

Integrated Home Improvement Service Consultation

Partners / Stakeholder Questionnaire

Hyndburn Borough Council Response

<p><u>Proposal:</u> we will continue to provide funding for minor aids and adaptations (under £1,000) to people who are eligible for this service. However, we are proposing to cease funding the Home Improvement Services that we are not legally required to provide.</p>	
<p>How strongly do you agree or disagree with this proposal? Please select one option only</p>	
<input type="radio"/>	Strongly agree
<input type="radio"/>	Tend to agree
<input type="radio"/>	Neither agree nor disagree
<input type="radio"/>	Tend to disagree
<input checked="" type="radio"/>	Strongly disagree

Why do you say this?

The removal of funding for the Home Improvement Services will put 'at risk' the future viability and sustainability of Homewise (Hyndburn's Home Improvement Agency – HIA's) and other HIA's in Lancashire. The LCC funding funds the core 'handyperson' service – if this is removed it compromises the remainder of the service delivery that Homewise provides as all services are interlinked.

Whilst recognising the need for LCC to prioritise funding and make savings ceasing funding of the Home Improvement Services (HIS) is not the best way to do this. The HIS through Homewise delivers a true preventative service for Hyndburn residents specifically by keeping the service user in their own homes and reducing the pressure on health and social care services. Withdrawal of these services will have significant housing, health and social care implications and cost LCC and partners more in health and social care in the long term through increased need for residential care and hospital admissions. 'Supporting Independent Living' is identified as one of six key actions in the Lancashire Health and Wellbeing strategy. The funding and delivery of the HIS goes a long way to assist in achieving this objective.

There is a wealth of independent evidence that shows the cost benefits of funding prevention services like the Integrated Home Improvement Service (IHIS). 'Falls prevention' is one of the main outcomes delivered by Home Improvement Services and for every £1 spent on handyperson services the saving

to health and social care is £4.28. This is on an individual level. An independent evaluation of a Lancashire handyman service in 2018 estimated that investing in the IHIS creates a return on investment of £3,766,400 in Lancashire.

The following case study shows what a difference IHIS Handyman service can make to an individual:-

Mrs A is in her late 80s and has lived on her own in her family home ever since her husband died several years ago. The Home Improvement Service has carried out a number of small jobs in her home that reduce risk of injury, e.g. power-washing a slippery path from her front door to her bins.

Mrs A mentioned to the Technician that she'd had several falls at the front door, which happened as she bent down to pick up her milk, saying that the last fall had been worse than the others, leaving her bruised, feeling vulnerable and worried about being able to cope living on her own. The Technician offered to put up a shelf at the front door for the milk to go on so she no longer had to bend to the floor. The work was completed there and then and Mrs A has not had another fall.

If the HIA's do not exist there may not be a delivery mechanism for the statutory minor aids and adaptations that are currently delivered through this route. As stated this is clearly a LCC statutory service that the district LA's would be unable to deliver on LCC's behalf. LCC has recently provided additional 'trusted assessor' training for Homewise staff to help facilitate and deliver minor aids and adaptations – a contract that Homewise may well not be able to deliver in the future.

How would our proposal affect your services and the people you support on our behalf?

In Hyndburn the Home Improvement Service is delivered through Homewise our local independent charity. It is a long established – over 25 years – valuable and highly respected local service trusted by service users and partners as the place to go to for help and assistance if you are old and/or vulnerable.

Homewise plays a valuable facilitating and enabling role by working in partnership with, and assisting, both health and social care providers' to keep service users safe in their own homes. They work closely with health and social care providers to enable a safe and sustainable hospital discharge process for vulnerable households by ensuring their home is 'fit to live in' on discharge. Homewise provides 'added value' for all interventions and assistance provided through the funded HIS by attracting additional resources and charitable funding to deliver 'wrap around' services e.g. affordable warmth measures, maximising income benefits i.e. attendance allowance, providing sanctuary security measures and delivering the Memory Matters service.

Many of the small interventions provided and co-ordinated by Homewise through the funded Handyman Service result in significant savings for health and social care along with untold benefits for the vulnerable person helped e.g. independence, well-being, confidence and reduced pressure on health and social care by keeping the service user out of residential care and/or hospital and safe and secure in their own home.

Vulnerable service users will not have access to support and help to maintain, repair and improve their properties if the trusted local service is removed. There will a subsequent decline in property standards and the associated impact on health and social care.

Thinking about our proposal, is there anything you think that we need to consider or that we could do differently?

To consider the use of the Better Care Fund - whose aim and purpose is to integrate housing, health and social care provision – to fund the Home Improvement Services. The following options could be considered:-

- *'Top slicing' an amount from the Lancashire BCF budget*
- *Use of underspend from other BCF allocations*
- *The use of any underspend, or a contribution from, the LA's disabled facility grant allocation – although some districts do not have an underspend. LA's are also unaware of the DFG allocation for future years, whether the current levels will be sustained or whether there will be an increased demand for DFG's making this route possibly unsustainable.*

Investigate the possible use of or a contribution from 'health' funding