A radical rethink is required in the way we involve and engage with residents of extra care housing

Current regulation requires providers to involve customers in shaping and scrutinising services. The personalisation agenda challenges providers to make sure customers are truly at the heart of what they do. With these in mind this Viewpoint suggests that providers might want to revisit how they engage with customers.

This Viewpoint considers how providers have approached involvement of customers in the past and whether engagement methods have moved on since 2004. It highlights some examples of innovative practice within the sector and challenges providers to also look outside the sector to find good engagement practices that might be transferable.

Written for the Housing Learning & Improvement Network by Margi Shand, an expert in resident involvement

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Introduction

User involvement is nothing new; providers, commissioners and other professionals have always sought to involve & engage with residents of extra care housing. But have we moved forward in finding innovative ways to keep service users at the heart of what we do? And how well do we reach those people living in an Extra Care Housing setting?

Having worked in social housing, more recently with a focus on customer engagement, I am keen to explore what providers are doing now and to find out whether best practice has moved on or whether we are still relying on traditional methods.

People often ask me why engagement is important. Quite simply I see it is as a “no brainer”. If providers are truly listening to and involving their customers then they will be providing the services that their customers want; satisfaction will increase and more people will want to take up those services.

I believe we need to think about how we engage with customers at every opportunity and to offer a diverse range of ways for them to get involved. Extra Care Housing (ECH) is still a popular alternative to residential care and we can learn so much from the people living there. This will surely result in future developments continuing to improve and services being provided that people want and need; now and in the future.

Where have we come from?

In August 2004, the Housing LIN produced a factsheet on user involvement in ECH. So what has happened since then? The current and previous housing regulators have supported a focus on involving residents. Co-regulation is set to continue with future challenges such as personalisation still being supported. Supporting People authorities and commissioners still focus heavily on resident involvement and outcomes from that engagement. But how differently are we engaging people compared with 2004? The housing, health and social care landscape has changed considerably since then but are we keeping up with these changes in relation to involving and engaging with residents, and the advent of personalisation1?

It is therefore interesting to note that many organisations are still using the traditional methods highlighted in 2004, such as forums. These are still widely used but can often default to informing residents rather than truly involving them. Some traditional methods can also be quite a barrier to some people; not only because some require travelling to meetings but also due to the formality of these types of methods.

The Housing LIN detailed many ways providers could involve residents, highlighted best practice and informed readers of the Regulatory Frameworks. Thankfully Regulatory Frameworks still hold resident involvement at a high level although how we are regulated has changed since 2004. The then factsheet also highlighted how involvement varies from scheme to scheme. I have found that this can still sometimes be the case and this can be a reflection of the culture of a whole organisation as much as it is of the individuals working within a scheme. Sometimes local staff don’t feel empowered to engage with residents to truly shape services.

Many codes of practice still exist but I wonder if this has in some way restricted innovation. Codes such as the Centre for Housing & Support (CHS) Code of Practice for Support

1 www.thinklocalactpersonal.org.uk/
Services\textsuperscript{2} contain good advice about engagement. But do these lead to providers sticking to tried and tested methods rather than looking beyond this advice, or outside of the sector, for more innovative ways to involve customers?

**Why do we need a radical rethink?**

There are many good examples of providers involving residents and achieving clear outcomes with measured impacts of that involvement. However, as generations of older people change, providers will need to continue to think of imaginative new ways to reach as many people as possible.

ECH continues to be seen as an important part of Local Authority strategies and, with more people living longer, this looks set to be the case for the years ahead. So how can we ensure we know what future generations want? By listening to and engaging as many people as possible you can start to build the necessary intelligence. The ball is in providers’ court to make sure residents are at the heart of what we do.

With an increasing use of personal budgets and a desire to pursue self-funder markets, providers should also be looking at models of “co-production” to help provide better services. As mentioned there are good practice examples of resident engagement, but this doesn’t necessarily lead to co-production of services. Co-production\textsuperscript{3} is referred to as ‘active input by the people who use services, as well as – or instead of – those who have traditionally provided them’. This changes the relationship we have with service users and utilises skills and expertise that those people can contribute. This can be a difficult shift for providers but something we should be considering. In times where resources are tight, this could be a way of helping everyone to improve services. Genuine co-production could lead to a transformation in the way we provide services and how services are purchased (see Imogen Blood’s Viewpoint for the Housing LIN, Building Mutual Support and Social Capital in Retirement Communities).

