

# Housing Strategy for Older People 2003-2007



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## **Executive Summary**

### **Introduction**

1. The City wishes to meet the housing aspirations of older people living in Southampton and is committed to ensuring that they have decent homes to live in which will enable them to secure and maintain their independence.
2. This Housing Strategy for Older People for Southampton has been developed in response to the Government's requirements detailed in "Quality and Choice for Older People's Housing – A Strategic Framework". It provides a local framework for the future direction of housing solutions for older people who are owner-occupiers, renting privately and those in social housing in Southampton.
3. The development of this strategy was overseen by a steering group, a sub-group of the Supporting People Core Group, and included representatives from Southampton City Primary Care Trust, Social Services, Housing Services, Environmental Health and Consumer Protection, Registered Social Landlords, Southampton Staying –Put, representatives from sheltered housing tenants groups and voluntary organisations for older people such as Age Concern Southampton and the Older Person's Forum.
4. The implementation of the strategy, detailed in the 'action plan' that will run from 2002 to 2012, has prioritised the objectives to be achieved and allows for flexibility to adapt to changing needs, trends and legislation. It is proposed to monitor and evaluate the progress made annually and publish the findings as part of the Supporting People monitoring process.

### **Policy Framework**

5. The Housing Strategy for Older People is a sub-strategy of the Housing Strategy and the Supporting People Strategy, both of which support the aims and priorities of the Council's Medium Term Plan (MTP). There are very strong links to the Primary Care Trust and City Council's Health Improvement Programme and the City Council's Community Care Plan all of which support the overarching Community Strategy.

### **Drivers for Change**

6. The Medium Term Plan sets out the overarching themes and challenges for improving life in the City over the next four years.
7. The City Council is determined to ensure that older people living in the City are able to secure and maintain their independence within their own homes and that a range of housing solutions will be available to enable them to make active and informed choices to resolve their housing problems.

### **Issues and Trends**

8. A number of demographic and social trends are influencing the nature of demand for appropriate housing, support, health and care services for older people over the coming decades:

- The number of older people in all age bands over 60 years is increasing
- The number older people who have a physical and/or mental frailty is increasing
- The number of older people who are owner-occupiers is increasing
- Most older people want to stay in their own homes longer
- The expectations and aspirations of older people are higher than before
- The reduction in residential care beds and lack of appropriate Extra-Care sheltered housing for frail and vulnerable older people is exacerbating the critical situation of delayed transfers from hospital to more appropriate settings

9. In addition, the issues which concern older people include:

- New homes being designed should take into account the needs of older people
- Increased insulation and help with heating and other energy saving measures
- More independent living opportunities
- Less waiting time for adaptations and equipment
- More flexibility and choice in housing, care and support options and clearer information and advice on what is available

## Key Areas

10. The main priority for the development of housing solutions for older people is to ensure that there is **Diversity and Choice** in the provision of housing and services which promote independence and that are responsive to all older people's needs and preferences, which are addressed in the following key areas:

- **Quality Housing** – emphasising the importance of good quality housing and support services to ensure homes are warm, safe and secure.

### Key outcome for this area:

- **Decent Homes Standard to be achieved in all social housing by 2010**
- **Improved Housing Health and Safety Rating System standards in older people's homes who are owner-occupiers or renting privately**
- **Aids and Adaptations** – ensuring that the provision of services promotes independence and is responsive to the needs and preferences of older people.

### Key outcomes for this area:

- **Flexible service models to ensure that there are a range of options for older people to consider**
- **To have a range of new technological aids available for older people in their homes to enable them to maintain and sustain independence**
- **Information and advice** – ensuring that information, advice and advocacy is accessible and available for professionals and older people themselves on the range of housing and support options and/or solutions available.

### **Key outcomes for this area:**

- **Improved quality and consistency of information about housing options which is fully accessible to all older people in Southampton**
- **A greater sharing of ideas and initiatives across agencies to encourage new service models and provision**
- **Sheltered Housing** – providing a framework for service providers when they review their housing and service models to improve flexibility to meet changing needs and the aspirations of older people.

### **Key outcomes for this area:**

- **To increase Extra-Care Sheltered housing provision in the City to meet the needs of frail and vulnerable older people, including those with a dementia**
- **To re-categorise and market sheltered housing according to services provided rather than category level of warden support**
- **Joint working** – improving the integration of services delivered by housing, health, social services and other agencies such as voluntary and private sector organisations to provide a seamless service and maximise existing resources.

### **Key outcome for this area:**

- **To review the link between delivery of health and social care services and support service within sheltered housing**
- **More integrated service planning and service delivery**

11. This document sets out the City Council's vision and action plan to ensure that local policies and provision enable older people to retain their independence and receive their care 'close to home'.

12. The outcome of this strategy will be judged by whether it meets the concerns and needs of older people.

### **Contact**

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## Chapter 1

### Need for a Strategy – The Challenge Ahead

1. The challenge of ensuring the future provision of appropriate housing solutions for older people in Southampton is how to move from 'what we have now' to 'what should be available' in the next 5 to 10 years in order to meet the diverse needs and aspirations of older people.
2. The changes in the composition and numbers of older people in relation to the local population requires a radical shift in the focus, resources and processes of local agencies.
3. The report of Southampton's Best Value Pilot 'A Better Life for Older People' replicated the results published in a national study 'Coming of Age'. Both investigations concluded that older people wish to remain in their own homes for longer. They particularly want more advice and information on the housing options and services available to them and want a coherent and co-ordinated response to their housing and support needs driven by their needs and preferences.
4. The number of older people relative to the rest of the population is increasing. In Southampton the number of people over retirement age is forecast to increase by 2.5% between 2001 and 2006. The fastest rate of increase will be in the oldest age group (over 80 years) which will increase by 3.7%. The proportion of black and minority ethnic (BME) older people is also increasing.
5. Older people are more likely to be home owners, live in 'unfit' housing and more likely to experience more physical and sensory impairments than people of working age. In addition, there are increasing numbers of older people with a learning disability, a mental illness or dementia, or with a history of homelessness requiring more appropriate housing.
6. The continued ageing of the population has particular implications for housing and health care. For example, there is a rising trend in hospital admission rates amongst people aged over 75 years which, in turn, has a knock on effect for hospital waiting lists and delayed discharges or transfer to other settings.
7. The level of resources available to meet the increasing levels of demand will always be finite, therefore making it essential:
  - a) That individuals and organisations are able to make informed decisions about the choices available to them
  - b) To prioritise older people's housing needs alongside other housing needs
  - c) To have clear priorities within older people's housing issues
  - d) To have good joint agency working to maximise and make best use of available resources

## Development of the Strategy

8. The development of this comprehensive Housing Strategy for Older People has been undertaken with the involvement of and consultation with key stakeholders. The steering group is a sub-group of the Supporting People Core Group (the multi-agency group steering the development of the Supporting People Strategy) and is made up of members of the Core Group, representatives of older people and tenants groups and organisations representing the needs of older people, e.g., Age Concern (Southampton), the Older Person's Forum and Southampton Staying Put.
9. The actions needed to achieve the changes required have been prioritised and are detailed in the Action Plan. This provides a framework flexible enough to adapt to any changes in legislation, needs and new initiatives to facilitate creative responses to opportunities as they present themselves.
10. There is a changing policy context that has moved away from institutional provision in residential settings towards supporting older people in their homes within their communities, either in the homes they own or rent, or in sheltered housing. The focus is that of promoting independence, rehabilitation and prevention of accidents and hospitalisation and of ensuring that ageing is seen as a natural stage of life.

## **National Context <sup>1</sup>**

11. The national policy context and drivers for change are:
  - “Quality and Choice for Older People’s Housing”, providing the strategic framework for the development of the Older People’s Housing Strategy which will have a direct impact on the provision of decent, affordable and appropriate housing for older people
  - “Quality and Choice : A Decent Home for All – The Way Forward for Housing” the Governments National Housing Policy Statement
  - “The National Service Framework for Older People” identifies ways to improve health and social care services for older people to support independence and promote good health
  - “Our Healthier Nation”, is an action plan to tackle poor health aiming to improve the health of everyone, particularly those who are worst off
  - “The New NHS: Modern and Dependable”, sets out the Governments plans to modernise the NHS over a ten year period
  - “The National Charter for Long Term Care – Better Care, Higher Standards”, explains what people in need of long-term care and support can expect from local housing, health and Social Services
  - “Better Government for Older People” report ‘All our Futures’, includes in its recommendations, the need to combat age discrimination and to promote a strategic joined-up approach to an ageing population
  - “The Royal Commission on Long Term Care”, identified that the role of housing will be increasingly important in the provision of long-term care
  - “Better Services for Vulnerable People” Initiative require that Health and local authorities produce Joint Investment Plans for older people

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<sup>1</sup> Bibliography detailed at Appendix E



- “Supporting People” is the new policy and funding framework for supported housing, including sheltered housing
- The “Best Value in Housing Framework” sets out the issues and areas of importance which need to be taken into account when reviewing services and the ways in which they are provided
- “Building Capacity and Partnership in Care” is a new national agreement between local authorities and the private and voluntary care sectors to encourage a more strategic, inclusive and consistent approach to capacity planning at a local level.

## **Regional Context**

### 12. The Regional Housing Statement for the South East:

- provides a strategic framework, for local authorities to develop their local housing strategy, and sets out nine priorities which includes ‘To Meet the Needs of Those Who Require Supported Housing’
- recognises that the government’s Modernisation Agenda for Health and Social Services will impact on the way in which housing and support are provided in the future
- highlights the fact that older people can be denied choice and consequently lose their independence where appropriate services are lacking

### 13. The key actions to be taken by local authorities include:

- The need to consider researching under-occupation amongst older people to help plan to meet their needs
- That they work towards ensuring that their lettings systems are based on both a housing and support needs assessment, and collate data on support needs for evaluation

## **Local Strategies and Policies <sup>2</sup>**

### 14. The local policy framework involves:

- “Southampton Partnership Community Strategy”, which will play a key role as the overarching strategy for the City, drawing together all plans and actions for maximum effect to drive local improvements in economic, social and environmental well being
- “The Southampton Partnership’s Neighbourhood Renewal Strategy”, which seeks to reduce inequalities and ensure that we work in a joined up way to tackle problems, including housing
- “The City Council’s Housing Strategy” details the progress made in achieving the targets set to meet housing need in the City and identifies the challenges ahead
- “The City Council’s Housing Revenue Account Business Plan” details how the plans for the management and improvement of the public sector housing stock will contribute to the achievement of other corporate goals, such as regeneration and social cohesion

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<sup>2</sup> Bibliography detailed at Appendix E

- “The Primary Care Trust and City Council’s Health Improvement Programme” sets out the strategic framework for improving health, reducing inequalities and delivering faster more responsive services of a consistently high standard
- “The City Council’s Supporting People Strategy” for 2003/2004, the new funding and strategic framework for supported and sheltered housing services
- “The City Council’s Community Care Plan”, which outlines the key Community Care Services for Southampton
- “The City Council’s Medium Term Plan”, which sets out the overarching themes, challenges and priorities for improving life in the City over the next four years:
  - Tackling deprivation and inequalities
  - Promoting life long learning for all people
  - Improving community safety and reducing crime and disorder
  - Improving the street scene and the environment
  - Promoting independent living

## The Vision

15. Southampton City Council wishes to meet the housing aspirations of older people living in the City and for them to have decent homes they can afford that meet their housing needs and the support needed to enable them to live in their homes.
16. The City is committed to:
  - Ensuring older people are able to secure and maintain their independence within their own home appropriate to their circumstances
  - Supporting older people to make active and informed choices about their accommodation by providing access to appropriate housing and services and by providing advice on suitable services and options
17. The realignment of resources and an exploration of the potential to import successful initiatives adopted in other locations are essential if Southampton is to deliver imaginative and sustainable housing services for older people in the long term. Moreover, exploiting the opportunities offered by partnership and working closely with the independent sector are essential pre-requisites for meeting the challenge of a modernising agenda.
18. To achieve this it is necessary to provide a framework which reflects a shift in service delivery away from what is predominantly a property centred approach to a person centred approach which ensures that:
  - Old age is regarded as a natural stage in life
  - New policies promote choice, enabling older people to maximise their autonomy
  - Older people are enabled to retain their health and mobility
  - The City Council and local agencies work closely together to ensure that there is a wide range of housing options available for older people to consider when making decisions about their future housing solutions

- The future direction of sheltered housing provision is able to meet projected need and anticipated requirements of all levels of dependency
19. In order for the vision to become a reality it is essential that older people have a range of appropriate housing solutions and types of accommodation and choices of care in both the private and public sectors.
20. The main focus and priorities for the policy and service development for housing for older people is to ensure that there is **Diversity and Choice** in the provision of services which promote independence and that are responsive to all older people's needs and preferences, which are addressed in the following five key areas;
- Quality Housing - emphasising the importance of good quality decent housing and support services to ensure that homes are warm, safe and secure and that social housing meets the decent home standard
  - Aids and Adaptations – ensuring that there are flexible service models and housing choices available to older people to consider to improve their housing options which will promote independence and that are responsive to their needs and preferences
  - Information and advice – ensuring that information, advice and advocacy is accessible and available for professionals and older people themselves on the range of housing and support options and/or solutions available
  - Sheltered Housing – providing a framework for service providers to review their housing and service models to improve flexibility to meet changing needs and the aspirations of older people
  - Joint working – maximising resources of the services delivered by housing, health, social services and other agencies such as voluntary and private sector organisations, to provide effective, efficient and seamless services
21. Each of these are considered in turn in the following chapters. Additional information is available in the attached appendices.

