The role of home maintenance and modification services in achieving health, community care and housing outcomes in later life

OLDER PEOPLE WHO USE HOME MAINTENANCE AND MODIFICATION SERVICES VALUE THEM HIGHLY. SUCH SERVICES SUPPORT PEOPLE TO CONTINUE TO LIVE IN THEIR CURRENT HOME FOR LONGER. HOWEVER, AUSTRALIA LACKS A SYSTEMATIC APPROACH TO THE PROVISION OF THESE SERVICES THAT LIMITS THEIR EFFECTIVENESS IN ACHIEVING HEALTH, WELLBEING AND HOUSING OUTCOMES.

KEY POINTS

• The Commonwealth/State Home and Community Care (HACC) program has been the main context for development of Home Maintenance and Modification (HMM) services. However, a range of other similar services have been developed alongside the HACC program in an ad hoc manner.

• HMM services in Australia are diverse, funded from a range of sources, loosely linked, without strong policy or organisational co-ordination and direction, and without a strong sense of identity as a services system. There are wide variations in the level and type of assistance in each state and territory.

• Consumers interviewed for the study reported positive outcomes from their use of HMM services, including greater independence, heightened confidence, greater security, and increased sense of well-being.

• However, there are great disparities in the level of services; and in who is able to access services. There are shortfalls in professionals, such as occupational therapists, and in architects and builders who understand safety and accessibility issues for older people. There are no sector-wide information systems, and there are under-developed links with the health system.

This bulletin is based on research by Associate Professor Andrew Jones, Ms Desleigh De Jonge and Ms Rhonda Phillips of the AHURI Queensland Research Centre. The research examined the organisation and provision of home maintenance and modification services in Australia, and identified key issues to be addressed to maximise their contribution to the housing, health and well-being of older Australians.
To address these issues and improve the housing options available to older Australians, HMM services should be viewed as a central component of a housing strategy for older people, as well as an integrated whole-of-government ageing policy which acknowledges the interconnection between housing, health and community care in supporting people to continue to live at home for as long as possible.

CONTEXT

Home Maintenance and Modification services are designed to maintain the dwellings of people in later life in order to enhance their safety, independence, identity and lifestyle. All are aimed at improving the capacity of older people to maintain independent living within their homes and to also improve health and community-participation outcomes.

Government-subsidised HMM services to qualifying households include:

- Structural modifications such as redesigning bathrooms.
- Non-structural modifications such as grab rails, safety locks and non-slip flooring.
- Repairs and improvements such as fixing uneven floors, improving lighting.
- Ongoing maintenance such as lawn-mowing, replacing light bulbs, removing hazards.

The main HMM program is funded through the Commonwealth/State Home and Community Care (HACC) program. Other HMM services are funded solely by the Commonwealth, for example, those provided by the Department of Veterans’ Affairs, or by state governments, for example, the Home Assist Secure (HAS) program in Queensland.

RESEARCH METHODS

The purpose of this research project was to improve understanding of the scope and effectiveness of HMM services, to critically analyse the current policy settings in which HMM services operate, and to consider possible alternatives. A range of research methods were used, including a review of international literature on HMM; documentation of descriptive information about HMM services in Australia; a series of focus groups held in all states and the ACT involving 92 HMM service providers; and 30 semi-structured consumer interviews conducted in Queensland, South Australia and Victoria, involving older people who had received HMM services during the previous six months.

KEY FINDINGS

Complex patchwork of services with varied objectives

The large variety of HMM programs was found to have resulted in a complex patchwork of HMM services, with different eligibility criteria, variation in the assistance available, and in fees and charges.

The HMM programs meet multiple objectives and can be viewed from various policy perspectives. They assist people to maintain their properties when they are no longer able to do this. As well, they adapt/modify people’s homes when their capacities or needs change through frailty, increasing disability, cognitive decline, health issues, accidents, or changed circumstances. HMM services play a key role in facilitating discharge-to-home from hospital or rehabilitation of older people.

However, HMM services can also be viewed, from a housing perspective, more as universal services that enable people to make housing adaptations or transitions that reflect changing circumstances. From this perspective, HMM services can be viewed as one of a series of programs to facilitate housing pathways, focused upon adapting their current environment as an alternative to relocating.

The over-riding outcome of HMM services is that they extend the period of time in which people can remain living in their current homes, thus delaying the need to seek alternate housing arrangements.

Consumer perspectives

Consistent with previous overseas and Australian research, the consumer study found a high level of satisfaction with HMM services. Key reasons include:

- HMM services enabled consumers to remain in their own homes;
  ‘Without the rails I wouldn’t be able to come home. A shower would be impossible. We couldn’t cope without it … it’d be impossible to live here.’
- Assistance from HMM services enabled consumers to avoid relying heavily on busy family members, because sometimes the assistance
provided by family was unreliable, delayed, or of poor quality.

