

# Executive Summary

## Introduction

Derby City Council wishes to meet the housing aspirations of older people living in Derby and is committed to ensuring that they have decent homes to live in and properties which will enable them to secure and maintain their independence wherever possible.

This Housing Strategy for Older People in Derby has been developed in response to the Government's requirements detailed in "Quality and Choice for Older People's Housing – A Strategic Framework". It provides a local framework for the future direction of housing solutions for older people who are owner-occupiers, renting privately and those living in social housing provided by Derby Homes, the City's Arms Length Management Organisation (ALMO) and other Housing Associations in Derby.

The development of this strategy was overseen by a steering group, which included representation from Derby City Primary Care Trust (PCT), Derby City Council Adult Social Services and Housing and Advice Services. In addition, older people's groups, such as the Derby Seniors Forum were consulted during the development of the strategy.

The implementation of the strategy is detailed in the 'action plan' that will run from 2007 to 2010 and has prioritised the objectives to be achieved. It allows for flexibility to adapt to changing needs, trends and legislation. It is proposed to monitor and evaluate the progress made annually and publish these findings on an annual basis.

The strategy complements work that has been done on other housing strategies including the City's Housing Strategy, Black and Minority Ethnic (BME) Housing Strategy, the City's Supporting People Strategy 2005 –2010, the Southern Derbyshire Health Survey and the Derby Supported Accommodation Strategy which was published in October 2005. It also draws upon Derby City Council's Older Person's Study, which was produced by Keith Gordon Services in October 2003.

The City Council is determined to ensure that older people living in the City are able to secure and maintain their independence within their own homes and that a range of housing solutions will be available to enable them to make active and informed choices to resolve their housing problems.

The strategy focuses on the housing needs of people over the age of 50 including those with physical and sensory disabilities and mental health needs. It is recognised however that it is usually people over the age of 75 who have the greatest need for housing support.

## Overall, the key aims of this strategy are to...

- offer quality and choice of housing across all tenures and appropriate housing support to the older people of Derby to enable independent living where appropriate

- take account of the health and social care agendas of the Primary Care Trust and Adult Social Services. It has been written in consultation with stakeholders and residents in the City
- have action plans which are achievable and deliverable
- demonstrate our commitment to making sure older residents receive fair, accessible and appropriate services.
- respond to local needs and aspirations
- recognise, and take account of, recent work at a national level including The 20:20 Project – a vision for older people’s services (EROSH, ASAP, CSHS and NHF); Our health, our care, our say: a new direction for community services (Department of Health); The Big Picture – Older People (Housing Corporation); Independence. Well-being and Choice: Our Vision for the Future (Department of Health); Quality and Choice for older people’s housing: a strategic framework (Communities and Local Government (CLG), formerly ODPM) and Excluded Older People (Social Exclusion Unit)

### **Issues and Trends**

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

- the number of older people in all age bands over 50 years is increasing
- the number of older people who have a physical and/or mental frailty is increasing
- the number of older people who are owner-occupiers is increasing
- most older people want to stay in their own homes where possible
- the expectations and aspirations of older people are higher than before
- the reduction in residential care beds and lack of appropriate Extra-Care sheltered housing for frail and vulnerable older people is exacerbating the situation of delayed transfers from hospital to more appropriate settings

In addition, the issues which concern older people include:

- new homes being designed should take into account the needs of older people
- increased insulation and help with heating and other energy saving measures
- more independent living opportunities
- less waiting time for adaptations and equipment
- more flexibility and choice in housing, care and support options and clearer, co-ordinated information and advice on what is available
- high levels of reported isolation

## Key Areas

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

We have consulted widely with older people to get feedback to check on these priorities. The overwhelming consensus was that the proposed priorities accurately reflected the major concerns of older people in Derby.

## Quality Housing

Emphasising the importance of good quality housing and support services to ensure homes are warm, safe and secure.

Key outcome for this area:

- Decent Homes Standard to be achieved in all social housing in the City
- improved Housing Health and Safety Rating System standards in older people's homes who are owner-occupiers or renting privately
- ensure that assistance to keep homes warm is provided to the most vulnerable

## Aids and Adaptations

Ensuring that the provision of services promotes independence and is responsive to the needs and preferences of older people.

Key outcomes for this area:

- flexible service models to ensure that there are a range of options for older people to consider
- to have a range of new, appropriate technological aids available for older people in their homes to enable them to maintain and sustain independence where possible
- use existing resources more effectively
- ensure effective assessment and recommendations made to assist maintaining independence and dignity

## Information and Advice

Ensuring that information, advice and advocacy is accessible and available for professionals and older people themselves on the range of housing and support options and/or solutions available.

Key outcomes for this area:

- improved quality and consistency of information about housing options which is fully accessible to all older people in Derby
- a greater sharing of ideas and initiatives across agencies to encourage new service models and provision

## **Sheltered Housing**

Providing a framework for service providers when they review their housing and service models to improve flexibility to meet changing needs and the aspirations of older people.

Key outcomes for this area:

- to develop Extra-Care Sheltered housing provision in the City to meet the needs of frail and vulnerable older people
- to continue to review the provision of sheltered housing in the City to ensure it reflects the changing needs of older people

## **Working together**

Improving the integration of services delivered by housing, health, social services and other agencies such as voluntary and private sector organisations to provide a seamless service and maximise existing resources.

Key outcomes for this area:

- to review the link between delivery of health and social care services and support services within sheltered housing
- more integrated service planning and service delivery
- establish co-ordinated support to help people manage identified risks to independence in their own homes

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

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# Derby Older Person's Housing Strategy

## 1. Need for a Strategy – The Challenge Ahead

1. The challenge of ensuring the future provision of appropriate housing solutions for older people in Derby is how to move from 'what we have now' to 'what should be available' in the next 5 to 10 years in order to meet the diverse needs and aspirations of older people. This strategy marks the first part of that step change process.
2. The changes in the composition and numbers of older people in relation to the local population requires a shift in the focus, resources and processes of local agencies.
3. National and local research shows that older people want to live independent lives as far as practicable but to receive appropriate levels of support to reflect their needs.

They particularly want more advice and information on the housing options and services available to them and want a coherent and co-ordinated response to their housing and support needs.

4. Nationally, the number of older people relative to the rest of the population is increasing. Office for National Statistics (ONS) projections state that in Derby, the number of people over 65 years old will increase by 13% between 2005 and 2015 and will continue to increase in the future. The fastest rate of increase will be in the over 80 years age group which will increase by 16% during this period. The proportion of black and minority ethnic (BME) older people is also increasing.
5. Older people are more likely to be home owners, live in 'unfit' housing and be more likely to experience physical and sensory impairments than people of working age. In addition, there are increasing numbers of older people with a learning disability, a mental illness or dementia, or with a history of homelessness requiring more appropriate housing.
6. The continued ageing of the population has particular implications for housing and health care. For example, there is a rising trend in hospital admission rates amongst people aged over 75 years which, in turn, has a knock on effect for hospital waiting lists and delayed discharges or transfer to other settings.

7. The level of resources available to meet the increasing levels of demand will always be finite, therefore making it essential...
  - a. that individuals and organisations are able to make informed decisions about the choices available to them
  - b. to prioritise older people's housing needs alongside other housing needs
  - c. to have clear priorities within older people's housing issues
  - d. to have good joint agency working to maximise and make best use of available resources

## **Development of the Strategy**

The development of this Housing Strategy for Older People has been undertaken with the involvement of, and consultation with, key stakeholders including older people themselves

The actions needed to achieve the changes required have been prioritised and are detailed in the action plan. This provides a framework flexible enough to adapt to any changes in legislation, needs and new initiatives to facilitate creative responses to opportunities as they present themselves

There is a changing policy context that has moved away from institutional provision in residential settings towards supporting older people in their homes within their communities, either in the homes they own or rent, or in sheltered housing. The focus is that of promoting independence, rehabilitation and prevention of accidents and hospitalisation and of ensuring that ageing is seen as a natural stage of life

## **Context**

This strategy encompasses the key priorities for older people at a national, regional and local level.

The Regional Housing Statement for the East Midlands provides a strategic framework for local authorities to develop their local housing strategy, and sets out priorities which include...

Regional Policy 1 - Increasing the quantity and improving delivery of appropriate high quality affordable housing for all communities

Policy 2 - Securing quality and choice for housing development

Policy 4 - Providing options for unpopular or unsuitable sheltered Housing Stock

Policy 6 - Decent homes in the social sector

Policy 10 - Assisting people to maintain their independence for as long as they wish

Policy 11 - Promoting healthy, safe and eco-efficient homes

The local policy framework includes:

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

In addition, the strategy also takes account of other local documents including the BME Housing Strategy, Housing Renewal Policy, Supporting People Strategy and the Supported Accommodation Strategy

## **The Vision**

Derby City Council wishes to meet the housing aspirations of older people living in the City and for them to have decent homes they can afford that meet their housing needs and the support needed to enable them to live in their homes.

The City is committed to:

- ensuring older people are able to secure and maintain their independence within their own home appropriate to their circumstances
- supporting older people to make active and informed choices about their accommodation by providing access to appropriate housing and services and by providing advice on suitable services and options
- the realignment of resources and an exploration of the potential to import successful initiatives adopted in other locations which are essential if Derby is to deliver imaginative and sustainable housing services for older people in the long term. Moreover, exploiting the opportunities offered by partnership and working closely with the independent sector are essential pre-requisites for meeting the challenge of a modernising agenda.

To achieve this, it is necessary to provide a framework which reflects a shift in service delivery away from what is predominantly a property centred approach to a person centred approach which ensures that:

- old age is regarded as a natural stage in life
- new policies promote choice, enabling older people to maximise their autonomy
- older people are enabled to retain their health and mobility
- Derby City Council and local agencies work closely together to ensure that there is a wide range of housing options available for older people to consider when making decisions about their future housing solutions
- the future direction of sheltered housing provision is able to meet projected need and anticipated requirements of all levels of dependency
- older people have a range of appropriate housing solutions and types of accommodation and choices of care in both the private and public sectors

### **Things to consider**

- in the future, a lot more older people will be living in Derby
- as they get older, most people would prefer, where possible, to live in their own home
- owner occupation is high amongst older people. In many cases, people have substantial equity tied up in their home, they have limited disposable incomes.
- older people, just like most other people in society, want independence and a choice of quality housing options
- new innovations such as Home Improvement Agencies, new technology and Extra Care are providing additional choice.
- when new dwellings are developed, they should be able to adapt to changing lifestyles, mobility and changes in technology to allow individuals to be supported in the home.

