

Solihull MBC

**INDEPENDENT LIVING AND EXTRA CARE
HOUSING STRATEGY
[ILEX]**

JULY 2013

FOREWORD

This is Solihull's first Independent Living and Extra Care housing strategy. It sets out how the Council will help older people, adults with learning disabilities, mental health needs and physical and sensory disabilities, to live with the maximum possible degree of independence.

People will be helped to continue to live in their current homes where this is what they want and are able to do, or through moving to alternative accommodation that is suitable for their needs and which offers independence, with support if required.

This will require the provision of readily accessible and reliable advice to people on their options and choices, an expansion of available practical help for people to overcome problems with their homes and a greater supply and variety of homes to which people can move to in order to continue to live independently. There is a need for a wide range of provision from individual homes through to purpose built Housing with Care schemes.

This is a priority within Solihull's draft Local Plan, which will influence the number and type of new homes in the coming years and will be a key theme in the forthcoming Market Position Statement which will set out to influence future accommodation and service provision across the whole social care market.

Through strong partnerships, leveraging – in new forms of funding where possible, and through maximising the potential of its land and buildings, the Council will work to expand the availability of housing which meets the changing needs of Solihull's population.

The Council accepts that there will be a continuing need for good quality residential care, but it wants to reduce the occasions when people or their families feel that they need to go into care because it is felt that there is no alternative.

There has been extensive consultation on this strategy through which the Council has gained support for the approach set out here, together with ideas and commitment from respondents on how we can work together to deliver our objectives. This strategy statement and its accompanying implementation plan incorporate the key responses.

The strategy has also undergone a rigorous Fair Treatment Assessment to ensure that we make the most of the opportunity to make a positive contribution to meeting the diverse needs of Solihull's residents and promoting equality.

The strategy comes at a time of significant organisational change in Solihull, with the Local Plan approaching adoption, the creation of an integrated commissioning function, a new pathway to adult social care and the commitment of local organisations to the integration of care and health functions. These, together with the new approach to user and carer engagement through the Making it Real programme, provide the basis for the implementation and further development of the themes contained in this strategy.

CONTENTS

Section 1 Introduction

- 1.1. Scope and purpose of the strategy
- 1.2. Format

Section 2 Context

- 2.1 Strategy and policy
- 2.2 Demographics
- 2.3 Health Indicators
- 2.4 Economy
- 2.5 Housing Market
- 2.6 Housing Conditions

Section 3 Strategy

- 3.1 Objectives
- 3.2 Helping people to live independently in their current home
- 3.3 Helping people to maintain independence by moving to another home
- 3.4 Increasing the amount and range of suitable accommodation

Section 4 Resources

- 4.1 Public funding
- 4.2 Funding for home adaptations and improvements
- 4.3 Capital subsidy for new development
- 4.4 Revenue funding for support services
- 4.5 End – user costs

Section 5 Delivery

- 5.1 Commissioning arrangements
- 5.2 Partnerships
- 5.3 Equality and diversity

Annex A – strategic framework

Annex B – Schedule of Priority Accommodation Needs

Annex C – short –term delivery plan

1. INTRODUCTION

1.1 Scope and Purpose of the Strategy

This strategy sets out a vision for how the provision of housing and housing - related support services for vulnerable adults should develop within Solihull.

It is relevant to people who are over retirement age, people aged 18 and over who are vulnerable due to learning disabilities, mental health needs and physical or sensory disabilities, and to some people aged under 18 where transition into adulthood is a key issue.

The strategy identifies the Council's current knowledge of unmet need, for each of these groups and known gaps in current provision in order to:

- inform the commissioning and provision of support services to enable people to continue living in their own homes
- inform decisions on investing in the provision of appropriate accommodation, for vulnerable people who need or wish to move
- inform the way that available resources are applied to pursue priorities for meeting demand

It is the aim of the Council to bring together organisations in all sectors which can combine to improve the range of local services on offer to vulnerable people and to best meet their needs and aspirations within the scope of the available resources, both private and public.

1.2 Format of the Strategy

This document sets out the context for the strategy, its objectives and main priorities. It is supported by a schedule of priority accommodation needs (annex A) and by a short – term implementation plan (annex B).

A separate technical document, which can be accessed at [weblink to be supplied after approval], sets out more detailed information on current provision, needs analysis and future requirements for the four key client groups (people with learning disabilities, people with mental health needs, older people and people with physical and sensory disabilities)

Summary of the top – level priorities.

Supporting people in their current home	Enabling people to move to another home
<p>Ensure people can access information, advice and assistance</p> <ul style="list-style-type: none"> • Implementation of the Single Point of Access and Referral (SPAR) from April 2014 • introduction from April 2014 of a web portal for information and guidance • Development of user and carer engagement through the Think Local Act Personal ‘Making it Real’ programme and the application of the Making Every Contact Count approach 	<p>Ensure that social housing is accessible</p> <ul style="list-style-type: none"> • Protection for older and vulnerable in revision of council housing allocations and tenancies • Support package for new council tenants from 2014, to include links to social care • Added priority and cash incentives to encourage downsizing to release family homes • Assistance for vulnerable tenants impacted by welfare reforms
<p>Provide a rapid response to help people with urgent housing problems</p> <ul style="list-style-type: none"> • Maintain effective homelessness prevention service • Remedy reported ‘Category 1 Hazards’ in private housing where occupant is vulnerable • Fast-tracked repairs and minor home adaptations by Solihull Independent Living • Housing assistance as part of new out-of-hospital pathway • Heating advice and emergency assistance through Winter Warmth Campaign 	<p>New independent living options</p> <ul style="list-style-type: none"> • Promote new development on Local Plan and other sites • Proactive approach to market engagement • Produce Market Position statement • Plan and support a greater variety of housing provision, including Extra Care Housing
<p>Help people remain independent</p> <ul style="list-style-type: none"> • Maintain the provision of home adaptations • Maintain handyperson scheme • Transfer gardening scheme to third sector • Secure a reliable and affordable source of loan finance which homeowners can access to part-fund home improvements • Increase the use of assistive technology and telecare to promote independence 	<p>Remodelling accommodation</p> <ul style="list-style-type: none"> • Replace all residential and non-residential care provision that does not meet modern quality and regulatory standards with fit for purpose accommodation to meet identified need within the next 3 years • Review the longer-term viability of existing sheltered and specialised older people’s accommodation and redevelop / remodel to provide services

2. CONTEXT

2.1 Strategy and Policy

This strategy reflects national policy guidance and draws together and builds on local strategies which are produced by the Council and partner agencies across social care, health, housing and planning.

It is shaped by approved strategies of the Council and partners and in turn seeks to influence the development of policy, commissioning and service delivery. It does not introduce new policy or provision but seeks to add value by bringing together separate working areas (notably planning and housing policy with commissioning and social care) to provide a firmer basis for joint – working on developing policy, commissioning new developments and service provision. The main influences and relationships are set out Annex A.