- The local HMM service was a reliable source of information and advice on HMM issues; it could be trusted – attributes that were highly valued.
- HMM services effectively planned and coordinated the work undertaken.
- HMM work was undertaken in a timely way, although significant delays and disruptions were sometimes experienced with major modifications.
- Consumers were happy with the level of information provided about work proposed by HMM providers, and felt they had ample opportunity for input into provision of the services.
- HMM providers were polite, friendly and reliable.
- HMM services produced positive outcomes, such as greater independence, greater sense of confidence, security and prevention of accidents;

’Well, I was just so glad. Grateful of anything being done that would improve the safety and I knew I wouldn’t be able to manage much longer with the stairs and that, you know.’

However, consumers also perceived HMM work as costly, with some not taking up home maintenance or modification works because they were unable to afford it, a finding also identified in other recent Australian studies.

**Service provider perspectives**

Service providers identified numerous shortcomings in the organisation and provision of services, a number of which have also been identified in other Australian studies. These included: lack of a clear national policy framework; unclear links to health and housing policies for older people; uneven provision of these services throughout the country; lack of a clear identity for HMM services in some states; the complexity and diversity of funding arrangements; lack of uniform terminology; and lack of research. Shortfalls of professional and technical expertise and no sector-wide information systems were also highlighted.

Service providers also said the system as a whole appeared to be significantly under-funded, although this is difficult to verify and quantify given the lack of policy clarity, absence of service benchmarks and understanding of unmet needs.

These shortcomings created difficulties such as:

- A lack of awareness of HMM services by many older people and the general community.
- Uneven and sometimes poor quality of referral processes to HMM services from hospitals and other health services.
- Consumer perceptions of inequity of eligibility and subsidy arrangements.
- Affordability issues for consumers;

’With most pensioners its funding [that affects take up of services] … They don’t worry about their fall or anything like that but the $27.50 [cost of a rail] is what they concentrate on.’

- Difficulties experienced by private renters due to reluctance of HMM providers to invest in modifications, and opposition from landlords.
- Shortfalls of suitably trained professionals to undertake HMM assessments.
- Delays in home modifications as a result of lack of funding and/or unavailability of skilled building personnel.
- Overall lack of funding for services, resulting in dilution of services, and delays;

’Because of long waiting list, 12 months to get a modification done, we do only higher urgent … Anyone who is medium or below is not a priority … until they are getting to the crisis point…’ (Service provider);

’They are limited. They can only give you two and a half hours. You can’t get any more. You know what I mean? I couldn’t have them in here cleaning the whole place up for two days. It’s just a short-term thing. But very useful.’ (A consumer commenting about assistance with gardening).

- Problems stemming from an increasingly complex and demanding regulatory environment.

**POLICY IMPLICATIONS**

Home Maintenance and Modification services are highly valued by older people, but the complex patchwork of programs and organisations that has developed incrementally over the past two decades, may be an inadequate platform for the development of HMM policies and services to meet the needs of older Australians in a consistent manner across Australia.
There is a case for reconsidering the current approach to conceptualising and organising HMM for older Australians. The potential is to re-think and re-engineer HMM policy as central to a national approach to facilitate improved housing options for older Australians in order to gain efficiencies – including fiscal – in how governments provide for an ageing population.

HMM services could be viewed as a central component of a housing strategy for older people, as well as an integrated whole-of-government ageing policy which acknowledges the interconnection between housing, health and community care, in supporting people to continue to live at home for as long as possible.

Such an approach may comprise development of a national framework for provision and further development of HMM services and may build on existing services and incorporate their best features.

Specific issues that need to be addressed to improve the operation of HMM services in Australia include:

- **Objectives** – articulation of the desired outcomes of HMM services that acknowledges the interconnection between achieving outcomes central to housing, health, and community care.
- **Information and awareness** – improved awareness of HMM services and its contribution to the well-being of older people.
- **Referrals** – improved local linkages between hospitals and primary health-care providers and HMM services.
- **Eligibility and priority and user charges** – clearer rationale and consistency for eligibility, priority and charging policies across Australia.
- **Assessment services** – improved assessment capacity especially for major modifications.
- **Benchmarks** – agreed levels of provision of all types of HMM services, with funding to address shortfalls.
- **Services beyond HACC** – an extension of HMM services to the population of older Australians who are not HACC-eligible.
- **Improved funding** – to ensure better distribution of services and greater take-up by consumers who need the services.
- **Professional and technical expertise** – addressing the shortfall of occupational therapists and builders with HMM expertise.
- **Impact of regulation** – addressing the difficulties posed by the cumulative impact of numerous building, health, disability and legal requirements.
- **Service provision data** – developing better ways to measure levels of provision of HMM services.
- **Affordability** – developing ways of better understanding how affordability issues affect uptake of needed HMM services.

**FURTHER INFORMATION**

This bulletin is based on AHURI project 20335, *The impact of home maintenance and modification services on ‘ageing in place’.*

Reports from this project can be found on the AHURI website: www.ahuri.edu.au

Or contact the AHURI National Office on +61 3 9660 2300