

## SOUTH CAMBRIDGESHIRE DISTRICT COUNCIL

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**REPORT TO:** Housing and Environmental Services  
Portfolio Holder

**AUTHOR/S:** Corporate Manager Affordable Homes

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28 April 2008

### EVALUATION OF THE REVIEW OF SHELTERED HOUSING

#### Purpose

1. To report to Portfolio Holder on the outcomes of an evaluation exercise of the changes implemented in the sheltered housing service following review by the Housing for Older People Advisory Group (HOPAG).
2. To propose changes in service provision in response to the evaluation.

#### Executive Summary

3. A review of the Sheltered Housing Service was carried out in 2005, with Cabinet approving a programme of service improvements based on a new vision for the service.
4. An evaluation exercise was carried out in Autumn 2007 to assess the level of success of the changes against the original aims, involving a desktop exercise and staff and resident forums. The exercise shows the service has made considerable improvements towards the vision whilst acknowledging that the changes have not been universally welcomed. The report highlights areas for further improvement, with some immediate actions highlighted.
5. The Portfolio Holder is recommended to note the outcomes achieved and approve the development of an Action Plan for further improvement and the continued development of Sheltered Housing Forums to ensure ongoing resident involvement.

#### Background

6. HOPAG was established following the outcomes of the countywide Best Value Review of Sheltered Housing to provide overall guidance on taking the recommendations of the Review forward in South Cambridgeshire. The Review suggested an over-provision of sheltered housing in South Cambridgeshire, plus a high staffing level in comparison to other providers. Other aspects of the BV Review, particularly the development of extracare housing, have been taken forward by the county Implementation Group, which continues to operate.
7. The review of the service in South Cambridgeshire was also carried out against the background of a likely reduction in the availability of the Supporting People grant that part funds the sheltered housing service and pressures on the General Fund and Housing Revenue Account.
8. The final report to Cabinet on 10 November 2005 set out a new vision for a Sheltered Housing service that:

- (a) Is financially sustainable
  - (b) Provides a high quality, flexible, management and support service, tailored to the needs of our older residents
  - (c) Encourages independence and allows dignity and quality of life and
  - (d) Is integrated with other complementary services for older people
9. Cabinet endorsed proposals based upon:
- (a) A new role for scheme managers – to increase their responsibilities for the assessment and induction of residents; closer working with neighbourhood managers and health and social care staff; to work 9 to 5 and no longer be required to live on site.
  - (b) A local team based approach – with managers organised into small teams, each manager providing support to a group of residents and having responsibility for communal facilities; within those teams, managers providing cover to nearby schemes when the regular manager is absent; and some providing support to residents in two schemes in order to balance resident numbers.
  - (c) A new out of hours response service – with all calls for out of hours on-site assistance directed to a team of health and social care staff.
  - (d) Better use of communal facilities – to ensure that all schemes enjoy a full activity programme; that residents are supported to organise activities, and that social and health care services are brought into communal facilities. To encourage older people from local communities to use the facilities.
  - (e) Within the proposals were the aims of moving to a staff:resident ratio of 1:34 and to effect savings of £458,000 (not including any pension or redundancy costs)
10. To be meaningful, the outcomes of the sheltered review need to be evaluated against the original vision and the effects of the changes in moving towards that vision.

### **Considerations**

11. Since adoption of the proposals in November 2005, key changes have been made to the sheltered housing service:
- (a) The role of the Scheme Manager was re-defined and re-titled as Sheltered Housing Officer. They operate in 3 area-based teams, supporting each other but with a designated lead officer for each scheme. The service is moving away from Sheltered Housing Officers living on the site where they provide the service to residents. Due to officers retiring and leaving the service we currently employ 34 fte officers and 1 temporary officer, covering 45 schemes, which equates to an overall ratio of 1:39 residents. The sheltered service has advertised for new staff and is looking to appoint 4 sheltered housing officers in the New Year, which will equate to an overall ratio of 1:35 residents.

