

Sheltered housing has changed
**Action on sheltered and
retirement housing
- a checklist for adult social care**



Sheltered and retirement housing - buildings and staff - an under-utilised resource:

Sheltered and retirement housing plays a preventative role, prolonging independence and self-care by enabling older people to access a range of low level support services that promote their independence and well-being.

■ **The buildings** have huge potential as a preventative environment and as alternatives to residential care. They offer privacy and independence in self-contained accommodation as well as safety, security and the opportunity to be involved in social networks and activities. In addition they should be a hub and valuable resource for the wider community. Sheltered and retirement housing helps reduce social isolation, loneliness, depression, anxiety and moves to higher dependency settings.

■ **The staff** are ideally placed to contribute to health, care and other assessments. They are the only professionals who see vulnerable residents most days and so are ideally placed to notice sudden or gradual changes in well-being.

"Sheltered housing is one of the nation's greatest assets for meeting the needs of older people. It should be a crucial preventative service which should not be lost."
'More than a few kind words! – reshaping support in sheltered housing – a good practice guide for housing providers and local authorities'. A project commissioned by the CLG Ministerial Working Group for Sheltered Housing. **National Housing Federation. January 2010.**

"Supporting People funding of £198.2 million for older people living in sheltered housing provides a net financial benefit of £646.9 million through reduced need for residential or nursing care, hospital admission and home care."
Cap Gemini research for CLG 2009.

"Local authorities and housing associations should be clear about the high value of existing stock and not ignore the potential of sheltered housing.... which at their best... can be vibrant community hubs, tackling social exclusion and promoting active ageing, even if the accommodation itself is dated.... There should be a strong focus on well-being. High quality health and care services should complement social activity, mutual support

and opportunities for active participation in the community."

Lifetime Homes, Lifetime Neighbourhoods – a national strategy for housing in an ageing society, CLG, February 2008.

"76% of respondents answered 'yes' to the statement 'For those who look for it, there is a good social life – a good community spirit' while only 5% said 'no'.

This suggests that older people's housing schemes can provide that all-important sense of community for residents."

Elderly Accommodation Counsel Report on Housing for Older People Awards 2010.

"Our services have changed a lot over the past few years and, I have to say, for the better. We now have a small team of staff providing support rather than a single scheme manager and this is proving more popular with tenants although they were not keen to begin with. We have a more consistent and personal service much better tuned in to the needs of myself and other tenants. Thank goodness the changes happened!"

Elaine Penton, Tenant, Flourish homes

This checklist for adult social care staff is intended to improve joint working with sheltered housing providers and help staff deliver the personalisation and well-being agendas. The checklist can be used at all levels to assess your organisation's progress in achieving the full potential of sheltered housing in your area.

See also our DVD – see back page for more information.

Strategy/planning

1 Is there a joint policy on how sheltered and retirement housing and extra care sheltered housing might contribute to social care most effectively, including agreement on priorities and allocations?

Yes

No

In progress

2 Have you considered the possibility of commissioning extra care sheltered housing (new build or remodelled) as a preferable alternative to residential care?

Yes

No

In progress

3 Are your staff in contact with the local forum (or equivalent) of sheltered housing providers? (For details of all local providers contact the Elderly Accommodation Counsel tel: 020 7820 1343 Monday to Friday 9am to 5pm or e-mail: enquiries@eac.org.uk or see www.HousingCare.org)

Yes No In progress

4 Is there a nominated officer who has a specific responsibility for managing the interface between housing and community care?

Yes No In progress

5 Do you organise home care staff around a sheltered or retirement housing scheme?

Yes No In progress

6 Are you currently working with Supporting People officers or their equivalents to ensure health, housing and social services are joined up strategically and operationally?

Yes No In progress

7 Have you developed a joint protocol with sheltered housing providers on when and how to share information for the benefit of service users?

Yes No In progress

8 Have you considered asking support providers under contract with Supporting People to monitor domiciliary care and self-directed care, outcomes and safeguarding?

Yes No In progress

9 Have you considered your role as a stakeholder regarding input into Supporting People reviews of sheltered and retirement housing?

Yes No In progress

10 Are you working with Supporting People officers to explore the use of sheltered and retirement schemes as a base for developing new community services for older people?

Yes No In progress

Assessment and care monitoring

11 Are you confident that assessment in your locality would reveal whether a service user would benefit from sheltered and retirement housing or extra care or related support services?

Yes No In progress

12 Is there a trigger on your assessment forms to ensure that sheltered and retirement housing staff are consulted?

Yes No In progress

13 Are home care staff aware of what information about a resident is appropriate to be provided to sheltered and retirement housing staff?

Yes No In progress

14 Have you discussed with sheltered and retirement housing providers the possibility of extending the scheme manager's role to include assessments, key working, monitoring and coordinating care delivery?

Yes No In progress

15 Do you routinely ask sheltered and retirement housing clients if they would like their scheme manager to be present for the assessment or review?

Yes No In progress

16 When you are carrying out an assessment or review of a sheltered or retirement housing resident's needs, do you routinely contact the scheme manager beforehand and feed back information after the meeting?

Yes No In progress

17 Have you explored the use of preventative technology including social alarm systems to monitor the delivery of care?

Yes No In progress

18 Does your authority have any interim arrangements in the event of older people in hospital needing sheltered housing but unable to return home?

Yes No In progress

19 Have you considered asking scheme managers to support residents to access Individual or Personal Budgets?

Yes

No

In progress

20 Do you work with other local authorities if an assessment indicates that an older person wants to move to sheltered housing outside their own local authority?

Yes

No

In progress

22 Does your training budget include an allocation for joint social services/housing training?

Yes

No

In progress

23 Have you incorporated an explanation of (or visit to) sheltered and retirement housing into staff induction training?

Yes

No

In progress

Training

21 Have you considered joint training with sheltered and retirement housing staff and their line managers, for example, on adult safeguarding?

Yes

No

In progress

Sheltered and retirement housing is a huge resource. More older people (two thirds of a million) in the UK currently live in sheltered and retirement housing than in residential and nursing care put together. Sheltered and retirement housing was originally intended for fit, active older people. However, demographic trends and community care policies have led to an older and frail population living, or wishing to live, in sheltered and retirement housing. The service has therefore evolved in response to these changing needs and new models of sheltered housing, extra care housing and floating support are being developed. Residents can live independent and fulfilled lives in specially designed accommodation that aims to offer a "home for life". This leaflet, one of a series of five, has been produced by a consortium of sheltered and retirement housing providers.

Phone 01249 654 249 for:

- more leaflets
- further information about EROSH or visit www.shelteredhousing.org

Five different leaflets are available for:

- Hospital and primary care staff
- Adult social care

- Sheltered and retirement housing providers
- General enquiries, older people, friends and relatives - 9 Key Questions and Answers about sheltered and retirement housing in different languages
- Domiciliary care - a good practice guide for sheltered and retirement housing staff

We also have a DVD "Sheltered Housing's Contribution to Health and Social Care" which emphasises the benefits of partnership working and demonstrates a range of health and social care related activities that do or should take place in sheltered housing, including: exercise, falls prevention, keeping active, helping access to other services, healthy eating, screening, social activities. The DVD can be viewed from our website.

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