



Housing Provision for Older People



A Report from Overview & Scrutiny





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Reports that have been submitted to Council can be downloaded from www.birmingham.gov.uk/scrutiny.



Glossary

ABC	Assist Birmingham Centre
ASB	Anti-social behaviour
BACOP	Birmingham Advisory Council of Older People
BASBU	Birmingham Anti Social Behaviour Unit
BCC	Birmingham City Council (also referred to as the City Council)
BME	Black Minority Ethnic Group
DDA	Disability Discrimination Act
DFG	Disabled Facilities Grant
Extra Care Housing	Extra Care provides a housing environment for older people with low level care needs. It provides adapted accommodation with flexible on-site care and community facilities.
ExtraCare Charitable Trust	The organisation developing the new extra care villages in partnership with BCC. Other development partners include Housing 21 and the Midland Heart Housing Association.
FSA	Financial Services Authority
HA	Housing Association
HIA	Home Improvement Agency
LAA	Local Area Agreement: sets out the priorities for the local area agreed between government and a local area (the local authority, the local strategic partnership, and other key partners).
LLTI	Limiting Long Term Illness
NOPP	Notice of Possession Proceeding
ONS	Office for National Statistics
OPRG	Older People's Reference Group
O&S	Overview and Scrutiny
PET	Performance Evaluation Test
PCT	Primary Care Trust
RSL	Registered Social Landlord
SHLB	BCC's Sheltered Housing Liaison Board. Made up of individuals who use the sheltered housing service and represent the other service users in the area.
SP	Supporting People
SSAFA Forces	Soldiers, Sailors, Airmen and Families Association



Housing Provision for Older People

Preface

By Councillor Emily Cox

Chair of the Housing and Urban Renewal Overview and Scrutiny Committee



As a city we face immense challenges in providing the range of services that fulfil the needs of older people. Demographic projections suggest our overall population will increase by over 100,000 by 2026. Medical and lifestyle improvements mean people are living longer. Dementia is on the increase and we will need to increase specialist provision. Birmingham has always attracted a wide range of different ethnic groups meaning we must take account of a wide range of cultural needs. Massive strides in modern technology mean both increased opportunity and increased cost.

This joint review between the Housing and Urban Renewal and the Adults and Communities Overview and Scrutiny Committees was set up to consider these challenges. We were keen to establish what processes the two directorates had in place for working together. We wanted to examine the assistance available to those wishing to remain in their own home. We investigated what the third sector could offer and what the Council's plans are for a challenging future.

The expectations of society are changing. People want to stay in their own homes as long as possible. No longer is it considered acceptable for older people to be split up from their partners when entering residential care. Bedsit type flats are no longer considered desirable. Older people want to live in dry, warm and well maintained homes.

Birmingham is currently making many changes to its provision for older people. Adults and Communities are closing not fit for purpose care homes and developing new style care centres in their place. Housing are building extra care villages and reviewing their current estate. Government funding streams are changing and shrinking.

The Review Group made visits, met with residents groups, took evidence from third sector organisations and spent considerable time looking at funding issues. We worked extensively with officers of both directorates.

This review covers a huge range of issues. We hope our recommendations will be viewed as both constructive and achievable. Turning round a service that has worked on such traditional lines for so many years will take time and effort. Whilst there has been considerable success and progress, we believe that more remains to be done.

Finally, I would like to thank the Members of the review, the officers of both directorates, members of older people's groups, residents of sheltered housing schemes as well as representatives of the third sector organisations without who this review could never have taken place.



