

5.7. Supported Living for Older People and People with Physical Disabilities

Older People

Current demand for Social Care for Older Adults

The demand for adult social care services continues to increase, even though the numbers of older people, who are the largest client group, are reducing. Increasingly services users are choosing self-directed support, through the provision of direct payments for their care, supported by a Personal Assistant.

The Office for National Statistics (ONS) Subnational Population Projections for Clinical Commissioning Groups in England¹ show that Barking and Dagenham's population aged 65 years and over is predicted to significantly increase over the next 15 years. Table 5.7.1 below illustrates the projected increase in numbers of older people in the borough, broken down by age bands:

Table 5.7.1 Population projection, Barking & Dagenham CCG, 2015-2030

	2015	2020		2025		2030	
		Number	% Change	Number	% Change	Number	% Change
People aged 65-69	5,900	6,000	3%	7,100	22%	8,600	48%
People aged 70-74	4,200	5,100	24%	5,300	29%	6,300	54%
People aged 75-79	3,600	3,500	-5%	4,300	16%	4,500	22%
People aged 80-84	2,900	2,800	-7%	2,800	-7%	3,500	17%
People aged 85-89	2,000	1,900	0%	1,900	0%	2,000	5%
People aged 90+	1,100	1,300	18%	1,400	27%	1,600	45%
Total population 65 +	19,700	20,600	+5%	22,800	+16%	26,500	+35%

Source: ONS

The ONS are projecting that by the year 2030 the population of older people living in Barking and Dagenham will increase to 26,500, this equates to a 35% increase compared to the 19,700 in 2015. The most significant projected changes for this age group in the borough are:

- The number of people in the borough aged 90 or over will increase by 18% by just 2018 and 45% by 2030. This increase will have a significant impact on the number of people requiring support from Adult Social Care.
- The 70 to 74 age group is predicted to have the most significant increase, growing by 54% by the year 2030.
- The 80 to 84 age group is initially predicted to decrease before it increases in 2030 by 17%.

¹ ONS Subnational Population Projections for Clinical Commissioning Groups in England available at:

- The 85 to 89 aged population is predicted to remain steady, growing by just 100 by 2030.

In addition to the growing older population the health of the borough also has a significant effect on the demand for social care, for example:

- Life expectancy in Barking and Dagenham remains to be below the national average. According to ONS data² males in Barking and Dagenham have a life expectancy (at point of birth) of 77.6 years, in comparison the national average is 79.5 years. Likewise the life expectancy for females living in Barking Dagenham is 82.1 years while the national average is 83.2.
- The ONS also publish statistics relating to the healthy life expectancy of a borough which measures the average number of years that a person can expect to live in "full health" by taking into account years lived in less than full health due to disease and/or injury. The healthy life expectancy for males living in the borough is 59.5 year, significantly below the England average of 79.7) and for females the expectancy in the borough is 54.6 years compared to the England average of 76.9. This is a very significant statistic in relation to the demand for services as a sizable proportion of those living in ill health will require support.
- Barking and Dagenham being placed 129th out of 150 local authorities for premature mortality (deaths before age 75) over 2011-13³. This increased morbidity in the local population is thought to be introducing social care needs earlier than for other populations, and further research is planned in year to investigate this and other suggested causes
- According to the 2011 census information⁴ 16.4% of Barking and Dagenham's population are estimated to have a disability which limits their day to day activities.

Barking and Dagenham remains England's 22nd most deprived local authority area⁵. With the high levels of deprivation in the borough and the potential impact of welfare reform it is predicted that:

- The prevalence of drug misuse and related harms may increase
- The risk of mental health illness is likely to be high
- many people will have less money to contribute to care services and there will be few people funding their own care

² ONS life expectancy & healthy life expectancy data 2012 to 2014 available at:

<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthandlifeexpectancies/bulletins/healthylifeexpectancyatbirthandage65byuppertierlocalauthorityandareadeprivation/england2012to2014>

³ PHE 2015, Mortality rankings, total premature deaths before age of 75 in England over 2011-13, available at:

<http://healthierlives.phe.org.uk/topic/mortality/comparisons#are//par/E92000001/ati/102/pat/> - Last accessed 16 April 2015.

