Cambridge Centre for Housing & Planning Research

Evaluation of lighting interventions in Stourbridge

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Background

Meeting the needs of an ageing population is one of the key issues affecting both the housing sector and wider social care agenda in the UK at the present time. Increasing numbers of older people wish to remain in their home for as long as possible, and this means there is a growing need for support and adaptations in the home. Sight loss is one difficulty that many older people encounter, and the links between sight loss and other health difficulties, in particular falling in the home, are well-documented¹. Previous research commissioned by the Pocklington Trust highlighted the lack of evidence on outcomes of lighting interventions for partially sighted people (Clarke, 2011).

In the summer of 2011 Pocklington funding lighting adaptations for 14 elderly people with sight loss living in Stourbridge. This evaluation sought to understand what difference the lighting adaptations make to the lives of elderly people with sight loss, and to learn lessons for future projects with this group.

Methods

A total of 14 elderly people with sight loss living in Stourbridge had lighting adaptations fitted. The evaluation returned to interview these people in autumn 2012, around 15 months later.

Of the 14, four had since died, one had moved away, and two others could not be interviewed because of declining health and dementia. The remaining seven people were all interviewed in their homes.

The contractor who organised the work was also interviewed and a report written at the time of the original work being carried out was also reviewed.

Findings

What was done?

Prior to the lighting adaptations the recipients were all living independently in mainstream housing. Three were living with a husband or wife, one with a brother and the others alone.

Some had already had other adaptations carried out to improve their mobility around the house, (including a stairlift and grab rails) or cope with sight loss. The improvements they had made themselves most often consisted of spot lights for reading and improved kitchen strip lighting and specialist equipment, bought or loaned from charities, which would read letters aloud.

The recipients all had their properties assessed prior to installation and were offered a choice of different lighting fittings. The adaptations made were wide-ranging and included:

- New fittings in any or all of the rooms
- Brighter bulbs in existing fittings

¹ See www.ageuk.org.uk/latest-press/poor-vision-leads-to-falls-for-270000-over-60s/

- An outdoor security light
- Bedroom lights that could be controlled from the bed

The beneficiaries were able to choose from a range of lighting options and agree with the contractor what would best meet their needs.

The benefits of the adaptations

The initial report carried out by Pocklington immediately after the interventions found that all the recipients were able to carry out a variety of tasks such as reading, food preparation and finding things more easily afterwards. Around half of them also reported starting to do things that they had previously ceased to do.

This research confirmed that all the recipients interviewed felt that overall the lighting had made some improvement to their lives, at least initially. Most had deteriorating eyesight meaning that they were now less able to see, even with the new lighting, than they had been previously:

When it were done it was excellent for me, but I don't notice it quite so much now

My sight is much worse now than it was before. It's more and more difficult to read.

However, all but one of these reported that they did still see enough to benefit from the brighter lighting and were able to do more things than they would have been able to without it.

Cooking

Being able to see to prepare food more safely and more easily was one of the key benefits highlighted. In particular being able to see when pans were boiling was a major improvement:

I was finding it very different when I was cooking to see if something was boiling or not, and that has made a lot of difference

I can see when pans are boiling now....When I come down in the morning I like to have a boiled egg, and I can do that now

The work surface and phone are much easier to see now. I'm a hundred percent grateful for it, it's made a hell of a difference!

There were no reports of accidents in the kitchen as a result of poor sight; it was apparent that most people however limited what they did to what they could safely manage. Some made use of Meals on Wheels, Daycentres or prepared only food that could be heated in the microwave or eaten cold.

Moving around the home safely

Most of the recipients had had the lighting in their hall, stairs and landing improved. Most were of the view that this was nice, but not strictly necessary as they were already able to move around the house safely.

However, six of the seven recipients reported that either they or their partner had had at least one fall in the past two years, and all of these had fallen in the past twelve months since having the lighting adaptations fitted (as well as previously in some cases). Only one of the falls was reported as being related to poor lighting, and this was someone who had fallen whilst getting up at night without switching the light on.

The other falls were all reported to have resulted from poor balance or moving too quickly and had happened at times of good visibility.

It is of course difficult to know from this small-scale study with no comparison group whether any of the recipients would have fallen as a result of poor sight if they had not had the lighting adaptations. They were clearly becoming at greater risk of falling than they had been previously as a result of worsening sight and other health problems.

