

MAINTAINING INDEPENDENT LIVING

Enabling older people to live independently for longer through home adaptations

Sue Adams Care & Repair England

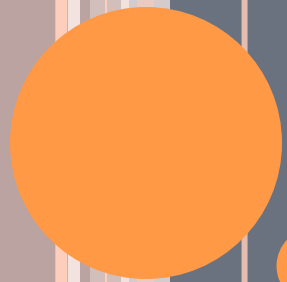
WHO?

- **Care & Repair England**; *national housing charity aims to address poor and unsuitable housing conditions amongst the older population, esp. low income home owners (est. 1986)*
- **Pioneers of local Care & Repair services**, *Minor works grants, Handyperson, Healthy Homes, Older People's "Housing Activism", Housing Options – Silverlinks, new Evidence creation Catch22*
- **Policy shaping**: *Older people's housing – Chair Housing & Ageing Alliance, Home Adaptations Consortium, HCA, DCLG, NHS England Integration Task Groups, DH Care Legislation ...*

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CONTEXT

































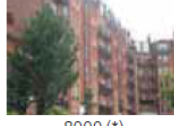
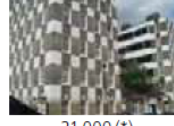




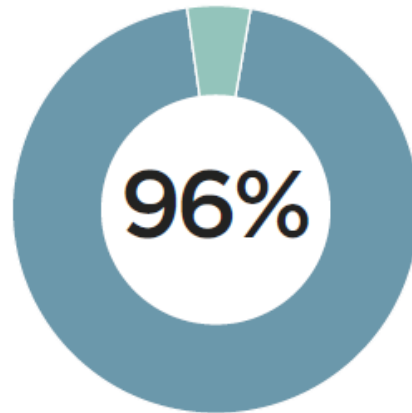
Dwellings (mean usable m ²)	Pre-1850	1850–1899	1900–1918	1919–1944	1945–1964	1965–1980	1981–2002	2003–2010	All ages
Terrace	 185,000 (110)	 1,088,000 (89)	 1,150,000 (88)	 1,036,000 (79)	 920,000 (79)	 1,049,000 (80)	 691,000 (71)	 236,000 (93)	6,356,000 (83)
Semi-detached	 154,000 (149)	 327,000 (121)	 307,000 (120)	 1,731,000 (93)	 1,754,000 (89)	 922,000 (87)	 539,000 (76)	 126,000 (90)	5,860,000 (94)
Detached	 279,000 (208)	 176,000 (172)	 130,000 (190)	 449,000 (160)	 492,000 (147)	 804,000 (133)	 1,210,000 (134)	 256,000 (153)	3,796,000 (149)
Bungalow	 18,000 (*)	 30,000 (*)	 13,000 (*)	 195,000 (79)	 594,000 (75)	 698,000 (77)	 389,000 (91)	 60,000 (80)	1,996,000 (78)
Converted flat	 105,000 (83)	 450,000 (63)	 263,000 (62)	 101,000 (63)	 22,000 (*)	 5000 (*)	 2000 (*)	 * (*)	948,000 (65)
Purpose-built low-rise flat	 3000 (*)	 79,000 (71)	 96,000 (73)	 216,000 (57)	 541,000 (57)	 938,000 (56)	 797,000 (50)	 370,000 (58)	3,039,000 (56)
Purpose-built high-rise flat	 1000 (*)	 3000 (*)	 8000 (*)	 21,000 (*)	 73,000 (52)	 187,000 (58)	 23,000 (*)	 74,000 (62)	391,000 (58)
All types	744,000 (150)	2,153,000 (94)	1,967,000 (95)	3,751,000 (93)	4,397,000 (87)	4,602,000 (84)	3,650,000 (89)	1,112,000 (92)	22,386,000 (92)

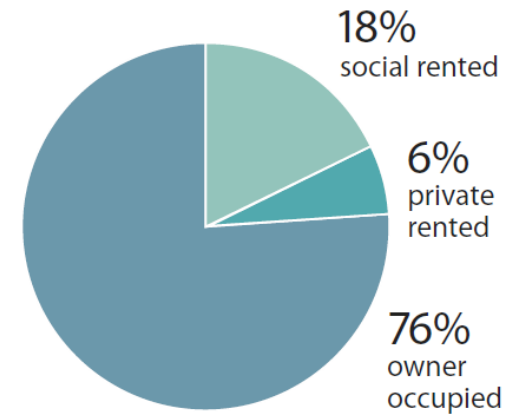
Figure 1: A typology of English housing
 (* The sample size in the EHS data is too small to produce a reliable estimate.)