### **Due to these factors, the main drivers of this strategy are:**

- how do we help older people to stay in their own homes
- how do we make the best use of technology
- how do we make the best use of new housing options such as Extra Care.
- how do we ensure that older people receive the information that they need to make informed choices.



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

**Quality Housing** - emphasising the importance of good quality decent housing and support services to ensure that homes are warm, safe and secure and that social housing meets the decent home standard

**Aids and Adaptations** – ensuring that there are flexible service models and housing choices available to older people to consider to improve their housing options which will promote independence and that are responsive to their needs and preferences

**Information and advice** – ensuring that information, advice and advocacy is accessible and available for professionals and older people themselves on the range of housing and support options and/or solutions available

**Sheltered Housing** – providing a framework for service providers to review their housing and service models to improve flexibility to meet changing needs and the aspirations of older people including the development of Extra Care

**Joint working** – maximising the resources of the services delivered by housing, health, social services and other agencies such as voluntary and private sector organisations, to provide effective, efficient and seamless services

## 2. Older People in Derby

### Facts and figures about older people living in Derby

- Derby is the fastest growing city in the East Midlands, with a population of 233,200 (ONS 2003 mid year estimate). It is expected to grow by 0.6% each year for the next ten years.
- The number of older people living in Derby is set to increase at an even faster rate - by almost 30% in the next 20 years. This growth is projected to be particularly marked amongst the older groups (65+), whose total population is projected to increase from 37,400 in 2005 to 51,300 in 2025, an increase of over 37%.

	2005	2015 projection	2025 projection
<b>50-54</b>	12,900	16,400	13,900
<b>55-59</b>	13,400	13,600	15,900
<b>60-64</b>	11,300	11,900	16,000
<b>65-69</b>	9,900	12,200	13,800
<b>70-74</b>	9,100	9,900	11,200
<b>75-79</b>	7,900	8,000	9,800
<b>80-84</b>	6,000	6,200	8,500
<b>85+</b>	4,500	6,000	8,000
<b>Total</b>	75,000	84,200	97,100

Source: ONS population projections - Derby

The table below shows the projected percentage changes in numbers of older people in the Derby Unitary Authority area in 2005 and 2015 in the different age groups. The greatest percentage increase is seen in the 85 years and over age band, with an additional 33% projected from 2005 to 2015.

<b>Population of Older People in Derby UA 000's</b>			
	<b>2005</b>	<b>2015</b>	<b>% Change</b>
<b>AGES 65-74</b>	19.0	22.1	16.3%
<b>AGES 75-84</b>	13.9	14.2	2.2%
<b>AGES 85+</b>	4.5	6.0	33.0%
<b>All 65+</b>	37.4	42.3	13.0%

Source: ONS projections 2003

- The 2001 census shows 69.2% of people in Derby to be owner-occupiers, around 20% renting from the local authority or Registered Social Landlord and a further 10% in private rented accommodation

- Derby lies 58th out of 354 local authorities in terms of the 2004 indices of deprivation, with five wards falling in the 10 per cent most deprived
- The 2001 census shows 69,451 people over the age of 50 living in Derby, and of these:  
2.78% live in communal residencies  
34.49% live alone
- As mirrored by the overall national picture, isolation is a key problem identified by older people. Changes in circumstances, including reduced income, illness and bereavement all contribute to isolation. Isolation undermines well-being and contributes to failing physical and mental health.
- The Older People's Housing Study in August 2004 shows that 50% of Asian elders visit family, friends or neighbours on a daily basis. 50% of Pakistani older people and 36% of Indian elders said that they would consider sheltered housing near their place of worship. 36% of Indian elders and 25% of Pakistanis elders in the survey said they wanted a scheme with a warden who spoke their language.
- There is a significantly expanding older BME population in the City. The wards with the highest older BME population in the City, according to the 2001 census, are Arboretum and Normanton.
- This population is currently weighted towards the younger age groups, but is ageing.
- People aged 65 years and over currently form 16% of the Derby population. This percentage is projected to gradually increase over the coming years, with a projected 17.6% of the population in this age band by 2015. Projections suggest that there will be 43.3 thousand older people at this time, about 5,000 more than currently. This is a 13% increase over 2005.

The population projections for Derby show increasing numbers in all age-bands in the next decade but with striking higher percentages in the younger and older age-bands. This presents a challenging context for shifting the balance away from a focus on the frailest older people to a broader preventative approach with greater demands coming from both areas.

There are a range of services, such as the Care and Repair scheme, in the City to meet the needs of our older population to stay in their own homes, where possible or to move into sheltered accommodation or a care home where necessary. The City Council, with our partners, are also looking to provide additional forms of support such as through the provision of Extra Care. The City currently has no Extra Care provision, but the Council has established a corporate commitment to develop 240 Extra Care places over the next 3 years.

### 3. The key priorities

#### Quality Housing

##### Key priorities

- Reduction in the numbers of older people living in fuel poverty
- Reduce the level of unfit dwellings in the private sector and non-decent homes in the social rented sector
- Assess opportunities to assist older people living in under occupied housing

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

Unfit housing has a major impact on the health and social well being of people, however it is generally recognised that older, frailer and vulnerable people are more at risk of experiencing poor health due to bad housing conditions. For example cold homes exacerbate existing respiratory and pulmonary diseases among older people.

Derby's Affordable Warmth Strategy was launched in 2002 and progress reports are published annually. The Strategy aimed to tackle fuel poverty by: improving the energy efficiency of all homes in Derby; reducing fuel bills and maximising household income.

As at 31<sup>st</sup> March 2006, there were estimated to be 18,151 households in Derby suffering from fuel poverty. This is almost 10% fewer households than in 2001 as has been achieved mainly through the Warm Front grant and 'Derby Homes Pride' programme. However, recent increases in utility prices has put an even greater strain on people's ability to pay for the cost of fuel and so is a major concern expressed by older people.

The private sector housing market has a major role to play in providing decent and appropriate homes for older owner-occupiers and those who rent privately. The 2006 Private Sector House Condition Survey showed that approximately 27,200 dwellings were 'unfit'. The majority of these due to poor thermal insulation. In Derby non-decent dwellings are most associated with pre-1919 properties, the private rented sector and converted flats. Non-decency is also most common where heads of households are less than 24 years of age or those aged 60 and over, especially those aged over 85 years.

Derby's Private Sector Renewal Strategy sets out the priorities and programme of action to reduce the level of unfitness in the city's private housing sector and includes details of the Care and Repair service offered to home owners. Considerable resources are required to tackle the levels of unfitness and disrepair in the older housing stock and improve the living conditions for older people living in ordinary housing in the community.

In the social rented sector, we have committed significant resources to bring housing up to the Decent Homes Standard and in fact Derby Homes have already brought their housing up to this standard. This is a significant achievement and is significantly ahead of Government Targets. As at 1<sup>st</sup> April 2006, estimates show that there are still 61 'unfit' Housing Association dwellings in Derby.

A further issue to explore is the under occupation of larger housing by older people. A survey of 3,156 Derby Homes tenants in August 2006 identified that there is significant under occupation of dwellings. The definition of under occupation being that there are less people residing in the dwelling than the total number of bedrooms.

Whilst the survey was not exclusively targeted at older people, the majority of the 1,018 responses (56%) were received from people over the age of 60.

The issue of under occupation is important as evidence suggests that older people living in under occupied dwellings are often most at risk of fuel poverty and often "find a large property difficult to manage and would like to move to a smaller property" (Age Concern, paper to ODPM Select Committee Inquiry on Supply of Housing, November 2005).

Whilst the majority of older people surveyed stated that they had lived in their homes for a long time and wished to remain in their homes, 20.4% stated that they were looking to move house. Therefore, in taking this research forward it is necessary to consider what can be done to assist those people who wish to move to smaller accommodation to do so. This may include offering improved schemes to assist people in the upheaval of moving or provision of more appropriate accommodation, which more appropriately meets needs.

## **Aids and Adaptations**

### Key priorities

- Help older people to free up larger properties that may now be impractical for them by offering support and financial incentives to move to smaller properties.
- Promote the mechanisms for older people to use their own resources effectively where appropriate to improve their housing circumstances and conditions.
- More effectively utilise existing resources such as by, for example, identifying properties which have had aids and adaptations fitted in the past.
- Continuing to effectively utilise telecare. This will be achieved by providing a wider range of equipment and response systems to help manage the risks to independent living across all user and carer groups.

Derby City Council and our partners are committed to ensuring that the services provided promote independence and are responsive to the needs and preferences of older people.

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

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

Research undertaken as part of the Private Sector Stock Condition Survey and also a separate study of older person's housing needs, indicates that by far the most abundant and most needed adaptation is grab/hand rails. 50% of dwellings occupied by a resident with a disability either have or need this adaptation. When looking at the ratio of needs, the redesign of bathrooms (in particular level access showers) and kitchens and the need for lifts or hoists all show the highest proportion of need, compared to current provision. This is perhaps not surprising as these four adaptations are among the most extensive and expensive and are therefore less likely to have been carried out previously, due to financial constraint.

In both the private and social sector, demand for equipment is increasing, as is the need for more complex equipment to enable people to live independently in the community. The completion of an adaptation to an individual's home is an important aspect of their ability to maintain not only their independence but also their health and well-being.

An important element of this is to correctly identify existing adapted properties across the city and to ensure effective mapping so that these properties can be utilised correctly in assisting long term independence and well-being.

