

Housing Learning & Improvement Network

Care Services Improvement Partnership 

Health and Social Care
Change Agent Team

Connecting Housing and Health - Poppyfields

Intermediate care is a set of services which cross existing boundaries, providing care for people who no longer require accommodation and support in hospital, yet are still in need of temporary care in getting back to normal living. Here, the author explains Hanover's *Up&About* intermediate care service, its facilities and secret behind its success.

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Introduction

In 2001, Hanover undertook major research with the overall aim of gaining a greater understanding of the then rehabilitation intermediate care market; to examine the external factors that affected upon this increasingly competitive market; and to identify the opportunities for sheltered housing and / or very sheltered housing in this sector. Over 400 detailed questionnaires were distributed to directors of social service departments, chief executives of health authorities and chief officers in primary care trusts (PCTs).

The key findings of this research included:

- Nearly three quarters of respondents said that they did not have sufficient intermediate care places in their locality, compared with 15% who said they did.
- Agencies responsible for expanding intermediate care said they were developing a wide range of services to meet the specific needs of their local population. Nearly three quarters claimed to be making plans for more provision.
- Over 75% of respondents reported to be focusing most of their intermediate care provision on supporting people in their own homes – rapid response teams, increased number of domiciliary care and district nursing specialists.

The first step

The catalyst for the research was the Government's move to publish, legislate in or introduce policies in ten new areas that were to have a huge impact upon all agencies involved in developing or providing intermediate care services. These included The Health Act 1999, The 10-Year NHS Plan (July 2000) and The National Service Framework (NSF) for Older People (March 2001). Given this wider context and what appeared at the time as a lack of forward planning by local

authorities, Hanover developed **Up&About**, the name for their intermediate care service that helps older patients leaving hospital to 'practice' being at home within a safe and supported environment, and nurturing the return of their confidence and independence. Its ethos is to promote rehabilitation rather than reliance.

Today, the intermediate care market place has grown, involving a good number of housing providers around the UK who work with their health and social care partners to provide intermediate care facilities on their estates and schemes, refurbishing older, possibly difficult-to-let properties for the purpose.

Up and about

There are a number of partners involved in bringing these unique projects to life: primary and secondary healthcare, local government services, social care services, and the independent and voluntary sector, all connecting with the ultimate aim of providing a seamless service for the resident.

Hanover has three **Up&About** facilities in Gloucestershire, Cambridgeshire and Somerset. As with all intermediate care, the accommodation should:

- Provide purpose-built accommodation, designed to mobility standards;
- convey a domestic setting, to create a home-from-home environment;
- provide a range of communal facilities which aid social rehabilitation and;
- ensure access to 24 hour on-site care.

In July 2004, the keys to Poppyfields in St Neots, Cambridgeshire, were handed over in a small ceremony to mark the passing of the estate to Hanover's housing team who would be responsible for its management.

Also present at the handover and representing the Poppyfields Partnership were Frank Mastrandrea of Huntingdonshire District Council and Sue Binns and Barbara Wallis of Huntingdonshire Primary Care Trust (PCT). The day was the culmination of the joint working that had been so crucial in developing the estate.

Poppyfields is one of Hanover's latest **ExtraCare** estate to offer round the clock care and support for older people. It is also Hanover's first **ExtraCare** scheme to incorporate its **Up&About** model.

Of the 31 self-contained flats on the estate, three are leased by the PCT, which places older hospital patients who are considered to be 'bed-blocking'. These are patients no longer requiring medical help, but cannot return home either immediately because they may need aids and adaptations to their home or because they need physical or emotional rehabilitation. The three flats at Poppyfields are the first new-build intermediate care within an **ExtraCare** environment in the country.

People aged over 55, who are physically or mentally frail, eligible for social services help and who live in Huntingdonshire are eligible to move to the estate.

Supportive environment

Less than a month after opening, the first four residents moved in to the main part of the estate, welcomed by estate manager, Debrah Horne, who presented each resident with a bouquet of flowers. Over the next two weeks, the remaining residents moved in to their new self-contained flats, each with a bedroom, a lounge, kitchen and bathroom with a walk in shower.

Poppyfields includes a range of communal amenities and facilities that encourage social inclusion. There is a dining room, laundry room, shop, health and beauty treatment room, guestroom with en-suite facilities, wheelchair store with electric charging facilities and an assisted bathroom. Within the estate's lounge, residents can regularly meet to participate in social activities. On Hanover's 34 other **ExtraCare** schemes, residents take part in bingo, tai chi, educational sessions, IT courses, and arts and crafts classes. These activities have proven conducive to maintaining an individual's overall well being and keeping minds active and alert. Older people living in the surrounding area are also welcome and encouraged to make use of the communal facilities so that the scheme becomes part of the wider community

An inventive process

Poppyfields also has a large number of other supportive facilities incorporated into its **Up&About** facility that aid the patient's recovery, encouraging confidence and independence.