⁴ 2011 Census information available at:

https://www.nomisweb.co.uk/census/2011/QS303EW/view/1946157260?rows=c_disability&cols=rural_urban

⁵ Department for Communities and Local Government 2011, The English Indices of Deprivation 2010, available at:

<https://www.gov.uk/government/statistics/english-indices-of-deprivation-2010> - Last accessed 16 April 2015

Older People accessing adult social care and support

Throughout the 2015/16 financial year 1,594 older people received a long term service from Barking and Dagenham Adult Social Care, of these:

- 236 were residing in nursing care placements
- 303 were residing in residential care placements
- 676 were receiving care via a direct payment
- 355 were receiving care via a managed personal budget
- 24 were receiving services commissioned by the local authority, this would include services such as supported living.

The 676 older people who received their care and support via a direct payment in 2015-16 equates to 64% of all service users aged 65 and over receiving community based long term services. The proportion of all service users accessing a direct payment has grown year on year since their introduction however this seems to have reached a peak and the number has now become more static.

In addition to the above long term service users there were 1,027 older people who received a crisis intervention service throughout the year. Crisis Intervention was introduced in the borough in 2012 and is designed to be provided primarily to new Service Users following a discharge from hospital while their care needs are identified. Service Users will ideally be in receipt of a Crisis Intervention service for between four to six weeks. It is intended to stabilise their situation so that a social care assessment can form a reasonable view of their future care needs and longer term services can be put in place (if needed), hopefully as part of the service user's pathway back to independence. Of the 1,027 older people who received a Crisis Intervention service in the year 887 were new service users who were not receiving any services at the point they were referred to the Council.

Older people are the largest client group for Barking and Dagenham's Adult Social Care Department, throughout the 2015/16 financial year they accounted for 61.7% of all service users receiving long term services and 85% of service users receiving a Crisis Intervention service.

Barking and Dagenham's Care and Support Hub was launched in December 2013. It includes information and advice on care and support for the community and a directory of support services, as well as a PA finder. The Hub website had 110,630 page hits via 30,841 separate sessions in 2015-16, throughout the year the site was used by 22,555 people.

Barking and Dagenham's Integration and Commissioning Team recently undertook a tendering exercise to establish a list of providers for all Home Care and Crisis Intervention services. The exercise was undertaken to ensure that the providers

used by the Council were delivering care safely and to a high standard. Fifteen providers were successful in the process and are now providing care and support in the borough. The tendering process also help the Council ensure that they are fulfilling their duties under the Care Act to promote a sustainable local market place, as part of the process providers were required to demonstrate that their proposed rates were sufficient enough to be sustainable over the course of the four year contract and that they were remunerating their staff to an acceptable standard. Eight of the fifteen successful providers are paying their staff at, or above the London Living Wage.

The Council have recently also worked closely with the local residential and nursing care market to ensure that the amount we pay for placements is reflective of the cost incurred by providers. Local providers shared with us detailed information in relation to their overheads and running costs. As a result the weekly rates paid by the Council increased by over 20% for the 2016/17 financial year.

Current Services for Older People and People with Physical Disabilities

The Council strives to help people with physical disabilities to remain independent and in their own home as long as possible through, for instance, an assessment of their needs and suitable adaptations. If this is not possible, the individual may move to adaptable accommodation. Other living options are considered if neither of the previous solutions were possible, for example, sheltered housing or extra care.

In Barking and Dagenham there are 31 sheltered housing schemes over 23 sites. Sheltered housing is accommodation designed for people who are aged 55 or over. It is also suitable for disabled people who receive a Disability Living Allowance⁶.

Extra Care Schemes provide additional support while the residents remain independent. There are eight extra care schemes within the borough. Extra care housing is part of the provision of support which is available to more frail older people to enable them to continue living independently for as long as possible. This care provision is commissioned by the council, there are a maximum of 268 bed units (5.7.2).