The use of improved technology, particularly SMART technology, is a valuable aid to enabling older people with varying levels of independence and dependency to remain in their own homes. However, it is also true to say that the implementation of a 'person centred approach' and the use of technology and particularly SMART technology would make it unnecessary for some older people to move because services and support could be provided to them in their own homes.

The policy context has moved away from institutional provision in residential settings towards supporting older people in their own homes thus supporting the promotion of independence and rehabilitation.

The increasing demand for equipment and particularly more complex equipment, and the demand for adaptations, far outstrips the resources available resulting in waiting lists for works to be completed. This creates particular pressures on social landlords such as Derby Homes with high proportions of elderly residents. The knock-on effect of this restricts and limits the ability of an individual to remain independent both in the short and long term. It is therefore essential to ensure that existing resources are maximised.

Many older people are 'capital rich and cash poor', i.e., the value of their property is quite significant but they have only a small income and are therefore dependent upon grants to adapt and/or improve their homes and also their quality of life. The Older Person's Research showed that 29% of older people had over £50,000 of equity tied up in their home. This figure is likely to have increased. Although, it is also true to say that a lot of older people tend not to see their home as having potential cash value to themselves and are generally more concerned about 'passing it on' to their families.

The limited housing options available and acceptable to previous generations of older people are becoming increasingly unacceptable to current and future generations. Older people have rising aspirations and expect to have increased choice and standards. They have a range of expectations, which may change as their dependency increases or their circumstances change. This might include staying at home following appropriate repairs and adaptations or moving to more appropriate housing, sheltered housing and/or residential or nursing care.

In addition, the financial incentives available for social housing tenants to move to a smaller and more appropriate property, which could make an adaptation unnecessary or reduce the level or cost of adaptation required are being reviewed in order to increase their effectiveness.

## **Information and Advice**

### Key priorities

- Improving the quality and consistency of information about housing options which is fully accessible to all older people in Derby
- A greater sharing of ideas and initiatives across agencies to encourage new service models and provision
- Increased signposting and referral on by housing agencies

Older people need advice on a wide range of issues linked to their housing needs and options, including advice on benefits, home safety and security. Good quality advice and assistance is essential if older people are to get help to prevent or alleviate problems of homelessness, debt, fuel poverty and poor or inappropriate housing. Good information will also ensure that older people can make plans for themselves.

The availability of effective and timely housing information and advice is a key factor to enabling older people to access the kind of housing, support and care that will meet their needs and preferences to assist them in planning for their future and choosing to move or stay at home. People's needs for housing, support and care vary and change throughout their lives. Although the most common area of advice sought is in respect of moving to alternative accommodation, evidence shows that most older people want to remain in their own homes.

Whilst some older people wish to move early in their retirement, others will wait until they are much older before they move to more supported housing where care and support is available. Specialist advice is needed to find appropriate accommodation with the right facilities and the appropriate level of care such as sheltered housing, extra-care sheltered housing or residential or nursing care.

Financial planning advice is becoming more important as a growing number of owner-occupiers would be able to unlock substantial capital resources by trading down on the housing market. Similarly, so is advice with regards to accessing equity release schemes as discussed earlier.

The second most common area of advice relates to disrepair, adaptations and related grants. It is essential that older people receive appropriate advice in order to assist them to consider all of the options available to them.

The problems and concerns experienced by older people are many and housing problems are often linked with other difficulties e.g. income issues or the need for care. It is difficult for any one agency to offer a full range of advice, advocacy and support. Very few agencies focus solely on housing advice for older people. Agencies can specialise in providing advice on particular issues, such as housing or for particular client groups such as older people. However, older people have expressed that it is not clear who they should contact about particular issues and often.

Sources of information for older people include family, friends, peers and professionals with whom they have day to day contact e.g. home carers, sheltered housing staff and day care managers rather than formal advice agencies. There is a need to target these key people with information about the availability of advice services and housing options. Currently, there is an identified lack of signposting to such services in the City.

Whilst information and advice are important, older people often have additional needs for advocacy, and for practical and moral support in dealing with their housing situation. Experience indicates that most people do not seek advice and information until a crisis occurs. They then have the added burden of having to find out where to go to get the information they need. In addition older people and in particular those over 75 years often accept the situation they are in and are not necessarily assertive.

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



The numbers of older people in the private sector and the levels of disrepair, would indicate an unmet need for good quality housing rights advice & advocacy. In addition the majority of older private sector tenants will be in protected tenancies, this may make them vulnerable to harassment, as landlords are unable to gain possession by legal means.

It is essential that the strategic planning process of the Health Trusts and Adult Social Services address the role and importance of housing information and advice in contributing to independent living and health improvement. There are specific issues involved in delivering advice and information on housing for older people from black and minority ethnic communities. Both nationally and at a local level there is evidence that some people from minority ethnic groups lack information on the range of housing options available and may not view mainstream services as being appropriate for them due to barriers such as discrimination.

There is a need for housing advice that recognises cultural and language needs, providing support from people who are aware of and sympathetic to their cultural situation and could provide an appropriate holistic service. It is important that the provision of information and advice is integrated and co-ordinated, available and accessible.

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

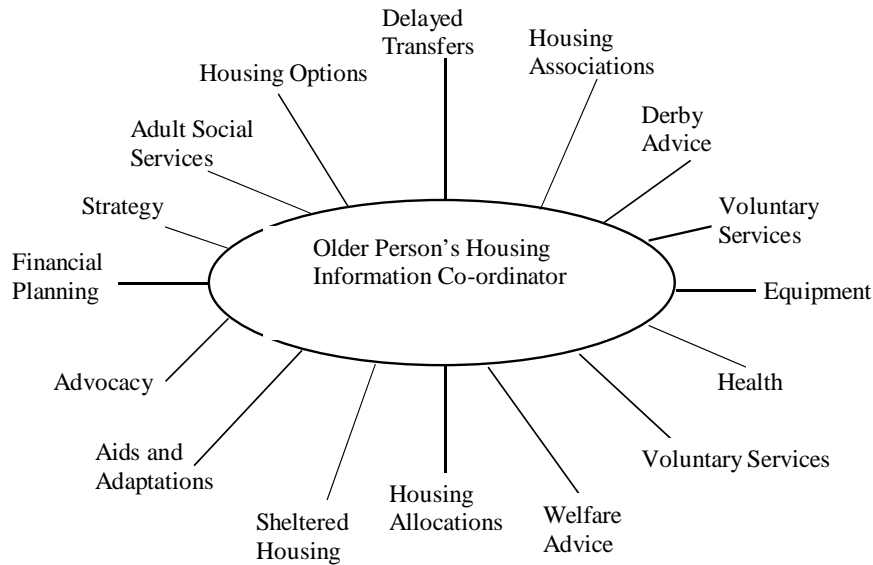
To improve the quality of housing advice targeted at older people, advice and advocacy services must:

- take account of the different needs of older people, including different tenures, care needs, ability and cultural aspirations and be available in different formats and languages
- be readily available and promoted so that well planned and informed decisions and choices can be made in advance of crisis situations
- be available in a wide range of settings and locations and be consistent and integrated

Housing, Adult Social Services, health and voluntary agencies need to:

- target information and publicity where older people go, e.g., post offices, day centres, libraries, GP Surgeries etc
- raise awareness of the housing advice services available among other professions
- develop outreach services encouraging face to face contact with older people
- work with older peoples agencies within the voluntary sector to understand the housing issues faced by older people and develop delivery systems for information and advice, including skills sharing and training.
- establish a one-stop shop agency for advice and signposting for older people
- to identify other appropriate locations used by older people and to take the information there

- to explore options for the introduction of a gateway for agencies, adaptations, financial advice, housing advice etc as described below



## Sheltered Housing

### Key priorities

- Provision of Extra Care accommodation
- To continue to review the provision of sheltered housing in the City to ensure it reflects the changing needs of older people
- To introduce appropriate care support models to Extra Care

The focus of sheltered housing is shifting away from 'housing for older people' towards:

- retirement housing for independent living for older people and
- specifically designed housing with support, Extra-Care sheltered housing, for frail and disabled older people and those with specific needs, such as dementia, a learning disability or a history of homelessness

The hospital admission rates amongst people aged over 75 years are rising whilst at the same time the number of residential and nursing home beds available locally is reducing with the continued closure of residential and nursing homes. The 'knock-on' effect is that there are now large numbers of older people waiting to be transferred from hospital to more appropriate settings and long waiting lists for people to be admitted into hospital. This is a critical situation and has highlighted the fact that 'sheltered housing' could play a valuable part in helping to resolve this situation.

Extra-Care Sheltered Housing is seen as a more appropriate setting for a number of frail and vulnerable older people who could retain their independence in a more supported environment. This would allow the limited residential resources to be used by those assessed as needing residential or nursing care. To this end, Derby City Council has established an initial target for the provision of 240 units of Extra Care in the City. There are cost benefits to such a solution. The individual is able to retain their income levels and it can be less costly for Adult Social Services and the health sector to maintain individuals in this type of setting and is therefore a more viable alternative to residential care.

The key factors differentiating sheltered housing from ordinary, general needs housing are that it:

- is designed and built with older people in mind
- is connected to an emergency alarm system
- has the services of a scheme manager or warden who either lives in or provides floating support

### **Range of Provision**

There are approximately 3,400 units of sheltered housing in Derby. Of these, around half are managed by Derby Homes and the remainder by other RSLs.

As illustrated in the Derby Supported Accommodation Strategy (October 2005) the vast majority of this accommodation is for rent in a mix of flats and bungalows. There are 199 leasehold flats and bungalows and a further 140 units of shared ownership accommodation. Around 49% of the RSL stock and 53.2% of Derby Homes sheltered housing is one bedroom accommodation. Bedsits account for 9.3% of the total accommodation.

A significant proportion of the sheltered housing provision available in Derby was built between the 1960s and 1980s and as such some of the design features are outdated, and not compatible with promoting independent living. For example, many are very small or are bed-sits or studio style flats having shared bathroom facilities and a significant number of schemes do not have lifts making most of the dwellings inaccessible to disabled and frail older people. As a consequence there have been difficulties in letting some of these properties and at March 2002 11% of all the sheltered accommodation in the city was void.

