

Integrating Extra Care: partnership working in Staffordshire

This case study looks at an example of successful joint working by eight partner organisations at Mill Rise, a new-build Extra Care scheme in Staffordshire.

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Profile

Mill Rise is the first purpose build Extra Care facility to be developed in the Borough of Newcastle-under Lyme Staffordshire. It provides 60 high quality apartments (40 social rental and 20 shared ownership) for older people, set within extensive communal facilities and landscaped environment.

The need for the provision of extra care within the community was established through the local authorities housing needs survey and the County Council's revised Older People's strategy which responded to the needs for a more flexible approach to support vulnerability and independence.

Aspire Housing as the lead affordable housing provider in the Borough took on the challenge of establishing a new facility. Given the parallel process of the plans to deliver a new extensive PCT centre partners took the opportunity to align plans and develop the potential synergy of an integrated development.

Design quality is excellent throughout – combining functional, attractive environments for health professionals and patients with homely apartments and active communal spaces for extra care residents and their guests. Its welcoming public areas, which include a restaurant, café, bar and hair salon, ensure the development is truly inclusive.



The scheme is a landmark development within a major regeneration programme, the scheme has special significance as the first new-build project in the heart of an Area of Major Intervention. It is a physical and psychological marker which signals a new beginning for

the Knutton and Cross Heath communities, which will help retain and attract new families and boost employment opportunities. Mill Rise supported and complemented the holistic aspirations of the regeneration of the area, it was imperative to get the design right because the scheme sets the tone and the standard for subsequent phases of development. Following this will be further complementary housing developments and complementary services to support the regeneration of the community.

Mill Rise is the result of successful joint working by no less than eight partner organisations. While there is nothing new about multi-agency collaboration, the mix of partners, the complexity of the project and its funding, and the need to meet the differing requirements of all involved makes this achievement all the more remarkable.

A Journey Through Mill Rise...

Expert service planners and development specialists brought a wealth of successful public sector project experience to Mill Rise – and this shows in the high quality of the finished design.

One of the main considerations at Mill Rise was the need to achieve a natural integration of the two core elements: the state-of-the-art primary care centre and the extra care complex of sixty apartments. What's more, this had to be done without compromising the functional performance of the health facilities or the homely environment of the residential accommodation.



Piazza at the main entrance of Mill Rise Village

This design dilemma has been resolved very effectively. In the approach to the main entrance, for example, you walk through a small piazza which features retail facilities including a café, a pharmacy and a hair salon. This shared public space provides a warm welcome to all, whether they're healthcare professionals, patients, residents or visitors. Once inside, the different building functions are clearly defined yet fit comfortably together as part of a unified whole.

The Milehouse Primary Care Centre has been planned with the changing needs of a growing population in mind. This involved extensive consultation with healthcare professionals and Prime's experienced advisers and designers with their in-depth understanding of primary care needs were able to smooth this process. The two storey centre has accommodation for three general practices together with the Knutton Clinic and will act as a community nursing base. There will be facilities for physiotherapy, NHS dental services, chiropody, podiatry, phlebotomy, chronic disease management, outpatient clinics, medical training, and much more. Space can also be booked for use by local community and voluntary groups.

In the extra care complex, the sixty apartments are a mix of one and two bedroom designs with forty for rent and twenty available for shared ownership. To support the philosophy of independent living each apartment has its own letterbox, door number and exterior lighting.



Apartment lounge area

The designers have also created 'internal street scenes' to enhance the village community feel. Residents can enjoy their own space or get as involved in communal activities as they wish. They have their own lounge and crafts area, a licensed bar, and a restaurant – which is also open to the public. From the first floor level, residents also have access to the gym facility in the primary care centre.

Landscaping is an integral and important element of the scheme, not only performing the conventional tasks of shielding and softening but to create a variety of delightful exterior spaces. Thoughtful

details add further interest, such as the gazebo equipped with a giant chessboard which provides competitive fun for all generations. There are practical garden areas too with raised allotments and greenhouses where green-fingered residents can grow their own flowers and produce.

