The PSSRU Evaluation of Extra Care Housing

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Presentation

- The PSSRU evaluation
- Characteristics of residents
- Outcomes for residents
- Costs and cost-effectiveness
- Social well-being
- Other issues
- Summary and discussion

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PSSRU Project Team

- Professor Ann Netten
- Robin Darton
- Theresia Bäumker
- Lisa Callaghan
- Jacquetta Holder
- Ann-Marie Towers
- Jane Dennett
- Lesley Cox
- 26 local researchers

The Extra Care Housing Fund: Aims

- To develop innovative housing with care options
- To stimulate effective local partnerships between the NHS, local housing authorities, social services authorities, care providers, housing associations and private sector and other developers of extra care housing in the interests of older people

(Department of Health, 2003)

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PSSRU Evaluation: Aims

- Evaluation of 19 new build schemes supported by the DH Extra Care Housing Fund (2004-2006)
- Main evaluation:
 - Short- & long-term outcomes for residents & schemes
 - Comparative costs
 - Factors associated with costs & effectiveness
 - Role in overall balance of care

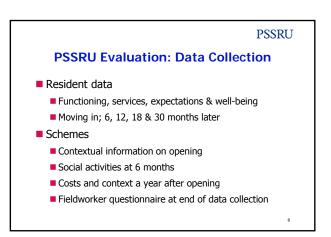
- Extension to additional schemes:
 - Wakefield
 - Birmingham & Plymouth (Thomas Pocklington Trust)

PSSRU Evaluation: Linked Studies

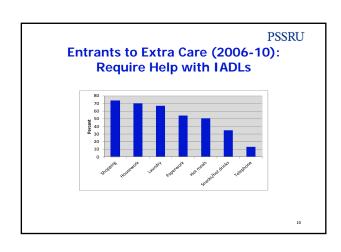
- JRF-funded study of social well-being
- JRF-funded study of Rowanberries, Bradford
- EVOLVE: EPSRC-funded study of design evaluation (Sheffield/PSSRU)

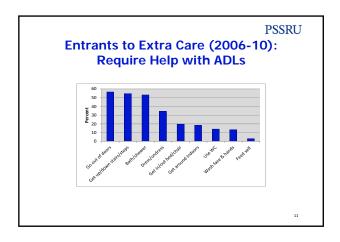
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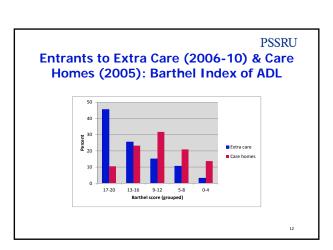
PSSRU Evaluation: Extra Care Schemes 2004/05 2 retirement villages: 258 & 270 units 7 newbuild: 344 units (38-75) 2 newbuild/remodelled delayed: dropped 2005/06 1 retirement village: 242 units 9 newbuild/remodelled: 372 units (35-48) 1 retirement village delayed: dropped

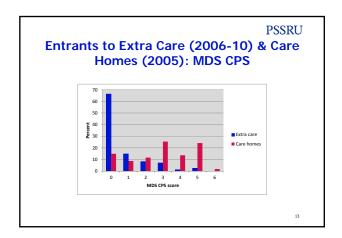


PSSRU PSSRU Evaluation: Response (November 2010) No. with data with Res Q with Ass Q Ass Q + 6m Ass Q + 18m Ass Q + 30m resids Smaller 16 996 680 620 645 390 187 114 schemes Villages 896 562 9 Total 19 1894 1248 1182 817 453 248 123









PSSRU Entrants to Extra Care (2006-10): Change in Dependency by Follow-Up

	Follow-up	% deteriorated	% improved
Barthel Index of ADL	0-6 months	9	12
	0-30 months	22	8
MDS CPS	0-6 months	8	6
	0-30 months	6	14

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Entrants to Extra Care (2006-10): Location at End of Study

	Number		%	
Still in scheme	458		56.1	
Moved	69		8.4	
Nursing home		29		3.5
Care home		16		2.0
Elsewhere/not known		24		2.9
Died	161		19.7	
Died in scheme		62		7.6
Died elsewhere		99		12.1
Lost to follow-up	129		15.8	

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Entrants to 11 Extra Care Schemes (2006-07): Mortality & Survival

Number of individuals	374	
Number of deaths	115	
Mean time to death	20 months	
% died by 30 months (≥65)	34%	
Predicted median (50%) survival from model:		
Extra care (≥65)	32 months	
Care home (2005)	21 months	
Nursing home (2005)	10 months	

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Cost Variations: Factors Associated with Higher Costs

- Individual factors:
 - Living alone
 - Higher levels of physical and cognitive impairment
 - Need for nursing care
 - Long-standing illness
 - Higher levels of well-being
- Scheme-level factors:
 - Separate housing management and care arrangements
 - Separate housing marHigher staff turnover
 - Larger housing providers
 - London location

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Cost-Effectiveness

- Rowanberries study: higher cost/person associated with improved social care outcomes and quality of life
- Comparisons of costs and outcomes with matched sample from 1995 care home survey:
 - Lower costs: £374 vs £409 pw
 - Slight improvement in physical functioning and cognitive functioning stable for extra care
 - Slight deterioration in functioning for care homes
- Restricting comparisons to more dependent (2005 cases):
 - Outcomes for extra care remain better
 - Less evidence of cost savings

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Social Well-Being Study

- Role of communal facilities in friendship development:
 - Smaller schemes: restaurants and shops lunchtime
 - Villages: indoor street and role of resident volunteers
- Villages well-suited to more active people
- Poor health and receipt of care could hinder social involvement – importance of staff support
- Links with local community valued importance of location
- Attitudes to other residents' frailty and community use of facilities

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PSSRU Evaluation: Other Issues

- Timescale of developments (resiting, redesign)
- Mixed tenure (demand)
- Future proofing (1-bed flats)
- Communal facilities and links with community
- Setting-up and participation in social activities
- Transport within and outside scheme
- Division of responsibilities for housing and care
- Expectations of partner organisations

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PSSRU Evaluation: Summary

- Average level of dependency lower than in care homes
- Substantial need for help with IADLs & mobility
- Very few with severe cognitive impairment
- Cost-effectiveness analysis demonstrates potential as alternative for proportion of care home residents
- Follow-ups demonstrate that can be home for life, but support for cognitively impaired less certain
- Relationships between fit and frail, social groups etc: importance of support and managing expectations, especially in villages

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Discussion

- Sustainability of extra care model:
 - Pressure resulting from local authority nomination rights
 - Maintenance of facilities (e.g. restaurants)
 - Development of new schemes (provision relatively limited)
 - Public understanding/demand (downsizing)
 - Local authority staff understanding and expectations
 - Impact of policy developments (e.g. personal budgets)
- Other issues:
 - Management turnover and stability
 - Relationships with local community
- Is it expected to do too much?

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Contacts

- PSSRU publications on the evaluation:
 - www.pssru.ac.uk/projects/echi.htm
- Housing and Care for Older People Research Network:
 - www.hcoprnet.org.uk/

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