

**INDEPENDENT REVIEW OF RETIREMENT LIVING SERVICE**

1. Purpose of report

To seek Committee approval to implement a new approach to delivering the Retirement Living Service (RLS).

2. Background

In January 2018, following the independent review of the RLS, Committee approved the consultation with residents and staff on the 3 options for the future delivery of the RLS as set out in the Housing Quality Network report.

3. Detail

Consultation was undertaken with residents during April/May 2018. This included a letter and explanatory information sent to all 1,411 RLS addresses and an invitation to attend one of 25 presentations held across the Borough. Tenants were asked to feedback their views by completing a paper or web based survey.

262 people attended the presentations and 626 (44%) surveys were returned. A majority supported Option 3; retention of the existing RLS service, which demonstrates how much the current service is valued by residents.

Further analysis of the feedback suggests that there are concerns about the current service which could be addressed through the development of a modified service offer. This would retain the benefits of the current service and address the issues highlighted within the HQN report and previously expressed by staff and managers.

New service overview:

- Retain the existing number of 21 FTE employees, (subject to two VR requests). This is 7 more FTEs than was recommended in Option 1 and 16 more FTEs than was recommended in Option 2)
- Introduce 4 new specialist roles; 2 Activity Co-ordinators, 1 Lifeline Co-ordinator and 1 Facilities Co-ordinator (who will be based within Housing Repairs). These additional roles will allow a more consistent provision of activities for residents and enable Independent coordinator to have a greater focus on the support needs of residents
- Small caseload, enabling a focus on personal contact
- A personalised plan which is flexible and tailored to the individual

Further details about this new service offer (including proposed staffing structure and costs) can be found in appendix 2, consultation summary is included in appendix 3, consultation feedback is included in appendix 4 and a structure chart is included as appendix 5.

4. Financial implications

The financial implications are included at appendix 1.

**Recommendation**

**The Committee is asked to RESOLVE that the proposal for the Independent Living Service as contained in appendix 2 of the report be approved.**

Background papers

Nil

## APPENDIX 2

## New Service Offer

## 1. Executive Summary – Proposed new service

<b>Service</b>	Independent Living Service
	Enabling older people to retain their independence and quality of life
	<ul style="list-style-type: none"> <li>• 1 x Independent Living Manager</li> <li>• 2 x Independent Living Team Leaders</li> <li>• 21 x Independent Living Co-ordinators</li> <li>• 2 x Activity Co-ordinators</li> <li>• 1 x Lifeline Co-ordinator</li> <li>• 1 x Facilities Co-ordinator (managed within Housing Repairs)</li> </ul> <p>28 (FTE) members of staff</p>
	<ul style="list-style-type: none"> <li>• Needs assessment to assess individual needs</li> <li>• Tailored service</li> <li>• ILCs small caseload (average 67 cases each)</li> <li>• Focus on maintaining personal contact with customers as identified within the needs assessment</li> <li>• ILC available at published times at every 'A' scheme each week</li> <li>• Separation of roles; ILCs can focus on the customer and providing support</li> <li>• Complex enforcement cases managed by Tenancy and Estates team</li> <li>• Scheme activities managed by a specialist officer</li> <li>• Health and safety managed by a specialist officer (within Housing Repairs)</li> </ul>

## 2. Introduction

In November 2017, the Committee approved the independent review of Retirement Living. Housing Quality Network (HQN) were commissioned to undertake this work and produced a report with three options for the future delivery of the Retirement Living Service:

Option 1 – an “*Independent Living Service*”: *Enabling older people to retain their independence and quality of life*

Option 2 – an “*Enhanced Housing Management Service: Managing specialist housing for older people*”

Option 3 – “*Retirement Living Service*” (current service): *Visiting people in retirement housing*

The Committee agreed for residents to be consulted on the three options and consultation was undertaken in April/May 2018. Consultation included a letter sent to all 1,411 Retirement Living Service (RLS) addresses and an invitation to attend one of 25 presentations being held across the Borough. The presentations explained the options being consulted on in more detail and provided attendees with an opportunity to ask questions, either through discussion with the group or individually. Residents were asked to feedback their views by completing a paper or web based survey (further information about the feedback can be found in appendices 3 and 4).

262 people including residents and family/support workers attended the presentations and 44% of surveys (626) surveys were returned.