⁶http://www.direct.gov.uk/en/MoneyTaxAndBenefits/BenefitsTaxCreditsAndOtherSupport/Disabledpeople/DG_10018702

Table 5.7.2 Extra Care Schemes for Barking and Dagenham residents, 2015/16

External Schemes	Bed Units	Internal Schemes	Bed units
Harp House	36	Millicent Preston	33
Fred Tibble Court	31	Ted Hennem	41
Colin Pond Court	31	George Crouch	31
Darcy House	52	Fews Lodge	13
Total	150	Total	118

Source:

Barking and Dagenham's Housing and Adult Social Care departments have commissioned an organisation to undertake an Older People's Housing review. The review was commissioned to provide the Borough with an understanding of the current picture of sheltered and extra care housing in Barking and Dagenham, and to crucially provide us with recommendations for the future of older people's housing in the Borough.

Nursing and residential care places are necessary when a person's care needs have reached a point where they can no longer be cared for at home or in a sheltered/extra care environment. On 31 March 2015, the Council had 360 older people placed in care homes both within and outside the borough, excluding self-funders. Most care homes are run by the private sector, although some are owned by charitable or voluntary organisations. The Council currently has one in-house residential care home, Kallar Lodge, specialising in Dementia care which has 37 care beds.

Barking and Dagenham has an adequate supply of residential and nursing places for current and foreseeable future needs. Current strategy is in fact to minimise the use of residential and nursing home care and to focus upon the provision of general housing with personalised support. As an aid to this, consideration should be given to a more strategic approach to the use of telecare and telehealth solutions.

End of Life Care

The Better Care Fund is a programme which was introduced in 2013 which results in Social Care and the NHS working together with a pooled budget to work on projects to improve the lives of some of the most vulnerable people in our society, placing them at the centre of their care and support, and providing them with 'wraparound' fully integrated health and social care, resulting in an improved experience and better quality of life.

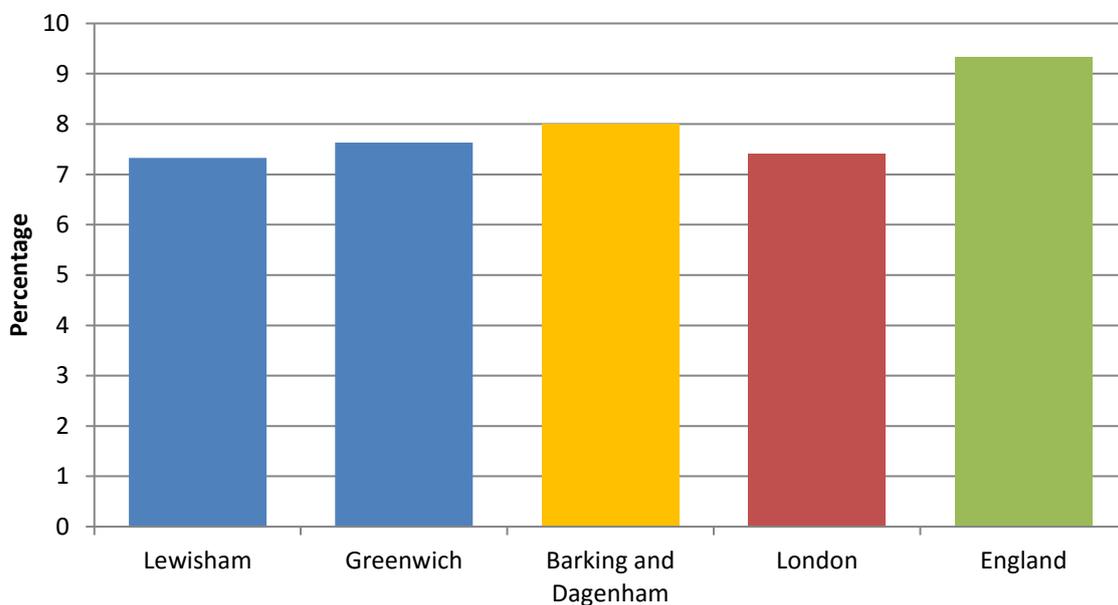
As part of the Borough's plan for the 2016/17 Better Care Fund programme a milestone was included to raise awareness and provide training for carers and nursing home staff to build confidence in managing end of life care patients without resorting to hospital settings. The Council will be working with care staff in the borough to ensure that they are adequately skilled to enable service users to die in their own home, if that is their wish, safely with dignity and respect.

