

**Cambridge** Centre  
for Housing &  
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# Managing Money Better Project Evaluation

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# Managing Money Better Project Evaluation

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# 1) Introduction

## 1.1 Managing Money Better

The Managing Money Better Programme is a £2.5m Comic Relief funded programme of fifteen projects around the UK. The programme aims to support older people (65+) to build their knowledge and skills to manage their money more effectively, ensure access to good, independent financial advice, guard against financial scams and abuse and cope better with cold homes. The programme encourages partnerships with voluntary sector organisations and banks, building societies, credit unions, energy companies and others to recognise and respond better to the needs of older people. The FirstStop project is part of the Comic Relief funded programme and is focusing on money management for older people in the context of housing and care.

The First Stop Managing Money Better (MMB) project is part of the wider housing and care options support service offered by FirstStop. The project aims to reach more vulnerable older people, particularly by providing money advice as a key element of housing and care options advice and support.

The service is delivered through a combination of the FirstStop website, national telephone advice line, peer to peer advice and support and a network of local partner organisation providing face to face information, advice and support to older people.

The four main intended outcomes of the MMB project are:

- Improvement in money management skills of vulnerable older people.
- Increase in income of vulnerable older people.
- More energy efficient homes occupied by older people and reduction in fuel poverty.
- Increase income through awareness and take up of grants and benefits and managing money.

Partners focus on geographical catchment areas and a 'community of interest' approach, targeting specific client groups:

- BME elders.
- People with long term conditions including older people with disabilities, people experiencing mental health problems including dementia.
- People living in the most unfit accommodation.
- Those self-funding their care.

Local partnership activity is complemented and supported by the national service providing an integrated joined up approach to achieving outcomes for older people.

In addition there are four broad themes, at least one of which every local partner is required to prioritise:

- Enabling older people, who are being discharged from hospital, to live in homes which are warm, safe, more energy efficient and affordable.

- Enabling older people to access advice on the best use of their income and assets, if they are considering moving home or going into residential care.
- Enabling older people with long term conditions to manage their money to plan for the future.
- Enabling older people who are evicted or at risk of eviction to receive relevant money advice and increase their money management skills to prevent a recurrence.

The four partners are:

1. Black Country Housing Group
2. Age UK Croydon
3. Lincolnshire Home Improvement Agency
4. Goodwin Development Trust

The specific partner client groups and themes are:

Area	Partner	Fit with Client Groups	Fit with Themes
Croydon	AgeUK Croydon	BME Elders	Eviction/ homeless
Hull	Goodwin Centre	Long term conditions	Moving Home/into care
Black Country	Black Country Housing Group	Unfit housing	Energy Efficiency
Lincolnshire	Lincolnshire Home Improvement Agency	Self-funding	Hospital discharge

More details about the partners can be found in the Appendix.

## 1.2 FirstStop

FirstStop aims to help older people make informed decisions about their housing and support, maintain independent living in later life and avoid health problems and unplanned care home admissions. It was launched in 2008 as a joint initiative by four national organisations in response to a report by the Office of Fair Trading (OFT) into how well the care homes market served older people, and which recommended the establishment of “a central information source or one-stop-shop for people to get information about care for older people”.

After a short pilot, the Big Lottery Fund offered seed funding for three years from 2008, and DCLG subsequently provided Section 70 funding to enable the project to be rolled out nationally; to expand its remit to include housing, support, care and related financial issues; and to recruit a number of local delivery partners. Two years later, following organisational changes amongst the founders, EAC was recognised by DCLG as the lead organisation to carry FirstStop forward.

FirstStop now comprises a network of local and national service delivery partners led by the charity EAC, bringing together different skills, specialisms and ways of operating, but accessible to the public via one phone number and one website. Its service spans the housing and care divide, offering in depth specialist understanding of all aspects of housing, support and care for older people, along with information on financial and legal issues.

### **1.3 Evaluation of FirstStop**

The Cambridge Centre for Housing and Planning Research at the University of Cambridge has been undertaking an independent evaluation of the FirstStop service since November 2009.

Previous reports from the evaluation can be found at:

<http://www.cchpr.landecon.cam.ac.uk/Projects/Start-Year/2010/FirstStop2010>

### **1.4 Evaluation of the FirstStop MMB Project**

The MMB project evaluation was conducted part way through the second year. The aim of the research is to provide an evaluation of the MMB project with a focus on the achievement of outcomes and deliverables and client satisfaction.

## **2) Methodology**

### **2.1 Interviews with national management/delivery team**

Interviews were conducted by telephone with the national FirstStop staff responsible for delivering and managing the Comic Relief funded MMB project. The interviews discussed the successes and challenges of the MMB project at national and local level, and the interaction between national and local services.

### **2.2 Interviews with local partner caseworkers and managers**

Interviews were conducted by telephone with the local partner caseworkers and managers delivering the MMB project. These explored the successes and challenges of delivering the MMB project and discussed the achievement of targets and outcomes.

### **2.3 Analysis of existing data and monitoring information**

Relevant data and monitoring information, provided by FirstStop, were analysed to assess the achievement of deliverables and targets as specified in agreement with Comic Relief for national outcomes.

### **2.4 Client interviews**

Twenty eight in depth client interviews were conducted by telephone with clients of the four local partner agencies.

