Supporting People:

Older People's Services

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Views expressed in this report are those of the researcher and not necessarily those of the Welsh Government.

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Glossary of terms:

Extra Care:	Purpose-built schemes with integrated restaurant and communal facilities and previously known as Category 2.5
General needs:	Where a housing-related support service is provided to any person aged 50 and over in the community in any property type not covered in other survey categories
Leasehold:	Where residents either own part or all of the property but there is an age restriction of over 55s only and it is not covered in any of the options above
Older persons' housing:	Any scheme or part of scheme designated to be allocated to those over the age of 50
Older persons' housing +:	Any scheme or part of scheme designated to be allocated to those over the age of 50 with at least one communal facility for use by service users
Sheltered housing:	Schemes with integrated communal lounge and front doors within internal corridors – previously classified as Category 2
Sheltered housing +:	Schemes with integrated communal lounge and front doors within internal corridors would have been classified as Category 2 previously, and where meals are provided on site but not through a fully integrated restaurant facility.

Glossary of acronyms:

SP:	Supporting People
SPIN:	Supporting People Information Network
SPNAB:	Supporting People National Advisory Board
SPPG:	Supporting People Programme Grant
RCCs:	Regional Collaborative Committees
RDCs:	Regional Development Co-ordinators
RSL:	Registered Social Landlord

1. Introduction

This short-term research project was undertaken to examine the situation with the older people's services provided by the Supporting People Programme. More specifically, the project was tasked with ascertaining the extent of progress since the 2010 Aylward Review's recommendation that older people's services provided by Supporting People should be based on need and not age or tenure.

This project was conducted between November 2014 and March 2015. The project was undertaken by a PhD intern working within the Social Research and Information Division at the Welsh Government.

Context

The Supporting People Programme provides support to vulnerable individuals who are at risk of losing, or who have lost, their homes or who need housing-related support to retain or regain their independence. It was established in 2003 and brought together a number of previous funding streams for housing-related support. The budget for the Supporting People Programme in Wales for 2015/16 was approximately £124 million.

Funding is provided to local authorities, based on their spending plans – which outline what services are required in their area. Local authorities then use the funding to commission various organisations, drawn from the private, public and third sectors to provide the required services.

The Supporting People Programme supports more than 59,000 people each year to live as independently as they can. It aims to prevent problems by providing help as early as possible.

Of the 59,000, 43,000 are older people. Although it also supports households fleeing domestic violence and people threatened with, or getting over, a period of homelessness as well as people with mental health needs, substance misuse needs or a learning disability.

Ultimately, the vision for Supporting People is to help people find and keep a home that meets their needs and encourages independence in a healthy and safe environment.

Aims

The aims of the Supporting People Programme are:-

▪ helping vulnerable people live as independently as possible;

- providing people with the help they need to live in their own homes, hostels, sheltered housing or other specialist housing;

- preventing problems in the first place or providing help as early as possible, in order to reduce demand on other services such as health and social services;

- providing help to complement the personal or medical care that some people may need;

- putting those who need support at the heart of the programme;

- ensuring quality services, which are delivered as efficiently and effectively as possible through joint working between organisations that plan and fund services and those that provide services;

- providing funding for support based on need; and

- promoting equality and reducing inequalities.

Background

The Aylward Review

In December 2009, the Welsh Government commissioned a review of the Supporting People Programme in Wales[1]. The review was led by Professor Sir Mansel Aylward and the final report, commonly known as the 'Aylward Review', was published in November 2010. The report made 25 recommendations, which included the merging of two funding streams into a new single Supporting People Programme Grant (SPPG), reform of the administrative structure, and the development of Regional Collaborative Committees (RCCs) supported by Regional Development Co-ordinators (RDCs) to plan, develop and support Supporting People services.

The Aylward Review also made the following recommendation:-

> "It is recommended that the eligibility criteria for older people receiving Supporting People funds should be based on need rather than age or tenure".

This recommendation, 'the Aylward recommendation', reflected a concern that across Wales people over the age of 55 (in some cases 50) living in Type II housing (sheltered housing), were automatically receiving or entitled to receive Supporting People services regardless of the level of their need. The services referred to in this context were typically the provision of alarms (often hardwired into the housing stock) and/or services provided by wardens or sheltered housing support officers, such as a daily 'check up' visit or telephone call.

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[1] The Supporting People Programme in Wales: A Review. Mansel Aylward et al. 2010

The Review noted that as a consequence of sheltered housing, residents' automatic receipt of these services:-

> "…eligibility for Supporting People funds is based on age and tenancy and not on need. This results in those who may have a high need not receiving the appropriate support."

Welsh Government supports the recommendation and requires it to be implemented across Wales. The recommendation was incorporated in the SPPG Guidance published in June 2013 and RCCs were charged with taking forward the recommendation and establishing a timeline for implementation. All local authorities are required to report to the RCC on how they are working towards implementation and the timescales for achieving it.

It is a condition of the SPPG Terms and Conditions for 2014/2015 that SPPG funds for older people services are provided for support, based on need rather than tenure or age.

The role of Regional Collaborative Committees is to provide advice to local authorities and other local stakeholders on regional and local collaborative delivery of the Supporting People Programme to ensure the most efficient and effective services are delivered. The Regional Collaborative Committees will inform and advise the Welsh Ministers on the production of proposed Supporting People Commissioning plans for the allocation of grant against agreed priorities. Within the guidance, Regional Collaborative Committees were tasked to establish a timeline on how they will ensure that Supporting People services for older people are based on need and not tenure.

The Quality Services Workstream

In 2011, Welsh Government developed four groups to support the implementation of the Aylward Review recommendations. Among these was the Quality Services Workstream, which was tasked with examining and supporting progress in delivering the recommendation that older people's services should be separated from tenure.

In February 2014 the Quality Services Workstream issued a survey to all providers of Supporting People services to older people across Wales, to assess the type and nature of the services available and whether eligibility for these depended on need or tenure. The survey produced both quantitative and qualitative data, which was collated by the Workstream and forwarded to the Welsh Government. In some RCC areas, the data was summarised by the Regional Development Co-ordinator (RDC). This survey provided a large amount of information on the state of the Supporting People older person services in early 2014.

Aims and objectives

Aim
The aim of this research project is to assess progress on the Aylward recommendation across Wales and to identify next steps for Welsh Government and the Supporting People National Advisory Board (SPNAB) for successful implementation of the Supporting People older person services based on need rather than tenure.

Objectives
The objectives of the research were to:-
- establish to what extent the Supporting People older person services across Wales are currently being provided according to need, rather than tenure;
- identify obstacles to progress encountered by local authorities, providers and RCCs; and
- identify areas across Wales where housing-related support services have moved from tenure-based to needs-based support, to identify difficulties and examples of good practice.

Research activities
In order to meet the objectives, the following research tasks were undertaken:-
- analysis of the data from the survey conducted by the Quality Workstream in January-February 2014 and consideration of the findings;
- collection and consideration of recent information from the RCCs and local authorities in relation to updates and changes since the 2014 survey was conducted;
- a web-based survey for local authorities focusing on the current position of older person services and commissioning criteria;
- a short web-based survey for providers of the Supporting People older person services in relation to current provision; and
- semi-structured interviews with local authority Supporting People leads and service providers in three areas.

Outline of report structure

Chapter 2 outlines the **Methodology** used as part of this research. The **findings** of both the survey undertaken by the Quality Workstream in 2014 and of the research undertaken as part of this project are outlined in Chapter 3. While the **conclusions and recommendations** for going forward are contained in Chapter 4.

2. Methodology

Both quantitative and qualitative research methods were used in the project. Quantitative methods were used to establish the tenure of individuals receiving Supporting People older person services and how many units were being delivered across different tenures. Qualitative approaches were used to capture information about the experiences of different stakeholders, the benefits and challenges of moving to tenure-neutral service models and examples of good practice.

Originally it had been anticipated that the research would include primary research into service user experiences of the switch to services based on need. However, an initial analysis of the data emerging from the Quality Workstream 2014 survey and assessment of update information provided by RDCs, suggested that movement towards tenure-neutral services was limited. As a result, it was considered that it was not appropriate at this stage to speak directly to service users, and the emphasis of the project was placed on gaining a fuller understanding of how far progress had been made in effective implementation of the recommendation.

Stage 1: Analysis of the Quality Workstream survey

The 2014 survey undertaken by the Quality Workstream produced a large amount of quantitative and qualitative data, collated according to RCC regions. Just over 60 service providers responded to the survey, including local authorities providing services directly. However a large number of providers did not complete the survey, particularly organisations without a tenant base, such as third sector organisations.

Quantitative data

The quantitative data was compiled according to local authority areas. It comprised a list of the services provided by respondents in each area, with the following information provided for each service:
- funding sources, including the level of SPPG funding;
- the type of accommodation and alarm provision (if any);
- the type and level of staffing provided;
- the level of demand and number of voids;
- the capacity of the service (where schemes were accommodation-based with all properties receiving the same level of support, and provided in terms of the number of properties in the scheme);
- eligibility criteria; and
- the type of contract held with the local authority.

Some survey questions were answered by means of a drop-down menu of options providing a list of categories, while others required free responses.

The analysis of quantitative data was conducted according to each local authority area and then aggregated. The data included information on services not in receipt of SPPG funding. These were listed and removed from the analysis as the Aylward recommendation applies only to SPPG-funded services. The remaining services were then analysed according to the information which had a particular relevance to the Aylward recommendation. This was:-

- Accommodation type (seven categories were listed as options, with respondents required to select one).
- Alarm type (respondents were required to select one of six categories).
- Service type (respondents were required to select one of 11 categories).
- Eligibility (respondents were required to state whether services were provided according to tenure or need, with 'need' referring to situations 'where anyone can access the service irrespective of where they live').

It was common for schemes to include within them different types of service provision, (frequently with different levels of SPPG funding). In these circumstances, respondents were asked to complete a new data entry for each different element of the scheme.

Certain difficulties arose in the analysis. The coverage of the listed services ranged from one property to over 1,000, meaning that there was limited value in calculating the number of services in different categories. Double counting was also possible, as individual schemes frequently had a number of data entries. Wherever possible, analysis therefore focused on the number of properties within the services in certain categories, as this could be more accurately counted and gave a better sense of the capacity of services in different categories.

The resulting analysis provided an overall impression of the services being provided across each local authority area as at February 2014.

Qualitative data

Qualitative data comprised the free text comments of respondents in response to five questions. Four questions focused on plans for implementation of the Aylward recommendation and service developments more generally, and on current and future provision of alarm services. The fifth question gave the opportunity for respondents to clarify quantitative data if required. Responses for each question were collated by the Quality Workstream according to RCC region and anonymised. They are reported and considered in the findings chapter.

Responses ranged in length from single sentences to multiple paragraphs. In some instances it was difficult to ascertain where a particular response began or ended, although cross-referencing with the original response sheets provided by individual

respondents was carried out wherever possible. Some comments appeared in identical form in different RCC regions, where respondents were working across different areas and duplicated comments accordingly. These comments were only considered once in the analysis.

Comments were grouped according to core themes that were identified in the responses. Certain themes were then considered. These included recurring themes and themes that were identified as being of particular importance to implementation of the Aylward recommendation.

Initial findings from Stage 1: Quality Workstream survey

Findings from the survey are considered in full in Chapter 3. However, an initial analysis of the data indicated that the bulk of services were still being delivered only to tenants of the providing organisations. Both the quantitative and qualitative data indicated that these services were often identified as needs-based in accordance with the Aylward recommendation, even though they were linked to tenure. This suggested that there might be some confusion as to the content of the recommendation.

Collection and analysis of update data

At the outset of the project, RDCs were asked to provide update information in relation to their RCC area. Information was received from all RDCs. The format of the update information was not prescribed and the amount and type of information provided by each RDC varied, resulting in a more detailed picture of services in some RCC areas compared to others. Some RDCs provided information on each separate local authority, while others gave an overview of work within the RCC. The information supplied included:-
- short updates in relation to each local authority in the RCC;
- older people planning group reports, giving detailed information about local authority future plans;
- reports to RCCs from older people task and finish groups, including timelines for implementation of the Aylward recommendation;
- summaries of the Quality Workstream survey responses; and
- a report from an older person services workshop.

This information was compiled and considered both independently and in the light of the initial findings from the Quality Workstream survey.

Informal telephone conversations were then held with RDCs, but these were to give background information only and did not form part of the data collection.