Physical and Sensory Disabilities

The 2011 census indicated that 30,460 people described themselves as having a long term health problem or disability which limits their day-to-day activities either a little (14,876) or a lot (15,584).

LBBB is one of only 4 Boroughs where more than 15% of the population live with a long-term, limiting health condition (others being: Newham, Hackney and Islington).

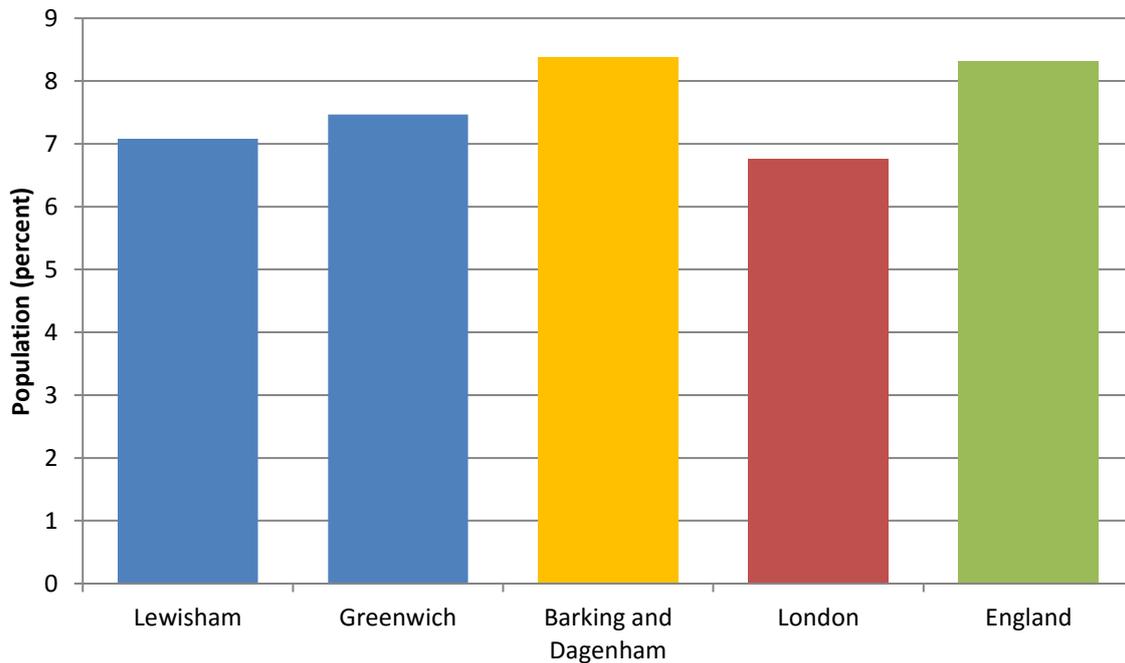
Figure 5.7.1 Self-reported long term health problem or disability which limits day-to-day activities a little, Barking and Dagenham compared with statistical neighbour boroughs, London and England, 2011 Census



Source: London Health Programmes: Health Needs Assessment (HNA) Toolkit, 2011
<http://hna.londonhp.nhs.uk>

The age standardised rates (Figure 5.7.1) show that Barking and Dagenham has a slightly higher prevalence of people reporting that they have a long term health problem or disability which limits their activities *a little* than the London average, but a lower rate than England as a whole. Barking and Dagenham also has the highest rate of the statistical neighbour boroughs.

