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Specialised Grouped Housing for Older People - Introductory Briefing

1 Introduction - Meeting Older People's Specialist Housing Needs

In connection with the ongoing work of the Committee for Health, Social Services and Public Safety regarding the implementation of *Transforming Your Care* under the theme of Older People, the aim of this briefing paper is to provide an introduction to the subject of specialist grouped housing for older people, often referred to as sheltered housing.

The focus of this briefing is the policy around, and examples of, this type of housing in Northern Ireland and also the outworkings of the *Housing our Ageing Population: Panel for Innovation* (HAPPI).

HAPPI was established in June 2009¹ to investigate what reform was needed in the UK to ensure that new build specialised housing meets the needs and aspirations of older people.²

This paper also includes some good practice examples of sheltered housing for older people in England, including some highlighted in the HAPPI Report and also in the HAPPI 2 Report produced by the Westminster All Party Parliamentary Group (APPG) on Housing and Care for Older People.

Further briefings may be produced if required as the Committee's review in this area proceeds, including policy and good practice in other neighbouring jurisdictions and beyond if required.

HAPPI acknowledged that inadequate housing exacerbates health problems and creates others. As things currently stand in the UK, without better housing in the community to which an older person belongs,

the choice often lies between 'getting by' in unsuitable accommodation or up-rooting to some form of institutional home...Without a vision of an alternative, more positive, future, 'selling up' tends to be a last resort – realising a valuable asset as well as losing a much-loved home³

It outlined a spectrum of housing options that are available to older people⁴:

1. Mainstream housing (perhaps adapted to meet the needs of the individual);
2. Specialised Housing (with access to support and care and usually designated for the over 55's); and
3. Residential Care (including residential homes, nursing homes and specialised care homes).

This briefing is focused on the second category, namely specialised housing.

The Westminster All Party Parliamentary Group (APPG) on Housing and Care for Older People (HAPPI 2), have highlighted that solutions to health and social care problems for older people so often lie in the provision of specially designed and high quality homes leading to⁵:

- Reduced risks of falls;
- Providing safety and security;

¹ HAPPI were commissioned by Communities and Local Government (CLG) in partnership with Department of Health to set up the innovation panel, as part of CLG's commitment outlined in 'Lifetime Homes1, Lifetime Neighbourhoods: A National Strategy for Housing in an Ageing Society', published by CLG in 2008.

² HAPPI (2009), Homes and Communities Agency, www.homesandcommunities.co.uk/ourwork/happi

³ Why is meeting older people's housing needs a national priority? HAPPI, Housing our Aging Population: Panel for Innovation, 2009, page 11, <http://www.homesandcommunities.co.uk/ourwork/happi>

⁴ HAPPI, Homes and Communities Agency, page 16, www.homesandcommunities.co.uk/ourwork/happi

⁵ Best, R. and Porteus, J., Housing our Ageing Population: Plan for Implementation, (November 2012) , All Party Group on Housing and Care for Older People, page 15, http://www.housinglin.org.uk/Topics/browse/Design_building/HAPPI2/?parent=8649&child=8650

- Protecting against the effects of cold homes and fuel poverty;
- Enabling earlier discharge from and fewer re-admissions to, hospital;
- Preventing or delaying the need for institutional residential care; and
- Providing companionship that comes with retirement housing to combat the depression and poor health that can result from isolation and loneliness.

Alongside the requirement for suitable housing is the need to provide for 'Assisted Living' if necessary – this encompasses the use in the person's home of ICT based products, goods and services to support the “*physiological, psychological, psychosocial and socio-cultural components of daily living*” and enables the individual and any carer to enhance their ability to maintain independence and a quality of life.⁶

The research of Tinker et al (2013) highlighted that, across the UK, specialist grouped housing for older people originated as a form of 'sheltered housing', often a group of flats or bungalows, each with an alarm system linked to a warden (often living on site), and some communal facilities. However, the research noted that it is difficult to maintain the very frail elderly in such accommodation so, in addition, 'Extra Care' (or very sheltered) housing has developed with 24 hour care on hand, enhanced communal facilities and at the provision of one or more meals per day.⁷

The policy aim in NI for some time has been to shift care from institutional settings such as nursing and residential homes to provide greater provision of services for older people living in their own home or in supported accommodation. This is discussed in Section 2 in further detail.