## Chapter 2

### Older People in Southampton

Age by itself is not a determinant of need.

To ensure services are 'person centred' this approach needs to change and focus on needs. In addition, the more recent changes in society, the improved health and economic ability of those aged up to 75 years and the way individuals perceive themselves and perceived by others have brought 'old age' into sharper focus.

#### Current Issues and Needs

##### Who are they?

In Southampton, out of a total population of 216,000<sup>3</sup> there are approximately:

- 41,900 people over the age of 60 years, representing 19% of the population<sup>4</sup>
- 32,000 people over the age of 65 years, representing 15% of the population
- 1,382 people aged over 90 years<sup>5</sup>
- 42 people aged over 100 years<sup>6</sup>
- the Black Minority Ethnic (BME) community represents approximately 7.6% of the population with 40% living in the city centre wards of Bargate and Bevois
- over half of the population over the age of 60 years are women
- 8,667 people over the age of 60 (20.7%) live alone<sup>7</sup>
- Those aged 65 years and over, nationally account for nearly 50% of the NHS & Local Authority Social Services expenditure

##### Where do they live?

- Approximately 25,800 people over the age of 60 years in Southampton live in the private sector as owner-occupiers (60%)
- there are currently about 5,029 sheltered housing flats in the city, of which 65% is owned by the City Council, and the number is increasing, particularly in the private sector
- 3,767 people over the age of 60 years live in 3,361 non-sheltered council properties (22% of non-sheltered properties)
- 32 older people, 10 with dementia are currently accommodated in Direct Access Homeless Hostels and Move-On accommodation<sup>8</sup>
- there are 7 City Council Residential Homes providing:
  - 127 spaces for frail, vulnerable older people
  - 53 spaces for older people with a mental illness or dementia
  - 12 intermediate care beds

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<sup>3</sup> National Statistics mid 1998 numbers

<sup>4</sup> National Statistics mid 1998 numbers

<sup>5</sup> Southampton City Primary Care Trust March 2002

<sup>6</sup> Southampton City Primary Care Trust March 2002

<sup>7</sup> Number of people over the age of 60 years in receipt of single person's reduction for Council Tax

<sup>8</sup> Supporting People Needs Analysis 2002

- 15 short stay beds for frail, vulnerable older people
- 5 short stay beds for older people with a mental illness or dementia
- as at 2001 there were:
  - 58 residential care homes in the private sector providing 1038 bed spaces with social services supporting 468 long stay residents
  - 7 independent Nursing Homes providing 180 beds

### Their financial status

- Over 6,000 people over the age of 60 years are in receipt of some or all of the following state benefits:  
Income Support - Attendance Allowance - Incapacity Benefit - Disability Living Allowance<sup>9</sup>
- nearly 3,000 older people living in their own homes which are in a state of disrepair qualify for Home Repair Assistance Grants
- 6,680 older people receive Housing Benefit and/or Council Tax Benefit

### Their needs

- there are approximately 2,440 (9% of people aged over 60 years) older people in the private sector living in properties which do not satisfy current condition standards and are either unfit, or lacking some of the basic facilities such as a bath or inside toilet
- there are a further 4,160 (16% of people aged over 60 years) older people living in properties which, are in serious disrepair although not unfit
- As at 1<sup>st</sup> April 2002 there were 289 Older People on the Housing Register/Transfer List for sheltered housing
- The average SAP (Standard Assessment Procedure relating to energy efficiency rating of properties) rating for older persons dwellings in the private sector is 39 compared with the City Average of 45
- There are higher rates of long-term illness amongst Pakistani older people. All Indian sub-continent communities have smaller numbers of older people (4.5% India, 2.5% Pakistani & 1.6% Bangladeshi compared to 19.9% white)
- Demand for care at home, including the level and complexity of care, as the preferred alternative to residential care, continues to rise
- As at 23<sup>rd</sup> May 2002 there were 59 people in Southampton General Hospital and 44 people in Community Hospitals waiting to be transferred to more appropriate settings
- the frequency of disability types of those aged over 75 years living at home, based on national estimates are:

Mobility 82%	Vision 40%	Hearing 55%
Personal Care 46%	Dexterity 33%	Continence 21%

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<sup>9</sup> National Statistics August 1999 figures

## Future Trends and Projections

Table 1 – Population Projections for Older People for 2001, 2006 and 2011

65 - 74			75 - 84			85+			Total		
2001	2006	2011	2001	2006	2011	2001	2006	2011	2001	2006	2011
16278	16196	17225	11362	11578	11319	3744	3773	4498	31384	31547	33042

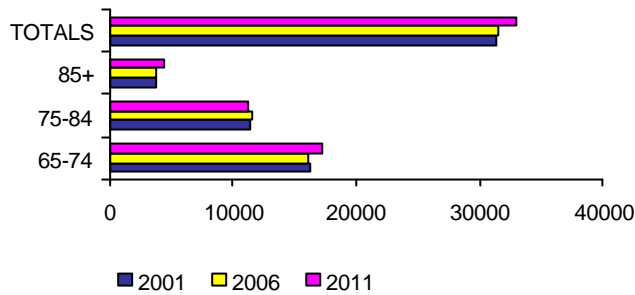


Table 2 - Older Person's Population by Gender <sup>10</sup>

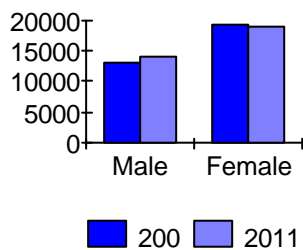
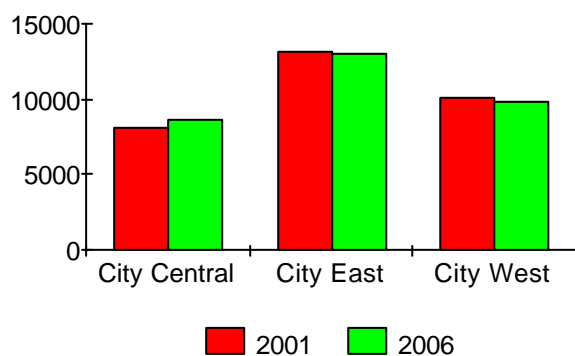


Table 3 - Population by Area of City in all Tenures <sup>11</sup>



<sup>10</sup> Southampton Social Services & Primary Care Trust Older Person's Service Map April 2002

<sup>11</sup> Southampton Social Services & Primary Care Trust Older Person's Service Map April 2002

## Issues and Needs

- there will be more older people who are owner-occupiers (currently 25,800)
- the number of people with learning difficulties living into old age is increasing
- referral rates for older people to Social Services are rising slowly
- demand for care at home, including the level and complexity of care, continues to rise
- the number of older people placed in Residential and Nursing Home Care has risen:

	31/3/1997	31/12/1999
Residential Care	594 (rising to 699 30/6/98)	668
Nursing Home Care	140	278

- 5 Residential Care Homes in the private sector closed in the period July 2000 to July 2001 with a loss of 82 bed spaces
- In Hampshire, including Southampton, there has been a continued trend of closures of Residential and Nursing Home provision:
  - 98/99           62 beds lost
  - 99/00           277 beds lost
  - 00/01           301 beds lost
  - 279 beds lost in the first 6 months of 2001/2002
- Nationally 63% of all hospital beds are occupied by people aged over 65 years and the knock-on effect, when combined with the continuing loss of residential care beds is delayed transfers from hospital and long waiting lists for admission to hospital
- Demand for more specialist housing such as Extra-Care Sheltered Housing is increasing for frail and disabled older people as well as those with specific needs such as mental illness/dementia

## Dementia

- In Southampton it is estimated that 924 people aged over 85 (25% of those aged over 85 years) will develop dementia and that about a third of these will require constant care and supervision and that they are least likely to have carers
- it is cautiously estimated that there are currently 2,440 people aged 60 and over in Southampton with a dementia. Approximately 1,600 with a mild dementia and 800 with a moderate to severe dementia

### **Summary of Key Issues**

- The majority of older people in Southampton live in non sheltered housing (60% in the private sector)
- Approximately 25% of older people living in the private sector are living in housing which is unfit or in serious disrepair
- The numbers of dependent older people with additional needs, such as mental illness, dementia, learning disability, are increasing
- There is increased demand for home based services as an alternative to residential care
- People over the age of 75 years are much more likely to have a mobility problem and/or a sensory impairment requiring some level of care or support
- It is anticipated that about 300 people aged over 85 years with a dementia will require constant care and supervision
- Delayed Transfers and the implications for developing more appropriate housing solutions for frail and disabled older people
- There needs to be more housing options available to suit the diverse range of needs of older people in the City, i.e., approximately 120 more Extra-Care Sheltered Housing units, new policies providing flexible approaches to service delivery



## Chapter 3

### Quality Housing

1. It is as essential that older people have access to good quality housing and related services as do other sectors of the community.
2. In this context Quality Housing refers to the physical quality of housing and the ways in which quality standards of service can be promoted across the range of provision for older people.

### Unfit Housing

2. Unfit housing has a major impact on the health and social well being of people, however it is generally recognised that older, frailer and vulnerable people are more at risk of experiencing poor health due to bad housing conditions. For example cold homes exacerbate existing respiratory and pulmonary diseases among older people.
4. The National proposals to replace the current fitness standard with the Housing Health and Safety Rating System will focus action, in both the public and private sector, on unacceptable risks within the home
5. The private sector housing market has a major role to play in providing decent and appropriate homes for older owner-occupiers and those who rent privately.
6. The 1997 Private Sector House Condition Survey concluded that housing conditions in Southampton are significantly worse than the national average and the average for the South East. A survey is currently being conducted to provide up to date information.
7. Older households comprise 29% of all households in the private sector but account for 39% of all households living in unfit dwellings.
8. Southampton's Private Sector Renewal Strategy sets out the priorities and programme of action to reduce the level of unfitness in the city's private housing sector.
9. Considerable resources are required to tackle the levels of unfitness and disrepair in the older housing stock and improve the living conditions for older people living in ordinary housing in the community. The Private Sector Renewal Strategy needs to be reviewed to meet these challenges in light of the legislative changes.
10. Southampton's Housing Revenue Business Plan sets out the detailed plans for the management of improving our own housing stock over the next 30 years. The legislative requirements of Quality and Choice: A Decent Home for All places a duty on Council's to bring all their housing stock up to the Decent Home Standard by 2010 and to have completed a third of that work by 2004.

11. The most recent stock condition survey identified that 87% of the City Council's housing stock needs to be improved to meet these standards.

## **Current Services for owner-occupiers and those privately renting**

### The Handy Person Service

12. The 'Handy Person Service' is aimed at the owner occupied and private rented sector and assists independent living through the delivery of simple maintenance and repairs which older people may find difficult to tackle. This may include for example replacing tap washers, small plumbing repairs, repair of steps, draught proofing or fitting batteries to smoke alarms.
13. The service is currently a 'three year pilot project' provided by Wessex Property Services and is for people over the age of 65 years. The project is costing Southampton City council £75,000 for the pilot period. The service is free to older people in receipt of certain benefits however if not there are subsidised charges for materials and labour.

### Home Maintenance Advice.

14. This is a service provided by the City Council and is more specifically focused towards older and more vulnerable owner-occupiers and private tenants. The aim is to identify items of disrepair and to intervene at an early stage to reduce levels of disrepair and unfitness. This is achieved through the provision of free advice on routine maintenance, prioritisation of works, likely costs and advice on appointing reliable and trustworthy builders. Older people accessing this service would not normally be eligible for renovation grant assistance however appropriate referrals will be made when necessary.