Figure 5.7.2 Self-reported long term health problem or disability which limits day-to-day activities a lot, Barking and Dagenham compared with other outer north east London boroughs, London and England, 2011 Census



Source: London Health Programmes: Health Needs Assessment (HNA) Toolkit, 2011 <http://hna.londonhp.nhs.uk>

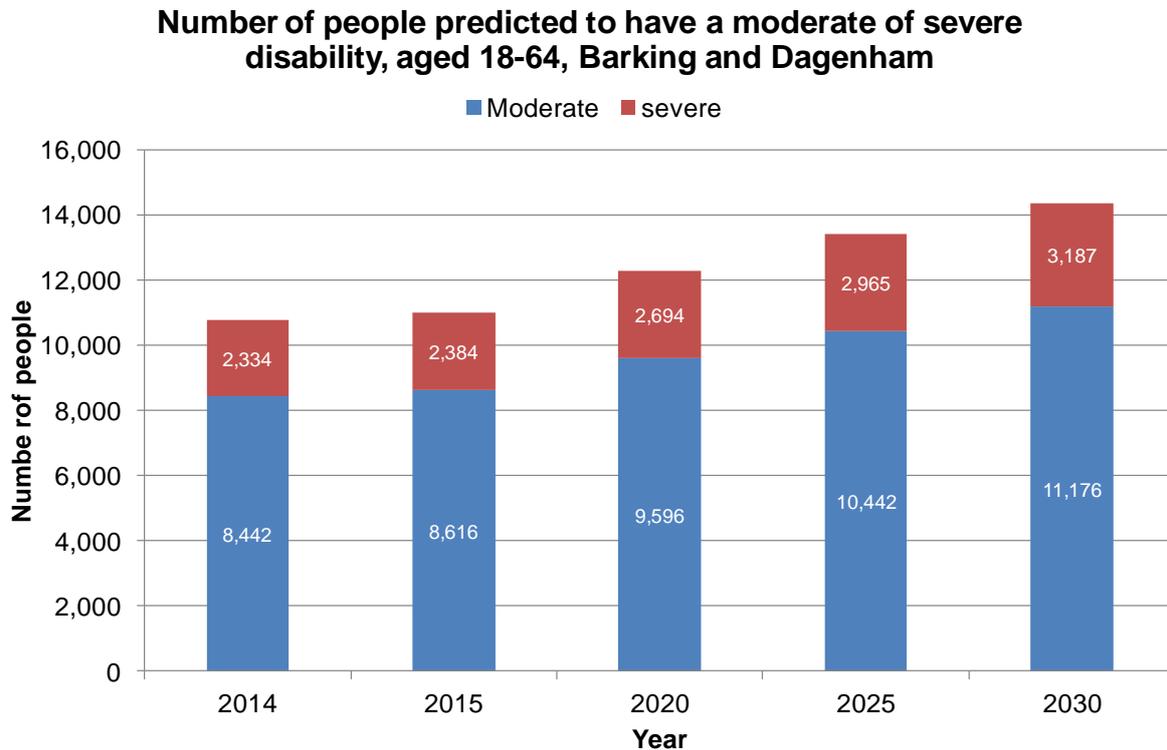
Figure 5.7.2 shows that Barking and Dagenham has a similar age standardised rate of people reporting that they have a long term health problem or disability which limits their day-to-day activities *a lot* to the England average. It is higher than the London rate and the highest of the statistical neighbour boroughs.

Prevalence of Physical Disability in Adults

Figures from Projecting Adult Needs and Service Information⁷ estimate that in 2014, 8,442 adults (aged 18-64 years) in Barking and Dagenham were living with a moderate physical disability and an estimated further 2,334 adults with a serious physical disability. By 2020, it is estimated that there will be an additional 1,154 people aged 18-64 years with moderate physical disability and an additional 360 with serious physical disability in the borough, and many of these may require support from Council services (Figure 5.7.3)

⁷ www.pansi.org.uk

Figure 5.7.3 Number of people predicted to have a moderate or severe disability



Source: Projecting Adult Needs and Service Information System (PANSI)
www.pansi.org.uk

The number of older people (aged 65 and above) in Barking and Dagenham will increase from 19,500 in 2012 to 26,500 in 2030. Increased life expectancy is impacting particularly on the numbers of very elderly, with an increase from 1,000 people over the age of 90 in 2012 to 1,600 by 2030, an increase of 60%.⁸ This will impact on the need for both health and social care.