The interviews explored the nature of the interaction between client and local partner, the reason for contact, mode of referral, the issues discussed, the outcomes for the client and the client's satisfaction with the service. The interviews were semi-structured. It was proposed that the interviews would also repeat the questions client had been asked as self-assessment when their case was closed.

### **2.5 Analysis**

The data from the interviews and from existing monitoring information was analysed to assess the achievement of outcomes and deliverables at national and local level and client satisfaction. The achievement of deliverables was a numeric check against targets with wider discussion drawn from the interviews. Client satisfaction was analysed from the local partner monitoring with additional data from the client interviews.

### **3) Achievements against targets**

Over a two year term the project aims to help clients to manage their money more effectively, determined as whether 75% of clients feel more confident, that they have better ability and understanding of money management and are aware of independent financial advice available from SOLLA members. It aims to help older people to increase their income by providing at least 75% with benefits advice and knowledge about grants to give them a better understanding of the potential sources of additional income. It also aims to help older people to experience less fuel poverty by providing 75% of clients with advice on energy efficiency to raise their awareness of the potential help available.

In the first 18 months the response rate to the client self assessment has been lower than anticipated making it difficult to accurately quantify. However, based on feedback from both client questionnaires and case workers the projects appear to be achieving between 60-70% for each of these measures at the 18 month point. Self assessment questionnaires have since been simplified to encourage completion.

During the first 18 months of the project over £580,000 of new benefits and grants have been awarded to clients supported by MMB advisers. A high proportion of these benefits will continue to be received by the client group every year.

Other achievements include thirteen peer to peer workshops that have been held to enable older people to support other older people with financial aspects of housing and care. A toolkit was co-produced with local partners to support them in the delivery of their local services. Further development of the website and toolkit is planned to provide an interactive resource for the public to use to manage their money better and for supporters/advisers to work through with clients. It will also provide downloadable literature for organisations to provide to older people.

#### **3.1 Client case studies**

The case studies below were provided by the caseworkers as part of the service monitoring and illustrate the type of issues facing clients and the types of support the MMB projects have provided.

##### **3.11 Support to move**

Mr and Mrs C lived in a Housing Association property but as their care needs increased they were supported in moving into a local authority sheltered housing scheme. Mr C is partially sighted and has learning difficulties and Mrs C has arthritis which directly impacts on her mobility. The MMB caseworker received a referral from the council housing department to support Mr and Mrs C with their transition and also to support them in managing their finances.

Throughout the visit the caseworker became aware of a range of issues which were impacting on Mr and Mrs C's quality of life. Although they were now in more appropriate accommodation it had not been adapted to meet their particular needs and they did not have a suitable bed, settee or carpets. They had become socially isolated having moved to a new

area and their inability to read and write had caused increasing complications with managing their finances.

The caseworker supported Mr and Mrs C to apply for a Community Care Grant as well as to make various referrals to the Community Legal Advice Centre (CLAC), to the Occupational Therapist for assessment and to the Adults Services Safeguarding Team as the caseworker was concerned about financial abuse from a family member. The caseworker was also able to discuss cost cutting tips, the potential benefits of using direct debits and the social activities available in their local area

Mr and Mrs C have now received £620 from the social fund to buy a bed, settee, carpets and other items and have started going to a weekly luncheon club which they are really enjoying. Alterations have been made to their bathroom to make it more usable for them and they are continuing to receive support from the Safeguarding Team around their finances. They are also receiving support from CLAC and they now have special support in place for their family and carers to support them in managing their finances.

### **3.12 Support to stay put**

Mr S is 83 years old and has terminal cancer and has also has recently suffered a number of falls at home. He lives with his wife who also has several health problems. They own their home outright and have always been able to maintain it, but recently the property began to suffer from damp. A Care and Repair surveyor recommended remedial work including fitting extractor fans. Mr S was very worried about the work as he was not sure how they would be able to afford it. They had limited savings, enough to pay for their funerals, and with his terminal prognosis he did not want to leave his wife destitute.

Mr and Mrs S applied for a Disabled Facilities Grant (DFG) for a stair lift and a level access shower. They were asked to contribute £474 towards the DFG. The caseworker investigated the costs of buying and installing the extractor fans and applied to charities to cover the costs. Two charities agreed to pay the £650 needed. The adviser also made applications for Attendance Allowance for both Mr and Mrs S. These were both successful in getting the higher rate of £79.15 per week each bringing in an extra household income of £8,231.60 a year. The caseworker is also now claiming for Carers Allowance which is also likely to increase their Pension Credit.



## **4) The MMB projects: successes and challenges**

This section draws on in depth semi structured interviews with MMB project caseworkers to understand the nature of the project in each case and the key successes and challenges.

### **4.1 Black Country Housing Group**

#### **4.11 Nature of service**

This is an existing housing options service that has incorporated MMB into the core housing options work. There are a lot of referrals about cases of property repair and maintenance. This reflects the nature of the existing service as BCH previously ran a Care & Repair service so had a reputation amongst owner occupiers for being able to help with repairs and maintenance. There are now also a lot of referrals around benefits checks and maximising income.

The caseworkers conduct home visits and conduct a budgeting exercise with clients regardless of their presenting issue.

Referrals come from a range of sources. Most come via word of mouth, but other local services also refer cases they cannot deal with, the Asian Elders Officer refers clients and because the Care & Repair service has closed people enquiring about this are also referred to the service.

