

PERFORMANCE SCRUTINY PANEL – 20TH NOVEMBER 2018

Report of the Head of Strategic and Private sector Housing Lead Member: Councillor Mercer

ITEM 5 LIGHTBULB SERVICE MODEL

1 Purpose of Report

1.1 The purpose of the report is to provide an update on the delivery of the Lightbulb Service Model in Charnwood.

2 Recommendation

2.1 To note the update of the delivery of the Lightbulb Service Model.

3 Policy Context and Justification

3.1 In April 2015, Borough, District and County Council partners were awarded £1m Transformation Challenge Award funding from the Department for Communities and Local Government to transform practical housing support services in Leicestershire through the Lightbulb Programme.

3.2 A Programme Team was appointed to take this work forward with partners to develop a new, integrated model for housing support that would:

- Deliver savings to the health and care economy by maximising the part housing support can play in keeping people independent in their homes; preventing or reducing care home placements or demand on other social care services, avoiding unnecessary hospital admissions/readmissions or GP visits and facilitating hospital discharge.
- Improve the customer journey; making services easier to access and navigate and ensuring the right solution is available at the right time with the right outcome.
- Provide efficient, cost effective service delivery, particularly in relation to the delivery of Disabled Facilities Grants.

4 Background

4.1 The concept of Lightbulb was one of a number of practical opportunities to emerge from this work; now part of the Unified Prevention Offer for Leicestershire.

4.2 The programme to date has been supported by a Programme Board comprising senior level representation from the seven Borough and District Councils, the County Council's Adult Social Care and Public Health services and the Director of Health and Social Care Integration.

4.3 The Lightbulb is a Hub and Spoke service delivery model. The 'spokes' comprise of a Lightbulb team in each Council area (ie seven local teams), supported by a Central Hub operated by Blaby on behalf of all the Councils.

4.4 The role of the Central Hub is to provide in a single place key functions to support the local Lightbulb teams and ensure continued development of the service on behalf of all partners. Specifically:

- Resilience - to be able to respond to sickness absence or temporary demand pressures, etc in a particular area
- Quality assurance and coordination – ensuring all local teams are operating a consistent service for customers. This will include centralised line management of local Lightbulb teams
- Performance management – capturing the benefits of Lightbulb as a service model, informing service improvement and building the case to explore other funding sources
- Service development – exploring opportunities and innovation.

4.5 Cabinet were asked to make a decision in May 2017 on whether the Council would participate in the Lightbulb Service Model and had three options of delivery for consideration, as detailed below:

Lightbulb – Full Service

The central hub to carry out the full service for the Council by delegating the locality element (including secondment or TUPE of existing staff where appropriate).

Lightbulb – Locality Team

Directly employ a locality based Lightbulb team and deliver the service directly across the Borough (linking to the Central Hub to ensure consistency of operating procedures and resilience in the overall system).

Existing Service Delivery Model

The Council would continue to deliver the Disabled Facilities Grant process as is currently the case.

Following a meeting with the County Council to discuss how services could be provided if Charnwood did not participate in the model, the advice was that the County Council would continue to provide Charnwood with an Occupational Therapist. The other housing support services identified through the new service model would be delivered by the Central Hub.

On the 11th May 2017 Cabinet approved the Council's participation in the Lightbulb Service Model and that delivery would be through a Locality Team.

5 Delivery of the Lightbulb Service Model

5.1 The Project went live across the County in October 2017, there was a delay in the Council signing the agreement as Charnwood are the only Council providing a Locality based Team. Charnwood went live in January 2018 with a backlog of 172 cases awaiting a Housing Support Coordinator (HSC) assessment.

The table below provides the performance breakdown for Quarter 1 and Quarter 2 2018/2019:

Month	Waiting List Snapshot	New visits	Follow up visits	Completed Duty Cases	OT Cases Referred by HSC	Cases Closed	Cases returned to SHSC
April	213	38	6	0	2	29	0
May	121	53	9	10	3	57	1
June	132	55	10	6	2	53	0
Q1	--	146	25	16	7	139	1
July	169	50	12	16	6	43	2
Aug	204	34	7	9	2	23	3
Sept	191	48	13	17	2	34	0
Q1 and Q2	--	278	57	58	17	239	6

- 5.2 In Quarter 1 a total of 146 new assessment appointments were made and 16 recorded duty cases (162 in total). At the beginning of Quarter 2, there were 151 cases awaiting a HSC assessment. Throughout the Quarter a total of 132 new assessments were completed (Q1 and Q2 – 278) and 42 duty cases (Q1 and Q2 - 58) by CBC HSCs. In Quarter 1 and 2 336 assessments have been completed.
- 5.3 The inherited backlog of cases awaiting assessment, which accrued as a result of the delay in the commencement of Lightbulb within Charnwood, is still impacting on the overall waiting times of those residents waiting for assessment within Borough.
- 5.4 The waiting list is not static with an average of around 17 new referrals a week coming into Charnwood from the Customer Contact Centre at Leicestershire County Council and although 174 cases have been assessed in Quarter 2, the number of cases awaiting assessment remains at 191 at the end of Quarter 2.