WHERE OLDER PEOPLE LIVE

96% of older households live in mainstream homes

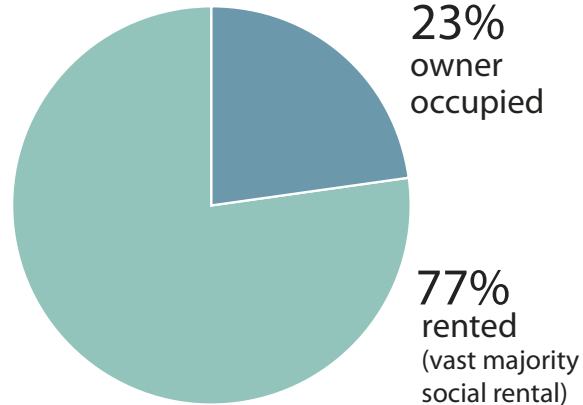


Most older people are owner occupiers



WHERE OLDER PEOPLE LIVE

**500,000
specialist
homes**
(sheltered,
extra care,
retirement)



NOT A MINORITY INTEREST



Older people (55+) live in 43% of all homes (9.5m older households)



I Want to
grow old at home



**older &
bolder**

Tel: 01 8783623

Support equality for older people
Find out how www.olderandbolder.ie

K
Pink Art
photos/pink55

COMMON CONDITIONS AFFECTING PEOPLE 65YRS +

Common conditions	Incidence	Adaptation enabling independence
Arthritis	50 %	Grab rails/ bathroom / stairlift/ equipment eg kitchen
Cataracts and other visual degeneration	26 %	Better lighting, colour contrast decoration etc
Mobility problems / daily living tasks difficult	35 %	Grab rails/ bathroom / stairlift/ equipment eg kitchen

PHYSICAL CAPACITY AND AGEING

Table S11a. Receives help with mobility* (%), by age and sex: ELSA wave 6

Age in 2012–13

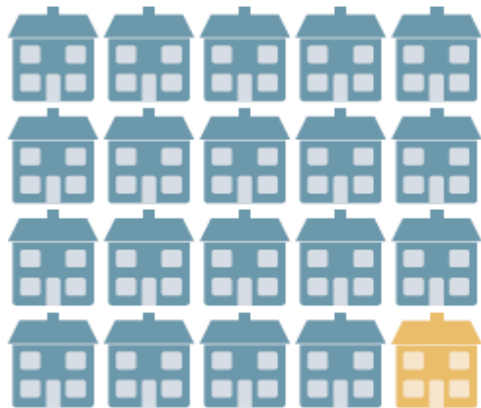
	50–54	55–59	60–64	65–69	70–74	75–79	80+	All
Men	22.2	23.9	27.7	27.2	32.4	35.8	55.1	32.8
Women	28.8	32.9	31.2	34.0	37.2	46.0	71.0	42.3

- *Note –just those who receive help with activities of daily living (washing, dressing, medication, making a meal etc)*

52% of older households (HoHH 65+) includes person with activity limiting long term health condition or disability

OPPORTUNITY: RETROFIT

- Key role of **home adaptations** in making homes accessible & safe (*eg reduce falls*), and enabling independence (*eg self care - bathing*)



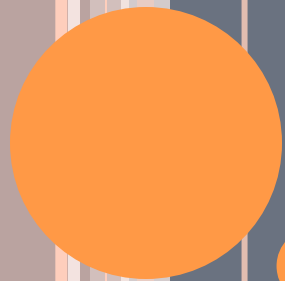
95% of homes
lack even basic
accessibility
features

- *Level access*
- *Flush threshold*
- *Ground floor WC*
- *Wide doors and circulation space*

SUMMARY

- **22 million households - 9.5million households [HoHH 55yrs+], half a million specialist homes**
- **c 80% of homes that we will be living in in 2050 are already built**
- **Aspiration (*and often only option*) = age in place**
- **Problems with ADL common (55%/ 71% 80yrs+) – high risk eg. independent bathing/ steps/ stairs**

Adaptation of current stock is critical to extending safe independent living in later life



WHAT WE KNOW NOW

Evidence about impact of home adaptations



HOME ADAPTATIONS EVIDENCE

○ *Better Outcomes, Lower Costs* (DWP, 2007)