#### **4.12 Focus of MMB**

For the caseworkers, money is seen as the underlying issue in housing options discussions.

“It is often unfit housing, where properties need a new roof or rewiring and there is no statutory funding. So we have to look to money and maximising it.....People never say it is a problem with money. They say they have a problem accessing their bathroom or the repair of their house. We go out and we might see an adaptation would help. Then we look at the MMB element and maximising their money. It evolves; people can't get out of the bath, this leads us to talking about benefits, then to talking about their income”.

Caseworkers conduct a budgeting exercise and look at income and expenditure and identify how to maximise a client's income. Benefits checks mainly identify the option to claim Attendance Allowance and Pension Credit. Caseworkers also apply to charities on a client's behalf to secure grants e.g. to top up DFGs, help with debt advice, help write housing and grant applications, discuss spending, help change energy providers, assist with pension forecasts and also talk about general health and wellbeing issues.

There have been very few enquiries about care needs or downsizing. Most people contacting the service are not prepared to consider downsizing. This probably in part reflects the nature of the wider organisation with its reputation as a Care & Repair service helping people to stay put.

#### **4.13 Successes**

The MMB project has enabled the caseworkers to offer more financial advice within the housing options service. This has enabled them to identify additional income that can resolve housing problems and assist in maintaining independent living and a better quality of life, and also to support clients to think long term about their finances.

Maximising income has been successful through benefits claims and expenditure savings. The caseworkers have also tried to focus on energy efficiency.

“As an organisation we are hot on energy efficiency and we want to be a frontrunner. We try to discuss energy efficiency. Conversations are often the basics, like changing suppliers. Some people won’t but at least they know they have choices”.

The caseworkers have managed to successfully engage with the local Asian community, a hard to reach group.

“We have been successful in making links with Asian elders’ groups which are quite tough as they are very community oriented and so do not seek advice outside.....We have opened the service to as many people as possible. We raise awareness of FirstStop.... We are really pleased with the Asian elders as they are a tough group to crack”.

The caseworkers ran advice surgeries for local Asian groups and one issue that was raised was people wanting support with pension forecasts. The caseworkers believe this has helped a lot of people to manage their money better and plan ahead for retirement.

#### **4.14 Challenges**

Discussing a sensitive issue such as income and expenditure can be a challenge and is not always an area people are prepared to discuss.

“When we ask about income and savings a few say they don’t want to go ahead. People can be private about their income”.

Not all clients will choose the option that will save them the most money, but this decision can at least then be made in the knowledge of other options.

“Some say no way to a direct debit; they have always paid in cash and always will. We respect their choice, but at least they know they have a choice”.

There can be difficult conversations with clients who believe they require financial assistance but have sufficient income to resolve their problem.

“Some people don’t understand. They think they are in extreme poverty and want you to apply for money for them, but when you look at their income and expenditure we couldn’t approach a charity as they have surplus money. You see how people prioritise their money. If someone has £300 surplus every month they are not eligible for help to buy a new cooker. You have to have some honest conversations....We do not sit in judgement”.

There are certain client groups that are more challenging to assist than others. Finding funding for major repairs for low income clients is difficult. People returning from living overseas are often ineligible for local authority housing support. The clients in the 50 to 60 age group were identified as being difficult to assist.

“The 50-60 group are horrendous and are in ‘no man’s land’. They are not old enough to access the generic older people charities but lots desperately need help and it is hard to get. People are unemployed and won’t get a job....And with downsizing, the 50-60s are hit by the under occupation charge. There is no way they are prepared to move so it is a brick wall. We have to try and apply for DHP but it is a challenge and not a long term solution. They may only get 3 to 6 months”.

The targets for referrals to SOLLA were initially hard for the service to meet. This was resolved by getting leaflets from SOLLA and leaving them with clients and explaining that it may or may not be relevant to them.

## **4.2 Age UK Croydon**

### **4.21 Nature of service**

This is also an existing housing options service, but MMB has been incorporated in a different way as the housing options caseworker refers people with money issues to other colleagues. This housing options service deals with many clients who have high levels of needs and are in crisis, for example, many clients are facing homelessness after receiving eviction notices or are already street homeless.

This is an area with a high pressure housing market and despite their high level of need, many people are not assessed as being in priority need for re-housing by the local authority and are referred to the service. The caseworker is able to advocate and make applications on their behalf.

“People with mental health problems cannot advocate for themselves. If they are homeless and go to the council they tell them to use the online tool. But some have never used a computer, have problems reading and writing and are in their 70s and 80s. If they are blind the council send them here”.

Referrals to the service come from a very wide range of sources, including the wider organisation in which the service is embedded, NHS services, a hospital discharge team, mobile outreach services, Housing Associations, the local authority housing department and word of mouth.

The most common outcome is for people to move from private renting to sheltered housing with Housing Benefit.

#### **4.22 Focus of MMB**

The caseworker focuses on housing option issues and refers clients with MMB issues to other members of the organisation. One is a financial advocate who does home visits, looks at why clients have financial problems and provides advice and advocacy. The other is a benefits adviser who has a team of four or five volunteers and who does home visits.

#### **4.23 Successes**

It is difficult to assess the success of the specific MMB part of the client casework as this is undertaken by other members of the organisation who do not report to FirstStop and who were not involved in the evaluation. But the housing options service has secured positive outcomes for clients, many of whom are very vulnerable e.g. are homeless, have mental health problems or are illiterate.