Summary

- 1.1.1 The ageing society poses one of our greatest housing challenges. It is estimated nationally that households where the main householder is over 65 will account for almost half of projected growth in households to 2026, resulting in 2.4 million more older households than there are today.
- 1.1.2 It is now clear that housing, health and care are becoming increasingly interdependent. These days most people as they get older wish to remain in their own homes for as long as possible. But as people live longer, and their needs intensify, the level of demand on the care and support system increases, resulting in inevitable difficulties in service funding. Good housing is therefore critical to managing the mounting pressures of care and support expenditure and it is clear that services need to be planned and integrated to reflect this.
- 1.1.3 This review was undertaken jointly by the Housing and Urban Renewal and Adults and Communities Overview and Scrutiny Committees to explore how these issues are being addressed in Birmingham.
- 1.1.4 Members were keen to understand how the Adults and Communities and the Housing and Constituencies Directorates were working together to address the very real challenges that are being presented by the ageing society. To do this the Review Group examined the relevant local policies and strategies relating to housing and older people that are in place or being finalised.
- 1.1.5 It also considered both the specialised housing that is currently being provided in the city as well as the range of additional support that is available to support independent living for older people who chose to stay in their own homes.
- 1.1.6 Finally it looked at plans for how these services will need to adapt and develop in the future not only to respond to the anticipated overall increase in demand but also to support greater focus on wellbeing and prevention, choice and personalisation of services. The personalisation agenda represents a massive challenge because for the first time, the individual will have control of spending and purchasing care and support and the way in which people choose to spend may be on very different services from those that are currently on offer.
- 1.1.7 Towards the end of their evidence taking sessions Members were made aware of the significant effect that the recession is having on the City Council's plans to part finance capital development schemes through the sale of land from vacant sites. As a direct result of falling land values it has been decided that the Adults and Communities Directorate will need to pause its Older People's Modernisation Programme and review its plans for the provision of a network of Care Centres across the city. This in turn will impact on the speed of the closure programme for its elderly person's homes. In order to determine a way forward it is undertaking a consultation exercise with partners in health and housing to bring the Commissioning Strategy for Older People's Services up to date ready for a launch in 2010. Given the timing of this announcement it was not



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possible for the Review Group to explore the implications of these decisions in detail but they are indeed significant for the City Council for the following reasons:

- The dependence of the City Council on land sale receipts to fund a range of capital programmes (not just for Adults and Communities Directorates plans) is looking increasingly unfeasible in the current economic climate.
- It is unclear how the proposal to pause the plan to build the network of Care Centres across the city will impact on the existing and planned specialised housing provision (such as sheltered housing and extra care). What other options in the city will be available for older people with high dependency needs if the overall number of planned Care Centres is reduced? How will this impact on the balanced community of care needs within the city's Extra Care Villages?

1.2 Strategies and Joint Working

1.2.1 Members found that there were a number of both established and currently draft strategies and policies that set a framework for housing provision for older people. These include:

- The Joint (Adults and Communities and Housing) Commissioning Strategy for Older People's Services 2005 -2010 (which is now as set out above subject to review).
- The recently approved (Housing led) Planning for Housing in Later Life Strategy.
- Be Birmingham's (draft) Well Being Strategy for Older Citizens.

1.2.2 Members felt that whilst all of these strategies recognised and acknowledged links to one another there was still a degree of compartmentalisation and that it was not clear in practice how all the positive proposals and actions which they individually propose will meld together and complement each other to achieve a coherent impact. Certainly given the very real challenges outlined above it would appear that there is a need for a more robust collaboration.

1.2.3 Members also heard of the joint and partnership working that has developed across the two Directorates for example:

- At a city-wide level both Strategic Directors are members of the Birmingham Health and Well Being Partnership.
- At a strategic level both of the Directorates have worked together to produce or contribute towards the production of the key strategies and joint strategy meetings take place. In addition the Directorates are working together on a joint plan for integrated home care and support employing assistive technology.
- At a commissioning level a Joint Commissioning Group has senior officer representation from both Directorates and a jointly funded commissioning post has been established to work across the two Directorates on the Supporting People Programme.



- At an operational level staff from both Directorates work together on a number of work streams of the Older Adults Modernisation Board (working on the remodelling of residential care) and there are also joint working arrangements for the assessment and provision of community equipment for independent living.

1.2.4 Members recognised that a significant degree of joint working between the two Directorates has now been established but they noted that this stops short of for example pooling of resources to promote greater personalisation of services. Members felt that even more collaboration between the two Directorates is going to be required in future in order to achieve the step changes needed to meet the demands that are to be faced and to deliver an effective housing strategy for older people.

