

CABINET
2 FEBRUARY 2017**PILOT INTERGENERATIONAL PROJECT (HOMESHARE)**

Relevant Cabinet Member

Mr J H Smith

Relevant Officer

Director of Public Health

Recommendation

- 1. The Cabinet Member with Responsibility for Health and Well-Being recommends that Cabinet:**
 - (a) approves the adoption of new policy decision to invest in the 'innovation concept' of the pilot Intergenerational Project Homeshare to reduce loneliness in older people as set out in this report;**
 - (b) supports the Council investing in the partnership with the University of Worcester to enable the development of the above innovation concept;**
 - (c) approves the maximum funding of £167,000 from Public Health Ring Fenced Grant for a period of 4 years in support of it; and**
 - (d) authorises the Director of Public Health to take all appropriate steps to put the above decisions into effect.**

Background

2. Worcestershire has 30,000 older people living alone with 50% of those expected to be isolated. Demographic trends project that the number of older people living alone will increase by 22% between 2012 and 2020 (Projecting Older People Population Information System (POPPI) 2013). People who are socially isolated are more likely to develop depression, dementia and have an unhealthy lifestyle such as not taking regular exercise.
3. Community and home-based health and well-being self-management and building resilience will be required to reduce demand for hospital or social care over the next 15 years (Social Finance, 2013).
4. At the same time the affordability of accommodation for students is a significant issue, exacerbated by the planning regulations in the City of Worcester which restrict the adaptation of housing for student accommodation. The University has a student population of approximately 10,000, with 25% attending health and social care courses. Currently, there are approximately 1,500 accommodation units in halls of residence.

5. It is estimated that chronic loneliness costs health and social care commissioners on average a total of £12,000 per person, of which approximately 40% occurs within the first five years (GP visits, A&E visits, hospital admissions, residential care, some costs associated with depression and diabetes) (Investing to Tackle Loneliness Report, 2015).

6. When compared to people who are never lonely, older people who are lonely on average are:

- 1.8 times more likely to visit their GP
- 1.6 times more likely to visit A&E
- 1.3 times more likely to have emergency admissions
- 3.5 times more likely to enter local authority-funded residential care.

7. In addition to these short-term effects, loneliness also influences the likelihood of developing certain health conditions which will increase service usage in the medium to long-term. When compared to a population of older people who are never lonely, older people who are always or often lonely can be:

- 3.4 times more likely to suffer depression
- 1.9 times more likely to develop dementia in the following 15 years
- Two thirds more likely to be physically inactive, which may lead to 7% increased likelihood of diabetes, 8% increased likelihood of stroke and 14% increased likelihood of coronary heart disease.

Work to date

8. The County Council is committed to reduce loneliness within the county and has formally adopted this strategy over recent years.

9. The Council has driven this agenda through the development of a Social Impact Bond (SIB) working with CCG partners, the Big Lottery Fund and Cabinet Office. The SIB is an innovative outcomes-based payment driven project aimed at supporting the loneliest people within the county and using focussed interventions to reduce loneliness through the use of community organisations and volunteer support. Payments for the delivery of reduced loneliness (the outcome) are then made accordingly.

10. This SIB model puts a large emphasis on provider performance/throughput and generating referrals to ensure that the maximum outcomes (and thus payments) are achieved.

11. The intergenerational project aims to replicate this model through a similar outcomes-based payment mechanism.

The Intergenerational project

12. The University and Vestia commenced discussions about the possibilities of a scheme like this some time ago. Partnership working was already in place between the Council and the University and tackling loneliness had already been identified as a priority of the Council.

13. The proposal put forward is based on a European model called 'Homeshare' which matches older people (and couples) who have a spare room in their house and students who require accommodation whilst studying at University.

14. The matching process of older people and students is rigorous and places a strong emphasis on compatibility/buy in to the project and safeguarding. This includes undertaking DBS checks on both parties involved in the agreement. These arrangements will be formalised by both parties and regular interaction with Vestia Community Trust will take place to ensure that the placement is functioning as intended. There are potential safeguarding implications for this scheme for both students and the older people involved. The measures put in place to mitigate against these are the DBS checks undertaken on both parties, the agreement between the parties and the project and the monitoring and support package put in place as part of the scheme.

15. Vestia Community Trust has entered into a formal partnership with the University of Worcester to identify students who may benefit from this arrangement through both the pure accommodation basis and also as part of their university course (a semi-placement).

16. Students targeted will be those in their 2nd and 3rd year of studies and primarily on social care/health related courses (e.g. Occupational therapy/nursing/social work).

17. Payments for the scheme will be made on a Payments by Results (PbR) basis only. The measurement tools used to assess the outcomes will include the UCLA (University of California, Los Angeles) loneliness scale which is used for the SIB, along with other measures to measure improvement in health, well-being and quality of life.

18. The scheme will aim to support up to 75 placements by the end of 2017.

Benefits of the project

19. The pilot scheme aims to achieve the following:

For the Council:

- Reduced loneliness for older people
- Payment for positive outcomes only
- Improved health and well-being and quality of life for participants
- Supporting University students to become part of the health and social care system
- Potential delay in accessing social care eligible services, such as accommodation of care packages delivered in the home
- Development of an innovative partnership with the University of Worcester to test the application of the Homeshare model in Worcestershire
- Evaluation of the model of to reduce loneliness in Worcestershire.

There may also be a positive impact on CCG-funded provision in particular GP services.

For the older person:

- Social interaction/companionship and reduced loneliness and isolation
- Able to continue living in their own home
- Improved health, well-being and quality of life
- Help with household tasks
- Assurances for families who may live away from the area
- Opportunity to learn new skills, such as digital technologies.