Stage 2: Web-based surveys for local authorities and service providers

Given the initial findings from the Quality Workstream survey, it was necessary to explore the level of services provided in different tenure groups in more detail. There was also merit in taking the opportunity to obtain updated information, as many people involved in the earlier survey advised that there had been substantial changes in the types of services being provided.

Two web-based surveys were therefore created:-
  a) one for local authorities in their capacity as commissioners of SPPG-funded older person services; and
  b) one for service providers (including local authorities providing services directly).

The surveys were designed to obtain a 'snapshot' of SPPG-funded services at the date of completion, including how many units of support were being provided to individuals in different tenure settings. Given that service providers had previously been requested to provide extensive information in the Quality Workstream survey, information requested from them was kept as short as possible.

The draft questions for both surveys were sent to one local authority lead and one representative of a service provider for comment. These individuals were also asked to complete a pilot version of the final online questionnaire relevant to their role. Their comments and recommendations were incorporated into the final surveys.

Local authorities were requested to provide information on:-
  • the number of alarm-only units of support being provided, whether these were hardwired or non-hardwired and the tenure of recipients of non-hardwired services;
  • the number of units of fixed and floating support commissioned (excluding alarm-only services) and the tenure of individuals receiving floating support;
  • referral systems;
  • eligibility and commissioning criteria; and
  • steps taken to implement the Aylward recommendation.

They were also asked to provide the following information in relation to each service provider commissioned to provide SPPG-funded older person services:-
  • the number of units commissioned (excluding alarm-only services); and
  • whether providers were commissioned to provide services to their own tenants or more widely and, if the latter, who they expected to be receiving services.

Local authorities were also requested to provide relevant documentation including eligibility criteria, commissioning criteria and service reviews.

Service providers were requested to provide the following information in relation to each commissioning local authority (excluding alarm-only services):-
- the number of individuals receiving services;
- whether service users were tenants and/or other individuals;
- where service users extended beyond tenants, how many units of support were provided to: tenants (if applicable), owner-occupiers or individuals renting accommodation in the private sector, tenants of another registered social landlord (RSL), local authority tenants, or people whose tenure was not identifiable;
- eligibility criteria;
- any changes made since the Quality Services Workstream survey.

The questions gave the scope to cross-reference responses both within and between the surveys in order to check the accuracy of information and identify any discrepancies.

In each survey questions included a variety of single select options, multiple select options and free text. Wherever necessary, respondents were given the option of stating that the information was not known or that the tenure of service users could not be established. Respondents were also given the opportunity to add any further information if they wished. An outline of the questions is provided in [Appendix 1]. Both surveys and all supporting documentation were provided in English and Welsh.

Both surveys were sent directly to SP lead officers in all 22 local authorities across Wales on the 15th January 2015, with a request that they pass on the provider survey to all providers of SPPG-funded dedicated older person services, a deadline of 30th January was given. A follow-up telephone call was made to each local authority to ensure that they had received and passed on the survey. Due to the tight timescale, the provider survey was also sent directly to organisations which had responded to the January 2014 survey.

Twenty-one out of the 22 local authorities in Wales completed the survey in time for the data to be incorporated in the analysis. There were some inconsistencies in the data from some local authorities, and these were resolved with local authorities as far as was possible prior to the analysis. Quantitative data was collated and analysed on a national rather than regional basis, to give an overall sense of the split of different tenure groups among service recipients. The total number of fixed and of floating units of support were calculated, as were the number of floating units understood by local authorities to be provided within different tenure groups.

Local authorities identified just over 70 organisations as providers of SP-funded older people's services, of which 21 did not complete the survey. Sixty-five responses were received from provider organisations, but these included some duplications. Information from the provider survey was both collated overall and compared with data provided by local authorities.

These figures were grouped into two categories: services that were provided to tenants only and services provided either to non-tenants, or to tenants and other individuals. From this information, it was possible to calculate the number of units of both fixed and floating support that were commissioned to be available to tenants of RSL and to tenants of the local authority, the number of units that were commissioned to be available to anyone, regardless of tenure, and the tenure of individuals receiving the tenure-neutral services. These figures were then compiled on a national basis, with 'headline' data also compiled on a regional basis.

Interviews

Semi-structured interviews were carried out with the local authority Supporting People officer and a representative of a service provider in three different local authority areas. Questions focused on the services currently being delivered, the process of change, and challenges encountered and the impact of these. Interviewees were also asked how they would model SPPG-funded older person services if they were not constrained by current or former service structures.

The criteria for the selection of interview areas were:-
- a response to the survey which indicated innovative activities, challenges met or a successful transition which might provide learning points for other stakeholders;
- a geographical spread across Wales;
- a mix of urban and rural areas; and
- a mix of local authorities which provide services directly and those which do not.

Information given by the interviewees was compiled into a narrative outlining the individual experience of both the local authority and the provider organisation in each area. Common themes and key points emerging from the interviews were also considered.

Data collection limitations

While quantitative data is required to get an accurate picture of levels of support and the tenure of service users, a number of limitations were noted. Given the complexity of this field, it was necessary to provide fairly extensive instructions to respondents to maximise consistency in the data capture. These were not always accurately followed, possibly due to the time constraints of the project. It was also clear that while the quantitative data gave an overview of the situation, the qualitative data was necessary to get a real understanding of the complexities and issues arising in service provision, and to interpret the quantitative findings.

3. Findings

This section presents the findings of the research chronologically. Findings are considered in turn from the 2014 survey, the updates provided by RDCs, the 2015 surveys and the semi-structured interviews.

3a. Stage 1: The Quality Workstream Survey

This survey received responses from just over 60 providers of a potential 70-80 providers. Many of those that did not complete the survey were organisations without their own housing stock, such as charities and voluntary organisations. Given that these organisations have no tenants, they may be more likely to be providing support in community settings, with no connection to a service user's tenure or accommodation type. Although some non-respondents were also landlord organisations, there was the potential for missing information to be disproportionately connected to community-based services and the data received to be biased towards the services provided by RSLs and local authority providers. Due to this potential gap in the data, the findings cannot be considered to be fully representative of the provision of older people's services, and should be considered as indicative rather than definitive.

Findings from the quantitative data

Funding
It is important to note that Supporting People funds do not necessarily fund 100% of a service. The data collected as part of the 2013 survey shows that the level of SPPG funding for services ranged from 0 per cent of the service funding to 100 per cent.

Overall, only a minority of services were funded entirely by Supporting People, although 19 local authorities had at least one service funded in this way. The remaining three local authorities reported Supporting People funding levels ranging from 14 to 33 per cent of service funding, 3 to 20 per cent and 15 to 65 per cent of funding. Other funding was generally provided by 'housing management' monies (defined as rents, service charges and housing benefit). Respondents did not always specify sources of funding other than SP or housing management monies, but a small number of services were stated to be funded in part by external sources including other local authority funding sources and health board funding

Around one-fifth of the identified services received no SPPG funding. In three local authority areas, services receiving SPPG funding were actually in the minority.

The proportion of a service that is SPPG-funded could have an impact on the level of influence local authorities have over services in their area, including over changes

made to those services in the light of policy developments, such as the recommendations of the Aylward Review.

Services provided

In relation to the accommodation in which services were provided, the large majority of services were provided to tenants of RSLs or local authorities. In terms of the capacity of services (i.e. the number of properties), just over half of provision (52%) was to individuals in sheltered housing schemes and just under one-third (31%) to individuals in social housing allocated to older persons (for definitions of these terms, see the tables below). A small number of services were provided in 'community' settings (identified in the survey as 'general needs' accommodation). However, the absence of detailed information relating to community-based services both overall and specifically in relation to the capacity of these services, meant that the level of provision in this setting could not be accurately ascertained.

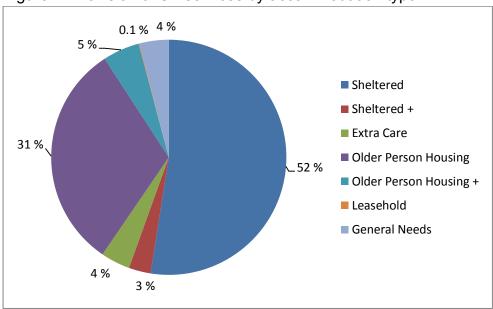| Accommodation type	Capacity of services
Sheltered housing *Schemes with integrated communal lounge and front doors within internal corridors – previously classified as Category 2*	21,215 properties (52%)
Older persons' housing *Any scheme or part of scheme designated to be allocated to those over the age of 50*	12,553 properties (31%)
Older persons' housing + *Any scheme or part of scheme designated to be allocated to those over the age of 50 with at least one communal facility for use by service users*	2,036 properties (5%)
Extra Care *Purpose-built schemes with integrated restaurant and communal facilities and previously known as Category 2.5*	1,766 properties (4%)
General needs *Where a housing-related support service is provided to any person aged 50 and over in the community in any property type not covered in other survey categories*	1,428 properties (4%)
Sheltered housing + Schemes with integrated communal lounge and front doors within internal corridors and would have been classified as Category 2 previously, and where meals are provided on site but not through a fully integrated restaurant facility.	1,385 properties (3%)
Leasehold *Where residents either own part or all of the property but there is an age restriction of over 55s only and it is not covered in any of the options above*	46 properties (0.1%

Figure 1: Provision of SP services by accommodation type.

Base; 40,429

The extent of alarm provision was assessed according to the number of properties using different alarm types. The large majority of alarm provision (75 per cent) was via hardwired alarms, including "hardwire +" systems[2]. These systems are closely connected to the tenure of a property as they are part of the structure of a building and tenants frequently pay a contribution to their costs, regardless of whether they wish to have an alarm or not. 'Lifeline' alarms (portable, or 'dispersed' units)[3] were identified in just under a quarter (23 per cent) of provision. Only one per cent of service capacity was identified as having no alarm and less than one per cent used wireless alarms. No services used pager alarm systems.

In terms of support provided to service users, respondents were asked to select from a variety of service types. In a large number of cases, two or three service types were identified within the same scheme. These were typically within sheltered housing schemes, where support provided by staff members dedicated to the scheme was supplemented by additional out of hours services. Thus, the information obtained includes some level of double counting of services.

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[2] In the survey, hardwired alarms were described as: "the system is integrated into the building and links all properties to a member of staff either on site or via a control centre". Hardwire + alarms were described as: "the system is integrated into the building and links all properties to a member of staff either on site or via a control centre, and is capable of linking in to the majority of telecare units available for the home such as a PIR, flood detector, fall detector etc (this may be known to some as Telecare Overlay).

[3] In the survey, lifeline alarms were defined as: "any type of portable alarm which only serves the needs of one individual irrespective of the type of property they live in".

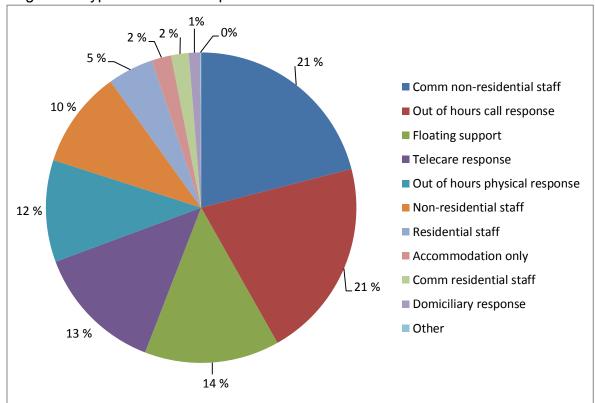| Type of service	Capacity of services
Community non-residential staff *Any staff member not living on the same site as they work and also covering other sites and/or people in the community*	8,865 properties (21%)
Out of hours call response *Any phone call-only service being provided out of normal working hours ie: Monday–Friday 8am to 5pm*	8,798 properties (21%)
Floating support *Office-based staff covering community visits and calls*	5,938 properties (where given) (14%)
Telecare response *Staff or family members providing a visit/phone response to an activation of any telecare equipment*	5,682 properties (13%)
Out of hours physical response *Any visiting service being provided out of normal working hours, ie: Monday–Friday 8am to 5pm.*	4,486 properties (12%)
Non-residential staff *Any staff member not living on the same site as they work but only covering that one scheme*	4,279 properties (10%)
Residential staff *Any staff member living on the same site as they work but only covering that one scheme*	2,008 properties (5%)
Accommodation only *Where there is no support provided via staff, but the properties are allocated initially to those over 50, 55, 60 etc.*	866 properties (2%)
Community residential staff *Any staff member living on the same site as they work and also covering other sites and/or people in the community*	776 properties (2%)
Domiciliary response *A response from a domiciliary registered response which can/may deliver responsive support-only service in an emergency*	491 properties (1%)
Other	45 properties (Less than 1%)

Figure 2: Type of SP service provided.

