

Tenants' experiences of changing accommodation due to closures of Housing with Care Schemes

May 2017



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Introduction

Healthwatch is the consumer champion for health and social care in Coventry. We give local people a voice - making sure that patient, service user, carer and public views and experiences are heard.

We are independent of NHS and care services and decide our own programme of work. We have a statutory role and legal powers including the right to request information and to get a response to our reports and recommendations.

We work to influence the planning and delivery of NHS and social care services based on what local people tell us.

Healthwatch Coventry is delivered by the Here2Help Voluntary Sector Consortium.

1. Why we undertook this work

In 2014, as part of a larger exercise of reviewing services to consider methods of delivery and work within reducing budgets, Coventry City Council's Cabinet passed a plan for 4 Housing with Care schemes to be closed:

- Frank Walsh House
- Skipton Lodge
- Halford Lodge
- Farmcote Lodge

There were 78 residents in these facilities that would therefore need to move to new homes which met their needs.

Healthwatch Coventry was mindful of the extent of changes to social care provision, the vulnerable client groups involved and the significance of 4 housing with care schemes being closed.

Therefore In 2015-16 the Healthwatch Coventry Steering Group agreed an annual work priority focused on changes to social care services with a specific element of tracking how a specific change was implemented. The closure of 4 housing with care schemes was chosen as the area to focus on under this priority because of the potential impact on individuals and the scale of the piece of work which needed to be undertaken by the City Council in order to support people into new homes.

Due to the timeframe for the closure programme the Steering Group agreed to continue this work during the 2016-17 work programme.

2. Our aims

This piece of work aimed to:

1. Follow individuals through the process of change of services and understand the process from their perspective
2. Identify what worked well and any learning from this process of transition which could be used for any future exercises of service change

3. Method

Healthwatch Coventry undertakes qualitative research to gather evidence about what local people think and want/need from local health and social care services.

For this piece of work Healthwatch decided to follow the journeys of people from the 4 housing with care schemes via a series of 3 one to one interviews over the course of the time for their assessment and move to a new home.

A representative from Healthwatch visited each tenant and asked them a series of questions about their experiences at 3 points in time:

1. When tenants had formally been informed that they were going to have to move
2. When new accommodation had been identified
3. After a settling in period in their new home

Meetings were in confidence and no Housing with Care staff were invited to attend unless this was at the expressed wish of the tenants. Tenants were also invited to ask family members/carers to come along to the meetings.

Healthwatch met with all of the participants individually (other than those at Skipton Lodge, where the timeline had gathered pace and residents were already moving on) and the process was explained to them.

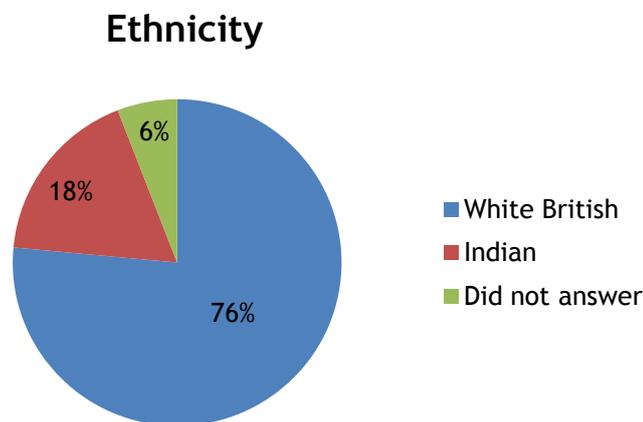
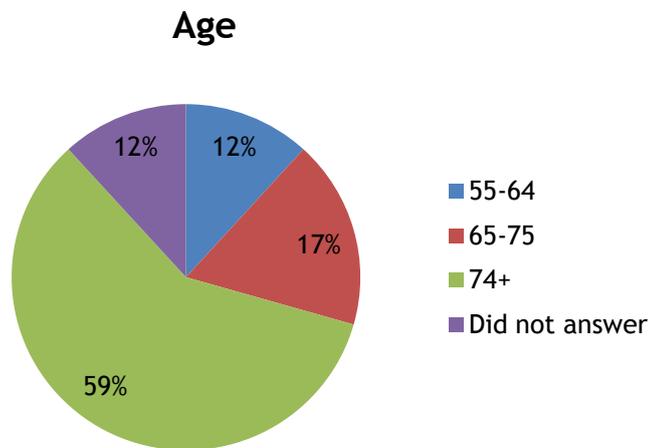
Participants

Healthwatch met with the managers of the 4 Schemes all of whom helped in the identification of tenants who would like to participate in this project.

Age UK Coventry (one of the delivery partners for Healthwatch Coventry) contributed to recruiting participants through its Money Management Support Programme.

Initially there were 17 participants in total, this equates to a 22% of the overall number of people moving from the 4 schemes. Participants were all aged 55 and over. The largest proportion of people were aged 74 or over, two people did not

provide us with their age. 3 participants were female and the remainder were male.



There were 3 people who described their ethnicity as Indian, the remainder being White British with one person not answering the question.

Support needs

Three participants disclosed that English was not their first language. Three participants were blind and two participants were full time wheelchair users.

Nine of the participants did not have a family member who provided care/support, five had support from family and two people did not answer.

Three people had a paid carer, two did not comment and twelve people had an informal/unpaid carer.