The results of the consultation are below:

	%
Option 1 - An "Independent Living Service"	26
Option 2 - An "Enhanced Housing Management Service"	6
Option 3 - A "Retirement Living Service"	68

The consultation shows a clear preference for Option 3 by a majority of respondents. Many respondents expressed satisfaction with the current service and their personal contact arrangements and questioned the need for any change; there was some concern expressed about the impact of any changes on existing staff.

On further analysis, much of the feedback received from those supporting Option 3 identifies that it is *change* itself that they wish to avoid rather than a rejection of aspects of the other options. Many respondents used the phrase "*if it ain't broke why fix it*" and "*better the devil you know than the devil you don't*" to highlight their concerns about a change to the status quo.

We are aware that this client group can often lack a desire to change and when presented with the possibility of retaining the status quo may select this option. Some respondents who selected Option 3, identified concerns with the current service:

- *"I am happy with the service as it is at the moment although staff often seem stressed at trying to visit several schemes in one day and cannot give their full attention to one"*
- *"Very good service until the officers did not visit"*
- *"Satisfied with how things are at the moment. A visit once a week and meetings to talk over things would help if we did see them around a little bit more so that we can talk about things that we need"*

This supports the issues identified within the HQN report and reflects concerns expressed by staff and managers currently involved with the service.

For these reasons, it is proposed to implement a modified service which retains the positive features of the current service such as a focus on personal contact, small caseloads and named staff, but balances this with changes that address

some of the concerns raised by customers, staff and the HQN report, e.g. specialist roles and a needs assessment etc.

The proposed new service is explained in more detail below.

### **3. Proposed New Service - Independent Living Service**

It is proposed to change the name of the service to the Independent Living Service (ILS). The HQN report states that “both customers and staff dislike the name Retirement Living. They feel it is a negative and unwelcome label.” Attendees commented that the Retirement Living name was out dated and puts some people off applying who are still in work and enjoying their independence. An “Independent Living Service” gives a far more positive impression of the services available.

### **4. Vision – “Enabling older people to retain their independence and quality of life”**

It is proposed to adopt this vision as it properly encapsulates the primary aims of the service and its focus on retaining residents’ independence for as long as possible. Residents who attended the presentations felt that this vision met their needs and correctly explained the service they currently receive.

### **5. Needs Assessment - Independent Living Plan**

It is proposed to introduce a new personalised needs assessment for each resident who receives the ILS. This will ensure that customer needs are identified at the start of the tenancy and appropriate support is in place to maximise independence. A regular 6 month review (or more frequently if circumstances change e.g. hospital discharge) will ensure that the service is tailored to the individual, and continues to support independence.

The HQN report commented that the needs assessment “should cover the five outcomes of: Stay Healthy, Stay Safe, Economic Wellbeing, Enjoy and achieve, Make a positive contribution.” The report also advised that if the existing service was retained it should “reintroduce a basic needs assessment”.

The existing service does not include a needs assessment and so it is possible that customer needs are not being met. Indeed, some attendees to the presentation discussed their personal circumstances (following the presentation) and explained how their current needs were *not* being met by the current service. They felt that it was unable to “flex” with their changing needs such as; the need to transfer to downstairs accommodation or the need for additional support to help support a spouse with dementia.

Residents who selected Option 1 and 3 were positive about the needs assessment approach and commented as follows:

- *“A personalised plan seems to fit our requirements as we don't know the level of support we may require at a later time”*

- *“Because it highlights the “flexibility” as things change”*
- *“I am reasonably healthy at the present time, also I am fairly mobile and have my own car. The flexibility this option allows for change as I grow older but may become infirm and less mobile. An occasional regular visit will meet my current needs”*
- *“Option 1 may be beneficial to me with regards to having a personalised plan as this could take my deafness into account”*

The proposed ILS will ensure that personalised support is in place for all customers, and a regular formal review will ensure that changing needs will be identified and met.

A more flexible approach will also enable those who do not currently require much support to select a service level which better reflects their needs. 6% of respondents chose Option 2 and one such respondent stated: *“We feel this option provides for support for those who really need it rather than providing the same level of service for everyone regardless of need”*.

## **6. Customer Contact**

It is proposed that the ILS will retain a focus on personal contact. Customers were very clear that they valued the contact with the Retirement Living Officer (RLO), although agreed that the current visit could be very brief.

