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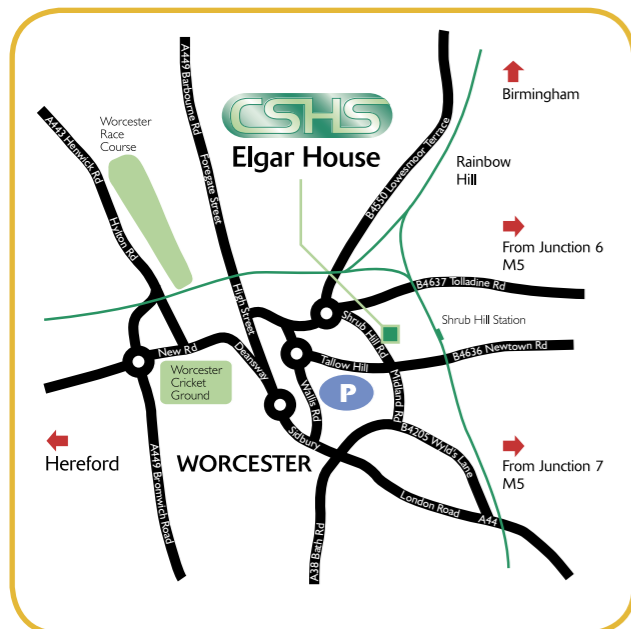
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Heart

CSHS MEMBER JOURNAL | ISSUE 14 | WINTER 2004 | £2.50

Partnership Working in Extra Care

Future directions

Financing the project





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WELCOME TO Heart

Being content with my present accommodation as a sheltered housing tenant the immediate response to the idea of Extra Care housing would be that it's not for me!

However, this is not taking into consideration the fact that I have reached a time in my life where I have more of a past than a future and I am now on the threshold of what is referred to as 'old age' and whatever that may hold. The prime advantage of sheltered housing, as has often been stated, is that you have your own front door, your own private place and a home for life. In a word 'dignity'. This is one quality that is a major consideration for those who look forward to what may measure ten, twenty or more years of the unknown.

We all hope to be able to cope physically and mentally in the future but the passage of time may take its toll. Extra Care, therefore, represents a dramatic and logical step forward in the concept of sheltered housing to continue to provide the care and attention required by those elderly tenants who become vulnerable.

Those concerned with creating the necessary facilities to provide Extra Care have recognised the demands that need to be addressed for the long term future. Accommodation, environment and services, especially those concerned with care, need to be an integral part of the whole equation. In this issue of HEART we explore a number of key issues in relation to the concept of Extra Care including its future direction, funding and regulatory systems, partnership working and the part to be played by assistive technology in creating an environment which will allow many vulnerable elderly people remain in their own homes and retain that essential ingredient – dignity.

Derek Wells
Tenant Board Member at Waltham Forest
Housing Association & ERoSH Trustee