### Renovation and Home Repair Assistance Grants

15. There are a range of Home Renovation Grants available for private sector tenants and owner-occupiers to assist in maintenance and improvement of dwellings. These grants are subject to a test of financial resources.
16. Support to assist frail older persons through the grant application process including form filling, submission of paperwork and arranging contractors is available through two different home improvement agencies:
17. Southampton Staying Put - Provided by Hyde Housing Association is primarily designed to assist older and disabled people to repair and adapt their homes however there is also a broader responsibility to provide a range of advice and information regarding benefits and services for its clients.
18. Southampton Care and Repair – a newly established agency provided by Wessex Property Services and is funded by the City Council. The service is aiming to assist owner-occupiers through the renovation grant process, from the completion of application forms, obtaining the necessary consents from Building Control and Planning Permission through to the appointment of suitable contractors.

19. The demand for renovation and home repair assistance grants exceeds available budgets.
20. New powers introduced by the Regulatory Reform Order will come into force in the Summer 2002. Local Authorities are required to propose and publish a Private Sector Renewal Framework setting out needs, priorities and a range of new policy tools and eligibility criteria to ensure that the resources available targeted appropriately.
21. The emphasis will be to help owners use their own resources to maintain and adapt their properties according to their needs. A wider range of options will be considered including equity release, shared appreciation, low interest loans and assistance in moving to more appropriate accommodation where necessary. The challenge to ensure that the Decent Homes standard is realised in the private sector will also inform the ongoing review. (The Decent Homes Standards are detailed in paragraph 25)
22. These reforms offer new flexibility and opportunities for Southampton City Council to help meet the housing needs of older people.

### **Quality Standards**

23. "Quality and Choice: A Decent Home for All – The Way Forward for Housing" details the requirements that all social housing (Council Housing and that provided by Registered Social Landlords/Housing Associations) meets set standards of decency by 2010 and to reduce the number of households living in social housing that does not meet these standards by a third between 2001 and 2004, with most of the improvement taking place in the most deprived local authority areas".
24. This Government target relates more specifically to social housing but the concept of a decent home applies equally to privately rented and owner occupied housing.
25. The definition of a 'decent home' is detailed in four criteria which identifies if a home:
  - Is above the current statutory minimum standard for housing
  - Is in a reasonable state of repair
  - Has reasonably modern facilities and services
  - Provides a reasonable degree of thermal comfort
26. Supporting People will also ensure that housing related services for older people are monitored in a more effective and structured way.
27. The setting and improvement of standards will also, in time, be reflected in the Charter for Long Term Care - Better Care, Higher Standards which encourages and involves service users and their carers in the identification and setting of standards.

### **Action Plan**

- All Social Housing to be brought up to the 'Decent Homes Standards' by 2010
- One third of social housing to meet Decent Homes Standards by 2004
- Review the Private Sector Housing Renewal framework, in light of the reforms to Housing Grants, Construction and Regeneration Act 1996, and develop a range of policy options to meet the housing needs for older people, which will ensure that older owner-occupiers have a range of options to consider to maximise their own resources to improve their housing situation, i.e., a range of equity release/shared ownership type schemes, small loans to complete chosen option etc.
- Promote and market existing services and target advice to older people to assist them to improve their conditions/services

## Chapter 4

### Aids and Adaptations

1. The intention is to ensure that the services provided promote independence and responsive to the needs and preferences of older people.
2. For there to be flexible service models ensuring that there are a range of options available for older people to consider to improve their housing options.
3. Services should facilitate older people using their own resources effectively to improve their housing circumstances/conditions.

### Current Housing Options

#### Staying at Home

4. National and local studies have identified that given the choice, older people will often prefer to stay where they are as opposed to alternative options.

#### Present position

##### Equipment

5. Approximately 27,000 pieces of equipment are delivered each year to clients of health and social services within the old Southampton and South West Hampshire Health Authority district.
6. Demand is increasing, as is the need for more complex equipment to enable people to live independently in the community.

##### Adaptations <sup>12</sup>

7. The completion of an adaptation to an individuals home is an important aspect of their ability to maintain not only their independence but also their health and well-being.
8. Some Council tenants can wait for two years for a shower to be installed and approximately two-thirds of people in the private sector waiting for a Disabled Facilities Grant have been waiting for more than six months for the adaptation process to be completed.
9. Unlike owner-occupiers and those renting privately, Council tenants are not subject to a test of financial resources.
10. Tenants of a Registered Social Landlord are eligible to apply for a Disabled Facilities Grant providing their landlord is identified as not having sufficient funds in reserve to pay for the adaptation that is required to be completed.

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<sup>12</sup> The procedures for applying for adaptations in both the public and private sectors is detailed in Appendix F

11. If re-housing is an appropriate option to consider, owner-occupiers may apply to the Housing Register. However eligibility for social housing considers the value of their existing property and currently the criteria is set at £55,000.
12. However, the value of houses in Southampton has risen significantly in recent years and the average cost of a terraced house now exceeds £100,000. It is unlikely that many older people will have a home valued at less than £55,000.
13. Council tenants recommended for a major/large adaptation who are under-occupying a family sized property are asked to consider moving to a more appropriate size property. They are given the details of the current financial incentives to assist them with moving costs however the majority of tenants prefer to stay in their current home.

### Technology

14. The use of improved technology, particularly SMART technology, is a valuable aid to enabling older people with varying levels of independence and dependency to remain in their own homes.
15. However, it is also true to say that the implementation of a 'person centred approach' and the use of technology and particularly SMART technology would make it unnecessary for some older people to move because services and support could be provided to them in their own homes. This is considered later in this chapter.
16. The policy context has moved away from institutional provision in residential settings towards supporting older people in their own homes thus supporting the promotion of independence and rehabilitation.

### Sheltered Housing

17. The City has a range of sheltered housing provision which, is considered in Chapter 6.

### **Issues Arising**

18. Demand for equipment and particularly more complex equipment is increasing.
19. Regardless of tenure, the demand for adaptations far outstrips the resources available resulting in waiting lists for works to be completed. The knock-on effect of this restricts and limits the ability of an individual to remain independent both in the short and long term.
20. Current legislation does not allow for existing policies and procedures to be flexible enough to allow for alternative solutions to be considered. It is anticipated that reforms to the Housing Grants, Construction and Regeneration Act 1996 will allow for greater flexibility in future. (Please see Chapter 6 for details.)

21. Many older people are 'capital rich and cash poor', i.e., the value of their property is quite significant but they have only a small income, and are therefore dependant upon grants to adapt and/or improve their homes and also their quality of life.
22. Although, it is also true to say that a lot of older people tend not to see their home as having potential cash value to themselves and are generally more concerned about 'passing it on' to their families.
23. The limited housing options available and acceptable to previous generations of older people are becoming increasingly unacceptable to current and future generations. Older people have rising aspirations and expect to have increased choice and standards. They have a range of expectations, which may change as their dependency increases or their circumstances change. This might include staying at home following appropriate repairs and adaptations or moving to more appropriate housing, sheltered housing and/or residential or nursing care.
24. The financial incentives available for Council tenants to move to a smaller and more appropriate property, which could make an adaptation unnecessary or reduce the level or cost of adaptation required are not very effective and need to be reviewed.

### **New Technology**

25. There are several factors driving the development of new technology as a way of supporting older people to live more independently and broadening the range of housing options available to them:
  - the increased use and reducing cost of technology generally
  - increased emphasis on preventative services
  - increasing healthcare costs of an ageing society
26. Generally speaking the technology currently in use is dependent upon the user initiating the alarm, either by pulling an alarm cord or pushing the button on a pendant alarm.
27. A more preventative style and type of technology, SMART Technology is now available to benefit older people. Pilot projects have demonstrated the scope for installing passive alarms and movement sensors into peoples' homes to help vulnerable people stay at home longer.

### **Changes Required**

28. For choice to be a reality there needs to be a mix of service provision which focuses on the needs of the individual.
29. The Government has outlined the need to improve the provision of equipment, from Joint Equipment services, by 2004 by:
  - increasing the equipment received by clients by 50%
  - and by developing:
    - a single point of contact

- pooled budgets between health and social services and possibly other statutory agencies by 2003
  - service standards
  - have evidence of user influenced improvements by April 2004
30. New policies and procedures need to be developed between housing, social services and the health sector which will allow older people and agencies to consider ways to maximise their resources more effectively and efficiently.
31. The introduction of a case conferencing methodology to include social services, the health sector and housing for the purpose of considering adaptations would promote partnership working, choice for the individual, and make best use of existing resources thus helping to conserve limited budgets.

#### **Action Plan**

- Improve the provision of equipment, from Joint Equipment services by 2004 by implementing the recommendations of the Government detailed in paragraph 21.
- An inter-agency group to be established to:
  - Develop and establish a 'case conferencing methodology to promote partnership working, choice for the individual and maximise existing resources
  - Develop policies which will maximise existing resources by identifying how:
    - older owner-occupiers could consider an offer of social housing, including sheltered housing as an alternative to costly adaptations/renovation work
    - an up-to-date value of property is reflected in the eligibility criteria for the Housing Register
    - establish more streamlined processing which speeds up the delivery of adaptations
    - Identify more incentive opportunities to encourage older tenants under-occupying a property to move to a more appropriate dwelling as an alternative to adaptations
    - develop equity release type schemes to enable owner-occupiers to fund their own adaptations (this is discussed in Chapter 3)
    - identify ways in which the Council could install some equipment purchased by the tenant as an alternative to funding adaptations
  - Identify the merit of establishing a 'one-stop' multi-tenure agency to organise all adaptations, ensure prioritisation and save costs, such as a 'triage process'

#### Technology

- Identify ways to increase the range of new technology and support services for older people, including those with mental health problems and dementia
- Promote and expand the City Council's Care Line service to encourage independent living



## Chapter 5

### Information and Advice

**Older people need advice on a wide range of issues linked to their housing needs and options, including advice on benefits, home safety, and security.**

**Good quality advice and assistance is essential if older people are to get help to prevent or alleviate problems of homelessness, debt, fuel poverty and poor or inappropriate housing and will ensure that older people can make plans for themselves.**

1. The availability of effective and timely housing information and advice is a key factor to enabling older people to access the kind of housing, support and care that will meet their needs and preferences to assist them in planning for their future and choosing to move or stay at home.
2. People's needs for housing, support and care vary and change throughout their lives. Although the most common area of advice sought is in respect of moving to alternative accommodation, evidence shows that most older people want to remain in their own homes. When their housing is inappropriate, people actively seek advice.
3. Whilst some older people wish to move early in their retirement others will wait until they are much older before they move to more supported housing where care and support is available. Specialist advice is needed to find appropriate accommodation with the right facilities and the appropriate level of care such as sheltered housing, extra-care sheltered housing or residential or nursing care. (Sheltered Housing is discussed in Chapter 6)
4. Financial planning advice is becoming more important as a growing number of owner-occupiers would be able to unlock substantial capital resources by trading down on the housing market.
5. An older person considering a move to sheltered housing from their existing and usually larger home will need help to make decisions about a range of issues including:
  - disposing of most of their possessions because they will be moving into a much smaller property
  - whether it is more important to stay close to their friends and contacts in an area they have possibly lived for a long period of time or to move to a more appropriate home which will better suit their needs and enable them to remain independent.
6. The second most common area of advice relates to disrepair, adaptations and related grants. Services which enable older people to stay at home were considered in Chapter 3.

## **Present Position**

7. The problems and concerns experienced by older people are multifaceted and housing problems are often linked with other difficulties e.g. income issues or the need for care. It is difficult for any one agency to offer a full range of advice, advocacy and support.

## **Current Provision**

8. Very few agencies focus solely on housing advice for older people. Agencies can specialise in providing advice on particular issues, such as housing or for particular client groups such as older people. The current range of information is available from the following agencies:
  - Information Booklets e.g. Age Concern
  - Health & Community Care Officers
  - Housing Advice Service, Southbrook Rise
  - Neighbourhood Advice Service, Ropewalk, Derby Road
  - Welfare Rights Unit, accessed by Local Housing Offices, Housing Advice Service and the Neighbourhood Advice Service
  - Clovelly Centre
  - Housing Benefit/Council Benefit
  - Welfare Advice Agencies, including the Department of Work and Pensions
  - Generalist Advice Agencies e.g. CAB
  - Staying Put (Home improvement agency)
  - Local Age Concern advice and information service
  - National telephone/letter services e.g. Age Concern England, AIMS, The Elderly
  - Accommodation Counsel & Help the Aged Senior Line
  - Housing, Health and Social Services staff
9. Information about Housing Services provided by the City Council is provided in Appendix A.
10. Information about services provided by Social Services and the Primary Care Trust is contained in Appendix B.
11. A detailed list of organisations providing housing related information and advice is provided in Appendix C

## **Information and Sign-Posting**

12. Sources of information for older people include family, friends, peers and professionals with whom they have day to day contact e.g. home carers, sheltered housing staff and day care managers rather than formal advice agencies. There is a need to target these key people with information about the availability of advice services and housing options. The Housing Advice Service has an important role in co-ordinating and sign-posting the range of services available locally.