Five of the seven interviewees felt that the improved lighting did help them to move around their home more safely and reduced the chances of them or their partner falling in the future. The other two who did not feel safer as a result of the lighting both reported that they had already learned to move around their homes by remembering where things were and using touch, as their eyesight was so poor.

No-one reported any other serious accidents, though one person did acknowledge that he bumped into things and bruised his arms as a result of poor sight.

The ability to switch lighting on an off from convenient locations appeared to be at least as important as the intensity of the light for safety of movement around the home. Those with bedroom lights they could control from bed were enthusiastic about this improvement, and indeed the one lighting-related fall might have been avoided had this person been able to switch his lights on from bed.

Improving quality of life

Reading lamps, obtained either from the Pocklington work, or in some cases already purchased privately by the interviewees continued to improve the quality of life of some people. However, others had seen their eyesight deteriorate to a point when they could no longer read or carry out detailed tasks, even with a spotlight:

"Of all the afflictions I've had, losing the ability to read was the worst of the lot"

Improved light fittings in bedrooms and bathrooms were very much appreciated and one woman described enthusiastically how she could now see to choose clothes in her wardrobe or apply make-up:

"I can see to put my face on in the morning now"

Other improvements included an outdoor security light on a rather secluded front door and improved study lighting for dealing with paperwork and operating the technology that read letters aloud.

Living independently

Most of the interviewees were happy living independently and wanted to continue to do so. Some were easily able to manage alone, but for others the issue of whether to move to a nursing or residential home was one which they had given some thought to. All were of the view that the lighting was one thing, amongst others, that did help them to stay safely in their own homes. Other factors that helped them to stay included weekly cleaners, meals on wheels, support from family and friends and mobility adaptations such as a stairlift.

Ways in which lighting could be further improved

The main issue highlighted where the lighting adaptations had not been as successful as hoped was for those who had the circular ceiling mounted lights fitted. Two people who'd had these fitted in their kitchen said that they were not as bright as they'd hoped they'd be, and in one case the recipient reported that the previous kitchen lighting had been brighter. Two other people who'd had these lights fitted in their bathrooms also felt that they were not as bright as they had hoped they would be.

These concerns were not shared by those who had had florescent tube lighting fitted in their kitchens, who were all very pleased with their level of kitchen lighting. In visiting the properties and looking at the lighting, it could be seen that the florescent tube lighting was much brighter than the circular ceiling mounted lights.

Some recipients also reported further improvements that could be made including:

- Rewiring so that there were dual control of both stairs and landing lights from both hall and landing
- Fitting controls on bedroom lighting so that they could be controlled from the bed
- Under-stair lighting
- Improving further the overall level of light in their home although adequate at the time, deteriorating sight meant that only a year on, some recipients were already finding the level of light insufficient.

None of these things had been asked for when the original adaptations were carried out, but for future work it might be worth prompting recipients on these possibilities.

Making the changes

The recipients all spoke very well of the experience of having the lighting adaptations fitted and praised the way in which the contractor worked in their homes. Most felt that they had been given a good deal of choice in the type of fitting needed, and that the contractor had taken time

to understand their needs and tailor the improvements to their needs, preferences and their property.

In two cases, fitting the lighting adaptations had also prompted the recipient to undertake further improvements to their lighting themselves. In one case the contractor had recommended a particular reading lamp which the recipient had subsequently purchased.

Conclusions

Overall, the lighting adaptations have clearly improved the quality of life and safety in the home for the recipients. Bright fluorescent strips and worksurface and hob lighter were particularly appreciated, as were controls to allow lighting to be switched on and off from convenient locations, such as the hall and landing, and from bed.

The deteriorating eyesight and general health of all the recipients did mean that the period during which they benefitted from the lighting could be relatively short-lived. In the 15 months since they were fitted, of the 14 beneficiaries, four had died, two more moved out of their homes, and a further two had seen their sight deteriorate to the point when the lighting improvements were only appreciated by visitors to their home.

However, for those who remain in their homes and with some degree of sight, the lighting adaptations clearly improved their wellbeing and helped them to remain living independently in their own homes.

References

Clarke (2011) Cost Effectiveness of Lighting Adaptations Thomas Pocklington Trust