Ten people did not have anyone to advocate on their behalf, five people had someone to advocate for them, 3 of which was family and two people did not respond. Two participants were in receipt of Care Act Advocacy and a further 3 were receiving money management advocacy support from Age UK Coventry.

4. Timeline for scheme closures

The initial public information about the closures was broken through the Coventry Evening Telegraph on 15 July 2015. The City Council Cabinet meeting on 11 August 2015 formally outlined the proposal. A consultation period was set to commence on 25 August 2015 concluding on 17 November 2015. Tenants of the 4 Housing with Care schemes received a letter in August 2015 informing them of this. A series of consultation meetings were held during the consultation period.

The programme of closures was formally passed by Cabinet on 5 January 2016 with the first tranche of closures (Frank Walsh House and Skipton Lodge) planned for September 2016. Farmcote Lodge was the last scheme planned to close, scheduled for March 2017.

A significant event in the life cycle of this programme would be the opening of Earlsdon Village, a brand new housing facility for the over 55s. Opening was initially planned for in autumn 2016, but it opened ahead of schedule by July 2016.

Frank Walsh House was the initial scheme to start the process of reassessing tenants' needs/care planning with the planned closure to be concluded by September 2016. Assessments/Care Plans were completed by the beginning of February 2016. This was closely followed by Skipton Lodge where assessments were concluded by March 2016.

Assessments of tenants needs at Halford Lodge were completed by June 2016 at which point tenants had already started to move out. Farmcote's tenants were all reassessed by the end of July 2016.

The programme of moving residents concluded when all long term residents had moved from Farmcote Lodge by 8 February 2017, although at the time of writing this report the facility remained open for short term tenants.

5. Findings

6.1 Initial communication with residents

All tenants that we spoke to were aware that they had to identify alternative accommodation. All tenants found out in the same way about the impending closures. This was a hand delivered letter dated 24 August 2015, followed by a tenants meeting in September 2015 at each of the four Housing with Care schemes.

Whilst everyone was invited to the tenants meeting and family/carers were invited to provide additional support, it is unclear what, if any additional support was offered to tenants who did not have any family/support network to participate fully.

A further meeting at each of the respective schemes was arranged between October and November 2015 acknowledging that some people may not have felt able to have their say in a larger group setting. Tenants received a hand delivered letter dated 6 January 2016 informing them of Cabinet's approval of the decision to close the 4 Housing with Care Schemes.

6.2 Pace

Momentum in the closure process increased from the start and the pace was often faster than originally anticipated, as it became apparent to some residents that the longer they left identifying new accommodation the less choice would be available to them regardless of the new Earlsdon Village development being available from July 2016.

Some tenants reported that they were told if they moved before a set date they would not be eligible for the 'moving grant'¹.

Some people were clear in their minds from the start that Earlsdon Village would not be their first choice. This was based on either location, scale of the property or thoughts that costs would be too much. Only 1 of the 17 people whose journey Healthwatch followed moved to Earlsdon Village although it is understood that some of the tenants whose journeys weren't followed also moved there.

The majority of tenants we interviewed did not want to move at all. Some of the residents had a sense of resignation to the move; some were rather hesitant having certain anxieties about going to unfamiliar accommodation and some were overtly distressed about having to move. Some comments received were:

- *“Moving against my will, caused sadness. Already spent 5 years living out of bags. Three months after finally settling in I was handed the letter”*

¹ A predetermined sum of money provided by Coventry City Council to purchase window and floor coverings should they be required and a fridge if their existing one didn't fit or there wasn't a suitable one already in situ.

- *“Been here 20 years, thought I'd end my days here. Wish I'd died here before I have to move. Pray every night not to wake up”.*
- *“Like to be positive, it has more spacious corridors”*
- *“Spent a fortune here on curtains and decoration...I've had wardrobes fitted, can't take them with me, I can't afford to do that again”*
- *“It'll be alright once I've settled in”*

Concerns

Concerns expressed by residents in relation to having to move were around:

- new relationships
- rules of new accommodation
- changes in costs
- location of new accommodation
- cultural needs

These comments were made prior to knowing where people would move to.

- *“Don't know where I will be going”*
- *“Wanted to stay in the local area”*
- *“Don't want to have to live by many rules, want freedom”*

One person who is blind commented: *“worried in particular about new surroundings, in particular road traffic”*

Family carers of 3 tenants who had specific dietary needs to meet their cultural requirements were concerned about the potential location of their new accommodation as currently they took food on a daily basis to the tenants, one carer of whom who did not drive. Based on this, one family were supporting the tenant to leave their tenancy and to live at the family home. The tenant didn't think it was an ideal solution as they had lived on their own for many years but in the family's opinion it was the most practical solution.

6.3 Methods of communication

Most people perceived their main channel of communication in relation to the impending move to be with the Social Worker although some people had only met the Social Worker twice.

Some considered the most reliable source of information to come from the Scheme Managers or senior staff at the Housing with Care Scheme.

Two people said they did not know who the main person was who they would communicate with about the move.

Two participants said that they were told by care staff that they had been instructed not to talk to the tenants about the move. One tenant felt this would have been helpful as they didn't have any family/friends to discuss this with.

All participants received information about the move face to face (some tenants had telephones, none had access to electronic email) which everyone liked but some commented that it would be helpful to have some information in writing as a reminder of some of the details. Some people felt their memory was *'sometimes not as good'*.