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

Support services provided within a sheltered housing scheme are not currently available to other older people in the locality although wardens based at some schemes do provide support to other schemes that they are linked to.

Tenants in sheltered housing in Derby, in whatever type of scheme they are in, are connected to a variety of Alarm Services including the Carelink service which is operated by the City Council and gives 24 hour access to emergency assistance/support.

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

### Geography

- There is limited choice in some parts of the City
- The location of some schemes is too isolated or distant from amenities

### Design of Schemes

- The designs are outdated and often not appropriate for the needs of older people today, i.e., room sizes are often very small making it difficult for older people with walking aids to move about easily; bed-sits are generally not popular and most older people given the choice would prefer a separate bedroom and many would prefer two bedrooms, which would allow them to accommodate visitors.
- Some schemes do not have a lift thus making the dwellings on the upper levels inaccessible to older people with mobility problems.

### The Processing of Applications

- Older people applying to the Housing Register or seeking a transfer from their current council or housing association property are usually only offered sheltered housing because it is seen as being the only housing option available for older people regardless of their needs
- There are insufficient incentives to encourage older people to 'down-size' from a large and possibly under-occupied property. There are alternatives to sheltered housing such as 1 bed-roomed houses, 2 bed-roomed and/or ground-floor flats. In addition Registered Social Landlords have some developments such as bungalows and 2 bed-roomed properties more specifically targeted towards older people to encourage them to relinquish larger properties.

### Sheltered Housing for Intermediate Care

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

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

### Engagement of the Private Sector

- Many privately owned residential care homes are closing and there is concern that the sale and development of these properties does not ensure that some alternative provision is made for frail older people.
- There needs to be better linkages between sheltered housing and residential care provision, in the geographic areas where these two services are located, to provide a continuum of care and support to older people in their locality, regardless of tenure.
- The role and function of sheltered/Extra-Care sheltered housing needs to be up-dated to reflect the needs and aspirations of older people today and tomorrow, to be accessible to older people with additional needs and to be a suitable alternative to residential care

### **Extra care housing**

Extra care housing provides extra support whilst enabling people to live as independently as possible and retain their own tenancy. This is for older people who are physically or mentally frail and need extra help to manage, and who might otherwise need residential or nursing care. It is for older people with both physical health and mental health difficulties, either living on their own or with a partner. The aim is to promote independence as much as possible, while offering access to on-site care to meet needs flexibly 24 hours a day. There are staff available to offer care at particular agreed times, but the resident maintains control as they have their own front door.

Within the City of Derby, there is an emerging recognition of the important role that extra care housing has in meeting the needs of older people in the community. As such, we have made it a corporate priority to develop this type of provision. For the three years of 2007-9, we will work with partners to develop at least 240 units of Extra Care through new build developments and refurbishment of existing schemes, such as unpopular sheltered housing developments.

This priority has been introduced due to a range of emerging factors, not least...

- To improve the health and welfare of an increasingly older population
- To increase the range of housing and care options available to older people
- To enable older people to remain as independent as possible
- To reduce the traditional reliance on residential care
- Due to a growing belief that traditional sheltered housing often no longer meets the needs of older people

- To reduce the need for hospital admissions through the support provided in Extra Care housing
- To ensure that appropriate support is provided to residents

Though quantifying specific demand for Extra Care housing is problematic, Derby's recently produced Sheltered Accommodation Strategy suggests that Derby should set a target to develop between 250 and 400 units of extra care. Based on this figure, we have established an initial target of 240 units of extra care to be developed over the next three-year period (2007 – 2009). We will continue to establish mechanisms for the development of additional units in the future.

The progression of Extra Care, both in regards to the development of the initial tranche of 240 units and thereafter, will be driven by the Derby Extra Care group, which includes representation from a range of key stakeholders in Derby, including Housing, Adult Services and the local Primary Care Trust. This will ensure that the delivery of Extra Care has adequate focus by all appropriate bodies.

- Within sheltered housing there are a wide range of options to be explored including the possibility of new build schemes and re-modelling of existing sheltered housing schemes. There is a lot of sheltered housing in the City, most of it owned by the City Council and managed by Derby Homes. However there is hardly any provision for certain key groups, particularly the more dependent and frail older person, such as those with a dementia or a learning disability.
- The Derby City Primary Care Trust and Adult Social Services see the development of extra-care sheltered housing as a major component of the inter-agency care strategy. At present there is unprecedented pressure on both hospital beds and nursing and residential care.
- In the past the changes in approach to providing services for the levels of dependency has increased in all settings in an unplanned way with no compensatory funding or training to help staff cope.
- Adult Social Services and the Derby City PCT have been working together to try and slow the dependency of older people in a number of key ways, e.g., such as to build up the staffing of residential care so it is able to care for older people who traditionally would have been cared for in hospital. As a result care is available in a more homely setting at a lower cost, resulting in more care per £ spent overall.
- In the same way there is potential to build up the staffing and the capacity of sheltered housing to cope with dependency levels cared for hitherto in residential care. Such an approach would be in line with the philosophy of Supporting People and maximise the use of joint funding opportunities. The PCT and Social Services would be involved in the staffing and training processes, including the review of roles of visiting staff and staff based at the scheme.

- By raising thresholds of dependency at each stage of the care continuum in this way beds are freed up in all services and costs are saved, but most importantly the risk of institutionalisation is reduced and avoided for some.
- A number of local authorities have designated existing care schemes or new build schemes as 100% extra-care in order to benefit from economies of scale. Some authorities, such as Hackney and Wolverhampton, have closed their in-house residential care homes and re-provided for this group within extra-care sheltered housing.
- Several authorities have involved Registered Social Landlords (RSLs) to build or convert schemes and then either provided care in-house (by the Local Authority or the Registered Social Landlord) or if it is 24 hours care used an independent provider.
- Derby Adult Social Services are committed to reducing the number of older people entering residential care and identify the provision of extra-care sheltered housing as a cost effective alternative.
- Work is currently being undertaken to identify the levels of residential and nursing care beds needed in the City and the levels of need for additional extra-care sheltered housing. The City currently has a corporate priority to provide 240 units of Extra Care over the next three years. As part of this we have already had success in being awarded £3.8 million of Department of Health funding for the development of a 38 unit new build extra care scheme and we are currently working with partners to identify further opportunities

## Working Together

### Key priority

- More integrated service planning and service delivery

Policies and developments in housing and housing related services are not isolated from other policies, such as social care, health, community safety, regeneration and planning. It is essential that any new Joint Strategic Structures include appropriate representation from the relevant housing divisions in Derby City Council, that there are clear lines of communication between these divisions, Social Services and health agencies as well as others, such as, planning, transport and leisure.

For joint working to be successful it is important that joint training takes place to ensure the different agencies understand each others roles and responsibilities, their priorities and constraints.

A more radical approach to the development and delivery of services for older people will inevitably involve changes to the way agencies work together in the future. Already, such changes are taking place in Derby for instance the Corporate and Adult Social Services Directorate of Derby City Council was recently merged with the Housing and Advice Services Division from April 2007.

The values and cultures of organisations need to change to bring about a different mind-set both within and between organisations and individuals to adapt to a 'holistic', 'whole systems' 'person centred' approach, which will involve older people in the development and delivery of services.

Such an approach will ensure more integrated user-led services and help to remove the barriers that have made joint working difficult hitherto.

Joint working is recognised as being an effective means to help facilitate the provision of appropriate services and to maximise the effect of the limited resources available. In addition, it presents the opportunity to develop joint visions and priorities thus ensuring that the needs of older people are accorded priority in relation to others.



## Action Plan – The Way Forward –

<b>QUALITY HOUSING</b> – emphasising the importance of good quality housing and support services to ensure homes are warm, safe and secure				
<b>Objectives and outcomes</b>	<b>Action</b>	<b>Target date</b>	<b>Lead officer</b>	<b>Outcome measure</b>
Ensure that assistance to keep homes warm is provided to the most vulnerable	1,000 households to be taken out of fuel poverty each year over the next 3 years	31 <sup>st</sup> March 2010	Richard Murrell	Total number of households in fuel poverty to reduced from 18,000 to 15,000.
Decent Homes to be achieved in all social housing in the City	Working with all social housing providers in order to reduce the number of non-decent housing in the City	31 <sup>st</sup> March 2010	(Government target to be monitored by Derby City Council Housing Strategy and Development Unit)	No social housing which fails the decency test
Increase the number of vulnerable households in the private sector to live in homes which meet the Decent Homes Standard (also targeted under Public Sector Agreement 7 (PSA7))	Increase % of vulnerable households in the private sector to live in homes which meet the Decent Homes Standard to 70%	31 <sup>st</sup> December 2010	Martin Gadsby	% of vulnerable households in the private sector living in homes which meet the Decent Homes Standard to (2006 baseline figure – 59.9%)
Services marketed and targeted at older people	Continue to market Care and Repair and handypersons services to older people	Ongoing	Henry Cipcer	Continued usage of Care and Repair service
Opening up equity release opportunities to older people	Continue to market equity release through the HouseProud scheme and review outcomes	Ongoing	Henry Cipcer	Continued marketing of equity release scheme through HouseProud
Providing more opportunities for older people in under occupied dwellings to move to more appropriate accommodation	To assess current under occupation assistance schemes offered by Derby Homes and identify opportunities to improve	December 2007	John Sheil	Assistance schemes to under occupiers reviewed and improved where appropriate