A similar policy is in place in the Republic of Ireland as outlined in *Towards 2016, Ten Year Framework Social Partnership Agreement 2006-2015*⁸. Section 32.2 of that document highlights the priority actions for older people, including Priority 2, 'the provision of long-term care services for older people', which highlights that “*the continued development of sheltered housing options, with varying degrees of care support will be encouraged*”.⁹ Priority 3 in *Towards 2016*, covers 'Housing and Accommodation' and highlights that

good quality housing is important to supporting the independence of older people. In some instances, housing and care services delivered in an integrated manner are essential to allowing older people to live at home for as long as possible. In other cases, older people may need to move to alternative accommodation, including sheltered housing with varying levels

⁶ DALLAS – Delivering Assisted Living Lifestyles at Scale, SBRI Competition for development contracts, Technology Strategy Board, June 2011, <https://www.innovateuk.org/documents/1524978/2274828/DALLAS+-+Delivering+Assisted+Living+Lifestyles+at+Scale+-+Competition+brief/29e8d709-453b-4e91-ab04-dfba03d0362b>

⁷ Tinker, A, Kellaher, L., Ginn, J. and Ribe, E. (2013) Assisted Living Platform – The Long Term Care Revolution, Housing Learning and Improvement Network, King's College London, September 2013

⁸ Towards 2016, Ten Year Framework Social Partnership Agreement 2006-2015, Department of the Taoiseach, Dublin, Government of Ireland 2006,

⁹ As above, page 62.

*of support. Therefore, the range of responses include...the availability of a mix of dwelling types of good design across all tenures.*¹⁰

This is to include the provision of social housing via downsizing schemes and specific sheltered housing options and to ensure that future Housing Action Plans address special needs in a more strategic manner and specify, in particular, the role of the voluntary and co-operative housing sector in meeting the associated accommodation requirements.¹¹

2 Northern Ireland Policies – TYC and The ‘Supporting People Programme’

In Northern Ireland (NI), the focus of *Transforming your Care*¹² (TYC), in this regard, is that everyone is entitled to continue living in their own home and remain independent, albeit with support, and that an individual’s home should be the hub of care for older people. TYC confirmed that the policy aim for some time has been to shift care from institutional settings such as nursing and residential homes. Steps, therefore, should be taken to support greater provision of services for older people living in their own home or in supported accommodation.

Section 4.3.2 of the TYC Implementation Plan describes the key commitments for older people. One of the key commitments is “*Support Older People and those with Long Term Conditions to maintain their own independence and manage the functions of daily living in their own home or assisted housing, as opposed to an acute setting or long term care*”.¹³

In addition the Plan states that “*community-based alternatives to residential care are increasing all the time, and there is a need to ensure that the availability and functioning of these is more widely known so that people can see the different styles of independent living that it is now possible to offer to older people, where the traditional response would have been to offer a residential placement. Due to improved availability of these types of community-based alternatives, it is expected that demand for statutory residential homes will further decline*”.¹⁴

TYC did not go into detail on specific housing tenures or types of provision, however, research published by the NI Housing Executive highlighted that, for the purposes of TYC, sheltered housing should be seen as an older person’s home. Older people may move into sheltered housing, even if capable of remaining in their original home, for reasons such as company, social inclusion, provision of communal facilities, proximity

¹⁰ Towards 2016, Ten Year Framework Social Partnership Agreement 2006-2015, Department of the Taoiseach, Dublin, Government of Ireland 2006, pages 63-64,

¹¹ As above, pages 63-64

¹² Transforming your care, A Review of Health and Social Care in Northern Ireland, December 2011

¹³ Transforming Your Care Strategic Implementation Plan, Section 4.3.2, <http://www.transformingyourcare.hscni.net/wp-content/uploads/2013/11/Transforming-Your-Care-Strategic-Implementation-Plan.pdf>

¹⁴ As above

to services, support from the scheme co-ordinator and issues relating to cost and maintenance of housing.¹⁵