Base; 42,234

It was clear that it was more common for a service to have a staff member living off-site than living on-site (identified here as 'residential' or 'community residential' staff). Of the services that were identified as having a residential or non-residential staff member dedicated to a particular site (624 services overall), just under two thirds (64 per cent) provided some level of support either to another site and/or in the community. This suggested that a number of services might be functioning on a 'hub and spoke' basis, but as respondents were not asked to identify whether the staff member provided support to more than one site or to the local community, or both, it was not possible to establish whether these services involved a level of community provision, or whether staff were working across multiple sites or multiple tenures. Similarly, any level of support provided in community settings by these schemes could not be definitively ascertained.

Tenure and need

Respondents were asked to state whether services were available according to tenure or need, with tenure-based services defined as 'where the service is accommodation-based' and needs-based services defined as 'where anyone can access the service irrespective of where they live'. Around a quarter of services (28 per cent) provided in sheltered accommodation and 25 per cent of services with hardwired alarm systems were stated to be available on the basis of need. As

sheltered housing services and hardwired alarms cannot, by definition, be available to individuals regardless of where they live, there was a clear anomaly here. It was possible that some or all of these services were 'hub and spoke' schemes, with the sheltered housing properties forming the 'hub' and some support also available to other individuals in the local community (and therefore accessible 'irrespective of where they live'). However, responses to the open-ended questions from the survey suggested that different interpretation of 'needs-based' services had been applied, and that these services were only available to tenants, but provided only to those identified as having a housing-related support need (see further below).

Findings from the qualitative data

In addition to the quantitative data considered above, respondents were also asked a number of open-ended questions. These sought to gather more detail on any plans in place to implement the Aylward recommendation on older people's services and to understand the current situation with hardwired and dispersed alarms.

The questions posed on these areas elicited a large number of responses, ranging in length from single sentences to multiple paragraphs. The responses for each question were collated according to RCC region and anonymised.

Plans for implementing the Aylward recommendation

This subject elicited the largest number of responses. The length of responses to questions was wide-ranging, with some respondents giving single sentence answers and others providing detailed comment running to many paragraphs.

Inevitably in a survey of this type, many comments provided information that lacked detail and could not be verified in the timescale of the project. A small number of comments (including some detailed information) were not specifically relevant to the Aylward recommendation, but explored other issues. Two responses indicated that the respondents had no knowledge of the Aylward Report.

Responses were diverse in theme, and covered a number of areas. The following themes recurred most frequently:-

Reviews and pilots
Around 20 respondents indicated that they had completed, were undertaking or (in a few cases) planned to review their services. However, information on these lacked detail, particularly where reviews were planned rather than in progress and it is not known whether any reviews were independently conducted. A small number of pilot projects (again sometimes planned or forthcoming) were also mentioned. Timescales for reviews or pilots were rarely stated. Those that gave a timescale generally stated that these would begin or take place in 2014 or in the financial year

of 2014-15. Two respondents gave more specific dates (July 2014 and December 2014). One stated that the review timescale was not known. A small number of reviews had been completed, including one in 2010 and one in 2012.

One respondent indicated that they had conducted a consultation with tenants and a revie w of services in the light of the Aylward Report, re-modelled services and conducted a follow-up review, resulting in further changes.

Description of steps being taken and/or the new models put in place to implement the recommendation
Many respondents gave information about the steps being taken to implement the Aylward recommendation. These included:-
- Changes to staff roles/staff development: re-designating wardens as supported housing officers (or similar) and/or removing (or separating) the housing management element from the support worker role, reducing the number of hours for support workers on sheltered housing sites, increasing staff hours overall and staff development.
- Introducing needs assessment processes: undertaking needs assessments, developing support plans with existing tenants.
- Developing hub and spoke models of support and extending services into the local community.
- Working in collaboration with local authority and other providers, negotiating block funding contracts with local authorities and decommissioning hardwired alarm systems.

Completion
Around 10 respondents stated, either directly or by implication, they had fully implemented the Aylward recommendation, or would do so shortly. In many of these cases there was little or no description of the resulting service, so it was not possible to ascertain how implementation had been achieved or to understand the resulting service. These included statements such as:

> "[Provider organisation] within its Older Person Schemes in [local authority area] has implemented the recommendations referenced within the Aylward Review" (respondent in two RCC areas).

Other respondents stated that they had completed a move to a needs-based service, although it was clear that services were still being provided only to tenants of the provider organisation. On some occasions needs-based support was achieved by carrying out needs assessments and providing support only to tenants who required it. For example:-

"From 1st April 2014 [organisation] will be assessing **tenants'** needs based on a banded assessment system to ensure support is delivered only to those tenants who are eligible for the service". (Emphasis added)

More commonly, respondents indicated they had moved to a model in which support was apparently universal within the service, but access to the service depended on having a support need rather than simply by meeting an age criteria (i.e. eligibility for the service was age, plus existence of a support need). For example:-

"…we have changed the way we let our properties, allocations are now based on need rather than tenure. We have introduced a pre-tenancy needs assessments process, which is now part of the allocation stage, to ensure those who apply for sheltered housing have support needs".

Both these types of service suggested that while support was provided according to need, it was still dependant on having a tenancy with the organisation, in that support was only available to tenants.

Needs-based services
The responses received indicate that the language used when discussing the Aylward recommendation can differ, and as a result have different connotations. Various words and phrases were used to describe services that were connected to need, rather than tenure. While some respondents used the phrase 'tenure-neutral' in relation to the recommendation, others referred to 'needs-specific', 'needs-based' and 'needs-led' services. These phrases, or references to needs assessments, were often used to indicate understanding of or compliance with the Aylward recommendation, for example:-

"Already operating within the Aylward recommendations….. individual needs assessments and support plans and recording outcomes."

"[Name of provider] already operates an older person's support service whereby access to the service is based on need as opposed to accommodation. This style of service is available to all older persons living in [name of provider] accommodation".

"We consider that the service we provide is very much focused to the individual needs."

"[Name of provider] currently provides a generic and general approach to meeting the needs of all its tenants regardless of age, and responds on an individual level in assisting, supporting or enabling tenants in providing solutions and meeting specific needs… In this sense the approach mirrors the

thrust of the Aylward recommendations' approach in basing our approach on need rather than age."

As many of these services appeared to be provided to tenants only, these comments indicate that respondents frequently considered services restricted to those with support needs to be in line with the Aylward recommendation, despite their lack of wider access (i.e. access is still not tenure-neutral).

Comments such as these could suggest that the main focus for many providers in implementing the recommendation was ensuring that services were provided to their own tenants with an assessed housing-related support need, rather than extending services to people from all tenures or otherwise disconnecting services from tenure. It was not clear whether this interpretation had arisen because this was the key focus for service providers, or because the term 'needs-based' had become synonymous with successful implementation of the recommendation. However, the occasional use of the phrase 'tenure-neutral' in relation to the recommendation, suggested that some respondents considered the recommendation to require a more complete separation of services from tenure.

Timescales
There were few references to timescales for implementing the Aylward recommendations. These often lacked detail and were implied rather than explicit, although some respondents gave specific dates, these ranged from 12 months to up to five years to fully implement the Aylward recommendation. One respondent stated that there was no set deadline for development of the planned community hub as it was "on-going work which will develop and grow over time".

The situation regarding hardwired alarms and dispersed alarms

The vast majority of responses here reported what type of alarm system they currently used (hardwired or dispersed) with few referring to future plans.

In line with the quantitative findings of the survey the majority of responses stated that hardwired alarms, as opposed to dispersed alarms or lifelines, were used and within this many indicated that their hardwired alarm systems had recently been updated. A number of providers also indicated that they offered both hardwired and dispersed alarms, depending on the specific scheme. Many providers made reference to undertaking reviews of alarm systems. Of those that had already undertaken reviews, some chose to remain with hardwired alarms, while others sought to install dispersed alarms.

A number of mentions were made of the difficulties of moving from hardwired alarm systems to dispersed alarms. These included the cost implications and concerns around difficulties with dispersed alarms. Issues raised in relation to dispersed

alarms included a reliance on a landline and the limitations of SIM cards where used. Some respondents commented on the perceived security of hardwire alarms over dispersed systems and the fact that other services, such as fire alarms and door entry systems, could and often are linked to hardwired systems.

When asked specifically about the provision of dispersed alarms, most of the providers who responded reported providing a dispersed alarm service. However, these were not necessarily a blanket service to all users but were often based on need or on the type of provision. The eligibility criteria ranged from simply age (over 55) to the recipient having specific health needs or being referred by social services.

Although some providers indicated that they did not provide dispersed alarm services, some qualified this by saying that they provided advice or supported applications to secure a dispersed alarm from various alarm providers. The majority of alarms had to be accessed via local authorities.

Updates from RCCs

The SPPG Guidance published in June 2013 stated that the Aylward recommendation should be taken forward through the RCCs, which were required to establish a timeline for implementation. It was therefore important to get an impression from the RCCs as to the activities they were undertaking to support local authorities and provider organisations.

Given that RCCs provided updates in widely varying formats and levels of detail, it was difficult to compare the information and establish common themes and activities. From the information provided it appeared that RCCs had differing levels of involvement in supporting the implementation of the Aylward recommendation, that different regions were implementing the recommendation in different ways and that different stages had been reached.

At least three of the six RCCs had developed Task and Finish Groups with a focus on older people's services. One other RCC described a 'working group' established initially to support the 2014 survey, but which aimed to continue in order to support local authorities in implementing the recommendation. In two regions, Task and Finish Groups had established a draft timeline for implementing the recommendation. In one of these, the timeline had recently been consulted on and approved and a similar consultation was planned in the other. In both cases the date for full implementation of the recommendation was April 2017, although in one region this date was still to be approved. Information from the third RCC known to have a Task and Finish Group, indicated that local authorities were expected to have implemented the recommendation by April 2016.

Other substantive information provided by the RCCs included briefing papers stating the progress in each local authority area (two RCCs) and the report of a workshop

conducted with provider organisations (one RCC). One further RCC provided extensive and detailed information about progress, the work being undertaken to support local authorities in implementation, responses to consultations and minutes of relevant meetings. This RCC had developed materials to support providers in implementation, including a suggested briefing for staff of provider organisations about the forthcoming changes, and a model letter for existing tenants. It had also conducted an Equality Impact Assessment. All these materials were provided. Information provided by all these RCCs suggested that a collaborative approach was being taken with the RCC, local authorities, and provider organisations in close contact. There was also a clear preference for working in ways and at a timescale that was appropriate for providers.

One RCC provided information relating to the 2014 survey but no further information or updates on progress since, and one provided limited information but indicated that implementation had been successful or was well underway in all local authority areas. This RCC advised that in some local authorities in this region all services were now provided on the basis of need, although some of these appeared to remain available only to tenants of providing organisations. It was anticipated that all remaining services would be provided on a basis of need within the year 2015/16. With the exception of the timescales mentioned above, information about timescales was generally limited and vague. One RCC indicated that of 12 providers, six were 'reviewing/planning to review service(s) in 2014/15'. One RCC indicated that the bulk of services were due to be remodelled by April 2015, with remodelling started in all the remaining services by the end of 2014. One RCC gave no information about projected timescales.

While the varied nature of the information provided from different RCCs made comparisons difficult, there was evidence that local authorities were tending to follow similar service models in the same RCC regions (particularly where these comprised four or more local authorities). In one RCC, implementation had focused on developing tenure-neutral floating support models (sometimes to complement support provided through sheltered housing schemes). In another all local authority areas were developing hub and spoke or 'community hub' models, with many mentions also of 'tiered' support. Overall, 'hub and spoke' or community hub models were predominantly mentioned in the update material.

Given that the material provided by RCCs had not been collected in a specific format as part of a research exercise and could not be verified in the time available, it was necessary to treat it as anecdotal information. However, themes that emerged included:
- The shape of services and delivery: The value of prevention (including the value of alarms in maintaining independence); differences in the format of services provided in community and those (formerly) provided in sheltered housing schemes; the separation of the support function from housing

management/landlord functions (and the need for clarity on these functions and to 'disentangle' monies); the development of individually tailored support and resulting documentation requirements; and the need to ensure that individuals are able to access appropriate support if they need it.