**What benefits are there in engaging residents?**

Henry Ford once said ‘if I had asked my customers what they wanted they would have said a faster horse’; his point being perhaps that customers can only choose from their limited menu of personal knowledge and life experience. Can our sector therefore aspire to a more sophisticated level of customer engagement than that? I see customer engagement as a partnership; working together with residents to find the best solution for both customer and provider. Putting forward ideas and then working out if that would work and being prepared to modify ideas in light of feedback gathered. There are times when I have seen providers implementing what appears to be a great idea but by not talking to those people who will be using that service, the take up of the service has been limited. Without engaging customers how do we know what we are offering is what they want or need? Those people living in ECH surely are the best placed people to tell us if we are getting it right!

There is a commercial imperative too. By understanding the needs and profile of customers we can provide a better solution. Driving improvements and improving the quality of service increases satisfaction and, as a consequence, will retain existing customers and attract new ones.

\textsuperscript{2} www.chs.ac.uk/index.php?page=\_Home
\textsuperscript{3} www.scie.org.uk/publications/briefings/briefing31
Often I have found that providers focus on involving small groups of residents; what we can also do is engage with each customer individually at each point of contact. We already do this every day in an ECH setting whether it’s carers visiting, catering staff or the scheme manager. But how can we capture this involvement and increase real choice for people? Commissioners are looking increasingly for more personalised services and that may be something residents or families are willing to purchase. By exploring options and seeing that one on one relationship as an opportunity to better understand individual customer needs and preferences could lead to an increase in purchasing of services (a ‘retail’ service model) or commissioning services differently.

When one housing association, Sentinel, developed the catering service at their ECH scheme, Campbell Place in Fleet; they found an important element to getting it right was to involve those people who will be using the service. Fresh Start, a social enterprise helping young people gain valuable work experience, found that by engaging residents in the menu planning and shaping the policy it resulted in a much more successful meal provision. Another benefit that wasn’t anticipated was the young people working at the scheme engaging with the older people living there. Over time the result has been a real exchange of skills and experience. For example, residents teaching young people how to play chess in exchange for training on using computers.

Volunteering and sharing skills, I believe, will also play an important role going forward. Initiatives such as Timebanking⁴ can help and where funds are being cut more and more this can offer an alternative to paying for services. People living in Extra Care Housing schemes and their carers/relatives can benefit hugely from sharing the skills we have. I can’t see any reasons for not engaging with residents and their families or carers. With more funding cuts and an ever more competitive operating environment, can we afford to ignore the commercial advantage to be gained from truly engaging residents?

What obstacles are there?

There are obstacles and genuine, effective engagement cannot be seen as a nice easy thing to do! Providers need to be realistic and honest when engaging residents. With providers feeling the squeeze of funding cuts it is becoming increasingly difficult to provide all the services that people want. This isn’t a reason not to put residents at the heart of what we do; we just need to be honest in that dialogue.

I recognise there are structural limitations for example staff time, limited resources and the reality that some services cannot be provided. It is often said that there are people who just want to be left alone to get on with their life and are not interested in giving their views or getting involved. I often have residents complaining to me that other residents are not interested in “joining in”. It is just possible though that those residents just haven’t yet been offered an engagement option that suits them. The more diverse and innovative the range of engagement options the greater the likelihood of finding an option that suits each individual. It’s about offering the widest range of opportunities.

I believe providers of housing for older people have had to deal with historical and structural obstacles to effective engagement. Many sheltered schemes have a mixture of residents needing support and more independent residents. The support planning process and other forms of service user engagement have, at times, been seen as putting additional pressure

⁴ [www.timebanking.org/](http://www.timebanking.org/)
on staff. This is particularly so given the trend for ever larger schemes, where some managers have to deal with 60+ units on their own. People moving in also didn’t necessarily need the services or security provided so were out and about a lot so not engaging with the community. Finally, some people didn’t choose to move into sheltered or ECH; it was because of circumstance rather than an active choice. This challenges providers who wish to put residents at the heart of what they do.