Improved outcomes eg. falls reductions, enabled ADL, mental health improvements

- **Saving** by reducing or removing completely an existing outlay – *eg. move out of hospital/ residential care, reduced care packages*
- **Saving** through prevention of an outlay that would otherwise have been incurred – *eg. emergency medical intervention after fall, premature admission to residential care, injury to carers*
- **Saving** through prevention of waste – *eg. additional care/ NHS costs incurred due to delayed installation of adaptation*

CURRENT EVIDENCE REVIEW

- Commissioned by Centre for Ageing Better, undertaken by UWE
- Examples of outcomes identified- *falls reduction, ADL enabled, frailty & mortality, depression, mental health*
- Examples of international studies:
 - New Zealand RCT – standardised minor adaptations (c. £500 per unit) to reduce home injury, 4yr tracking. *26% reduction in injuries from falls*
 - USA – tailor home adaptation to enable achievement of personal goals re ADL eg. unassisted bathing.
75% improved ADL after 5 months, significant reduction in depression/ improved mental health



MODELLING HAZARDS REDUCTION

- 21% (1.2m) HHs (65yrs+) in non-decent home*
- 79% are owner occupied (c.1m)
(Highest % in private rented, lowest % social rented)

**Cat 1 hazard = main reason non-decent*



** Main Cat 1 hazards = cold and falls*

HHSRS OUTCOMES/ YR1 TREATMENT COSTS

Typical HHSRS outcomes and 1st year treatment

Hazard	Class 1	Class 2	Class 3	Class 4
Damp and mould growth	Not applicable -	Type 1 allergy (£2,034)	Severe asthma (£1,027)	Mild asthma (£242)
Excess cold	Heart attack, care, death (£19,851)	Heart attack (£22,295)*	Respiratory condition (£519)	Mild pneumonia (£84)
Radon (radiation)	Lung cancer, then death (£13,247)	Lung cancer, survival (£13,247)*	Not applicable -	Not applicable -
Falls on the level	Quadraplegic (£92,490)*	Femur fracture (£39,906)*	Wrist fracture (£1,545)	Treated cut or bruise (£115)
Falls on stairs and steps	Quadraplegic (£92,490)*	Femur fracture (£39,906)*	Wrist fracture (£1,545)	Treated cut or bruise (£115)
Falls between levels	Quadraplegic (£92,490)*	Head injury (£6,464)*	Serious hand wound (£2,476)	Treated cut or bruise (£115)
Fire	Burn ,smoke, care, death (£14,662)*	Burn, smoke, Care (£7,435)*	Serious burn to hand (£1,879)	Burn to hand (£123)
Hot surfaces and materials	Not applicable -	Serious burns (£7,378)	Minor burn (£1,822)	Treated very minor burn (£123)
Collision and entrapment	Not applicable -	Punctured lung £5,152	Loss of finger £1,698	Treated cut or bruise £115

Not applicable = HHSRS class very rare or non existent

*** = Costs after 1 year are likely to occur, these are not modelled**



CURRENT ADAPTATIONS PROVISION

HOME ADAPTATIONS

- **Private sector market** – *scale unknown, poss. indicated by high level of advertising for stair-lifts, level showers, special chairs/ scooters*
- **State support for low income households-**
*means tested **Disabled Facilities Grant** (av. £7,000, max £30,000, 58% are under £5,000)*
- **Community Equipment** – *non-means tested, small items (up to £1,000) eg. toilet frames*
- **Falls Prevention programmes** – *national Consensus Statement incl. housing [but remedial home measures often not carried out?]*



INNOVATION NEEDED

- **DFG** - strong cost benefit profile has resulted in Treasury doubling national DFG payment to LAs (£431m in 17-18) but falls short of meeting need
- **Part of BCF** -but limited examples of integrated provision or innovation eg. *Wigan health funded fast track to speed up hospital discharge*
- **Reaching tip of iceberg** – big gap = impartial I&A about best use of own resources and pre-crisis home adaptations eg. *Knowsley & West of England's Independent Living Centres*



OUTCOMES BASED COMMISSIONING

- **Improved Outcomes *for individuals*** resulting from home adaptations include; falls reduction, enabling of ADL, mental health improvements

Questions and Issues:

- *Quantifying gains, particularly to NHS/ health/ Public Health/ Social Care*
 - *Attribution from multi-factorial interventions (integrated provision & personalised solutions work best)*
 - *Timescales / duration of benefits*
- 