- (b) The out of hours service is now provided by the Primary Care Trust Care Response service, who operate from 5pm to 9am every day and 24 hours at weekends and public holidays. This service began in April 2006.
- (c) Communal facilities – there was no consistent monitoring of use of communal facilities at the time of the review and therefore no baseline for comparison. The focus groups held suggest a wide disparity between schemes with regard to volume and type of use. Formal monitoring will be starting in the near future as part of the development of a performance indicator for use of communal facilities within sheltered housing.
- (d) The implementation of the changes has not been popular with all staff nor with all residents. The first 18 months of the transition has included periods of stress within the service and a number of individual problems that have needed to be addressed before this evaluation could be undertaken. This review incorporates some of these concerns in the ‘what could be improved’ part of the tables below but focuses on service wide concerns rather than individual issues.

### **Methodology**

- 12. The evaluation methodology consisted of:
  - (a) Desktop analysis of performance monitoring information from the PCT Care Response out of hours service
  - (b) Analysis of satisfaction cards from the out of hours service
  - (c) A series of structured focus groups held across the district with residents and staff during October and November 2007
  - (d) Feedback from the PCT via team meetings

### **Desktop Analysis**

- 13. The PCT out of hours service began in April 2006. A full breakdown of calls received and responses is attached as Appendix 1, but highlights are
  - (a) 687 calls received in 2006/7 and 304 for the first 6 months of 2007/8 – an average of 55 calls per month overall
  - (b) A response rate of 80% of calls within 30 minutes
  - (c) 64% of all calls being a “silent call” or necessitating further action from care professionals
  - (d) an estimated avoidance of 67 hospital admissions to date in 2007/8 (based upon fallers being assisted rather than an ambulance being called). The saving to the health economy due to this is in excess of £120,000
- 14. On each callout the CR24 Team leave a customer response card which the person receiving assistance uses to express their satisfaction. Unfortunately very few of these have been returned since this began in April 2007 so different means of distribution/collection will be explored to optimise feedback.
- 15. Of those few that have been returned all were satisfied with the service, found the staff very helpful and were happy with the service received.
- 16. Substantial financial savings have been achieved exceeding £500,000 per year exceeding the target saving of £485,000. Details are contained within Appendix 2.

### **Feedback from PCT**

17. Feedback from the PCT showed no real issues about the service, but did highlight that performance of the service could be adversely affected by high volume persistent callers who are confused or disoriented but do not have an “emergency situation” to resolve. There was support for potential expansion of the service to include community alarm users, but with the proviso that this would be difficult without an increase in personnel.

### **Focus Groups**

18. A number of structured focus groups were held over October and November 2007, a series with staff (split between area teams) and a series with residents at communal facilities across the district. The groups were facilitated by Council staff with a set agenda.
19. 39 tenants and leaseholders attended the forums and all are happy to attend future forum meetings.
20. The full transcripts of the sessions have been analysed to draw out a number of key and common themes, although with some difference between areas and especially between the staff and residents sessions. Individual references to residents’ problems are deliberately not included.

21. Residents Groups

<b>Sheltered Housing Officer role</b>	<b>What works well</b>	<b>What could be improved</b>
	Lead officer role – maintains familiarity at schemes	More consistent 9-5 presence on site
	Link to other Council services – especially repairs	More help with care services/agencies
	Daily contact – reassurance	Feeling of reduced service without resident manager
	Support on hospital discharge	No ownership by SHO
		Briefness of visits
		Unpopularity of afternoon visits
<b>Use of communal facilities</b>	<b>What works well</b>	<b>What could be improved</b>
	Joint activities with other schemes (common to majority of groups)	Particular issue around use of cooking facilities by residents
	Where SHO is able to give support to social activities they tend to be more successful and better attended	More support needed for residents to organise activities, especially where there is no active social committee at present
	External use – can be very popular where residents are invited and activity appropriate to scheme	Set charging and rules over usage
		Loop systems in all communal rooms
		More use for health and care activities (e.g. chiropody)
	Newsletter produced for scheme and wider area – should be extended across sheltered to encourage shared events, etc. and widen usage	Transport emerged as an issue in many areas