Huntingdonshire's intermediate care team was set up in early 1998, with the aim of relieving pressure on hospital beds and placing patients in the most appropriate location for care. The team also provides support to people at home, provided by a team of rehabilitation and daily living assistants. The process for Poppyfields works as follows:

- Hospital nurses refer patients to the intermediate care team who then go to visit the patient to explain the service and facilities available at Poppyfields. A license agreement is signed. The service is free to them as they are considered to be still under NHS care.
- Prior to discharge to Poppyfields, a care plan and medication list is sent to the estate manager and the care team leader so that they are fully prepared when the intermediate care team escorts the patient to the estate.
- There is a health centre next door to Poppyfields and the GPs and district nurses provide a full service, taking the patient onto their list, while they are at Poppyfields.
- Residents of the intermediate care units, fully integrate into the strong community life with the tenants on the estate, joining in with varied social activities.
- An exit strategy is agreed by the intermediate care team, social services for care provision, the patient and any other required agencies such as Care & Repair.

The benefits of this service have been far reaching:

- The service frees up hospital beds;
- the NHS minimises fines payable for bed-blocking;
- for the PCT, it is cheaper than nursing or respite care and;
- for the patient it's a more supportive and 'enabling' environment, and an easy and valuable transition from hospital to back home.

A positive experience

In 2003, the Cotswold and Vale Primary Care Trust successfully bid for a capital grant from the Department of Health. Working in partnership with Hanover, Stroud and Cotswolds District Councils, Fosseyway Housing Association and social services, the PCT began to develop 16 sheltered housing units to provide intermediate care. St Peter's Court in Cirencester opened in early 2004 and was our first **Up&About** facility: two specially adapted and furnished flats were incorporated into the existing estate.

Like those at Poppyfields, patients who are suitable for receiving intermediate care at St Peter's typically spend up to six weeks living in one of the self-contained furnished units, where they have room to re-build their confidence in a specially-designed rehabilitative environment prior to going home. They may require further rehabilitation that is provided in the local community hospital, or they may require home care or community nursing support. They may be waiting for adaptations to be completed in their own home. Intermediate care is free to the patient up to six weeks, irrespective of the type of care they receive or their location. The units have been equipped to allow a carer to stay with the patient to support their rehabilitation in preparation for going home.

- Many patients have described their experience at St Peter's as '*positive*' and '*very helpful*', despite life changing events happening at the time of their admission.
- One lady felt she would not have managed at home had she not received support at St Peter's, and reflected that she probably would have returned to hospital or moved to residential care.
- A gentleman commented that the service at St Peter's had been '*outstanding*': he viewed the intermediate care flats as not an '*essential service*', however, but he had been very pleased to use them as it had given him another option.

Conclusion

Local differences in geography and existing health preferences mean that there is never a 'one size fits all' approach to intermediate care provision. Successful schemes are those that work in partnership: no one agency can provide the range of skills and expertise needed to provide effective intermediate care.

There is little doubt that commissioners of services recognise the role that sheltered housing has to play here: over the last few years, the focus on the preventative agenda has brought housing and health closer together, helping to change traditional approaches and attitudes to sheltered and very sheltered housing.

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References

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The Department of Health (July 2000) *The NHS 10-Year Plan*. London: TSO.
The Department of Health (March 2001) *National Service Framework (NSF) for Older People*. Available from: <http://www.dh.gov.uk/PolicyAndGuidance/HealthAndSocialCareTopics/OlderPeoplesServices/OlderPeoplesNSFStandards/fs/en>

Other Housing LIN publications available in this format:

<u>Factsheet no.1:</u>	Extra Care Housing - What is it?
<u>Factsheet no.2:</u>	Commissioning and Funding Extra Care Housing
<u>Factsheet no.3:</u>	New Provisions for Older People with Learning Disabilities
<u>Factsheet no.4:</u>	Models of Extra Care Housing and Retirement Communities
<u>Factsheet no.5:</u>	Assistive Technology in Extra Care Housing
<u>Factsheet no.6:</u>	Design Principles for Extra Care
<u>Factsheet no.7:</u>	Private Sector Provision of Extra Care Housing
<u>Factsheet no.8:</u>	User Involvement in Extra Care Housing
<u>Factsheet no.9:</u>	Workforce Issues in Extra Care Housing
<u>Factsheet no.10:</u>	Refurbishing or remodelling sheltered housing: a checklist for developing Extra Care
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<u>Factsheet no 14:</u>	Supporting People with Dementia in Extra Care Housing: an introduction to the the issues
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<u>Case Study Report:</u>	Achieving Success in the Development of Extra Care Schemes for Older People
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