The strategy supports the vision for care and support in Solihull, *‘where all partners, including local people, work together to promote wellbeing, independence, dignity and choice’*.

It is based on the objectives of **Putting Solihull People First**, which is one of the ‘Top 6’ priorities for the Council through which it is developing a new care and support system based on a new Care Pathway. The pathway will map out a new process for providing people with adult social care services, from their first request for support to receiving the advice or care that they need.

The aim is to provide people with a single point of contact and improve the management of their care to help them maintain as much control, choice and independence as possible. The new pathway will introduce significant change to Solihull’s traditional model of care which has tended to create over-reliance on residential care, nursing homes and day care facilities.

The strategy aims to assist in finding the right balance between independent living and residential care. All of the actions contained within it are aimed at encouraging and helping people to maintain or regain wellbeing and independence, avoiding or delaying the need for more intensive care and support and minimising the need for people to enter institutional care.

Fundamentals of Putting Solihull People First

- **Universal services:** ensuring that anyone who requires care and support can find the services they need in their community.
- **Preventative services:** helping people to maintain their health and well being for longer.
- **Choice and control:** giving people as much control as they want over decisions which affect their care.
- **Building social capital:** recognising that individuals can receive care and support from their friends, families, neighbours and community groups.

Solihull has modernised the local arrangements for social care and health through the transfer of public health functions to the Council and the creation of a Health and Wellbeing Board, the creation of an integrated commissioning function, the reorganisation of Adult

Social Care and the development of a care pathway. Each of these contribute to a firm basis for this strategy

The Council and partner agencies are now working on the further integration of social care and health services (through and Integrated Care Plan) and on increasing user and carer involvement in the co-production of services (through the Making it Real programme). These developments will provide new opportunities for making housing strategy and policy and the commissioning of new accommodation and services an integral part of this joint approach.

2.2 Demographics¹

The population of Solihull is 206,700² having increased by 3.6% (7,100 persons) since the 2001 Census. This compares with population increases of 7.2% in England and 6.1% in the West Midlands over the same period.

The 'headline' trend which will have a particular influence on the commissioning of services in the future is the projected increase in the proportion of the population and the proportion of the Borough's households which consist of people aged over 65, and particularly those who are 85 and over.

The 85+ age group will increase by 39%, with an additional 2,200 residents projected to be in this age band by 2021. This is particularly significant in light of the fact that 20% of the 80+ age group are likely to suffer with dementia, learning disability and age –related health issues.

There were 86,056 households in Solihull as at the 2011 Census (an increase of 6.3% or 5,126 households since the 2001 Census). 29% of these were single person households and 14% were made up of people aged 65 or over living alone³. According to the ONS the number of households in Solihull is expected to increase to just under 100,000 by 2033 with households headed by a person aged 65 or over due to make up 36% of this total⁴.

The ethnicity of Solihull's population is changing with a rapid growth of the Black, Asian and Minority Ethnic (BAME) population, albeit from a low base. The number of people from a BAME group increased by 98% between 2001 and mid-2009, compared with overall population growth of 3%. The BAME population in Solihull is proportionally much higher in younger groups⁵.

2.3 Health and Social Isolation

Support services and accommodation will need to be commissioned to meet a growing and complex level of need, including significant increases in the proportion of the population aged 85 and the likely increase in dementia, other mental health issues, learning disabilities and physical disabilities and long-term limiting illnesses associated with these population changes.

Average life expectancy across Solihull is 82.5 years compared to the England average of 81.2 years. However life expectancy for people living in the more affluent parts of Solihull is significantly higher than for those people living in the most deprived wards in North Solihull

¹ All population data is taken from the ONS mid-year population estimates, 2011. published 25/09/12

² ONS, Census 2011

³ ONS, Census 2011

⁴ Taken from Solihull People & Place, prepared by Solihull Observatory, December 12

⁵ Taken from Solihull People & Place, prepared by Solihull Observatory, December 12

where the prevalence rates for longer term conditions, the incidence of premature deaths and unhealthy lifestyle behaviours are all higher than the national averages.⁶

Nationally, around 2% of the population have a learning disability (4,100 people in Solihull) and approximately 0.4% of the population are classed as having a severe learning disability (800 people in Solihull). The number of people aged 65 and over predicted to have a learning disability is set to increase by 15% up to 2020 and as people with learning disabilities grow older they are likely to have a range of other health needs, such as dementia, at an earlier age⁷.

It is estimated that in Solihull around 10,000 people will have a moderate physical or sensory disability and 3000 a serious disability. The incidence of disability is predicted to increase gradually by between 3 - 4% up to 2020, with the increase concentrated amongst older people⁸.

Prevalence of mental illness in Solihull reflects the national picture of one in six people being affected at some point during their life. All conditions are predicted to increase by over the period to 2020 (an average increase of about 1.5%)⁹. Mental health conditions are almost three times more common in the wards in the North of Solihull, suggesting an association with deprivation.

Increasing life expectancy is likely to bring a significant increase in age-related health issues. The period of time that people are likely to spend in a state of chronic ill health and disability in later life will increase. There will also be an increase in individuals who live with more than one long-term condition.

The total population aged 65 and over with a long term limiting illness is projected to increase by 15.7% to 21,421 people in 2020 and the largest overall increase will be amongst people aged 85 and over¹⁰.

The number of people with dementia will rise significantly with the ageing population, and it is recognised that new approaches are required around early diagnosis, increasing awareness and tackling stigma and discrimination, to support the ambition of Solihull being a 'dementia-friendly' community.

The draft joint Birmingham and Solihull dementia strategy '*Give Me Something to Believe In*' contains objectives which are consistent with this strategy, including supporting people to live at home as long as possible, improving information and advice. There is a need to 'mainstream' policy on dementia and the Council will produce a Commissioning Action Plan setting out how the joint strategy will be implemented.

Social isolation and loneliness are also emergent policy concerns which local authorities and their partners will need to measure and address. There are clear issues for people's physical and mental health and their ability to live independently with a reasonable quality of life.

In seeking to extend people's independence care must be taken to ensure that people do not become isolated with an increased risk of loneliness and harm. In implementing this strategy, commissioners and providers will need to consider this both in respect of support

⁶ Solihull JSNA Refresh, 2012

⁷ DOH Projecting Older People Population Information System (POPPI) (Version 8.0 – updated 25/02/13)

⁸ DOH Projecting Adult Needs & Service Information (Version 7.0 – updated 25.02.13) & DOH Projecting Older People Population Information System (POPPI) (Version 8.0 – updated 25/02/13)

⁹ DOH Projecting Adult Needs & Service Information (Version 7.0 – updated 25.02.13)

¹⁰ DOH Projecting Older people Population Information System (POPPI) Version 7, updated 15th June 12

to people in their homes and in the provision of additional independent living options. This will be an area of work to be undertaken jointly with Adult Safeguarding.

