



Extra Care Housing – a Focus on Dementia

Paper 3: Approaches to operational excellence and managing the quality of the extra care service

This is the final viewpoint of three developed from a Doctoral Research Study on the possibilities and practicalities of people with dementia living in extra care housing. It reviews how extra care housing operators can approach quality management to keep residents and tenants at the heart of their service within a complex regulatory environment.

The first paper offered a viewpoint on when extra care housing is an appropriate choice for someone with dementia, and what factors might trigger someone living with dementia in extra care housing to move out.

The second paper considered an extra care scheme as a social world and how the different social groups in extra care housing can help or hinder someone living well in extra care housing.

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Introduction and key messages

This is the last of three viewpoints for the Housing LIN developed from a Doctoral Research Study on the possibilities and practicalities of people with dementia living in extra care housing.¹ The research findings contained six key messages:

1. People with dementia can and do live well in extra care housing, but it is not appropriate for everyone.
2. It is important not to lose sight of the individual person when planning a model of extra care housing that meets the needs of all stakeholder groups.
3. What mattered to residents, staff and managers was being clear what extra care housing is (and is not), which includes having support in place for people to live as independently as possible in a well-supported community. Having person-centred and flexible but consistent care was essential.
4. A complex interaction between social worlds², the spatial design of the scheme, and organisational structure was found to be critical to how extra care communities, including those individuals living with dementia, function.
5. Operators of extra care housing, with complex partnership arrangements, can better keep older people and residents at the heart of their extra care housing model and manage the complex interaction of social worlds, spatial design and organisational structure by adopting a shared approach to quality and operational excellence.
6. The proposed model of extra care housing in the research study, and recommendation to have a shared approach to quality management, could be adopted by local extra care housing partnerships to benefit residents and other stakeholder groups.

¹ Twyford, K, 2018, People with Dementia Living in Extra Care Housing: An exploration of the possibilities and practicalities, White Rose eTheses Online.

² Social worlds theory originated from work on social groups (Thomas, 1914; Mead, 1938; Strauss, 1978a). It considers both situations and relationships (Baszanger & Dodier, 1997; Clarke & Star, 2008). It is helpful for understanding how groups develop in extra care, and how individuals are included or excluded from those groups. Social groups and social worlds theory are discussed in more detail the second Viewpoint of this series.

The first paper offered a viewpoint on when extra care housing is an appropriate choice for someone with dementia, and what factors might trigger someone living with dementia in extra care housing to move out. It can be accessed at:

<https://www.housinglin.org.uk/Topics/type/Moving-in-and-out-of-extra-care-housing/>

The second paper considered an extra care scheme as a social world and how the different social groups in extra care housing can help or hinder someone living well in extra care housing. It can be accessed at:

<https://www.housinglin.org.uk/Topics/type/The-social-world-of-extra-care-housing/>

This third and final paper reviews how extra care organisations can approach quality management to keep residents and tenants at the heart of their service within a complex regulatory environment.

The Dementia Friendly Housing Charter seeks to make the housing sector, including housing organisations, corporate bodies and sector professionals aware of the challenges of living with dementia so that home environments can be improved (Alzheimer's Society, 2017). These three Viewpoint papers aim to develop greater awareness of the contribution of housing to the challenges posed by dementia. They each include recommendations for those who commission, develop and operate extra care housing schemes.

Informed by a survey of extra care housing provision supported by the Housing LIN (Twyford, 2016), this research involved two extra care housing schemes as detailed case studies. The schemes had between 55 - 61 affordable³ apartments and were run by housing association and local authority partnerships. Forty different interviews, discussion groups and other activities were held with residents, staff, managers, developers, commissioners and other interested parties.

Background

A model of extra care housing developed from discussions with participants in the research was set out in the first Viewpoint in this series, see *Figure 1*. It was suggested that having synergy between the four components would better support someone with dementia to live as well as possible. Having the right culture in the scheme, effective communication, and a positive commitment from everyone involved in extra care were described as the 'glue' that influenced how easily the four inter-related components might work together.