- *“I am 93 and housebound. I need visits and to know help is available when I need it”*
- *“I do not see any visitors and look forward to having an RLO who I know and trust”*
- *“I very rarely get visitors and I look forward to someone calling 3 times a week (Mon/Wed/Fri) just to see if I am OK”*

Many of the respondents who selected Option 3 thought this was the best way to safeguard their existing personal contact arrangements and did not believe that Option 1 or 2 met this requirement.

The HQN report identified that around 70% of tenants received a visit at least once a week which is an unusually high visiting rate compared with other schemes. In some cases there is a need for frequent visits, however a high proportion of residents want a visit as *“they are paying for them”*.

Under the proposal, personal contact will be offered in a variety of ways including in person, via the telephone or alarm call system and at a frequency that meets the needs of the customer (as identified in the needs assessment). Personal contact will be prearranged to ensure that the interaction is meaningful and focuses on retaining the customer’s independence.

The consultation highlighted that there are currently a range of contact arrangements in place which includes a personal daily visit for vulnerable customers to a monthly phone call for more independent residents.

Respondents commented:

- *“We only have one visit per week anyway, happy with that for the time being”*
- *“I look forward to someone calling 3 times a week (Mon/Wed/Fri) just to see if I am OK”*
- *“To continue to be checked by the warden daily for our safety and well-being”*

The ILS will continue to meet these diverse needs and is designed to be flexible to meet the changing needs of customers. Many respondents identified how their own changing circumstances would determine the frequency of contact they required:

- *“At the moment as I am quite independent [...] and at a later date I may require more support”.*
- *“I would like fewer visits until I need more visits when my health starts to deteriorate”*
- *“At the moment we don't really need an RLO regularly, but as we get older it will be peace of mind to know that there will be someone around if needed”*
- *“Whilst we don't particularly need regular visits at the moment, there will probably be a time when we do”*
- *“I receive one visit a week but may need more later.”*

During the consultation, residents of 'A' schemes (who generally have higher needs) particularly highlighted the reassurance they felt at having an RLO available on scheme; although they recognised that the staff member could not be scheme based all the time. It is proposed that the Independent Living Co-ordinator (ILC) will be present at every 'A' scheme for an agreed time period each week. This will be in addition to residents' personal contact arrangements.

## **7. Scheme Activities**

It is proposed to have specialist Activities Co-ordinators to support the work of the ILS. This will provide an opportunity for a diverse programme of activities to be developed within each scheme. One respondent stated, *“Sounds promising, activities co-ordinator is what is needed”*.

The HQN report highlighted the important role that an activities programme can have in reducing isolation and feelings of loneliness. The current service has resulted in the RLO no longer having the time to provide practical assistance to run scheme activities and that this approach *“is not sustaining activities on all schemes”*.

One respondent said: *“At present there are no social activities in the residents lounge. The warden is brilliant but is far too busy! There used to be a Tuesday breakfast but it has stopped”*. Another stated: *“I did used to enjoy the events down the centre which the warden did because I'm a widower and it got me out the bungalow and stop me feel lonely even if it was only a few hours”*

Respondents recognised that opportunities to participate in scheme activities had declined in recent years and this was something that was regretted:

- *“Yes, need more activities on the Close and more input from the council not leaving it for resident, most of which are too ill to do anything or informed”*
- *“Because there is no activities at moment so I don't come to the room”*
- *“Option 3 - now the RLOs do not do social activities, it is done by social group but if they are supposed to be doing it, help would be good”*

Attendees to the presentation reported variable experiences with activities; some schemes had lots of opportunities to get involved and others' less so. Residents highlighted the current limited range of activities on offer which largely relate to cooking (breakfast clubs etc.) and bingo, and were keen to try different activities such as table tennis, chair based activities, films shows, quizzes etc. There was agreement that a broader range of activities would be welcomed.

Whilst the majority of residents did not select Option 1 and 2 (which included a specialist Activity Co-ordinator role), there were few negative responses about the new role. Some attendees wanted reassurance that this role would not negatively impact on the work of the Social Committee, which it will not.

The Activity Co-ordinator will utilise the feedback provided as part of the needs assessment to develop a bespoke programme of activities to meet identified need.

A vibrant activities programme will be a unique selling point and help to encourage new customers into the service (at a time when demand is declining) and will also address the increasing issue of loneliness and social isolation experienced by an increasing number of older people.