<b>AIDS AND ADAPTATIONS</b> - ensuring that the provision of services promotes independence and is responsive to the needs and preferences of older people				
<b>Objectives and outcomes</b>	<b>Action</b>	<b>Target date</b>	<b>Lead officer</b>	<b>Outcome measure</b>
Help people to live independently using telecare grant money, with a sustainable plan for 2008 onwards.	Use telecare grant money to raise the volume of telecare equipment, the range of equipment and the number of target groups	End March 2008	Trevor Wright/ Anne Brown	Telecare grant money utilized to increase volume of telecare equipment
	Establish a project to sustain improvements made to services, as a result of grant funding	Post March 2008	Mark Menzies	Project established
Identify existing aids and adaptations in properties and assist in matching suitable applicants to suitably adapted dwellings	Establish database of adapted dwellings for Derby Homes Establish database of adapted dwellings for Housing Associations Investigate opportunities to work with private sector landlords to establish a database of adapted dwellings Utilise information to match suitable applicants with suitably adapted dwellings	April 2008	Sam Narroya	Database of adapted dwellings established and utilised

<b>INFORMATION AND ADVICE</b> – ensuring that information, advice and advocacy is accessible and available for professionals and older people themselves on the range of housing and support options and/or solutions available				
<b>Objectives and outcomes</b>	<b>Action</b>	<b>Target date</b>	<b>Lead officer</b>	<b>Outcome measure</b>
Improved quality and consistency of information about housing options which is fully accessible by all older people in Derby	Multi agency group to be established to identify opportunities to establish a city-wide information signposting service and review information services for older people	July 2007	Overseen by Derby Older Persons Strategic Planning Partnership	Multi agency group established
Explore opportunities to establish a drop in centre for use by older people in Derby City Centre	To assess opportunities to provide a 'drop in' facility for use by older people in Derby City Centre in order to access information and advice	Feasibility study undertaken by September 2007	Jenny Appleby, Project Manager, Corporate and Adult Services	Assessment undertaken to assess opportunities for city centre drop in facility
Identify funding opportunities for pilot information signposting services for older people	To work with partner agencies to identify the various funding streams to provide funding for information signposting services	Ongoing	Trevor Wright	Funding received to establish older peoples information signposting services

<b>SHELTERED HOUSING</b> – providing a framework for service providers when they review their housing and service models to improve flexibility to meet changing needs and the aspirations of older people.				
<b>Objectives and outcomes</b>	<b>Action</b>	<b>Target date</b>	<b>Lead officer</b>	<b>Outcome measure</b>
To provide Extra-Care Sheltered housing provision to meet the needs of frail and vulnerable older people	Provide 240 units of Extra care accommodation by 2010	31 <sup>st</sup> December 2010	Andrew Humberstone,	240 units of Extra Care Housing available to Derby's residents
Ensuring the appropriate provision of sheltered housing in the City	To continue to review the provision of sheltered housing in the City to ensure it reflects the changing needs of older people	Ongoing	Andrew Humberstone	Continued review of sheltered housing stock
Ensure effective marketing of sheltered housing	Work with and through sheltered housing providers to jointly promote sheltered housing and produce joint marketing arrangements	December 2007	John Sheil	Joint marketing arrangements produced and agreed

<b>WORKING TOGETHER</b> - Improving the integration of services delivered by housing, health, social services and other agencies such as voluntary and private sector organisations to provide a seamless service and maximise existing resources.				
<b>Objectives and outcomes</b>	<b>Action</b>	<b>Target date</b>	<b>Lead officer</b>	<b>Outcome measure</b>
More integrated service planning and service delivery	To review services undertaken by Housing, Health and Adult Social Services to ensure that the promotion of health and the well being of older people are incorporated into the community regeneration process through the appropriate 'partnership' arrangements of the Local Strategic Partnership.	Ongoing	Overseen by Derby Older Persons Strategic Planning Partnership	Services delivery more integrated

## **Appendix One**

### **DERBY CITY COUNCIL:** **THE OLDER PERSONS HOUSING SURVEY**

#### **SECTION ONE**

##### **1.0 INTRODUCTION**

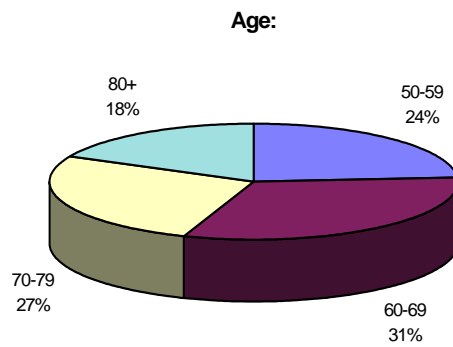
During the late Summer and early Autumn, 2003, we conducted the Older Persons Housing Survey which consisted of 431 in-home surveys. Professionally trained interviewers who had sensitivity training for this particular type of respondent and had local knowledge undertook the interviewing.

##### **1.1 The Sample**

The main constructs of the sample are Area of Residence, Age of Respondent and Ethnicity. The samples are shown below:

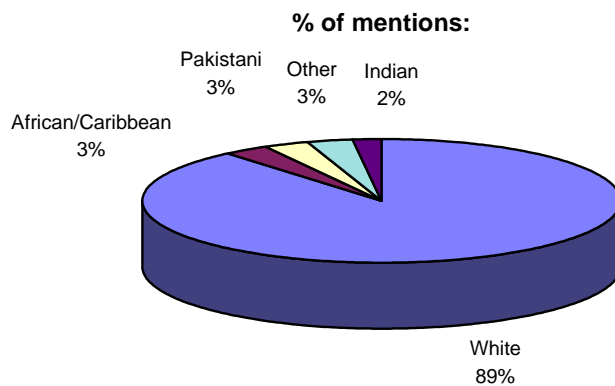
<b>Area</b>	<b>Number of Interviews</b>
Allestree/Darley Abbey	30
Mackworth	31
Littleover/Mickleover	32
Normanton/Pearlton	52
Sinfin/Sunnyhill	31
Derby Central	32
Alvaston/Crewton	33
Derwent/Frank Whittle Road	32
Oakwood	30
Chaddesden	34
Spondon	30
Chellaston	33
Allenton	31
<b>TOTAL:</b>	<b>431</b>

### 1.1.2 Age of Respondent



Base: 431 respondents

### 1.1.3 Ethnicity of Respondent



Base: 431 respondents

## 1.2 This Report

The complete cross tabulations where every numerate response is stratified by Area of Residence, Age of Respondent and Ethnicity is shown in full in Section 3. It is preceded by an Executive Summary which focuses on the main whole sample findings in Section 2.

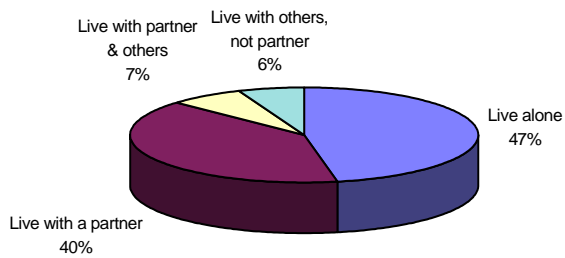
## **SECTION TWO:**

### **MAIN FINDINGS**

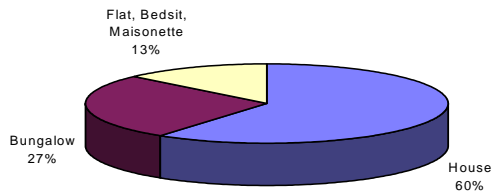
## **2.0 MAIN FINDINGS**

### **2.1 Description of Respondents (Base 431 respondents)**

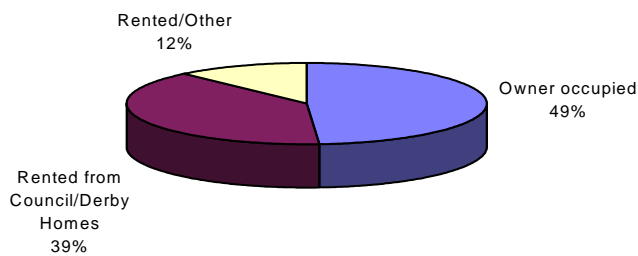
#### **2.1.1 Living Status**



#### **2.1.2 Household Type**



#### **2.1.3 Ownership of Property**



Normanton/Peartree had the highest proportion of owner occupied interviews (73%).

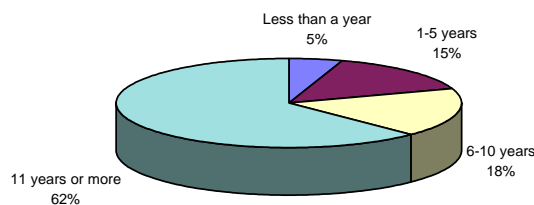
Chaddesden had the highest proportion of Council rented interviews (79%).

### 2.1.4 Bedroom Profile

Number of Bedrooms	%		
	Single Bedroom	Double Bedroom	Other rooms used as bedroom
None	36	13	99
One	60	23	1
Two	4	61	-
Three	-	2	-
Four	-	1	-

It is rare for other rooms to be used as a bedroom.

### 2.1.5 Longevity of Present Home Residency



The length of present tenure correlates closely with the age of the respondent.

## 2.2 Property Features

Respondents were asked if their property exhibited a number of features and were then asked to determine how necessary they felt those features to be. The table below indicates the percentage of respondents whose property exhibited the features and the percentage of respondents who believed the feature was necessary for them to inhabit the property.

Property Feature	%		
	A Possessing Feature	B Stating Feature Necessary	C Difference
Good quality	88	95	(7)
Cultural facilities	13	10	3
Religious facilities	27	16	11
Independence	87	92	(5)
Good security	82	91	(9)
Disabled facilities	22	29	(7)
Own bathroom	98	99	(1)
Own kitchen	98	98	-
Own garden	81	69	12
Internet access	9	4	5
Able to have pets	39	26	13



Figures in brackets ( ) indicate negative result

The final column in the table indicates those areas where the demand (necessity) for features is not present in the existing provision. The brackets indicate a negative result. Consequently it indicates that security, residence quality, disabled features and independence do not match residents' aspirations.

## 2.3 Services in the Locality

The table below replicates the process used for property features, but refers to services in the locality:

Property Feature	%		
	A Possessing Feature	B Stating Feature Necessary	C Difference
Good general appearance of the area	75	88	(13)
Local shops	83	81	2
Public transport	79	68	11
Low levels of crime	61	87	(26)
Near relatives	45	44	1
Cultural facilities	18	13	5
Religious facilities	30	16	14

Figures in brackets ( ) indicate negative result

The issues of crime levels and general appearance are of concern.