Some traditional engagement methods can provide their own obstacle. The formality of some area forums and overuse of surveys leading to survey fatigue can lead to disengagement. Working in engagement and talking to residents about how engaged they feel I often hear residents stating they are not interested in formal structures due to the formality of the meetings, problems with travelling or feeling the time spent has not been effective or good value. While I am not suggesting providers should do away with formal structures, I do feel many would benefit from diversifying the ways in which we do involve customers and make sure that any formal structures are effective, inclusive and making a real difference.

**What about regulation?**

Although regulation is more hands off, the focus on co-regulation is still very strong. Providers need to be able to evidence how they are working with and engaging residents. In the 2012 Regulatory Framework the HCA highlights the importance of co-regulation expecting providers to support tenants to ‘both shape and scrutinise service delivery’. This may represent a culture shift for providers who are used to controlling how services are delivered. Listening to feedback is one thing but working with residents to help shape services can be a lot harder to achieve.

The Care Quality Commission (CQC) also sees engagement as an important element to providing quality services. They understand the value of truly involving those people who use services to assist with inspections. CQC have continued to build on the work started by the Commission for Social Care Inspection using people who use services to become ‘experts by experience’. By using people who use services as members of the inspection team they have found this has given a very different perspective from just using inspectors to regulate services.

Supporting People Authorities also continue to see resident involvement as a key priority for providers with a focus on ensuring landlords are providing a personalised care and support planning process. In the Quality Assessment Framework client involvement and empowerment are assessed. Again, the focus is on consulting residents about services and ensuring they have an opportunity to be involved in how they are run.

**What does good engagement look like?**

From a customer perspective, I feel providers can sometimes engage with customers without thinking about the customer journey. Many providers are on board with the concept of good engagement and are therefore keen to involve residents, but do providers always get it right and can providers sometimes engage people at the wrong time or in the wrong way?

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I recently had a discussion with a resident about their experience living in a bungalow on a scheme that was redeveloped into an ECH scheme. Mr C is now very happy where he lives at the new ECH scheme; however, the process of getting there was extremely difficult. Where he lived was planned to be redeveloped into an ECH scheme. There was no doubt the site needed redevelopment as the site consisted of several small bedsit bungalows. This meant demolishing the homes where people had lived for a long time. There was a real sense of community where Mr C lived and, although there was an understanding of why this was happening, this didn’t make it easier. The process overall took about 4 years and meant that Mr C and others felt like they were living in limbo all that time. It is right and important to involve residents every step of the way however sometimes putting ourselves into other people’s shoes and trying to understand how that might make them feel needs to be considered to help support people through what will undoubtedly be a difficult journey.

Often people don’t like change – we all find it difficult whether it’s something changing in the community such as a new major supermarket being built or moving house. It is therefore surely good practice for all to think about the customer journey when engaging people. Where I have worked with residents to change and improve methods of engagement it can be met with resistance. But, if you take the time to explain and review how things are working once in place, even the most vociferous opposers can come round to seeing the benefits.

The importance of feedback and communication cannot be underestimated. I have often seen some fantastic examples of good engagement but because it hasn’t been fed back or communicated to those who were involved they have felt ‘what was the point’. Once you tell people how engagement has made a difference surely more people will want to get involved.

Case Study

Vernon Gardens in Brighton, funded by the Department of Health, is a good example of how commissioners and providers can start to engage people before they move into a scheme to enable them to help shape the service. Brighton Adult Social Care team embarked on a personalisation journey with 10 people with physical and low to medium learning disabilities. With the assistance of specialist independent facilitators, Nicholas Day Associates, the Adult Social Care team wanted to help potential tenants of a new Guinness Trust Extra Care scheme develop their own personalised model of care and support.