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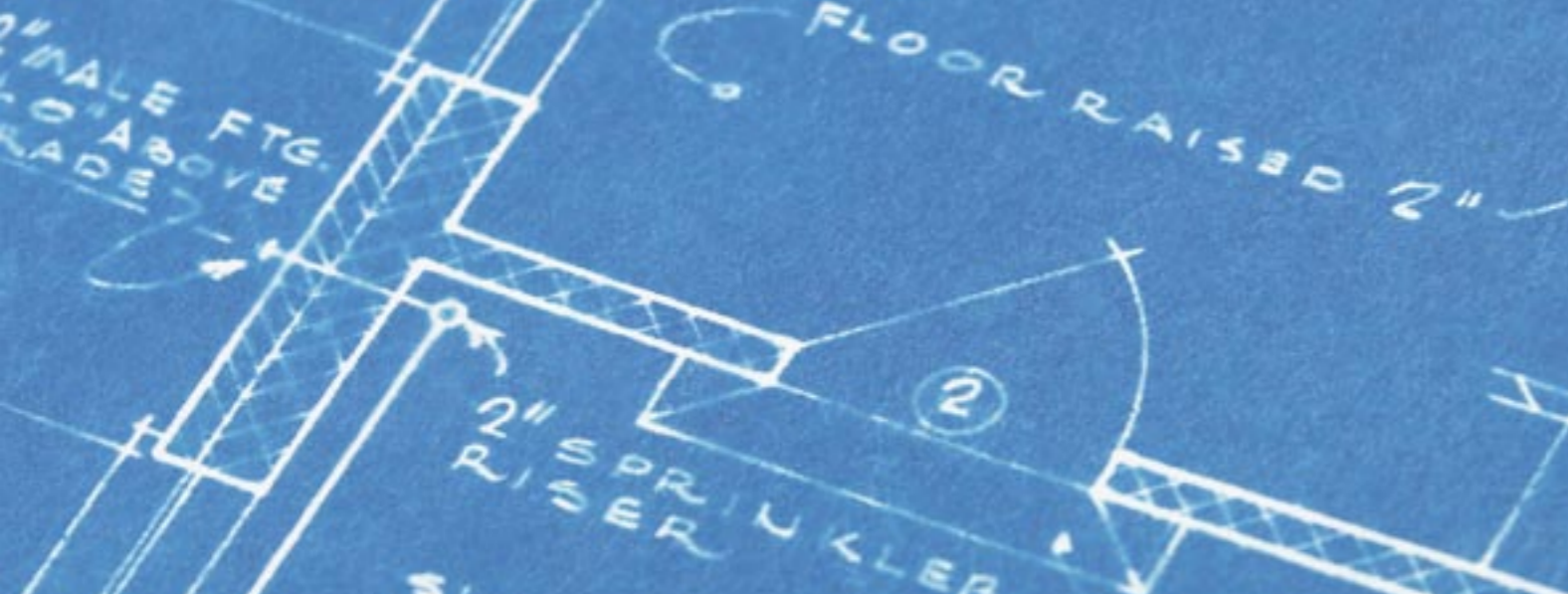
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Printed by Brewers of Helston

While every effort is made to publish all material submitted, space restrictions mean that on occasion it may be necessary to edit or summarise articles.



Planning for Extra Care Sheltered Housing

BY JEREMY PORTEUS

Extra Care, or very sheltered housing has moved to the top of the political agenda. In 1994, Paul McCafferty² noted that there was "a significant unmet need for very sheltered housing"; his claim that there was "a potential over-provision of ordinary sheltered housing" was probably coloured by the problem of difficult-to-let housing – often 1960's schemes of bed sits with shared toilet facilities. More recently built schemes have continued to be popular but little sheltered housing of any type has been built in the past decade.

However, the Department of Health (DH) has provided £87million in the two years to 2006 as capital funding for new extra care schemes. Over 200 applications were submitted in the first year and we are anticipating a similar number for this year. A further £60million is allocated for 2006-08.

Extra care sheltered housing comes in many forms. Landlords may be Housing Associations/RSLs; Local Authorities or private sector developers. Their schemes may be rented or leasehold. Levels of care and support provided within the schemes may vary; most have a dedicated in-house care team but will call upon professionals for more specialist forms of care. The management of the care team may be integrated with housing management or segregated into a separate agency.

The extra care scheme may fulfil a range of other functions. Some landlords have been experimenting with the provision of short term accommodation – for respite or intermediate care and rehabilitation. Other schemes develop as centres for outreach work – either by the care team or by the scheme manager (e.g. in providing a morning call to vulnerable people in the neighbourhood.)

Extra care sheltered housing is but one mode of accommodation available to older people most would probably prefer to stay in their own homes and receive "community care"; some will need more intensive care such as that provided by a nursing home. Extra care schemes do, however, provide a high level of care and support whilst maintaining the independence and control of the older person.

The planning for extra care sheltered housing must be positioned within an overall strategy to provide better services for older people – involving not only social services and health but also housing authorities, Supporting People and regeneration. None of these can plan in isolation because a mix of funding and approvals from different sources are required. A new approach is needed – exemplified by Liverpool City Council which has set up a Commissioning board to bring together a wide range of parties.

This Board works across previous planning and strategic partnership groups; together the members work to an agreed Commissioning process – embracing the mapping of needs, deciding what is required and when, developing detailed project plans and monitoring progress.

