COMMUNITY OVERVIEW AND SCRUTINY COMMITTEE

Committee Report

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Date of Meeting:

10 January 2002

Title: HOUSING DEPARTMENT ELDERLY SERVICES BEST VALUE

REVIEW – ACTION PLAN UPDATE

Report of: Director of Housing

Report reference: H.001/2002

Summary:

The report updates Members on the progress that has been made to implement the recommendations made in the Elderly Services Best Value Review.

Recommendations:

Members are asked to note the contents of this report and of the work being undertaken to implement the recommendations in the Best Value Review of Elderly Services.

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H.001/2002

To the Chairman and Members of the Community Overview

And Scrutiny Committee

Housing Department – Elderly Services Best Value Review

Action Plan Update

1. Introduction

- 1. Members may recall that the Housing Department's Elderly Services Best Value Review was carried out by external consultants HACAS Chapman Hendy, the outcomes of which were reported to a special meeting of Housing and Care Services Committee in January 2001.
- 2. The purpose of this report is to update Members on the progress that has been made to date in implementing the recommendations contained in the consultants final report (Report H.016/2001 refers).

2. Progress to Date

- 1. The consultants overall conclusions were that in best value terms the three main services provided for older people by the Housing Department (Careline, Sheltered Housing and the Housing Visitor Service) are performing well but with some scope for improvement. They went on to say that the services are economical and in cost terms are comparable with other service providers and the level of user satisfaction is extremely high.
- 2. However, the report contained a number of recommendations which will help improve the quality of the services provided and better target resources to those in greatest need and aid the delivery of better value and improved services. Appendix 1 shows progress to date in implementing the various recommendations.
- 3. Work on refocusing the services provided by Careline, Sheltered Housing and the Housing Visitor Service is already well underway with some items already completed and others either nearing completion or awaiting the outcome of the proposed stock transfer to the Riverside Group.

3. Development within Careline

- 1. Work on upgrading the equipment within the Control Room to bring in the latest technology available is now complete as is the alterations to the layout of the building itself.
- 2. Because of these facilities the Control Room is now able to promote and develop a range of innovative services to new and existing clients, but in particular to colleagues in Health and Social Services by supporting patients/clients in the community.
- 3. The following new services are in the process of being developed.
- a. Tele-medicine: Contractual discussions are at an advanced stage with the equipment manufacturer and Carlisle Acute Hospital Trust to develop a pilot scheme to provide monitors in the homes of patients which will monitor and record essential body functions, including heart, lungs, blood pressure, etc. on behalf of hospital consultants and GPs, etc. This initiative should help ease pressure on hospital waiting lists and prevent some bed blocking problems.
- b. Smart Home Technology: A pilot scheme which will be the first in the county, is about to be launched in mid January to install passive alarms that will monitor alarm systems such as heat, cold, gas, fire, flood, movement and other sensors. These alarms will enable people with dementia or other mental health or disability problems to continue living safely in the community.
- c. Fall Detection: This new alarm system will be issued to Careline clients who have limited mobility or who are prone to falling. The alarm will alert the Control Room when someone has fallen and not got up again.
- d. Lone Worker Scheme: The new Control Room equipment will allow staff to monitor the safety and well-being of Council staff and others who work in isolation and/or with difficult and dangerous client groups.
- e. Intermediate Care Projects: A pilot project, due to start in January, has been agreed with Health, Social Services and others to provide Careline type telephones, passive alarms and daily monitoring checks to appropriate clients considered suitable for early hospital discharge. The pilot, which will run initially for one year, will cover the north of the county and involve three other alarm service providers and is designed to give additional support to clients for up to six weeks after discharge from hospital.
- 1. The Careline Service provided by Carlisle City Council has been recognised by the equipment manufacturer, Tunstall Telecom, as forward thinking and at the forefront of

developing new services aimed at supporting a range of clients and patients in the community through the use of alarm technology. It is because of this willingness to work in partnership with healthcare professionals, Social Services and others that Tunstall Telecom have elected to use Carlisle as a testing ground for new ideas and technology based on the future needs and requirements of all those who support vulnerable people in their own homes.

2. It is anticipated that the additional income generated from these new services, together with the proposed adjustment to the pricing policy between Council tenants and private sector clients, will go some way to reducing the current deficit on the Careline budget.

1. Developments in Sheltered Housing

- 1. In line with the recommendations of the consultants the Allocations Policy has been amended so that only applicants or tenants who are of pensionable age or above are eligible for admission to sheltered housing.
- 2. The Freshfield Court rehabilitation scheme has been developed in partnership with Health and Social Services to provide a three year pilot in which four flats have been set aside for use by elderly clients who require discharge from hospital and whose own home is unsuitable for their care needs. The scheme became operational some nine months ago and allows clients to stay for up to six weeks to receive support, reskilling, confidence building and rehabilitation with the support of the unit's staff and others in preparation for them returning home.
- 3. The scheme, in partnership with Social Services Residential Care establishment at Elizabeth Welsh, Harraby, is helping to speed up hospital discharge which in turn is helping to reduce bed blocking in the area.
- 4. Work to install computers in all sheltered housing which is due to start early in the New Year which will allow Wardens to be linked to Careline and the Civic Centre and to become more actively involved in a variety of issues.
- 5. The consultants' recommendations to prepare a costed programme for the upgrade of those units in need of modernisation, including Westhill House, has been deferred pending the outcome of the vote later this year to transfer the stock to Riverside Housing Group.