The outcome of the work highlights the social, psychological and financial benefits of personalised engagement and support planning. Nicholas Day Associates worked closely with the tenants group and their carers/relatives to develop the model of service. Importantly, involvement was embedded throughout the project and will result in services people want and need. Feedback on the project praised the commitment of the staff, which is an incredibly important facet of engagement. There was also a point made about how well it worked having an independent facilitator. This type of involvement will become more and more important going forward particularly as personalisation becomes increasingly common. (See forthcoming Housing LIN Case Study)
What can we learn from other sectors?

It is interesting to see what is happening in other sectors too. For example, in health there is a real focus on learning from the patient experience. What is interesting about this is a need to find out more about the patient journey not just about feedback at the end of a process. They want to understand from beginning to end how they can improve the experience of not only the patient but also carers and families. They want to involve the people living in a particular area to find out what they want and need not just those accessing hospital services. This has been quite a culture change for health services as in the past we have simply accepted what our local health service offered. There appears to be a real commitment to understanding the patient journey and genuinely listening to the patient voice. The Patient Experience Network even helps NHS Trusts share good practice and access tools to help them develop how they involve patients.  

The Housing LIN highlighted in their 2004 factsheet that owner occupiers / leaseholders are in a position to assert their preferences. They have for a long time used the Association of Retirement Housing Managers (ARHM) Code of Practice to guide how they work with providers. It even has a statutory footing which was approved by the Government in 1993. This demonstrates how long this has been an important part of leasehold management. I wonder if this is why residents who are leaseholders or owner occupiers tend to be more empowered in shaping local services. Maybe as more mixed tenure schemes are developed we will see this having more of an influence in the social housing world. For example, the Government has recently consulted on “the right to manage” which, in future, could see residents take greater control of the way their housing is managed.

Can we also learn something from the commercial sector such as Tesco’s taste panel where all new products get signed off by a panel of customers before appearing on the shelves? Or Mattel Toys who talk to 100,000 children every year about what they watch on TV, what food they like and what they do on their computers so they know exactly what children want for Christmas?

When you look outside of the housing sector you can see how with some organisations, such as John Lewis and Tesco, customer feedback is so important. They want to understand how customers feel about their service and how likely we are of returning. Many of us might not notice but on the bottom of every Tesco receipt they ask you to give your feedback; similarly John Lewis will contact you after an online order to see how your experience was. Capturing these moments can be invaluable to organisations that have a commercial outlook. But why should this be different for social housing. If we start to capture how people feel and what experience they have of our services on a daily basis, not waiting until the next large scale survey, then improvements do become continuous. We need to better understand our customers and what they want and need.

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7 www.institute.nhs.uk/patient_experience/guide/home_page.html
8 www.arhm.org/code_of_practice.cfm
9 Leasehold, Housing and Urban Development Act 1993
10 www.communities.gov.uk/publications/housing/transfermanageconsult
Can we learn anything from Europe?

A recent research paper commissioned by the Hyde Housing Group entitled *Resident Involvement in Social Housing in the UK and Europe* has some interesting findings about how we and others are engaging residents.

The study looked at housing practice in the UK and in Belgium (Flanders), Denmark and the Netherlands. Its findings offer a valuable insight into what is happening in parts of Europe. They looked to address a variety of questions including what models exist for resident empowerment, scrutiny and influence.

Interestingly, they found in all countries resident involvement was a policy priority. However, some areas are doing this more effectively than others. And, although there are examples of resident controlled organisations across Europe, these are still in the minority.

They did find a shift in thinking from landlords across the study from the more traditional to a more individual consumerist approach. Will we find the focus continuing to shift from the traditional model to one of consumerism?

The evidence also shows the importance of having a menu of involvement choices for people and staff buy in at every level. What interested me when reading this paper is the thinking seems so logical when it comes to shifting how we view residents. Surely focusing on the individual and giving more of an emphasis on choice makes sense!

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Case Studies – EAC Resident Consultation Card Game & Whose Shoes?

There are some examples where providers are using alternative ideas such as games to encourage people to give their views. One model is the card game developed by Elderly Accommodation Counsel (EAC). It was developed in 2009 with the support of the DCLG and is used both as a nomination tool for the National Housing for Older People Awards, and as a Resident Consultation Service, allowing those living in ECH to rate their schemes.

