Housing, technology and support evaluation: Residential Independence Pty Ltd

ISCRR Accommodation and Technology Project

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Three key studies

1. Expectations for and experiences of transitions to RIPL housing models

2. Evaluation of longitudinal quality of life outcomes of residents in RIPL settings

3. Post-occupancy evaluation of built and technology design
RIPL Project One
Stakeholders / informants

Person with disability

Where nominated by person with disability:

- Family member (0)
- Support worker/provider (2 pre-move, 1 post-move)

For post-occupancy evaluation project, architects, OTs, technologists, builders, support provider involved in housing development also involved
Human research ethics considerations

Approval gained from Monash University Human Research Ethics Committee for all projects

Seek permission from support provider to provide brief information on study to resident

If after review of this information the resident would like to hear more about the research, they can fill out their contact details and return them in reply-paid envelope to research group

The researchers will then contact the person and make a time to meet to discuss the study and progress explanatory and consent processes if appropriate
Recruitment

- Five of six tenants in the six apartments across development recruited
  - 4 males and 1 female
  - Four have pre-move data
  - Three have 12-month data
Transition to RIPL

Aims:

- Evaluate the expectations for transition to new RIPL models from the perspective of people moving into new models and, where available, family and support providers.

- Examine the actual experiences of transition planning and implementation for these people.

- Make recommendations regarding transition planning information, implementation and communication resources to enhance transition experiences.
Transition to RIPL

Qualitative study –

- Indepth interviews

- Data collected pre-move (transition expectations) and at 3 and 12-months post move (transition experiences and suggestions for future practice)
Longitudinal QoL evaluation

Aims:

- Gather baseline, pre-move data with people who will enter RIPL models
- Evaluate the health, activity, participation and quality of life outcomes of these people after they have moved into RIPL models (four time points)
- Identify the factors that promote or impede improved health, participation and quality of life outcomes for people living in RIPL settings
- Examine changes in health, activity, participation and quality of life outcomes over the project duration
- Provide recommendations for service planning and implementation to impact the health, participation and social outcomes of people living in RIPL settings.
Longitudinal QoL evaluation

Mixed methods study –

- Indepth interview

- Collection of demographic and health data

- Completion of published measures regarding physical and mental health, behaviours of concern, choice and autonomy, community integration, and life role participation

Data collected pre-move and at 6, 12, 18 and 24-months post move
Post-occupancy evaluation of RIPL projects

Aims:

- Develop an Environmental Evaluation Framework, consisting of comprehensive and tailored POE procedures
- Evaluate and report the impact of the designed built environment and integrated supportive technologies, as realised in RIPL projects, on user experiences and outcomes (i.e. tenants)
- Identify elements of the built environment, both physical and technological, that act as enablers or barriers to independence, participation and autonomy
- Draw on post-occupancy evaluation findings for recommendations to RIPL and TAC re future project design and development.
Post-occupancy evaluation of RIPL projects

Mixed methods study using customised POE framework developed –

- Indepth interview
- Collection of demographic data
- Completion of published measures regarding built and technology design and user experience
- Customised POE methods

Data collected pre-move and at 3 and 8-months post move
Quantitative data - results

- Very small numbers limit results to individual experiences
- Key quality of life measures will be presented
- Costing data about to be completed with TAC’s business intelligence unit
## Outcome data – Community Integration

<table>
<thead>
<tr>
<th></th>
<th>Pre-move CIQ total score</th>
<th>6-m post-move CIQ total score</th>
<th>12-m post-move CIQ total score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant 1**</td>
<td>10.25</td>
<td>12.75</td>
<td>11.5</td>
</tr>
<tr>
<td>Participant 2</td>
<td>9.25</td>
<td>17.25</td>
<td>18.25</td>
</tr>
<tr>
<td>Participant 3</td>
<td>13</td>
<td>11.75</td>
<td>14.25</td>
</tr>
</tbody>
</table>
## Outcome data – Life Role Participation

<table>
<thead>
<tr>
<th></th>
<th>Pre-move # life roles</th>
<th>6-m post-move # life roles</th>
<th>12-m post-move # life roles</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant 1**</td>
<td>4</td>
<td>6</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Home maintainer, friend, family member, hobbyist</td>
<td>Home maintainer, friend, family member, hobbyist, religious participant, sports fan</td>
<td>Home maintainer, friend, family member</td>
</tr>
<tr>
<td>Participant 2</td>
<td>5</td>
<td>5</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>Volunteer, friend, family member, religious participant, pet owner</td>
<td>Home maintainer, friend, family member, religious participant, pet owner</td>
<td>Student, home maintainer, friend, family member, religious participant, hobbyist, pet owner</td>
</tr>
<tr>
<td>Participant 3</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Home maintainer, hobbyist</td>
<td>Home maintainer, hobbyist</td>
<td>Home maintainer, hobbyist</td>
</tr>
</tbody>
</table>