The DH's Housing Learning Information Network (LIN) aims to provide better information and to improve on and share good practice. It has produced a number of valuable reports, fact sheets and case studies.³ Visit www.changeagentteam.org.uk/housing to discover more.

Notes:

- 1 Extra Care Housing: Supporting Change and Improving Practice, by Jeremy Porteus, Housing Network Lead, Department of Health Housing Learning and Improvement Network
- 2 Paul McCafferty (1994), Living Independently, HMSO
- 3 See for example, Extra care housing for older people: an introduction for commissioners and Developing and Implementing Local Extra Care Housing Strategies, both DH (2004) and available on the Housing LIN website.

CONFERENCES & EVENTS GUIDE

DATES FOR YOUR DIARY



NIACE ENHANCING LEADERSHIP AND MANAGEMENT SKILLS

9th December 2004 - London

For further details contact jurjit.kaur@niace.org.uk

CSHS SUPPORTING PEOPLE – WHAT THE FUTURE HOLDS CONFERENCE

3rd March 2005, Novotel Hotel, Leeds

For further details contact CSHS on 01905 21155 or email cshs@cornwall.ac.uk

CIH SOUTHERN HOUSING MANAGEMENT CONFERENCE & EXHIBITION

25th & 26th January 2005, Bournemouth

For further details contact CIH on 024 7685 1772 or email training.conferences@cih.org

CSHS HEALTH & OLDER PEOPLE CONFERENCE

15th March 2005, Novotel Hotel, Leeds

For further details contact CSHS on 01905 21155 or email cshs@cornwall.ac.uk

CSHS DEMENTIA – THE IMPLICATIONS FOR SHELTERED HOUSING CONFERENCE

1st February 2005, Novotel Hotel, Leeds

For further details contact CSHS on 01905 21155 or email cshs@cornwall.ac.uk

CIH SOUTH EAST REGION ANNUAL CONFERENCE & EXHIBITION

15th - 17th March 2005, Brighton

For further details contact CIH on 024 7685 1772 or email training.conferences@cih.org

CSHS HEALTH & OLDER PEOPLE CONFERENCE

24th February 2005 – Thistle Euston Hotel, London

For further details contact CSHS on 01905 21155 or email cshs@cornwall.ac.uk

SIGN WORKSHOP: SHELTERED HOUSING AS A COMMUNITY RESOURCE

14th April 2005, University of Sussex, Brighton

For further details contact Peter Lloyd on 01273 678035

CSHS ANNUAL TWO-DAY CONFERENCE & EXHIBITION

7th / 8th June 2005 – The Oxford Hotel, Oxford

For further details contact CSHS on 01905 21155 or email cshs@cornwall.ac.uk



Future direction of extra care sheltered housing

MEIC PHILLIPS, EPIC TRUST

For me, having a flat with all the liberties of living how I wish, doing what I want when I want, having dignity to be able to live as independently as possible, with my own income and choices rather than having a room in a care home is what I aspire to have if I need care in older age. Extra care provides a way of living that offers dignity, independence, security with care and support.

There are ten clear issues for those constructing and delivering extra care now and in the future:

- 1 **24 hour care presence** getting the domiciliary care staffing and shifts right
- 2 **Use & role of scheme manager** getting the support service right
- 3 **Management structure** and protocol for co-operation in care and support
- 4 **Mixed economy** banding (using the scheme for different levels of need) or wings (for specialist services of dementia or mental health support)
- 5 **Referral /Assessment** access points, including keeping contact with social services for ongoing reviews and charging needs
- 6 **Charging** who pays and how? There are various funding streams: Supporting People, Social Services, Health, Insurance or savings (equity swaps) or direct payment mechanisms
- 7 **Name for the service** publicity, definitions vary. (I have spotted 29 variations in service name so far!)
- 8 **Design** for security vs liberty, i.e. ensuring safe routing, overcoming concerns about wandering. Empowering adaptation or changes to adjust to need i.e. the ability to integrate hoist infrastructure in the flat, ability to move partitions or surfaces etc. Promoting, the use of visual reminders & notices, the use of colours & textures

- 9 **Community use of spaces** luncheon clubs, surgeries, day care? Ensuring the building and its residents are part of an integrated community even being 'hubs' for social & intergenerational activity with life long learning centres & IT suites
- 10 **Temporary use** such as intervention activity for respite, rehab, recuperation. This will become popular as hospitals change how they are used. Extra care may see the return of convalescence!