- The impact on service users: the need for consultation and to include service users in the remodelling of services; and the lengthy timescales required for consultation with this client group.
- Discrepancies between demand and support, including an anticipated rise in demand for services in the light of an ageing population; existence of need in community settings and a desire among older people to stay in their own accommodation rather than move into a sheltered setting; and comments that older people may move into sheltered schemes to meet a housing need, rather than to access support.
- Funding issues, including the impact of funding cuts on services and pilot projects, variance in funding and charging policies (including variation within RCC areas) and financial impact on tenants if they are required to pay for support in future.
- Concerns that SP outcomes are not appropriate for older people, the need for flexibility in approach (and funding) and the need to gather information which is outside the current outcomes framework.
- The need for partnerships with other local authority departments and agencies and for collaborative working among providers; and the need for local authorities to work together.
- Issues of local politics, including the need to keep elected members informed due to interest in this area.
- Staff issues, including changes to staff roles, the introduction of team working and the need for consultation with staff (and other stakeholders).

Obstacles and challenges for providers and commissioners

Both the narrative data from the 2014 survey and the update information from RCCs revealed a number of challenges and obstacles in relation to implementing the Aylward recommendation. Concerns tended to be raised by single agencies, although it was not always clear whether there had also been multiple agency discussion. Similarly, it was not always possible to establish whether a concern had come from providers or commissioners.

Challenges could be categorised into five groups: legal/contractual issues, business issues, delivery and practical problems in relation to remodelled services, issues connected with change and issues related to alarm services. In addition there were some miscellaneous concerns.

Legal issues included agreements relating to service levels made with tenants when housing stock was transferred from local authority control to new agencies. These concerns were raised by two respondents in the 2014 survey and were echoed in information from one of the RCCs. One organisation noted that these arrangements were legally binding on both the local authority and the new providers. Another issue was a (potentially contractual or statutory) need to consult service users and the inclusion of support provision in tenancy agreements. Although this emerged as an issue, it must be borne in mind that there could be changes to grant funding at any time. SPPG has recently experienced reductions to funding levels and Welsh Government have asked all stakeholders to focus on housing-related support based on need rather than age or tenure. Therefore, terms within a tenancy should not prohibit change to reflect Welsh Government policy direction.

Business issues included a lack of any internal impetus for change (no difficulty in renting properties), a lack of 'political buy-in' for implementation of the recommendation, investment in buildings prior to the policy change and what was felt to be a restrictive focus by Supporting People on needs which might not relate well to older people. In addition there were also concerns about funding streams, including the need to 'unravel' housing management and service charges, and the perceived need for block contracts to provide support based on need (and the subsequent reliance on local authority agreement for this).

Practical problems with the delivery of new models included the higher cost of delivering support in the community, when compared with provision in sheltered schemes and the difficulty of providing consistency in services when local authorities were implementing the recommendation at different speeds. Particular problems with 'hub and spoke' models or the use of existing support staff were raised. These included a lack of 'spare capacity' within sheltered schemes (and a consequent need for community support to remain geographically close to these schemes to prevent a detrimental impact on existing residents), the lack of sheltered schemes in many areas and support staff with second jobs. One provider considered that hub and spoke schemes were 'sheltered housing by any other name'. A number of agencies also raised concerns about referrals, including the need for providers and commissioners to 'advertise' their services, people not knowing how to access support (particularly if a warden had been removed) and problems in services identifying who required support. One organisation queried who would carry out needs assessments.

In relation to issues connected with change, the overriding concern was the impact on service users, although slightly different issues were raised by different agencies. Concerns included a need to implement change slowly and sensitively and to manage the expectations of existing tenants, as well as concerns regarding possible resistance to change from service users and the need to 'sell' changes in a way that elicited positive responses. It was also noted that 'change is better if it's led by

tenants'. Resistance to change from service providers, staff (within both provider organisations and the local authority) and other stakeholders was also raised.

Issues to do with alarms are largely covered in the analysis above. While many agencies were clear that hardwired alarms were not compatible with successful implementation of the Aylward recommendation, references to the 'huge costs' of upgrading or changing alarm systems suggested that this was a particularly difficult issue. A further comment noted that while providers were aware of the need to review hardwired alarms and telecare systems, this was rarely an organisational priority.

Conclusions from the 2014 survey

It was clear from the qualitative data that the majority of respondents were familiar with the Aylward recommendation and the requirement to make changes to tenure-dependent services. However, the comments made and the timescales given indicated that the large majority of respondents were still working on implementation and that many were at a formative stage.

While some respondents gave information about specific changes made, further clarity and detail were needed as to what kind of changes were being implemented and how these had been achieved. In particular, it was necessary to get a better picture of the type and level of support available in community settings, a sense of who was able to access services and the equality of access to services.

Many services which were identified as being available according to need but actually remained available only to tenants (despite the definition of 'need' as being 'where anyone can access the service irrespective of where they live'). This potentially indicates that there might be some lack of clarity as to both the meaning of the Aylward recommendation and the role of services available only to RSL and local authority tenants in successful implementation. It was therefore important to get a better picture of how far local authorities were still relying on tenure–dependent services in their overall provision.

3b. Stage Two: 2015 surveys

Findings
These web-based surveys for local authorities and providers were undertaken to obtain an update on the information provided through the 2014 survey, as well as to garner further detail on the tenure of individuals receiving older people's services.

Quantitative data

The 2015 surveys obtained an update on the information provided in 2014 and provided more detailed information on the numbers of individuals receiving both accommodation-based and non-accommodation-based services, and the tenure of the latter. Local authorities were asked to complete one survey and providers to complete another. Of the 22 local authorities in Wales, 21 completed the survey in time to be included in the analysis. Of these, the information from two respondents was excluded from some elements of the analysis because the local authorities were not in a position to provide specific data in these areas. Two local authorities indicated that they did not commission services in 'units' of support. In one case the authority commissioned support in terms of hours, and in the other, support was commissioned against demand. This demonstrated that while 'units' of support are typically used as a measure of Supporting People services, there are limitations on this practice.

Caveats
While the data obtained from both local authorities and providers was comprehensive, there were variations in how questions were answered and the findings must be caveated to make these issues clear. The reasons for the differences in how the questions were answered are not definitively known, but likely issues include:-
- data is collected and recorded in different ways by different respondents;
- respondents referred to different timescales while completing the survey; and
- respondents had different understanding of key terms.

In some cases it became clear that a respondent had omitted certain services, in others the figures given by service providers did not match the figures given by local authorities while other respondents indicated that the figures given were expected to change substantially in the future. Problems were also encountered when organisations which provided very high amounts of support gave an overall figure for a number of units available to a particular tenure group, but indicated that some of these were available to other groups without giving precise or guide figures for this. In addition, some large providers that were specific to particular local authority areas (including local authority providers) did not complete the survey, causing disproportionate gaps in services. There was also potential for distortion of data in

cases when the majority of respondents gave an overall figure of units provided by an RSL or local authority and a split as to how many of these units were provided to tenants, while others simply gave an overall figure.

In most local authority areas, there was a difference between the figures provided by local authorities and those given by service providers. Much of this could be attributed to the fact that the numbers of people receiving SPPG-funded older people's services frequently fluctuates, as individuals require more or less support. In addition, respondents in some cases provided figures for timescales other than what was requested (the survey requested figures as of 'today', but in some cases respondents provided annual figures or figures for another period of time). It was also possible that in some cases, service providers used the word 'tenants' as a generic term to cover any service users.

For the reasons outlined above, the data cannot be considered to be definitive, but provides an indication of the situation regarding the provision of older people's services.

Alarm-only units of support were excluded from the majority of the survey questions, as the high numbers of these and the restricted type of the support provided would have distorted the findings in relation to other forms of support. However, local authorities were asked to provide some basic information about alarm-only units. This indicated that 19,947 units of alarm-only units of support were being provided across Wales. Respondents were asked whether these alarms were hardwired or lifeline models, but as one-third of respondents did not have this information, no findings could be drawn.

Responses to the local authority survey indicated that across Wales, the large majority of units of support (74 per cent) were commissioned by local authorities as 'fixed' support (accommodation-based), with the remainder commissioned as 'floating' support (non-accommodation-based). However, in some local authority responses, the number of floating units included support that was available only to tenants of the local authority or RSLs, so remained accommodation based.

Local authorities were asked to provide the tenure of recipients of floating support, as far as they were able. Although it was anticipated that some local authorities might not be able to provide this information, most gave an indication. The figures provided suggested that nearly half of the floating units of support (47 per cent) were provided to RSL tenants, with 15 per cent provided to local authority tenants. While a small minority (2 per cent) were stated to be provided to owner-occupiers or individuals renting in the private sector, a high number (36 per cent) were stated to be provided to individuals whose tenure could not be identified. In the vast bulk of these cases (over 99.5 percent) the reason for the non-identification of tenure was

that these units were available to individuals irrespective of tenure (and information on tenure was therefore not recorded).

While these figures cannot be considered definitive, they strongly suggest that floating support is not as readily available as fixed site support and within floating support itself, the majority of support was more readily available to RSL and local authority tenants than to other individuals, although over a third was available on a tenure-neutral basis.

Local authorities were also asked to give a breakdown by provider of all the SPPG-funded dedicated older person services that they commissioned, indicating whether they expected each provider to provide services only to their own tenants, or to tenants and other individuals. The number of units of support commissioned to be available only to the tenants of providers varied widely across local authorities, from 10 per cent to 100 per cent of units of support. Fourteen local authorities (out of the 19 for which these figures could be calculated) commissioned 80 per cent or more of their units of RSL and/or local authority provided support, to their tenants only (although in one of these cases it was noted that these units were starting to become available more widely). Five of these local authorities were commissioning 95 per cent or more of their units of support in this way.

Overall, across both fixed and floating units of support, local authorities indicated that of the units they commissioned, nearly half (43 per cent) were available only to tenants of RSLs and 38 per cent were available only to local authority tenants. In total, 19 per cent of support was identified as being available to anyone, regardless of tenure. In providing these figures, local authorities sometimes indicated that the figures were not necessarily indicative of future provision. In particular, respondents stated that services then available to local authority or RSL tenants were being expanded to provide tenure-neutral support in community settings, although the amount of support provided in the community and the pace of change were not quantified.
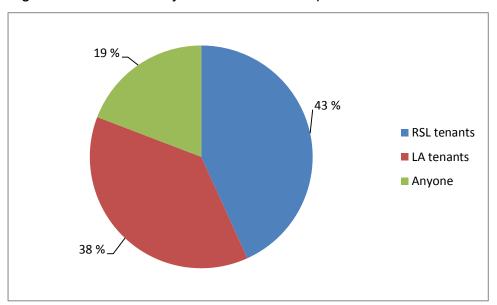
Figure 3: Local authority units available to specific tenants.

Base; 18,244

Providers were asked to give information about the numbers and tenure of individuals using their services. This was in part to cross-reference the information provided by local authorities, and also to obtain information in relation to tenure that local authorities were not able to provide, including the tenure of recipients of support available in cross-tenure settings.

Across Wales, providers indicated that of the 19 per cent of units that were available regardless of tenure, just under a third (31 per cent) were provided to RSL tenants and a similar amount (30 per cent) to local authority tenants. Just over a tenth (11 per cent) was provided to owner occupiers and individuals in private rented accommodation. In the remaining cases (27 per cent) the provider did not identify the tenure of the recipient or stated that this information was not collected unless it was of relevance to the support provided. As not all providers completed the survey, particularly local authorities in their capacity as service providers (which tended to deliver large amounts of support), there was some missing information in these figures. Where possible, information in relation to local authority providers was obtained from the figures provided by the relevant local authority in its capacity as a service commissioner (i.e. the local authority survey) but this had potential for inaccuracies. As such these figures cannot be considered representative, but may provide an indication of where services are being delivered.