<b>Emergencies</b>	<b>What works well</b>	<b>What could be improved</b>
	Invicta response	Key safes not popular
	PCT response	Fire/smoke alarm false alarms
	Ambulance service	CCTV monitoring of external areas
		Police presence

<b>Participation/ Communication</b>	<b>What works well</b>	<b>What could be improved</b>
	As above, where SHO gives more support	More feedback, better communication
	Groups like this were seen as a positive step	Tenants suggestion scheme with feedback through newsletters etc.
		Willingness to be more involved, but cynicism about reality of it

<b>Moving-in</b>	<b>What works well</b>	<b>What could be improved</b>
	Early visit from SHO	Clear leaflet on the scheme and the local facilities and the role of the SHO (Welcome Pack suggested)
	Help with routine e.g. day the binmen come, location of things, etc.	Good neighbour schemes suggested

<b>Other</b>	<b>What works well</b>	<b>What could be improved</b>
	Repairs service generally praised	External maintenance – especially: Grass cutting Overhanging bushes Paving slabs Trees
		Internal decoration

22. Staff groups

<b>Sheltered Housing Officer role</b>	<b>What works well</b>	<b>What could be improved</b>
	Team working and regular team meetings	Staff shortages/sickness have put pressure on others
	Job satisfaction	Repairs reporting – could be done direct?
	9 – 5 working pattern – no overnight responsibility	Communication flow from HQ to SHOs
	Lead manager role	Training in alcohol/dementia
		More use of IT
		Suggestion of smaller sub-teams in larger teams
		Excessive paperwork – particularly support plans
		A period of stability would be welcomed
		More work with care agencies
		Inconsistency between schemes
		High resident/staff ratio

<b>Use of communal facilities</b>	<b>What works well</b>	<b>What could be improved</b>
	Communal activities – but depends upon scheme and level of support from SHO	Improved security on communal facilities
	Good use of facilities by outside organisations where residents are involved/invited	Clear policy on use and charging
	Need to keep a balance between residents needs and outside use	More consistency between schemes – a standard menu to be supported by SHO, plus other activities to be organised by residents?
		Better promotion/publicity
		More shared activities between schemes
		More use by statutory services

<b>Emergencies</b>	<b>What works well</b>	<b>What could be improved</b>
	Less likely to be disturbed out of hours	Emergency services still try to contact after 5pm
	Invicta relationship	Fire alarms false alerts
	PCT service	Liaison with PCT/messages from HQ – PCT could leave messages at scheme instead, more regular meetings
		More support information for SHOs on what to do in some circumstances e.g. dealing with a death
		Ensuring cover is available when an emergency occurs
<b>Participation/ Communication</b>	<b>What works well</b>	<b>What could be improved</b>
	Daily visits – core part of the job	More choice on calls – afternoon visits unpopular – can explore other options e.g. via alarm unit
	Regular meetings with residents	Residents and families ‘ expectations can be out of synch with new service – need to review information made available and ensure families are aware of the service offered (and not offered)
	Link to other agencies	More regular liaison with PCT/care agencies
	Links to family/friends	More information from Hospital Discharge Teams
<b>Moving-in (and out)</b>	<b>What works well</b>	<b>What could be improved</b>
	Involvement in sign-ups – where it happens	Earlier involvement at application/assessment stage Early visits to schemes by applicants
		Void process – particularly around keys
		Unrealistic expectations of the SHO role – more information prior to tenancy (Welcome Pack? – include information on utility supplies
		Longer notice period for bereavements eg 4 weeks
		Pre-termination visits
		Complete all repairs when



		properties are void rather than when tenant has moved-in
<b>Other</b>	<b>What works well</b>	<b>What could be improved</b>
		Services to wider community – but would have resource implications and could prejudice existing service
		More tenant participation activity

### Implications

23.	Financial	Services are always vulnerable to resource problems, particularly if Supporting People funds continue to reduce
	Legal	None
	Staffing	None
	Risk Management	The emergency response service is working well and minimising risks to vulnerable people
	Equal Opportunities	The service is focused on vulnerable people and is generally achieving its aims. Future action plans will help to improve services.