Participants raised issues that were relevant to both the personal 'care and support' within extra care housing and the 'management' of extra care housing schemes leading to further examination of what constitutes operational excellence and how the quality of an extra care housing service is managed across multiple organisations involved in an extra care housing partnership.

³ Affordable extra care includes social rented, shared ownership or outright purchase provided to specified eligible households whose needs are not met by the market.



Figure 1: A model of extra care to support people living both with and without dementia

Operating in a complex regulatory environment

Housing with care has been around since the 14th Century and has seen the rise (and sometimes fall) of alms-houses, workhouses, residential homes, and sheltered housing.⁴ Extra care housing is still a relatively new model for meeting the housing and care needs of older people and is subject to a complex regulatory system as it falls under two separate statutory requirements, the Housing and Regeneration Act and the Health and Social Care Act, see Figure 2.

⁴ Age-Friendly Housing (Park & Porteus, 2018) contains a history of the origins of housing for older people

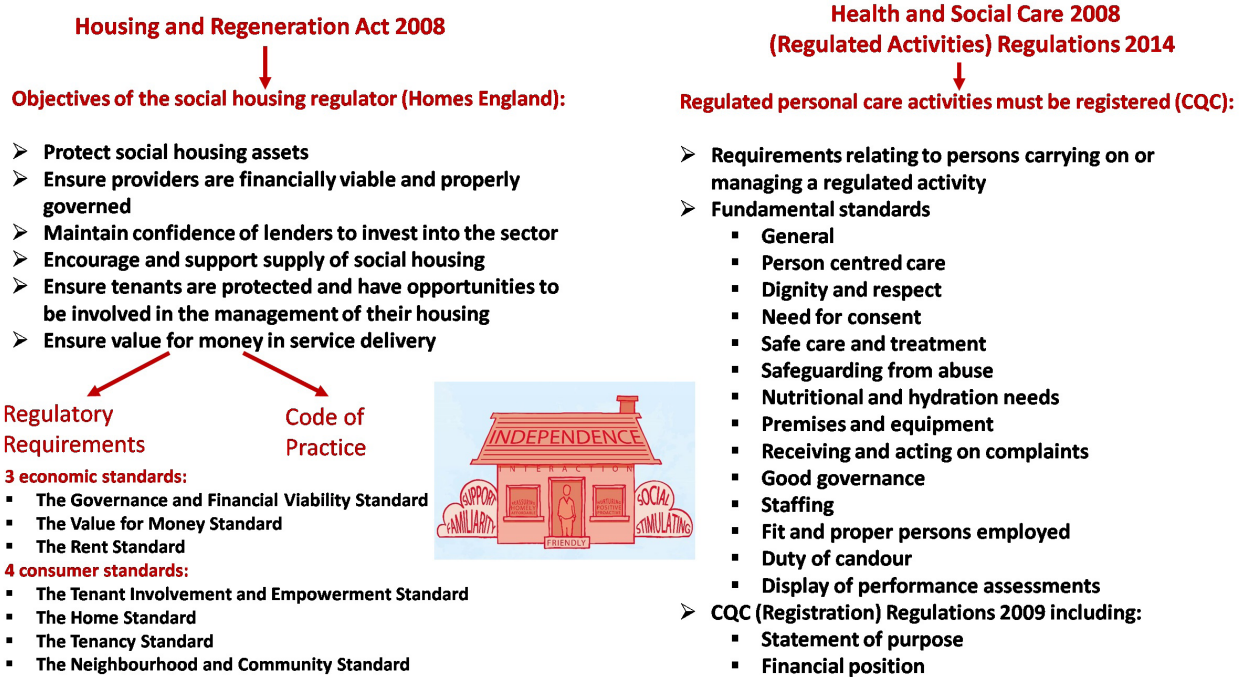


Figure 2: Housing with Care Regulation – Extra Care Housing

Given the complexity of the regulatory requirements managers could be confused by the array of quality management models and frameworks available and how best to use them.

Understanding quality management

This research reviewed models that could be used to implement an approach to quality management that empowered people within and across organisations to develop a shared understanding of and commitment to long term success through customer⁵ satisfaction.

