

# An evaluation of the FILT Warm Homes Service Summary Report



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## Summary Report

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*The findings presented in the report are however entirely the responsibility of the research authors.*

# Executive Summary

## Introduction

This report presents the findings from an evaluation of the Foundations Independent Living Trust Ltd (FILT) Warm Homes Service (WHS). The FILT WHS aimed to assist older and vulnerable people at risk from cold weather and prevent cold related harm and illness. The evaluation was commissioned by FILT and also received funding from Collaboration for Leadership in Applied Health Research and Care for South Yorkshire (CLAHRC SY).

The research was conducted in two phases between May and June 2013 and then between July to November 2013. The first stage of the evaluation consisted of an online survey of 55 HIAs, ten telephone interviews of HIAs and ten telephone interviews with clients. The second stage consisted of 15 in-depth qualitative interviews (three over the phone) which explored in greater depth the impact of the FILT WHS as well as economic evaluation of the service. The evaluation team is from the Centre for Regional, Economic and Social Research (CRESR) and the Centre for Health and Social Care Research (CHSCR) at Sheffield Hallam University in collaboration with FILT.

## About the FILT WHS

FILT received £499,200 of funding from the Department of Health over winter 2012/13 for the FILT WHS. The service aimed to equip and fund the home improvement agency (HIA) sector to provide targeted and focused support to clients facing fuel poverty. The service included home visits, energy usage assessments and interventions to tackle cold homes and their effects on the health and wellbeing of older and vulnerable people. HIAs applied for the WHS funding from FILT. The FILT WHS funded 55 HIAs across 160 local authority areas. Funding allocations to HIAs were typically between £2000 and £6000, with a small number of HIAs receiving over £10,000.

Between mid-November 2012 and end March 2013 the programme achieved:

- 385 staff including handypersons, caseworkers, technical officers received bespoke one-day training, between November 2012 and January 2013
- 3,728 advice and information discussions with older and vulnerable people were completed by agencies
- 6,469 householders and families benefitted from personalised, relevant information and advice to make their home a warmer environment conducive to better health and wellbeing. Agencies also positively signposted and introduced individuals to partner organisations where the need was outside the scope of the HIA or handyperson provider
- linked to these visits, 1,148 jobs were been done quickly and effectively for older and vulnerable people suffering cold homes.

## **Key Messages**

### ***Organisation of the FILT WHS***

The FILT WHS was delivered through a tripartite partnership with each partner providing an essential component of the service. These organisations (Foundations, FILT and HIAs) were able to provide a unique service which combined a national organisation, a nationally available charitable network, with local service provision to deliver the service quickly to vulnerable people.

The flexibility and "light touch" approach to funding and administration allowed HIAs to work quickly with vulnerable households. However, the limitations in terms of grant size and timescales created challenges for HIAs.

HIAs often acted as a single point of contact and were able to make the most of referral partnerships. They emerged from the evaluation as accessible and acceptable organisations for clients. The indication is they reached vulnerable households other agencies were not aware of.

### ***Volume of work***

According to the data available, the FILT WHS was able to conduct 3728 assessments and delivered measures in over 1000 of these homes. The reach of the scheme was impressive in terms of numbers of contacts and interventions particularly within the project timeframe.

The volume of work was impressive in terms of the range of interventions. The impact of smaller interventions (draught-proofing, TRVs or reflective radiator panels) should not be underestimated. Data from across the evaluation indicated the small measures had a big impact on warmth and comfort.

### ***Capacity building***

The FILT WHS had a capacity building element for the HIAs in terms of:

- staff training
- assessment systems and skills
- partnerships and referral options
- referrals were made to a diverse range of agencies but in the main referrals were to in house repairs and handy person schemes, health providers and advice agencies e.g. CAB and other debt advice.

### ***Delivery of the FILT WHS***

The flexibility of funding enabled HIAs to plug gaps in terms of people at risk who had been missed by statutory services, for example people discharged from hospital to a cold home (HIA reported).

HIAs were mainly involved in providing assessment and interventions for people with cold related problems because they had no heating or faulty heating.

HIAs responded swiftly and in a timely fashion. Most assessments were completed within two weeks and most minor interventions within four weeks. More substantial work (boiler replacement) took longer. Speed of response and lack of bureaucracy means the FILT WHS compares favourably to larger schemes such as Warm Front, Green Deal or ECO.

## **Benefits of the FILT WHS**

Benefits were reported by participants in terms of home temperatures, warmth and comfort, and physical and mental health and wellbeing. Most clients expected to see a benefit in terms of energy bills. However, there was little evidence of this as for most the interventions were installed between January and March and clients had not experienced a full winter and in some cases work was completed after the coldest months. For some clients energy use may increase as the heating had not been functioning prior to FILT WHS intervention. Fuel price rises during 2012 and 2013 may also mean that energy efficiency improvements will not necessarily lead to reduced bills.

The HIAs were able to put in place timely interventions into vulnerable people's homes and secure additional funding. For every pound of the FILT WHS funding the HIAs were able to lever in at least an additional £2.10. This figure represents a cautious estimate and does not include for example, extra benefits that may have been claimed after referral. The qualitative interviews illustrate health benefits and how negative health events would have been avoided, for example falls, respiratory, cardiovascular health and diabetes, hospital admission or missed days at school.

As a result of the FILT WHS interventions the householder had more control over their home environment. This had a reported impact on physical and mental wellbeing as well as ability to self-manage long term conditions. This evaluation was limited in not being able to quantify this impact. The case studies illustrate how benefits (e.g. improved warmth and wellbeing) helped to promote social connections for householders who were previously socially isolated.

The majority of interview participants indicated how benefits were accrued from advice received through the FILT WHS and not just from affordable warmth or heating interventions. This advice included energy coaching following installation of measures which provided clients with confidence and knowledge of how to heat their homes adequately and safely.

The evaluation indicates how HIAs would appear to be "the only show in town" for helping some of our more vulnerable citizens. However, the ability of the HIAs to respond to this need is limited by financial constraints and a number of HIAs have recently been forced to close. The evidence presented in this report suggests that commissioners should look more closely at the benefits that the FILT and HIAs can deliver.

## **Conclusions**

This evaluation demonstrates that the FILT WHS provided a unique service to a large number of vulnerable people. Clients' vulnerability was extreme and complex in nature. The benefits experienced by clients were sizeable when compared to the average cost of the intervention (around £200) and the benefits and cost savings of such a scheme could potentially be realised across health, housing and social care. The case studies illustrate how the FILT WHS helped to maintain vulnerable clients in their homes thus helping to prevent the costs associated with residential care and possibly hospital admissions. This evaluation indicates how an initiative such as the FILT WHS could provide a key component of the delivery mechanism for the Cold Weather Plan nationally and locally. As excess winter deaths (EWDs) increase (it is estimated by the Office for National Statistics that 31,100 EWDs occurred in England and Wales in 2012/13 – a 29 per cent increase compared with the previous winter), it would be advisable for commissioners of health and social care services to consider the advantages and benefits that can be delivered by such a programme. The advantages could be realised in a range of outcome indicators across the current policy frameworks (i.e. NHS Outcomes Framework, Public Health Outcomes Framework and Adult Social Care Outcomes Framework). (See Appendix 4 for the relevant outcomes which the activity of HIAs could help deliver).