In NI, the Supporting People Programme was introduced in 2003 with the aim of commissioning housing support services aimed at improving the quality of life and independence of vulnerable people. The new Supporting People strategy (2012-2015) aims to build on the successes of the original strategy ('*Supporting People, Changing Lives*' 2005-2010). The NI Housing Executive is the Administering Authority for the programme.¹⁶

The Department of Social Development bid for and approve funding for the programme and allocate it to the NI Housing Executive in the form of grant funding. This in turn is used to fund the provision of eligible housing support services via funding agreements with providers - the total 2012/13 'Supporting People' budget was £66.4 million.¹⁷

'Supporting People' (SP) is delivered via 106 organisations, the majority of whom are voluntary and community organisations, ranging from small providers of a single service to larger providers of up to 20 services. Other service providers include Housing Associations, Health and Social Care Trusts and the Northern Ireland Housing Executive (NIHE).¹⁸

Specific SP service provision for older people is as follows (at March 2012)¹⁹:

- Total SP budget spend for older people services in 2012/13 was £8.93m;
- 425 accommodation based services providing housing to over 10,300 people. Sheltered housing is the main form of provision for older people, but some more specialist supported living provision also exists for frail older people and older people with dementia;
- In addition 10 floating support services support 345 people at any one time at a cost of £604,800. These services cater for a range of clients from isolated and rural people, to people with mental health/dementia needs;
- Funding of two Home Improvement Agencies' whose role is to advise and assist applicants who have a disability through the home improvement grants' application process, in particular the Disabled Facilities Grant. Older people with a disability are the main recipients of the service; and
- The majority of services for older people are provided by housing associations with a number of services provided by the voluntary and community sector and Health and Social Care Trusts.

¹⁵ The role of sheltered housing in Northern Ireland and future issues, Final Report September 2012 prepared for the Northern Ireland Housing Executive by Fiona Boyle, page 21, http://www.nihe.gov.uk/the_role_of_sheltered_housing_in_northern_ireland_and_future_issues_published_september_2012.pdf

¹⁶ Housing Related Support Strategy 2012-2015, Northern Ireland Housing Executive, Supporting People, page 5, <http://www.nihe.gov.uk>

¹⁷ As above, page 7

¹⁸ As above, page 6

¹⁹ As above, page 23

3 Specialised Group Housing

As stated above, the HAPPI Panel outlined a spectrum of housing options that are available to older people. The category of specialist housing is the focus of this paper and includes five sub-categories²⁰:

1. Sheltered/retirement housing – independent living (own front door) and may include: 24 hour alarm system, warden, lounge, programme of activities;
2. Very sheltered/assisted living – independent living with managed care and support services. Features as above and may include: meals, domestic help, assisted bathing;
3. Extra care- independent living with managed on-site care and support services. Features as above and may include 24 hour staff, hairdressing;
4. Close care housing – independent living with on-site care and support, linked to a care home;
5. Retirement villages – large developments (often 100+ units) with a range of housing types and levels of care and support (sheltered, very sheltered/extra care, close care and nursing care) on one site.

In NI, the different categories of sheltered housing are defined in the Department for Social Development's guide for housing associations and are based on the person's level of support and care needs, combined with the type of accommodation and services provided. These categories are as follows²¹:

- Category 1– self-contained accommodation for the more active elderly, which may include an element of scheme supervisor support and/or additional communal facilities;
- Category 2– scheme supervisor supported self-contained accommodation for the less active elderly, which includes the full range of communal facilities;
- Category 3 – supported extra care accommodation for the frail elderly, which comprises the full range of communal facilities, plus additional special features, including wheelchair user environments and supportive management; and
- Category 4– scheme supervisor supported shared accommodation for the less active elderly with full range of communal facilities.