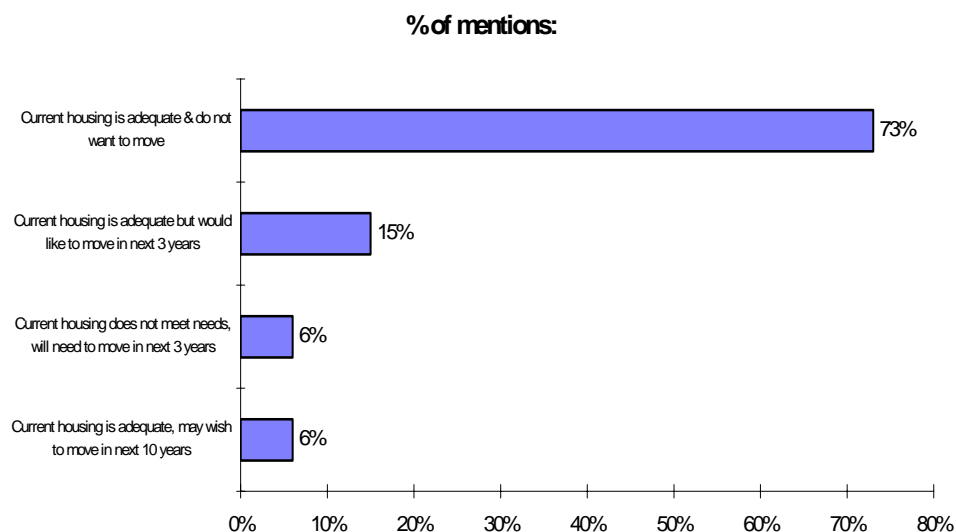
## 2.4 Features of Current Home

Property Feature	A Possessing Feature	B Stating Feature Necessary	C Difference
Access to Careline	19	20	(1)
Regular visits from health professionals	11	13	(2)
Pharmacy delivery service	11	12	(1)
Alarm system	20	23	(3)
Meals-on-Wheels	3	3	-
Support with household tasks	12	14	(2)

Figures in brackets ( ) indicate negative result

The variation in percentages are small, indicating a reasonable match of facility to aspiration.

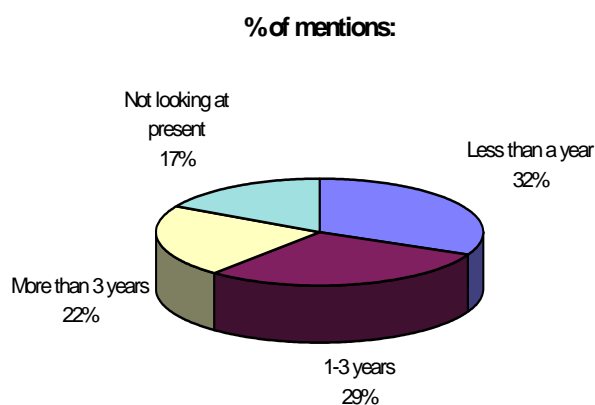
## 2.5 Adequacy of Current Household



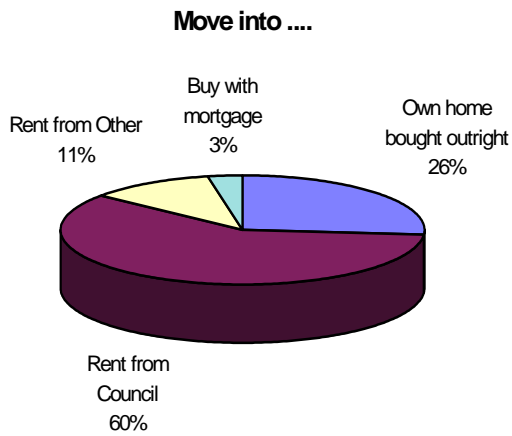
The vast majority of householders consider their current housing as adequate. Those requiring a move make that decision based on the size of their property; too big (22%), too small (15%). Negotiating stairs is seen as a problem for 22%. Gardening and repairs are other key motivations for moving. 17% felt disabled needs were not met.

## 2.6 Respondents Who Seek to Move (Base 115 respondents)

### 2.6.1 Length of Time Looking to Move

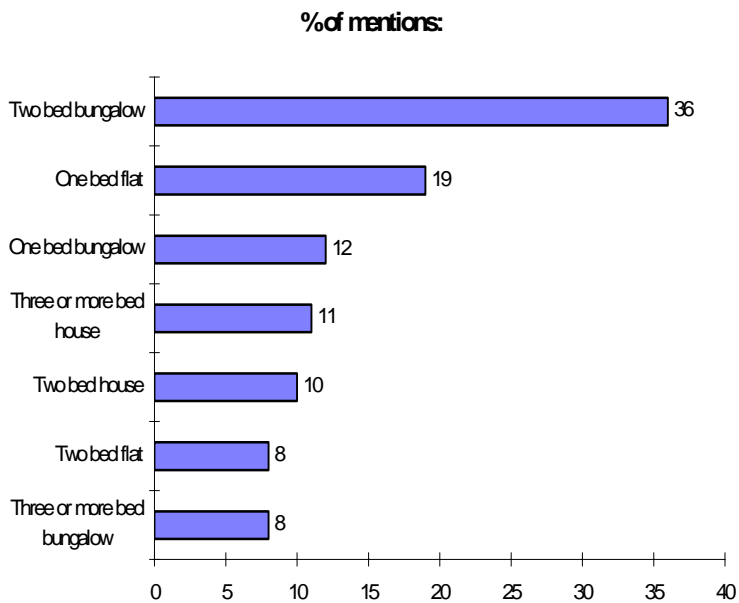


## 2.6.2 Ideal Move



Most believe their actual behaviour will match their ideal move expectation.

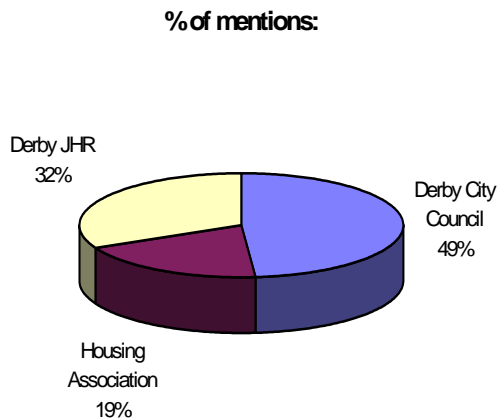
## 2.6.3 Ideal Properties



Clearly, the two bed bungalow is most favoured (36%) but only 19% believe that they will satisfy that ambition.

#### 2.6.4 Steps Taken by Households who Seek to Move

64% (73 respondents) have put their name on the Council/Housing Association waiting/transfer list. The actual list entered is shown below:



#### 2.6.5 The Ideal Move

The three most popular locations were:

- Mickleover (17.4%)
- Littleover (17.4%)
- Allestree (13.9%)

Proximity of family and the nature of the neighbourhood are the main motivators in selecting a location.

#### 2.6.6 The Least Popular Locations

The three least popular locations were:

- Normanton (57.1%)
- Chaddesden (52.4%)
- Old Sinfon (42.9%)

The main negatives were that the areas were hostile and unsafe.

#### 2.6.7 Expectation of Moving

Residents are not sure in the main but 34% expect to move in the next 12 months.

#### 2.7 Caring in the Household

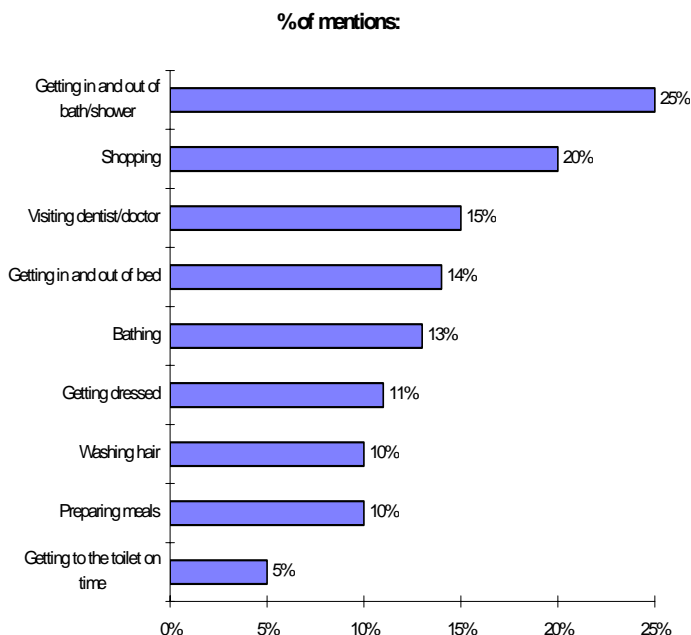
Only 6% of all respondents cared for anyone in their household.

## 2.8 Special Housing Needs

- 56% of households interviewed has special housing needs due to a long standing illness or disability.
- 14% of households had a member who would be described as frail elderly.
- 31% of households had a member with a physical disability.
- Less than 1% of the sample had a member of their household with a learning disability.
- 3% of households had a member with a mental health problem.
- None had vulnerable young people in their household.
- 5% of households had members with impaired sight.
- 6% of households had members with impaired hearing.
- 15% of households had a member with long standing illness or disability.

