March 2011

**SETTING UP AN OLDER PEOPLE’S INDEPENDENT LIVING SERVICES IN BATH AND NORTH EAST SOMERSET**

**Lead Organisation:**
B&NES Supporting People & Communities Team

**Lead Contact:**
Sarah Shatwell, Associate Director, Non-Acute & Social Care
Email: Sarah_Shatwell@BATHNES.GOV.UK
Tel: 01225 477162

**Key partner:**
Harriet Bosnell, Older Persons Housing and Support Manager
Somer Community Housing Trust
Email: Harriet_Bosnell@somer.org.uk
Tel: 01225 366167

**Brief description:**
This case study considers the steps taken by B&NES Supporting People & Communities Team to introduce an Older Persons Independent Service (OPILS) primarily for older and vulnerable people living in the community irrespective of their tenure.
1. **Introduction**

In March 2009 the Supporting People & Communities Team in Bath & North East Somerset (B&NES) commissioned Ridgeway Associates to undertake Business Case Development & Market Testing of an intended tenure-neutral Older People’s Independent Living Service (OPILS) to be made available across the Authority area.

In essence the main purpose of the new service model was to draw together and address several recommendations within B&NES Council’s Older People’s Housing Strategy that highlighted the aims of the prevention agenda, for example:

- Enhancing the capacity of older people to live independently in their own homes for longer
- Reducing hospital admissions/promoting early hospital discharge
- Delaying / avoiding access to higher forms of care.

At the same time it was recognised that SP funding was substantially directed towards support services for older people living in sheltered housing (accommodation based services) while this client group makes up only 5% of the older population in B&NES.

The research undertaken to create an evidence base support the aims of the project included evaluations of positive practice ‘virtual’ and floating support models of service that are underpinned by community alarm/telecare solutions delivered in partnership with market leaders in this field. In parallel a comprehensive review and analysis was undertaken of the current and projected demographic profile of B&NES’ older population which had singular value in clarifying the scale of the anticipated growth among the age groups.

2. **Concept Testing the Proposed Service**

While B&NES Council undertakes an ongoing range of consultation with older people to discern their needs and aspirations it was recognised that Ridgeway needed to conduct a survey across the Authority area to gain feedback from potential users of the envisaged OPILS about the specific support services they would value.

The postal survey undertaken to focus on the above topics employed a purpose-designed self completion questionnaire which was sent to a random sample of 3,700 people aged 50-plus across B&NES who lived in general needs social housing, private rented accommodation and homes they owned. It was anticipated that very few of those among the sample received much in the way of formal support services and the outcomes from the 900 returned survey forms confirmed this. These respondents did therefore represent a meaningful sample of potential customers for an OPILS.

In terms of the concept testing, replies to the questions asked in the survey questionnaire about a range of services that respondents felt would benefit them ‘now’ and/or in ‘the future’ were clearly the most relevant. The chart below illustrates the feedback gained in this regard and, as can be seen, there was interest registered in all of the service types, indicating that demand for an OPILS exists now and that its market potential can reasonably be expected to grow significantly over time.
It should be added that just over half of those who responded to the question about paying for the listed services said that, in principle, they were prepared to do so.

Figure 1 - Which of the following services could you benefit from now and/or in the future? (% Stating ‘yes’)

<table>
<thead>
<tr>
<th>Service</th>
<th>In the future</th>
<th>Now</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regular contact with someone who knows you and cares about your well-being</td>
<td>64.2</td>
<td>29</td>
</tr>
<tr>
<td>Assistance to access welfare entitlements / benefits</td>
<td>63.9</td>
<td>27.7</td>
</tr>
<tr>
<td>Well-being checks via a community alarm / telephone</td>
<td>60</td>
<td>13.9</td>
</tr>
<tr>
<td>Access to a community alarm service</td>
<td>55.9</td>
<td>15.5</td>
</tr>
<tr>
<td>Links to local services</td>
<td>52.7</td>
<td>18</td>
</tr>
<tr>
<td>Advice about housing options and planning for the future</td>
<td>52.1</td>
<td>20.1</td>
</tr>
<tr>
<td>Advice on accessing improvements and adaptations to your home</td>
<td>50.8</td>
<td>16.8</td>
</tr>
<tr>
<td>Referrals to community organisations, leisure activities, transport</td>
<td>47</td>
<td>15</td>
</tr>
<tr>
<td>Help with skills to maintain your tenancy, such as paying bills or managing shopping</td>
<td>45.8</td>
<td>12.7</td>
</tr>
<tr>
<td>Advice on accessing a handyperson service</td>
<td>45.5</td>
<td>16.6</td>
</tr>
<tr>
<td>A garden maintenance service</td>
<td>44.8</td>
<td>18.1</td>
</tr>
<tr>
<td>An emergency response service for people prone to falls</td>
<td>44.2</td>
<td>12</td>
</tr>
<tr>
<td>Help with filling in forms and dealing with correspondence</td>
<td>44</td>
<td>15</td>
</tr>
<tr>
<td>Access to a telecare service</td>
<td>35.6</td>
<td>6.8</td>
</tr>
<tr>
<td>Emergency response service (linked to a community alarm)</td>
<td>33.1</td>
<td>8.6</td>
</tr>
</tbody>
</table>

Importantly, respondents were also asked to comment on a range of more specific service options and related cost estimates, as illustrated below:
A COMMUNITY ALARM ONLY

This is a service with a dedicated telephone with a mobile push button pendant that means you call for help in an emergency at any time of day or night. The call response will either alert your family or friends or contact emergency services.