** = Ongoing health issues requiring hospitalisation
### Outcome data – Opportunity for choice

<table>
<thead>
<tr>
<th></th>
<th>Pre-move RCS total score</th>
<th>Post-move RCS total score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant 1</td>
<td>82</td>
<td>96</td>
</tr>
<tr>
<td>Participant 2</td>
<td>86</td>
<td>94</td>
</tr>
<tr>
<td>Participant 3</td>
<td>87</td>
<td>100</td>
</tr>
</tbody>
</table>

+ Timing of going to bed, meals, household routines, staff recruitment, who live with, home furnishings

~ Removal of staff, pets
### Outcome data – SWL as a whole

<table>
<thead>
<tr>
<th></th>
<th>Pre-move</th>
<th>6-mo post-move</th>
<th>12-mo post-move</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>- SWL</td>
<td>- SWL</td>
<td>- SWL</td>
</tr>
<tr>
<td></td>
<td>- Total</td>
<td>- Total</td>
<td>- Total</td>
</tr>
<tr>
<td>Participant 1</td>
<td>5</td>
<td>7</td>
<td>8</td>
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<tr>
<td></td>
<td>40</td>
<td>58</td>
<td>61</td>
</tr>
<tr>
<td>Participant 2</td>
<td>8</td>
<td>8</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>73</td>
<td>75</td>
<td>73</td>
</tr>
<tr>
<td>Participant 3</td>
<td>4</td>
<td>5</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>39</td>
<td>36</td>
<td>40</td>
</tr>
</tbody>
</table>
Qualitative data - results
Qualitative data at 12-months post move

Positive experience of transition
• Role of transition planner identified as key
• Testing out new roles, some continued, some ceased
• Priorities made – support for meal prep to allow time for other activities

Increased independence and social contact
• Meal preparation, shopping, organising social events
Outcome data

Some problems identified with filling vacant support shifts and reliability of technology

- Regular meetings with support provider seen as valuable to quickly address issues arising
- Involvement in choice of support staff
- Occasional issues with support staff call alert identified

Excellent location of housing

- Options for shopping, volunteer work, study, nightlife and accessible public transport

Long term plans

- Move to more independent living vs staying “forever” – perspectives changing over time
Support worker perspective

- Independence
  - Functional improvements
  - Potential for greater independence & less support
  - Presence of staff may lead to over-reliance on staff support
  - Staff encourage greater independence
  - Independence and optional, flexible support allows individual more freedom

- Social networks developing for some

- Positive experience of working in RIPL Project One for staff
Recommendations – transition planning

Start as early as possible

- Transition planner engagement early - key worker
- Site visits
- Individual involved in staff selection
- Maximise staff and individual training in technology use
- Access audit of local neighbourhood pre-move
- Mobility training
- Aspirations of model clearly and repeatedly articulated to both individual and staff – doing ‘with’ rather than ‘for’, step in pathway of housing (?)
- Planning for home based leisure and strategies to manage sense of loneliness
- Incidental audit of staff practices over time and staff meetings
Recommendations – transition planning

Start as early as possible

• Minimise agency staff
• Structure routine support provision based on person’s preferences
• Proactive healthcare management and planning
• Skill development for home integration and community access
• Local service engagement – GP, dentist, church
• Community linking in new neighbourhood
• Regular reviews over time (not just in early days)
• Problem solving approach, with aspirations of individual and model at centre of this
• Role of pre-move support network (e.g. SSA provider, family) - important to acknowledge role in transition
RIPL Project One post-occupancy findings

- Eight key criteria identified against which to evaluate project:
  - Independence
  - Community integration
  - Homelike environment
  - Support
  - Effective workplace
  - Flexibility
  - Risk management
  - Scheme viability

- In general project one performed extremely well against these criteria; however, individual capacity impacted building performance
Panoramic tours
RIPL Project One post-occupancy findings

- Key recommendations related to:
  - Site planning and context
  - Layout and planning
  - Fitting the fitout
  - Home-like appearance vs functional effectiveness
  - Client selection
  - Customisation, modification and flexibility
  - Transition planning
  - Building skills and independence
  - Assistive technology design
  - Support model, and
  - Work environment.
Questions