The figures outlined below do not reflect the composition of the population of those aged over 50. Figures from the 2011 Census illustrate that of those aged over 50 in Wales, 77% are owner occupiers with 15% living in social housing and 8% renting privately. The figures gathered for this research indicate that 60% of units are offered to social housing tenants, and only 11% to those in the private sector.
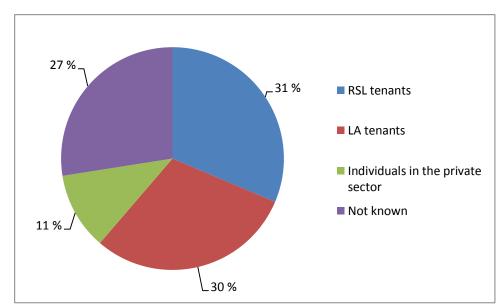
Figure 4: Provider units available to specific tenants.

Base; 2,736

It is clear from the survey that support was more accessible to tenants of RSLs and local authorities than to individuals in other forms of accommodation. This was a feature of how services were being commissioned by local authorities and in how they were being delivered by service providers. Neither group of respondents was asked to justify the allocation of support. It was possible that services were concentrated in these tenure groups because of higher levels of need, although there was no evidence of this.   However, the qualitative information from both the 2014 and 2015 surveys, and information from the semi-structured interviews conducted after the 2015 survey, suggested that – where providers are concerned – moving support from tenants to other individuals is a gradual process.

Quantitative information by region
The figures for units of fixed and floating support and the breakdown of recipients of fixed and floating support combined, were broken down by RCC region. Given that some RCCs comprise only two local authority areas, any gaps or inaccuracies in the information were highlighted as it was possible for developments in one local authority area to distort the findings for the RCC as a whole. However, the figures served to cross-reference the information provided by the 2014 survey and the information given in RCC updates.

In terms of the numbers of units commissioned as fixed and floating units, the split ranged from 98 per cent of units commissioned as fixed to a 50/50 split between fixed and floating units. The number of both fixed and floating units expected by local authorities to be available to anyone regardless of tenure ranged from four to 35 per

cent. Given that some areas stated that they had largely implemented the recommendation, these figures were lower than expected. Figures for two RCCs could not be accurately ascertained owing to gaps in information.

Qualitative information

Local authorities were asked to provide information on eligibility criteria, commissioning principles and referral systems for SPPG–funded older people's services via the online survey and via a provision of documentation covering these areas. This was in order to understand the role of tenure and need within structures and delivery of services.

A desk-top exercise was undertaken to review and analyse the information provided, typically information was provided in the form of further documents, such as local commissioning plans and full statements of SPPG eligibility criteria. The following sections report on the findings of both the survey and the desktop review in these areas.

Eligibility criteria

Six local authorities stated that they did not have eligibility criteria for older people's services that they required providers to follow. The remaining 15 respondents were asked to expand on how they required these criteria to be applied.
Three local authorities stated that the criteria were specific to each service. One noted that criteria focused on the need for housing-related support and service users' need to regain or retain their independence. One respondent stated that they did not have their own eligibility criteria and that establishing eligibility was the responsibility of the providers, and one commented that while providers held their own criteria, sheltered housing was generally available to those aged 60 and over or those aged 55 and over with a medical need, and that extra care housing was allocated on the basis of an applicant's needs.

A further local authority stated that eligibility for sheltered housing and extra care schemes were determined by the relevant provider, but suggested that eligibility was established by the local authority for floating support services. While eligibility for the floating support service was a combination of age (over 50) and existence of a housing-related support need, only age-related criteria (50 or 55) were mentioned in relation to the sheltered and extra care schemes. Four local authorities also commented that eligibility criteria were specific to particular services.

Two local authorities stated that they used the SPPG Guidance as their eligibility criteria. One of these stated that the authority also had its own booklet to highlight eligibility and used a referral form and central gateway including mandatory

questions to evidence eligibility. A further respondent referred to general 'allowable activities' for Supporting People services.

Of the remaining responses, one referred to financial eligibility, one to generic eligibility criteria for all Supporting People services, and one stated that individuals were eligible on existence of a housing-related support need.

Supplementary documents relating to eligibility criteria were sent by six local authorities, of which two comprised information on 'allowable activities' and one detailed financial eligibility criteria in relation to charging for services. Documents from the remaining three local authorities all indicated that eligibility for services required a housing-related need, although age criteria were also applied.

Where service providers gave information in relation to eligibility criteria, responses indicated that these were most commonly based on age, with the second most common criteria being age combined with existence of a support need. Small numbers of respondents (generally one or two in each case) also mentioned other criteria, such as support needs alone, age and locality, or anyone in crisis needing housing support.

It was therefore clear that while the existence of housing-related support needs was explicitly mentioned by some respondents (particularly local authorities), eligibility for many services was apparently based on age alone.

Commissioning criteria

Local authorities were asked to forward a copy of their current commissioning criteria (i.e. the principles, plans and priorities established by the local authority to guide the commissioning of services) for SPPG-funded older person services, and invited to comment on commissioning if they wished. Thirteen respondents made a substantive comment here. Four of these stated that the criteria used were those outlined in the SPPG Guidance and one of these gave further information relating to ongoing reviews of services, the impact of funding cuts and the implementation of a decommissioning strategy to focus on services identified as priorities. Three respondents stated that criteria were in draft or under review (two respondents were in the process of retendering services). Three local authorities stated that they did not have commissioning criteria or did not know what was being referred to. One respondent stated that services were commissioned according to the commissioning and procurement processes of the local authority, but gave no further detail and one stated that the local authority commissioned against demand rather than against criteria for older person services.

Nine local authorities forwarded documents in relation to commissioning criteria. These documents included four Supporting People Local Commissioning Plans and one Supporting People strategic plan. Other documents sent included a Supporting People decommissioning strategy, a commissioning and contracting framework for

wider social services, internal commissioning principles for housing-related support and extracts from an internal document relating to Supporting People funding.

These documents varied considerably in their discussion of commissioning strategies and of changes being made in relation to specific service user groups, such as older people. Two of these documents made no reference to older people, but of the five documents referring to strategies specifically in relation to these services, two indicated that services were being re-modelled and one that services were being retendered. There were differences in the perceived priority of services for older people, with one local authority considering these as a key area for service development and another rating it as a low priority area.

In terms of the drivers of change to services, while there were allusions to the SPPG Guidance and the Aylward recommendation in many of these documents, it was clear that the wider statutory context was also of particular importance, with discussion of the impact of the Housing (Wales) Act 2014 and the Social Services and Well-being (Wales) Act 2014 found in the majority. Cuts to the funding of Supporting People services was another common theme, again appearing in the majority of the documents.

Referrals

Local authorities were asked whether referrals were made internally, by service providers, from external agencies or from both. Every local authority stated that referrals came from both routes.

In terms of external agencies, every local authority stated that referrals came from social services, with also 20 stating that they received referrals from health services, 20 receiving them from homelessness agencies and 14 receiving them from the probation services.

When asked to state which other agencies made referrals, nine local authorities stated that self-referrals were permitted, with voluntary or third sector agencies and housing providers (including private landlords) also mentioned. One respondent emphasised the range of referral sources, stating that they could come from the emergency services, members of the public, family members and neighbours, including shop-keepers.

Local authorities were asked whether referrals were made direct to the service provider, via a central gateway or both. The majority (11) used both systems, with referrals made directly to service providers in six local authorities and only via a central gateway in three. When asked to elaborate on referrals, no local authorities commented on the merits of these different systems. However, five local authorities stated that referrals for floating or tenure-neutral support services came through a central gateway, which may suggest this is a preferred route for tenure-neutral support. Two local authorities noted that a central gateway for referrals was in

development. Other authorities noted that referrals for accommodation-based or sheltered housing schemes came via the Common Housing Register or equivalent, suggesting that these services might be subject to further eligibility criteria beyond those applying to Supporting People funding.

One respondent stated that: "In accordance with the Aylward principle we are allowing landlords to identify those service users that have need for housing support service". This comment reinforced the findings from the 2014 survey that services in a tenure-dependent setting are considered compliant with the Aylward recommendation, so long as they are provided according to need.

Action to implement the Aylward recommendation

Local Authorities

Local authorities were asked to state how they were working with providers to implement the Aylward recommendation. Most local authorities provided some information here, although in a few cases this was very limited and referred either to the plans and activities of the local RCC, or simply included a statement that the local authority was working with providers to ensure that the recommendation would be implemented. Timescales were given for future activities in three cases (one referred to the decommissioning of alarm services in 2015/16, one to a review starting in May 2015 and one to new services being put to tender in 2015).

Despite being asked to provide specific examples, information given here was generally brief. The most common example given for a way that local authorities had implemented the SP guidelines was by remodelling services to be based on need. Of services which had been remodelled, or where remodelling was in progress or planned, the models that were generally used or anticipated were floating support (seven models in progress or planned) or hub and spoke/community warden models (four models in progress or planned). One local authority was planning to use these models in combination and another stated that they were planning a complete overhaul of accommodation services to hub and spoke models, involving the development of temporary community hubs until Extra Care services could be adapted.

In two cases it was apparent that while services were moving towards a 'needs-based' approach, these were still available only to tenants, although in one case the respondent indicated that this was the first stage towards making services more widely available across tenure. In three others, a large bulk of support was stated or appeared to remain available only to tenants. In one of these it was noted that this was because many tenants had been transitioned with the old service, and that these tenants were receiving needs assessments and being signposted to other services where necessary. The other two services were moving towards hub and spoke models. These comments suggested that in many cases moving to new models was being undertaken as a gradual process. They also suggested that

terms such as 'needs-based' or 'needs-led' are still frequently being used to describe successful implementation of the Aylward recommendation, giving scope for confusion of the precise terms of the recommendation.

Providers

Providers were asked if they had made any significant changes to their services since the survey was conducted in January 2014, and were also given the opportunity to add any further information. Just over half the respondents stated that they had not made any changes. Other responses to this question were generally very brief, although a few were substantial. As the responses to both questions overlapped, they are considered together.

The most common theme within the responses was the provision of some level of community support (nine references), including explicit references to hub and spoke models or 'community hubs'. The level and type of this varied from extension of support services to individuals in the local community, to opening up activities within sheltered housing schemes, to statements of notional capacity available for community support depending on the levels of need among tenants. There were three mentions of floating support services in operation.

Eight providers had recently undergone or were currently reviewing their services and one was planning to conduct a review of its service in 2015/16. Six respondents alluded to the need for partnership working and/or the benefits of this and five commented on resourcing issues, including the impact of funding cuts and the need for efficiency or savings within services. In relation to funding, two respondents noted that they had now moved to block contracts. Three respondents discussed financial eligibility for services. Two of these noted the removal of any financial eligibility criteria for Supporting People while the third, in contrast, stated that support was 'determined' by eligibility for Housing Benefit.

Four respondents stated or implied that tenants were now only able to receive support if they had a need for it. In terms of the language used when referring to remodelled services, services were typically described as 'based on need' (six mentions), although the phrase 'tenure neutral' was also frequently used (five mentions).

Four respondents commented on the value of the services currently being provided – both in terms of appreciation of them by tenants and in terms of cost efficiency and enabling individuals to live independently for longer. Three respondents commented on changes to alarm services, with one removing hardwired alarms from sheltered housing stock, one changing from hardwired to lifeline alarms in sheltered schemes, and one removing lifeline alarms from 'Category 1' housing where tenants did not want them.

Other issues mentioned were: staffing issues (changes from residential to non-residential staff, staff training, and the benefits to staff and service users of team working), the separation of landlord and support functions; and the preference for older people to stay in their own homes or the existence of need in the private sector. Three providers, all within the same local authority area, referred to working in partnership with other providers on a 'localities approach'.

Timescales for any future changes to services were provided in only a couple of cases.

The responses to these questions suggested in particular that a variety of hub and spoke models and floating models were being implemented in order to implement the Aylward recommendation. This tied in with information provided in both the 2014 survey and the RCC updates. However, it was clear that movement towards these models was gradual, and when considered in the light of the quantitative data it appeared that the extension of support into the community was still highly restricted.

Key themes from semi-structured interviews

To gain a more in-depth understanding of the current situation in older people's services, interviews were undertaken in three case study areas. In each area an interview (face-to-face or by telephone) was undertaken with representatives from the local authority and a provider of older people's services. While local authorities and providers were interviewed separately, in two interviews, two individuals (both from same organisation) took part in the same interview.

The summaries below outline how older people's services changed in the case study areas:

Area A:

Local Authority (Torfaen) **Contact:** Bethan Covill (Bethan.Covill@torfaen.gov.uk)

Before:

Older people's services had mostly changed from wardens living on site, although there was one remaining service with a traditional warden still on site. However the model of support across some services also needed to modernise further.

