

West of England Care & Repair – independent home improvement agency

Good practice themes

- 1. An evaluated home from hospital scheme**
- 2. Support for self-funders**
- 3. Enabling adaptations through addressing hoarding**

Context

West of England Care & Repair (WE C&R) currently provides a wide range of housing related services in the local authority areas administered by Bristol, North Somerset, Bath and North East Somerset and Gloucestershire councils.

It was established in 1986 and is a not for profit organisation with charitable status whose principal aim is to enable older, disabled, low income and vulnerable people to continue living independently. It is one of the largest independent home improvement agencies in England. It has a very open and encouraging approach to receiving referrals from individual householders as well as other organisations in the public, private and voluntary sectors.

Since its inception the agency has been characterised by developing and adopting a comprehensive service offer that reflects the ambitions and priorities of service users. They have nurtured effective partnerships with many organisations, have a high degree of support from local politicians and over many years have received awards for innovative practice.

As well as the initiatives described below, WE C&R is a leading provider of handyperson services, housing and care options information and advice (including help to move home), a pioneer of managing a hardship fund, equity release, integrated working across, health, housing and care, plus involvement of older volunteers.

1. An evaluated home from hospital pilot scheme

Background

Whilst WE C&R had assisted people to return home from hospital through home modifications for a number of years the demand on that service had been increasing. There are a variety of well documented reasons why delayed transfers of care has become an increasing priority for the NHS and adult social care.

The negative impacts on older people of either remaining in hospital when medically fit or experiencing premature discharges to unsatisfactory home conditions were also recognised as a priority concern by WE C&R. In early 2016 approval was given by the local Bristol charity, the Dolphin Society, to use a grant of just under £24,000 to pay for essential small works to patients' homes in order to support faster, safe discharge to home and hence reduce delayed discharge and make more efficient use of hospital beds. The pilot initiative was evaluated to assess its impacts and potential cost benefits.

How the hospital scheme operated

The evaluated pilot scheme ran for four months in 2016, assisting patients in two major Bristol hospitals – The Bristol Royal Infirmary (BRI) and Southmead Hospital, plus a number of smaller rehabilitation hospitals.

It was a timely initiative as a new strategy was being piloted in Bristol entitled 'Discharge to Assess' (subsequently rolled out nationally) which operated three discharge pathways:

1. **Home with support**
2. **Community step down facility**
3. **Nursing or care home**

The WE C&R home from hospital service dealt with 'Home with support' discharge cases referred to them by hospital based staff.

The type of works arranged for patients and /or delivered by the HIA to enable faster discharge included; deep cleaning, de-cluttering, minor adaptations, minor repairs, equipment, heating repairs, falls prevention measures.

Individual jobs were modest in scale and were generally less than £250 in value, and the cost was met in full via the Dolphin Trust grant fund.

The WE C&R caseworkers were experienced in working with older people, often at a point of crisis in their lives. They adopted a holistic assessment of patients, not only arranging the necessary urgent works to get people home but also identifying other needs that could be addressed after hospital discharge, including more major adaptations.

Evaluation findings

The independent evaluation was undertaken by a consultancy that is experienced in work relating to home improvement agencies, home adaptations and the interface between health, housing and social care.

The evaluation used data about referral sources, patient characteristics, home characteristics, types of work undertaken, speed of delivery of interventions, cost of works, using this information to then assess cost benefits through bed days saved as a result of faster discharge to home.

Interviews with 15 hospital based staff provided qualitative information, revealing the extent to which the service was resulting in savings in NHS staff time related to less time being spent trying to find/ arrange housing services,

A small but representative sample of cases were costed solely in terms of bed days saved compared with the cost of essential building works carried out to the patients' homes. The result was a 14:1 cost benefit ratio, not including any savings in NHS staff time or the potential cost of residential care/care and support packages in a proportion of cases if the housing intervention had not occurred. The full evaluation report can be seen here www.wecr.org.uk/download/i/mark_dl/u/4011178657/4630694895/HfH%20Dolphin_WECCR%20Final%20Report_%20130916.pdf

What happened next

Whilst the findings were extremely positive and demonstrated both cost benefits and popularity with NHS staff, funding from the NHS was not forthcoming when it came paying for continuation of the scheme. However, the service has now been commissioned by Bristol City Council on a financially sustainable basis via elements within the adopted Housing Assistance policy. Demand is steadily increasing as awareness increases of the value of the service and the service is on course to help more than 200 people this year.

2. Support for self-funders

Many low income older people who need adaptations to their homes are able to obtain a means tested disabled facilities grant (DFG) and be assisted by occupational therapy and an HIA to ensure that a good job is done.

However, there are many others who do not meet the DFG criteria and have very understandable concerns about making best use of their often limited resources to pay for the most helpful and appropriate home adaptations.

WE C&R have for many years operated a number of fee based services for older and disabled people who can afford to pay for the necessary modifications to their homes, including a full agency service for major building projects.

In 2017 WE C&R re-launched a bathroom adaptation service for self-funders. This builds on the experience of running the two **Home Independence Centres** (one in Bristol and one in North Somerset) each of which is designed to help residents make well informed decisions about modifications to their home.

These centres include attractive, accessible kitchen, living room, bedroom and bathroom displays with demonstration shower units, toilets/bidet systems as well as products, such as dementia friendly items, all of which are available to try without any hard selling techniques employed.

A comprehensive assessment by an occupational therapist is also an option. The assessment can be undertaken in an individual's own home (coming to the centre often precedes in home OT assessment).

The technical team and a contractor visit the home once an initial interest is expressed and from that one visit generate a drawing and quotation which is sent to the householder. If the person wishes to proceed with the proposed adaptation the next steps will be agreed, including a meeting with the person at their home two weeks before the work is due to start to answer any questions or deal with queries.

The money for the building work is paid to the agency in advance but not released to the contractor until the client is happy with the completed scheme.

The service has proved very popular and is helping to generate a surplus that is added to the agency's hardship fund, returned funds to commissioners via a "gain share" agreement and subsidised other initiatives such as the volunteer programmes.

3. Enabling adaptations through addressing the problem of hoarding

Context

The agency has identified an increasing problem of people having too many possessions in the home and these being an obstacle to safe living, including preventing essential repairs and adaptations being carried out to make older people's homes safe. In some cases such acquisition of excess 'stuff' has tipped over into pathological hoarding. It was an issue highlighted from their home from hospital cases.

In 2016 WE C&R worked with the University of Bath Clinical Psychology Department to develop plans for a 'Making Space' service to tackle the problem of more serious hoarding. This involves agency staff and volunteers working with householders in empathetic ways to gradually reduce the number of hoarded items, creating the space to make the home more safe and suitable.

Whilst in extreme cases enforcement action can be taken by the local authority, this approach is costly, usually has a negative effect on the mental health of the hoarder and any improvement in hoarding itself can be short lived as it is not addressing the cause of the problem and so clutter rapidly accumulates.

All local authorities have experience of such cases, usually from complaints from occupiers of neighbouring property or the Fire Service (noting the significant fire hazard that such homes present).

Working with a University PhD student and supported by the Dunhill Medical Trust, WE CR have a robust monitoring framework in place to enable evaluation of the initiative.

In the context of adaptations, hoarding is now a recognised mental health issue a proportion of the cases to date have involved the need for minor and major adaptations which could not have been safely delivered in the cluttered homes.



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