Whilst some tenants were happy with the information provided some tenants, when asked were unclear of proposed timelines and processes and had not been given any information in writing (other than the formal letters relating to the consultations and closure) to act as a support for their recall skills or to be able to share with family/friends/carers. Some tenants expressed:

- *"To have the things that matter like offers and assessments, costs in writing"*
- *"More regular contact from social worker, something in writing"*
- *"At the presentations was told that there was about 20 places that may take you but no indication of their differences, would like more information, quicker....in writing"*

On at least 3 occasions when asked about the impending move people said *"think I was told that but I can't remember now"*.

One person who was blind said that receiving important information in Braille would have been very helpful as they were solely dependent on staff to read mail to them and sometimes the staff were too busy.

Representatives from Earlsdon Village (a new Housing with Care development in Earlsdon) visited the 4 schemes to promote their offer to tenants; some tenants felt that it would have been helpful to have received an offer in writing outlining the costs as tenants felt that Earlsdon village would be out of their affordability even though they didn't know how much it actually would cost.

6.4 Finding the right accommodation

Some tenants felt that more support to identify new suitable accommodation would have been helpful and even more so for tenants who did not have family/carers/friends to help make significant choices/decisions.

It was reported by at least 3 participants that when the outcome of the assessment was made, a list, (sometimes only verbal) of housing options that had vacancies

was given to the tenant. This list did not explain the accommodation in terms of size of accommodation, dimensions of rooms in the apartment, which level the accommodation was on, views, facilities etc. This was the only information that was provided to support tenants to start to find new accommodation.

Most people in everyday life who are looking to move have access to information in either hard copy or electronic format to assist them in short listing before deciding on properties they wish to view. One person who viewed one apartment said:

“It was a waste going; the bedroom didn’t even have a window, no good for me”.

Some tenants were supported by their existing Scheme staff to visit alternative accommodation, some were not. One person commented:

“Only told me Copthorne, Henry, Cottage Farm [names of the housing schemes] have spaces. Haven’t been offered any transport to get about to see places. Can cost £30 a trip. Don’t know how I will move, I can’t do it”.

Choice and control

Most tenants felt they had enough choice and control generally, in terms of pace the move was going at and feeling able to say ‘no’ if they needed to, but some felt they didn’t have enough access to information to base their choices on.

Five people felt there was a long gap between finding out that they were going to have to move and having communication/assessment with a Social Worker. This may have been more so for tenants from Farmcote and Halford Lodge as tenants at these schemes were due to have assessments carried out further into the programme of closure.

Most tenants thought that professionals involved family/carers in an appropriate way that worked for the tenant. One person who did not have any family felt they would have liked more support to make decisions/choices.

6.5 Planning for the move

Most tenants described the notice period before ‘the move’ as a couple of weeks and were happy with this timeframe. One tenant said that although they knew where they were moving to a couple of weeks before; they were only given a few days notice to the actual move date which was changed twice thereafter thus meaning the tenant ended up with 48 hours notice. This impacted on their anxiety levels. The tenant believes the delay was due to the carpet being fitted.

Where required, tenants were provided with a grant for essentials for when they moved. This included a fridge (for circumstances where there wasn’t one in situ or their existing one wouldn’t fit) and floor and window coverings. This information and associated grants was provided on an A4 sheet to tenants.

The Council had outlined preferred suppliers tenants could purchase from; this was communicated verbally by social workers and Housing with Care staff. In one case a tenant (with a good family support network) who had been proactive in planning for their move had visited a carpet shop and identified suitable carpets for £400 but was told by staff at their Scheme that they could not use that retailer and redirected them to the preferred retailer. The carpets cost £600 for a carpet of similar quality with a like for like service. The tenant was told they were unlikely to get this funded even though they had already paid for it and had followed all instructions given by staff. Eventually the tenant was paid but felt it was a stressful situation that could have been avoided.

Healthwatch investigated this instance and found that the preferred supplier had increased its prices seemingly when it thought it was guaranteed the work. When this was noticed by Council staff they changed preferred suppliers but it seems not all involved parties received this information as quickly as would have been liked.

In another case, where the tenant was moving to another council run scheme, the tenant left all purchasing to the scheme where they were moving to. The tenant provided an outline brief of *'Wooden floor like I've got now and the rest to match'* and was very pleased with the outcome. This enabled the tenant to move into the apartment without having to make any choices on decor or styling which they were happy to do.

6.6 The 'actual' move

Overall most people felt 'The Move' went well. It has been widely commented that the removal company used by Coventry City Council was very helpful. They were described as friendly people who did everything they could to make the experience as good as possible.

One person commented:

"They did everything, they even managed to mend a set of drawers for me...I didn't expect that!"

Most tenants reported that staff at the existing tenancy helped to pack in readiness for the move and were also in place to/help to unpack at the new tenancy. One tenant packed for them self but would have liked some guidance/advice on how to pack effectively. They said that they did not meet the removal people until the 'moving day' and felt it would have been helpful to meet before so that they could ask questions about how best to pack.

Most people were happy with the way in which the move was done. One person thought that the new accommodation had not been cleaned to their standard (this was carried out by the previous Housing with Care staff).

Some tenants moved into other council managed schemes feeling that this was more familiar for them whilst others opted to move to private schemes to avoid potentially being in another 'forced closure' situation.