## 2.9 Specific Problems

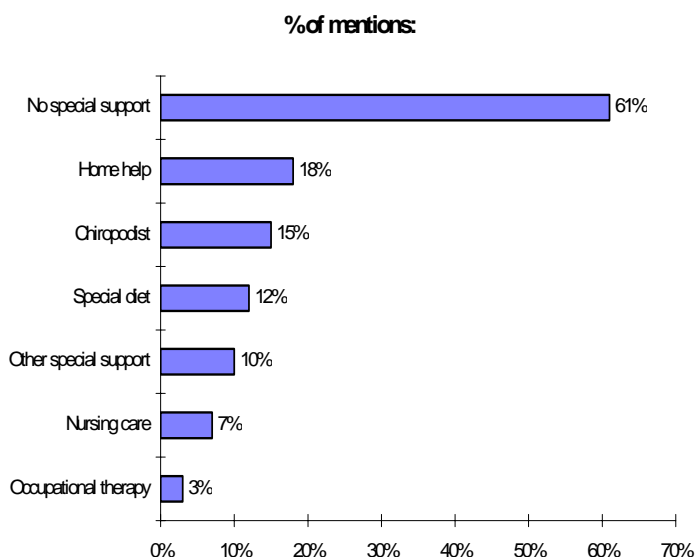
The data below indicates the percentage of households having a member with the specific difficulty named:



Only one respondent refused to give details of difficulties.

## 2.10 Specific Solutions

The data below indicates the percentage of households where the specific solutions are being adopted:



## 2.11 Special Features for Helping in Home (Base 202 respondents)

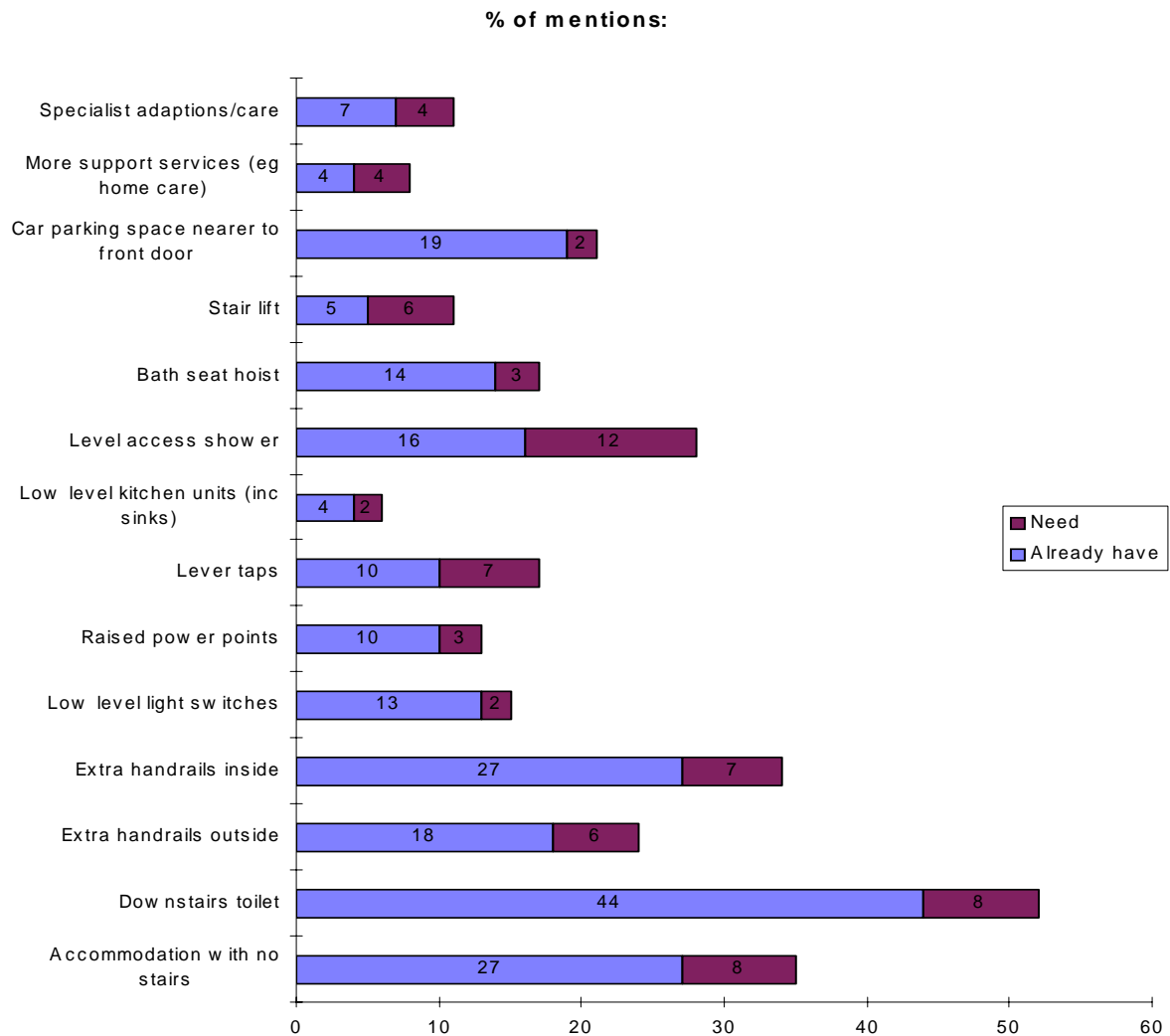
The respondent was asked about their personal need which was then extended to partners where appropriate:

	% Respondent			% Partner		
	Possess	Need	Will need in future	Possess	Need	Will need in future
Wheelchair	5	1	2	4	-	-
Walking aid	23	7	8	14	3	5
Hearing aid	3	1	1	3	1	2
Guide dog	-	-	-	-	-	-

There were 56 households where others, excluding respondent or partner, were housed. These results are shown in Section 3.

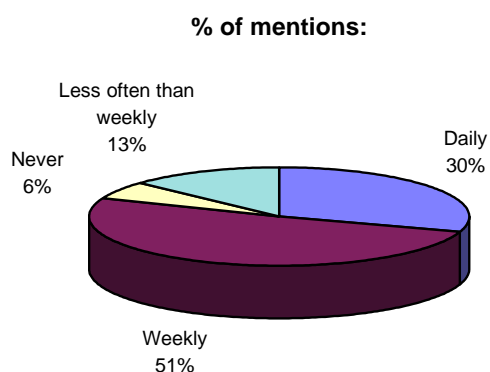
## 2.12 Other Needs Analysis

The percentages below indicate the numbers from the whole sample who claim to have the specific need:

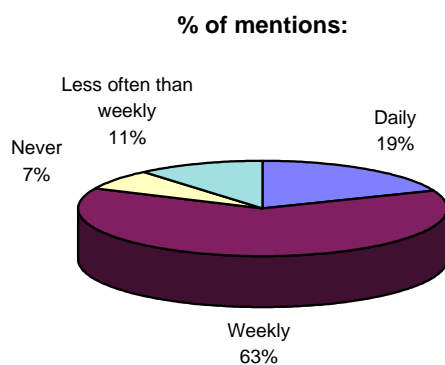


## 2.13 Social Interaction (Base 431 respondents)

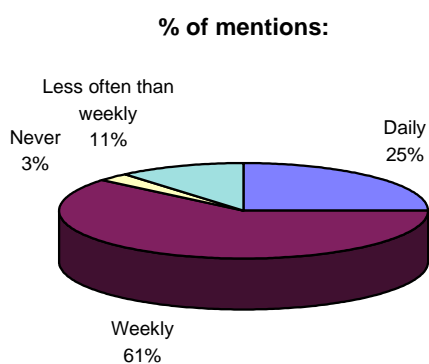
### 2.13.1 Frequency of Respondent Visiting a Relative/Friend or Neighbour



### 2.13.2 Frequency of Partner Visiting (Base 202 respondents)



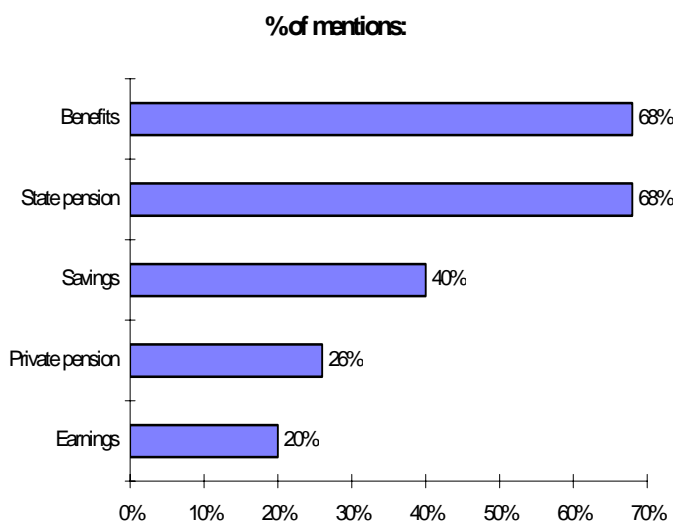
### 2.13.3 Frequency Household is Visited (Base 431 respondents)



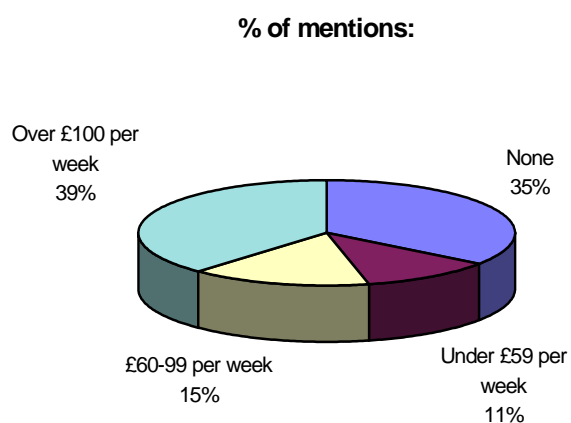
13% of visitors help with dressing, eating, bathing, etc.