Older people make up the majority of people in supported living arrangements. POPPI (Projecting Older People Population Information System)⁹ can be used to understand the current and predicted future numbers of older people and people with physical disabilities who may require supported living arrangements:

- About 4,000 people over the age of 65 have mobility problems and are unable to manage one or more activities on their own. This figure is predicted to rise by nearly 25% by 2030.
- Nearly 7,000 people over the age of 65 are unable to manage at least one self-care on their own; this number will increase by just under 2,000 by 2030.

⁸ Population Projections Unit, ONS. Crown copyright 2014, Table 3: 2012-based Subnational Population Projections for Clinical Commissioning Groups in England, available at: <http://www.ons.gov.uk/ons/publications/re-reference-tables.html?edition=tcn%3A77-335242> – Last accessed 16 April 2015

⁹ POPPI <http://www.poppi.org.uk/>

- The number of people with dementia is projected to increase from 1,502 in 2014 to 1,842 by 2030.
- Over 2,500 people over the age of 65 provide unpaid care to someone who has a long-term physical or mental ill-health or disability or problems related to old age.
- Over 8,000 people aged 18 – 64 years had a moderate physical disability and 2,334 a serious physical disability in 2014. These numbers are predicted to rise to 11,167 and to 3,187 respectively by 2030¹⁰.

Current Services for People with Physical Disabilities

Younger people (18–65 years) with physical disabilities choose to live in their own homes with support, either in general housing with adaptations where necessary, or in supported living schemes where they have their own tenancies. There are a small number of people with physical disabilities who have chosen to remain in residential care after moving in many years ago, but generally these are in the older age group. Sometimes people will move to residential care for a short period if their disability is caused by a serious accident for example, but this is always part of a longer term plan to achieving more independence.

Care and support is funded through a personal budget, a sum of money given directly to the service user by the Council for that purpose, which gives individual choice and control to disabled people to have their care needs met in a way that they choose. For example this may involve directly employing a personal assistant, or deciding to purchase care direct from agencies. Throughout the 2015/16 financial year, a total of 413 younger people with a physical disability were in receipt of a personal budget. There are a growing number of people using their personal budgets to purchase support from personal assistants. The Borough's personal assistant directory now contains the details of over 100 assistants.

Adaptations

Since 2012, adaptations for older and disabled people who live in owner-occupied and privately rented accommodation have been provided via two Council schemes - Disabled Facilities Grants (DFG) and the Adaptation Grant Scheme. The former is governed by the Department of Communities and Local Government (DCLG) guidance and is intended to provide disabled people with access to essential facilities within their homes and access to the exterior of their property. This is for both adults and children. The latter is a preventative, direct payment scheme based on a self assessment for over 18s.

For our Adaptation Grant Scheme (AGS), approximately £109,000 was paid out in 2015/16 for 41 adaptations such as stair lifts bathing equipment and downstairs toilets. The grant is paid to the individual so they have control over the money and can choose who they would like to undertake works. These alterations to people's homes can avoid much greater expense to health and social care services through the prevention of hospitalisation due to falls and the postponement of the need for residential care.

¹⁰ PANSI Projecting Adult Needs and Service Information <http://www.pansi.org.uk/>

There is a great deal of pressure on both the DFG and the Adaptation Grant Scheme in Barking and Dagenham. The Borough is predicting a continued increase in pressure on the DFG and the AGS due to demographic change and increases in long-term conditions.

Sensory disabilities

Who needs support?

Figure 6 indicates that there are relatively few people receiving a social care service in the community for a sensory impairment (either a hearing, visual or dual impairment). The numbers increase slightly with age. A large proportion of people who experience sight and hearing loss are older, but this is often not the primary area of need recorded.