Total quality management involves planning a service and then using processes and people to deliver quality services (performance) to customers (Oakland, 2014). Given the importance of having well designed and well-supported spaces in extra care housing it was noteworthy that use of space is often missing from current approaches to service excellence. This research offers an innovative approach or model of extra care which highlights the importance of 'place'.⁶ Managing the 'place' in extra care housing can help develop a cohesive and inclusive community for residents.

An adapted version of the total quality management model to include the physical environment or place is offered in *Figure 3*.

⁵ For the purposes of this study, the primary customers of extra care were the residents. The terms 'customer' and 'resident' can be used interchangeably, often denoting which type of professional is using the term.

⁶ Place is used here to describe the physical and service environment that comprises an extra care scheme.

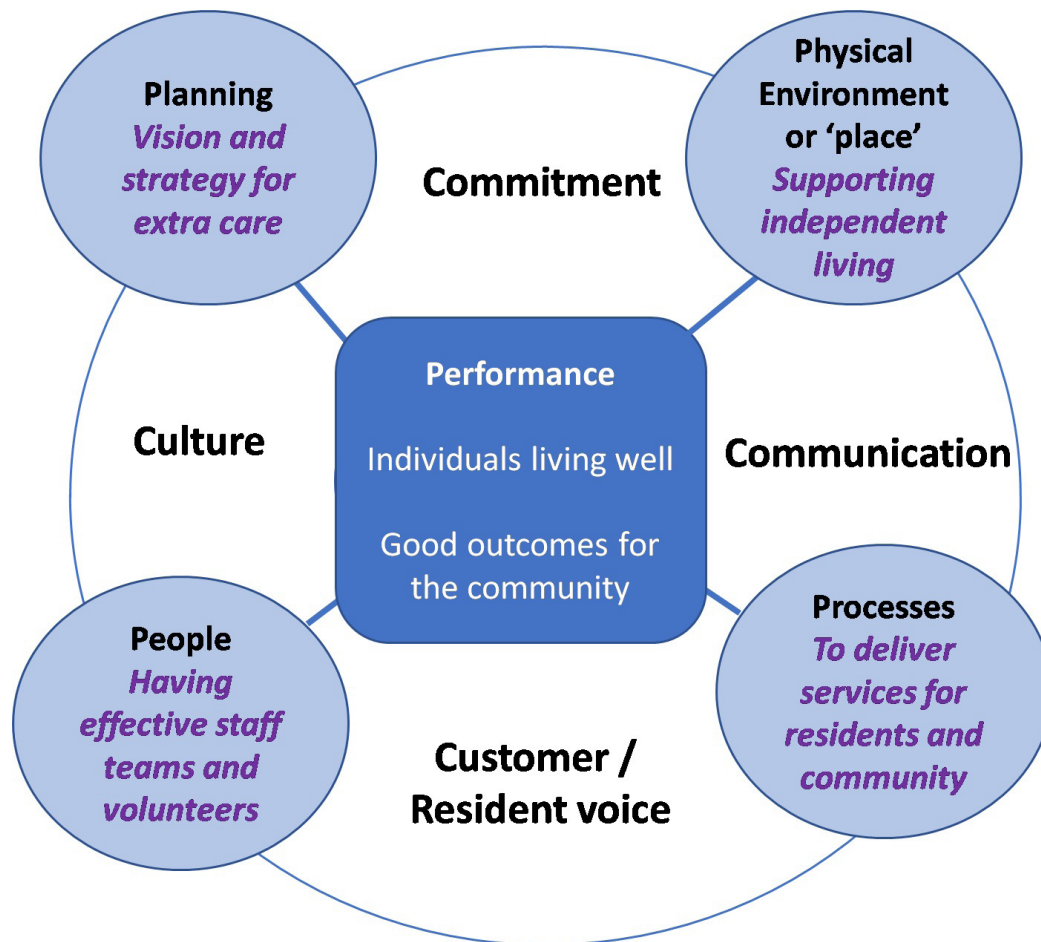


Figure 3: Total Quality Management for extra care housing

Previous research involving organisations that varied in size, sector and location has explored both how frameworks such as the European Framework for Quality Management (EFQM) might help organisations to achieve a total quality management approach, and how tools such as Public Sector or Balanced Scorecards can help organisations measure the quality of the services they are delivering.⁷