It is possible to rent or buy sheltered housing. Rented sheltered housing is usually provided by local councils/authorities or housing associations (for example, Clanmil²² or Helm²³ in NI) that will each have their own allocation policy based on need. Some

²⁰ HAPPI, Homes and Communities Agency, page 16, www.homesandcommunities.co.uk/ourwork/happi

²¹ The role of sheltered housing in Northern Ireland and future issues, Final Report September 2012 prepared for the Northern Ireland Housing Executive by Fiona Boyle, page 15

²² Clanmil Housing, <http://www.clanmil.org/>

²³ Helm Housing, <http://www.helmhousing.org/>

sheltered housing is run by charitable trusts and each charity has a policy on who it will assist, for example residents who live in a particular geographical area, or workers who have retired from a particular trade. Local Abbeyfield²⁴ societies are voluntary organisations that run supported sheltered housing for 8–12 residents in a more family-style household. There are also some private providers of sheltered rented housing.²⁵

In NI, registered Housing Associations are the main developers of new social housing for rent.²⁶

Sheltered housing continues to be a popular housing option for many older people in NI as it enables residents to retain their independence with the assistance of a scheme manager (on or off site), telecare/assistive technology and the advantages of communal living. The NI Housing Executive (NIHE) highlighted that sheltered housing is however facing a number of challenging issues²⁷:

- Younger people (50+) accessing services
- The wide age range of residents (aged 50 to 100+)
- The complexity of needs
- The varying levels of support required
- Questions over the desirability and suitability of physical design
- Providing services to older people in the local neighbourhood.

In responding to these issues, NIHE commissioned research around the current model and future role of sheltered housing. The research findings were published in September 2012 and some of the main conclusions at that time were²⁸:

- The level of stock in 2011/12 was 289 sheltered housing schemes providing 7,926 units of accommodation;
- The majority of sheltered housing accommodation was viable and fit for purpose:
 - Housing associations rated the physical condition of their sheltered housing stock as very good/good (88%) and accessibility as very suitable/suitable (87%);
 - However, they indicated that one in five units (19%) were not very suitable in terms of space standards.
 - Five housing associations felt they had some non-viable sheltered housing stock, equating to around 120 units or 1.5% of the total Category 2 sheltered housing stock in NI.;

²⁴ Abbeyfield, <http://www.abbeyfield.com/>

²⁵ AgeUK, Sheltered Housing Information, <http://www.ageuk.org.uk/home-and-care/housing-choices/sheltered-housing/>

²⁶ The role of sheltered housing in Northern Ireland and future issues, Final Report September 2012 prepared for the Northern Ireland Housing Executive by Fiona Boyle, page 16

²⁷ Housing Related Support Strategy 2012-2015, Northern Ireland Housing Executive, Supporting People, page 27, <http://www.nihe.gov.uk>

²⁸ Conclusions extracted from The role of sheltered housing in Northern Ireland and future issues, Final Report September 2012 prepared for the Northern Ireland Housing Executive by Fiona Boyle, Executive Summary

- More than half (53%) of tenants were aged 75 and over and a further third (33%) were aged 65 to 74, 16% were under 65 (10% aged between 55 and 64 and 6% between 24 and 54) - increased numbers of people with mental health problems/addictions/physical or other health problems are now living in sheltered housing;
- Occupancy - in 2010/11 around 3% of sheltered housing units were empty. Whilst occupancy was high at that time, it was concluded that the reason for this was related to the operation of the Common Selection Scheme²⁹ and the resultant increasing number of allocations of sheltered housing to individuals and groups who do not fit the definition of older, independent adults for whom sheltered housing was originally designed;
- The benefits of sheltered housing do not always appear to reach the target group of older people who might be interested in this form of accommodation;
- The qualitative elements of the research pointed to perceptions and attitudes as being key factors in putting people off applying for sheltered housing and/or accepting an offer of tenancy, mainly due to a perceived lack of both privacy and independence;
- Most tenants surveyed for the research had moved to a sheltered housing scheme close to their previous home (61% within two miles and a further 17% within five miles).