One success has been the ability to share information to provide clients with holistic support.

“We all try and share information. We have a pop in shop front and we try and manage expectations. For MMB it is referrals to the money advocate or the in house benefits advisor. This was provided by Age UK and was already there. They refer to us if it is a housing issue. We are holistic. There is a good partnership between advisors. Health visitors refer to us and the carer centre. We have strong links”.

Being able to bring different services together to raise awareness about housing options has been part of the work undertaken by the service.

“We are starting to talk between different services, for example, to identify landlords that will take DSS and work together with them.... All statutory services have so little time and few resources. It is best to build links”.

#### **4.24 Challenges**

One challenge has been the level of demand for the service when the caseworker post is only part time two days a week. This has also made it very difficult to recontact clients to try and ensure client self assessment monitoring forms are completed.

“It is a lot when you only work two days a week. I have a couple of volunteers..... As demand has increased we have streamlined what we do. We send packs of information out and tell people to come back when they have read it. We try to make those who can be responsible for themselves and help the ones who can't cope or read and write. But it takes me ages to get back to people, maybe a month. But we do get good results”.

A challenge for this service is dealing with vulnerable clients with high levels of need in an area with high pressure on housing and a lack of supply.

“Unless they are really ill, not just having cancer or HIV, but not able to walk from it, they must be disabled by it, they will not get housing. There is a housing shortage and they are told they won't be housed unless they can show they are more vulnerable than anyone else. It is a desperate situation”.

Particular groups of clients can be difficult to house, such as homeless people with multiple problems, people with no deposit, employment or guarantor for their rent, people returning from living overseas who are ineligible for local authority housing support, and people who are in the 50 to 60 age group.

“The most difficult to help are people who are mid 50s with children as they can’t go into sheltered housing but are starting to have the problems of an older person. There are few answers. We have never succeeded in raising a deposit for private renting”.

## **4.3 Lincolnshire Home Improvement Agency**

### **4.31 Nature of service**

The MMB project was incorporated into the core work of the service which was dealing with Disabled Facilities Grants (DFGs) for four district councils. The theme for the MMB work was over 65 self funders and this fits well with those applying for DFGs. When the caseworkers went out to complete a DFG application with the client, they also covered wider MMB issues.

The wider organisation underwent a change during the MMB project and secured a contract as part of a consortium with other local organisations to provide a Wellbeing Service, which complements adult social care, and caseworkers became trusted assessors. The MMB target group is over 65 self funders but the Wellbeing Service is for anyone over the age of 18. MMB has been incorporated into the assessment. This asks clients questions about their personal finances and whether they feel able to pay their bills and heat their home on a scale of 1 to 10. If there is a low score then assessors identify the help clients need, including maximising income through benefits, tax credits, reducing fuel poverty, managing debt, or accessing paid work. The organisation also has a housing options advisor.

### **4.32 Focus of MMB**

The main focus of the MMB work was finding extra funding for clients who are not eligible for a full DFG. This is mainly done by applying to charities, often charities related to the client’s work history. Caseworkers also encouraged people to apply for Attendance Allowance and helped them fill out the application forms. The caseworkers also provide advice on other assistance that could be useful.

“We even check small things like bus passes and many people even in their 80s didn’t know they could get it free and the same for their TV licence. We check entitlements to local provision in their area”.

### **4.33 Successes**

The main successes have been in securing grants to top up DFG allowances. The local authority may deem a person eligible for a DFG but can require a contribution from the client and some people are not able to afford it, which prevents them from accessing the DFG. DFGs are mostly used to fund home adaptations that enable people to maintain independent living in their own home, such as stairlifts and walk in level access showers.

Securing additional income through successful applications for Attendance Allowance has also been a common client outcome.

#### **4.34 Challenges**

The main challenge is trying to support people who are struggling to manage at home but who are not eligible for DFGs and cannot afford to fund home adaptations themselves. The caseworkers refer them to the housing options advisor but most people are reluctant to move.

“The biggest challenge is where people are not eligible. What else do you advise? They are reluctant to take out a loan and probably wouldn’t get one anyway because they are on a limited income. They are asset rich but cash poor. They own their own homes but they cannot afford to maintain, repair or heat them. But all their memories are there. If they will not get a DFG we refer them to the housing options advisor to look at moving options. For a few the outcome is a move but most don’t and they just have to manage”.

All the referrals to the MMB advisors have been in house. The service has struggled to get outside referrals and feel that this is because other organisations are providing similar support to their client group.

It can be challenging to encourage clients to discuss financial issues and to claim benefits to which they are entitled.

“Older people downplay their needs and don’t want to be a bother and they do not like to claim benefits. When we ask about finances people are suspicious. But the people we have helped are very appreciative”.

### **4.4 Goodwin Development Trust**

#### **4.41 Nature of service**

In this case the service is not providing housing options but is part of a wider organisation that provides different kinds of support to older people. People who contact the organisation with financial concerns are referred to the caseworker. About half of the clients have face to face meetings at the office and the other half receives visits at home from the caseworker who spends an hour to an hour and a half going through the client’s circumstances.

#### **4.42 Focus of MMB**

In the meeting with a client the caseworker will check basic money related information, such as if they are claiming benefits to which they may be entitled, if their pensions are being claimed, if they have made wills and if they check their bank accounts. The issues people contact the service about can change. For example, there were enquiries about the changes to housing benefit when first introduced and enquiries about energy tariffs at a time of price rises. The caseworker often refers clients for a benefits check and provides support with debt management. However, support can be quite holistic.