13. Whilst information and advice are important, older people often have additional needs for advocacy, and for practical and moral support in dealing with their housing situation.

Appropriate referral systems need to be in place between agencies/services. Existing examples of referral systems include:

- Links between Private Sector Housing Services and Social Services, for older people in need of housing renovation and adaptations.
- Links between Housing Services and Social Services for older people with health and care needs with referrals to Housing and Community Care Officers.
- Welfare Rights Unit targeting of older people in all tenures, who are receiving care in their homes from Social Services, with advice and assistance on income maximisation.

14. The Department of Health is currently piloting '**Care Direct**', to supplement NHS Direct and will provide a new single information gateway for older people and disabled people. The aim of Care Direct will be to have one national telephone number which will route callers to local call centres and help desks to provide access to information and advice on housing, care and support services and social security benefits. It is essential therefore that information and advice about the range of housing and support options is available locally.

### **Issues Arising**

15. Experience indicates that most people do not seek advice and information until a crisis occurs. They then have the added burden of having to find out where to go to get the information they need. In addition older people and in particular those over 75 years tend to put up with things, and are not necessarily assertive.

16. At present older people can gain access to a mixture of advice, information and advocacy on housing and housing related issues from a variety of places. The type and level of information provided varies and is not always of a consistent and appropriate quality. For example the housing advice service may, because of the low representation of older people amongst its clients, have less expertise on the wide range of housing issues faced by older people, whilst agencies specialising in advice for older people may not have sufficient expertise in all areas, e.g. complex areas of housing law.

17. The Housing Advice Service, Neighbourhood Advice Centre and the Welfare Rights Unit have recently attained the legal services commission Quality Mark in recognition of the quality and consistency of the services they provide.

18. The role of specialist housing advisors in providing advocacy for older people to enforce their tenancy rights is essential and needs to be exploited by other agencies and promoted to older people.

19. The numbers of older people in the private sector and the levels of disrepair would indicate a need for good quality housing rights advice & advocacy, and that there is a gap in the present service. In addition the majority of older private sector tenants

will be in protected tenancies, this may make them vulnerable to harassment, as landlords are unable to gain possession by legal means.

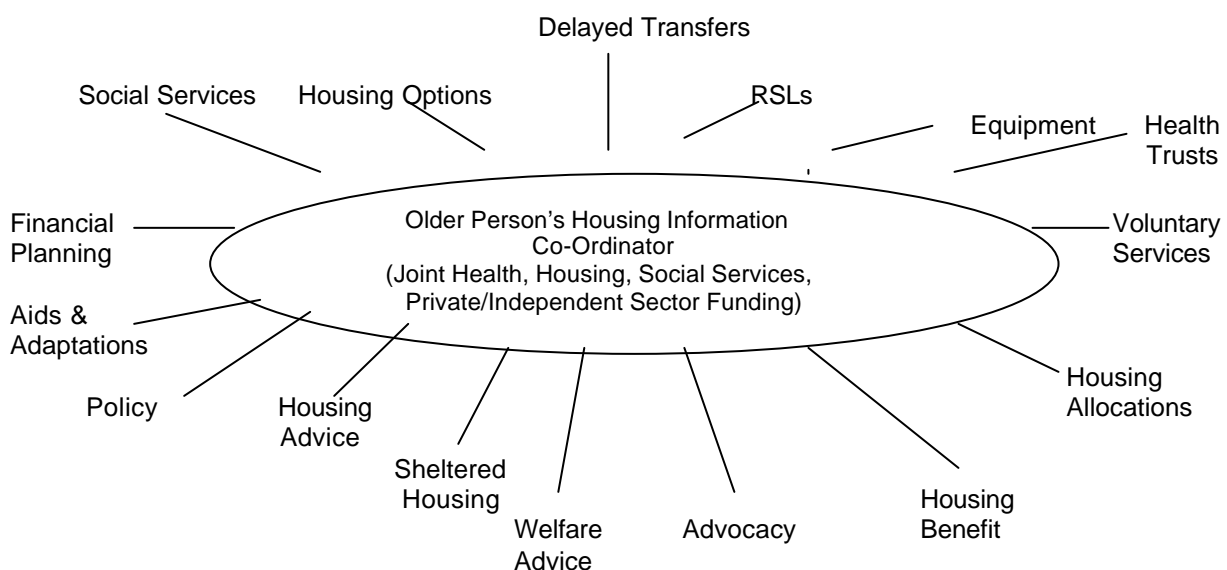
20. It is essential that the strategic planning process of the Health Trusts and Social Services address the role and importance of housing information and advice in contributing to independent living and health improvement.
21. There are specific issues involved in delivering advice and information on housing for older people from black minority ethnic communities. Nationally there is evidence that some people from minority ethnic groups, lack information on the range of housing options available, and may not view mainstream services as being appropriate for them due to barriers such as discrimination.
22. There is a need for housing advice that recognises cultural and language needs, providing support from people who are aware of and sympathetic to their cultural situation and could provide an appropriate holistic service.
23. It is important that the provision of information and advice is integrated and co-ordinated, available and accessible.

### **Changes required in the next five to Ten years**

24. To improve the quality of housing advice targeted at older people to ensure older people can obtain relevant information, advice and advocacy must:
  - take account of the different needs of older people, including different tenures, care needs, ability and cultural aspirations and be available in different formats and languages
  - be readily available before they need it so they can make informed decisions and choices ahead of time:
  - be available in a wide range of setting and locations and be consistent and integrated
25. Housing, social services, health and voluntary agencies need to:
  - Target information and publicity where older people go, e.g., post offices, day centres, libraries, GP Surgeries etc
  - Raise awareness of the housing advice services available among other professions
  - Develop outreach services encouraging face to face contact with older people
  - work with older peoples agencies within the voluntary sector to understand the housing issues faced by older people and develop delivery systems for information and advice, including skills sharing and training.
  - Establish a one-stop agency shop for advice for older people

## Action Plan

- For agencies to adopt an integrated approach to producing and delivering information and advice which is accurate and consistent about housing related services
- To develop appropriate referral networks between agencies
- Encourage agencies to attain the legal services commission Quality Mark for advice to older people
- To introduce joint training between housing, social services and the various health agencies
- To improve the information available about services to ensure that older people can make an informed choice on the options available to them
- To ensure appropriate levels of support and advocacy are available
- To make sure that information provided is accessible in appropriate formats, such as:
  - Large print
  - Translation into the major community languages
  - Video
  - NET, 'City's Information Points'
  - Audio tapes or included in 'talking newspapers' for those who are blind or have a visual impairment
- Ensure the information is located appropriately, such as:
  - Day centres
  - Lunch clubs
  - Post offices
  - Libraries
  - GP Surgeries
  - Dentist Surgeries
  - Centre for 3<sup>rd</sup> Age
- To identify other appropriate locations used by older people and to take the information there
- To explore the value of a jointly funded post of an Older Person's Housing Information Co-Ordinator to act as a gateway for agencies, adaptations, financial advice, housing advice etc as described below



## Chapter 6

### Sheltered Housing

1. The focus of sheltered housing is shifting away from 'housing for older people' towards:
  - retirement housing for independent living for older people and
  - specifically designed housing with support, Extra-Care sheltered housing, for frail and disabled older people and those with specific needs, such as dementia, a learning disability or a history of homelessness
2. The hospital admission rates amongst people aged over 75 years are rising at the same time the number of residential and nursing home beds available locally is reducing with the continued closure of residential and nursing homes.
3. The 'knock-on' effect is that there are now large numbers of older people waiting to be transferred from hospital to more appropriate settings and long waiting lists for people to be admitted into hospital.
4. This is a critical situation and has highlighted the fact that 'sheltered housing' could play a valuable part in helping to resolve this situation.
5. Extra-Care Sheltered Housing is seen by social services and the health sector as a more appropriate setting for a number of frail and vulnerable older people who could retain their independence in a more supported environment. This would allow the limited residential resources to be used by those assessed as needing residential or nursing care.
6. There are cost benefits to such a solution. The individual is able to retain their income levels and it is less costly for social services and the health sector to maintain individuals in this type of setting and is therefore is a more viable alternative to residential care.
7. The role and function of sheltered housing has evolved in its long history since the Middle Ages when Almshouses were first built. In 1909 the Royal Commission on the Poor Law approved the development of special housing known as 'Cottage Homes'. Joseph Rowntree, in 1947, suggested in his review of provisions for the elderly that 5% of dwellings be specially designated for the elderly, but that few special fittings were needed. Local Authorities first started to build sheltered housing in the late 1940s and the trend mushroomed over the following decades reaching a plateau in the 1980's when private developments started.
8. The key factors differentiating sheltered housing from ordinary, general needs housing are that it:
  - is designed and built with older people in mind
  - is connected to an emergency alarm system
  - has the services of a scheme manager or warden

9. The current categorisation of sheltered housing is as follows:

- Category 1 has a visiting warden service, has no community facilities and is generally considered to be more suitable for active older people
- Category 2 has a resident warden and often a resident assistant warden, generally has a community room and other communal facilities such as a laundry and is considered to be more suitable for older people who are less active and more dependent on support
- Category 2½ or Extra-Care Sheltered Housing has warden/s providing support 24 hours a day with a variety of communal facilities and is designed specifically for very frail older people with high levels of dependency

These categories are not well understood by the public and the term 'sheltered housing' is often mistaken for care or nursing homes.

10. The role of housing is now generally more fully recognised as being a major component of the preventative health agenda and sheltered housing particularly is valued for the way in which it promotes the continued health and well-being of older people.

11. Thus the evolution of sheltered housing, down one path still continues and is now viewed by health and social care agencies to often be a more appropriate setting than residential care for very frail older people, particularly those with specific needs, such as mental illness or a learning disability.

12. Along another path, sheltered housing provides independent living units for a wide variety of older people. Some potential customers are put off by the term 'sheltered housing'. The non-Extra-Care units could be branded as 'Retirement Housing: Independent Living' and marketed as such.

### **Range of Provision**

13. There are 5,029 sheltered housing flats in Southampton. 3,274 are owned by the City Council, 1,329 by housing associations and there are about 426 privately owned leasehold sheltered properties although this figure is increasing as a result of current property developments in the City.

14. A significant proportion of the sheltered housing provision available in Southampton today was built between the 1960s and 1980s and as such some of the design features are outdated, and not compatible with promoting independent living. For example, many are very small or are bed-sits or studio style flats having shared bathroom facilities and a significant number of schemes do not have lifts making most of the dwellings inaccessible to disabled and frail older people. As a consequence there have been difficulties in letting some of these properties.

15. Housing needs of older people are more sophisticated today. Older people need space to enable them to use the range of daily living aids now available such as walking aids and wheelchairs. A self-contained property is much more conducive to promoting independence and in future older people will find shared facilities unacceptable.

## **Levels of Support**

16. Currently the City Council has only one Category 2½/Extra-Care sheltered housing scheme. The range and level of support in this scheme is much higher than in ordinary sheltered housing and is able to specifically cater for the very frail and disabled older person. It has been a success and is very popular.
17. Support services provided within a sheltered housing scheme are not currently available to other older people in the locality although wardens based at some schemes do provide support to other schemes that they are linked to.
18. Tenants in sheltered housing in Southampton, in whatever type of scheme they are in, are connected to a variety of Alarm Services:
  - City Council owned sheltered housing is connected to the Community Alarm Service, operated by the City Council, which provides a responding service giving 24 hour access to emergency assistance/support.
  - Tenants of Housing Associations and leasehold owners generally receive a 24 hour monitoring service only and are required to provide details of nominated individuals to respond if necessary.
19. There are approximately 1,020 older people in Southampton living in non-sheltered housing who are connected to the Council's Care Line Service (dispersed alarm) to assist them living independently in their own homes. Individuals with a Care Line are required to nominate at least two key holders who could respond to an emergency.

## **Supporting People**

20. The Supporting People initiative, which comes into effect from April 2003 is about establishing a new strategic and funding framework for Supported Housing, including Sheltered Housing.
21. Its purpose is to bring together the existing funding streams for support services into a single budget to be applied at the local level based upon the strategic priorities of Housing, Social Services, Health and Probation Services, to encourage the development of support services that can be delivered in ordinary housing as well as specialised schemes, such as sheltered housing, and to achieve the key aims and objectives of these organisations by ensuring that services:
  - Adapt and respond appropriately to changing needs
  - Enable people to maximise their independence
  - Prevent unnecessary admission into institutions
  - Help people in institutional care to move to a more independent and stable home
  - Prevent crisis that can lead to homelessness and tenancy breakdown
  - Contribute to a balanced and sustainable community
22. The implementation of this joint initiative provides a unique opportunity for close working between agencies to ensure that there is greater co-ordination in providing better integrated, whole-system, services for vulnerable people, including older people.