4 Good Practice Examples

4.1 Examples from the HAPPI Report

As part of their work, HAPPI made six study visits and reported on 24 case studies of specialist group housing from across the UK and Europe. This section highlights a selection of good practice case studies, from England, included in the HAPPI report that encompass the 10 components recommended by HAPPI for the design of retirement housing for older people summarised as follows³⁰:

1. New retirement homes should have generous internal space standards, designed to accommodate flexible layouts;
2. Ensure design allows for plenty of natural light;
3. Building layouts to avoid internal corridors and single aspect flats to maximise light/ventilation and apartments should have balconies/patios/terraces with space for tables, chairs and plants;

²⁹ Category 2 sheltered housing is treated as 'General Needs' accommodation under the Common Selection Scheme - The Housing Selection Scheme is governed by a set of rules which are approved by the Department for Social Development, http://www.nihe.gov.uk/index/advice/apply_for_a_home/housing_selection_scheme.htm

³⁰ HAPPI, Homes and Communities Agency, page 38-39, www.homesandcommunities.co.uk/ourwork/happi

4. Homes to be 'care ready' to allow for new technology to be easily installed;
5. Building layout to promote circulation areas as shared spaces to encourage interaction and avoid any 'institutional' feel;
6. In all but the smallest developments, multi-purpose space should be available for residents to meet and take part in a range of activities. Such space could also serve the wider community. Guest rooms for visiting family and friends are also important;
7. Homes should engage positively with their environment, including the preservations of mature planting and new trees and hedges;
8. Homes should be energy efficient, well insulated, well ventilated and able to avoid over-heating by the use of passive solar design, use of deciduous planting and external blinds/shutters/awnings over patios etc.;
9. Adequate storage should be available inside and outside the home for mobility aids etc.; and
10. Shared external surfaces, such as pedestrian areas have proved successful and should have due regard to navigation difficulties that visually impaired people may have.

Darwin Court – Southwark (London)³¹

Darwin Court is a six-storey mixed-use building built in 2003. Access for residents is well organised as they can choose to enter their flats privately by two lift and stair cores from a quiet street on the park side of the building or through the more social main entrance.

There are 76 rented apartments (1-2 bedrooms, 8 wheelchair adapted) including 16 flats for frail older people. It was developed by the Peabody Trust, a major London charitable housing trust and a registered housing association.³²

Residents are all over 50 years of age and there is a resource centre (free to residents but open to the local community) with pool, café, IT suite, fitness and activity rooms. The care needs of the residents range from none to 24-hour care and the balance of the resident-profile is well-managed in ages, care needs and backgrounds. Everyone is encouraged to live as independently as possible but with no stigma associated with needing additional care.

³¹ HAPPI, Homes and Communities Agency, page 14, Case Study 3, Darwin Court

www.homesandcommunities.co.uk/ourwork/happi

³² The Peabody Trust, <http://www.peabody.org.uk/home>

Hartrigg Oaks – York³³

This is a continuing care retirement ‘village’ developed by the Joseph Rowntree Housing Trust for those aged over 60 built in 1998³⁴. There are 152 bungalows in four variations arranged around the community building. The residents have access to a pool, gym, restaurant and other facilities. In addition, there is a 42-bed nursing home wing attached to the community building making care and catering viable.

The continuing care model provides residents with reassurance about future care should they need it and it is combined with an model of payment that acts like an insurance scheme – residents pay a fixed annual charge which covers a maximum of three hours/day home care and all care costs for those who move into full-time care in the nursing home wing. In practice, fewer residents than expected have made that move so the care facilities have been able to provide respite care for the wider community.

4.2 Examples from the APPG Implementation Report (HAPPI 2)

Prospect Place, Victory Pier, Gillingham (Kent)

Built in 2012, Prospect Place contains 60 one and two bedroom social rented apartments on one site for people aged 55 and over, with a range of communal facilities including a commercial kitchen, café, day room, hairdresser and a laundry. Social activities are arranged by and for residents. The sheltered accommodation for older people is part of a 775 home development which also includes a 100 bed hotel and 1,000 student homes and commercial floor space. There is a central green and a riverside walk as part of the development.³⁵

It is classed as extra care housing as it has an extra care scheme with on-site care staff (24 hours / 7 days), non-resident management staff, community alarm service and some meals available. It is managed by Housing 21 – a social enterprise for older people.³⁶

Broad Meadow, Dudley (West Midlands)

Broad Meadow is an extra care scheme in the Dudley Borough for people aged 55 and over and an award winning development built in 2011³⁷. The scheme has 132 apartments comprising 90 two bedroom and 42 one bedroom apartments. There is a mix of rented, shared ownership and outright owned accommodation. The scheme is

