

FUNDED BY

NIHR | National Institute for
Health and Care Research



WHAT IS THE 'EXTRA' IN EXTRA CARE HOUSING?

Dr Rebecca Oatley
Association for Dementia
Studies



University
of Worcester

Association for
Dementia Studies

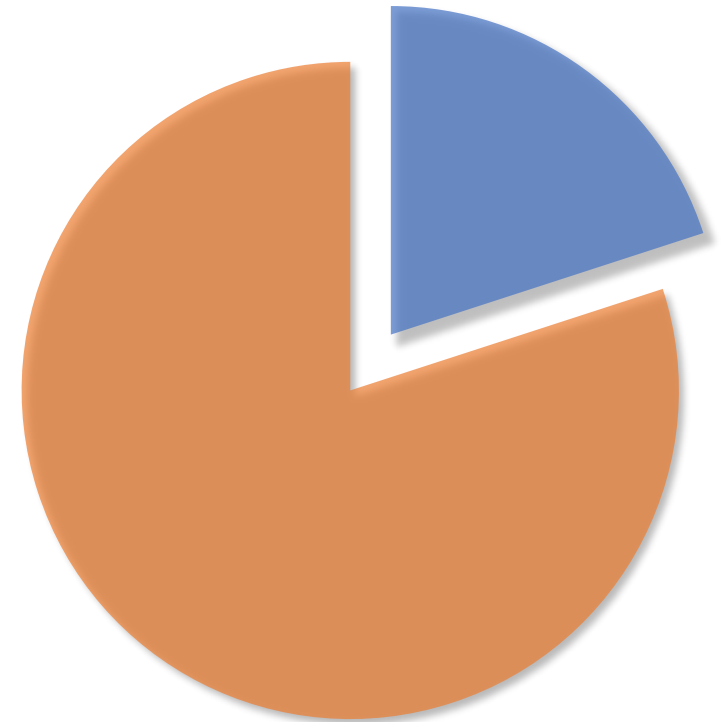


Extra Care Housing

- Model of housing with care and support
- Designed to support 'ageing in place'
- Supports independent living in self-contained accommodation
- Flexible onsite 24-hour care
- Range of communal facilities & activities

The research gap:

Over a fifth of residents in ECH are living with dementia, yet little is known little about how best to support people with dementia to live well in ECH.



The DemECH project

Aim: To explore how different models of ECH sustain wellbeing of people living with dementia

Objectives:

- (1) Explore benefits & challenges of ECH for people with dementia
- (2) Identify factors that impact upon benefits & challenges
- (3) Explore advantages & disadvantages of different models





Methods

- Literature review, survey & consultation including people living with dementia
- Qualitative interviews centred upon 8 case study sites
- 100 participants (including 55 people living with dementia/family carers)



Benefits of living in ECH

1. Flexible care and support provision focussed on supported independence
2. Sense of safety and security
3. Having your “own home”
4. Onsite organised/informal social opportunities
5. Age-friendly convenient living
6. Opportunity to continue to live together as a couple

What challenges are there to living well with dementia in ECH?