### Consultations

24. Consultation was carried out as detailed above with:
- (a) Residents of sheltered housing
  - (b) Staff
  - (c) Cambridgeshire Primary Care Trust
  - (d) Former HOPAG members

### Effect on Annual Priorities and Corporate Objectives

25.	Affordable Homes	None
	Customer Service	The evaluation has highlighted some areas for immediate improvements to customer service
	Northstowe and other growth areas	None
	Quality, Accessible Services	The focus groups have directly influenced service provision and helped establish a framework for future customer involvement in the sheltered housing service
	Village Life	Sheltered housing is an essential part of maintaining a high quality of life for older people in our villages
	Sustainability	Sheltered housing contributes to sustaining vital services in villages, particularly public transport, shops and post offices
	Partnership	The sheltered housing service is provided in partnership with the PCT and the report highlights areas where greater partnership working can improve services

## Conclusions and next steps

26. In evaluating the outcomes of the review, it is important to remain focussed on the original aims and assess changes and the results of the focus group consultation against these:

(a) Financial sustainability

The original estimate of the savings that would accompany service change was £458,000 ongoing per annum. This did not, however, include any pension or redundancy costs. This has been exceeded with savings in 2006/7 amounted to £515,796 and the estimated saving for 2008/9 is £575,220

A breakdown is given at Appendix 2.

(b) A high quality, flexible, management and support service, tailored to the needs of our older people

(i) The daily call is still seen as a main component of the service, maintaining a familiar face at the scheme. Whilst residents had some concerns over the availability of SHOs on site, the staff themselves expressed great satisfaction with the team method and the mutual support and cover it gave them.

(ii) There was concern over the extent of some paperwork connected with the support role, but this is a requirement from Supporting People and cannot be avoided.

(iii) Residents appreciated the support they were given, particularly in times of stress, such as hospital discharge or moving-in, and staff highlighted a possible improvement through better liaison with hospital discharge teams.

(iv) More information and communication was a common thread, both for staff and residents, with the particular suggestion of a "welcome pack" occurring frequently.

(v) Whilst there was some cynicism expressed about consultation and its outcomes, the focus groups were seen as a good start in building up participation and will form the basis for the Sheltered Housing Forums. These Forums will provide the basis for developing tenant engagement in the running of the housing service and will link with the work of the Tenant Participation Group and the newly formed Leaseholder Forum.

(c) Encouraging independence and allowing dignity and quality of life

(i) The use of communal facilities varied from scheme to scheme and a clear message was the popularity of social and other events and that the communal facilities could be used more for delivery of services (e.g. chiropody).

(ii) Shared activities between schemes are popular and more were requested, but there needed to be a balance between use of communal facilities by outside organisations and residents.

- (iii) One clear message was to seek to establish greater consistency between schemes and to put in place an agreed menu of activities that should be available with staff support at all schemes. This could be included in an updated welcome pack. Early involvement at application/assessment was seen as important in ensuring realistic expectations from residents and their families.
  - (d) Integrated with other complementary services for older people
    - (i) The service received from Invicta (the alarm monitoring service) and the PCT response service were both rated highly by staff and residents and the analysis of the call-outs shows the mutual benefit in reduced emergency services attendance and the prevention of unnecessary hospital admissions.
    - (ii) Staff did highlight that they would wish for more regular contact with PCT staff and other care agencies. Residents also suggested that staff should be more proactive in liaison with care agencies.
27. Overall, looking at the desktop analysis and the feedback from the focus groups, the changes stemming from the review have made clear advances in moving the sheltered housing service towards the objectives in its new vision, albeit with some areas clearly identified as needing improvements.
28. There are some very positive proposals for further improvements stemming from the exercise. Some of these – identified below – can be actioned now within existing resources. Others do have a resource implication, either financial or staff time, and these will need to be considered by officers in the preparation of an action plan for further possible improvements, clearly identifying the resource implications and timescales.
29. Immediate actions
- (a) Updating of existing information for residents and applicants, particularly the introduction of a “Welcome Pack” clearly setting out the staff role, utility companies, local services, what to do in an emergency, etc.
  - (b) Link to hospital discharge team – the Supported Housing Manager has already arranged to meet with the team manager to discuss better liaison.
  - (c) Develop a clear policy on use of communal facilities by outside organisations, including booking procedures and clear charging policy and tariff.
  - (d) Develop a “set menu” of activities that sheltered residents can expect to be provided (with staff support) in communal facilities.
  - (e) Linking to the sheltered housing forums, produce a regular sheltered housing newsletter for all schemes, particularly to encourage shared activities and suggestions and to ensure feedback to residents.
  - (f) Promote greater use of IT, including rolling out software (including ADAPT) to enable easy access to procedures and guidelines for staff based at schemes.

