
CONFERENCE ABSTRACT

The challenges of integrating housing and care for older people

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Introduction: Faced with rising numbers of older people in need of care and restrictions on public expenditure in the UK, extra care housing (ECH) has been hailed as an integrated model of housing with care that allows older people to live independently, while also having access to care and support if required. Despite the proposed benefits of ECH, however, little is known about how responsive it is to the needs of older people as their care needs change.

Theory/Methods: This presentation reports on findings from the ECHO project, which explored the perspectives and experiences of those living and working in ECH settings. Longitudinal qualitative research was undertaken at 4 ECH settings (including one dementia-specialist scheme), based in 2 areas, over the course of 2 years. Residents were interviewed on 4 occasions to explore how their care needs and experiences of ECH changed over time. Managers were interviewed twice, at the beginning and end of the study, and care workers were interviewed on one occasion.

Results: Residents appreciated the flexibility in the way that care was provided and felt that the ECH model allowed them some control over when and how their care was delivered. Some residents, care workers and managers reported an increase in care needs amongst people moving into ECH and amongst existing residents as they aged in place. Interviews with care workers revealed that their work was organised in a time/task manner. This resulted in frustration for some care workers who felt unable to provide care in a flexible and personalised way. Some care workers found ways to compensate for this approach by providing 'favours', doing tasks beyond their role.

Discussions: The organisation of work in the 4 ECH schemes imitated patterns of work at some traditional care homes and it appeared that there was very little slack in the system. This is problematic given that there is an expectation of ECH to meet the changing care needs of residents in a timely and responsive manner. Such problems appear to be exacerbated by the changing context of ECH which means that the population whom it serves now has higher and more complex needs.

Conclusions (including key findings): ECH's integrated model of housing and care has the potential to support quality of life for older people, including those living with dementia. However, while the ECH model promises to allow for increased flexibility and a more personalised approach to care delivery, cost saving forms of work organisation can undermine this approach.

Lessons learned: Longitudinal research is a beneficial way to examine how older people's care needs are responded to in integrated housing and care environments.

Limitations: Though a longitudinal approach allowed us to consider how participants' experiences altered over time, and in relation to contextual change, this approach was not as effective with residents living in a dementia-specialist ECH scheme.

Suggestions for future research: Further research is required to establish whether ECH is the most appropriate form of integrated housing and care for older people living with dementia.

Keywords: social care; housing; older people; extra care housing; care needs