The EFQM model includes different ‘enablers’ which support service delivery and different measures for the ‘results’ from service performance. For the EFQM model to be relevant to extra care housing it would be helpful for the model to include and reflect some of the support and performance issues raised by participants in this research, reflecting their experiences of living and working in extra care housing. Three adaptations for use of the EFQM model in extra care housing were proposed; first to include ‘place’ as one of the enablers of performance, second to give greater prominence to the role of planning a clear vision and strategy in driving the other enablers of performance, and third to amend the terminology within the framework to make it more relevant to extra care housing. An amended EFQM model is set out in Figure 4 where the ‘leadership’ enabler has additional detail to make explicit that part of the leadership role is to agree with partners their approach to quality, culture and strategy.

⁷ Studies include for example De Domartin (2000), The Excellence Model, Quality World, George, et al., (2003); Mouillon (2006); Vallejo, et al., (2006); Jacobs & Suckling, (2007); Bou-Llusar, et al., (2009); Lui & Ko, (2017). It is outside the scope of this short Viewpoint to include the full detail of how the EFQM model and the balanced scorecards might be used in extra care, for further information contact the author of this report.

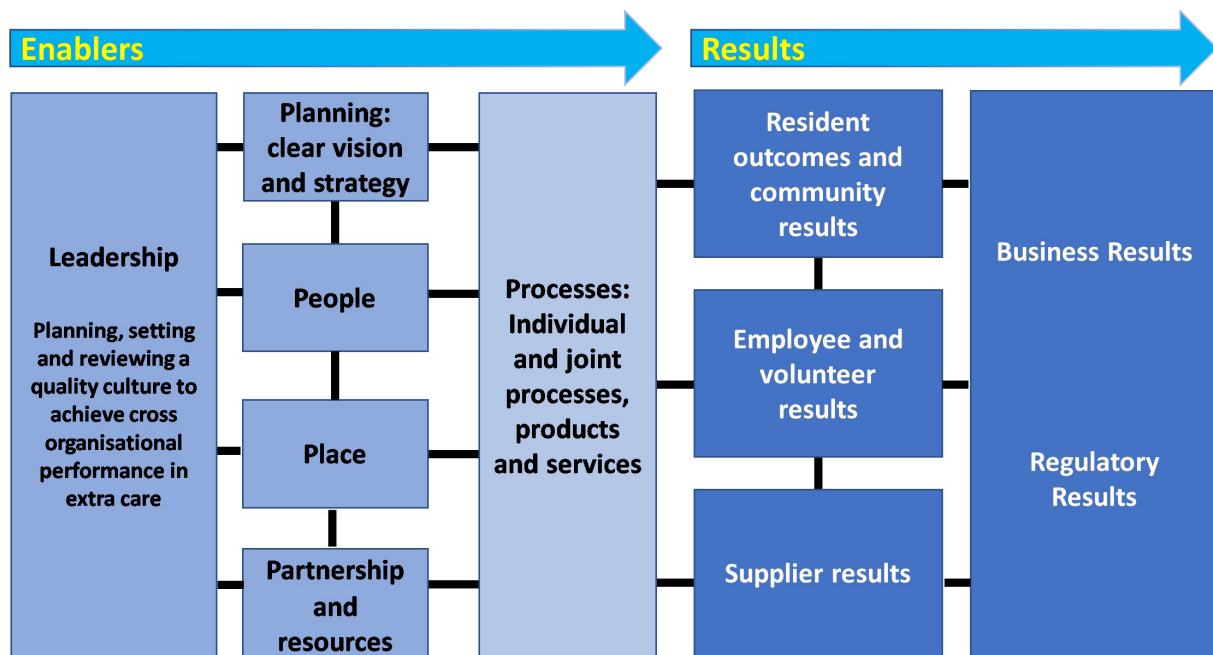


Figure 4: European Foundation Quality Management Excellence Model adapted for extra care
(Adapted from EFQM 2012)

The leadership role will depend upon how far the extra care housing partner organisations have agreed to have a joint or separate service models to deliver their service vision and strategy. The results section of the EFQM model were amended to make the terminology more appropriate to extra care housing, with resident outcomes or results being given prominence. Given the importance of regulatory oversight by both Homes England and the Care Quality Commission the changes made explicit reference to both business and regulatory results.