³³ HAPPI, Homes and Communities Agency, page 41, Case Study 11, Hartrigg Oaks , www.homesandcommunities.co.uk/ourwork/happi

³⁴ Joseph Rowntree Housing Trust, <http://www.jrht.org.uk/>

³⁵ Best, R. and Porteus, J., Housing our Ageing Population: Plan for Implementation, (November 2012) , All Party Group on Housing and Care for Older People, page 7 http://www.housinglin.org.uk/Topics/browse/Design_building/HAPPI2/?parent=8649&child=8650

³⁶ Prospect Place, <http://www.housingcare.org/housing-care/facility-info-159515-prospect-place-gillingham-england.aspx>

³⁷ Winner of the Elderly Accommodation Counsel's 2012 Housing for Older People Gold Award

staffed 24 hours a day 7 days a week, by Midland Heart Limited³⁸, offering person centred care and support.³⁹

Specific amenities include a gym, general store, activities hall, hair and beauty salon, games room, restaurant, bar and social lounge, launderette, green house and lifestyle centre.⁴⁰

Marina Court, Tewkesbury, Gloucs⁴¹

Marina Court is a retirement development providing enhanced sheltered housing on a new estate for the over 55's. There are 75 self-contained one and two bedroom apartments and bungalows built in 2007. Each property has a lounge, kitchen and level access shower. Regular activities include coffee mornings, visiting speakers, exercise classes, a library, and visits from a therapy and wellbeing co-ordinator. The latter are delivered in partnership with local health services.

There is an Easy Living scheme with on-site care staff (24 hours / 7 days), non-resident management staff and community alarm service. The scheme is a mix of social rented housing and Shared Ownership.⁴²

4.3 Examples from Northern Ireland

A selection of Housing Associations were contacted in order to provide examples that they considered to be good practice. The following responses were received:

Clanmil Housing Association Ltd – Savoy, Bangor

Clanmil Housing highlighted⁴³ the Savoy in Bangor, Co. Down (built in 1990) as a good practice development in social rented housing. It provides retirement/sheltered housing with 56 flats in a range of one to three bedrooms. It has non-resident management staff and community alarm service. There is a communal lounge, computer suite, laundry, guest facilities, a garden and hobby room. Some meals are available.⁴⁴

Fold Housing Association Ltd

Fold Housing Association highlighted that it offers a range of housing options for older people including the following good practice examples⁴⁵:

³⁸ <https://www.midlandheart.org.uk/>

³⁹ Broad Meadow, <http://www.housingcare.org/housing-care/facility-info-158085-broad-meadow-russells-hall-england.aspx>

⁴⁰ Best, R. and Porteus, J., Housing our Ageing Population: Plan for Implementation, (November 2012) , All Party Group on Housing and Care for Older People, page 21

⁴¹ Best, R. and Porteus, J., Housing our Ageing Population: Plan for Implementation, (November 2012) , All Party Group on Housing and Care for Older People, page 20

http://www.housinglin.org.uk/Topics/browse/Design_building/HAPPI2/?parent=8649&child=8650

⁴² Marina Court, <http://www.housingcare.org/housing-care/facility-info-88056-marina-court-tewkesbury-england.aspx>

⁴³ Personal Communication with Clanmil Housing, 6th February 2014

⁴⁴ The Savoy, Bangor, <http://www.housingcare.org/housing-care/facility-info-87083-the-savoy-bangor-northern-ireland.aspx>

⁴⁵ Personal Communication with Fold Housing Group Marketing Assistant, 13th February 2014

- *Sheltered housing* – (independent living for active older people). This provides safe and secure social rent accommodation with on-site staff delivering a low level housing support (but not personal care) and 24 hour telecare alarm system. Fold have sheltered housing schemes in most towns in NI, for example, Spafield Fold⁴⁶ in Holywood which was built in 1981 and has 41 flats in sizes 1 bedroom and 2 bedroom. It includes mobility and wheelchair standard properties and has resident management staff and community alarm service. There is a lift, lounge, dining room, laundry, guest facilities, a garden and hobby room.