6 Case Studies

6.1 Case Study 1

Service User was referred by her Son through to Adult Social Care for a general assessment within her home, he was worried about how she was managing in her home, and the referral was sent through to the Lightbulb Service.

The Service User is an 83 year old lady that lives with her husband, who is 80, in their owner occupied 3 bedroomed house in Loughborough.

The Service User presented as a very jolly and independent lady, the Husband was present on my visit as well as her Son. The Husband is the Service User's main support and carer at home, the Service User advised 'we look after each other'. The Husband continues to drive and they go out most days, for lunch, shopping or just a drive out. The Son offers support to both his Mum and Dad; he reports that his Dad does a grand job.

The Housing MOT is a holistic assessment of how a person is managing to remain independently living in their own home.

The Service User has a diagnosis of Arthritis in both hands, diverticulitis, right foot fused (she cannot bend her foot from the ankle) and she has daily pain in her foot. The Service User has early onset dementia though she reports her memory is fine.

The assessment highlighted some concerns about how the Service User was managing transfers:

- Both the front and back doors getting in and out the Service User was holding onto the door frame, her hands did not have a secure grip on this.

Grab Rails were provided at both doors.

- Getting on and off the toilet the Service User was holding onto the window cill to pull herself up and could easily slip off this with her hands.

Grab rail by the side of toilet was provided, fitted to a solid brick wall.

- The Service User could not safely access her garden and was crawling up the pathway with her hands and grabbing freestanding garden pots.

Half steps and kee klamp railings were provided to enable a safe and independent way of accessing the garden.

- The Service User could not independently get out of her sofa in the lounge, this was too low, and her Husband was pulling her up, putting strain on both of them.

Sofa Raise ordered through the community equipment provider raised the sofa 3" gives the Service User a better height to transfer from a seated to a standing position without the need of assistance.

- The Service User has an over bath shower, she does not use the shower, both her and her Husband like to have a soak in the bath, the Husband was taking the weight of the Service User, assisting her with transferring in and out of the bath. The Service User wanted to bathe independently and the Husband could no longer manage with taking her weight, carer strain.

Recommended a bath lift – this is a piece of equipment whereby the Service User does not have to step into the bath, she transfers onto it by shuffling her bottom onto it, once her bottom is in place on the bath lift seat, she then brings her legs over the bath. The bath lift is operated by battery and takes you down to the bottom of the bath and brings you up to safely transfer off and out. Demonstrated how to use the bath lift to the Service User and her Husband, the Service User was observed to get on the bath lift with ease, she could not wait to try it!

- The major concern with the Service User was transferring up and down the stairs, goes up the stairs, taking a break half way up and then continuing, however on the way down she walked down backwards this is really unsafe, the

Service User reports she had been transferring like this for a while and said it was because of the pain in her foot.

Recommended a stair lift, as the Service User is a home owner, a Means Test was carried out to see if they were eligible for a Disabled Facilities Grant administered by Private Sector Housing at the Council, on this occasion they did not qualify for a grant.

The Service User provided permission to obtain a stair lift quote from the procured contractor from Leicestershire County Council for them to decide if they wanted to go ahead and purchase directly.

During the visit benefits were discussed and it was established that the Service User was not in receipt of any benefits and that potentially she would be eligible for Attendance Allowance.

A referral was made to First Contact Plus for a Benefit Check and asked that a professional goes to the Service User's home to discuss Attendance Allowance and help fill out any necessary forms.

After the closure of this task, the Housing Support Coordinator was given a Thank you card, it read:

'Nicola, you made my Mum and Dad feel so valued, it's much appreciated – Thank you, Son'.

6.2 Case Study 2

The Service User was referred to the Lightbulb service by Adult Social Care who had received a request from the Service User's Son for an assessment of his Mum's needs.

The Service User is a 90 year old lady, who lives alone in a 2 bedroomed bungalow which is owned by her other Son.

The Service User has various medical conditions, Heart Failure, arthritis in neck, spine and hands, balance conditions, hard of hearing. The Service User has had knee replacements in both knees and her general mobility is poor. The Service User's Son reports that her memory is failing.

The Service User presented as frail, she was wrapped up well, heating on and it was a warm day on my visit, and said that she does feel the cold.

The Service User's Son was her main carer, he was assisting his Mum with all the chores, some personal care, visits to the doctors, and the Son was very tired and worn out. The Service User walks with a stick in the home; she does not go out of home without the help of anyone, mainly her Son.

The assessment highlighted interventions that were needed, along with some Adaptation works to the bungalow and some equipment:

- The Service User goes out of the patio door to access her garden, large step down to the slabbed area, she holds onto the side of the patio door or her Son.

Half step to reduce the height of the drop down onto the patio area and kee klamp rails to each side of the half step so that the Service User has something to hold onto.

- The Service User's main entrance door is to the side of the house, smaller step, no rails and was observed to hold into the door frame to steady herself.

Grab rails to be placed each side of the side door.