“I tell them if there is anything they need to ring me. It can be the simple things. One lady who is housebound, the police had to break a window to rescue her when she fell and she can't get out so didn't know how to get it fixed so I sent the handy van. Then she called because her glasses had broken so I arranged for Specsavers to go round. She comes to me for information. I have just referred her to the council for a lifeline as she keeps falling over”.

#### **4.43 Successes**

The benefits checks have been successful in securing a higher income for clients.

“I refer a lot for Attendance Allowance and 90% get it. They don't realise it isn't means tested”.

The money management support and debt advice has made a significant difference to the financial situation of some clients.

“A few had high debt issues so I referred them to CAB. In some cases it was mismanagement of money. I gave heavy support to one client in her 70s and got her debt relief as she was paying £126 a week to Shopacheck. I got her trust and confidence. Now she pays £3.80 a month. But she has no clue how to budget so she now comes to me weekly for guidance and we go through her receipts to see how she is spending.”

Following up with clients to check that they received their additional benefits and seeing the difference it makes to people has shown how the support can enable people to deal with problems:

“What is going well is getting people the help they need. We give a follow up call a month later to check their Attendance Allowance came through etc and it has made a difference. It is the satisfaction of knowing that problems are being solved. They just needed a little bit of help. And they like having someone they can put a face to”.

Being embedded within a wider organisation has been beneficial in providing holistic support to clients.

“If I can't solve it we have a team so there is nothing we couldn't solve”.

#### **4.44 Challenges**

One challenge has been in promoting the service and in getting enough referrals.

“The challenge is waiting for referrals to come in. It is on the web but we are not getting referrals off the web, it is too hard to use for older people”.

## 4.5 Summary

Each of the four services is different and has incorporated MMB in different ways. They have access to different resources and the amount of funded caseworker time varies. The services and organisations also had different levels of involvement in older peoples' local information, advice and support networks. These factors shaped the way in which referrals to the service were achieved.

There is demand for the services and evidence of positive outcomes for clients. Clients have been assisted to increase their income in different ways, for example, through securing higher benefits entitlement, better money management, debt management and reduction in their energy bills. Clients have also received advice and support to improve their housing arrangements and to maintain independent living, for example, through help in securing funding for home adaptations or through support to move to housing more suitable for their needs.

The existing housing options services have been strengthened by the additional focus on MMB, giving caseworkers and clients more options and choices. The caseworkers have raised awareness of the FirstStop information and advice service amongst older people and other professionals and this widens the potential benefits of the project. Another legacy of the project beyond the clients who were directly assisted is the wider organisational learning as people are made aware of MMB and housing option issues and the resources and strategies available to deal with them. The use of the FirstStop resources, such as the website and accommodation search facility, will continue beyond the lifespan of the projects and so will add to organisational capacity and knowledge.

There is also evidence of how caseworkers have begun to bring services together, working to raise awareness of MMB and housing option issues with other service providers and relevant groups, such as OTs and private rented landlords.

All four projects have experienced problems with the client self assessment monitoring forms. The questions have been regarded as irrelevant or daunting by clients who have been reluctant to complete the forms. Recent rewriting and shortening of the questionnaire will hopefully mitigate some of these problems. Pressure on caseworker time and resources can make it difficult to spend time trying to have forms completed, and some projects have their own monitoring or feedback system within the wider organisation.

The caseworkers face time pressures, needing to balance awareness raising work with casework, coping with the level of demand for support from clients, and in managing complex cases which can be lengthy.

The focus on specific themes and groups was more relevant for some projects than others. One project did well in engaging a hard to reach group through making specific efforts to do so. For one project the group they were aiming to reach was already their client group. For two of the projects the caseworkers were helping a wide range of people. Referrals to the services have not been difficult to secure as the projects are embedded within existing organisations.



The caseworkers face particular challenges that are beyond their control. For example, in most areas there are housing supply problems which means that there can be a lack of suitable, affordable housing for older people who want to move home. There are also funding constraints which can make it difficult to assist certain people, for example, those who need adaptations but are not eligible for a DFG.

There are also certain particularly challenging client groups. These include the very vulnerable with multiple needs, such as homeless people, people under 60 who are not eligible for many forms of support, and owner occupiers who are asset rich but cash poor and who are ineligible for financial assistance. In some areas there is pressure on the social housing supply so access is limited and it can be difficult to secure. Overall there is a lack of adequate housing supply and in particular a lack of specialist older people's housing. This can mean that those who would like to move to a more suitable home are unable to do so. Many older people do not wish to move but have low incomes and need support to maintain and heat their homes and to adapt them to make them safe and accessible. But accessing financial assistance in a time of budget cuts and service cut backs is increasingly challenging.

## 5) Client outcomes

This section analyses the outcomes for clients who used the MMB services. It draws on data from the semi structured in depth interviews with a sample of clients. Quotes from the interviews have been used to bring life to the research findings but have been anonymised and each client interview (CI) identified by a code.

### 5.1 Increased knowledge of benefits and grants

The interviews with clients show positive outcomes and individual benefits to people who have used the services. Clients have been assisted to manage their money more effectively and to increase their income. Not all financial problems can be solved but for people on low incomes even relatively small increases in income can make a difference. Clients gained access to benefits and grants they would not have otherwise known about.