6.8 Assessment Process

Some tenants, when asked, were not aware or could not remember if they had had an assessment carried out. Three tenants did not, or could not recall being invited to have a family/carer/supporter with them when the assessment was carried out. Five tenants did not/could not recall being given a copy of their new needs assessment.

One tenant and their family carer could not recall having a new assessment for many years. This concerned the tenant's family as this person's support needs had changed considerably since their initial assessment. With consent Healthwatch made contact with the social work team to ensure that the situation was clarified and communication was effective.

6.9 Outcomes/meeting needs

All of the tenants are generally happy now that they have moved however many of them have expressed that they would rather be in their previous tenancies should they have had the choice.

6.9.1 Care/Support plans

Four people were unfamiliar with the term 'Care Plan/Support Plan', but all were generally happy with the care/support they received at their previous and new tenancy. Two tenants didn't know what was in their Care Plan/Support Plan but knew the location of it in their apartment and knew that carers wrote in it but didn't know what they wrote. This was of no concern to either of them as they were happy with their support from staff. The tenants that understood this term were tenants/or carers of the tenant who had higher support needs e.g. needed support for transferring/personal care and it is likely that they have had more experience of being involved in the development/amending of their care/support plan.

6.9.2 Changing needs

Because of the nature of the client group individual needs did not necessarily remain the same during the period of the closures/moves:

Six of the 17 participants were either frail, had a significant physical disability or were blind. Two people had falls shortly after starting their new tenancy and both required hospitalisation for extended periods of time followed by short term rehabilitation. Both tenants were able to resume their tenancy.

A tenant raised concerns which indicated that their needs had not been reassessed even though they said their circumstances had changed considerably before moving to a new tenancy; leading them to consider the accommodation they moved to not being suitable. This led us to question the reassessment process.

For one tenant their move should have meant a shift from bed washes to using their new wet room, however they continued to receive bed washes after their move for at least 4 weeks. The tenant only knew that *'there was a delay'* but didn't know why. It is understood that Coventry's equipment service doesn't generally have delays and usually is able to provide equipment with 24 hours notice. It can only be surmised that as the tenant previously had had to have bed washes that this had been translated through the Care Planning process to be continued in their new accommodation. Therefore there may be a potential gap in the care/support planning process which needs addressing to avoid this from happening.

6.9.2 Issues with care

One person who moved into a privately run scheme had a Care Plan/Support Plan in place, but the care they were receiving was not adequately supporting them to maintain their independence because of a seeming lack of awareness of how to meet their support needs. The issue were raised with management, who responded by placing signs in the tenant's flat advising carers what not to do.

6.9.3 Support after moving

A tenant was not able to find a way to get their TV set up after their move. They had asked staff at the Scheme about getting the TV set up in their bedroom but was told *'they didn't know anyone who could do it'*. Healthwatch put them in touch with a service at Age UK Coventry.

A person who had a fall and was placed in a care home for intermediate care, for rehabilitation as a result. They reported a poor experience of care in this home. Healthwatch also observed that the physical environment in their room was not suitable for them in terms of:

- Size of room to accommodate a hospital bed
- A continually flickering ceiling light
- No alternative suitable seating other than the bed which resulted in the person having to remain 'hoisted' for at least 15 minutes whilst adjustments were made to the bed
- No suitable through flow of air, as the small bedroom had a 'fire door'
- The room and the person's lack of mobility kept the person in 'isolation' as the fire door could not be kept open so that the person could see people passing by

The resident had raised issues about this.

6.10 Relationships with staff and social worker during the process

Most tenants felt that they had consistent relationships throughout the experience, this mainly related to the relationship between the tenant and the staff from their original tenancy. Some commented that staff from their original tenancy had helped them move in to their new home and some said staff had called in after they had moved to 'say hello'.

Most tenants reported having the same Social Worker from the beginning until after the move, although some of them reported only seeing them a couple of times. Most tenants relied on senior staff at the Housing with Care Schemes to give them information about the move.

A tenant's family carer wanted some information about the process/timeframe ahead of them and what would happen to the family member when they were placed in short term rehabilitation after a fall. The carer telephoned the lead Social Worker (who had led the reassessment process) as this was the only phone number they had with an associated name who worked for the Council who would know who the tenant was (all other numbers on the website were generic contact numbers of services). They were told that this was nothing to do with them now and they couldn't help but didn't redirect the caller to an appropriate person who could provide the caller with the required information. This caused frustration for the caller and distress to the tenant.

5. Conclusions

This piece of work gathered the individual experiences of 17 of the 78 people moving home (22%). Our methodology enabled us to gather detailed feedback and experiences and to build a relationship of trust with participants.

People react differently and have different emotional responses when something such as 'having to move when it is not your choice' is imposed on people.

Our findings provide some useful insight into how individuals reacted to the closures and some of the basis on which people sought to proceed and make decisions about their future home and this can inform future services change programmes

We found that most tenants felt they had choice and control in the process and that the involvement of their families and carers was appropriate. Most were also happy with the way their actual move was carried out.

Whilst initially there was resistance and anticipation (expectedly so) majority of the participants found the experience less difficult than they had thought it would be. Council staff were flexible in the way that they worked with and supported people to make the transition. It was carried out in line with the proposed timelines and in some instances ahead of schedule due to the keenness of

residents to get on with moving. The council were able to respond effectively to this increased pace.