23. The adoption of the 'person centred approach' in developing services will lead to more flexibility in service provision and the development of services which can provide appropriate levels of support to people in their own homes as well as to those in sheltered housing.

### **Issues Arising**

24. The implementation of Supporting People has fundamental implications to the provision of sheltered housing services. It will be the mechanism to support the shift in focus to a 'person centred' approach in the development of flexible sheltered housing services and mean that the support provided will not have to be tied to specific accommodation. This will involve reclassifying sheltered housing according to the services provided rather than category level or warden support.

25. The advances being made to the technology available today reduces the necessity of older people having to move to sheltered housing. For example, by increasing the use of dispersed alarms and providing a dedicated mobile monitoring and responding service many older people, of all tenures, would be able to live independently within their own homes for much longer.

26. The City Council does however need to balance the needs and wishes of individuals with making best use of their housing stock. There are incentives available to older people under-occupying larger, family sized properties to move to a smaller dwelling, including sheltered housing however they are not sufficiently encouraging and therefore not very effective in freeing up family sized homes.

### **The problems with the current sheltered housing provision:**

#### **27. Geography**

- There is limited choice in some parts of the City
- The location of some schemes is too isolated or distant from amenities
- There is a geographical mismatch, the bulk of the Council's sheltered flats are in the West of the City where there is a projected decrease in the number of older people and in certain areas there is no provision at all, i.e., Bitterne

A map showing the location of all sheltered housing in Southampton is at the back of this document.

#### **Design of Schemes**

28. The designs are outdated and often not appropriate for the needs of older people today, i.e., room sizes are often very small making it difficult for older people with walking aids to move about easily; bed-sits are generally not popular and most older people given the choice would prefer a separate bedroom and many would prefer two bedrooms, which would allow them to accommodate visitors.

29. A lot of the schemes do not have a lift thus making the dwellings on the upper levels inaccessible to older people with mobility problems.

### Way Applications are Processed

30. The current categorisation of all the sheltered housing provided is not helpful in identifying whether a sheltered housing scheme will be more appropriate for an older person with specific needs than another and needs to be re-defined.
31. Older people applying to the Housing Register or seeking a Transfer from their current council or housing association property are usually only offered sheltered housing because it is seen as being the only housing option available for older people regardless of their needs
32. There are insufficient incentives to encourage older people to 'down-size' from a large and possibly under-occupied property. There are alternatives to sheltered housing such as 1 bed-roomed houses, 2 bed-roomed and/or ground-floor flats. In addition Registered Social Landlords have some developments such as bungalows and 2 bed-roomed properties more specifically targeted older people to encourage them to relinquish larger properties.

### Care Issues

33. There is often confusion about the housing warden's role. Some wardens do more than is required of them leading to confusion, among wardens and other people about their role. Additionally, there is a lot of misunderstanding about the role and function of sheltered housing and the wardens. There is a general misunderstanding that sheltered housing is like residential care when in reality it is 'independent living'.
34. The number of older people living in sheltered housing in receipt of a care package varies. Some schemes have a large number of tenants receiving care from a variety of carers and agencies whilst others have very few and the liaison between care managers and scheme wardens/managers requires further development if the benefits of joint working are to be maximised.
35. There is a shortage of appropriate provision for older people with higher support needs in the City. Extra-Care sheltered housing is viewed as being the most appropriate setting for the more physically and/or mentally frail older person to live as independently as possible within their community.
36. There is limited provision for specific groups, i.e., people with dementia, a learning disability and those with a history of homelessness.

### **Changes Required**

37. There are a number of initiatives around the country which illustrate some of the changes which could be made to sheltered housing in Southampton over the next 5 to 10 years.

## Sheltered Housing as Local Resource Centres

38. Some authorities have negotiated with their sheltered housing tenants to allow certain facilities to be used by older people in the wider community. Most usually these are supervised bathing by a community nurse, laundry facilities, hairdressing and the use of the community rooms.

In Hillingdon, there is a pilot scheme to encourage some wardens to take on an additional role in relation to the local community and do check calls on selected older people living nearby. Part of their role is to try and involve them in the activities taking place in the sheltered housing scheme.

## Allocation of Care Hours to a Sheltered Housing Scheme

39. Many areas are moving away from person care hours for individual tenants provided by a range of providers, to one provider covering all care needs of tenants in a sheltered housing scheme.

Wolverhampton has six Extra-Care schemes each with on site 24 hour care with back-up from health staff enabling people with high levels of dependency to live independently

40. Some local authorities are going further and having a set allocation of care hours to a sheltered housing scheme. A Care Manager in conjunction with the Social Services Care Team and Housing Warden decide how those hours are best employed.

In one London Borough, they are looking to the Sheltered Housing Scheme Manager having a more senior role and managing the care staff and the allocation of care hours within the scheme.

## Sheltered Housing for Intermediate Care

41. The provision and development of intermediate care is designed to give people the help they need to remain independent at home after they have been in hospital or even to prevent them being admitted to hospital. It is short-term care of up to 6 to 8 weeks while someone is in transition from home to hospital or vice versa, sometimes called step up or step down care (a temporary half-way house). The aim is to speed up discharges for those who have been admitted to hospital and to facilitate a rapid response from the appropriate services to provide care 'close to home'.

At present four flats at Lundy Close, (a Council owned sheltered housing scheme) in Southampton, have been designated for intermediate care under the 'Cash for Change' initiative. These flats enable people waiting in hospital (e.g. for adaptations to their own home) to be cared for in a more appropriate setting thus freeing up a hospital bed.

This pilot project has been very successful and the opportunity to increase the range of needs being catered for is currently being discussed.

42. The provision of dedicated sheltered housing to support intermediate care and other new initiatives which facilitate early discharge from hospital is seen as significant since it would prevent the increasing dependency that can result from a protracted stay in hospital or the residential sector.

### Engagement of the Private Sector

43. Many privately owned residential care homes are closing (5 residential homes providing 82 bed spaces closed during July 2000 to July 2001) and there is concern that the sale and development of these properties does not ensure that some provision is made for frail older people. There is a pessimistic view about pursuing opportunities to influence the town planning process.

44. There needs to be better linkages between sheltered housing and residential care provision, in the geographic areas where these two services are located, to provide a continuum of care and support to older people in their locality, regardless of tenure.

45. The role and function of sheltered/Extra-Care sheltered housing needs be up-dated to reflect the needs and aspirations of older people today and tomorrow, to be accessible to older people with additional needs and to be a suitable alternative to residential care

### **Changes required around Extra-Care**

46. Within sheltered housing there are all sorts of options to be explored. There is a lot of sheltered housing in the City, most of it (65%) owned by the City Council. However there is hardly any provision for certain key groups, particularly the more dependent and frail older person, such as those with a dementia or a learning disability.

47. The Southampton Primary Care Trust (SPCT) and Social Services see the development of more extra-care sheltered housing as a major component of the inter-agency care strategy. At present there is unprecedented pressure on both hospital beds and nursing and residential care.

48. In the past the changes in approach to providing services for the levels of dependency has increased in all settings in an unplanned way with no compensatory funding or training to help staff cope.

49. Social Services and the SPCT have been working together to try and slow the dependency of older people in a number of key ways, e.g., such as to build up the staffing of residential care so it is able to care for older people who traditionally would have been cared for in hospital. As a result care is available in a more homely setting at a lower cost, resulting in more care per £ spent overall.

50. In the same way there is potential to build up the staffing and the capacity of sheltered housing to cope with dependency levels cared for hitherto in residential care. Such an approach would be in line with the philosophy of Supporting People and maximise the use of joint funding opportunities. The SPCT and Social Services

would be involved in the staffing and training processes, including the review of roles of visiting staff and staff based at the scheme.

51. By raising thresholds of dependency at each stage of the care continuum in this way beds are freed up in all services and costs are saved, but most importantly the risk of institutionalisation is reduced and avoided for some.

#### Designating Extra-Care Schemes or Designating Tenants?

52. A number of local authorities seem to have designated existing care schemes or new build schemes as 100% extra-care in order to benefit from economies of scale. Some authorities, such as Hackney and Wolverhampton, have closed their in-house residential care homes and re-provided for this group within extra-care sheltered housing.
53. Several authorities have involved Registered Social Landlords (RSLs) to build or convert schemes and then either provided care in-house (by the Local Authority or the Registered Social Landlord) or if it is 24 hours care used an independent provider.

#### Support and Care

54. Southampton Social Services are committed to reducing the number of older people entering residential care and identify the provision of extra-care sheltered housing as a cost effective alternative.
55. Work is currently being undertaken to identify the levels of residential and nursing care beds needed in the City and the levels of need for additional extra-care sheltered housing, which at this time is estimated to be about 100 additional units.

There is currently a pilot project involving the tenants of six City Council sheltered housing schemes to identify how the delivery of home care services can be improved. Tenants are being invited to allow their care plans to be shared with their wardens to enable their care provision to be monitored and improve communication with Social Services. This project will provide valuable information to further develop the liaison between care managers and sheltered housing wardens in order to maximise the benefits of good joint working.

56. Joint training and induction plans are increasingly being used to promote an appreciation of the various roles of staff in sheltered housing, health and Social Services thus offering a holistic approach for the benefit of sheltered tenants.
57. An inter-agency group should be set up to examine the future role of sheltered housing and particularly Extra-Care, including:
- The categorisation of sheltered housing needs to reflect the level of support and services available to assist and enable older people to live more independent lives
  - Sheltered housing schemes providing support services to other older people within their localities, regardless of their tenure.

## Action Plan

### Sheltered Housing

Existing sheltered housing provision needs to be reviewed to establish its continued suitability to provide 21<sup>st</sup> Century facilities and services for current and future needs of older people, including providing for older people needing Extra-Care sheltered housing

- An inter-agency working group should be established with a brief which would include:
  - Identify a more appropriate way to Categorise, allocate and market existing and new developments of sheltered housing according to services provided rather than category level of warden support, such as:

### Extra-Care

- identifying the numbers of additional Extra-Care units there should be in the City specifically for frail and vulnerable older people, including older people with dementia, and
- how this could be provided, i.e., altering and re-categorising existing sheltered schemes or developing new schemes
- identifying small scale initiatives which could be piloted this winter

### Retirement Housing: Independent Living

- rolling out the 'scheme-manager' model to the rest of the Council's sheltered housing schemes with resident staff to co-ordinate health and social care input when needed by individual tenants
- review the link between delivery of health and social care services and support service within sheltered housing, exploring the options for providing care within Retirement Housing schemes in the most cost effective way
- Pursue ways of establishing more 'intermediate care' being located within a Retirement Housing scheme to prevent hospital admissions and/or to facilitate early discharge from hospital
- develop floating support schemes to enable older people of all tenures to access the support they need to remain independent in their own homes for as long as possible
- feed any thinking into the Supporting People programme timetable
- Identify the linkages to be made between Retirement Housing schemes and residential homes to provide a continuum of care and support to older people in their homes, regardless of tenure.
- Develop more effective 'under-occupation' initiatives for older people in non-sheltered housing

## Chapter 7

### Joint Working

1. Policies and developments in housing and housing related services are not isolated from other policies, such as social care, health, community safety, regeneration and planning.
2. It is essential that any new Joint Strategic Structures include appropriate representation from the relevant housing divisions in Southampton City Council, that there are clear lines of communication between these divisions, Social Services and health agencies as well as others, such as, planning, transport and leisure.
3. For joint working to be successful it is important that:
  - joint training takes place to ensure the different agencies understand each others role and responsibilities, their priorities and constraints to assist in achieving realistic outcomes
  - older people are involved in the process to share their views and concerns
  - a communication strategy is developed and implemented
  - services are culturally appropriate to meet the needs of the diverse communities of older people in Southampton
4. A more radical approach to the development and delivery of services for older people will inevitably involve changes to the way agencies work together in the future.
5. The values and cultures of organisations need to change to bring about a different mind-set both within and between organisations and individuals to adapt to a 'holistic', 'whole systems' 'person centred' approach, which will involve older people in the development and delivery of services.
6. Such an approach will ensure more integrated user-led services and help to remove the barriers that have made joint working difficult hitherto.
7. Joint working is recognised as being an effective means to help facilitate the provision of appropriate services and to maximise the effect of the limited resources available. In addition, it presents the opportunity to develop joint visions and priorities thus ensuring that the needs of older people are accorded priority in relation to others.