After Change:

With the shift from more traditional warden services, there has always been an expectation for support plans to be in place for each person supported , and with the development of the SP Outcomes, these plans are more outcomes-focused. Support workers are still required to complete a needs assessment to accompany the support plan as well as a risk assessment. . The support provided is fluid and relevant to each individual being supported, particularly relating to their stage of tenancy (or tenure). There has been a change in job roles for wardens as the responsibilities and expectations changed. In some cases, the warden role is still present but the expectation is that the staff have to take on more of a professional role through creating support plans and providing support in accordance with the support needs of the individual. Support providers are clearer about the expectations of the local authority and are aware that they will be monitored on them.

The support role is more specific, distinctive and separate from a warden role. For example, one service provides support for people with a wide range of needs, such as alcohol issues, mental health etc, i.e. not only older people's support. This provider offers low level support and can signpost to other services where necessary. All older persons' services have moved to a floating support model, based on needs and not tenure.

Provider (Bron Afon) **Contact:** Denise Pearce (denise.pearce@bronafon.org.uk)

Before:

This housing association previously provided a traditional 'warden' service in 23 sheltered housing schemes. The warden lived at the schemes and was on call 24/7 providing daily welfare checks to all tenants regardless of their needs. The warden was also involved in organising social events and performing some landlord functions such as reporting repairs.

After changes:

The new model saw staff move out and take on a more professional role as sheltered housing officers, often managing more than one scheme.

There was another change to the model a couple of years before the Aylward review which promoted a move towards a needs-led service delivered by Support Workers. There was a move away from the traditional warden style to a service provided only to those who had an identified support need. Residents referred into the service will receive a service that addresses their need. This model is thought to encourage Support Workers to work as a team as opposed to in isolation. It also means that residents in individual areas will not always be supported by the same Support Worker, but will receive support whenever they require it. This model is being delivered to all tenures in the community. Residents are now seeing the benefits of this floating support system.

Area B

Provider (Local Authority)(Wrexham) **Contact:** Julie M Francis (Julie.Francis@wrexham.gov.uk)

Before:

All the services were previously supported by wardens who provided a low level support for tenants in the form of benefit checks and morning calls. The level of support offered was flexible and tenants who required future support were signposted by wardens to more appropriate services.

There was also a floating support service where the support worker would visit the individual homes once or twice a week to provide support so residents could maintain their independence (based on support plans). The aim of this service was to reach out to people who were not otherwise known to services and this in turn could encourage self referrals from people who heard of the service from word of mouth.

After Change:

There are now new services including the hub and spoke schemes and a two-tier model. Tier one is seen as a replacement of the floating service, as it offers short-term support for a maximum of 12 weeks. The service users will have individual and person-centred support plans and these will identify what they are capable of doing themselves. This emphasises a change from doing things for tenants to supporting tenants to do it themselves. The hub and spoke model has meant that the warden is spending time away from the scheme and in the community, which has in turn encouraged tenants to organise more communal activities themselves.

The second tier is aimed at enabling a person to stay independent with control over their housing situation and enable them to move on from support within the two year timescale. Each service user will have a needs assessment and an individual support plan. Support at this level is more intensive. Tenants are only able to access tier two when they have used tier one. The same staff works on both tiers to ensure a seamless service is provided. Tier two has a charge attached to it and provides a more intensive service than traditional warden support. The charge is means tested and housing benefits will be exempt. This is funded by Supporting People and managed by the Supporting People team.

Provider (also Local Authority) (Wrexham) **Contact:** Victoria Bishop (Victoria.Bishop@wrexham.gov.uk)

Before:

The Sheltered Housing Service provided a universal service by way of a daily visit to all tenants of 23 sheltered housing schemes across Wrexham regardless of need; this was delivered by a mix of residential and non-residential Wardens. Wardens provide a health and well-being check and low level housing-related support e.g. support to understand letters, contact other services to arrange appointments, repairs etc. People accessing the service are 60 plus.

After Change:

In anticipation of the Aylward recommendation, WCBC received member approval to pilot a new way of delivering the Sheltered Housing and Warden Service. People are now supported at different levels, dependent on the outcome of a needs assessment with some people receiving a low level service of just one visit a week moving up to the maximum service which has seen the seven day service maintained for those who need it. The change in the way the service is delivered has meant there has been capacity created to expand the service to people living in their own homes in a 'hub and spoke' type of a model. The service now supports 25% more older people, all Wardens are employed to be mobile so whilst some still 'live in', they are all required to support people in the wider community. The service now meets the needs of service users better by enabling people to do more for themselves, it does

not create dependency and meets the requirements of the Supporting People Programme Guidance of supporting people on a tenure-neutral basis.

Area C:

Local Authority (Ceredigion) **Contact:** Matthew Richards (Matthew.Richards@ceredigion.gov.uk)

Before:

In the original service provided by an RSL, the warden lived at the scheme providing daily visits whether it was needed or not and were on call 24/7. The wardens were seen very much as the resident's friends. Boundaries between friend and support worker could be blurred. The warden was also responsible for organising group outings, coffee mornings and reporting repairs that were necessary to communal areas.

After Change: In pilot areas

The first change was to pilot a generic floating support scheme which initially provided support to the housing stock. It was serving the needs of the provider but not of the local authority. This scheme then merged with the three sheltered schemes to create a new older person-specific floating tenure-neutral support scheme. The wardens are no longer there all the time, but they do come back after they have been working in the community and morning phone calls and activities still occur. They now provide coffee mornings once a week and they make sure there is always a member of provider staff there. The changes for staff mean they now deal with people in the community and those in the community now have equal access to support. Those who still need support are signposted to the new schemes and services from other providers.

Provider: (Cantref) **Contact**: Louise Webster (louisew@cantref.co.uk)

Before:

There were formally three traditional sheltered housing schemes; all with "live in" wardens who provided basic tenancy support and housing management services to include morning calls to tenants. The "wardens" delivered a good service to tenants, however they were extremely isolated and delivered services based on need; following a very old fashioned traditional model.

After change:

Whereas it was decided to retain "live in" wardens (Independent Living Officers), there has been a shift in professionalism and service delivered by the Independent Living Officers. The Independent Living Officers are now part of a team to include Supported Housing Officers who work together in delivering support based on need not tenure, having undergone training, shadowing and team building – thus

alleviating their feelings of isolation. All staff deliver support to those who need it in the schemes and out in the community, support is housing-related and person-centred; ensuring that service users' goals and aspirations are met.

The Independent Living Officers continue to deliver an element of housing management at the schemes in conjunction with support to those who need it; however now supported by a wider team, thus delivering improved services across the board.

Key findings from Interviews

A thematic analysis was undertaken on the information gathered as part of the interviews. This section presents the key themes arising from that analysis.

A note on terminology: Many interviewees preferred to avoid the terms 'sheltered housing' and 'warden', using instead terms such as 'independent living schemes' and 'scheme managers'. Similarly, there were different terms for individuals using services. This section uses the term 'sheltered housing' and 'warden' for clarity in description, as the parameters of these terms and their historical remit are widely understood.

1. ***The impact of the Aylward Review and the specific 'older people services' recommendation***
Across the interviewees there was general consensus that the Aylward Review had had a positive impact in terms of supporting local authorities and providers in making changes. The Review had in some cases confirmed that local or organisational views were in line with developing Welsh Government policy, and in others had provided a tool to persuade providers and/or service users that change was now required. In five out of the six interviews, interviewees indicated that similar changes were already being considered prior to the recommendation, although in one of these cases this was in response to new funding arrangements which may in turn have been due to the Review. The remaining interviewee stated that they would not have considered adapting their services if they had not been required to do so, although they felt that the changes they had made were very positive and 'the best thing that happened'. Both these latter interviewees were from provider organisations.

Across the interviews where an opinion was expressed, there was general agreement that the changes made had been a positive step, although this was felt more strongly by some interviewees than others. On occasion this was expressed in terms of fairness in access to services and in others consideration was given to a reduction in unnecessary support and the separation of support from the landlord and property management functions also provided by RSLs. Encouraging independence and a greater responsibility for activities within the sheltered schemed

for service users was also mentioned, although one interviewee noted that the loss of the warden role had made it difficult to keep some schemes socially active.

Greater professionalism in the remodelled services and more focused support, were also mentioned as benefits. However, three interviewees stated that the outcomes requirements for SPPG-funded services, which focus on short-term support and improvement in service user independence, are not necessarily appropriate for older people services, which are frequently aimed more at preventing or delaying deterioration and which may need to be long-term.

One provider organisation in particular was very clear that the changes brought about were a very significant improvement from the traditional sheltered housing schemes they had previously been providing. This interviewee indicated that although they were now providing support to far fewer people, the level of support they were able to give and the impact on those receiving it, was now 'life changing' in comparison with the 'minimal' level of support that their traditional warden services had previously provided.

Two interviewees discussed or alluded to the importance for local authorities of elected members being fully informed about the changes being made and the reasons for them. This reflected comments in the update information provided by RCCs that there is local political concern about changes to older people's services which is a complicating factor in implementation of the recommendation.

2. How did services change?

The ways in which the services changed varied, some moved to a 'hub and spoke' model, whereby a warden is based at a scheme but can also provide support out in the community. Others have chosen to break the link between specific schemes and warden so that staff provide support across a number of different areas, without being linked to one particular scheme. Despite the variation in how services changed, all interviewees reported the changes were underpinned by the provision of support based on need, as identified via needs assessments.

3. The process of change

All interviewees were aware of the considerable impact that changes to older people's services would have on both the staff and service users. As such, change was typically managed in a stage by stage approach ensuring that both staff and service users were engaged in the changes and had ample opportunity to voice their views. Some interviewees undertook pilots in order to ascertain how the changes worked on a smaller scale. Most interviewees acknowledged that key to success is a slow period of transition where both staff and service users have the time to understand and adjust to the changes.

In one area, the pilot was led by a steering group which included residents. A consultation was held with staff, making it clear that although their roles were to change significantly, support and training would be provided to help them through the changes. As well as training, staff were supported by monthly meetings and working groups where they could meet other wardens to discuss the changes and voice their opinions. The pilot also included a consultation with residents which took on board residents' concerns but also made clear that the changes would not result in gaps in support. The consultation also promoted other avenues of support, such as telecare. While the aim was for support in this area to become needs-based, if someone still needed support seven days a week, this would still be available. The interviewee in this area felt that the inclusion of the residents on the steering board was important in developing the final service. Those residents were also key to the roll out of the pilot, as they were able to reassure residents in areas new to the changes that the resulting service would still meet their needs.

In another area, the changes were undertaken in piecemeal fashion whereby wardens extended into the community slowly. In order to make sure that the change was complete, staff did not support service users who they had previously supported, if more than one service user from the same scheme required support each was supported by a different member of staff. This ensured that the remodelled service was 'fresh'.

Whilst engaging with service users and their families could be formal, such as the consultation outlined above, there were also examples of more informal approaches and follow-ups, such as staff attendance at coffee mornings or residents' meetings throughout the period of change to ensure that there were regular opportunities for communication. As well as public meetings, some schemes held one-on-one drop-in sessions for residents to discuss their concerns privately.

4. Remodelling Services: *The impact on staff*

All the provider organisation interviewees spoke in detail about staffing issues in their remodelled services and the impact of the changes on staff. In all three cases, it was clear that the role of support staff in the remodelled services was very different from the former 'warden' or 'good neighbour' role. Staff had often held these roles for many years, and all reported some level of initial reluctance from staff to take on the new roles. All interviewees discussed the high levels of staff training that were required for them to be able to fulfil the new role, although there was general agreement that the staff development had been a positive step (both on an organisational and individual basis). One interviewee stated that training needs had been extensive and had included support in basic skills, such as literacy and numeracy.

Interviewees from provider organisations generally felt that the remodelled services and the new roles had brought benefits for staff members, including the development

of new skills, a more professional role and the development of team working. This last point was found to be of particular importance, as it had reduced the isolation of individual staff members, enabled peer support and brought benefits to service users. In one case, team working had enabled staff members to 'champion' particular issues (such as mental health or benefits), with champions having responsibility for keeping up-to-date in these areas, advising other team members of developments and providing other informal support to peers on a case-by-case basis. This had benefits for service users, who had access to support workers with higher levels of expertise and who could in some cases be 'matched' to a support worker with particular expertise. In other cases, service users in sheltered housing schemes had also benefited from having access to more than one support worker, with this cited as a particular benefit in terms of access to different skills and when the existing warden or support worker was on leave or unwell.   Wider team working benefits were also mentioned, such as working with other teams such as those involved in social services to avoid duplication.