2.4 Economy

Solihull has a relatively buoyant local economy. Its location and high concentration of businesses in growth sectors should mean that recovery from the recession is relatively early and strong.¹¹

However the economic position and prospects of Solihull residents are variable. The Local Economic Assessment (LEA) for Solihull identifies the need for continued intervention to tackle 'worklessness', low skills and deprivation in Solihull – particularly in the 'North Solihull' regeneration area, but also in other locations where 'worklessness' rates are high and amongst groups who appear to be particularly disadvantaged economically; residents with a disability in Solihull experience unemployment rates higher than the local, regional and national averages¹².

There is a very wide range of household wealth in Solihull, with a clear spatial difference between the North Solihull regeneration area, which includes three wards which are multiply – deprived, and the rest of the Borough. However, there are households outside the regeneration area which have limited income and wealth and many of these are headed by older or disabled people.

The overall economic position of older households will be influenced by the variation in pension provision. ONS Pension Trends 2010 show that only 43 per cent of men and 37 per cent of women have a company or personal pension, so the majority of older people must rely on the state pension. As a result there is a significant income divide amongst those aged 65 and over. In addition relying on supplementing pensions with savings has become less feasible due to low interest rates.

These factors have led to an increasing number of older people facing economic difficulty. The future prospects are no better given the withdrawal of final-salary pensions and the increase in personal debt which many people carry into retirement.

2.5 Housing Market

Solihull is a popular place to live but it has a housing market which is often difficult to access, with high levels of owner occupied and often high – value homes but a relatively small social sector and little in the way of intermediate tenure housing.

There is a strong demand for housing in the Borough. This is reflected in higher than average house prices and rapidly increasing demand for social housing. There is a severe shortage of homes to buy and to rent at prices which are affordable to households with average incomes and below and there is a lack of effective housing choice for many established households which would wish to move.

The majority (74%) of homes in the Borough are owner occupied and 51% of these are owned outright (2011 Census). This is a higher proportion than for the region and country as a whole and reflects the older age profile of the Borough and the high levels of prosperity in some parts of Solihull. However, many of these owners may be 'asset rich, cash poor'.

There are three broad housing market areas in Solihull, each being part of a larger market which extends into neighbouring districts. These are the North Solihull regeneration area

¹¹ Solihull Local Economic Assessment (LEA)

¹² Solihull Local Economic Assessment (LEA)

(Chelmsley Wood, Smith's Wood, Kingshurst & Fordbridge), the urban west (Solihull, Shirley, Olton, Elmdon) and the rural fringe (Knowle, Balsall Common, Meriden). These areas have significant housing market differences including tenure profile, house prices, housing type and age and condition of stock.

The nature of the owner – occupied sector varies spatially with generally less home ownership and lower value homes in the North Solihull regeneration area. However household incomes tend to be lower in this part of the Borough so homes are not significantly more affordable to local people.

There has been a long term decline in the size of the social rented sector which now provides just under 13,000 homes (15% of the housing stock), of which 10,096 (79%) are owned by the local authority and 2,752 (21%) by housing associations. Of the homes in Council ownership 49% are flats and most (72%) are located in the North Solihull regeneration area.

The private rented sector is expanding, and now accounts for 9.9% of all homes in the Borough. Rent levels are generally higher than elsewhere in the West Midland Metropolitan area and market demand is strong.

The Council's Strategic Housing Market Assessment (SHMA) found that households with one or more members with a special need were more likely to be living in homes that were unsuitable for their needs, and less likely to be able to meet their needs in the housing market.

The Council accepts that there is a shortage of independent living options and this is something that it is seeking to address through its Local Plan, its Housing Strategy and through this strategy.

2.6 Housing Conditions

Whilst the condition of the Borough's housing is generally good, a sizeable proportion in the private sector falls short of acceptable standards in terms of fitness, repair and suitability, with an estimated 25% of private homes are likely to be in some disrepair. There are concerns on the increasing reports of poor conditions in the private rented sector and amongst vulnerable home owners. Known cases are responded to by the Council's Public Protection service, with the remediation of 'Category 1' health and safety hazards being the top priority.

Many homes in Solihull do not reach adequate standards of energy efficiency and where the occupant is on a low income this can be a cause of fuel poverty and can result in ill-health or even cold-related 'excess' winter mortality.

Many residents have problems with their home as a result of age, disability or long term limiting illness impacting on their ability (both physically and financially) to undertake works to keep their homes in satisfactory condition. Solihull's home energy efficiency and affordable warmth strategy, *'Keeping out the Cold'* aims to target advice and assistance on the most vulnerable people in the least fuel – efficient homes, including year-round advice and a targeted Winter Warmth Campaign.

The need for investment in advice and assistance to home –owners to enable them to remain in decent homes and to adapt their home to changing needs will increase as the elderly population increases and as the proportion of the population with disabilities rises.

3. STRATEGY

3.1 Objectives of the Strategy

There are two main objectives:

- **to enable older and vulnerable people to continue to live independently in their own homes through the provision of advice and support**
- **to encourage provision of a wider range of suitable and affordable independent accommodation for people who need or choose to move.**

In setting these objectives the Council is not denying the continuing need for good quality residential and nursing care. This remains an important source of accommodation and support for some people with high –level needs.

The Council wants to see an appropriate balance between this and more independent options with the presumption that people should only go into residential or nursing care where no feasible independent options are available.

The strategy recognises that there is a continuum of dependency, from those who require only advice or simple assistance through to those who require substantial support to be able to live independently. The Council therefore seeks to support the provision of a range of services and accommodation choices which are suitable to meet the diverse needs and aspirations of customers.

3.2 Helping People to Live Independently in their Current Home

The first objective of this strategy is to support people to remain independent and able to continue to live in the home that they currently live in wherever possible and where this is what they choose.

This will minimise the occasions when people feel - or are advised - that they have to move when in reality a reasonable level of investment in their property or personal support can enable them to remain at home. This is not only in line with the wishes of most people but is also usually the more cost effective solution.

The housing – related support services which are included in this strategy will therefore provide preventative support to those with lower needs thus reducing higher dependency in the future. The aim is to reduce reliance on long –term support particularly where this would involve a move from independent living to residential care.

In commissioning and providing these services and thereby enabling people to remain independent for longer, every effort should be made to avoid an increase in social isolation, loneliness or risk of harm amongst vulnerable people.

The housing – related services which are currently offered by the Council, Solihull Independent Living (SiL) and other partner agencies fit within this framework as shown below.