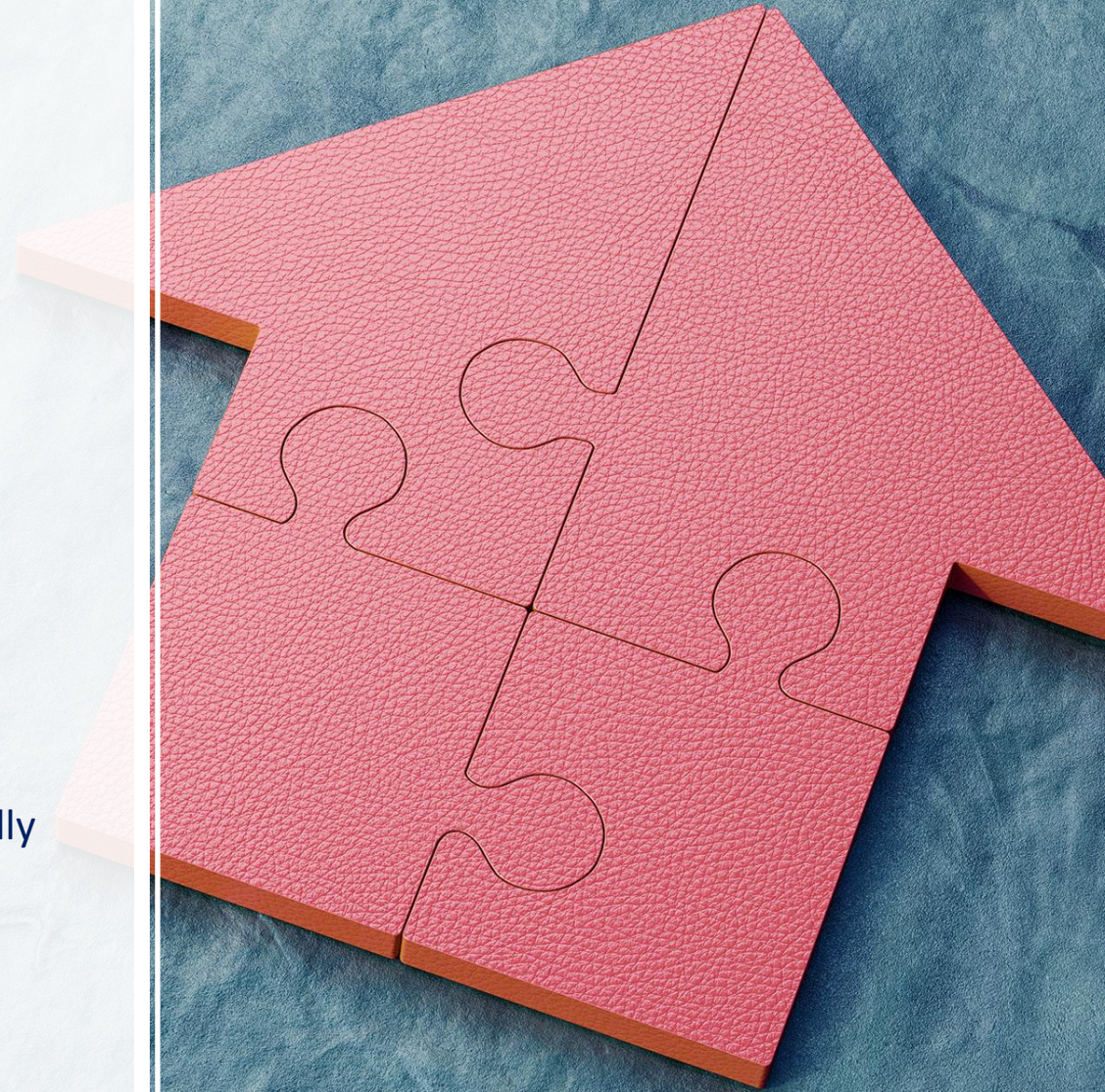
1. Lack of understanding over what ECH is
2. Familiarising self with new people, places & routines
3. Availability & accessibility of resources (including staff)
4. Privacy and the risk of loneliness
5. The stigma of dementia
6. Advancing symptoms of dementia

“Lonely.. That is the main thing”

Pat, living with dementia

What variables might impact whether it works well or not?

1. Individual personality and history
2. Symptoms of dementia
3. Level of family (or friend) support
4. Staff (culture of care, training, consistency of team, leadership, resourcing)
5. Availability of specialist dementia staff support or specialist social inclusion opportunity
6. Relationship(s) with other residents (and broader Dementia Friendly culture of the scheme)
7. Physical space & environment (e.g. facilities, size, design)
8. Model of scheme (integrated, specialist, separated)



What do residents with dementia think ECH is?

“To me it simply means that I do have 24-hour backup, and someone comes to see me a couple of times a day and they do a little bit of washing up such as it is”

William, living with dementia

“I mean, they’re around if I get any problem at all. All I have got to do is call them”

Anne, living with dementia

“Life is a good thing when you help other people, chat with them and have a good laugh, basically”

Maureen, living with dementia

So what is the 'Extra'?

- The 'Extra' is not 'Extra' care.
- The 'Extra' is opportunities and reassurance that can enable a person (and family members) to live as well as possible. Ideally... support positive risk taking.
- *It is a combination of variables that must be balanced around the individual to promote their strengths and support their needs to optimise benefit of ECH for each person. There is no one size fits all.*

**Build your
networks:
Keep in
contact**

Website: www.worc.ac.uk/dementia

Email: dementia@worc.ac.uk

Join our mailing list:

www.worcester.ac.uk/ads-mailing-list

Follow us on Twitter and Facebook:



@DementiaStudies



@adsuow

This study/project is funded by the National Institute for Health Research (NIHR) School for Social Care Research 102645/ER/UWTA-P180. The views expressed are those of the author(s) and not necessarily those of the NIHR or the Department of Health and Social Care.