Two interviewees noted the need to require service providers as a whole to develop new expertise, including the paperwork required to provide more formally constructed support. In one area, peer support across organisations and the sharing of existing procedures had been encouraged.

5. Remodelling Services: The impact on service users

Remodelled services had inevitably also had an impact on service users. While some of these were positive, all interviewees had experienced or were aware of, initial (and sometimes ongoing) concerns from service users and family members about the proposed changes. This was generally attributed to concerns both about loss of a service and about 'sharing' support previously dedicated to one particular group of people with other people living outside sheltered schemes. One interviewee noted that it was sometimes unclear whether service users were concerned about the loss of dedicated support in itself or the potential loss of contact with a particular individual, who was a source of contact, support and friendship. This interviewee also noted that there was often a desire among service users to protect their warden's well-being.

However, most interviewees reported that despite initial concerns, service users have adapted well to the changes. The emphasis of some services changed to that of encouraging independence, one interviewee reported that some service users found this initial change difficult, while others found it liberating.

Interviewees who had been more closely involved with the process of change, had all engaged in or been aware of high levels of consultation with service users. All independently stated that this had by necessity, been undertaken slowly and that 'rushing' this process would have been counter-productive. One interviewee

described an initial consultation of six months, followed by a 12 month pilot before any further roll-out and another had undertaken discussion with staff and service users over a similar timeframe before making any substantial changes to services. One of the interviewees who had been less involved in the process of change stated that the roll-out of remodelled services had taken much longer than originally anticipated. In both areas where interviewees were able to give extensive information, service users had formed part of the steering or project group which had guided the changes. In one of these cases residents from the sheltered housing scheme where the pilot had been undertaken, had been highly involved in explaining the changes to other schemes in the region.

In general, interviewees stated that where service users required a service they were still able to access it.

6. *Remodelling services: Capacity and resources*

When asked about the cost impact of remodelled services, in five out of six interviews interviewees stated that services delivered in the community were more resource-intensive than those delivered in sheltered housing schemes (sometimes substantially so). It was clear that services provided 'in the community' were not able to reach the same number of people as support delivered in sheltered services, or would need substantially more resources to be able to do so. This was frequently attributed to travel time between appointments. While this was particularly important in rural areas, it was also an issue both in urban areas and where community services were delivered in the locality of the sheltered scheme. Where rural areas were concerned, there were particular resource implications. One interviewee note that while hub and spoke schemes would be viable in some more densely populated parts of the local authority region, they were not feasible in the rural areas and that other solutions would be required in these.

Where hub and spoke schemes were in operation, there was general agreement among interviewees that capacity had been freed up to provide work in the wider community. This was done by removing services from those who, after a needs assessment had been conducted, were found not to need support within the sheltered schemes. However, one interviewee had placed an extra support worker in a pilot project and in another case the provider organisation had been able to merge an existing floating service into the new hub and spoke model.

All the provider organisations interviewed also confirmed that they had drawn on resources from other areas of their organisation to make the remodelled services a success, with the sustainability of this questioned in some cases. In one case the provider organisation had funded an extra post, and in others staff from other services had been absorbed into the remodelled service. In some cases there had also been some elements of financial subsidy for the new services and support 'in kind', such as the extension of management and administrative support.

Many interviewees referred to flexibility in the system, which enabled traditional 'warden' services to continue to some extent, even where service users were not receiving formal support. One interviewee noted that some providers continue to provide 'warden' services at their own cost.

Three interviewees explicitly referred to the funding environment and the need to make resources 'go further'. Four interviewees discussed or touched on the need to connect to other organisations providing similar services to ensure both that different types of need were met, and that service users or potential service users were not 'falling through the net' and receiving no services. One interviewee specifically connected the need for organisations to work together as a means of meeting the challenges posed by service delivery in rural areas. In all three of the areas, a central 'gateway' to services was either being used or was in development, either to ensure that individuals obtained an appropriate service or to prioritise need, or to perform both these functions.

7. The loss of 'befriending' and 'good neighbour' roles

Many interviewees alluded to a potential overlap between housing-related support and befriending or 'good neighbour' roles. All interviewees who raised this concern were clear that befriending is not the role of Supporting People services, but many also noted that there is a need for this type of service where older people services are concerned. Although there was general consensus that the changes made to services in the light of the Aylward recommendation were a positive step, many interviewees placed great value on the regular 'low level' support typically offered by 'warden' and 'welfare check' services. This support was sometimes seen to be key in preventing escalating problems and the need for higher level intervention, and was considered to have saved lives on occasion. In one case, an interviewee felt that the service formerly provided by wardens was 'minimal', but had sourced funding for a befriending service to partially replace this role.

One interviewee mentioned that where services were shifting from support provided only in sheltered housing schemes to hub and spoke models, the type of support offered within the scheme was different from that offered externally. Within the scheme, the service tended to follow old patterns of low level 'good neighbour' support whereas externally, support followed a more structured format, with a clear end date. This contrasted with the approach taken by the third provider, which had proactively broken the link between former 'wardens' and the scheme they had been providing support to. This had been seen as a critical part of the service remodelling, and had allowed support staff to develop a new form of relationship with service users.

8. Alarms

In relation to alarms interviewees raised a number of points, although two did not comment extensively. It was clear that while there is general consensus that hardwired alarms may not 'fit' with the Aylward recommendation, local authorities and providers are dealing with this point in different ways. This issue was complicated by the fact that individuals may access a particular property to solve a housing problem rather than a support need. It was also clear that there are multiple difficulties arising around alarms which present in different ways in different areas or to different agencies. This tied in with information emerging from the narrative data from the 2014 survey.

Two interviewees (both from local authorities) queried whether alarms should receive any element of SPPG funding. One of these noted that while alarms could be based on need if they were not hardwired, they remained difficult to reconcile with the overall purpose of Supporting People – which is to provide a planned programme of support – and the outcomes framework. (However, it should be noted that – as stated above – various interviewees raised wider questions as to whether this model of short-term support and the outcomes framework are in any case appropriate for older people.) The other interviewee queried the funding of a service that provided no human contact. Both these interviewees pointed out that where alarms were concerned, SPPG funding was to a large extent contributing to equipment costs, with one noting that this potentially included maintenance and depreciation. On this point, there is clear guidance from the National Housing Federation[4] that Supporting People funding should only cover the cost of the alarm itself and not the more general costs, as these costs are eligible for Housing Benefit:

"Charges in respect of the provision of an emergency alarm system are not eligible for Housing Benefit, although the alarm service may be linked to the door entry, or security system, which are eligible."

Equality issues were also raised. One interviewee noted that as alarms had historically only been funded in sheltered housing schemes, this raised a question as to whether alarms should be offered within the community as well. However, in another local authority area hardwired alarms remained in the sheltered schemes, and had been upgraded to enable the provision of telecare and telehealth[5]. In this region it was also a condition of receiving support in the community that an alarm was installed, both for reasons of equality and because it was considered appropriate to attempt less intrusive forms of support before progressing to more intensive services.

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[4] National Housing Federation . 2015 Service Charges: A guide for housing associations. 5th Edition. . London
[5] Telecare is where the person has an alarm and there may also be sensors which would detect gas, flood or a lack of movement in the property. Telehealth is an extended version of this, where the person can also have things like blood pressure and temperature monitored at a distance.

Many interviewees indicated that there were a number of issues connected to alarms that were often difficult to unravel, with one finding this whole area 'incredibly hard'. Difficulties included issues with investment (including 'huge' costs if upgrades were required, and difficulties where providers had only recently completed an upgrade). One interviewee pointed out that the systems providers chose to use in sheltered schemes were to a large extent outside local authority control, that alarm provision was different among different providers, and that some RSLs had their own systems which they required their tenants to use. All of this added up to inconsistent services which were hard for the local authority to reconcile or exert any leverage over. It was also noted that in sheltered housing schemes it was not possible to 'switch off' alarms to tenants who did not need it, and that it was not possible for individuals to opt out of alarm use (and the obligation to pay for this). A further problem was that where hardwired schemes existed but were not capable of servicing assistive technology such as telecare, a second dispersed alarm unit might be put into the property, causing confusion and difficulties if the resident used the 'wrong' alarm.

One interviewee expressed a wish for clearer guidance in the area of alarms, with Welsh Government providing clarity as to whether Supporting People should be funding equipment and, if so, whether it should be funding hardwired or dispersed alarms and how outcomes should be measured.

4. Conclusions

The Aylward recommendation

There is a high level of awareness of the Aylward recommendation among both local authorities and providers. However, there is still frequent ambiguity as to what is intended by the recommendation and the requirements on both local authorities and providers if it is to be met. In some cases it appears that 'needs-based' services are felt automatically to meet the terms of the recommendation, even where they are available only to tenants. Some organisations continue to operate eligibility criteria with a sole focus on age for many services, including sheltered housing services.

Overall, it is the responsibility of a local authority, rather than individual providers, to ensure that services within its region meet the terms of the recommendation and to decide on the combination of services that are required to do so. Successful implementation may include services that are available to tenants only (on a fixed or flexible basis), providing that tenants receiving them have a housing-related support need. However there is a lack of clarity in relation to this, and as to the levels of services that are expected to be available on a tenure-neutral basis. Welsh Government documents such as the SPPG Guidance and terms and conditions letters sent to local authorities) have tended to repeat the wording of the Aylward recommendation without further clarification. The confusion over what the recommendation means in practice, as uncovered by this project, makes it clear that clarity is required in this area.

Commissioning/provision patterns

It is clear that the substantial bulk of SPPG-funded dedicated older person services are still being commissioned by local authorities in such a way that they remain available only to tenants of local authorities and RSL providers. The reason for this appears to be the heritage of historical service models rather than evidence of particular levels of need in these tenures. While these patterns are changing, this is taking place on a slow and gradual basis.   Change is taking place at a different pace in different areas and some local authorities (and possibly some RCCs) lack a timescale for developments and full implementation.

There are clearly some areas which have made very significant changes to their provision, and appear to be working well within the terms of the Aylward recommendation. However, there are also cases where an organisational, local or regional belief that the recommendation has been fully implemented may be misplaced, and the level of support provided in the community in question remain lower than might be expected.

Resourcing issues

There is little doubt that targeted housing-related support delivered in areas of dense populations of older people, such as sheltered housing schemes provides services at relatively low cost. As such, Welsh Government and many local authorities may consider that some services delivered in these contexts are a valuable element of SP services for older people. Greater resources are required to provide services in the community, particularly in rural areas where there are more likely to be large distances between individuals receiving services. Currently, these challenges are largely being overcome on a case-by-case basis by the organisations involved in this research, but questions remain as to how support can be delivered in rural and remote areas. Various models are being contemplated, but experience in this field is often at a formative stage.

It was also the case that where service providers have remodelled services, they have on occasion independently provided a level of support to assist the process. Information on this is limited, but in some cases this may have been a key factor in success. This facility may not always be available and there is evidence that on occasion, funding cuts may have caused pilot projects relating to the Aylward recommendation to be withdrawn.

The local pressures are in addition to the reduction in Supporting People funding generally.

The need for low level 'befriending' services

The case studies undertaken as part of this research project suggested that many older people (including some currently receiving SPPG-funded support) may not have housing-related needs as identified under the Supporting People guidance, but may benefit from befriending or 'good neighbour' services. In some cases the preventative aspect to such services was highlighted. Preventative services will be of increasing importance in the light of new legislation, and particularly the Social Services and Well-being (Wales) Act 2014.

Models of service provision

Data collected as part of this research suggested that the most common model being deployed by RSLs in developments in the light of the Aylward recommendation, were hub and spoke models. This was not universal, as was demonstrated in one of the case studies, where a hub and spoke model was explicitly rejected as being an effective way forward. 'Floating' services were also referred to as models for provision in line with the Aylward recommendation. In many cases these were being provided by organisations without housing stock, but this term was also used to describe services provided to tenants only, on a flexible basis.