3.2.1 Universal Services

The Council and partner organisations in the statutory and voluntary sectors will continue to improve and extend ‘**universal services**’ which provide good information and sound advice

to people (and those who help them) so that they can understand what assistance is on offer and what their choices are within their available resources. These services will provide people with the ability to make informed choices and determine their own affairs. In many cases they will be all that a customer needs.

Housing – related services	providers
Information and advice on: <ul style="list-style-type: none"> • housing and other personal debt • home repairs and adaptations • assistive technology/ telecare including demonstration facilities • keeping warm and staying safe • Safe and Sound service • tenants’ rights • housing options • benefits and financial advice • homelessness prevention • finding an alternative home 	www.solihull.gov.uk Solihull Connect, Solihull Independent Living (SiL) Social Care One Front Door Age UK Linking People Service external advice agencies

There are several agencies which provide information and advice, notably the Council, Age UK’s Linking People service, Solihull Independent Living, Solihull Community Housing, Citizens Advice and other partners. There is no shortage of information and advice, but to enable the objective to be achieved, agencies need to

- improve the coverage, quality and accessibility of information and advice which can inform consumer choice
- improve the connectivity between various sources of information and advice to ensure that consumers get the same messages regardless of source.
- to ensure that all advice – giving agencies are provided with accurate and up-to-date information by the Council so that they can inform customers accordingly
- consider how they can identify and respond to apparent social isolation, loneliness and risk of harm amongst service users

The service model toward which Solihull is working is one in which all service users will go through a single point of contact and referral (SPAR), with Solihull Connect being the 1st Tier, and staff in Adult Social Care and allied professionals who will provide specialist support will be 2nd Tier. It is intended that this will become a multi-agency hub.

There will be a web portal and comprehensive directory of care and support available to all residents to assist them to make informed choices about how to meet their care and support needs; this will also meet the needs of those who are able to fund their own support but need advice and assistance to identify what is available.

3.2.2 Rapid Response

It is important that reliable help is available at short notice to people who are experiencing acute problems which may prevent them from living safely and securely in their homes.

Assisting people to overcome small problems at an early enough stage will often prevent a crisis developing and ensure that people are able to manage independently for longer.

Housing – related services	providers
<ul style="list-style-type: none"> • Homelessness prevention • Emergency rehousing if homeless • Emergency repairs 	SCH SiL Social Care One Front Door

Housing – related services	providers
<ul style="list-style-type: none"> • Fast-tracked home adaptations and minor works • assistive technology/ telecare • Prioritised response to ASB/ harassment • Provision of emergency heating • Toughening home security 	Homecheck scheme Third sector

The Council and partner agencies provide a raft of services which can help people quickly and decisively, including:

- immediate advice and assistance to people who are threatened with homelessness or who are homeless, in priority need (for example older people and those with disabilities) and require help to secure accommodation
- quick help for people who feel that they cannot stay in their home due to serious disrepair, heating failure or anti social behaviour or harassment
- quick repairs and minor home adaptations for people who have a difficulty in living in their home, particularly where this facilitates discharge from hospital or reduces avoidable admissions
- installation of home security measures and preventative work to reduce hazards in the home which may result in falls or other problems

Examples of service development include:

- the expansion of advice services which prevent homelessness by Solihull Community Housing, including a money advice service which assists people who are at risk of losing their home through debt
- the development of ‘fast – track’ delivery of repairs and minor home adaptations by Solihull Independent Living (SiL) to help as many people as possible as quickly as possible.
- an annual Winter Warmth campaign run by the Council in partnership with Age UK which provides advice to help people keep warm affordably together with emergency assistance for those at risk

3.2.3 Promoting Independence

The proposed new model of care will create a Promoting Independence Team from the current Reablement and Occupational Therapy teams. Housing services will link with this, for example through provision of home repairs and adaptations by Solihull Independent Living.

There is inevitably some overlap with ‘rapid response’ services, particularly regarding assistance for home improvements and adaptations, but as the strategy is to provide for a continuum of needs, this is neither avoidable or problematic.

Since its inception in 2010, Solihull Independent Living (SiL) has worked with Occupational Therapy service (first as part of Solihull Care Trust and now part of Adult Social Care) to provide adaptations, often with the aid of a Disabled Facilities Grant (DFG). SiL provides a range of services which can play a part in reablement and promoting independence. This may involve assistance referred to above under ‘rapid response’ or may involve larger scale adaptations to the applicant’s home.

Housing – related services	providers
<ul style="list-style-type: none"> • Home adaptation (requiring OT assessment), major works • Loans for home renovation • Floating support (time – limited) provided through supporting people funded services to a range of vulnerable client groups • Assistive technology & telecare 	SCH SIL Registered Providers Third Sector

There are various housing ‘floating support’ schemes provided by SCH, housing associations and other voluntary and community sector organisations which meet the support needs of a range of people for as long as they are required, and once the recipient can do without the support it ‘floats’ off to another customer, with them remaining in the property.

These schemes meet a wide range of needs, many of which are beyond the scope of this strategy. However at May 2012 there were 79 people with learning disabilities, 42 people with mental health needs and 14 people with physical or sensory disabilities benefitting from these services.

3.2.4 Longer Term Support (in the customer’s current home)

Housing – related services	providers
<ul style="list-style-type: none"> • Safe and Sound • Assistive technology/telecare • Keyring [for people with learning disabilities] • Housing With Care 	SCH Housing Associations

Approximately 2,500 older people and 120 vulnerable people under retirement age currently live in some form of housing which was designed or converted for occupation by older people or others with disabilities. It ranges from bungalows and flats at social rents provided by SCH on behalf of the Council, through to modern Housing with Care schemes provided by housing associations which cater for a range of dependencies

Much of this accommodation will have some type of support provided, including assistive technology/telecare, for example fall detectors and door contact sensors.

People who are eligible for adult social care services following reablement have the option to include assistive technology and telecare within their support plan alongside other social care services, purchased from their personal budget.

Many older and other vulnerable people will live in homes that have not been designed or adapted to their current needs, so it is important that services can provide long-term support in a wide range of home settings. This will be an important aspect of the implementation of the Assistive Technology & Telecare Strategy.

One source of low-level support which is currently provided to over 1,600 residents of the Borough by Solihull Community Housing is ‘Safe and Sound’. Customers are vulnerable tenants and self-paying owner occupiers who receive regular personal contact, an emergency alarm and on call service and an annual home check. The level of service, and the charge to users, is variable according to need. The service can be provided to customers in their existing homes and is not dependent on a specific property type or location.

3.3 Helping People to Maintain Independence by Moving to Another Home

Where it is not possible or desirable for someone to continue to live in their current home, or where they chose to move, they will need to find a suitable alternative home in which they can maintain their independence, with or without additional support.