There appear to be a number of models of service and four principal choices as to how the domiciliary care agency provides the care:

- Local authority direct labour team providing care
- Contract provider - Patch or area domiciliary agency NOT the building's landlord (or the support provider)
- Contract provider - Building specific contract where the landlord is also care provider (and probably the support provider)
- Contract provider - Service specific (specialist type of provider who wins the contract)

The CSHS Code of Practice extra care appendix is going to be a significant quality assurance mark to complement the Supporting People team review mechanisms and the commission for social care inspection. The General Social Care Council code of practice for care is also a key document to possess now and in the future. ERoSH have also produced a leaflet on what a scheme manager can do to be practically involved in monitoring care.

The Health Agenda for prevention is going to become more important but increasingly health, housing, social services, primary care trusts and general practitioner practices and community

regeneration teams need to share objectives and establish better co-working protocols.

“ EXTRA CARE IS A CHOICE BEING EXERCISED THAT MEETS NEEDS AND DESIRES ”

For management the issue of 'Capital', funding building it in the first place, and 'Revenue', keeping it going, are vital but unclear. RSLs have limits about how they can use buildings; an example is that the housing commission need to arrange to remove regulatory clauses preventing temporary use of flats. Despite specially allocated money to pump-up provision of extra care, from where might future building activity be funded? Even if one builds, can one provide the care and the support i.e. who is the contractor, is there a contract, what type of contract is it? Creative capital funding from cross funding or replacement of residential care homes with extra care using land swaps have been part of the solution but there is a limit to such funding methods. Some schemes have been funded by grants and there has been an increase in the private market. McCarthy & Stone have been particularly successful in leasehold extra-care provision and self funders, individual or insurance companies will also become significant source. Mostly, landlords will have to create asset management strategies that look at what it has, look at the market, look at the local need and consider what to do with existing sheltered buildings.

Extra care is a choice being exercised that meets needs and desires. It will exceed residential care, it will be funded by a basket of market driven mechanisms, and it will be an interesting and a challenging place to work.



Financing extra care housing

ALTHEA HOWARTH, RIDGEWAY ASSOCIATES

Whether remodelled existing stock or new build, extra care housing is recognised as a desirable option for older people requiring housing with care and support

For providers seeking to develop extra care housing for the first time financing the project can involve a steep learning curve. For example, in the last bidding round for the DoH Extra Care Fund, some providers did not realise that they could bid for both DoH and HC funding for the same project.

When pulling the financial package together to meet the capital costs a key aspect is the ability to obtain funding from more than one source. These could include:

- Department of Health (DoH) Extra Care Housing Fund
- Housing Corporation Grant
- Section 106 agreements and planning gain
- Mixed Tenure and cross subsidy
- Public Finance Initiatives
- Private Finance
- Charitable Funding.

The DoH Extra Care Housing Fund, for example, has now been extended for another year. The initial two-year fund

was set at £87 million and was designed to provide 1,500 units of extra care housing. It should be noted, however, that in the 2004/05 bidding round only one in ten proposals was successful.

Opportunities to obtain free land through planning gain can also prove an important element in making financial packages stack up - as can introducing an element of housing for sale or shared ownership on a new development. Free land can also be sourced through partnership working with, for example, health and/or social services to redevelop hospital and /or residential care facilities. For example, if working with health an intermediate care suite could be located within an extra care scheme to ease bed blocking within the PCT.

A relatively new form of funding is Housing PFI where the public and private sectors work together. Extra care housing is likely to be just one element of such projects, which may also include general needs housing, key worker housing and other supported housing.

On-going revenue funding is also essential and this must be confirmed prior to bidding for grant funding. Revenue funding will include: funding from social services for the 24 hour on-site care

team, Supporting People funding for the support services and, agreement from Housing Benefit for the rent and service charges. Other aspects to consider are on-going funding for any ancillary services - for example, social services funding day care, health services funding intermediate care provision and, joint health and social services funding for 'home from hospital' services.