Previous research indicated that EFQM is enhanced when it is used with a performance measurement tool such as a balanced scorecard or Public Sector Scorecard. The Public-Sector Scorecard was designed for use in public and not-for-profit sectors such as extra care housing, and focused on the capability, processes and outcomes involved in meeting stakeholder requirements. Such scorecards can help understand and evidence the inter-relationships between the enablers of performance and financial and non-financial results from a range of different perspectives. How well organisations assess their performance was explored as part of this research. Those interviewed as part of the research reported varying approaches to measuring performance; primarily to assure compliance with regulatory and business requirements, with less emphasis on using performance results pro-actively to improve outcomes for residents.

There is not yet a commonly accepted model of performance management or performance measurement in extra care housing, but previous research has shown that the process of tailoring and adopting one is an important part of developing a shared approach to quality and operational excellence. One of the challenges for the housing with care sector is to introduce an inclusive and empowering approach to quality management in extra care with tools which may appear very managerial. A quality and operational excellence approach is likely to be better realised if it is introduced in a way that makes explicit that the organisation wants to hear the resident voice and other stakeholders' voices as part of the process, equivalent to forming a social world where key players are brought together with enough power to identify and address common problems together.

Developing a shared approach to operational delivery and quality management

The nature of partnerships affects whether and how far shared quality frameworks are adopted, which is likely to impact on the level of joined up services for residents. Best practice within extra care housing will need to ensure that individual services are integrated into a person-centred approach where they are funded or provided by different organisations. One manager commented:

“The structure of the funding does create some inflexibilities, but I think that, with that needs to come some kind of policy around if there was more flexibility around funding, how it would be used, what it would be used for.”

Given the relative youth of the extra care housing schemes in this research it is unclear whether extra care housing partnerships generally are mature enough or flexible enough to develop a shared approach to quality management. As one manager at a focus group said:

“It’s a complex situation to try and unpack, of what the issues are, because you’ve got multiple different agencies, with different agendas all coming into the mix... with all different priorities as well. But I think there is this kind of cloud thinking. I don’t think the reality of it is in line with the expectations.”

A 5D approach to organisational excellence was suggested to help managers from different organisations within an extra care housing partnership to gain clarity of direction and join up their vision for extra care housing. A 5D approach uses a set of questions that cover the direction, diagnosis, design, development and deployment of a quality strategy within an organisation. It would help partners to assess the gap between current quality management and where they would like to be. Using a 5D approach to develop a quality management system that puts residents and the community at its heart could help extra care housing partners focus on what they jointly want to achieve in delivering a service that best supports people with dementia to live well in extra care housing.⁸

Success will not be achieved overnight. Implementing a total quality management approach to achieve operational excellence takes time, but early wins can be gained, especially where an organisation involves its people in making changes that could address the issues relevant to them.

A call to action – keeping residents at the heart of the extra care housing service

Getting the extra care housing service right is an on-going process affected by how individuals and groups live and work together in within an extra care community. An open culture, where residents and staff are encouraged to communicate their ideas about what works and what does not work is required if residents are to be involved in shaping continuous improvements to an extra care scheme, and if commitment is to be gained from staff across partnerships to deliver an excellent service which achieves a good quality of life for residents including those living with dementia.

⁸ For further information on how the 5D approach to organisational excellence can using social world theory to put residents and communities at the heart of a quality strategy contact the author of this report.

Quality and performance management should be an integral part of an organisation's strategy and that will require strong leadership if implementation is to be successful. Viewpoint 91, the first paper in this series of viewpoints, set out policy and practice recommendations for extra care housing commissioners, developers and providers, which are repeated in Box 1 below.