- At night the Service User is alone and if she requires the toilet in the night, she has to walk across the bungalow to get to the bathroom; she doesn't always get to the toilet in time.

Prescribed a commode in her bedroom for use at night.

- The Service User does not shower alone, her Niece helps her once a week when the shower cubicle is used, it has a step in that is high and grab rails are in place.

Prescribed a shower step to reduce the height of the step in, for the niece to place down and remove each time she assists the Service User with having a shower.

The assessment identified the need to make referrals to First Contact Plus to arrange further interventions:

- Smoke alarm referral.
- Tariff check – the Service User's utility provider had not been changed in a while; generally we advise this should be looked at annually.
- Assistive Technology – the Service User is hard of hearing, a vibrating pad under the pillow on her bed was advised, and this would alert her to smoke alarms going off when she is sleeping.
- Benefit check – the Service User's Son has been trying to get help to see if his Mum is entitled to any support, referral made to assist the Son.
- Carer's assessment information to be sent to the Son about help and support for his Mum.

Further referrals were made to Charnwood's Lifeline Service and to the Single Point of Access (Health Professionals) as it was evident that the Service User had a sore to the bottom of her back that needed urgent attention.

Following the closure of this task, a Package of Care has been offered to the Service User and this has started to help with her personal care. Assistive Technology have visited and provided equipment, smoke alarms have been fitted and all the other referrals and Adaptations are imminent.

6.3 Case Study 3

Service User was referred to Adult Social Care by her Daughter in June 2018.

Daughter was concerned that Mum was struggling since being discharged from hospital following breaking her elbow and shoulder.

Service User is a bright 97 year old lady of sound mind who lives alone in an annex attached to her Daughter's owner occupied house.

Service User was up and dressed and was sitting in her chair awaiting my visit.

The Service User's Daughter was present for the assessment. The Service User has a carer call every morning 7 days a week to assist with getting up, washed and dressed, making tea and toast, making the bed and checking meds and lifeline.

The Service User used to come through to the main house for her evening meal but since coming out of hospital she hasn't felt up to it. Since being discharged from Hospital the Service User has had to resort to strip washing which she wasn't happy about as she was able to use the shower before.

The Housing MOT document is our assessment tool; it is a holistic assessment of how a person is managing to remain independently living in their own home.

The Service User has Hypertension, Osteoarthritis, Gastro Oesophageal reflux disease, Macular Degeneration and Diverticulitis. She reports that since she broke her right elbow and shoulder she has experienced a general weakness in that arm. The Service User wears hearing aid in both ears.

The assessment highlighted the following;

- The Service User walks about the property using 2 walking sticks unless she is transporting items such as a cup of tea from the kitchen. Then she would use a kitchen trolley to get the tea from the kitchen to the sitting room. There was a threshold joining the carpet of the sitting room to the lino flooring of the kitchen that the Service User was having difficulty getting the trolley wheels to go over.

Recommended a replacement (wider and flatter) threshold strip.

Potential trip hazard eliminated and Service User can now go from room to room with ease.

- The Service User reported that she no longer felt safe using her shower as she struggles to step up the high 20cm step into the cubicle to get in. There is one grab rail in situ inside the cubicle but she could no longer make use of it due to it being on her weak side and because of her low blood pressure she would ideally feel safer if she could sit down in the shower. S

The Service User was clear that she wanted to be able to use the shower again to wash herself with assistance.

Ordered the Service User a corner shower seat from NRS so she was able to sit down in the shower and a bath step to decrease the height of the step up to the cubicle.

Recommended 2 offset grab rails on the bathroom walls to assist her when using the bath step to step into the cubicle and another non slip grab rail in the shower cubicle to aid the Service User with getting on and

off the shower stool, being mindful that she is now experiencing left side weakness.

The Service User is now able to use the shower again safely with assistance which she is very happy about. The Service User's Daughter is happy that her Mum's wishes have been met.

- When asked about her hearing, the Service User commented that she has to have the television turned right up and sometimes doesn't hear the door or phone.

A referral was made to First Contact Plus for Assistive Technology who can offer a wide range of equipment, technology and gadgets such as alarms, sensors, adapted telephones, television loops to assist the Service User.

Assistive Technology provided adapted smoke alarm, personal listener and flashing doorbell and fa radio link loop system.

After the closure of this task, the Service User thanked the Housing Support Coordinator for their help in enabling her to use the shower again and was grateful for the radio link which she says is the best she has been able to hear the TV in years!

7 Lightbulb Review

- 7.1 The Charnwood Locality review is currently being undertaken and following receipt of the Business Case from the Project Team a report will go to Cabinet in January 2019.

Background Papers: Cabinet Report – 11th May 2017 - Link:
https://www.charnwood.gov.uk/committees/cabinet?paper_q=&paper_classification=&paper_startDate=2017-05-11&go=Search

OSG Minutes – 8th May 2017 – Link:
https://www.charnwood.gov.uk/files/papers/osg_08_may_2017_minutes1/OSG%2008%20May%202017%20Minutes.pdf

Appendices: none

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