But a robust proposal for extra care housing depends on more than just finance. Other important elements are:

- Ensuring that the development offers value for money
- Demonstrating that the need is identified in the LA's housing strategies
- Meeting good design standards
- Future proofing the scheme, for example by ensuring that it could be used for another purpose if there is no longer a requirement for the properties or if the ancillary services are no longer funded.

Partnership working for Extra Care housing

BY PAUL WATSON DEPARTMENT OF HEALTH & HANOVER HOUSING ASSOCIATION

What's new about partnership? Partnership has been the mantra of public sector reform for the last 15 years or more, so why is this particularly important for extra care housing?

I believe we can consider partnership to be on three levels. At the first level, to initiate a project, there needs at minimum to be engagement between Social Services, the Housing Authority, in many cases an independent housing provider and the Supporting People Commissioning Body. This line-up is essential to secure the revenue funding commitment necessary to provide the range of housing management, housing-related support and care services within an extra care housing scheme. Such a partnership will equally be necessary to bid for capital funding to the Housing Corporation, the Department of Health or other sources. At this level, partnership is transactional in that it is about a series of contractual relationships, with each party gaining something from the other partners for their agency's benefit.

The next level of partnership is more like a strategy club, with housing, social care and health agencies agreeing to form a group to promote a systemic approach. There are a number of strategic partnerships, such as those in North Yorkshire, Bristol, Durham and

Wolverhampton, where the Local Authority has taken the lead to respond to the needs of older people based on an analysis of current supply and future demand. Strategic goals can then be established regarding future provision. Clearly this type of approach can put these partners in a stronger position to win new commissions for extra care housing schemes.

Partnership is a major theme in the Department of Health's £87m Extra Care Housing Fund for 2004 - 2006, with partnership being one of 6 of the main criteria against which bids are being assessed.

Encouragingly, several successful partnerships have now involved Primary Care Trusts, local hospitals and GPs as well as housing and social services agencies.

The promotion of intermediate care provision as a distinct part of extra care housing has meant that health agencies have a specific role within these partnerships. A number of schemes are developing units to support the NHS, helping older people with a programme of rehabilitation to enable them to move from hospital and back to their own homes more quickly.

Other partnerships have thought to include private sector providers; education, leisure and transport agencies; voluntary and community sector organisations, and home improvement agencies. This all helps to build towards a view of extra care housing as a neighbourhood resource. It is equally important that partnerships must involve representation from black and minority ethnic communities.

Where provision for people with learning disabilities is being made, then

partnerships should extend to include the relevant statutory and independent agencies.

However, there is a third level of partnership, where partners develop a shared higher endeavour, greater than the sum of their individual parts. Although we have seen excellent examples of partnerships developing, few have yet reached the stage where such collaborative chemistry sparks a leap forward in the provision for older people.

One reason for this might be that few partnerships have yet shown a meaningful engagement with older people themselves in the planning, design and delivery of housing and services. If that could be encouraged, then we would begin to see the creation of third level of partnership to develop further innovation in housing and services.

These partnerships would look sequentially at every aspect of extra care housing.

Why not start with social design, asking how we are going to involve older people first, then consider service and management design based on what older people want rather than need? Only then should we consider building and technological design, which alongside funding issues tend to be the starting points in the formation of new partnerships.

The question could then become: "What difference can we make as partners together, beyond our need for individual payback from a partnership?"

In my view, the principle of partnership would then start to come of age for the benefit of older people.

CSHS Code of Practice



Extra Care Appendix

An Extra Care Appendix for the Code of Practice was officially launched at the CSHS Annual Conference, held at Eynsham Hall, Oxfordshire in June 2004.

Meic Phillips, Assistant Director at Epic Trust, and a member of the Code of Practice Practitioner Working Group, introduced the Appendix to delegates during the Extra Care workshop which he led at the conference. The Working Group is the panel responsible for monitoring the Code, and Meic has been closely involved with developing this new Appendix.

