



# **Housing LIN 2017: Community Locksmiths**

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# About ExtraCare



The ExtraCare Charitable Trust supports around **4,400** residents across **14** retirement villages and **17** housing schemes.

A **domiciliary care** service is offered in each location by ExtraCare, residents are also able to use external providers.

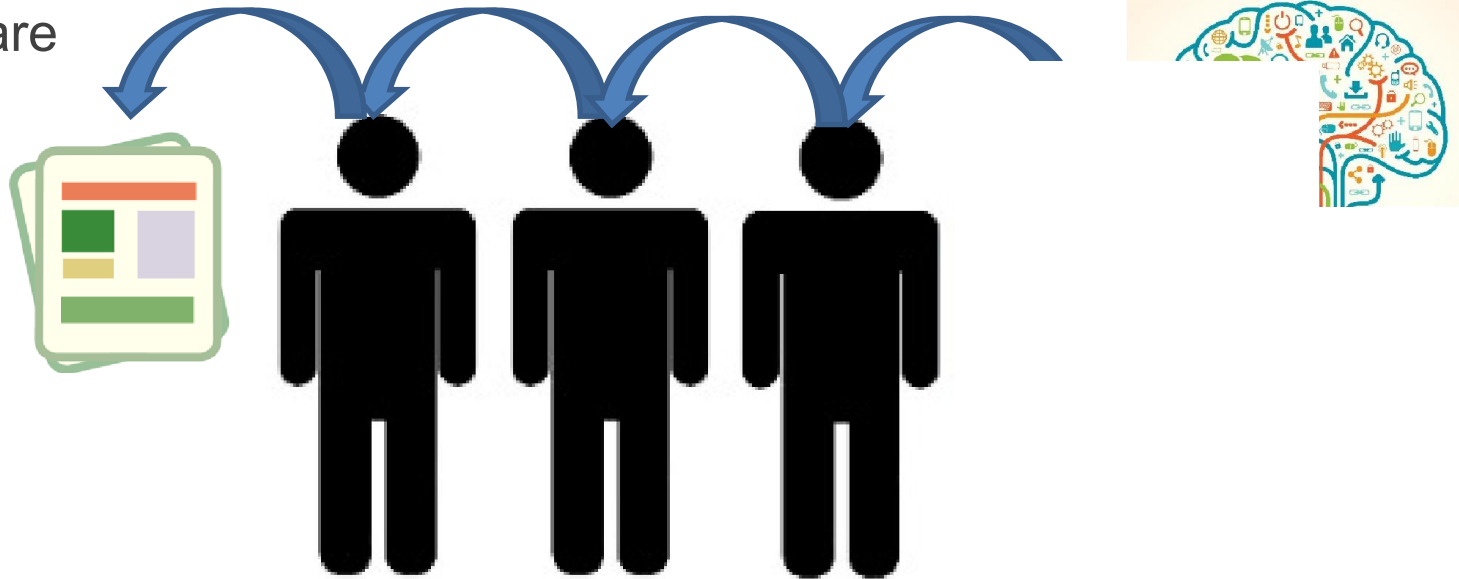
We know that at least **24%** of our residents are living with dementia or other common mental health condition such as depression and anxiety.

Research which launched our Enriched Opportunities Programme stated that around **30%** of our residents are likely to experience these issues.

That programme also launched our Locksmith role, a specially trained member of staff who can support residents with living with dementia and wellbeing.

# Creating the Locksmith role

The Locksmith role was developed by ExtraCare with Bradford and Worcester Universities to support residents living with dementia in housing with care



- A 2 year cluster randomised controlled trial of a new approach to living with dementia and other mental health issues in ExtraCare

- Using 5 key facets – specialist expertise, staff training, individualised casework, activity & occupation, and leadership.

# The Enriched Model of Dementia



The programme is based on Tom Kitwood's **Enriched Model of Dementia**. It is a caring and effective way to establish a person's unique experience of their condition.

$$D = NI + H + B + P + SP$$

- **Neurological impairment**
- **Health & Physical Fitness**
- **Biography**
- **Personality**
- **Social Psychology**

Helps to '**connect the dots**' in a maze of misunderstanding.

# The Locksmith role in practice



- Investigate concerns such as walking with purpose, distress responses, hydration, nutrition...
- Liaise with family members where appropriate
- Liaise with other health and social care professionals
- Participate in care plan reviews, safeguarding, or best interest meetings
- Make referrals to other services e.g. Admiral Nurses
- Complete an 'Enriched Profile'

# What can be achieved in-house...

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**14.8%**  
REDUCTION IN  
DEPRESSIVE  
SYMPTOMS  
IN 18 MONTHS

The ExtraCare Charitable Trust model delivers a 14.8% reduction in depressive symptoms over 18 months. This was accompanied by a 64.3% reduction in people with significant 'clinical level' depression over the same period.

**46%** REDUCTION  
IN ROUTINE AND REGULAR  
GP VISITS

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**10.1% IMPROVEMENT**  
in  
AUTOBIOGRAPHICAL  
**MEMORY**  
IN 18 MONTHS

At baseline new ExtraCare residents had more difficulties with cognitive functions, independence, health perceptions, depression and anxiety than the control sample. After three months these differences have reduced and some have disappeared, with significant improvements in psychological well-being, memory and social interaction for the ExtraCare residents. At 18 months there is a 10.1% improvement in ExtraCare residents' autobiographical memory.

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**RESIDENTS WITH  
MOBILITY ISSUES**  
—showed the greatest—  
**REDUCTION**  
in  
**DEPRESSIVE  
SYMPTOMS**

Low mobility is a significant predictor of low mood and depressive symptoms amongst older people. However, after 18 months at ExtraCare those with low mobility showed the greatest reduction in depressive symptoms and those whose mobility reduced over the period did not generally become more significantly depressed. At the end of the period, for ExtraCare residents, serious depression can no longer be predicted by mobility.

Collaborative Research between Aston Research Centre for Healthy Ageing (ARCHA) and the ExtraCare Charitable Trust Published April 2015, Aston University. [www.aston.ac.uk/archa](http://www.aston.ac.uk/archa)



# Community projects and involvement

- **Broadway Gardens** (Wolverhampton)  
Community Library
- **Lark Hill Village** (Nottingham)  
Alzheimer's Society  
Peer Support Groups / Singing for the Brain
- **Pannel Croft Village** (Birmingham)  
Memory Clinic, Alzheimer's Society
- **New Oscott Village** (Birmingham)  
Cardiac rehab



# Community based Locksmith Service



Pilot year between Oct 2014 to Oct 2015 – supported around 60 individuals and their families in Coventry 69% of people remained living at home and avoided moves to care settings.

## **Discharge to Assess service:**

- Care team
- Occupational Therapist
- Locksmith

Individuals are identified in hospital as needing extra support when returning home.

Team supports the person for around 6 weeks.

## **Integrated Neighbourhood Team:**

- Social workers, CPN, OT, Physiotherapist, community matron, and Locksmith

Vulnerable individuals are identified by GPs across three neighbourhoods and provided with extra support to avoid crisis, hospital admission, or relocation.



# Community based Locksmith Service



The Locksmith intervention costs around £828 per client, including salary, training, activities budget, and supervision.

Average costs of care in our area (West Midlands):

Residential care      £599

Nursing care          £755

[www.which.co.uk/elderly-care/financing-care](http://www.which.co.uk/elderly-care/financing-care)

During the pilot the Local authority reduced the number of beds in use in one care home from 12 to 6.

Locksmith hours were increased from part time to full time mid pilot.

# Thank you for listening



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