### How We Work Together At Present

#### Joint Structures

8. There are a number of joint meetings organised between health and social services around peoples' needs. However there is a tendency for a representative from housing to not always being included and consequently specific issues relating to housing in the City are not always identified or discussed.

### Older Persons' Strategy Team

9. The Southampton City Primary Care Trust and Social Services have an Older Persons' Strategy Team acting as an inter-agency body for planning the development of care services within the City. The membership of this team is currently under review and it is anticipated that appropriate housing representation will be included.
10. There are examples of joint working locally. However it is true to say that the relationship between housing and the various health agencies are not as well developed as those between housing and social services although progress continues to be made in strengthening these relationships.

### Supporting People

11. The new strategic and funding framework to be implemented from April 2003 is designed to encourage the development of support services that can improve the response to people's needs and preferences and that can be delivered in ordinary, general housing as well as specialised schemes, such as sheltered housing. Housing, social services, health agencies, probation and voluntary and independent organisations will be making joint decisions about how support services should be provided in the City to best meet people's needs and preferences. It is intended that this will lead to better integrated services for people requiring support and supported housing, including older people.
12. Locally, the Supporting People Core Group is now well established and has representation from all the relevant parties, and is on target for being ready for the implementation of an agreed programme from April 2003.

### Projects Jointly funded by Housing and Social Services

13. There are three Housing and Community Care Officers working specifically with older people of all tenures. Their work concentrates on identifying appropriate housing solutions for older people who have been referred to social services and those who have applied to the housing register or seeking a transfer from their current council home. They are managed jointly by Housing Services and Social Services. They work out of both the Community Care Team based in Housing Services and the Older Person's Teams located in the three areas of Southampton and are uniquely placed to easily access the different services provided to meet the needs of the older people they are working with.
14. The development and provision of Manston Court, the Extra-Care Sheltered Housing scheme in Lordshill was the result of joint funding between the services. The staffing costs were also, until recently, joint funded.

### Joint Pilot Projects

15. Scheme Manager Pilot – the wardens of six sheltered housing schemes will be working more closely with social services and have a level of involvement and monitoring of the home carers visiting clients in the schemes. It is anticipated that this pilot will be 'rolled out' to the rest of the City in due course.



16. Lundy Close Bed-Blocking Initiative – which is a joint project involving housing, social services and health agencies. Please see Chapter 6, paragraph 38 for details

### Joint Developments

17. Single Assessment Process – a requirement of the National Service Framework for Older People which will bring about a single assessment tool for social services and health agencies to use in assessing the needs of older people. Housing has been involved in the process and ‘trigger questions’ relating to housing have been included to assist in the identification of housing issues early in the assessment process.

18. ‘Integrated Care Programme Approach’ is the process of bringing together the assessment processes used by health and social services in relation to mental health services. The newly established West Hampshire NHS Trust (which has responsibility for providing services for adults and older people with a learning disability and/or mental health problem) is leading on this development. Housing has contributed to this process by producing ‘trigger questions’ which assist in the identification of housing issues early in the assessment process which will enable an early resolution to identified housing issues and thus reducing the risk of a delayed discharge from hospital.

### Pooled Budgets

19. Pooled budgets are being promoted heavily by the Department of Health, especially for services for Older People.

20. The Section 31 partnership arrangements in the Health Act 1999 (Health Act Flexibilities), introduced in April 2000 removed the legal obstacles to joint working by allowing the use of pooled budgets for NHS bodies and local authorities. The purpose of which is to enable them to be able to respond effectively to improve services, either by joining up existing services or developing new, co-ordinated services and to work with other organisations to fulfil this.

21. The intention of pooled budgets is that:

- health and local authorities put money into a single dedicated budget in order to encourage joint commissioning or lead commissioning, by either the health body or local authorities to take a lead in commissioning on behalf of both bodies
- there will be integrated provision of services, a one-stop package of care
- there is agreement between the parties involved on the outcomes for the specific service, the target group and the eligibility criteria

22. The intention is to build on existing joint working by offering the opportunity for further innovative approaches to user-focused services.

23. The first project to come under this legislation locally is a joint health and social services project for older people. (A purpose built intermediate care facility which is part of the ‘orthopaedic strategy’ will be added to Brownhill House, a City Council Residential Home to provide 16 intermediate/orthopaedic step-down beds and is

expected to be ready for use in April 2003. In the interim 16 beds are being used for this purpose in another City Council Residential Home, Northlands House)

### Building Capacity and Partnership in Care and Cash for Change

24. The Government introduced the 'Cash for Change' initiative to reduce delayed transfers in acute hospital beds in October 2001. This was underpinned by a new agreement 'Building Capacity and Partnership in Care' which was drawn up with the private and voluntary home care sectors, health and housing organisations.
25. The agreement aims to encourage 'a more strategic and inclusive approach' to capacity planning at a local level, based on a whole systems approach that actively includes the current and potential contributions made by nursing and residential care, home care, *ordinary and sheltered housing* and other community based options.
26. Southampton City Council received £600,000 in 2001/2002 and the use of this money included the funding for the adaptation and provision of furniture and equipment for the four flats in Lundy Close to facilitate discharges from hospital.
27. Southampton City Council received £1.2M for 2002/2003 however, the Carers Grant and the Partnership Grant cease to be available after April 2002 and this money has also to cover schemes formerly met by these grants. Future funding after March 2003 is unclear.

### Best Value

28. Section 3 of the 1999 Local Government Act places a duty of best value on local authorities to make arrangements to secure continuous improvement in the way in which they exercise their functions, taking account of economy, efficiency and effectiveness.
29. The City Councils' approach to 'A Better Life for Older People' the Best Value Review Pilot, was that of a 'themed' review incorporating the principles of:
  - Challenge - how can quality of life be improved?
  - Compare - how do others tackle these issues?
  - Consult - what do local people think?
  - Compete - how can the resources be assembled?
  - Collaborate - who can the council work with to make progress?

### **Training of Staff**

30. The joint training of staff is essential to ensure effective joint working between agencies as well as in the planning, funding, commissioning and monitoring of services and the consultation with older people themselves.
31. Some progress has been made in the development of joint training between the statutory agencies. A joint workshop identifying how to improve communications between health and housing and social services and housing to improve the hospital

discharge process was very successful and it was agreed that such workshops should be part of an on-going joint training programme. As a result there are now improved referral processes between hospital based staff and housing in relation to accessing the four flats at Lundy Close (the intermediate care pilot).

### **Issues Arising**

32. Part of the difficulty in the past, particularly since Southampton became a Unitary Authority, has been because of confusion about how housing was structured within the City and the other agencies not fully realising which division of housing deals with which issues. This situation has improved considerably although there is still room for more improvement and joint training programmes need to be developed to improve awareness and understanding of the roles, functions, policies and constraints of each of the agencies and the ways in which they are structured.
33. Housing needs to be fully involved in the new Joint Consultative structure which is currently being reviewed as a result of the recent changes brought about by the Modernisation Agenda for the NHS and the introduction of the new Southampton City Primary Care Trust and the West Hampshire NHS Trust and the new Hampshire and Isle of Wight Strategic Health Authority.

### **Role of Steering Group in Monitoring Progress of this Strategy**

34. The Steering Group, as a sub-group of the Supporting People Core Group, will monitor, evaluate and publish the progress made in implementing the action plan as part of the Supporting People monitoring process.

#### **Action Plan**

##### Joint Structures

- Ensure appropriate housing representation is included in all the interagency planning arrangements

##### Local Strategic Partnership

- Housing, Health and Social Services need to ensure that the promotion of health and the well being of older people are incorporated into the community regeneration process through the appropriate 'partnership' arrangements.

##### Pooled Budgets

- The 'inter agency working group looking at the future direction of sheltered housing' to see where the use of pooled budgets could accelerate projects on any of the schemes recommended in this strategy, such as:
  - Develop the role of scheme managers, i.e., in relation to the co-ordination of home care
  - Identify appropriate budgets to be pooled and future location

##### Training

- Develop a joint training programme for housing, social services and health to develop common understanding of roles, responsibilities, perceptions and priorities

## Action Plan – The Way Forward

Service Provision	Desired Outcomes	Action Needed	Agencies Involved	Target Date
<b>Quality Housing</b>				
Private Sector Housing	<ul style="list-style-type: none"> <li>A range of policies providing flexible approaches to service delivery which will ensure older people have a range of options to consider to maximise their own resources to improve their housing situation</li> <li>Improved Housing Health and Safety Rating System standards in older people's homes in line with the Private Sector Renewal Strategy</li> <li>Services marketed and targeted to older people</li> </ul>	<ul style="list-style-type: none"> <li>Review the Private Sector Housing Renewal Strategy and develop a range of appropriate policies allowing for the delivery of flexible service options and ways in which older people can maximise their own resources, such as: <ul style="list-style-type: none"> <li>Equity release/shared ownership</li> <li>Small loans</li> </ul> </li> <li>The development of appropriate mechanisms for setting and monitoring the Housing Health and Safety Rating System standards</li> <li>Producing and targeting of information for older people to assist them to improve their conditions and services</li> </ul>	<b>Housing Services</b>  <b>ES&amp;CP Staying Put Care and Repair Voluntary Organisations</b>  <b>Older People</b>	Sept 2002  ongoing  2002/03
Public Sector	<ul style="list-style-type: none"> <li>All social housing to be brought up to Decent Homes Standards by 2010</li> <li>One third of social housing to meet Decent Homes Standards by 2004</li> </ul>	<ul style="list-style-type: none"> <li>To implement the recommendations of the Housing Revenue Business Plan to complete the work to bring all Council Housing up to the Decent Homes Standard by 2010</li> <li>To carry out improvement works to bring at least one-third of council homes needing improvement up to the Decent Homes Standard by 2004</li> </ul>	<b>Housing Services</b>	2010  2004
<b>Aids and Adaptations</b>				
Joint Equipment Store	<ul style="list-style-type: none"> <li>Equipment received by clients increased by 50% by 2004</li> <li>a single point of contact</li> <li>pooled budgets by 2003</li> <li>service standards</li> <li>Evidence of user influenced improvements by April 2004</li> </ul>	<ul style="list-style-type: none"> <li>Equipment project already underway led by the PCT to meet these targets</li> <li>Develop and introduce an integrated service. Housing input needs to be defined</li> </ul>	<b>PCT Social Services Housing Services Voluntary Agencies</b>	2004 2003 2003  2003  2004

Adaptations Renovation Grants	<ul style="list-style-type: none"> <li>A range of policies ensuring ways of maximising existing resources</li> <li>More stream lined processes ensuring a reduction in long waiting time for adaptations</li> </ul>	<p>An inter-agency group to be established to:</p> <ul style="list-style-type: none"> <li>Develop and establish a 'case conferencing methodology to promote partnership working, choice for the individual and maximise existing resources</li> <li>Develop policies which will maximise existing resources by identifying how: <ul style="list-style-type: none"> <li>older owner-occupiers could consider an offer of social housing, including sheltered housing as an alternative to costly adaptations/renovation work</li> <li>an up-to-date value of property is reflected in the eligibility criteria for the Housing Register</li> <li>Incentive opportunities can be provided to encourage older tenants under-occupying a property to move to a more appropriate dwelling as an alternative to adaptations</li> <li>identify ways in which the Council could install some equipment purchased by the tenant as an alternative to funding adaptations</li> </ul> </li> <li>Identify the merit of establishing a 'one-stop' multi-tenure agency to organise all adaptations, ensure prioritisation and save costs, such as a 'triage process'</li> </ul>	<b>Housing Services</b>  <b>Private Sector Housing</b>  <b>Southampton Staying Put</b>  <b>Care &amp; Repair</b>  <b>Social Services PCT</b>  <b>Voluntary Organisations</b>	2003  2002/03  2002/03  2003  2003/04  2003  2003
Technology	<ul style="list-style-type: none"> <li>To have a range of new technological aids available for older people in their homes to enable them to maintain and sustain independence</li> <li>Expanded City Council Care Line Service</li> </ul>	<ul style="list-style-type: none"> <li>Identify ways to increase the range of new technology and support services for older people, including those with mental health problems and dementia</li> <li>Promote and expand the City Council's Care Line service</li> <li>Compare the Best Value Action Plan for Community Alarm Service to ensure compatibility with recommendations</li> </ul>	<b>PCT Social Services Housing RSLs Voluntary Organisations Developers of SMART Technology Older People</b>	2003 through to 2006  2002/03
<b>Information and Advice</b>				
Provision of Information	<ul style="list-style-type: none"> <li>A greater sharing of ideas and initiatives across agencies to encourage new service models and provision</li> <li>Improved quality and consistency of housing related information which is</li> </ul>	<ul style="list-style-type: none"> <li>Housing, social services and health to establish regular joint training for existing and new members of staff on the role and function of the three statutory agencies in relation to services for older people</li> <li>Multi-agency project to be established to review the : <ul style="list-style-type: none"> <li>Sources of information and its quality/consistency</li> </ul> </li> </ul>	<b>Housing Services</b> <b>Private Sector Housing</b> <b>Social Services PCT</b> <b>Public Relations</b>	2003  through to 2005