## **8. Roles and Structure**

The proposed structure chart and financial impacts are set out below. The proposed structure shows a reduction of 1.31 (FTE) members of staff when compared to the current structure (however the Facilities Co-ordinator will report within the Housing Repairs Team).

The Independent Living Service will be led by an Independent Living Manager and supported by two Independent Living Team Leaders.

It is proposed to create specialist roles within the Independent Living Service. Customer feedback suggested that this was a positive move and would allow each Co-ordinator to retain their focus within their specialist area. The HQN report recommended the establishment of specialist posts and staff have expressed difficulty with the current variety of their existing RLO roles. A move to specialist roles will allow the Independent Living Co-ordinator to focus on providing support to customers, rather than becoming involved in enforcement cases or managing scheme Health and Safety issues.

Proposed new roles:

Independent Living Co-ordinator (ILC) – this role will focus on maintaining customer's independence and sustaining tenancies.

Twenty-one ILCs will manage a mixed caseload of approximately 70 customers. Whilst this does represent an increase on the current caseload average of 55, the team will not be responsible for complex enforcement case management, managing scheme social activities, Lifeline installation, 6-monthly Lifeline checks or health and safety checks within the scheme.

This proposal represents an increase of 7 FTEs than was recommended in Option 1 and an increase of 16 FTEs than was recommended in Option 2.

Activities Co-ordinator (AC) – this role will focus on meeting customer needs through developing a diverse programme of activities through partnerships with other agencies.

It is proposed to have two ACs who will each be responsible for the activity needs of approximately 700 customers, based across the existing schemes.

Lifeline Co-ordinator (LC)

The Lifeline Co-ordinator will be responsible for administering and managing the community based Lifeline service to approximately 900 customers (the vast majority are non-Council tenants). Duties include marketing the service, installation of equipment and liaison with the alarm provider.

The facilities management and health and safety checks will be provided by a specialist officer based within the Housing Repairs team.

## 9. Other Features

The service will operate as follows:

- Monday - Thursday 8.30am – 5pm
- Friday 8.30am – 4.30pm.
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Some customers felt that the service should be provided on a 24/7 basis, but this is not proposed.

The service will continue to be supported by a 24/7 alarm call system.

The service will be responsible for managing and sustaining tenancies. The ILCs will have access to the Open Housing management system. This will allow the team to centrally record their interactions with customers and enable a 360 degree view of each tenancy including rent account and repairs information, thus reducing the need to request information from colleagues. This will enable the ILCs to provide a more seamless service to customers.



The ILCs will investigate all low level cases of nuisance and breaches of tenancy including hoarding. Complex cases of Anti-social Behaviour and other serious tenancy breaches will be referred to the Tenancy and Estates Team for investigation.

### **10. Recommendation**

Whilst a majority of customers indicated a preference for Option 3, which demonstrates how much the current service is valued by residents and some lack of desire to change. Further analysis of the feedback has shown that there are concerns about the current service and these can be addressed by the proposal outlined above.

The HQN report was clear that the current service requires modification and the introduction of a needs assessment, a flexible, personalised service, the creation of specialist roles and small caseloads will provide a service that better meets the needs of this group of residents.

## APPENDIX 3

	Sent	%	Replies	%
Survey Returns	1,411	100	626	44
"A" schemes	652	46	300	46
"B" schemes	759	54	326	43

	Invited	%	Attended	%
Attended Meetings	1,411	100	262	19
"A" Scheme	652	46	176	27
"B" Scheme	759	54	85	11

Survey Results (blank / 'no response' returns are excluded)

	Replies	%
Age		
30-39	2	> 1
40-49	2	> 1
50-59	25	4
60-69	127	20
70-79	211	34
Over 80	225	36
Gender		
Male	228	40
Female	340	60
Limited activity		
A lot	159	28
A little	203	36
No	205	36
Ethnicity		
UK	571	98
Indian	1	> 1
White / Asian	1	> 1
Irish	4	> 1
Any Other White	4	> 1
Caribbean	1	> 1
Chinese	1	> 1
Any Other Ethnicity	1	> 1

**Survey Results (blank / 'no response' returns are excluded)**

	Preference	%
Option 1	161	26
Option 2	40	6
Option 3	425	68

**By Scheme Type**

	"A" schemes	%	"B" schemes	%
Option 1	71	24	90	28
Option 2	21	7	19	6
Option 3	208	69	217	66
TOTAL	300		326	

