

## Communities, Equality and Local Government Committee

### Inquiry into Home Adaptations

Response from : Hywel Dda Health Board

Hywel Dda Health Board welcomes the opportunity to contribute to the Inquiry into Home Adaptations. The relationship between housing and health is a growing area of concern, as public health information becomes more embedded in the planning and delivery of good health care.

The context within which home adaptation and maintenance services for older people are commissioned, funded and delivered continues to be extremely complex. A significant proportion of the people admitted to hospital and/or receiving community health care are frail elderly. Additionally communities are seeing a growing number of people with long term conditions remaining in their own home.

The housing stock in West Wales is commonly poorly designed to support people with impairment/disability to freely access essential facilities. The recommendations from the Equality of Opportunity Committee's 2009 report on home adaptations acknowledges the impact of home maintenance and adaptation on personal independence, dignity and the capacity to avoid injury.

It is interesting that the information available regarding the effectiveness of the adaptation service relates to response times alone. It is clear from the report that people cope at home with increased risk during the period that they are waiting for work to be undertaken. When people are admitted to hospital as a result of injury or illness it is apparent in some cases that failure to manage a reliable functional living pattern may be a contributory factor.

Additionally, there are times when it is no longer viable for people to return home due to the space available and layout of the accommodation. Some people are obliged to move into temporary accommodation (or remain in hospital), whilst alternative permanent housing is sourced. This has an impact on their opportunity to return to independent living

As highlighted by the College of Occupational Therapy inquiry response, a modern adaptation service needs to put the individual at the centre and create an experience which delivers outcomes. The adaptation services would be improved by simplifying the provision and funding of adaptations.

### **Integrated Services**

Much work has been undertaken in Hywel Dda to strengthen partnership working. As part of that work, the Health Board is committed to developing integrated Occupational Therapy Services that span Health Board, Social care and Housing.

Carmarthenshire initially made a commitment to adopt this approach to deliver integrated Occupational Therapy Service 6 years ago. An incremental approach has been adopted. This has supported the adaptation service in accessing a senior occupational therapist with the knowledge and skill as well as the capacity to adopt a more integrated approach to the whole pathway of care for an individual.

This approach is also agreed in principle in Pembrokeshire and Ceredigion and discussions are underway to reach agreement regarding the operational working arrangements. The lessons learnt from Carmarthenshire are being applied to inform that negotiation.

Practical experience of moving towards integrated working highlights the challenge of a single profession adopting an integrated approach. There is a growing awareness of the factors influencing the pace of change when developing integrated services across the NHS and Social Care. The inclusion of adaptation services generates additional complexity.

Adaptation Services are overseen as part of the responsibilities of Housing. Whilst this is part of Local Authority it operates as a separate department. Consequently joint working between the NHS and Housing is not an automatic product of integration with Social Care. Housing client information is held on a different data base to social care, without shared access to information regarding clients that are active to the different departments.

The partnership working arrangements relating to, for example, effective fast tracking of adaptation is underpinned by good personal relationships and commitment of staff wishing to deliver a good service. The potential (to improve client outcomes) for delivering a more integrated adaptation service is still to be fully explored. Partnership between community rehabilitation/reablement, social care intake model and adaptation services will be a feature of local agreement.

It would be timely to consider:-

- The impact of increased access to reablement and rehabilitation services and the relationship between assessment for potential recovery and requests for adaptations
- How best to make best use of adapted housing stock – matching need with the adapted housing available
- Opportunities for stronger partnership not just with Social Care, but also the NHS
- An outcome focused adaptation service with...
- A simplified system of access, assessment, and funding that has the capacity to be part of an integrated care pathway.