Solihull's housing market is predominately private sector, with 63,559 (74%) homes in the owner occupation. The increase in this tenure has now halted, and the private rented sector has grown to 8,502 (10%).

Housing Options	Providers
Rehousing in the social sector (including Supported / sheltered housing, Extra care housing)	SCH, housing associations, charitable trusts
Private sector letting	Lettings agents, individual private landlords and companies
Shared ownership / shared equity	Private developers, housing associations
Homes for sale at market price	Estate agents, Private developers

Whilst some home owners, particularly those who own outright, may be able to afford to buy a suitable property, in many cases people will require some form of 'affordable' housing to rent, buy or part-buy, which is at less than market price.

Solihull's social housing sector consisted of 13,000 homes at April 2013. Of these almost 2,500 homes are designed or designated for people with age or disability related needs. Homes for social rent are provided by the Council and housing associations and are usually allocated through the Solihull Home Options scheme, which enables households who are admitted to the Council's housing register to bid for available properties. Some charitable organizations let homes independently.

Solihull Home Options operates on the basis of priority bands, with the top band including people with an urgent need to move for health reasons. Priority is based mainly on housing need but the scheme also recognises local connection and seeks to give priority to people looking to downsize so that more family –sized accommodation can be freed up for reletting.

An individual's prospects for rehousing will depend on the extent of their assessed need for housing (including available space and its suitability, medical and social factors), the availability of homes of a suitable type and in an acceptable location and the applicant's readiness to bid for properties that become available.

As there is an acute shortage of affordable housing in Solihull there can be long waiting times for applicants in substantial need and it is increasingly the case that those in low needs stand little chance of obtaining a home.

The arrangements for entry to the housing register are being reviewed during 2013/14 in light of the Localism Act. One outcome of this is likely to be a restriction on joining the Housing Register to those who have both a recognised housing need and a local

connection to Solihull. The review will ensure reasonable access to rehousing opportunities for older and other vulnerable people.

Where people under-occupy accommodation there may be benefits in moving to something smaller, both for the customer (a more manageable property, lower heating costs etc) and the community (family sized homes becoming available for rent or purchase). The review is considering how the Council might encourage more people to move in this way.

The Council no longer provides sheltered housing with an on-site scheme manager, favouring telecare solutions which enable support workers to reach a greater number of people. The further development of telecare and assistive technology will enable more people to be supported.

Some traditional sheltered housing is still available from housing associations and trusts but most providers have moved to a model of Housing with Care or 'extra care' housing through remodelling and new development.

There are currently 115 units of extra care housing (or housing with care) accommodation in Solihull, mainly for social rent but with a small number of shared ownership properties. These provide higher levels of on-site care and support which can be tailored to meet the needs of individual service users, allowing people who need more intensive forms of care and support to continue to live with some degree of independence as they will occupy self-contained accommodation with access to communal facilities.

3.4 Increasing the amount and range of suitable accommodation

The headline requirements for additional housing identified through the strategy at June 2013 are as follows:

- a range of homes which are suitable for older people across the borough and particularly in the South and rural areas, including Extra Care Housing. These will be required to meet the needs of self funders as well as those needing 'affordable housing' so a mix of type and tenure will be required.
- accommodation for 106 people with learning disabilities up to 2026, with 96 people requiring accommodation within the next 5 years¹³. These will be either grouped accommodation or self-contained flats or houses. The majority of people will require 'affordable' rented housing.
- Up to 5 units of supported accommodation per year to enable people to move out of mental health inpatient rehabilitation services
- Homes which are accessible to people with physical and sensory impairments and disabilities within new developments, including any new provision for older people and those with learning disability and mental health needs. There is a particular need for transitional supported accommodation and affordable 1 and 2 bed units.

¹³ The numbers required are concentrated in the 5 years up to 2016 with less certainty about the level of need beyond this because the requirement for new accommodation will be affected by those clients who are new to adult social care and the turnover within existing schemes. In order to ensure regular monitoring of need, including the turnover of existing provision and the needs of those clients who are new to local services, the housing needs analysis will be refreshed on a regular basis with the next exercise planned for Autumn/Winter of 2013/14.

These are contained in the schedule of outstanding accommodation needs which is at Annex B. The first version of this schedule was produced in 2010 and was used to inform priorities the HCA's 2011-15 investment programme. The priorities were updated toward the end of 2011 to inform the draft Local Plan and most recently in spring 2013.

The schedule provides the most comprehensive statement of unmet need and priority for investment in new homes for the needs set out in this strategy. It will be further developed and updated by the commissioners for the different needs.

Additional supply will come from new development, redevelopment and conversion and by utilising existing privately owned housing.

3.4.1 New Development

The strategy identifies needs for accommodation which can be met by new developments, notably Extra Care Housing (or Housing with Care), which is discussed below.

New development can meet needs directly, and can also have indirect benefits. For example, the provision of independent living options, with support where required, can be attractive to people who may be in family-sized accommodation. If they are able to move to a smaller home this may meet their space requirements and involve lower running and maintenance costs. It will also free-up their current home for resale or reletting, thus meeting the needs of another household.

The Council works with housing associations, housing trusts and others to bring forward new developments for a range of needs. Recently completed new - build provision is set out below.

Scheme	Number of places	Provider
Phoenix House, Shirley	49 (43 for social rent and 6 for shared ownership)	Solihull Care Housing Association
Tivoli Court, Shirley	12 places for people with Learning Disability	Bromford Housing Group
Starling Grove, Smiths Wood	11 places for people with Learning Disability	Bromford Housing Group
Wharf Lane, Solihull	7 places for people with Learning Disability	Bromford Housing Group
'HOLD' (Home Ownership for Long-Term Disabilities)	15 places for people with Learning Disability	Bromford Housing Group
Hampton Lane, Solihull – elderly extra care, including Learning Disability	32 (24 for social rent and 8 for shared ownership)	Landlord – Abbeyfield Care Provider – Accord Group

There are two developments which are planned or in progress and for which completion is definite or very likely:

Site	Number of Dwellings	Status
Shirley Town Centre	51 places, elderly extra care, including Learning Disability	Negotiations at advanced stage; completion 2014/15
Smiths Wood Centre	28 places, mental health, to include relocation of residents from Ipswich Walk	Negotiations at advanced stage; completion potentially 2014/15

Additionally there are two proposals that may be classed as 'pipeline' until commissioning requirements are clear, development briefs compiled and planning consents obtained. Both

sites are in the Draft Local Plan and in the ownership of the Homes and Communities Agency which is keen to pursue development as quickly as possible.