 Likely cost £4 per week

A MOBILE RESPONSE SERVICE

This is a service for vulnerable people who do not have family or friends nearby. The service provider can hold a key and provide assistance, day or night, with a range of issues.

 Likely cost £4 per week

BASIC LEVEL VISITING SUPPORT SERVICE INCLUDING:

- A community alarm service with personal response in an emergency including a visit if required
- A six monthly well-being check

 Likely cost £6 per week

MEDIUM LEVEL VISITING SUPPORT SERVICE INCLUDING:

- A community alarm service with personal response in an emergency including a visit if required
- A six monthly detailed support planning meeting
- One face-to-face visit per week
- As many Intercom calls as agreed based upon needs

 Likely cost £11 per week

HIGH LEVEL VISITING SUPPORT SERVICE INCLUDING:

- A community alarm service with personal response in an emergency including a visit if required
- A six monthly detailed support planning meeting
- As many Intercom calls as agreed based upon needs
- As many face-to-face visits as agreed based upon needs

 Likely cost £19 per week

Among the above ‘community alarm only’ service achieved the highest rating with half of those responding feeling that the service could be useful to them and two thirds of these indicating that they would be prepared to pay for it.

Turning to the ‘mobile response’ and ‘basic level visiting support’ service levels these were rated positively by 40% of respondents overall, half of whom expressed a willingness to pay.

Then, for the higher cost ‘medium’ and ‘high level visiting support’ services, the proportion of positive ratings was 30% and the willingness to pay level was a third overall.

3. Next Step Actions from the Research

Encouraging research outcomes led B&NES’ Supporting People & Communities Team to decide that a specification should be developed to define the OPILS model with the near term aim of launching an external tender to select a provider for a two-year pilot of the service. The Team chose to advertise the tender widely to ensure that its existence was known to national players as well as local and regional service providers. A good response from both categories of providers was achieved and a robust tender process resulted.
4. **B&NES OPILS Model**

The key characteristics identified for the service model to be piloted included:

- The aims of the ‘preventative agenda’ must be addressed while providing an enabling service and promoting social inclusion.
- The service needs to be equitable and available to meet the wide ranging needs of older and vulnerable people living across B&NES’ mix of urban and rural communities who, without support, would be unlikely to sustain their independence.
  - Additionally the support should be flexible enough for the service users to receive additional support if a crisis occurs or when recovering from a crisis (on a short-term basis, normally up to six weeks).
- Individual support needs will be assessed by the service provider and measured against agreed referral criteria. The envisaged range of service users will include, for example:
  - Those with very low level support needs who require long term minimal services.
  - Those with more extensive support needs, including older people with physical and/or mental health issues.
  - Those who require flexible services (i.e. they dip in and out of services).
- The delivered service will be outcome focused and delivered using a banded system (similar to the one illustrated in above) to take into account the service user’s need and based on a robust support plan.
- At the core of the service and its delivery bands will be a Community Alarm service supporting Telecare solutions as appropriate.
- OPILS will also make available:
  - An out of hours rapid response capability.
  - A falls pick up service and emergency assessment of action required in a fall situation (including a protocol for providing specialist lifting expertise for some service users).
  - Specific services for people with dementia.
  - Key holding services for people with no local contact.
  - Housing options advice /information /signposting.
  - Benefits advice /maximisation by trained frontline staff.
- The service will have a single access point that ensures co-ordination between the service and the range of support/care services available in B&NES.
  - There will also be processes for onward referrals to health, social care and other agencies such as Care & Repair.

5. **Implementation**

Somer Community Housing Trust was selected as provider for the OPILS pilot in the last quarter of 2010 and commenced delivery of the service into the community in the first week of January 2011. The service has started well and is meeting set targets. Of particular note is that:

- Service users who have signed up to the service represent a good mix of older people across the tenures and in particular there has been a higher than anticipated uptake of the service from homeowners.
- There is anecdotal evidence that older people who had relied on a dispersed alarm only are moving to OPILS because it offers them a single source of a community alarm plus a related menu of support services.
The service provider is monitoring the potential demand for additional services that could be added to the initial menu of options with the dual aim of offering further choice to current service users and adding value to the service proposition in marketing terms. Of note: the service provider consulted a group of older people on the chosen name for the service and the consensus view was that they preferred the title ‘Independent Living Service’ (ILS) rather than ‘Older People’s Independent Living Service (OPILS). As a result the service is now being marketed an ILS.