For the student:

- Cost-effective accommodation
- Work experience/enhanced CV, in particular for health and social care students
- Companionship and shared learning opportunities.

20. Target areas for the Council will include:

The scheme will need to identify individuals/families who are likely to derive the greatest benefit and return on investment to the Council. People will be identified through housing partners and existing older people forum networks, health and social care staff. Target groups include:

- Those people currently receiving non-care related home support packages
- Carers of people who are now residing in a care home/extra care scheme.

Engagement with older people

21. Vestia Community Trust has attended the Older People's Consultative Group (OPGC) to discuss the project and feedback was positive.

22. Representatives from the OPGC also committed to cascade the information to their respective forums.

23. Vestia Community Trust has also commissioned a Worcester-based company to undertake research with focus groups into key messages for older people which will underpin the marketing strategy.

Evidence base for project

24. The County Council is committed to driving innovation and this project is seen as an ideal opportunity to both develop the partnership with the University of Worcester and to pilot a concept which is untested in the UK and is consistent with the County's approach to tackling loneliness.

25. Measuring the effectiveness of spend on prevention is complex and does not fit well with simple cost benefit calculations. The return on investment may often be medium to long-term. Also, some of the benefit may accrue to other organisations – notably the local NHS and Acute Services and broader society. However, the evidence base for many services is well developed and the Council is committed to testing all services for effectiveness and value for money.

26. A tangible cost benefit would materialise where social care funded care packages are reduced as a result of older people engaging with the project.

27. Other assessments of the return on investment will be made by measuring the changes in health and well-being, and quality of life using validated measures which have a financial value. It is thought that chronic loneliness costs commissioners on average £12,000 per person of which approximately 40% occurs within the first five years. (Investing to Tackle Loneliness Report, 2015). A proportion of these costs will be to the Council and this will vary on an individual basis. The scheme has the potential to

avert a proportion of these costs. If that averted costs exceed the costs of the scheme (£700 per person) then the scheme will be cost effective.

28. The scheme will contribute to the following outcomes:

- Improved Mental Health
- Reducing falls in people over 65 and over
- Reduced injuries due to falls in people aged 80 and over
- Reduced hip fractures in people aged 65 and over
- Reduced hip fractures in people aged 80 and over
- Reduced social isolation of adult carers
- Reduced fuel poverty
- Increased Physical Activity
- Improved Quality of Life.

Risks

29. As payments will only be made for positive outcomes there is no financial risk to the Council for underperformance of activity.

30. The safeguarding of older people (and students) will form part of the risk assessments and 3 way agreements between all parties (older person/student/Vestia). The safeguarding policy/DBS checks/references/home safety checks (including suitability of appliances) will form part of the inclusion process.

31. The pilot is a pilot and there is scope to change elements of delivery throughout the life of the programme whilst remaining within the financial envelope assigned by the Council.

Legal, Financial and HR Implications

32. The contract will be with the University of Worcester, who is the only provider who has access to the university population and therefore the only partner able to deliver the scheme. The scheme will therefore not be subject to a competitive tender.

33. The University of Worcester will subcontract the management and delivery of the scheme to Vestia Community Trust.

34. The maximum commitment from the Council will be £167,000 over the course of the project (£17,000 year one and up to £50,000/year for the subsequent years).

35. This funding has been identified and secured from the Public Health Ring Fenced Grant.

36. Other funders of the scheme include:

- Students, who will pay a one off fee (£500) to Vestia Community Trust to support the student training, support and set up costs
- Vestia Community Trust who will contribute to management costs of the scheme
- University of Worcester who will contribute finance, staff support and research and evaluation.

37. The Council funding will be paid on a Payment by Results (PbR) basis for the reduction in loneliness in older people after 6 months and 18 months using the UCLA Loneliness Scale, which is validated tool, also used for the Reconnections SIB. Other measures will also be used to measure improvements in health, well-being and Quality of Life. The final details are to be agreed and will be set out in the formal agreement with the University of Worcester.

38. There are no HR implications for the Council.

Privacy and Public Health Impact Assessments

39. Socio economic factors: Positive impact on the students and older people involved in the scheme as they will share the housing costs. The home owner will have a student contributing to the household bills and the student will have access to reduced cost accommodation.

40. Physical Health, Mental Health and Well-being: The scheme is designed to improve the health and well-being of the older person and is likely to have a positive impact on the well-being of the student due to the training they will receive about keeping well and the companionship. The scheme has a system of monitoring and support which will be used to identify if the scheme is having a negative effect on physical or mental and health. Action will be taken on Worcester University and or Vestia to resolve any negative effects.

41. Access to services: The scheme is designed to enable older people involved to have increased access to community-based services that will enhance quality of life and health and well-being. The students involved will have access to training and support.

42. Inequalities: The scheme may have a positive effect on reducing inequalities due to the financial benefits to both students and the older people involved. The small numbers involved mean this will be limited.

Equality and Diversity Implications

43. An Equality Relevance Screening has been completed in respect of these recommendations. The screening did not identify any potential Equality considerations requiring further consideration during implementation.

Contact Points

County Council Contact Points

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Specific Contact Points for this report

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Background Papers

In the opinion of the proper officer (in this case the Director of Public Health) the following are the background papers relating to the subject matter of this report:

Presentation outlining the project (Vestia Community Trust)

Link to Lyon (France) based model <http://www.expat-agency-lyon.com/english/international-students-lyon/students-accomodation-lyon/intergeneration-home-sharing-in-lyon/>