The information from the 2015 survey and the case studies, indicated that where services were provided by RSLs and local authorities both to their own tenants and to other individuals, the substantial bulk of support was being provided to tenants particularly in hub and spoke models. There were various reasons for this, including the fact that support remained available to large numbers of tenants of sheltered housing schemes following needs assessments, the fact that tenants might be automatically 'transferred' to a replacement service (at least initially, until different support could be sourced if appropriate) and the fact that tenants were more likely to be aware of, and referred to, services provided by their landlord organisation. While this situation is likely to change over time, as remodelled services become more embedded and flexible, it was clear from at least two of the semi-structured interviews that developing a greater presence in community settings was not immediately possible.

Challenges and obstacles to successful implementation

Agencies, and particularly provider organisations, face numerous challenges and obstacles in remodelling services to be in line with the Aylward recommendation. While many of these are relatively minor and have been successfully overcome by a number of organisations, some are significant and the semi-structured interviews suggest that on occasion the impact of others was sometimes initially under-estimated.

There is no doubt that it is provider organisations which face the most numerous challenges in adapting services to meet the Aylward recommendations. Provider organisations have a duty not only to service users – who may well be vulnerable and highly concerned by or confused about change (particularly where they have chosen a service on the understanding that support would be available to them 'for life') – but also to staff. Many therefore face moral and/or contractual obligations [while potentially also experiencing a real or potential loss of funding if changes are not made]. However, while there will be differences in different local authority areas, it is clear that there are pockets of information, including potential solutions to many of the challenges raised, already available from the work undertaken by different local authorities and provider organisations.

Service users

It was clear from the research that service users are frequently deeply concerned about and often resistant to changes in services. Independently, it is well established that sympathetic and accessible consultation is required if older people and their relatives and friends are to understand and accept changes to services, particularly where there is a real or perceived reduction in support. The semi-structured interviews indicated that this process takes time and is put at risk if rushed, and this point was echoed both in the qualitative data obtained from the 2014 survey and the

update information. Interviews and update information also indicated methods that had been successfully deployed by providing organisations throughout the consultation process, and measures which had been implemented to reduce the impact of changes on a temporary or permanent basis.

Alarms

Alarms are an area of particular difficulty, partly because of the substantial cost implications attached to changes in alarm provision and partly because of much wider questions raised during this research relating to their relevance to Supporting People purposes and outcomes. Of all the services under consideration, discussion of alarm provision contained the highest levels of conflicting information (in terms of how they are currently used, how they might be used and their overall value) and identified some of the most difficult challenges for both commissioners and providers. Although there is some confusion about the funding of alarms, the NHF guidance which reports that the door entry etc. costs of alarms are eligible for Housing Benefit indicates that these are not costs that should also be funded via the Supporting People programme.

Supporting People outcomes and older people

While not strictly under the remit of this project, it was noted during this research that there is some concern that the outcomes expected from Supporting People are not always appropriate when working with older people. Services funded by Supporting People are intended to identify specific needs and provide support within a finite timescale with the aim of developing the capacity of the individual, or maintaining independence. The current outcomes framework focuses on increasing capacity and does not fully reflect the maintain independence element. It is understood the Outcome Framework is being developed further and changes may take this into account.

5. Recommendations

RECOMMENDATION: Local Authorities and providers should continue to work towards older people's services which are tenure neutral, and not based on age or location. Work towards this goal should be monitored. It would be beneficial for future statements and discussion to use terminology which is more explicit as to the expected outcomes under the recommendation, such as 'available to anyone, wherever they live', or 'equal access to all individuals', rather than the somewhat abstract terms 'cross tenure', 'tenure neutral', and 'needs-based' (or similar) which may cause confusion.

RECOMMENDATION: It is recommended that RCCs and Local Authorities work with stakeholders to develop timetables for implementation of tenure-neutral services. Information on timings and the plans for implementation should be submitted as part of the Regional Commissioning Plan (RCP)..

RECOMMENDATION: It is advised that progress in this area is monitored on a more consistent basis. If there is a commitment to implementation of the Aylward recommendation, there is a need to understand whether and how this is being achieved. Given that both local authorities and providers are already required to comply with high levels of monitoring in relation to Supporting People funds, care needs to be taken to ensure that any additional arrangements are proportionate, that they dovetail as far as possible with existing information requirements and do not over-burden organisations – particularly providers which receive limited amounts of SPPG funding. While there are constraints on measuring support in terms of numbers of units, and limitations on the information obtained in this way, the measure is widely understood and has benefits in terms of objectivity. It is therefore suggested that the RCC Annual Reports contains a specific section updating Welsh Government on developments regarding older people's services.

RECOMMENDATION: Given the extent of rural areas within Wales, and the number of local authorities which have few areas of dense population, it would be advisable for local authorities and providers to establish a working group to explore models which work well in rural and semi-rural areas, and to collate information from projects which are already established. This may involve working with a variety of stakeholders, to ensure that all relevant resources (such as health centres or mobile support units) can be utilised in finding solutions.

RECOMMENDATION: While local authorities (in combination with other agencies) are primarily responsible for ensuring that there are adequate and appropriate services in place to support older people in their region, this may reveal a funding 'gap' in an area where expectations are likely to grow. As befriending services do not

fall within the remit of Supporting People funding, Providers should explore other avenues, such as working with the voluntary sector for example, to fill this gap. RECOMMENDATION: It is recommended that, given the reliance on hub and spoke and floating services in implementing the Aylward recommendation, Local Authorities ensure that some form of evaluation of these models is undertaken as part of their service reviews.

RECOMMENDATION: Local Authorities and Providers need to ensure engagement with service users when they are remodelling services. This research has made clear the concern that changes to older people's services can cause and so should be at the heart of any changes to services.   All necessary steps should be taken to ensure that discussions with service users are accessible and understandable, including vulnerable individuals such as those with mental health, learning disabilities or conditions such as dementia or memory loss. Care should also be taken to ensure that individuals who do not wish to express views in a public forum, are included and that particular voices do not dominate.

RECOMMENDATION: As the door entry and security system elements of alarm services are eligible for Housing Benefit, Supporting People should not also be funding these elements.   Supporting People should fund the emergency alarm elements only (and this should be received by only those who have an identified need for the service).

RECOMMENDATION: It is recommended that Welsh Government evaluates what changes could be made to the Supporting People outcomes framework which would be appropriate for older people.

Appendix 1: Survey Questions

1a Local Authority Survey Questions

These are the questions you will be asked when completing the survey for local authorities. Where you do not have access to the relevant information, you will be given the opportunity to explain this and say why.

Contact information
Please provide the name of the local authority on whose behalf you are completing this survey
Please provide your name and position and provide contact details (address, phone number and e-mail address)

Alarm only services
In total, how many units of SPPG funded older person *alarm only* service do you currently commission and / or provide directly?

How many alarm only units are hardwired / non-hardwired?

In relation to NON-HARDWIRED ALARM ONLY services, who receives this service (tick all that apply)?
- Tenants of the alarm only service provider/s
- Tenants of Registered Social Landlords
- Council tenants (if applicable)
- Owner-occupiers and individuals renting in the private sector
- Tenure of service recipients cannot be identified
- I don't know

Other services
*(Please exclude alarm only services in your responses to **all** the remaining questions).*

In total, how many units of SPPG funded dedicated older person services do you currently commission or provide directly?
How many of these units are fixed site (accommodation based)?
How many of these units are floating support (non accommodation based)?

Floating support (excluding alarm only services)
In relation to dedicated older person *__floating support only__*, please state how many units are currently provided (whether by the local authority or other providers) to the following.
- Tenants of a Registered Social Landlord
- Council tenants (if applicable)
- Individuals who are owner-occupiers or renting from private landlords
- Individuals whose tenure cannot be identified

Referrals
How are referrals made to SPPG funded older person services?
Internally (from the service provider) / From external agencies / Both

If referrals are made by external agencies, what are these?
- Social Services
- Health services
- Homelessness agencies

- Probation services
- Other (please state what)

If referrals are made by external agencies, are they made direct to the service provider, or through a central gateway, or both?

You will be given the space to give further information about referrals if you wish.

Eligibility criteria
Where you are providing SPPG funding to older person services, do you have eligibility criteria which you require providers (including the local authority if relevant) to follow?

If yes, please send us a copy of the eligibility criteria and state below how you require these criteria to be applied (eg: whether you require all providers to apply the criteria and whether you require them to be applied to all SPPG funded older person services).

Commissioning criteria
Please send us a copy of your current commissioning criteria for SPPG funded older person services. If you wish to give any further information about your commissioning criteria, please do so here.

Reviews of services
If you have conducted or commissioned a review of SPPG funded older person services since 2010, please send us a copy of any report produced. If there is any further information you want to add relating to this, please do so here.

Providers
Please explain how you are working with Registered Social Landlords and other service providers to ensure that support is in line with the SPPG Terms and Conditions for 2014/2015 - ie: that support is linked to need and is available to individuals regardless of tenure, including owner-occupiers and people renting from private landlords. Please give specific examples. (Maximum of 4,000 characters).

How many providers do you currently contract with to provide SPPG funded older person services (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, More than 10)?

If you commission more than 10 service providers to provide SPPG funded dedicated older person services, complete this survey for the 10 providers from whom you commission the largest number of units (excluding alarm only support)

You will then be asked to complete the following questions in relation to each separate service provider that you commission to provide SPPG funded older person services, and to forward the provider survey to each of these providers.

Questions relating to individual service providers
Please give the name of the service provider.
Please provide a contact name and contact details for this provider (address, telephone number, e-mail).
How many units of SPPG funded dedicated older person support do you currently purchase from this provider?
Do you require and / or contract this provider to provide services to individuals beyond their own or council tenants (ie: to owner-occupiers or individuals renting in the private sector)?
If yes, please state briefly what these contractual arrangements are.
What information (if any) do you request from this provider in relation to the tenure of the individuals they provide services to?

Who does this provider currently provide SPPG funded older person services to?

- Their own tenants only
- Their own tenants and other individuals
- Non tenants only
- This provider does not have tenants (they provide support services but are not a landlord)
- The tenure of service users cannot be identified
- I don't know

If the service provider provides SPPG funded older person services to any individuals who are not its own tenants, who does it provide services to?

- Tenants (if applicable)
- Tenants of other social landlords
- Council tenants
- Owner-occupiers
- People renting from private landlords
- The tenure of service users cannot be identified.

1b Supporting People Older Person Services Survey – Providers

These are the questions you will be asked when completing the survey for providers.

Please exclude all alarm only services in your responses.

We understand that the numbers of people you support may vary from week to week owing to the fluctuating needs of service users. Please answer the following questions as accurately as possible as for the date on which you are completing the survey and explain any difficulties in the spaces provided.

Where you do not have access to the relevant information, you will be given the opportunity to explain this and say why.

Contact details
Please provide the following information:
The name of your organisation
Your name and contact details (address, telephone number and e-mail)

Local authorities
How many local authorities commission you to provide SPPG funded dedicated older person services (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, More than 10)?

If you are commissioned by more than ten local authorities, please complete this survey for the ten local authorities which commission the most non-alarm only units of SPPG funded dedicated older person support from you.

You will then be asked to answer the following questions for each separate local authority that commissions you to provide SPPG funded dedicated older person services.

What is the name of the local authority?
How many individuals within the local authority area do you currently provide SPPG funded dedicated older person services to?
In this local authority area, who do you provide SPPG funded dedicated older person services to?
a)   Tenants of your organisation only
b)   Tenants of your organisation and / or other individuals
c)   Tenure of service recipients is unknown or cannot be established.

In this local authority area, how many of the people you are providing SPPG funded dedicated older person services to are:
•   Tenants of your organisation (if any)?
•   Owner occupiers or renting accommodation in the private sector?
•   Tenants of another Registered Social Landlord?
•   Tenants of the local authority (if applicable)?
•   People whose tenure cannot be identified?

Does the local authority have eligibility criteria which it requires you to apply to determine who should receive SPPG funded older person services?
If so, are you required to apply these to all services?

Other
Does your organisation have its own eligibility criteria to determine who should receive SPPG funded older person services?
If so, please send us a copy or, if this is not possible, state your eligibility criteria here.
Do you apply these eligibility criteria to all services?
If not, please explain which services you apply internal eligibility criteria to.

Since the survey undertaken in January 2014, have you made any significant changes in the SPPG funded services you provide to older people in any of the local authority areas that you work in? If so, please describe how your services have changed, giving specific examples where possible (maximum 4,000 characters).

Do you wish to add any further information? If so, please do so here (maximum of 4,000 characters)