	fully accessible to all older people in Southampton	<ul style="list-style-type: none"> <li>◦ Format/language</li> <li>◦ Other ways to provide and share such as, videos, NET, City Information Points</li> <li>◦ development of agencies to achieve the legal services Quality Mark for advice to older people</li> <li>◦ Locations for information, such as day centres, lunch clubs, post offices, libraries</li> <li>◦ The value of creating an Older Person's Housing Information Co-Ordinator post as described in Chapter 5.</li> </ul>	<b>Voluntary Organisations</b>	
<b>Sheltered Housing</b>				
	<ul style="list-style-type: none"> <li>• To have increased Extra-Care sheltered housing provision in the City to meet the needs of frail and vulnerable older people</li> <li>• To have Extra-Care sheltered housing provision for older people with dementia</li> <li>• To have sheltered housing categorised and marketed according to services provided rather than category level of warden support</li> <li>• To have links between the delivery of social services care and support service within sheltered housing</li> </ul>	<ul style="list-style-type: none"> <li>• An inter-agency working group should be established with a brief which would include: <ul style="list-style-type: none"> <li>◦ Identify a more appropriate way to Categorise, allocate and market existing and new developments of sheltered housing according to services provided rather than category level of warden support, such as: <ul style="list-style-type: none"> <li><u>Extra-Care</u> <ul style="list-style-type: none"> <li>◦ identifying how many additional Extra-Care units there should be in the City specifically for frail and vulnerable older people, including older people with dementia, and</li> <li>◦ how this could be provided, i.e., altering and re-categorising existing sheltered housing schemes or developing new schemes</li> <li>◦ identifying small scale initiatives which could be piloted this winter</li> </ul> </li> <li><u>Retirement Housing: Independent Living</u> <ul style="list-style-type: none"> <li>◦ rolling out the 'scheme-manager' model to the rest of the Council's sheltered housing schemes with resident staff to co-ordinate health and social care input when needed by individual tenants</li> <li>◦ review the link between delivery of social care services and support service within sheltered housing and exploring the options for providing care within Retirement Housing schemes in the most cost effective way</li> </ul> </li> <li>◦ Pursue ways of establishing more 'intermediate care'</li> </ul> </li> </ul> </li> </ul>	<b>Housing Services</b>  <b>RSLs</b>  <b>Social Services</b>  <b>PCT</b>  <b>Voluntary Agencies</b>  <b>Older People</b>	2002 2003  2003 2004/05  2002 2003 2003 2003

		<p>being located within a Retirement Housing scheme to prevent hospital admissions and/or to facilitate early discharge from hospital</p> <ul style="list-style-type: none"> <li>◦ develop floating support schemes to enable older people of all tenures to access the support they need to remain independent in their own homes for as long as possible.</li> <li>• feed any thinking into the Supporting People programme timetable</li> <li>• Identify the linkages to be made between Retirement Housing schemes and residential homes to provide a continuum of care and support to older people in their homes, regardless of tenure.</li> <li>• Develop 'under-occupation' initiatives for older people in non-sheltered housing</li> <li>• Compare the Best Value Action Plan for sheltered housing to ensure compatibility with recommendations</li> </ul>		<p>2003</p> <p>2003/04</p> <p>ongoing 2002/03</p> <p>2003</p> <p>2002/03</p>
<b>Joint Working</b>				
	<ul style="list-style-type: none"> <li>• More integrated service planning and service delivery</li> <li>•</li> </ul>	<ul style="list-style-type: none"> <li>• Housing, Health and Social Services need to ensure that the promotion of health and the well being of older people are incorporated into the community regeneration process through the appropriate 'partnership' arrangements of the Local Strategic Partnership.</li> <li>• Appropriate SCC housing representation is to be included in the inter-agency planning arrangements</li> <li>• Retain housing interest with the work on the 'joint assessment process' and 'integrated CPA' and to cascade to relevant housing areas</li> <li>• Housing, health and social services to: <ul style="list-style-type: none"> <li>◦ explore opportunities for use of pooled budgets</li> <li>◦ develop joint training initiatives, topic based to foster integrated thinking and joint working</li> </ul> </li> </ul>	<p><b>PCT Social Services Housing Voluntary Agencies</b></p>	<p>ongoing</p> <p>2002</p> <p>ongoing</p> <p>2002/03</p>

### **Housing Services provided by Southampton City Council**

#### Private Sector Housing

- Housing Advice (Tenancy and Housing Rights)
- Neighbourhood Advice. Rope Walk, Derby Road (Tenancy and Housing Rights, translation service & benefit advice)
- Welfare Rights
- Houses in Multiple Occupation Team
- Housing Renewal and Grants, including Disabled Facilities Grants for adaptations
- Enforcement of minimum housing standards

#### Housing Services

- Estate Management through 11 local housing offices of:
  - Approximately 18,200 General Needs Properties
  - 3,274 Sheltered Flats for Older People
- Warden Services:
  - Sheltered Housing Wardens
  - Tower Block and Estate Wardens
  - Neighbourhood Wardens
- Housing Register
- Housing Allocations & Assessment for Social Housing
- Homelessness Team
- Housing and Community Care Officers
- Community Housing Advisers
- Alarm Service and Care Line
- Repair Line
- Emergency Repairs – Out of hours service
- Adaptations for council tenants

#### Housing Strategy and Development

- Development and implementation of the Tenants Incentive Scheme/Shared Ownership Schemes for Council tenants wishing to relinquish their tenancy and purchase a property in the private sector



### Services Provided by Social Services and Health to Support Independent Living

#### Social Services

- Home Care
- Occupational Therapists, including assessment for adaptations
- Sensory Impairment Services
- Meals on Wheels
- Night Watch
- Residential Care Homes
- Intermediate/Rehabilitation Care (in conjunction with the PCT)

#### Southampton City Primary Care Trust

- Primary Care Services via GP Surgeries and Health Clinics
- Community Nursing – day, twilight and night nursing care
- Aid and Equipment Centre at the Royal South Hants Hospital
- Rehabilitation beds at Western and Moorgreen Hospitals
- Day Hospitals
- Community Health Facilitators
- Wheelchair Service
- Occupational Therapy
- Physiotherapy
- Podiatry

#### West Hampshire NHS Trust

- Community Mental Health Nursing Service
- Occupational Therapy
- Physiotherapy
- Day Hospitals

#### Joint Social Services and Primary Care Trust

- Joint Equipment Store
- Rehabilitation beds in residential care

#### Independent Sector

- Home Care
- Welcome Home
- Extended Welcome Home Service
- Day Watch
- Day Care
- Luncheon Clubs

### Organisations providing housing related advice and information

- Housing Services
- Housing Renewal and Grants
- Housing Advice
- Housing and Council Tax Benefit
- Benefits Agency
- Neighbourhood Advice Centre
- Southampton City Council City Information  
023 8083 3333 [City.information@southampton.gov.uk](mailto:City.information@southampton.gov.uk)
- Citizens Advice Bureau  
3 Kings Park Road, Southampton  
023 8022 1406/023 8033 3868; Text-phone 023 8023 7623
- Southampton Staying Put, 45 – 47 High Street West End,  
Southampton. SO30 3DQ  
023 8047 1777
- Age Concern (Southampton)  
1 Saxon Gate, Back of the Walls, Southampton. SO14 3HA  
023 8036 8636
- Southampton Environment Centre, Solent Energy Centre, Ground Floor  
14-15 Brunswick Place. Southampton. SO15 2AQ  
023 8033 6172
- Southampton Centre for Independent Living  
6, Northlands Road, Southampton. SO15 2LF  
023 8033 0982; Text-phone 023 8063 5167
- Southampton Carers Association  
31 Eastgate Street, Southampton. SO14 3HB  
023 8033 8804
- Disability Advice and Information Network (DAIN)  
Sembal House, Handel Terrace, Southampton. SO15 2FH  
023 8033 5473; Text-phone 023 8033 1255

- Choices Advocacy  
53a Millbrook Road, Southampton. SO15 1NH  
Older People 023 8063 3737; Learning Disabilities 023 8033 7735
- Advocacy Matters  
Bedford House, Amoy Street, Southampton. SO15 2DR  
023 8022 3845
- MIND Southampton  
Bedford House, Amoy Street, Southampton. SO15 2DR  
023 8033 4977
- Access to Communication  
023 8024 1300
- Mencap  
187a Portswood Road, Southampton, SO17 2NF  
023 8058 4088

**Sheltered Housing Providers in Southampton (in addition to the City Council)**

Abbeyfield (Hampshire) Society 15 Cobbett Road Bitterne Park Southampton. SO18 1HJ	Raglan Housing Association 22-24 Oxford Road Bournemouth Dorset. BH8 8EZ
Anchor Trust Chancery House St Nicholas Way Sutton. Surrey SM1 1JB	Robert Thorner Housing Ass. & Thorner Homes 86, Thorners Court Henstead Road Southampton SO15 2GU
Downland Housing Society/Downland Retirement Homes Downland House 51 Fishbourne Road Chichester West Sussex. PO19 3HZ	Rosebrook Housing Association Denny House 70 Lower Northam Road Hedge End Southampton. SO30 4FQ
English Churches Housing Group John Childs Close Newbury Berkshire RG14 7PZ	Shaftesbury Housing Ass. 87 East Street Epson Surrey KT17 1DT
Hanover Housing Association Gateway House Cornbrash Park Bumpers Way Chippenham Wiltshire. SN14 6RA	Swaythling Housing Society Herbert Collins House Wide Lane Swaythling Southampton. SO18 2HR
Housing 21 Longwood House Love Lane Cirencester Gloucestershire GL7 1YG	Western Challenge Housing Ass 20 Pylewell Road Hythe Southampton. SO45 6AR
James Butcher Housing Ass. Regional South Coast Office Hooper Court 4 The Hard Portsmouth	Hyde Housing Ass. 7 The Carronades New Road Southampton SO14 0AA
Peverel Management Services 11 Queensway NEW MILTON BH25 5NR	Retirement Care Group Lincoln Court Sharon Road West End SO30 3RF

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- “The City Council’s Housing Strategy”
- “The City Council’s Housing Revenue Account Business Plan
- “The Primary Care Trust and City Council’s Health Improvement Programme”
- “The Primary Care Trust’s Health, Social & Well-Being Strategy for Older People”
- “The City Council’s Supporting People Strategy” for 2003/2004
- “The City Council’s Community Care Plan
- “The City Council’s Medium Term Plan”
- The City Council’s Business Planning

### Processes for Adaptations

Regardless of tenure, all referrals and/or requests for adaptations are made to a Social Services Occupational Therapist (OT) who will complete an assessment of the person's needs and then forward the recommendation and priority award of the adaptation required to the appropriate team,

#### For Owner-Occupiers and those renting in the Private Sector

1. If adaptations are recommended the applicant may be eligible to apply for a Disabled Facilities Grant. This is a grant of up to £20,000 to assist in paying for the adaptation.
2. The recommendation from the Occupational Therapist is sent to the Housing Renewal and Grants Team who will place the enquiry on their waiting list.
3. The enquiry will be allocated to a Grants Officer who will contact the client to arrange a visit to carry out a survey of the property and clarify the adaptations needed. The OT is able to act as a consultant in advising the client on the adaptations, the Grants officer will advise the client on structural or technical matters.
4. The Grants Officer ensures that the property is suitable for the adaptations requested and will send the client;
  - A letter confirming eligibility for a grant
  - An application form
  - A list of eligible works
5. For the grant application to be considered the following details must be returned to the Grants Officer;
  - A completed grant application form
  - Proof of income and savings
  - Proof of title to property (or permission from the landlord if renting)
  - Two builder's estimates for the proposed works
  - Building regulation and planning permission, if required
6. The client will be told if the application has been approved
7. Interim payments can be made during building work. Final or complete payment will only be made when the Grants Officer is satisfied the completed work meets individual's needs