**By Length of Tenancy**

Years	Under 5	%	5-10	%	Over 10	%
Option 1	79	28	40	26	42	22
Option 2	23	8	10	6	7	4
Option 3	178	64	105	68	141	74
TOTAL	280		155		190	

**By Age**

Years	30-39	%	40-49	%	50-59	%
Option 1	0	-	0	-	11	44
Option 2	1	50	0	-	0	-
Option 3	1	50	2	100	14	56
TOTAL	2		2		25	

Years	60-69	%	70-79	%	Over 80	%
Option 1	41	32	60	28	40	18
Option 2	13	10	16	8	10	4
Option 3	73	58	135	64	175	78
TOTAL	127		211		225	

**By Limitation to Ability**

Limitation	No	%	A little	%	A lot	%
Option 1	47	22	58	29	41	26
Option 2	28	13	8	4	9	6
Option 3	136	64	137	67	109	69
TOTAL	211		203		159	

## APPENDIX 4

<b>Role of RLO: Typical Example of Comments</b>	<b>Frequency</b>	<b>x 41</b>
My warden is very helpful and I see him once a month at my flat and most days around the complex		
We moved here because of the visits. There have been a few emergencies with ill health and we have received one to one help. We feel secure because of the help		
It is nice to know there is someone calling to keep their eye on us especially if you need some advice		
Because I would feel safer knowing there is someone who you can call in the building if taken ill and I like to see a light in the office when you come in you know there is someone there		
Because RLOs play a very important part in the lives of the tenants. They give advice and help when required and reassurance when needed. They also know the tenants and families well		

<b>RLO - Targeted Visits</b>	<b>Frequency</b>	<b>x 79</b>
Don't need so many house calls so it seems a waste of their time and resources		
We only get a visit 1st Monday in month & are happy with this		
The visits on a regular basis are important to me as a cancer sufferer and with no close relatives. Some days the officers are the only persons I see		
I want a visit every day. Make phone calls for me e.g. repair department and I have trouble speaking. I also want social activities		
At the moment we don't really need an RLO regularly, but as we get older it will be peace of mind to know that there will be someone around if needed		
I feel I need more independent living at the moment and do not feel I need visits from RLO. I have the Tunstall button for an emergency.		

<b>Flexible Service &amp; Personalised Plans</b>	<b>Frequency</b>	<b>x 28</b>
The flexibility [...] allows for change as I grow older but may become infirm and less mobile. An occasional regular visit will meet my current needs		
This option would suit me at the moment as I am quite independent. I prefer this option as it is flexible and at a later date I may require more support (Hopefully not!)		
A personalised plan seems to fit our requirements as we don't know the level of support we may require at a later time		

<b>Activities</b>	<b>Frequency</b>	<b>x 16</b>
There is no activities at moment so I don't come to the room		
At present I am becoming socially isolated so an activities co-ordinator, whom I presume would contact tenants as to what activities		
We have an active social group with valuable help from our RLO. We are trying hard to keep residents active and therefore cheerful and contented.		

<b>'Happy' – 'Satisfied'</b>	<b>Frequency</b>	<b>x 150</b>
I am happy with how the scheme is run		
We are satisfied with the service we get + thank you for this		
I am satisfied with the present scheme and find that our wardens are very helpful		

<b>Doesn't want a change, or 'why change?'</b>	<b>Frequency</b>	<b>x 150</b>
If it ain't broke don't fix it		
I want to carry on as before, don't like changes		
The current system is very good and meets my needs. I am very happy here and have been for 20 years		

<b>General Comments in support of the various Options</b>	<b>Frequency</b>	<b>x 147</b>
The advantages outweigh options 2+ 3 plus changes cover all customer needs		
Of the three, this Option 2 sorted out the things that we need most		
I agree with all the options stated. No. 3		
Best suited for my needs		
This option suits my independent retirement needs		

<b>Reduced Charges</b>	<b>Frequency</b>	<b>x 5</b>
The important things for me are 'independence' and reduced charges		
It has already been cut to three visits per week, without any reduction in the amount we pay, we need this service		

<b>Miscellaneous</b>	<b>Frequency</b>	<b>x 39</b>
I selected this place to live because it's very close to shops, doctors, transport and family.		
I love this flat and where it is situated		