- (g) Work with PCT response team to make sure there is more regular liaison with scheme-based staff.
- (h) Small working group to be set up to review the completion of Support Plans and other information requirements for Supporting People.

Other elements of the proposed improvements will be considered as part of other reviews – particularly through the review of void procedures and the allocations process.

### **Recommendations**

30. Portfolio Holder is recommended to:

- (a) Note the outcomes of the changes made through the sheltered housing review and the progress made towards achieving the objectives in the new vision for the sheltered housing service.
- (b) Approve that officers develop a detailed and costed action plan for further improvements and that actions identified here are incorporated into normal budgeting cycles.

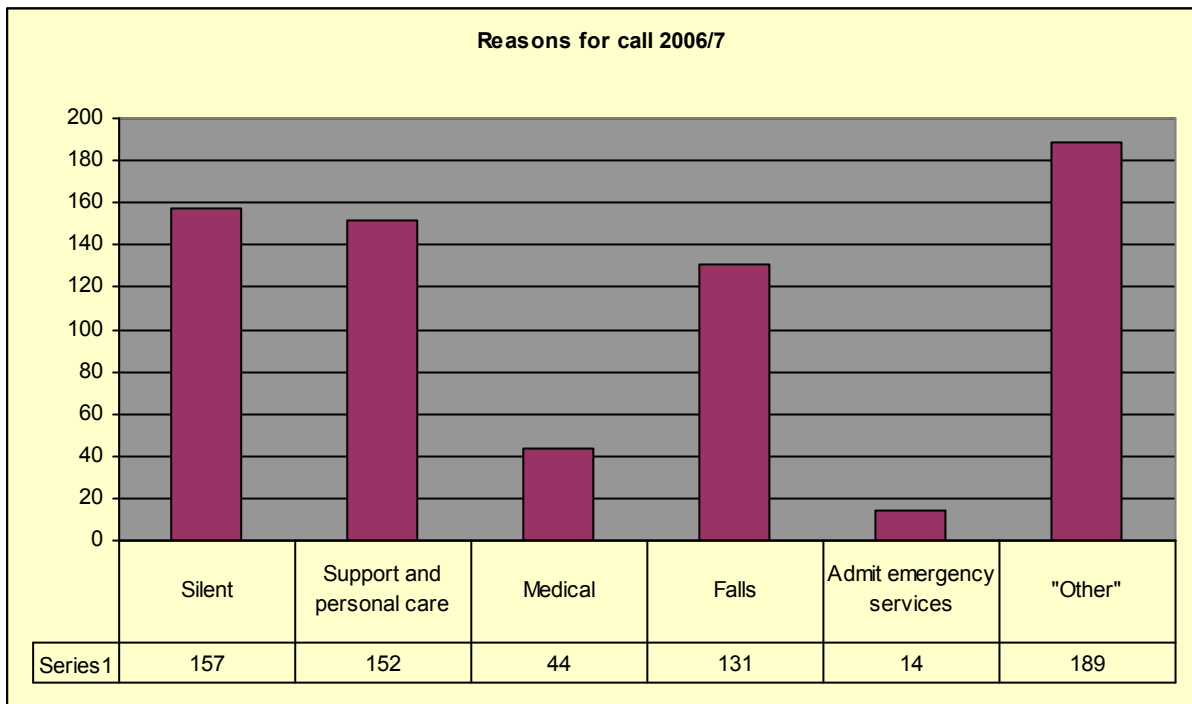
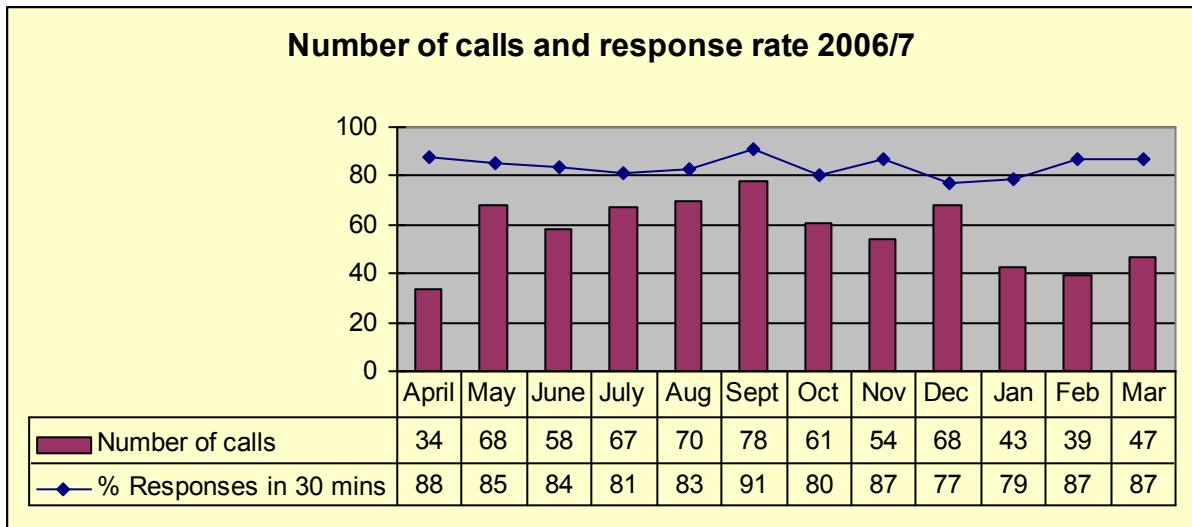
**Background Papers:** the following background papers were used in the preparation of this report:

None

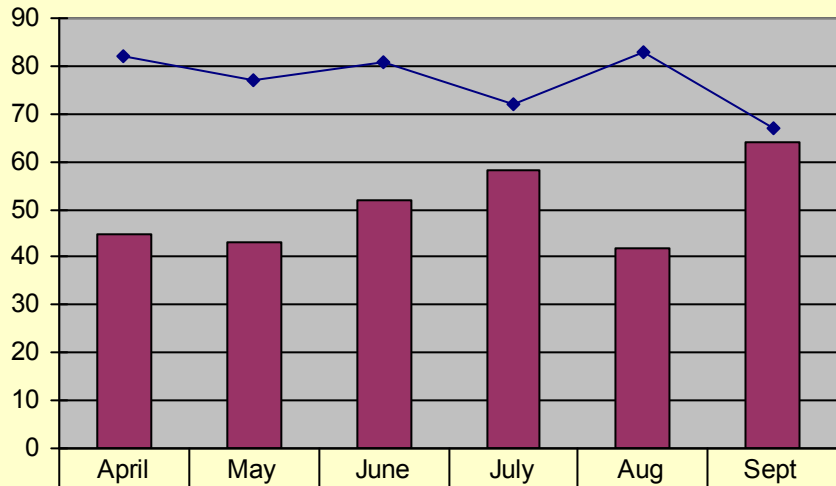
**Contact Officer:** Stephen Hills – Corporate Manager Affordable Homes  
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## APPENDIX 1