The joint commissioning unit of the County Council provide the direction and fund support services provision to complement the development and ensure customers can maintain their independence. Our residents benefit from housing related support and co-ordination of a wide range of purposeful and fun activities provided through the supporting people funding provision to maintain health and well being. Domiciliary care packages are provided and supported through a contract with the County Council by Accord Housing.



Landscaping

Communication and Involvement

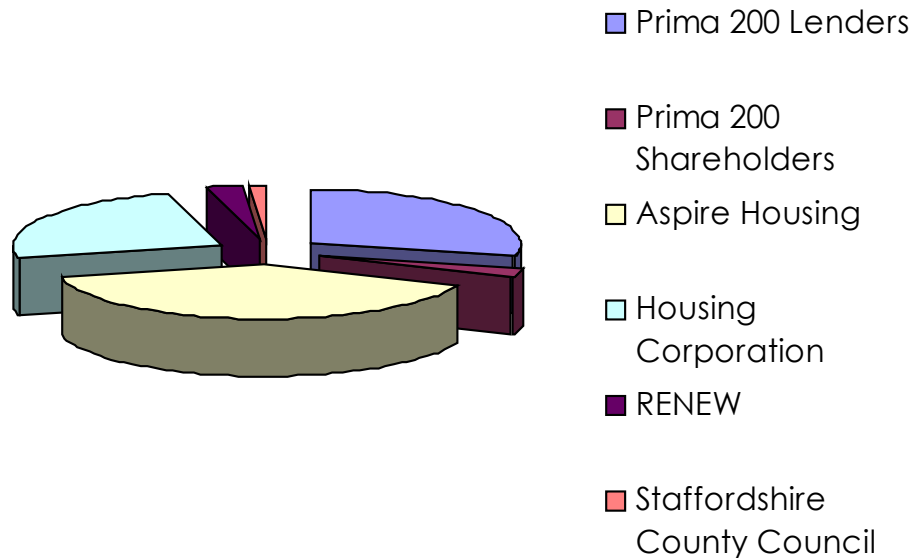
We had extensive consultation with the public through the life of the project in conjunction with our other project partners. We built upon the involvement processes established by the neighbourhood management pathfinder scheme and the extensive master planning exercise that demonstrated the support for the location of the scheme as a new hub for the area.

We undertook leaflet drops, set up a website, talked to local shoppers the adjoining supermarket, held open days, put on displays, and invited people to come and tell us about their concerns and what they wanted in the new scheme. We established a Friends of Mill Rise through which we have continued to engage the local community to ensure the scheme is fully integrated within the local community. Since the scheme has opened this group has become established as a recognized residents association.

The funding of Mill Rise was the result of support from a range of public and private sources of finance aligned to deliver an integrated project.

The overall cost of the development was over £17m which in line with the multi agency approach to the project was made up of contributions by a number of agencies. In addition, Staffordshire County Council and the North Staffordshire PCT have made major commitments to support the schemes revenue through provision of the care and support provision and PCT services respectively.

Who Paid for Mill Rise?



Person Centred Service Development

We undertook a comprehensive review of our Independent Living services which has reaffirmed our commitment to active user involvement and informed our future service strategy based around a person centred approach.

As a demonstration of the enthusiasm and capacity of the customers involved in the service review of independent living service, customers wrote and delivered a play to illustrate the importance of placing the customer at the heart of service design and delivery.

In the context of Mill Rise, we formed a Friends scheme to assist us in the development of the scheme which influenced our subsequent design and fit out with service users involved in procurement decisions in for example furnishings and service providers, this is now developing into an active residents association with the community who can continue to influence service priorities and improvements

In developing new schemes we would wish to use our involvement processes supported by appropriate professional staff such as Occupational Therapist, physiotherapists etc., to ensure that their skills and experience in designing in good quality solutions for service users are integrated into the design, which both maximise utility and limit future cost.

Our Independent Living Service Improvement Team will continue to support and influence the development of our service design and delivery which will be adopted across the services and in particular within Mill Rise as an exemplar.

We are working closely with our service delivery partners to roll out integrated personalised service models based on comprehensive joined up assessment process, which presents the opportunity for the resident to influence choice and control over their life styles and support.

