navigate and has a wealth of information laid out in an attractive fashion. The logos of the council and the agency are very prominent so there is little chance of confusion to the reader in respect of the origin of the information they are looking at. Information relating to the process involved in applying for disabled adaptations and other services is easy to locate and there is signposting to other council services like Trading Standards and energy efficiency schemes. Signposting to external organisations such as Age UK, Foundations and FirstStop is also easy to navigate.

One issue that can arise when a full range of services has been developed is that of increasing level of expectations by the local community on eligibility for assistance. Unusually for council websites the full Housing Assistance policy including detailed supporting health and community profile information that influenced eligibility is very visibly displayed on the agency webpages which can operate to avoid unrealistic expectations.

The service fully recognise that a proportion of older people as potential service users do not use the internet and so information is made available in a range of alternative formats so as to ensure access to the service remains equitable. The service has a dedicated phone line and HIA staff receiving referrals are trained to provide information covering all aspects of the service in order to support access to services which meet the client needs. The Home Improvement Agency has a range of service leaflets which are available from Council buildings, libraries and partner organisations including GP surgeries.

The Affordable Warmth Unit develops and co-ordinates the distribution of 'Winter Warm Packs' to over 7000 vulnerable service users per annum. The packs include contact details and information on HIA services but also on a range of other Council and external services, the packs being delivered through Winter Warm public events and through the Council's partner Age UK to vulnerable, older and disabled householders, including those identified as significantly vulnerable through the Council's social care services. The Council also operates Contact Cares, a 'one stop shop' for receipt of all social care referrals, including from health and clinical sources as well as client self-referrals. Information on the HIA services is contained within the Contact Cares screening assessment to ensure that potential service users are assisted to access HIA services that they may not previously have been aware of.

In respect of older people directly influencing the content of public facing information there are opportunities via:

- A Home Improvement Agency Stakeholder Group which meets three times a year and includes service users (the group has been chaired by a retired service user in previous years). The Group had a key role in the development of the HIA website including consultation on layout and content, and continues to review and comment on the distribution of service information including leaflets and events
- Service user feedback is used every year to develop and update the Affordable Warmth Unit's annual Winter Warmth event and Winter Warm information packs

[Read case study on next page>>](#)



## Case study illustrating range of HIA services and local partnership arrangements

The Affordable Warmth Unit (AWU- part of St Helens Home Improvement Agency) visited Mrs A who is 75 years of age. The referral stated that Mrs A had been without hot water for three years and asked if she could have any assistance to get it back up and running.

Mrs A has the following health conditions Polymyalgia, Stomach Ulcers, High Cholesterol, Angina, Asthma, Severe Depression, 8 Discs out of place in back, Broken bone on coccyx, Poor Mobility.

Whilst completing the energy efficiency survey with Mrs A the AWU identified that she had no central heating in the property and the only source of heating was a gas fire. The hot water had previously been heated by a multipoint water heater which was no longer working. The AWU used the Council's Emergency Fund to obtain a report from a heating engineer, which confirmed that the heater could not be repaired and needed replacement. The AWU arranged for Mrs A to access capital grant funding for a first time central heating system/ gas combination boiler and to have the gas fire serviced. Contact was also made with the Utility Companies to ensure Mrs A was placed on the priority services register.

Also on the visit it was identified that the condition of the property was poor. The property was poorly insulated, had insecure external doors and rainwater penetration through the kitchen's flat roof was causing damp and mould issues. Mrs A was assisted to apply for the Council's low value grant (maximum £5K) to repair the kitchen roof, external doors and check electrical safety. A referral was also made to access the Council funded cavity and loft insulation scheme. The AWU made a referral to British Red Cross and have accessed funding on behalf of Mrs A to pay for works in excess of the Council's £5K limit. Advice was also given to Mrs A regarding decluttering her home in preparation for the central heating and repair works

Mrs A also reported to the AWU that she was having difficulty getting in and out of the bath and would benefit from additional grab rails to help access around the property. A referral was therefore made for an Occupational Therapy assessment to look at bathing issues and grab rails / additional stair rails were fitted by the Home Improvement Agency Handyperson service.

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## Contacts

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