Box 1: Policy and Practice Recommendations for Extra Care

DEVELOPING THE EXTRA CARE SERVICE TO SUPPORT INDIVIDUALS WITH DEMENTIA TO LIVE AS WELL AS POSSIBLE

1) *Develop a shared vision of the extra care housing service with older people, partners and contractors*

- Keep going back to the shared vision and consider how the quality of the service will be managed across all providers to deliver an excellent service.
- For new schemes consider where it will be located and how the scheme will become part of the local community.
- Consider how the design and use of the spatial environment in the scheme will make it easy or more difficult for social groups to develop and for people with dementia to be included.
- Build and design an easy to navigate scheme from the beginning - be bold! It helps everyone.

2) *Identify how the shared vision of the extra care housing service will be realised*

- Be clear what the core services will be and the support available for unplanned or flexible care to meet the emotional and social needs of extra care residents.
- Continue to seek a balanced allocation⁵ and consider how best to prioritise allocations to individuals living with the early stages of dementia.
- Adopt best practice for assessing individuals before the allocation panel; home visits and meeting the person are strongly recommended; make plans for individuals to be supported in their transition to their new home.
- Be clear what measures will be important in determining how well the scheme is meeting the needs of all its stakeholders including residents with and without dementia and regulatory bodies.
- Optimise continuous learning and work together to promote innovation and resident focussed service changes.

3) *Work across organisations to deliver the shared vision of extra care housing*

- Continue with person centred approaches; work with social work staff to plan for emotional / wellbeing support as well as physical care needs; consider different job roles.

- Provide strong leadership, develop joint teams as far as possible by reducing boundaries between staff groups and maximise opportunities for shared development e.g. joint training etc.
- Work as a team to create a culture where relationships, social groups and individuals can thrive.
- Raise awareness of how to interact with, communicate with and support people with dementia, their families, and volunteers.
- Consider how to maximise the spatial environment to support social interaction between extra care community members, to manage risks and to minimising behaviours that challenge.
- Develop a shared quality and operational excellence model that includes residents, partners and other service providers.

A high level analysis such as the 5D approach can be adapted and used to ensure the voice and expertise of residents and staff are included in developing an extra care housing service. For each stage of the analysis that will involve considering who needs to be part of the group that comes together to make decisions and agree actions and what support and tools are required by the group to help individual members be fully involved. The analysis should result in joint agreement on where the extra service should be, where it currently is, what needs to be achieved, how it can be achieved, and how the group can ensure it has been achieved.

Going through a systematic process to identify and agree joint action may appear daunting, but the rewards could be great. Working together with residents and staff should give impetus to address any issues being faced by an extra care housing scheme, and should help the service continue to innovate and develop so that residents both with and without dementia are able to live well.

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Note

The views expressed in this paper are those of the author and not necessarily those of the Housing Learning and Improvement Network.

About the author

Dr Katey Twyford has over 30 years of experience of developing and implementing business, research and quality strategies within organisations that operate in complex stakeholder and regulatory environments. A key focus has been to support organisations to change and make continuous improvements in performance and customer service. She has just completed a Doctoral Research study in the possibilities and practicalities of people living with dementia in extra care housing. She is a research associate at the Oakland Institute for Business Research and Education and the Centre for Loneliness Studies at the University of Sheffield, and an associate consultant at the Housing Learning and Improvement Network.

About the Housing LIN

The Housing LIN is a sophisticated network bringing together over 40,000 housing, health and social care professionals in England and Wales to exemplify innovative housing solutions for an ageing population. Recognised by government and industry as a leading 'knowledge hub' on specialist housing, our online and regional networked activities:

- connect people, ideas and resources to inform and improve the range of housing choices that enable older and disabled people to live independently
- provide intelligence on latest funding, research, policy and practice developments, and
- raise the profile of specialist housing with developers, commissioners and providers to plan, design and deliver aspirational housing for an ageing population.

To view other examples of housing and dementia, visit the Housing LIN's dedicated 'Focus on Dementia' pages at: <https://www.housinglin.org.uk/Topics/browse/HousingandDementia/>

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