For more info go to [www.housingcare.org/providers/eac-resident-consulatation.aspx](http://www.housingcare.org/providers/eac-resident-consulatation.aspx)

Whose Shoes? Is a similar idea using a game to help staff, providers and service users understand more about the personalisation agenda. It aims to help with discussions and get people to think about different ways forward – allowing people to walk in each other’s shoes.

For more info contact Gill Philips at [www.nutshellcomms.co.uk/](http://www.nutshellcomms.co.uk/)

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What scope is there for working with the wider community and how can it help?

The concept of ECH being at the heart of the community and providing a hub for services to the community is nothing new. However, getting it right can be difficult and will always be a continual process. There is the initial selling of benefits to those living at the scheme and also those wanting to come in and use services. Then there is working together to make sure it works for both parties.

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Many ECH developments now look to extend the offer of meals to anyone in the local community rather than just those living in the scheme or visiting family or friends. The result of this has helped not only reduce social isolation in the wider community but also helps in terms of building interest in the scheme, improving waiting lists, increasing the take up of services and making the meal provision more cost effective. This doesn’t work in all areas but many do have a local community that might benefit given the opportunity.

Having care teams and specialist advice in a community has got to be a good thing but for this to work we need to reach out to those communities, gain a good understanding of who is living in those communities and ensure any services that are provided are accessible to all.

For John Genders living close by to Alrewych Court in Walsall has been a lifeline for him. He had been coming to the Housing 21 scheme for some time to use the restaurant and other facilities. However, once he got involved with the digital inclusion work, part of the UK Online Week, the impact was even more significant. Initially John wasn’t interested in getting involved with technology; however, with a bit of encouragement from the staff John agreed and in 2 weeks was hooked! Since getting involved he now manages the computer suite on the court and has even written a blog in the Guardian.

I believe working with the local community will become increasingly important. For some older people living in the community social isolation is a reality but if ECH schemes can reach out to those communities this can change. I am also concerned that for many people they don’t know where to begin when finding out about care, support or alternative housing. I am pleased to see services such as First Stop being developed and maybe ECH should be helping to promote these services to the wider community.

**What role might technology play in the future?**

Technology is continually changing and will need to play an increasing role in engaging residents in ECH. It can also help with engaging harder to reach residents in ECH who may, for example, suffer with dementia.

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**Case Study**

Housing 21 have been doing some interesting work with a student from Salford University. This included seeing how residents would interact with a robotic seal and humanoid robots. The feedback from residents was really positive and the results showed how well these technologies manage to interact with residents. The humanoid robot succeeded in engaging those in the room of all ages and the hope is that this technology could therefore help with engagement and well being. The robotic seals proved to be the most popular with people becoming more active and communicative after some of the sessions with the seal. None of these technologies are a replacement for face to face engagement but it does show how technology can help.

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14 [www.guardian.co.uk/housing-network/2012/feb/06/digital-inclusion-elderly-housing?INTCMP=SRCH](http://www.guardian.co.uk/housing-network/2012/feb/06/digital-inclusion-elderly-housing?INTCMP=SRCH)

15 [www.firststopcareadvice.org.uk/](http://www.firststopcareadvice.org.uk/)

Social media is also having a huge impact on how we go about our daily lives. At times I hear people say it is different because we work with older people. I don’t believe that to be the case and feel the sector needs to embrace how this and other technologies can help providers to engage with residents, their families and carers. Technology such as touch screen information kiosks or using tablets such as iPads could provide a way forward for providers to engage with people living in ECH and their families & carers. It can also reach out beyond the scheme into the wider community.

Technology is moving so rapidly these days and we shouldn’t make the mistake of thinking as we are dealing with people who are older that they are not interested or able to use technology.

For more thoughts on the use of social media and technologies, read Steve Ongeri’s Viewpoint for the Housing LIN17.

How do we know when we have succeeded?

Measuring the impact of engagement is one of the best ways to tell if it has been successful. Residents need to be involved in judging the impact of what they have been involved in. It can be easy for providers to pull together an impact assessment that may say things have changed but residents may not necessarily agree. I believe the best way to write an impact assessment is in partnership with residents. Communicating the fact that engagement has affected change can be the most powerful tool to success.