## 2.14 Sources of Income (Base 431 respondents)



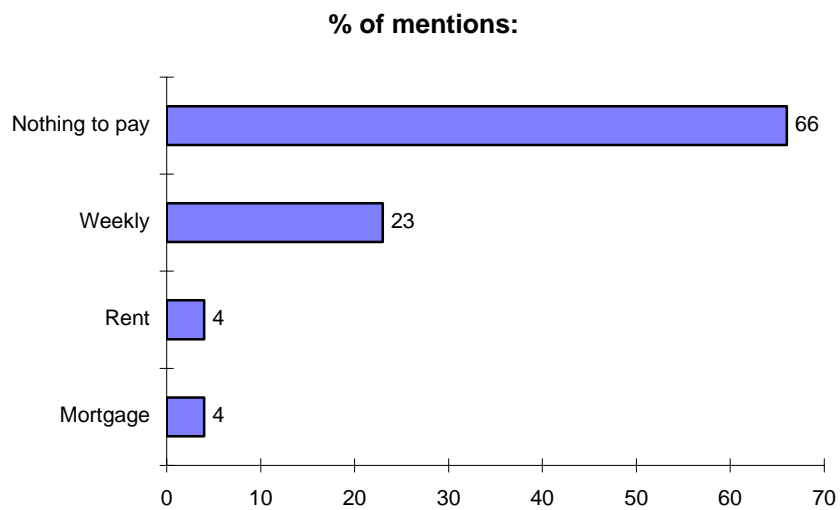
### 2.14.1 State Benefits Received



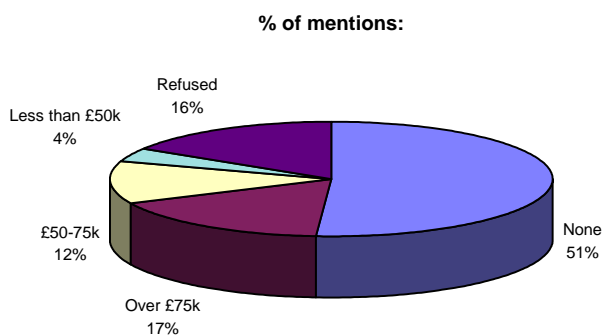
### 2.14.2 Savings

59% of the sample had no savings at all.

### 2.14.3 Method of Home Payment



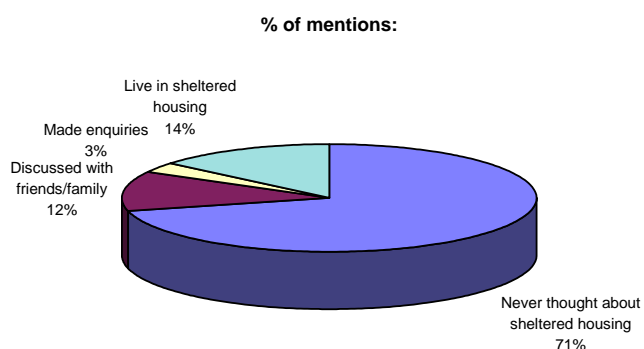
### 2.14.4 Equity in the Home



### 2.14.5 Payment Schedule

- If renting a home 46% would prefer a weekly rent; 26% would prefer a monthly rent. 25% did not answer.
- If buying a home 32% would prefer a weekly mortgage; 36% a monthly mortgage. 30% did not answer.
- Respondents were reluctant to give information on the maximum rent they were prepared to pay.

## 2.15 Sheltered Housing (Base 431 respondents)



As the age of respondents increases they are more likely to consider sheltered housing.

### 2.15.1 Likes/Dislikes About Sheltered Housing

The main likes/dislikes are compared below:

#### LIKES

- 24 hour assistance
- Support
- Independence
- Security

#### DISLIKES

- Lose independence

### 2.15.2 What would encourage you to think about moving into Sheltered Accommodation

Respondents were given a number of potential encouragements. The table below indicates those who believe they would be encouraged by the initiative:

	%
Safe and secure premises	46
Having care services available	38
Having residential support day and night	37
Having own flat/bungalow to rent	33
Smaller premises to look after	26
Benefits advice	18
Having active community within reach	18
Having transportation	17
Having own flat/bungalow to buy	16
Disabled facilities	16
Having older people as neighbours	16
Being able to share responsibilities for a garden	15
Meal services	13
Visiting health professional	13
Having stairlift, so no climbing needed	12
Having stairlift as unable to climb	11

## **Appendix Two**

### **Jargon Buster**

Action Plan	Sets out how something is going to be done and who is going to be involved.
Adaptations	Changes made to a property to benefit a disabled or older person. For example, putting in a walk-in shower, fitting a stair lift, fitting extra handrails, or making a ramp.
BME (Black and Minority Ethnic)	This is a term that is used to describe individuals and groups in society who have a different ethnic origin to the majority white population.
BME Housing Strategy	Sets out how the council is going to work with others to help meet the housing and related needs of BME groups.
Business Plan	A plan that organisations, including councils, use to set out their plans for the future and how they will achieve them.
Care and Repair	Services that help older home owners with repairs, improvements and adaptations to their homes.
Careline/Carelink – Community Alarm Services/Centres	Another name for community alarm services provided by Councils and Housing Associations. They provide older and vulnerable people with a 24hr contact should there be a problem.
Commissioning	Covers two main areas. Firstly, finding out about health and care needs that people have. Secondly, arranging for services to meet these needs to be provided. Can be for an individual or for a group of service users.
Customer Surveys	Asking tenants how well the Council is doing/ how happy they are with many aspects of the housing health and social care services. For example repairs, caretaking, phone answering, and home care services.
Decent Homes Standard	Government standard which all councils and housing associations must meet for their housing by 2010. To meet the standard a home should be warm, protect from the weather and have reasonably modern facilities. Councils are also expected to increase the number of vulnerable people in decent homes in the private sector.

DH (Department of Health)	Aims to improve the health and well being of all people in England. Sets out in broad terms the work of the NHS and social services. It also monitors this work.
Extra Care Housing	Sometimes called “very sheltered housing”. People get a home for life. They receive home care and support in their own home. They remain Tenants or owners.
Focus Group	A way of getting people’s views about issues. Usually arranged to discuss a particular topic. Typically involves 8 – 15 people.
Floating Support	Help given to those who need it as and when required. Because the person providing the support does not “live in” the support can be scaled up or down depending on the situation.
Frail Elderly	Older people who are vulnerable because of their health, disability or age.
Fuel Poverty	Where someone has to pay a higher proportion of their income to keep warm than they can afford.
Hospital Discharge Protocol	An agreement between health, housing and social services to help plan a person’s discharge from hospital.
Housing Corporation	The Housing Corporation is a government organisation that looks after the work of Housing Associations. They make sure housing associations are following the law and they also give out funding.
Housing Needs Surveys	A survey to help a local council get a good idea of what housing and housing support people need in its area. People who live in all housing tenures are included. The views of other people who are involved in housing such as social services and private developers are also taken into account.
Housing Revenue Account (HRA) Business Plan	Sets out what the council has to do to meet the Decent Homes Standard and what it will cost.
Intermediate Care	Services that promote independence prevent hospital and residential care admission and/or enable early discharge. Intermediate care typically provides community-based alternatives to traditional hospital care.

Lifetime Homes	A home that can adapt and be adapted to cater for a wide range of abilities. This gives the best access and use to occupants. It also gives the best chance to those who may develop particular needs to remain in their home.
Local Strategic partnership (LSP)	The bringing together at a local level of public, private, voluntary and community organisations in order to tackle local issues.
Mobile Wardens	Wardens that are not tied to one particular housing scheme. They can cover dispersed homes and provide help to residents of different housing tenures.
NSF (National Service Framework For Older People)	Guidelines from the Government on how health and social services can improve services for older people.
NRF – Neighbourhood Renewal Fund	The Neighbourhood Renewal Fund aims to enable England's most deprived local authorities, in collaboration with their Local Strategic Partnership (LSP), to improve services, narrowing the gap between deprived areas and the rest of the country.
OPMH	Older People's Mental Health.
Particular Needs	See Special Needs.
PCT, Primary Care Trust	Part of, but free standing from the National Health Service (NHS). It has to plan and make sure local health services are provided. Works with housing departments where possible as poor housing brings poor health. Works with Social Services to assess and plan for provision of services to meet identified needs
Rehabilitation	This is where health, social services and housing work together to help people live independently.
Resources	What is needed to get something done. Can be money, time, people, knowledge etc.
Respite Care	Short-term or regular care for patients that provides relief to carers by providing another carer. It can also provide opportunity for medical or nursing reassessment or a period of Rehabilitation.

RSLs and HA's	Registered Social Landlords and Housing Associations are “not for profit” organisations that provide homes in partnership with local councils that people can afford. They also provide housing for people with special needs for example older people or the disabled. Housing Associations and RSLs have to answer to government through the Housing Corporation.
Sheltered housing	Housing that provides an on site warden. These types of schemes are normally only for people with disabilities or older people. The properties will have adaptations, and usually be on one level or two levels with a lift.
Short Term Care	A period of care, in a care home, for up to 3 weeks (but can be extended in particular circumstances). It can also provide opportunity for medical or nursing reassessment or a period of Rehabilitation
Smart Homes	Pioneered by the Joseph Rowntree Foundation SMART Homes involve putting an array of equipment into an ordinary house to make it easier for a physically disabled person to live independently. The equipment will for example: <ul style="list-style-type: none"> <li>• Open and close doors, open curtains</li> <li>• Allow the occupier to remotely open the front door</li> <li>• See who is at the front door on the television via a camera link</li> <li>• Include environmental monitoring as described above in referring to dispersed alarms and sensors</li> </ul>
Special Needs	A need that is not shared by everyone in society. For example someone who is Frail Elderly or who has mental health problems. Sometimes called Particular Needs.
Strategy	Sets out in detail the nature of particular issues and how these are going to be dealt with. There is an emphasis on forward planning and on working together with partners to find resources and achieve common goals.

Supporting People (SP)	The way the government tries to improve housing related help and support services for older and other vulnerable people. For example Sheltered Housing and Floating Support. Local councils get money from the government to plan and pay for services in their area. SP was introduced in April 2003. Before this housing benefit paid for housing support services.
Sustainable Communities Plan	A Government Plan to make places better to live in now and in the longer term. Improving housing plays a big part. However, to make the improvements last, improvements also need to be made in the local economy, in local services, in land use planning and in transport.
Telecare	The name given to new technology that helps people to be safe and secure in their home. It covers new equipment such as fall detectors, gas detectors and systems for monitoring a person's health (this is usually called Telemedicine).