The 10 Standards within the Code identify best practice in the delivery of sheltered housing services to clients, providing a quality benchmark against which providers can measure their service. The Practitioner Working Group felt that the increasing interest in Extra Care provision, underpinned by funding set aside by the Department of Health to create 1500 new places within Extra Care by 2006, should be reflected within the Code of Practice. Thus there is now a specific section of the Standards relating to best practice within this provision. The Appendix looks closely at areas such as joint and collaborative working, and clearly identifies key areas of policy, as well as good practice in terms of service delivery to frail clients living in Extra Care provision.

The Department of Health (DoH) Housing Local Improvement Network (LIN) and the Housing Corporation are jointly examining ways of ensuring excellence in the commissioning and management of all aspects of Extra Care sheltered housing. It is recognised within this process that the Code of Practice for Sheltered Housing, and in particular the Extra Care Appendix are key benchmarks, and have a significant role to play in raising and monitoring standards within existing and future Extra Care schemes.

Prior to its official launch, the Appendix was piloted by, amongst others, South Somerset Homes, the first achievers of the May 2003 Version of the Code of Practice in line with the Supporting People Quality Assessment Framework (QAF). Feedback from South Somerset Homes was extremely positive. They felt that one of the key benefits of the Appendix was the opportunity it gave them to emphasise the importance of collaborative working and information sharing among partner agencies, required in order to comply with the Appendix.

More details about the Code of Practice for Sheltered Housing are available from CSHS : Tel: 01905 21155, or email: cshs@cornwall.ac.uk

Vision for the future

By Michele Holywood, Hanover Housing Association

ERoSH represents many sheltered housing providers who manage what are now called 'traditional retirement housing estates'; extra care housing could be said to be the 'new kid on the block'. Currently there are about half a million sheltered or retirement housing properties – but the number of extra care housing properties is significantly lower and much harder to assess; as there is no one definition of this form of housing and care for frailer older people, and I am not sure who is counting the number in existence (if anybody!).

Those people who have seen extra care in action are usually very supportive and many local authorities see it as the way forward in terms of replacement of residential care spaces, the government also seems to like the concept and is funding an increase in the numbers being built. However we should not forget that older people living in retirement housing are ageing on estates which do not have 24 hour care cover, meal provision and wheelchair accessible design. Estate Managers on these estates have to work hard to ensure that the needs of their frailer residents are met. Their enabling role truly comes into its own as they need to be able to approach other agencies and the local Social Services contacts to organise the care and support their residents require.

ERoSH hopes that the local authorities can see the important support role these Estate Managers provide; as after all isn't this what 'Supporting People' is all about? If we look at it from another angle these traditional retirement estates are also providing a very useful preventative role, keeping older people feeling secure, less isolated and often healthier than people living in the wider community. This means they can age in place and reduce moves either to extra care settings or more institutional residential care settings.

Another discussion relating to extra care is the question of scheme specific housing provision for black and minority ethnic communities. Should we build schemes which all older people who are frailer can move to – or do we need to build schemes to suit different religions or cultures or cross communities of older people?

Unfortunately ERoSH does not have the answer but would be interested to hear what 'Heart' readers think about this area as we are starting to work other organisations on a Vision for the future of retirement housing and believe that the 'joint vision' should consider the needs of all older people. Extra care housing will obviously have an important role but the benefits of non extra care housing also need to be highlighted. Please log on to the ERoSH website: www.shelteredhousing.org.uk and let us have your thoughts

Getting the right mix

By Bobbie Bloomfield
Chairperson NWA Committee

Over the last couple of years, this topic has been raised in many seminars and conferences around the country. A variety of ideas have been put forward about how Extra Care can be introduced into Sheltered Housing, and I know that Scheme Managers are concerned about the possible impact on their jobs.

How will the Care team and the Scheme Manager work together? Who will be 'in charge' of the Scheme? Will the Care team be in-house or contracted out to agencies? What are the implications for the clients? Will the scheme be totally Extra Care or mixed?

Having been the manager of a pilot Extra Care scheme, I can appreciate how much Scheme Managers might be confused by the various models of this type of scheme; having shown several around and tried to explain how my particular scheme worked.

However, at workshops, I was extremely interested in the way other organisations had created their Extra Care provision, and how much Care, in some instances, was offered.