2. Housing Visitor Service

- 1. The Housing Visitor Service has now been reorganised in line with the consultants' recommendations.
- 2. The Visitor Service is now structured in such a way that Visitors work from sheltered housing units, with Wardens and Careline, and in co-operation and partnership with other services and agencies to provide a more focused and specific service to those in greatest need in a specific area.
- 3. These new arrangements have been adopted as the Department's preferred method of supporting frail elderly tenants in the community. It is also in line with the Government's wishes that Local Authorities and the Health Authorities work together to provide a more integrated range of services for special needs groups, including the elderly. This will not only be of benefit to those in the community but will also be provided using the principles of best value.
- 4. The Generic Domiciliary Care Worker pilot at Botcherby has proved very successful and is being accelerated and expanded to develop the role of the Housing Visitor as part of a team providing support and assistance to vulnerable people in the community.
- 5. A charge of £0.74 per week was introduced for the Visitor Service in April 2001 which is expected to generate approximately £28,000/£30,000 to help offset the costs of providing the service
- 6. Operational policies and procedures are being amended to reflect these new methods of working as recommended in the Best Value Review.

3. Access to Services Implications

- 1. None directly from this report.
- 4. Environment Implications

1. None directly from this report.

5. Conclusions

- 1. A great deal of work has already been completed to implement the recommendations contained in the Best Value Review of Elderly Services.
- 2. Officers will continue to work through those recommendations that are still outstanding, some of which can only be completed once the outcome of the stock transfer process is known.

6. Recommendations

1. Members are asked to note the contents of this report and of the work being undertaken to implement the recommendation in the Best Value Review of Elderly Services.

APPENDIX 1

EXECUTIVE SUMMARY

Carlisle City Council Housing Department run a number of services specifically designed to meet the needs of older tenants. These services are:

- Careline Alarm Service
- Sheltered Housing
- · Housing Visitor Service

These services are funded through the Housing Revenue Account (HRA).

The Council appointed HACAS Consulting to undertake a *fundamental* and *radical* review of these services for older people. The review considered the viability and potential options for the future management of these services. The review will be undertaken in accordance with Best Value principles to enable the Council to demonstrate compliance with their statutory obligations under the Local Government Act 1999.

Conclusions

Our overall conclusion in best value terms is that the services are performing well but with scope for improvement.

Based on the work we have undertaken we conclude the following:

· The services are economical and in cost terms are comparable with other services.

HACAS Chapman Hendy

- The level of user satisfaction is extremely high and should be commended.
- The services should be seen and managed as an integrated package within the 'whole system' of support for older people.
- The housing visitor service needs a greater focus on those older people with greatest need.
- The sheltered housing stock will however require significant modernisation over the next 5-10 years. We estimate the cost
 of refurbishment of 5 schemes to be approximately 4.0 million. However Westhill will require replacement and a new build
 scheme, this will need to be done in within the next 2-3 years. We estimate the capital cost to be £1.8 million.
- The services need to be managed within a specialist or generic housing provider organisation with a focus on care and support of vulnerable people to ensure appropriate management and values, rather than within a local authority housing department with other competing priorities.

Recommendations

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Sheltered Housing

- 1. Review the tenant profile in the schemes, and consider the re-designation of the schemes as services for older people rather than for tenants with other disabilities. (COMPLETED)
- 2. Enhance the allocations process, to once again include the wardens in the assessment of potential tenants in their own homes (OUTSTANDING)
- 3. Further develop the role of the warden with further devolved general and financial management supported by up to date policies and procedures. Formalise this through a revised job description. (IN PROGRESS)

- Continue to provide training and development and a clearer programme of supervision and appraisal to all wardens (COMPLETED)
- 5. Continue to build good relations with health, social services, the PCG and other commissioners and providers of services for older people, and apply the body of knowledge and latest policy to the model of service being offered (COMPLETED)
- 6. Prepare a costed plan for a programme of short-term and longer-term investment in the schemes based on the principle of maximising independence, privacy and choice for tenants. (**DEFERRED**)
- 7. Consider the infrastructure needed to provide a modernised service for older people, and assess the implications for the Council as well as the options for alternative specialist providers. (**DEFERRED**)
- 8. Undertake option appraisal regarding Westhill considering aspects from closure, replacement and new build, refurbishment to 'do nothing' and alternative use. (**DEFERRED**)

Housing Visitor Service

- 1. The generic domiciliary care worker pilot should be accelerated and expanded in order to expand the role of the visitor service. (COMPLETED)
- 2. Formal assessment procedures should be developed, in line with those used by other agencies e.g. social services and should be introduced in respect of all new clients. (IN PROGRESS)
- 3. Discussions should commence with health and social services over the future financing of the service with a view to achieving a transfer of funding over a suitable transitional service. **(OUTSTANDING)**
- 4. During such a transitional period, and certainly post any housing stock transfer any funding of the service ought to be via the General Fund (OUTSTANDING)

5. Operational policies and procedures for the service should be developed and introduced. (IN PROGRESS)

Careline

- 1. The upgrade of telecom equipment should proceed without delay. (COMPLETED)
- 2. The pricing policy for the service for both Carlisle tenants and residents as well as other service organisations should be reviewed to ensure the there is a demonstrable rationale behind any charging and pricing policy. (COMPLETED)
- 3. The control room layout should be re-designed to ensure optimal use is made of the space available. (COMPLETED)

Overall

The feasibility of transferring these services to a specialist provider should be examined. Such a review should include informal market soundings with potential alternative providers and financial implications. It would also be necessary to consider options related to the potential stock option transfer, including the establishment of specialist care subsidiary.