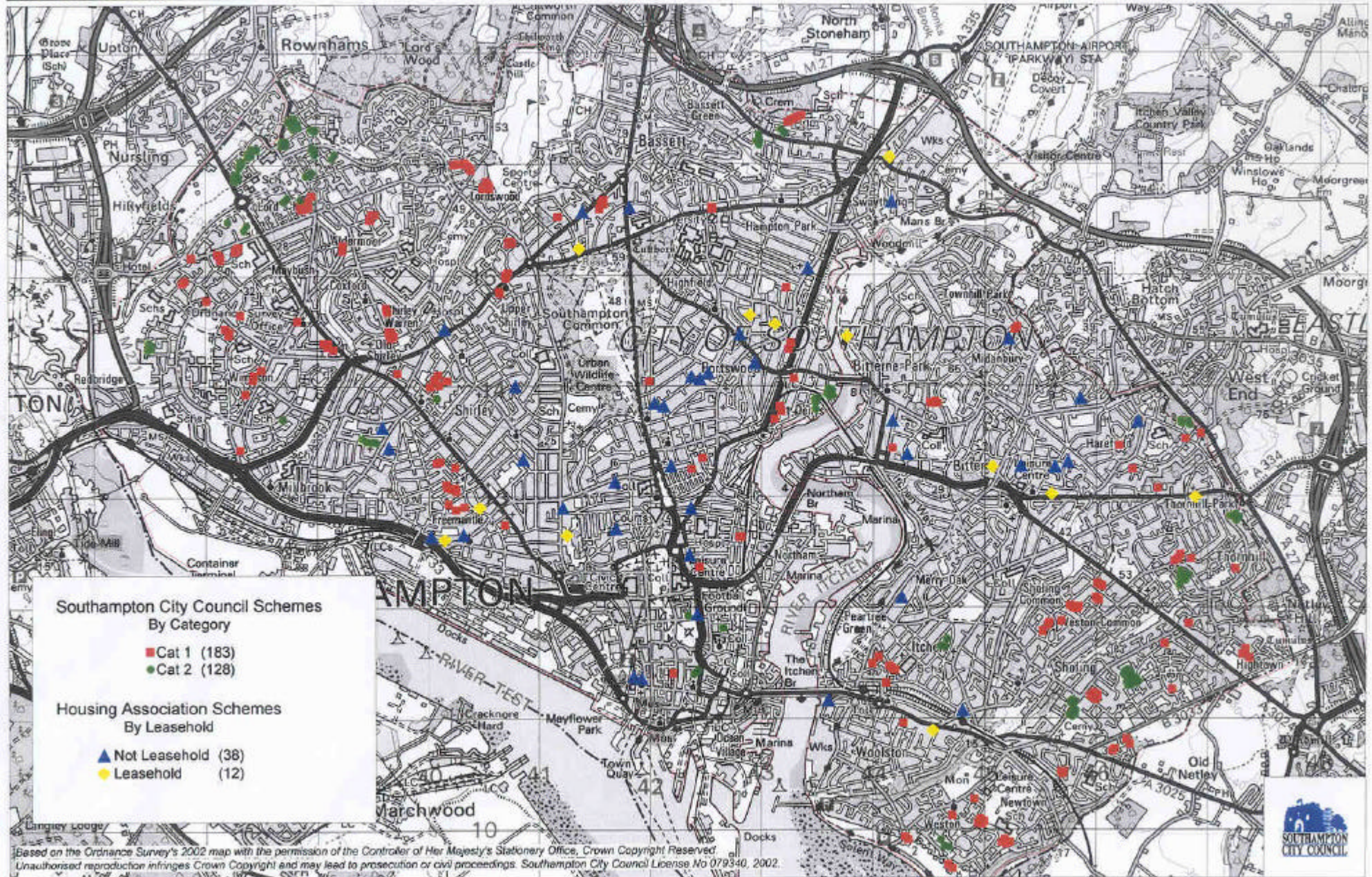
#### For Council Tenants

1. The recommendation from the Occupational Therapist is sent to the Adaptations Team within Programmed Maintenance in Housing Services.

2. Where a recommendation is made for a major/large adaptation and the tenant is under-occupying a property, the Adaptations Team will write to the tenant asking if they would consider moving to another, more suitable property. The letter will also provide details of incentives to encourage them to move to a smaller property.
3. If the client does not wish to move their name will be placed on a priority list for the adaptation to be completed and they will be advised of the approximate waiting time for a visit by a Council Surveyor.
4. If the adaptation is relatively simple, such as installing grab-rails or a door intercom, an order is placed for the work to go ahead.
5. The surveyor will survey the property, clarify the adaptations needed and confirm they can be made to the property.
5. The surveyor will prepare the plans and send them to the OT who will visit the client to discuss them. The OT is able to act as a consultant in advising the client on the adaptations, the surveyor will advise the client on structural or technical matters.
6. The client will agree and sign the plans and the surveyor will then arrange for planning permission, if needed, and the builders to carry out the work.
7. The client will be advised of the start date for the work.
8. If a major adaptation has been completed for a council tenant and they choose to apply to transfer to another council property the council may refuse to carry out further adaptations or adapt the new home unless the circumstances of the client have changed and the facilities are no longer suitable.

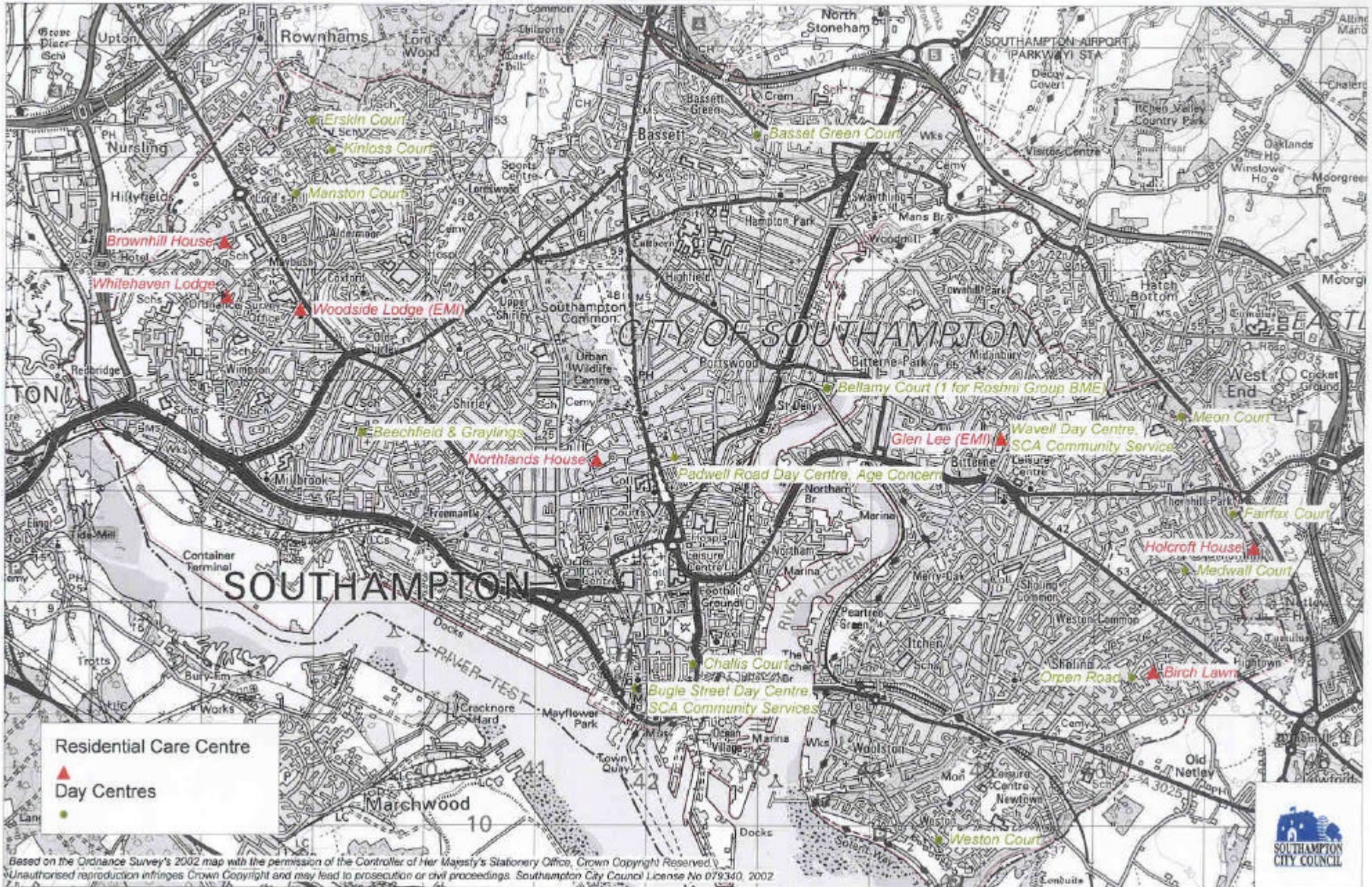


## Sheltered Housing Provision for Older Persons - Schemes



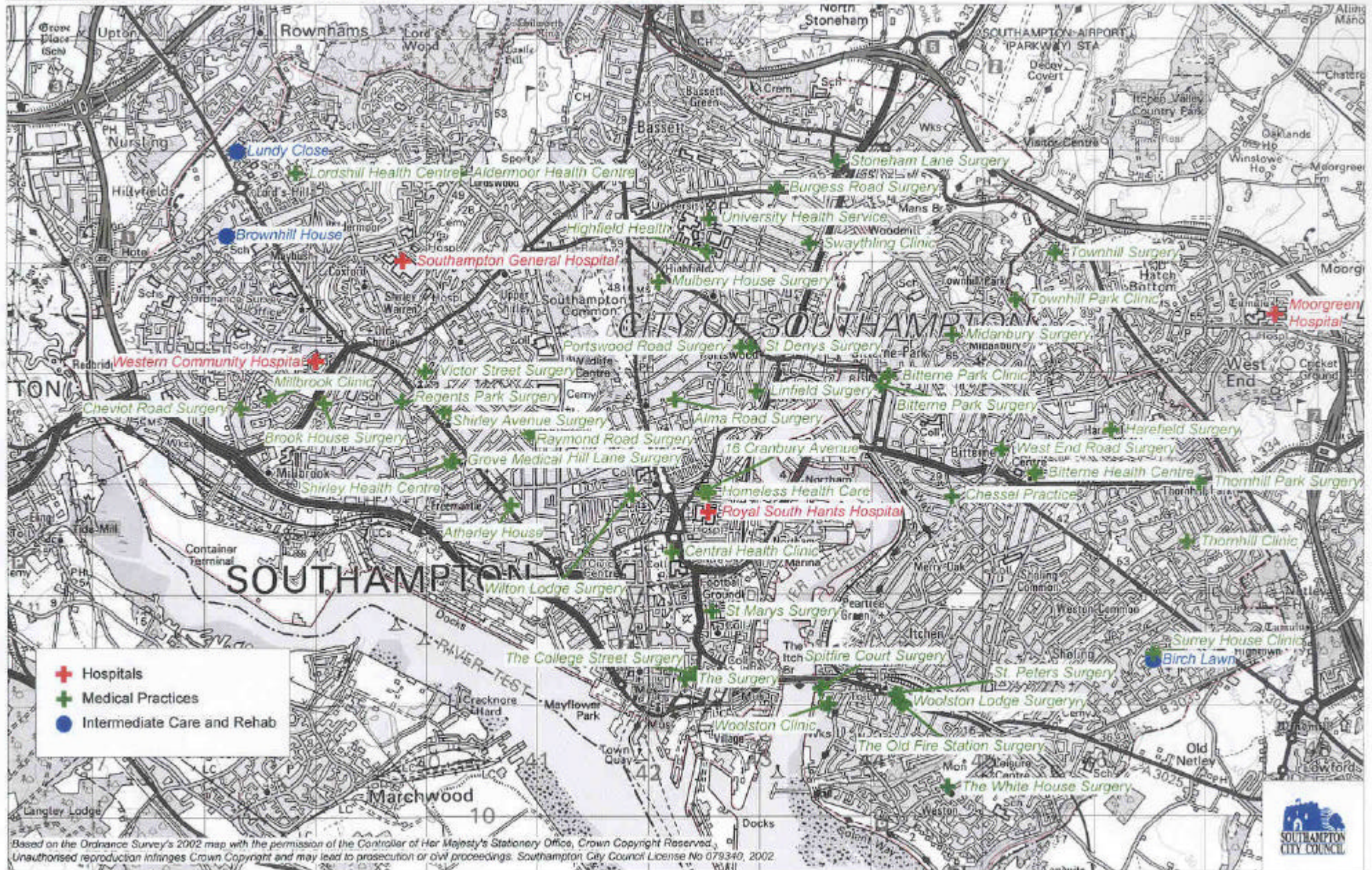


## Social Services Provision for Older Persons - Day Centres & Residential Care Centres





## Health Services for Older Persons - Hospitals, Medical Practices, Intermediate Care and Rehab



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