I feel we must wait to see how the 'recipe' for an Extra Care scheme develops. Scheme Managers must help to create the basic criteria which will make all schemes, whether Extra Care or not, real Homes for Life for all their residents



NEW FOR 2005

CSHS recently launched its Level 2 Certificate in Housing which provides an ideal introduction to housing for new staff or those looking for housing career. Suitable also for staff in other departments, it can be integrated into staff induction programmes and represents the first step on a professional ladder for those going on to Level 3.

Delivered through study days over six months the course includes:

- What is housing?
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- Working in housing – planning your development.

Throughout you are supported by self contained workbooks, a practical assignment programme and personal tutor.

AND A REMINDER

The CSHS Level 4 National Certificate in Sheltered and Supported Housing provides the opportunity for those with a Level 3 Certificate and/or working in a management role, hope to take on a management role or who just want to understand how sheltered/supported housing is managed to develop further. Delivered over one year by two day study blocks this programme is designed to develop the skills and knowledge you need in today's challenging and rapidly changing climate. It includes:

- Housing Policy
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- Managing and Measuring Organisational Performance
- Housing and the Law
- Community Care and Community Support
- Managing People

Successful completion enables you to progress to year two of the CIH Level 4 Diploma.

If our standard delivery does not suit your organisation please call us. We will be happy discuss how we can help you meet your staff development objectives.

For more details of the above courses and application forms please contact; CSHS on 01905 21155

GEARING UP FOR SAFER NEIGHBOURHOODS

North Manchester's neighbourhood wardens are gearing up to get to areas of the city faster by adding scooter patrols to existing foot and mountain bike teams in a drive to make neighbourhoods even safer. The first red and black scooters take to the roads of North Manchester this summer following a sponsorship deal with the city council's lone worker protection supplier Orbis Cybertrak. Warden Manager Tony Dalton: "We are always looking for new ways to improve the service. Scooters will help us to cover more areas in a day and do more to deter crime and antisocial behaviour."

Councillor Jim Battle, deputy leader of Manchester City Council: "These scooters are going to make the service

even more flexible and responsive."

The scooters will also be used to cut journey times to the new semi-rural areas added following the neighbourhood warden scheme's success with local residents. Wardens carry Cybertrak lone worker GPS mobile phones to put an incident support team on-line immediately the SOS button is pressed and to provide their location to the emergency services. Cybertrak's Sales Manager, Nick Earnshaw said: "We are already working closely with the city council and the police to reduce the impact of crime and antisocial behaviour. The sponsorship is a great way of complementing this work."

For further details contact Orbis Monitoring Services on 0845 345 7888

STAY IN TOUCH: A GUIDE TO TELEPHONES & SERVICES FOR OLDER AND DISABLED PEOPLE

Stay in touch is the new independent Ricability guide to telecoms for older and disabled consumers. This updated edition provides clear descriptions of a wide range of new services and features now available for both fixed line and mobile phones, plus related equipment and accessories. For further details call 020 7427 2460 or email mail@ricability.org.uk

CONSTRUCTION UNDERWAY ON CAMPBELL PARK EXTRA CARE SCHEME

Building work is now well underway on the new 42-bed extra care scheme at Campbell Park Road, Hebburn and scheduled for completion in Spring 2005.

The scheme is a joint partnership initiative between South Tyneside Council and New Leaf Supporting Independence. Councillor Eddie McAtominey, Lead Member Corporate Development and a local Hebburn councillor said: "There was great concern in the community with the closure of the former Campbell Park House. Although the Council was sorry to see the end of an era, we promised far better facilities for older people and now we are on the verge of delivering our promise and offering people a real alternative to traditional residential care services." John Burns, Regional Support Manager, New Leaf said: "New Leaf is committed to developing good schemes which contribute to an enhanced quality of life for customers. The development of the scheme is an example of what can be achieved through the provision of local solutions to local problems." "This scheme will both enable 42 older people and couples to continue enjoying their independence, whilst at the same time the scheme will provide support and additional services for our more dependent customers. Care and support staff will be on duty 24 hours a day to offer assistance to those who need it."

