

Care packages, assistive technology and adapting the home

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Outline of the presentation

1. The context – the role of OTs
2. The REKI project
3. The Remodelling project

Also Improving the provision of assistive technology project

(we interviewed some OTs)

4. Conclusion

1. The context – the role of OTs

Key role noted in:

- Policy documents (e.g. DETR/DH 2001)
- Research (e.g. Care and Repair, 2004)
- The College of Occupational Therapists (e.g. COT, 2006)
- Personal (worked with OTs on all recent projects in this area)

2. The REKI project

The University
of Reading



Research Group for
Inclusive Environments

KING'S
College
LONDON

REKI

Introducing Assistive Technology into the Homes of Older People: feasibility, acceptability, costs and outcomes

EPSRC

Engineering and Physical Sciences
Research Council

The REKI team

The multidisciplinary Research Team

- Professor Anthea Tinker, Claudine McCreadie
 - King's College London,
(Institute of Gerontology)
- Professor Keith Bright, Susan Flanagan,
Kate Goodacre, Professor Peter Lansley
 - University of Reading,
IE (Research Group for Inclusive Environments)
- Dr Alan Turner-Smith,
Dr Donna Cowan, Alex Bialokoz
 - King's College London,
CoRE (Centre of Rehabilitation Engineering)

Resources

- Funders – EPSRC (Engineering and Physical Sciences Research Council)
- Period October 2000 – March 2003
- Advisers
- Consultants

PARTNERS

- 5 local authorities
- 5 registered social landlords (housing associations)

Research questions

- What is the potential of AT?
- How suitable is existing housing for AT?
- What is older people's experience of AT? – the acceptability of AT to them
- What are the costs and outcomes?
- What are the implications?

Summary of what we did

- Policy review
- Discussions with housing providers etc
- Designed user profiles and consequences for them and their home
- Audit approx 8 homes in each of the 10 areas
- Consider links between audits and profiles
- Cost the packages of care and AT
- Interview approx 8 older people with AT in each area

Summary of findings about the property: not all were capable of adaptation

- Structural constraints or the combination of alterations would require the rebuilding of a very substantial part of the property (which would change its character significantly)
- Spatial constraints (e.g. flats where through floor lifts could not be used)
- Costs being greater than the value of the property
- Planning issues

Summary of findings about the property: these were easy to adapt

- Accommodation on 1 level
- Spacious layout (with rooms separately approached from hall or landing)
- Large bathroom or space to enlarge
- 2 bedrooms or more
- Large walk in cupboards
- Timber floors

Summary of general findings: costs based on hypothetical profiles

A set of hypothetical profiles were created to show their disabilities and the AT which would address their functional needs. This profile is repeated 5 years later. The hypothetical users were then 'housed' in each of the buildings surveyed. The cost of AT and a package of care was then calculated

Cost - summary

- Very large variations
- In some cases the savings were substantial
- Savings are almost always achieved within average life expectancy

The acceptability of AT to older people– some findings based on the interviews

- 67 interviewed (53 women, 14 men)
- Age range 70-90+
- Half in 'sheltered' housing
- Disability from 15 mild to 4 complete

Quality of AT

Very little AT found but it must:

- Work efficiently
- Be reliable
- Be safe
- Be simple
- Be aesthetically pleasing

Some conclusions on acceptability

- People are diverse and pragmatic
- AT facilitates tasks/ promotes safety / welcomed AND
- AT is under-provided BUT
- Potential tension between “felt need” and objectively assessed need
- Potential tension between AT and the character of “home”
- Users know best – but need to be informed!

3. Remodelling sheltered housing and residential care homes to extra care housing



Objectives of the research

To examine:

1. The process of remodelling local authority and housing association sheltered housing and residential care homes to become extra care housing (including how any problems have been avoided, side tracked or overcome)
2. The outcomes in terms of costs and benefits

The funder and timing

Remodelling sheltered housing and residential care homes to extra care housing

- Funded by the Engineering and Physical Sciences Research Council (EPSRC)
- A multi-disciplinary project
- From May 1 2005, for 2 years
- An advisory group which includes older people

The research team

Professor Anthea Tinker and Dr Fay Wright,
- King's College London, Institute of Gerontology

Professor Julienne Hanson and Hedieh Wojgani
- University College London

Dr Alan Holmans, University of Cambridge

Dr Ruth Mayagoitia-Hill and Els van Boxstael
– King's College London, Centre of Rehabilitation Engineering
(3 student projects)

* Presentation given on behalf of the team

The importance of the subject: policies and practice

- Remodelling presents challenges over and above those relating to new build schemes
- Perceived problems with inadequate help for older people at home and in sheltered housing
- Criticism of residential care and lack of places
- Difficult to let sheltered housing
- Need for closer links between services (e.g. Single Assessment Process)
- More funding from DH
- Previous research on the value of extra care

What the research is covering and methods

- a. Examining a sample of schemes which have been converted from sheltered to extra care housing (planned to be 5 schemes – did 8)
- b. Examining a sample of schemes which have been converted from residential care homes to extra care housing (planned to be 5 schemes – did 2)

Both a. and b. involve considering the role of assistive technology

What the research is covering: Summary

- Only social housing – a sample of schemes which have been converted since 2000 to extra care (Local Authorities: planned 5 did 2, Housing Associations; planned 5 did 8)
- Examining what the care, building and AT changes were and what is likely to be needed in the future
- Obtaining the views of older people and staff to look at the advantages and disadvantages
- Costing the changes to the schemes and
- Providing guidance based on the findings

Some initial findings:

a. General

- The lack of an agreed definition of extra care
- The high level of interest in the project
- The rapid turnover of staff in the schemes
- The great differences between schemes e.g. some have remodelled all but some part of the scheme

Some initial findings:

a. General (cont.)

- General satisfaction by the tenants of their flats especially when compared with residential care
- Schemes have, in general, become more accessible compared with before remodelling
- Most flats and facilities (both communal and for staff) are bigger and better
- Often the grounds/gardens are better than before

Some initial findings:

b. From a social policy perspective*

- Variations in admission criteria and care provided
- Variations over provision of a cooked meal
- Significant input from relatives
- Tensions between tenants
- Not all schemes provided opportunities to socialise
- Major access problems (especially the front door) and problems with lifts

* (including interviews with staff and tenants)

Some initial findings:

c. From an architectural perspective*

- Variations in spatial standards in the flats and shared amenities
- Problems with the sites
- Issues to do with decanting or allowing residents to stay during remodelling
- 'Cutting and carving' problems
- The 'unknown factor'
- How long term will the remodelled schemes last?

* (including interviews with professionals)

Some initial findings:

d. From the accessibility and AT perspective*

- Compliance with accessibility standards is patchy
- No wheelchair accessible kitchen was found
- In most cases staff laundry facilities were more accessible than those for residents
- Most schemes had good referral systems for when residents moved in and when their needs changed
- Residents were buying a large percentage of their AT
- The community alarm was being used as a means of internal communication

• *Based on visits

Some initial findings:

e. From the costings perspective

- This is not a cost benefit study
- Costings will show the cost of the 10 schemes and compare with new build on the same site
- Early findings show great variations in cost.
- Are costs neutral? e.g if baths are provided cf showers, frailer tenants are going to need assistance involving care costs

4. Some conclusions

- In order for older people to remain at home, research shows that it is usually a combination of assistance that is needed
- While the family is at the heart of this the home itself, the assistive technology and a package of care is crucial
- Within that, the contribution of OTs is of central importance