The overall timeline for the closure of all four homes from the point at which the proposal was first put forward to the last people moving from Farmcote Lodge was between July 2015 and February 2017: 1 year and 8 months. This is a significant period of time for some residents to be going through a process of change.

It is recognised that political processes are partly responsible for the timeline prior to the proposal being passed - a 6 month period from when the news broke through local media to the passing of the proposal. However, it is also recognised that a period of 9 months (January - September) to carry out assessments and to support people to move is a long period of time for people to feel in 'limbo'. It would have been better for individuals if the programme of closures could have been carried out more quickly. This would require the council to consider how to direct resources so that the assessment process could happen more quickly.

Front line staff in the 4 housing with care schemes continued to work with tenants in an empathetic way whilst managing their own anxieties and uncertainties. Scheme Managers played a pivotal role in this project and were generally held in high regard by people impacted by the closure.

There was a mixed picture regarding communication, in some instances it seems that communication aimed at reaching tenants was disjointed because of the number of layers of people it passed through and effective communication has failed in at least one place. It does appear that on isolated occasions where tenants have asked for some basic help/signposting/support this has been overlooked.

The people we spoke to would have liked more information in writing to be able to assist their recall skills or to be able to share this information with chosen third parties.

There was scope for more support to enable people to be informed about the options for a new home they were choosing. Individuals should have access to online information and printed information and consistent information about how they would be supported to visit a potential new home if this is what they wished.

Our findings demonstrated that only two people were in receipt of advocacy that is an entitlement through the 'Care Act'². The reasons for this very low number is not understood, there wasn't any evidence gathered to explain this, however the majority of our sample were able to express their views.

It is evident from the findings that tenants with comparatively low support needs have generally found the whole moving and settling in period relatively easy and

² <http://www.scie.org.uk/care-act-2014/advocacy-services/commissioning-independent-advocacy/duties/independent-advocacy-care-act.asp>

found that it was supported well by staff. We found that people from our sample group with higher support needs experienced more issues, which suggests that more attention to detail and finer planning may have been helpful. We identified some learning related to outcomes for individuals and some other issues which occurred as a result of the changing needs of people we interviewed.

Two people had falls shortly into their new tenancy and therefore the Council should be clear about whether this could have been avoided through the assessment/care planning process or if anything else might have prevented this. People moving to unfamiliar layouts could be a trigger for falls.

It is unclear from the findings whether a tenant arrived at their new tenancy with the 'This is me' element of their Support Plan from their previous tenancy or whether this was recreated at the new tenancy.

The use of grants for flooring, window coverings and household appliances should have been applied more effectively by the council, communication did not always work well, and some residents ended up paying too much for goods because of council 'rules' which had been communicated to them.

It is not clear to us if there has been a formal follow up process from adult social care with individual tenants to see how tenants have settled in and to be able to manage/signpost any arising issues. It is also not understood at which point a tenant was 'signed off' a Social Worker's caseload.

6. Recommendations

- 6.1 Method of providing information:** Information should be available both face to face and in writing to people who are undergoing service change (in this instance this would have been information about timelines, moving dates, meeting dates etc).
- 6.2 Shorten timeframes:** It is recommended that the timeframe for carrying out all assessments/reassessments of all affected tenants/service users in any similar service change is as short as possible. This may require a reallocation of resources for a short period of time.
- 6.3 Assessment/Care/Support Plans:** it is recommended that a review of the Assessment/Care Planning process is carried out. The review should include:
- How family/carers are involved
 - All activities including activities that are aspired to, e.g. having a shower in an accessible shower rather than a bed wash in their current unsuitable bathroom should be considered in Care Planning
 - When a person's circumstances change after having their new assessment but prior to moving to a new Care Plan. This should be considered along with a review of the most suitable housing options for the individual to accommodate any impact from their change of circumstances
 - How all tenants are supported to understand what a Care/Support Plan is and to feel empowered that they have some control within this live document
 - A follow up review after a short settling in period should be carried out with all tenants who move accommodation to ensure their Care Plan/support plan has been implemented effectively
- 6.4 Review how internal communication is disseminated and confirmed it has been understood:** systematic ways of disseminating information through the layers of personnel should be used. All personnel should be able to demonstrate that they have received and understood the requirements of the information and any associated actions that are required of them as an individual and/or group.
- 6.5 Access to information about available suitable accommodation:** Tenants should be supported to access the Internet to help them to identify suitable accommodation. The information should have details about room dimensions, windows, private bathroom facilities and shared and communal facilities and services

- 6.6 Setting achievable moving dates for all tenants:** in order to minimise anxiety levels for tenants who are waiting for impending moving dates it is recommended that no date is issued prior to the new accommodation being signed off as ‘ready to move into’.
- 6.7 Providing tenants with signposting information:** In line with ‘Promoting Independence’ it is recommended that all Housing with Care schemes provide tenants with information about reliable and trustworthy trades/handy people who can complete the required jobs/work to a good standard whilst charging a reasonable/the going rate. E.g. Age UK Coventry’s ‘Trusted traders’³ service.
- 6.8 Written information:** At the beginning of a process such as the closure of a housing with care scheme or other service change, service users should be provided with simple written information about the whole process ahead to ensure that they have a good understanding of the journey including timelines.