SALARIES FOR SHELTERED HOUSING STAFF

I am currently in the process of reviewing our sheltered housing services; including a review of the roles and responsibilities of scheme staff, in particular, the Wardens. I would be grateful if you can assist by providing the following information: salary scales, job descriptions and person specification for wardens both residential and non-residential - it would be helpful if this information relates to the West Midlands region and recently we have introduced a new spot salary structure for all office based staff and we would like to do the same for scheme based staff. Any information you can provide on spot salaries for site staff e.g. wardens, cleaners etc would be appreciated. If, however, you are not able to provide this information I would be grateful if you could point me in the right direction.

Darshan Singh Matharoo
dmatharoo@bjhg.co.uk

MANAGING CATEGORY I SITES

I am currently working with Blackpool Council to introduce a new professional scheme manager's role into what is essentially a category I housing site. Has anyone had experience of doing this successfully and how do you create a sense of community and a supportive environment? Any information, or opportunities to exchange experiences would be appreciated.

Allyson Richardson
allyson.richardson@blackpool.gov.uk

SHELTERED HOUSING NEEDS ASSESSMENT

Are you currently using a needs assessment to assess access to your services? Would you be prepared to share information and assist us in developing a needs assessment for our services? If so, I would be grateful if you could contact me at sally.humpage@rushcliffe-homes.co.uk.

Sally Humpage
Rushcliffe Homes Limited

IF YOU HAVE ANY QUESTIONS OR ANSWERS TO LETTERS, PLEASE SEND THEM TO:
CSHS, FIRST FLOOR,
ELGAR HOUSE,
SHRUB HILL ROAD,
WORCESTER WR4 9EE
OR EMAIL:
cshs@cornwall.ac.uk

BETWEEN THE Covers

NEW LIFESTYLES IN OLD AGE,

by *Miriam Bernard, Bernadette Bartlam, Simon Biggs and Julius Sim*

Subtitled 'Health, Identity and Well-Being in Berryhill Retirement Village', this report by Miriam Bernard, Professor of Social Gerontology and her colleagues in Keele University evaluates the Extra Care Charitable Trust's flagship scheme in Stoke on Trent. With the help of residents – ambassadors – the Trust is vigorously promoting its schemes as a vision of the future for older people.

The 150 residents are somewhat younger than the average sheltered housing resident – nearly half are under 75 years, only 11% over 85 years. 29% still drive their car. The report focuses on the very full programme of activities within the village, which are certainly enjoyed by those who participate in them. Indeed over a quarter of those residents who are completely independent rarely leave the Village; nor do almost two-thirds of those who are requiring some level of care and support.

The report dwells much less on care and support. Only one-third of residents receive services – mostly help in getting up and going to bed. One in ten residents die annually; we are not told how many have moved on to nursing homes. Many residents fear that Berryhill will, for them, not be a 'home for life'.

Berryhill certainly provides a stimulating environment for its residents and this benefits their health and sense of well being. But is it too inward looking – when sheltered housing now aspires to be a resource centre for the neighbouring community? How far do the more dependent residents participate in Village activity? Is their isolation exacerbated by their inability to do so? Can the Village cater appropriately both for the very frail and the relatively active?

Price £14.99 available from The Policy Press, Bristol. ISBN 1 86134 420 4

Review by Peter Lloyd



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"I believe it is important that Lench's Trust is a member of the CSHS, as it is really the only organisation that has a thorough view of the needs and issues facing sheltered housing. During a period of massive change - Supporting People, the review of "on call" working time etc. - I have found that the CSHS has been excellent in keeping us informed of these developments.

Jayne Rudge
Chief Executive & Clerk to the Trustees
Lench's Trust

As CSHS is nationally recognised, it is important to be involved with a major provider of sheltered and now supported housing training. We receive many benefits, including a discounted rate on training, excellent to provide staff with a recognised qualification.

Eddie Clark
Principal Sheltered Housing Manager
Herefordshire Housing

I have been a Warden for over eighteen years and over the last four years my role has changed dramatically. During this time I have achieved a number of qualifications with CSHS and I am proud to be a member of the organisation that gave me the confidence to achieve them and put them into practice.

Maureen Bellwood
Scheme Manager
Leeds & Yorkshire Housing Association

Who can join?

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