“I didn’t know about Attendance Allowance. I thought that to be disabled you had to be someone who can’t get about at all”. (CI 3)

“I got Attendance Allowance and Pension Credit. I didn’t know anything about it. I am going to spend a bit today. I am going to buy grass cutters to try and get on top of the garden. I have a war pension and thought if I claimed it would affect it but it didn’t. I didn’t claim [caseworker] did. The extra money has made all the difference in the world”. (CI 2)

### 5.2 Improved energy efficiency, reduced fuel poverty and increased income

As a result of the changes in their housing situation, clients reported improvements to their health, in addition to energy efficiency improvements and increased income through energy savings.

“I live on my own in an old property and there is damp and all the windows were rotten and old and did not fit properly. I am on a limited budget. The windows are in a poor state....It was affecting my health. I have a form of rheumatism and some days I struggle to get out of bed and have bad arthritis. The damp made it worse and it is a cold house.... They were a great help. I got a new boiler as mine was below standard. I had five new radiators. It didn’t cost me anything. It was unexpected.... now I have the new radiators and windows I don’t feel cold. It has improved my life immensely. I use less gas too. The bills are still high because it is an old Georgian property with high ceilings but it has cut the bill by about a third. Looking at the units used last year at this time it has dropped significantly.... I don’t mind paying more for gas if you’re warm but I was getting huge bills and freezing, all the heat was going out the windows and the ceilings and anywhere but where it should have gone. It is an excellent service and [caseworker] is very approachable and very nice”. (CI 7)

“I was worried about the heating as the boiler kept breaking down. [Caseworker] sent me some forms that my daughter filled in. They were sent somewhere. I got forms from different charities and filled them in and sent them. I got a new boiler and two new radiators in the living room. It has made a big difference in the house. It is much warmer”. (CI 5)

Many people would have struggled to change energy suppliers without assistance.

“I also changed energy suppliers and they were very helpful. It is complicated and confusing to change. A nice lady came and she did all the facts and figures....I would not have been confident to do that on my own.....If I do it again I will need the advisor as I couldn't cope on my own”. (CI 6)

One lady would have preferred to move but her home had been devalued considerably by a potential subsidence risk. She was managing with a bed downstairs when it became too difficult to use the stairs, but the room was very cold. The caseworker helped the client to improve the heating which made a difference to her quality of life.

“The house is too big, the garden is too big and I struggle with the stairs. I had a bed downstairs for emergencies. But it is very cold in that room so she was kind enough to see if it could be made warmer. She sent a surveyor who advised that it needed bigger radiators here and in the adjacent kitchen. They did all that for me with a grant....I was a bit poorly before Christmas and couldn't get up the stairs.....So I slept downstairs for four weeks and it was lovely and warm so what they did was very helpful”. (CI 6)

### **5.3 Support to move to suitable home**

Clients have received practical support. People who have been assisted to move have received help in paying for and organising new carpets, white goods and removals. This support has had a positive impact on their income, health, overall wellbeing and ability to maintain independent living.

“I brought my son up on my own. We needed to move because of all the druggies and smackheads. Now we have a garden and a patio and it is absolute heaven.... They helped me apply for benefits and sorted me out with some furniture when I moved though charity grants for the new house. She got me some gift vouchers for Argos and she was smashing. It has made a lot of difference. We are a lot happier where we are now”. (CI 11)

“We had an offer for a one bedroom bungalow from a three bedroom house. We sold the house but we didn't have enough for removals or carpets. They paid for the removals and the carpets. When we sold the house we made them a donation....Without help we would have had to manage.... They did our benefits too....She filled the forms in. Someone came from pensions and both of us got Attendance Allowance. I got the higher rate because of my health. If it had not been for [caseworker] we would not have done it. It has made life a lot easier. We have never had to ask for benefits on the rent or the council tax. We have mobility issues so we have been able to get a taxi and otherwise we would have been stuck at home....It has enabled us to do things we could not do before”. (CI 14)

#### **5.4 Support to maintain independent living in existing home**

People who have stayed put have been assisted through practical support such as provision of new appliances and reductions in energy bills. This assistance can lead to health and wellbeing improvements and reduce the anxiety caused by debt.

“I was trying to get help because my cooker had packed in. She got me a new cooker. It took a while and she had to try lots of places but she managed in the end. She looked into everything like money and my gas and electric. She got money off my electric to £135. This has made a difference. My boiler packed in last year and when they took out the old back boiler they put an electric fire in which I have used over the winter but it used a lot of electric and it put me in arrears. Now I am just about out of arrears. It was a worry....It helped my health. I’m a diabetic and I had to manage without a cooker so could only use the microwave and I wasn’t eating properly.” (CI 1)

People who have been supported to stay put have also received practical help in the form of home repairs and adaptations. These help to reduce the likelihood of falls in the home, to reduce anxiety, increase the standard of their housing and its energy efficiency, and to enable people to maintain independent living.