Primary Support Reason for those aged 18 to 64	Nursing	Residential	Community
			TOTAL
Sensory Support: Support for Visual Impairment	0	0	3
Sensory Support: Support for Hearing Impairment	0	0	1
Sensory Support: Support for Dual Impairment	0	1	1

Primary Support Reason for those aged 65 and over	Nursing	Residential	Community
			TOTAL
Sensory Support: Support for Visual Impairment	3	1	7
Sensory Support: Support for Hearing Impairment	0	0	2
Sensory Support: Support for Dual Impairment	0	1	1

Services

A multi-agency Vision Strategy Group has been set up to provide strategic direction on how the Borough as a whole comes together to work on eye care and vision issues for our residents. The Council chairs the group, but it is also attended by local Optical Committee representatives, local voluntary sector organisations, our Community Learning Disability Team and carer representatives.

The Borough was also instrumental in setting up and supporting East London Vision (ELVis). ELVis is a user-led organisation designed to provide an effective and efficient way of ensuring that vision impaired people living in East London get the support and services they need. It is an umbrella organisation with voluntary sector, user led representation in each of the east London Boroughs, including Barking and Dagenham. ELVis is an excellent resource for providers and providers can contact ELVis for support and advice in setting up services for vision impaired people. Details can be found at: <http://www.eastlondonvision.org.uk/>

The Council's Health and Adult Services Select Committee (HASSC) also undertook a scrutiny review of sight loss and the associated services available to support residents. The recommendations from the review were published in September 2015¹¹ and included:

- A review by the Barking and Dagenham Clinical Commissioning Group (CCG) of the local eye care pathway
- A review by the CCG which considers the clinical benefits of community optometrists (high street opticians) being able to refer patients directly to hospital eye clinics and other services rather than having to do this via GPs;
- The CCG to consider the benefits of commissioning an 'Eye Care Liaison Officer' for local residents, to ensure that people with newly acquired sight loss are provided with support at the point of diagnosis and signposted to appropriate services;
- The CCG to consider whether cost-effective improvements could be made to local low vision services, given that the HASSC found that in other parts of London these services are delivered closer to where people live and provide tailored support to ensure that visually impaired people are able to make ongoing, beneficial use of magnifiers and other equipment provided to them;
- The Council's Public Health Team to oversee a campaign emphasising the importance of having regular eye tests, whilst also delivering other important eye care messages as part of the future programme of public health campaigns;

¹¹ <http://modern.gov.barking-dagenham.gov.uk/documents/s94521/App%201%20HASSC%20Eye%20Care%20Scrutiny%20Report.pdf>

- Partners to consider a range of options to 'make every contact' count and introduce a scheme or schemes to encourage and possibly incentivise parents to arrange an eye test for their child prior to starting school.

The Health and Wellbeing Board and the HASSC will monitor the progress of the implementation of these actions over the coming months.

Recommendations for Commissioners

Older People

The Older People's Housing review commissioned by the Council will provide information and recommendations in relation to both sheltered housing and extra care provisions in the borough. The contracts that the Council currently has in place for the externally provided extra care schemes are due to come to an end in the 2016/17 financial year and the outcome of the report from this review should be used to inform commissioning decisions as to how the schemes will be re-tendered or re-modelled.

Commissioners to work up plans for end of life care training with care providers in the Borough as part of the Better Care Fund work.

Physical and Sensory Disabilities

To continue to review the need and pressure on the Disabled Facilities Grant and the Adaptation Grant Scheme, particularly as demographic pressures and long-term conditions increase.

Housing resources remain under pressure, particularly around one-bedroom flats where pressure comes from the decant programme that follows the regeneration of housing estates. It is therefore recommended that a Housing Strategy is written for older and vulnerable people, including those with physical disabilities to ensure that housing stock is accessible and adequately caters for these groups of people.

A review should be undertaken into the Borough's use of telecare and telehealth solutions, with the intention of establishing the opportunities for these technologies to contribute to the efficiency, independence and personalisation of older people's and disabled people's housing options.

To review the progress made in implementing the recommendations of the scrutiny review of sight loss and eye services.