Site	Number of Dwellings	Status
Chelmsley Lane/Coleshill Road, Marston Green	To be agreed – total net capacity 80 dwellings. Provision for older people (of some form) attractive.	Local Plan site owned by HCA. Development Brief not yet compiled
Middlefield Hospital, Knowle	Up to 115 homes	As above Development Brief not yet compiled

The Draft Local Plan identifies a number of other sites which will be developed in the Borough by 2018. On these sites the Council requires 40% affordable housing. Where Development Briefs are used to define the development of a site, social care commissioners will have the opportunity to contribute to these as part of the affordable provision could be housing with support. These can be summarised in terms of the three local housing areas:

Site	Number of Dwellings	Status
North Solihull Regeneration Area	7 sites with a total estimated net capacity of 665 dwellings	Detail of type, size and mix to be agreed with North Solihull Partnership
Mature Suburbs	2 sites (Solihull and Shirley) with a total estimated net capacity of 400 dwellings	Detail of type, size and mix to be agreed. Places Directorate to agree approach to Development Brief production
Rural Area	3 sites (Shirley, Bentley Heath & Knowle) with a total estimated net capacity of 600 dwellings.	Detail of type, size and mix to be agreed. Places Directorate to agree approach to Development Brief production

The draft Local Plan sets out the Council's intended approach to spatial development in the years to 2028. It emphasises the importance of development which can meet the Borough's housing need, particularly the various forms of 'affordable housing' and properties which are suitable for, and affordable by, older and vulnerable people

The draft Plan is clear that there will be a continuing need to provide suitable accommodation for older people and vulnerable people of all age groups including people with learning disabilities, physical and sensory impairments, and mental health conditions.

It makes the case for including homes which are suitable for those with vulnerabilities through their design and the terms on which they can be obtained, whether for purchase or rent. In particular, the draft Plan is clear on the need for more housing which is affordable to people who cannot afford to buy or rent on the open market.

The draft Plan is therefore supported by a Supplementary Planning Document (SPD) on affordable housing. This is significant for this strategy as much of the required provision will be homes at social or affordable rent and on intermediate tenures rather than full-cost sale.

The Plan lists a number of locations which are suitable for consideration as housing sites (and mixed use sites which include housing). Where development briefs are prepared for these sites the Council's commissioners will have the opportunity to put forward proposals for development that meet some of the needs identified in this strategy.

Most of the developable land in Solihull is in private ownership, so provision of anything other than market housing will be the result of negotiations with developers and the use of planning powers by the Council. These will be set out in the Local Plan and in the SPD.

For the people to whom this strategy applies this will cover a range of property types, including:

- self contained flats and houses, some of which may have design features that reduce the need for later adaptation, often self – contained units in general new build developments.
- grouped accommodation, from small clusters of apartments through to larger Extra Care Housing developments

The Council wants to commission more extra care housing as an alternative to registered residential care. Such a model would serve mainly older people, including older people with learning disabilities, dementia and/or mental health problems, but also younger people with dementia, learning disabilities and mental health problems. It could also meet the needs of people with additional physical and sensory disabilities as well as supporting the needs of carers.

Most new extra care housing is likely to be for social rent, but provision of shared ownership and other intermediate tenure is also important as this provides greater choice and also helps the development viability of new provision. Shared ownership might take the traditional form which allows a person to buy further shares ('staircasing') up to outright ownership, or 'shared ownership for the elderly' where 'staircasing' is limited to 75% of equity.

Extra Care Housing (Housing With Care)

Purpose-designed self-contained accommodation which provides independence [each resident has their own front door] with opportunities to be part of a community [there will be communal space, facilities and activities, and the scheme should have links to the wider local community] and receive care and support [there is normally 24/7 on-site care].

Extra care housing can deliver a level of provision which equates to that currently expected of a registered residential care service and can meet the same complexity and intensity of an individual's needs, while maximising the benefits of the latest assistive technology.

Residents will usually have a range of ages, abilities and care and support needs and this mode of provision may be considered to provide suitable accommodation for people whose needs are anywhere on a continuum between general-purpose housing and residential care

In seeking the provision of more Extra Care and other forms of housing, the Council will engage proactively with the provider market, looking to form single or multi development partnerships with providers that can meet the needs outlined in this strategy and in the forthcoming Market Position Statement.

The council will be clear on needs and principles for new development but will not wish to over-specify new provision, as providers should be free to be innovative in their thinking, in terms of design, operation and funding.

Following interest expressed by potential providers in the consultation process for this strategy and on a day-to-day basis, the Council will look to proactively engage with the provider market to encourage the new provision that it wishes to see and take advantage of opportunities for new building and remodelling that will become available in the future.

3.4.2 Redevelopment and Conversion

Where current properties can continue to provide good quality accommodation which support the objectives of the strategy by meeting identified needs in a cost – effective way their useful life should be maximised through repair, improvement and modernisation where required. As in the past, some cases may involve extensive remodelling and / or a change in purpose.

Where this is not the case the most effective option may be to dispose of assets and reprovide where necessary in other settings or locations. This will produce a cleared site which may then be available for replacement provision or sale.

The first purpose built extra care housing scheme in Solihull (2009) was provided at Swallows Meadow, the development opportunity enabled by the demolition of a Council owned sheltered housing scheme.

Two Council owned buildings have been converted to use for people aged 50-plus with learning disabilities at:

- Cornerways at Olton which provides 12 places
- Dasset Road, which provides 13 places

Three further re-development schemes are currently in the pipeline are:

- re-development of two Council sites providing residential care ('Sunhaven' and 'Coombes House') to enable the Council to commission accommodation with care and support for older people and people with disabilities.
- the redevelopment of the mental health provision at Ipswich Walk, Chelmsley Wood once residents have moved to a new site at Smiths Wood in 2014

There will be a forward – looking approach to the how current housing provision for older and vulnerable people may be remodelled. The Council is clear that it will seek to work in partnership with provider organisations in the statutory, private and third sectors to secure the accommodation and services which will enable the transformation of residential services in Solihull. Where this and future reviews recommend replacing current provision, opportunities for the provision of additional independent accommodation may be presented.

3.4.3 Existing Private Housing

In addition to new build and redevelopment and conversion, suitable accommodation can also be provided by private care providers purchasing or leasing privately owned housing. This can be an important form of provision. Two new schemes for people with learning disabilities have recently been provided in this way:

- The Willows, an 11 place scheme in Shirley by Upward Care
- White Doves at Hockey Heath, providing 6 places by Aspects Care

The Council will continue to work with private providers to maximise the potential of privately owned accommodation to meet housing needs.

4. RESOURCES

4.1 Public Funding

In Solihull, many households have the financial capacity to 'self-fund' what they require, sometimes with advice and assistance from the Council or other agencies.

However, households containing one or more vulnerable people are more likely to be in housing need, are more likely to be living in homes unsuitable for their needs and are less likely to be able to afford to invest in their homes, move home or buy-in the support that they require to continue to live independently.