- *Supported Housing* - such as Fold's flagship scheme at Barn Halt Cottages in Carrickfergus offers a unique model of housing and support services and incorporates the latest in assistive technology. This development was built in 2007 and has 26 one and two bedroom bungalows for those aged 60 and over, visiting management staff (staff on duty 7.30 to 10pm), community alarm service, lounge, laundry, guest facilities, a garden, activities room and hairdressing salon. It has a good social activity programme and outings organised by support staff.⁴⁷

- *Housing with Care* – such as the Fold Loughview Scheme in Holywood offers social rent housing and 24 hour residential care and support to frail elderly and dementia clients. It was built in 1992 and has 49 one and two bedroom flats. It includes wheelchair standard properties. It is a Housing With Care scheme (24 hours / 7 days), non-resident management staff and community alarm service. It also has a lift, lounge, dining room, laundry, guest facilities and a garden. It has regular social activities and new residents are accepted from 55 years of age

Oaklee Housing

Oaklee Housing highlighted Castlerocklands in Carrickfergus as a good example. It was opened in 2002 and is comprised of 12 two-bedroom self-contained apartments (lift access) and 14 two-bedroom bungalows. There are also communal facilities including a lounge and a communal kitchen to cater for social events. There are numerous activities at the scheme, including bingo, coffee mornings, inter-scheme visits, exercise classes and communal meals on special occasions. Just across from the scheme are shops, a gym, and restaurants.

Trinity Housing

Trinity Housing highlighted Elmgrove Manor in East Belfast (built in 2000) as an award winning good example of sheltered housing scheme that is well integrated into the local community. It is situated on the Beersbridge Road, Belfast opposite Elmgrove Primary School. Trinity Housing described Elmgrove Manor as “*a real hub of the community in*

⁴⁶ Spafield Fold, <http://www.housingcare.org/housing-care/facility-info-6842-spafield-fold-holywood-northern-ireland.aspx>

⁴⁷ Barn Halt Cottages, <http://www.housingcare.org/housing-care/facility-info-158063-barn-halt-cottages-carrick-northern-ireland.aspx>

*East Belfast and the tenants are supported to be active in the community through various initiatives including intergenerational projects*⁴⁸.

The accommodation comprises of 27 one-bedroom one-person flats, 8 one-bedroom two-person flats and 2 two-bedroom two-person flats. The scheme has a resident Scheme Co-ordinator managing Old Manor House.⁴⁹

4.4 Use of Technology for Assisted Living

In NI, the TF3 consortium is the current provider of a Remote Telemonitoring Service ('TelemonitoringNI') to NI. The consortium, comprises Tunstall Healthcare, Fold Housing Association and S3 Group and is the largest provider of remote telemonitoring solutions in NI.

The contract was awarded by the European Centre for Connected Health (ECCH) in the Public Health Agency of Northern Ireland and TF3 began implementation of remote telemonitoring services for people with heart and respiratory conditions, diabetes and those who have suffered a stroke, from March 2011.⁵⁰

The contract provides remote telehealth monitoring services to patients suffering from chronic conditions and by January 2013, the service had benefited over 1400 patients with long-term conditions in NI, helping them to better manage their health. The service enables nurses to remotely monitor patients' vital signs such as blood pressure and weight on a daily basis in their own home, where previously they would have had to travel to their GP or hospital.⁵¹

The contract also provides for additional services such as Telecare to be implemented. More than 1700 users have benefitted from Telecare. This has been done within each Health and Social Care Trust area with different access pathways and delivery models ranging from users with long-term-conditions, dementia and learning and physical disability to supporting reablement.⁵²

In another example of use of technology, Delivering Assisted Lifestyles Living at Scale (DALLAS)⁵³ is a UK programme aimed at transforming the lives of people through the use of innovative technology to improve well-being and increase independence. The programme is jointly funded by the Technology Strategy Board (TSB), the National Institute for Health Research and the Scottish Government. Through an open

⁴⁸ Personal Communication with Trinity Housing, Corporate Services Officer, 13th February 2014

⁴⁹ Elmgrove Manor, <http://www.trinityha.org/housing-info/2009/10/20/elmgrove-manor/>

⁵⁰ Northern Ireland Chooses TF3 Consortium, <http://www.tf3consortium.com/news/northern-ireland-chooses-tf3/>