³ “Age UK Coventry offer you an easy, safe and reliable way to avoid rogue traders. In just one phone call, people can find trusted traders for all the maintenance and repair jobs in their home and garden”.

7. Acknowledgements

Healthwatch would like to extend its thanks to Coventry City Council's Housing with Care Managers who helped to plan this piece of work by identifying tenants who would willingly share their views. Thanks also to Senior Council Staff who dealt with or directed issues which were flagged up during the life of this project.

Thanks to Age UK for helping to identify tenants and for supporting the tenants to contribute to this piece of work.

Most importantly thanks to the tenants who took part in this work by sharing their views and opinions in a frank and open way during what has been a very disruptive, challenging and for some quite a distressing time. Without their candid and frank views this work could not have been undertaken and no learning could be taken forward to help to ensure that any future similar pieces of work that need to be implemented can be done so in the most effective way possible by providing the best and most appropriate support to all service users that are impacted.

8. Response from Coventry City Council

Healthwatch Coventry met with Jon Reading and Ian Bowering on 3 May 2017 to discuss the findings in this report and actions.

The Council then sent through the response below to our recommendations:

15 May 2017

Dear John

*Council response to Healthwatch Coventry report: "Tenants experiences of changing accommodation due to closures of Housing with Care schemes"
Please accept my thanks to Healthwatch for undertaking the project to understand the experiences of people transferring to new accommodation following closure of their existing supported housing schemes.*

This piece of work is of great value to the Council to ensure that we learn lessons from people who experience such transitions, so that any future similar changes are managed effectively and smoothly, with support being tailored to the needs of individuals who experience significant disruption to their lives.

I have taken note of the conclusions and recommendations within the report, and staff involved in such change programmes will pay due regard to these in the planning and implementation of any future processes.

In relation to the report recommendations, I have the following observations:

General

I understand that the sample size for the project was relatively small, 17 people, compared to the overall population which moved from existing schemes to new accommodation. Of the 17 people, three were female. Whilst there is no suggestion that this brings into question the validity of conclusions of the project, there may be some learning for both organisations about selecting a more representative sample for future projects to assure ourselves of the robustness of any insights.

Provision of information to tenants and their representatives

Whilst I am confident that information was made available to tenants and families in writing and through face to face communication and that advocacy support was available, I do accept that some people may not have necessarily understood the information or forgot what they had been told. I will ensure that in future communications exercises of this type testing of service users/family members comprehension is routinely checked wherever feasible.

Timeframes and resourcing

Your comment about timescales is welcomed. I concur that we must do whatever we can to ensure that assessments of the needs of tenants in any future change process take place as promptly as possible, and in part this depends on the numbers of staff assigned to do this work. Staffing resources were deployed to this piece of work from other areas of mainstream operations and in future we must satisfy ourselves that the balance between ensuring adequate resources are available to prepare people for moving versus maintaining our day to day business is carefully considered.

Assessment and support planning

I note your comments about our assessment and support planning processes during the course of the project. All the recommendations made reflect best practice and, of course, I would wish to assure myself that the standards which apply in respect of the tenants affected are as high as I expect for all people we support. Much work is underway within the Directorate to improve and maintain practice, including our recently developed Practice Quality Assurance Framework and our Workforce Development Strategy, and I am confident these will play a part in positively influencing practice.

Specifically regarding the recommendation that tenants who move are followed up after they move to ensure they are settled and support plans successfully delivered, I am assured that all tenants were contacted by Adult Social Care staff soon after they moved. It is possible that in future we may implement some standards which clarify our expectations of the timescale and nature of such follow up work.

Internal communications

Initiatives of this type by necessity require complex communications across a matrix of internal stakeholders. This can sometimes lead to miscommunication. I will ensure that our processes are reviewed as necessary to ensure continuous improvement in this aspect of our operations.

Access to information about alternatives and signposting

Although tenants were provided with written information about alternative provision (as referenced in section 6.4 of your report) I agree that this did not outline details of room sizes etc. I accept your helpful suggestion about exploring opportunities for assisting service users to access information published online where appropriate. I would stress, however, that no written information would substitute for tenants'/family members visiting alternative provision and having conversations with providers. The suggestion of signposting to support agencies such as Age UK Trusted Trader Scheme is helpful and will be considered going forward.

On the whole, I am confident that most of the moves we supported appear to have taken place relatively smoothly, bearing in mind the large scale nature of this exercise. The Council received little by way of expressions of dissatisfaction or complaint, and this was in no small part due to the sensitivity, commitment and diligence of the staff directly involved who worked hard to ensure moves occurred with minimal disruption and distress. I believe this is acknowledged within the report.

Once again, please accept my appreciation for this valuable report which provides some rich insights for us to consider.

Yours sincerely,

*Pete Fahy
Director of Adult Services
Coventry City Council*

Appendix: Questionnaires

Questionnaire 1 - 'Before starting the Transition'

This survey is the first of a series of 3 questionnaires that aim to get an understanding of what it's like for an older person to have to change their home setting, often when it is not their choice. The findings will enable Healthwatch Coventry to; where appropriate make recommendations to Coventry City Council on how to improve this experience for an older person in the future.

Date the questionnaire was completed

Worker's name carrying out the meeting

1. Personal details

a. Name

b. Address

c. Telephone number

d. Current living setting (please tick)

Independent home setting

Hospital

Interim housing, please state

Housing with Care, please state

notes

<input type="checkbox"/>	

2. Reason for transition/move to new housing

a. Planned move to where? - if not identified yet please state this

b. Is this move something that you are welcoming?