Given the increasing number of older people, particularly with dementia and other age-related issues, and the increase in younger people with disabilities and mental health needs, it is clear that pressure on the provision of housing and support services can only increase.

There will therefore be a continuing need for the Council and partner agencies to provide capital and revenue funding to fund and part-fund services. The availability of this, and the basis on which it is made available, will be a critical factor in determining the level and nature of future provision.

The emphasis will therefore be on funding priorities and minimising the cost of provision. In particular this will involve cutting the requirement for new public money through concentrating available funding on priorities, on recycling resources (money, land, buildings), on accessing private funding and in many cases changing the financial basis on which services are provided to the end – user.

4.2. Funding for Home Adaptations and Improvements

Assisting vulnerable people to repair and improve their homes is an important aspect of the strategy as it can help people to retain their independence. It is recognised that demand for these services will increase given Solihull's demographic.

The Council has a duty to address serious disrepair¹⁴ in private sector housing, but new Government funding for private sector renewal has been withdrawn. The Council will increasingly rely on the use of carry-forwards from previous years' unspent capital allocations, on prioritising assistance and on reducing the cost of assistance.

The introduction of loans in place of renovation grants was approved by the Council in 2010 and an allocation was made by West Midlands Kickstart. However, following the withdrawal of regional funding this organisation has folded and the Council is now in the process of sourcing loan products from elsewhere.

Government funding is still received toward the cost of Disabled Facilities Grants (DFGs) and the Council funds the balance to ensure that its statutory obligations are met.

The Council fully funds DFGs in excess of the statutory £30k maximum but in future will seek to enable the applicant to cover any works in excess of £30k through loans rather than additional grant wherever possible.

In 2012 the Council extended its Fair Access to Care (FACS) criteria to the provision of equipment and adaptations. This means that from May 2012, customers who are assessed as 'critical' or 'substantial' receive a full assessment by the Occupational Therapy service.

¹⁴ Category 1 hazards as defined by the Housing Health and Safety Rating System

SiL then provides assistance through the provision of Disabled Facilities Grants and other methods to meet the assessed needs in the most effective way.

Where the applicant is assessed as 'low' or 'moderate' under FACS, they will be signposted for assistance to another agency. Where SiL receives referrals in this way the applicant may be required to self – fund work to their homes. SiL is developing a business plan for low/moderate works which will include a 'fees matrix'.

DCLG has maintained an annual allocation to the council for the expansion of handyperson services and this is passed to SiL to support the local scheme, which is fee charging for all customers, as is the gardening scheme. SiL is actively seeking to transfer the latter to a third sector provider.

4.3 Capital Subsidy for New Development

The Homes and Communities Agency (HCA) has been the main source of capital subsidy for the provision of affordable housing, including supported housing. The agency is currently working with a substantially reduced budget and there is no guarantee that priorities identified in this strategy will be funded as before.

There may be opportunities for targeted funding. In 2012/13 the HCA administered the first round of a Supported Housing Fund but this was heavily oversubscribed and this authority's bid was not supported. A second round, targeted on private provision, is awaited.

The likelihood of obtaining HCA support for any given proposal will depend on a number of factors including:

- the amount of funding available to the HCA
- evidence of need and the extent to which the proposal meets priorities within the Local Investment Plan and its place in the prioritisation of proposed schemes
- value for money and the extent to which relevant agencies contribute assets such as finance, land and buildings to minimise the amount of money which is sought from the agency and the scope for the agency to recoup any investment at a later date
- deliverability of the scheme - including planning consents
- the availability of revenue funding to meet support costs (where applicable)
- high quality design and sustainability standards
- opportunities for local employment and training and apprenticeships in construction
- satisfactory arrangements for long-term stewardship of assets

There will be an emphasis on progressing the strategy through the use of private finance and it is recognised that the Council will need to be realistic about its expectations on capital receipts in order to attract private investment. Potential sources of funding for new development such as variants of 'institutional' funding sources will need to be considered.

4.4 Revenue Funding for Support Services

The Councils Medium Term Financial Strategy (MTFS) will impact on all revenue budgets. To meet its savings targets, the Council will seek to make necessary reductions through 'Lean' working, driving down costs without reducing front-line services.

Revenue contributions to the cost of home adaptations and other services provided by SiL are subject to reduction, but the services that it provides are essential to the aim of helping people to remain independent so there is a commitment to find the reductions whilst maintaining the level of service.

The Supporting People programme is an important source of revenue funding for a wide range of services which contribute to the objectives of this strategy. Although Solihull's Supporting People (SP) budget is one of the smallest in England it supports over 60 services provided by 29 different organisations, and serves over 2,000 users.

Amongst the newly commissioned services since the SP programme was launched in 2003 are Older People (57 homes), Learning Disabilities (77 homes), People with mental health needs (17 homes) and various floating support schemes including Mentally Disordered Offenders, homeless people and an organisation helping gypsies and travellers. SP is also part of the funding package for Solihull Independent Living.

As a consequence of the Comprehensive Spending Review 2010 the Supporting People Grant (SPG) ceased to exist and resources previously allocated to SPG were included within the Local Authority's Revenue Support Grant as a non-ring fenced sum. In Solihull resources equivalent to the SPG were hypothecated into the Adult Social Care budget to fund the commissioning of housing related support services. The Council has retained the full amount for contracted services and providers were required to make a nominal (0.8%) cash reduction in 2011/12,

In response to the requirement of the Council's Medium Term Financial Strategy, consultation was undertaken with providers in October/November 2011 on options by which to achieve the target of a 20% reduction in expenditure.

As a consequence, a programme of individual service reviews is being undertaken to: (i) ascertain compliance with quality standards; (ii) redesign the service if necessary to meet current commissioning requirements, while retaining the option of decommissioning a service or reducing cost or capacity; and (iii) identify and secure savings.

In order to endeavour to achieve the target a flat rate reduction was applied to each service of 5.84% in 2012/13 along with no uplift (i.e. 0%) for inflation. The service reviews commenced in March 2012 and a key outcome of each service review is to set the contract value for each service with effect from 2013/14. Progress is overseen by the Commissioning Body at their meetings and updates are given by SMBC officers at the regular Provider Forum meetings

4.5 End – User Costs

There is a clear trend toward transferring costs to end—users across the range of services covered by this strategy, and people will increasingly be expected to meet their own needs in the market wherever possible. For example, the restriction of financial assistance for social care (including home adaptations) to those whose needs are regarded as 'Critical' or 'Substantial' will inevitably lead to people with lower level needs having to consider buying solutions in the market, possibly with the assistance of a third party.

There is increasing market provision for aids and adaptations, home adaptations and telecare, and the expansion of personal budgets and self-directed care will provide people with more choice in what to buy and where from. This may include market options where these are affordable.