⁵¹ TF3 supports Northern Ireland Connected Health and Prosperity Event at European Parliament, <http://www.tunstall.co.uk/news/333/tf3-supports-northern-ireland-connected-health-and-prosperity-event-at-european-parliament>

⁵² Telecare NI Telecare and use of assistive technology / Department of Health, Social Services and Public Safety, <https://webgate.ec.europa.eu/eipaha/initiative/index/show/id/216>

⁵³ DALLAS Programme, Service in partnership, http://www.imerseyside.nhs.uk/Innovations/delivering_assisted_lifestyles_living_at_scale.aspx

competition, four partnerships (consortia) secured a contract with the TSB and have been tasked with running this large scale innovation programme and testing it with communities throughout the UK.

Liverpool's 'Feelgood Factory' was one of the successful partnerships that encourages people living in Liverpool to plan for their future in order to better manage their health and social care needs, supported by Life Enhancing Technologies (LETs.) The consortia partners include Liverpool Primary Care Trust, Liverpool Community Health, Liverpool City Council, Riverside Housing and on the technology side - Philips, Tunstall and Informatics Merseyside.

The Feelgood Factory aims to make better use of existing, and deploying further, telehealth equipment and using technology to design lifestyles and home environments around individuals to support them to live at home for longer.

4.5 Use of Proactive Healthcare in Sheltered Housing

One case study from NHS England highlights the good practice of Solent NHS Trust which provides on-site health clubs for residents of supported housing run by local health and social care teams. Solent NHS and NHS Southampton city worked with nursing management, residents, wardens, carers and other accommodation staff to set up each health club. The clubs provide proactive rather than reactive healthcare, offering treatment and advice in a non-clinical, friendly environment. Patients are monitored and given advice about medication, lifestyle and prevention of falls.

In 2010, the first health club set up was "responsible for a 50% reduction in GP visits and an 8% reduction in hospital admissions compared with normal case management. Improvements were shown in conditions such as chronic leg ulcers and hypertension and on average 10 district nurse visits were saved per week across all health clubs.⁵⁴

Solent NHS Trust have been contacted by RaISe for current information on the health clubs.

5 Some Issues for Consideration

The Westminster All Party Parliamentary Group (APPG) on Housing and Care for Older People (HAPPI 2, 2012), highlighted their concern that more had not been done since the 2009 HAPPI Report but noted a range of obstacles to progress in the further development of specialist housing for older people, including⁵⁵:

⁵⁴ Solent NHS Trust, Case Studies,

www.institute.nhs.uk/case_studies/nhs_live/establishing_health_clubs_in_supported_housing.html

⁵⁵ Best, R. and Porteus, J., Housing our Ageing Population: Plan for Implementation, (November 2012) , All Party Group on Housing and Care for Older People, page 14

- Capital finance is harder to secure with reductions in grants for housing associations and greater difficulties for all providers in borrowing from banks and other lenders;
- In providing homes for sale, there are uncertainties about the market – prices must reflect the higher space standards and cover the costs of shared communal areas and the expense of acquiring sites for building close to local amenities;
- For social housing – maintaining suitable rents can be difficult due to extra service charges for communal facilities while alternative revenue streams (such as Supporting People grants) are harder to come by; and
- Welfare reform has brought uncertainties.

Clanmil Housing Association Ltd highlighted to RaISe one of its perceived current problems in NI regarding sheltered accommodation. The assessment of requirement for sheltered/supported living is carried out by the NI Housing Executive. Once a client is assessed as having such a need a place is sought in a sheltered housing development. The Housing Associations have no control over the type of client that they are required to house and are seeing an increase in the number of clients with complex needs, including not just older people with anything up to 5 packages of care in place, but also younger clients with addiction and mental health problems.

This means that sheltered accommodation originally designed with the independent older person in mind is becoming a 'catch-all' used to house those with many needs and this impacts on other residents (for example, noise due to care workers coming in and out 24/7). In addition, employees of the Housing Associations may not be equipped to provide services for those with such needs.⁵⁶

⁵⁶ Personal Communication with Clanmil Housing Association Limited, 6th February 2014