Yes

No

If no please say why

c. What, if any, are your concerns/fears?

3. Communication

a. Who has been providing information about your planned/proposed move with you?
(Please tick all that apply)

Age Uk Coventry worker

Coventry City Council Social Worker

Coventry City Council Officer

Other, please say who:

b. Comments about who has been providing information

c. How is information shared with you? (please tick all that apply)

Face to face

Letter

Phone

Email

Text

Other

d. Is this the way that you want to be communicated with?

Yes

No

If no please say how you would prefer information to be communicated

e. Thinking about the move into your new accommodation - do you feel you get the right amount of information at the right time from the right people?

Yes No

Please say what could be improved and what works well

4. Carer/Advocate involvement

a. Do you have a family member/friend who provides care and support for you?

Yes No

b. Do you have a paid carer?

Yes No

c. Do you have someone who is an advocate for you?

Yes No

If **yes** who is this person, what organisation are they from (if applicable)

what is their relationship to you?

d. Who, if anyone, provides you with help and support when you have to make big decisions?

5. Additional Information

Is there anything else that you would like to add?

About you

**Are you?
White**

British	
Irish	
Traveller/Romany	
Eastern European	
Other White (please say)	

Mixed

White and Black Caribbean	
White and Black African	
White and Asian	
Other Mixed (please say)	

Asian or Asian British

Indian	
Pakistani	
Bangladeshi	
Other Asian (please say)	

Black or Black British

Caribbean	
African	
Other Black (please say)	

Chinese or other ethnic group

Chinese	
Other ethnic group (Please say)	

Your Gender

Male Female Transgender

Please indicate your age

45 - 54 65-74
 55-64 74+

Confidentiality: what we will do with the information we have gathered

The information we are gathering from this survey will be used by Healthwatch to identify issues and good practice regarding support for people moving to different living arrangements. The information you provide will be used anonymously. Personal contact details will be treated as confidential and will not be passed on to third parties without your consent. Data will be stored in accordance with the Healthwatch confidentiality and data protection policy.

I consent for information to be shared with third parties in the interest of making my move to my new home as smooth as possible.

Signature..... Date

Thank you for your time

Questionnaire 2 - At the point where new accommodation has been identified

This survey is the second of 3 that aim to get an understanding of what it's like for an older person to have to change their home setting, often when it is not their choice. The findings will enable Healthwatch Coventry to; where appropriate make recommendations to Coventry City Council on how to improve this experience for an older person in the future.

Date the questionnaire was completed

Worker's name carrying out the meeting

6. Personal Details

e. Your name

f. Current living setting (please tick)

notes

Independent home setting

Hospital

Interim housing, please state

Housing with Care, please state

c. Has this changed since the last survey?

Yes

No

7. Choice and Control

a. Thinking about this planned move, do you feel you have been involved in decisions that have been made in a way that suits you?

Yes

No

If **No**, please state what you would have liked to have happened

b. Has the lead person allocated to you to help with this move to your new accommodation changed since you first new about having to move?

Yes

No

If **yes**, how many times they changed and tell us how you were informed of this

c. Has the lead person allocated in this planned move for you involved people/family/carers of your choice in a way that you want/like?

Yes

No

If **No**, what you would have liked to have happened

d. Has the lead person allocated in this planned move for you given your family or someone close to you all the information they felt they needed to help you as much as they can in this move?

Yes

No

If **No**, what you would have liked to have happened

e. Have you felt you have had enough choice and control during this experience?

Yes

No

If no please explain what you think could have been better

f. Overall, what would have made your experience better? What has gone well?

8. Care co-ordination

a. Have you always known who the main person in charge of your planned move is?

Yes

No

If No, what you would have liked to have happened

b. Have you always had one first point of contact who has understood both you and your current situation that you could go to with questions at any time?

Yes

No

If No please state what this has been like

c. Has that person helped you to get other services and help, and to put everything together ready for you to move to your new place?

Yes

No

If No what would have made this experience better for you

9. Access to Information

a. Have you been able to see your care records/plans at any time to check what was going on? Have you been able to decide who to share them with?

Yes

No

b. Do you think you have received information at the right times. Was the information helpful for you and shared with you in a way you understood.

Yes

No

If no, please explain what would have made this experience better

10. Shared Decision Making/Care Planning

a. Have you been involved in decisions about your move as much as you wanted to be?

Yes

No

If No, please explain what you would have liked to have happened

b. Has your family or carer also been involved in these decisions as much as you wanted them to be?

Yes

No

If no, please explain your experience

c. Have you worked with your main professionals to agree a care plan

d. Do you know what is in your care plan? Do you know what to do if things change or go wrong?

e. When you moved to your new service/home, was your care plan known in advance and respected?

f. When something was planned and agreed to, did it happen without you having to chase it up?

g. Have you had regular reviews of your care, and care plan? Were you as involved in these as you wanted to be? Were your family/ carer/ advocate involved as much as you wanted them to be?

Yes	No	Don't know

Comments on the answers above

11. Transition

[To be completed with people and their carers (if this is the choice of the individual) who have now changed their living circumstances]

a. When you were discharged from hospital (if applicable), was a plan in place for what happened next. Was this delivered without unnecessary delays?