At Hanover, when 836 residents, including many living in ECH, were asked about the residents' handbook the results were obvious. However, without asking residents, improvements may not have been developed into something residents wanted. Nobody used their handbook, instead they would either speak to the scheme manager or phone the office. People complained that the handbooks were out of date and often couldn’t be found when needed. It therefore made sense to rethink things and this resulted in a series of help sheets being produced which not only improved the information provided but also helped with saving costs as there was no longer a need to print expensive handbooks.

Customer satisfaction is another good indicator if you are getting it right. As well as the take up of services – if you are providing what people want then people will use services!

It is also good to track how and who you are involving. Every mechanism will exclude some people so having a range of opportunities is important to give everyone the chance to get involved if they want to. This isn’t just about numbers it is making sure all customer views are taken into account including those who are harder to reach.

Finally, in terms of success, putting in place clear Key Performance Indicators in all staff performance plans and tracking how these are being achieved can not only help monitor success but will also help with embedding the engagement culture. Training all staff in effective customer engagement and ensuring this is part of the core skill set will make sure engagement becomes embedded in all roles across an organisation.

[17](www.housinglin.org.uk/)
Conclusion & recommendations

In answer to the question do we need a radical rethink, I believe ‘yes’ we do.

Engagement needs to be embedded across organisations and for all staff to value every contact they have with customers. We need to build on the methods we use and increase the number of opportunities. Looking at new and innovative ways to involve more people; rethinking and embracing new technologies.

Every customer contact is an opportunity to engage and learn. For example, if someone is contacting the organisation to report a repair we could be asking how else we can help or asking for feedback too.

We need to be learning from all feedback including compliments and complaints; involving customers in looking at and understanding what this tells us. Capture feedback at every opportunity, understand what it means, go away and develop services then ask again so services can be refined and improved. Basically, it is about understanding the needs of your customers!

This may for some change the relationship we have with our customers. I believe we must make engagement more inclusive for everyone. Ensuring it is easy and routine; part of the day to day workings of an organisation. Seeing engagement become joined up so we gain an understanding of what individuals want and ultimately meeting customer aspirations. Looking to share good practice examples and understanding what we can learn about areas such as co-production.¹⁸

To achieve this, I believe engagement needs to be seen as a priority for the organisation. Leadership is key – senior managers need to demonstrate and promote the value of engaging customers and encourage all staff to prioritise this agenda. Make it part of the day to day by including this in all business plans and individual performance plans. Have a menu of ways to get involved as one size doesn’t fit all!

Maybe the sector could do with an improved code of practice building on the codes that currently exist, learning from other sectors and the commercial environment to give us something that will help bring ongoing engagement to reach a level that will enable our sector to lead the way forward with customer engagement. Wouldn’t it be nice to see other sectors looking to ours for good practice and new innovations!

Acknowledgement

I am grateful to the Housing LIN for commissioning this Viewpoint. I hope it will lead to further discussion and sharing of ideas and good practice. I am not saying this is the way everyone should work – I would just like to see our sector leading the way in customer engagement and seeing people living in housing for older people including ECH shaping the services they want and need. To have your say, post comments on the Housing LIN ‘learning lab’.

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

¹⁸ www.nesta.org.uk/publications/assets/features/co-production_right_here_right_now
About the Housing LIN

Previously responsible for managing the Department of Health’s Extra Care Housing Fund, the Housing Learning and Improvement Network (LIN) is the leading ‘knowledge hub’ for a growing network of housing, health and social care professionals in England involved in planning, commissioning, designing, funding, building and managing housing, care and support services for older people and vulnerable adults with long term conditions.

For further information about the Housing LIN’s comprehensive list of on-line resources and shared learning and service improvement networking opportunities, including site visits and network meetings in your region, visit www.housinglin.org.uk.

The Housing LIN welcomes contributions on a range of issues pertinent to housing with care for older and vulnerable adults. If there is a subject that you feel should be addressed, please contact us.

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