“I struggle at home to get up the stairs....I was eligible for a DFG but needed extra funding to get it. [Caseworker] contacted the civil service benevolent fund as I used to be a prison officer and I got a grant....She helped me to fill out the forms and sent them and everything.... I have had the stairlift and am still waiting for the lower level shower.....It is much easier. I am not out of breath when I get to the top and can come down safely. I have already had a couple of falls.... Without the stairlift I would have had to manage and keep struggling”. (CI 19)

“I had a problem with the kitchen roof which was leaking and wind damaged and [caseworker] came to see me. I have a war pension so she contacted the Royal British Legion who already had my details and they were very good and paid for the repairs to the roof. It was very good and I was very grateful. [Caseworker] was very good. I would not have been able to fix it without it. It was making it very cold and the wind was rattling the roof. I was worrying about it. I thought the last thing you want is the wind taking the roof off. The roof is very good now and the service was excellent. It really helped a lot and I feel more confident that it was a good job done. It was very good”. (CI 4)

One client was able to have a wet room fitted after the caseworker secured him a grant to top up the shortfall on his DFG. He has been struggling to use the bath and had already been hospitalised after a fall.

“I got a letter saying that the council would pay £3500 but I needed to find £1500 myself and that was beyond me and I didn’t have it.... I have a flat floor all the way through now. Everything is at the right height. I don’t have to reach up high for the controls.....It has made things a lot easier. I can shower every other day now instead of every four or five days....I was worried about falling when getting out with my hands and feet wet. I had to bend double to hold the edge of the bath as it was a low

bath.....I had an incident in January.... I went to get out of bed and my legs collapsed and I fell and hit my head on the bedside cabinet..... I am independent and do my own cooking and cleaning... It has worked out very well". (CI 17)

### **5.5 Impact of higher incomes on independent living and quality of life**

Where peoples' incomes have increased, the money can be spent on looking after themselves e.g. heating their homes or spending more on food, on maintaining their property, and on things that enable them to maintain independent living and enjoy a better quality of life.

"It has also helped because I am in a pensioner's club and they have holidays and now I can say I can go because I can afford it". (CI 3)

"[Caseworker] was great. I can do things now. Instead of having fish and chips I can cook a proper dinner. Now I can cook four times a week and do a special on a Sunday. I am very pleased. It is surprising what you can do after. A little bit of help makes a difference and is the cream on the cake. I am over the moon. I can buy things now that I couldn't before. Before I always bought the cheapest of the lot." (CI 3)

The impact on a client's quality of life can be very significant.

"I was referred to the falls clinic because I kept having blackouts in the street. They referred me and she got in touch and they came to look at my house and it was no good. They helped me out considerably...I had no heating and hot water for years. At the clinic they asked me how I managed and I said I have a kettle. I had just let everything slide somehow. I lived like a hermit. Blimey it saved my life. I would not have survived the winter. All my strength and energy had gone..... Having hot water and heating is a luxury. It was a life saver and I am not exaggerating". (CI 2)

Through advice and support some people are better able to deal with financial distress.

"Shopacheck were a pain. I got into trouble but [caseworker] sorted it. Now I go and take her my receipts once a week so she knows what I have spent and so she knows I am not going down the same road again. Shopacheck didn't come last week as they told them they can only come once a month. I was paying over £100 in interest out of my pension and it was killing me. Now it is £3.91.... [Caseworker] says if I want to buy clothes now it is ok...I haven't been able to buy new clothes for a long time. [Caseworker] is a big help. I see her every Friday....As long as I see her I feel safe. When you feel safe, you know what I mean?" (CI 16)

Some clients were very vulnerable and experiencing crises and these were alleviated by the support they received.

"I was living on the streets. I had been homeless for three months....I was living on the streets and sleeping on park benches. I did it when I was young but I'm not young now. My liver has gone and I have a heart problem. At times I thought, what's the point? But [caseworker] and the social worker were outstanding. All I had to do was

go in and sign the paperwork..... I have a bungalow studio in a sheltered complex with a warden. They sorted all my benefits, Disability Living Allowance, full Housing Benefit. They have all gone up to enhanced and I now get the top rate in all of them. It has taken a great weight off my shoulders. It has made an outstanding difference..... Everything in my life is going up and up instead of down and down.... It has made such a difference to my quality of life.....Without their help I would have ended up dead on a park bench". (CI 8)

Some people have greater confidence in managing their money and greater awareness of their options. The support can enable people to make informed choices about their housing and care options and the financial implications of the different options that are available. Without support most people said they would have struggled on in the same situation, with the anxiety, lower income, cold homes, properties in disrepair and detrimental impact on their health and wellbeing.

"Without it I would have had to manage and just carry on wearing cardigan over cardigan. I am less worried now". (CI 5)

### **5.6 Feedback on satisfaction with the service**

The personal touch of the caseworker was valued in all cases and being able to talk to someone face to face makes a difference to client confidence and it is this personal support that is remembered by all clients. Many clients described how persistent the caseworker was in trying to secure them assistance.

"[Caseworker] was brilliant. If she claimed and they turned me down she would come round and ask if it had come through and I'd say no and she'd say claim again". (CI 2)

The interviews did raise some issues. In particular, it was apparent that the client self assessment monitoring was problematic. Many people did not remember completing the forms, or were adamant that they had not filled them in. People found the questions rather bewildering and did not want to go through them individually, but did express how grateful they were for the help of the caseworker who assisted them and their satisfaction with the service.

## **6) Conclusions**

### **6.1 Client satisfaction**

Through the face to face casework older people have been empowered to make informed decisions, have gained greater knowledge of the options available and have been supported in appraising these options effectively. The feedback from clients is very positive.