Yes

No

If No please explain what you think went wrong

If the person moved from one care setting to another:

b. Did you know in advance where you were going, what you would be provided with, and who would be your main point of professional contact?

Yes

No

If **no** please explain what actually happened

c. Was information about you, including your views and preferences and any agreed care plan, passed on in advance?

Yes

No

If **no** please explain what happened

d. Were you still allowed to see and work with, as appropriate, preferred professionals who you already knew and who knew you?

Yes

No

If **no**, please explain what happened

e. When you arrived at your new accommodation, did the staff know who you were, what your circumstances were, and about your own views and preferences?

Yes

No

If **no** please explain what happened

Thank you for your time

Questionnaire 3 - 'After a settling in period in new accommodation'

This is the last of 3 surveys aiming to get an understanding of what it's like for an older person to have to change their home setting, often when it is not their choice. The findings will enable Healthwatch Coventry to; where appropriate make recommendations to residential settings and Coventry City Council on how to improve this experience for an older person in the future.

If you recall we completed the last 2 surveys when you knew that you would possibly have to move and then when new accommodation had been identified. Now that you have moved and have settled in we'd like to complete the last one.

Date Questionnaire was completed	
Worker's name carrying out the meeting	

12. Personal Details

g. Your name

b. Your new home name and address

Independent home setting

Hospital

Interim housing, please state

Housing with Care, please state

Notes

13. The Move

a. Approximately how much notice were you given about moving here?

b. Did you know in advance where you were going, what you would be provided with, and who would be your main point of professional contact?

Yes

No

If no please explain what actually happened

c. Were you still allowed to see and work with, as appropriate, preferred professionals who you already knew and who knew you?

Yes

No

If no please explain what happened

d. Were you offered the grant to help with moving costs?

Yes

No

If yes were there any problems/restrictions with using this grant

e. Were you offered practical help with packing to move, unpacking and doing practical things like hanging curtain rails/blinds/pictures/mirrors etc?

Yes

No

Please explain any problems

f. Overall, what would have made your experience better? What has gone well?

14. Choice and Control

g. When you arrived here, did the staff know who you were, what your circumstances were, and about your own views and preferences?

Yes No

h. Now that you've lived here for a few weeks - looking back to when you found out you were moving here do you feel you have been involved in decisions that have been made in a way that suits you?

Yes No

If **No**, please say what you would have liked to have happened

i. Has the lead person allocated to you to help with this move to your new accommodation changed since you were told you were moving here?

Yes No

If **yes**, how many times did they change, please tell us how you were informed of this

j. Since knowing that you were moving to this **new** home has the lead person involved people/family/carers of your choice in a way that you want/like?

Yes No

If **No**, what you would have liked to have happened

k. Since knowing that you were moving to this new home has the lead person given your family or someone close to you all the information they felt they needed to help you as much as they can in this move?

Yes No

If **no**, what you would have liked to have happened

l. Have you felt you have had enough choice and control during this experience?

Yes No

If **no** please explain what you think could have been better

m. Overall, what would have made your experience better? What has gone well?

4. Care co-ordination

d. Since knowing where you would be moving to have you always known who the main person in charge of your planned move is?

Yes No

If No, what would you have liked to have happened

e. Have you always had one first point of contact who has understood both you and your current situation, that you could go to with questions at any time?

Yes No

If No please state what this has been like

f. Has that person helped you to get other services and help, and to put everything together?

Yes No

If no, what would have made this experience better for you?

5. Access to Information

c. Since knowing that you were moving to this new home have you been able to see your care records/plans at any time to check what was going on? Have you been able to decide who to share them with?

Yes No

d. Do you think you have received information at the right times. Was the information helpful and shared with you in a way you understood?

Yes No

If **no**, please explain what would have made this experience better

6. Shared Decision Making/Care Planning

h. Since finding out this was to be the new home you would be moving to have you been involved in decisions about your move as much as you wanted to be?

Yes

No

If No, please explain what you would have liked to have happened

i. Has your family or carer also been involved in these decisions as much as you wanted them to be?

Yes

No

If **no**, please explain your experience

Since knowing this would be your new home:

j. Have you worked with your main professionals to agree a care plan

k. Do you know what is in your care plan? Do you know what to do if things change or go wrong?

l. When you moved to your new home, was your care plan known in advance and respected?

m. When something was planned and agreed to, did it happen without you having to chase it up?

n. Have you had regular reviews of your care, and care plan?

o. Were you as involved in these as you wanted to be? Were your family/ carer/ advocate involved as much as you wanted them to be?

Yes	No	Don't know

Comments on the previous answers

7. Maintaining relationships

a. Have any of your friends from the last place you lived moved to this accommodation?

Yes

No

If **no** please explain why you think this is the case? (Ask if the outcomes of their assessments were different and because of this were offered different choices of accommodation)

b. When your care plan was being updated for this move were you asked whether there were particular friends from your residential setting that you would still like to live with

Yes

No

c. Have you been able to keep in touch with friends that you used to live with who have not moved here?

Yes

No

If **yes** please explain who has helped you to do this and how they have helped

Thank you for your time

healthwatch Coventry

29 Warwick Road
Coventry
CV1 2ES
024 76220381

Email: healthwatch@vacoventry.org.uk
www.healthwatchcoventry.co.uk



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