There is a mature market for the provision of housing which is suitable for older people. For those for whom home ownership is not a financial possibility, sub-market options will be essential. The Council will continue to support providers which seek to introduce more affordable housing options including intermediate tenures, such as shared ownership and shared equity housing.

However, it is very clear that for many households the only feasible option will be to rent a home in the social sector. As well as the problem of excess demand over supply which will restrict the availability of a home for many people, there are changes to the financial basis of this provision, notably:

- Pressure on rents will be increased through successive above-inflation rent increases in the social sector for current tenants and the introduction of the Affordable Rent regime for all new HCA – funded housing and a proportion of Registered Providers’ relets. With rents at or near 80% of market levels this model (which is still within the definition of ‘affordable housing’) is considerably more expensive than social rent, which is broadly 40-50% of market levels
- reductions in Housing Benefit will make it more difficult for some households to afford to rent privately and will pose affordability problems for some social tenants. There may be particular adverse impacts on tenants who have a ‘non-dependent’ in their household and to people aged below 35 whose benefit entitlement has been limited by the extension of the single room rate to those between 25 and 35.
- reductions in Housing Benefits for working – age households who are deemed to ‘underoccupy’ their homes is prompting more people to seek to downsize their accommodation, but there is limited availability of smaller properties. Locally, SCH and the Council are working to mitigate the impacts of this through assisting people to move and through making Discretionary Housing Payments to some applicants.

5. DELIVERY

The strategy will be delivered through the market activity of private providers in the housing and social care markets, through the existing and future provision of accommodation and services provided by the Council and its partner.

5.1 Commissioning Arrangements

The Council has created a new commissioning structure which will work collaboratively with partner organisations and local stakeholders, involving the integration of commissioning across adults’ and children’s services to result in a whole life, whole family approach, and focusing on the transition from child to adult.

There are four service areas relevant to this strategy: Children and Families, Disabilities / sensory impairment (all ages), Mental Health (including dementia) and Older People (early intervention through to residential care). A Strategic Commissioner for each area will lead the delivery of a needs assessment for designated services or service user groups (producing annual joint commissioning intentions), supported by a strong evidence base and needs analysis with defined support requirements, and costed plans.

These new commissioning arrangements will provide a joined up approach to needs identification, prioritisation and commissioning services. This approach will be based upon commissioners being clear about the broad principles for the development of accommodation and the requirements of service providers but will be open to innovation from the market.

This strategy sets out the broad principles and strategic priorities for meeting the accommodation and support needs of vulnerable people and for setting the foundations for future joint working in these areas and joint commissioning based on these principles will be taken forward through the strategy implementation plan.

These proposals will significantly improve the ability of the Council to commission housing – related services and the prioritise requirements for new developments. It will be essential for commissioners to be able to put forward proposals for development to meet identified needs and to be able to evidence that need.

There will be liaison between Commissioning, Adult Social Care and the Director for Places, to have an overview of these (potentially competing) needs and prioritise them. This will enable priorities to be considered when sites come forward for development, particularly when development briefs are prepared for sites in the Local Plan. It also provides coordinated input into the market position statement.

The commissioners will lead and develop relationships with stakeholders (service users, carers and providers) to shape the market in response to identified needs and according to the forthcoming Market Position Statement

An Operational Commissioning Lead oversees all other aspects of operational commissioning activity for adults, children and families with two Commissioning Managers to deliver the day-to-day tasks of commissioning, including capturing information about local needs.

A Telecare Development Manager has been appointed to drive forward the implementation of assistive technology/telecare across the Borough.

All data, business intelligence and analytical capacity will be located in a single, corporate business intelligence hub. This hub will also continue to provide management information and reports for all aspects of service, and not only for commissioning.

5.2 Partnerships

Future provision of Extra Care Housing and other living options will rely on private sector investment.

However, many people covered by this strategy would be unable to afford owner occupation under any market conditions. Therefore continued effort to expand the market of independent and extra-care housing for those who cannot afford full ownership is required. This will require effective partnerships between private and non-profit organisations.

To create and exploit opportunities for the development of new independent homes and support services, the Council will need to extend and strengthen its range of partnerships in all sectors, including:

- Forging new partnerships with Registered Providers and others to take opportunities for the development of new homes which meet priority needs through development and remodelling
- Working with the North Solihull Regeneration Partnership to make the most of development and redevelopment opportunities during the remainder of the regeneration programme
- Supporting Solihull Independent Living and others to carry out their role as 'signposted agencies' for the delivery of advice, home repairs, adaptations and other services
- Working with voluntary and community sector organisations to ensure that the help and support of volunteers and carers enables people to remain in their own home

and to explore the scope for service transfer, delivery and the development of social enterprises

5.3 Equality and Diversity

Solihull MBC is committed to meeting its obligations under the Equality Act 2010: to eliminate unlawful discrimination, advance equality of opportunity and foster good relations between communities.

It wants all sectors of the community to be treated fairly, for the diversity of customer needs to be reflected in the services provided and for people not to be disadvantaged by the way that services are made available by providers.

The priorities for development of accommodation and support services outlined in this strategy will take into account the specific needs that are presented by the community and will respond to the changing needs of Solihull's population. This will include the increase in the number of older people and people with disabilities and mental health needs. It will also include the growing ethnic diversity of the Borough's population.

People want to have a choice over where and how they live their lives, and have access to good quality, responsive services to enable them to live life to the full. By adopting this strategy, vulnerable client groups should be able to exert choice and influence over their accommodation – something that others take for granted.

This strategy aims to advance equality of opportunity by helping more vulnerable residents to have the same opportunities in accessing viable housing options, including sustaining their own housing within our communities,

To ensure that the strategy starts from the right place and does the right things, a Fair Treatment Assessment (FTA) has been undertaken and its recommendations have informed the considerations of elected Members in approving the strategy.

The assessment found that the implementation of the strategy will impact positively on significant groups, such as older people and those with disabilities. It found no potential adverse impacts.

It endorsed the finding of the FTA on the Council's Integrated Commissioning function that commissioning and service provision activity must be adequately informed by data and intelligence on people's needs at both the individual and aggregate level. There is a need to develop knowledge and understanding of changes within Solihull's population, the cultural and other changes that this brings and how these are expected to develop in the future, and how services should respond.

As service provision becomes more tailored to individual needs, so the consideration of specific needs and preferences must become more intelligent and more flexible. There may need to be consideration of culturally- specific services at some point in the future to meet emerging demand, but for the present there is a clear need to ensure that future providers of accommodation and services will identify, respect and respond to different needs at the individual level.

Potential providers should show how they will respond to individual needs and preferences, and individual differences. This will concern their organisational values and ethos, and will have reference both to their policies and their management practices such as staff training, customer involvement and complaint resolution