### **6.2 Outcomes**

Positive client outcomes include older people being informed to make appropriate choices, reduced anxiety and better knowledge of options. Through the support provided by case workers the quality of life of older people who have used the service has been improved.

Caseworkers have supported people to maximise their income, particularly through benefits checks, which can have a significant impact on their income and ability to support independent living e.g. by being able to afford gardeners or cleaning support, and to improve their quality of life e.g. through being able to afford transport and heating. They have been able to secure grants to assist clients in maintaining independent living e.g. to top up DFGs for home adaptations.

People who are supported to move are most commonly downsizing and/or moving into social sheltered housing. For some this was a planned move in response to difficulties managing at home, but for others it was as a result of being at risk of homelessness, or being already homeless. Support to stay put is often related to the provision of adaptations, repairs and heating improvements in order to maintain independent living for longer.

### **6.3 Target client groups**

The aim of targeting specific client groups was achieved as the four organisations had a different focus and type of service. BCH was able to target BME elders. Lincs HIA was a service providing support to access DFGs and so was already dealing with people who are self-funding. Croydon was dealing with a particularly vulnerable client group including people with long term conditions, older people with disabilities, people experiencing mental health problems including dementia and homeless people with multiple problems and high levels of need. All were supporting people living in unfit accommodation.

Without the support received, at best people would have struggled on and endured a lower quality of life and wellbeing, but at worst could have experienced fuel poverty, debt, health problems, hospitalisation or possibly even entry into residential care.

### **6.4 Awareness raising**

Through the strategic and promotional work the projects have raised the profile of FirstStop amongst sector professionals and older people, making them aware of the telephone helpline and the resources available on the website. The caseworkers are playing a role in joining up different services across the housing, health and social care system to achieve outcomes which would not otherwise have been achieved.

## **6.5 Challenges facing vulnerable older people**

There are a range of challenges facing vulnerable older people and the combination of physical frailty and low incomes can have a detrimental impact on wellbeing and quality of life. Some older people are very vulnerable with multiple needs, such as those who are homeless, illiterate or have learning difficulties, have mental health problems or dementia.

Many older people prefer to remain in their family home as they age, but it may not be suitable or safe as their needs change as a result of worsening health and mobility. There is a lack of overall housing supply in England and in particular a shortage of specialist older people's accommodation. People who would like to move to a more suitable home are not necessarily able to do so. Many older people who own their own homes are asset rich but cash poor and are unwilling or unable to release equity from their property to support their needs. The funding of home adaptations and repairs for people on low incomes can be very difficult. The MMB caseworkers applied for funding from charities and/or tried to secure higher income from benefits to which people were entitled but did not know about. Demand for the services was high and there is clearly a need for the provision of information, advice, support and advocacy for vulnerable older people.



## 7) Contacts

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## **8) Appendix: local partner project descriptions**

### **8.1 Black Country Housing Group**

BCHA has two dedicated advisers based in the housing department primarily helping people who wish to change and adapt their properties, raising funds to do this and sorting out welfare benefits. Maximising income, ensuring people are on best rates for utilities providers and doing pension forecasts all form part of the holistic MMB service. Over the past 18 months they have established good relationships amongst ethnic elders. The service is delivered by two caseworkers who both used to work for Care and Repair and are well known locally as people who can help with housing and care issues.

[www.bchg.org.uk](http://www.bchg.org.uk)

### **8.2 Age UK Croydon**

Age UK Croydon has a well established Information and Advice department including a helpline and specialist advisers offering Housing Options, Financial Advocacy, Benefits Advice and Energy Advice. Specialist advisers and the Helpline are supported by a team of trained volunteers. There are 10 part time staff and a number of volunteers within the department. Most clients come in through the Housing Options route and can be supported by a combination of specialist staff and volunteers depending on the nature and extent of the issues they need help with. Homelessness for older people is a big issue in Croydon. Being a well established and well known organisation, there has been high demand for the services.

[www.ageuk.org.uk/croydon](http://www.ageuk.org.uk/croydon)

### **8.3 Lincolnshire Home Improvement Agency**

Lincolnshire HIA has managed the financial assessments and organised the work for Disabled Facilities Grants (DFG) for four district councils in Lincolnshire. They have 12 staff including a Housing Options Adviser, an MMB Adviser, building surveyors and caseworkers. MMB work has primarily been focussed on those clients approaching the organisation for DFG's. CAB and Age UK's in the area are well established and known for delivering financial capability and benefits advice locally. As of 1st April Lincolnshire HIA are part of a consortium with Age UK Lincoln, Lace Housing and Boston Mayflower to provide the Lincolnshire Wellbeing Service which delivers a range of support and preventative service to vulnerable people across the county. Changes in jobs have meant that MMB is now being delivered by a combination of generic support workers and Trusted Assessors.

[www.lincshia.org](http://www.lincshia.org)

### **8.4 Goodwin Development Trust**

The Goodwin Development Trust provides a wide range of services across all age groups in Hull and East Riding. GDT also have a Home Improvement Agency, a Handyperson scheme, is a landlord through their 'empty homes' initiative, and is very involved in the food and fuel poverty agenda, having a food bank, Fare Share and development work in fuel saving technology. The caseworker deals with all aspects of housing, care and money

matters for MMB and RBL (Independent Living for Older Veterans) and case manages those cases that are referred to external organisations for assistance.

[www.goodwintrust.org](http://www.goodwintrust.org)