### Analysis of PCT Care Response 24 callouts 2006/7 and April – September 2007/8

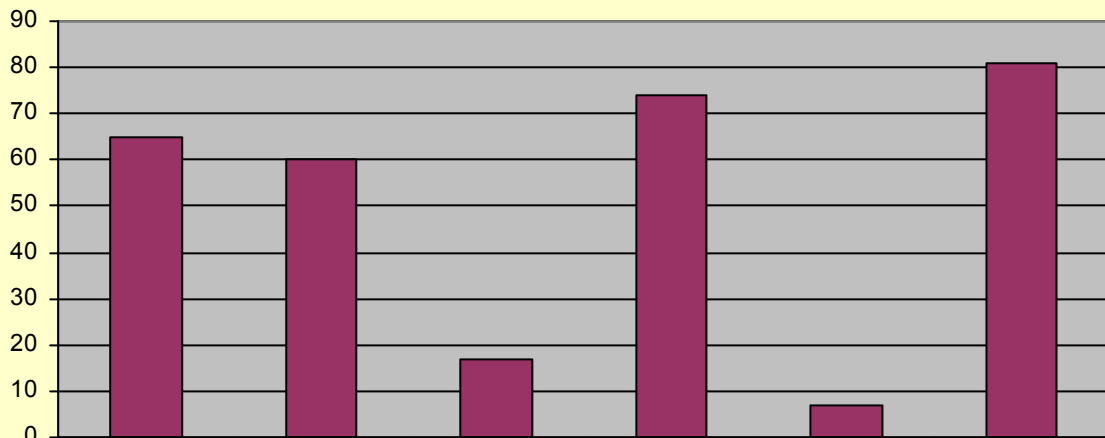


### Number of calls and response rate 2007/8



■ Number of calls	45	43	52	58	42	64
◆ % Responses in 30 mins	82	77	81	72	83	67

### Reasons for call - 2007/8



Series1	65	60	17	74	7	81
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## APPENDIX 2

### Summary of cost savings

	<b>Original Cost 05/06 £<sup>1</sup></b>	<b>Original Adj estimate 06/07 £<sup>2</sup></b>	<b>Actual 06/07 £<sup>3</sup></b>	<b>Original Adj estimate 08/09 £<sup>4</sup></b>	<b>Estimate 08/09 £<sup>5</sup></b>
<b>Total direct staffing costs <sup>6</sup></b>	1,504,000	1,579,200	1,060,796	1,658,160	1,095,000
<b>Total other costs</b>	136,500	140,868	143,476	143,410	131,350
<b>Total</b>	1,640,500	1,720,068	1,204,272	1,801,570	1,226,350
<b>Savings <sup>7</sup></b>			515,796		575,220

### Notes

1 Total cost per annum prior to changes being implemented. Figure does not include any savings made as a result of freezing posts nor any costs associated with redundancies.

2 The original cost adjusted to take account of general inflation at 2.5% and wage inflation at 5% without staff changes

3 Actual cost in 06/07 with staffing changes having been made

4 Original 05/06 costs adjusted to indicate effect of inflation by 08/09 without staff changes

5 Actual estimate for 08/09 with staff changes in place

6 Includes cost of PCT

7 Annual savings representing actual costs set against what the costs would have been without the staff changes and with inflation taken into account

8 The year 07/08 has been omitted for brevity but costs savings are also in excess of £500,000 in this year too.

## APPENDIX 3

### Key Actions

<b>Key Action</b>
Small working group to be set up to review the completion of Support Plans and other information requirements for Supporting People.
Link to hospital discharge team – the Supported Housing Manager has already arranged to meet with the team manager to discuss better liaison.
Updating of existing information for residents and applicants, particularly the introduction of a “Welcome Pack” clearly setting out the staff role, utility companies, local services, what to do in an emergency, etc.
Linking to the Sheltered Housing Forums, produce a regular sheltered housing newsletter for all schemes, particularly to encourage shared activities and suggestions and to ensure feedback to residents.
Develop a clear policy on use of communal facilities by outside organisations, including booking procedures and clear charging policy and tariff.
Promote greater use of IT, including rolling out software (including ADAPT) to enable easy access to procedures and guidelines for staff based at schemes.
Work with PCT response team to make sure there is more regular liaison with scheme-based staff.
Develop a “set menu” of activities that sheltered residents can expect to be provided (with staff support) in communal facilities.
Ensure that Sheltered Housing Officers are able to assist with viewings and where possible to be present at sign ups with the potential to take on this role.