Key learning points

As a complex multi disciplinary project Mill Rise has presented many key learning points, we would highlight the following:

- Clear and compelling vision for the services
- The need for strong commitment from partner organizations to deliver a joint project
- Good communication between partners throughout the project
- Effective co-ordination and project management processes
- Customers being at the centre of service design and delivery
- Professional input from service providers to maximise effectiveness of the built project
- Ensuring development aligns effectively with strategic planning and future service delivery models.

End note

Our experience with Mill Rise shows that if organizations are prepared to work together with people at the heart of service delivery through integrated processes, you can get synergy, value for money and improved outcomes for customers. We had an advantage in that everyone involved in the project had the capacity to work together and make things happen.

Other related Housing LIN case studies

Case study 35: Ledbury Community Health and Care Centre
<http://www.dhcarenetworks.org.uk/pageFinder.cfm?cid=3450>

Case study 38: Healthy Outcomes in Blackburn and Darwen Extra Care
<http://www.dhcarenetworks.org.uk/pageFinder.cfm?cid=4148>

Case study 40: Combining Extra Care with Health Care Services in Barton Mews
<http://www.dhcarenetworks.org.uk/pageFinder.cfm?cid=4150>

These and many more materials can be found on the Housing LIN webpages at:
<http://www.dhcarenetworks.org.uk/housing>

This case study will also feature in a forthcoming Integrated Care Network guide and toolkit: From the Ground Up: A Guide to Integrated Care Design and Delivery, published jointly with Community Health Partnerships, the NHS procurement agency. This will be available in the autumn at: www.dhcarenetworks.org.uk/icn/

Other Housing LIN publications available in this format:

- Case Study no.20: **BME Older People's Joint Service Initiative - Analysis and Evaluation of Current Strategies (Sheffield)**
- Case Study no.21: **Estimating Future Requirements for Extra Care Housing (Swindon)**
- Case Study no.22: **'The Generation Project': a sure start for older people in Manchester**
- Case Study no.23: **Developing ECH in Cheshire: the PFI route**
- Case Study no.24: **Commissioning an ECH Scheme from Social Services' Perspective - Leicester**
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- Case Study no.26: **Unmet Housing-Related Support Needs in Wokingham District - an investigation**
- Case Study no.27: **Dee Park Active Retirement Club - Age Concern Berkshire**
- Case Study no.28: **Essex County Council Older Person's Housing Strategy (Summary)**
- Case Study no.29: **Pennine Court: Remodelling sheltered housing to include Extra Care for people with learning difficulties**
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- Case Study no.33: **Private Sector Leasing Scheme for People with Learning Difficulties in Norfolk**
- Case Study no.34: **Mini-Cost Model of Housing with Care Project**
- Case Study no.35: **Ledbury Community Health and Care Centre**
- Case Study no.36: **Duddon Mews Extra Care Scheme for People with Mental Health Problems and Physical Frailty in Cumbria**
- Case Study no.37: **Private Sector Engagement with Extra Care Housing Development**
- Case Study no.38: **Healthy Outcomes in Blackburn and Darwin's Extra Care Housing**
- Case Study no.39: **Implementing an Extra Care Housing Strategy in Oxfordshire - Delivering System Change**
- Case Study no.40: **Combining Extra Care Housing with Health Care Services at Barton Mews**
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- Case Study no.42: **De-Commissioning & Decanting Sheltered Housing at The Manors**
- Case Study no.43: **Reeve Court Retirement Village: Block Contracting Care In Bands, & Individual Budgets**
- Case Study no.44: **Vertical Housing with Care: Remodelling a tower block as extra care housing at Callendar Court, Gateshead**
- Case Study no.45: **Supporting Independence and Integration for Disabled People: Foundations for Living Project, the Papworth Trust, Huntingdon**
- Case Study no.46: **Homelessness Prevention & Hospital Discharge: Three Case Studies**

The full list of Case Studies can be seen and downloaded at our website:

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The Housing LIN welcomes contributions on a range of issues pertinent to Extra Care housing. If there is a subject that you feel should be addressed, please contact us.

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