1.2.5 As Adults and Communities reduces the number of residential care places for the older people that it provides it will lose its previous influence in the supply side of the market. A partnership approach with Housing and Constituencies is therefore vital to both balance the Council's influence in the specialised housing market, and ensure that supply of sheltered housing and extra care is increased to meet growing demand.

1.3 Service Improvements

1.3.1 The above represent significant challenges for the City Council to address which will have major longer term implications however, in the interim the Review Group in the course of its work also identified some smaller service improvements that could be made in the near future to enhance existing provision in the mean time. These include:

- Prioritising the creation of the comprehensive city-wide advocacy and information service for older people.
- Bringing forward the programme of refurbishment for sheltered housing schemes; increasing the community use of their common rooms and developing the community building role of Activity Co-ordinators; as well as and exploring the potential to improve the process for managing anti-social behaviour within sheltered housing schemes.
- Enhancing the targeting of assistance to vulnerable households living in non-decent homes to improve housing conditions and developing methods for measuring the impact of assistance. It is estimated that 54% of vulnerable households live in a non-decent home (44% of which are over 60 years old). The failure against thermal comfort is one of the largest factors for non-decency in homes in the private sector. The proposed new Private Housing Sector Stock Condition Survey will refresh the baseline data on non-decency levels and identify specific areas for future targeting of services. To assess how well the Council is contributing to improving housing conditions of older and vulnerable people it should develop methods for measuring the impact of assistance.



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- 1.3.2 Members were also keen to make sure that the impact on the provision of services to older people of the removal of the ring fence to the Supporting People Programme was closely monitored to ensure that this does not result in a loss of services being directed to supporting the needs of older people. In addition, they felt that the administrative impact of the programme on external providers should be monitored.
- 1.3.3 Finally Members asked that the Directorates report on the implementation of the Assistive Technology Strategy and the proposals within it to ensure sufficient social interaction for older people is maintained.



Summary of Recommendations

	Recommendation	Responsibility	Completion Date
R1	That given the challenges that must be faced in the future, existing arrangements for joint working between the Adults and Communities and Housing and Constituencies Directorates should be evaluated and possibly revised to ensure that they are able to meet emerging demographic and resource challenges.	Cabinet Members for Adults and Communities and Housing	October 2010
R2	That by June 2010 the Cabinet Member for Adults and Communities reports to the Adults and Communities and the Housing and Urban Renewal O&S Committees on progress in taking forward the review of the Commissioning Strategy for Older People's Services 2005-2010 and in particular: - the specific plans for Care Centres in the city; and - how, whilst having regard to the impact of Individual Budgets on demand, the proposed provision will meet projected demand.	Cabinet Member for Adults and Communities	June 2010
R3	That the Cabinet Members make regular six monthly progress reports to the relevant O&S Committees on the implementation of the following: - Planning for Housing in Later Life Strategy. - The Wellbeing Strategy for Older Citizens.	Cabinet Members for Adults and Communities and Housing	March 2010
R4	That the Cabinet Members for Adults and Communities and Housing finalise proposals for the creation of a corporate and comprehensive city-wide advice and advocacy service for older people in Birmingham and report back to both of the relevant O&S Committees on the detail of the scheme and involvement of all partners by March 2010.	Cabinet Members for Adults and Communities and Housing	March 2010
R5	That the Cabinet Member for Housing reports to the Housing and Urban Renewal O&S Committee on the implementation of service charge proposals and the detail and progress of the investment programme approved in July 2009 for the refurbishment of the Council's sheltered housing schemes.	Cabinet Member for Housing	June 2010



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	Recommendation	Responsibility	Completion Date
R6	That the Cabinet Member for Housing monitors the role development of the newly appointed Activity Co-ordinators for sheltered schemes (including how they are making best use of communal facilities) and further, carries out consultation with residents to measure their effectiveness, and reports back to the Housing and Urban Renewal O&S Committee in January 2011.	Cabinet Member for Housing	January 2011
R7	That the Cabinet Member for Housing reviews the process for managing anti-social behaviour within sheltered housing schemes to explore if improvements can be made to increase the speed of case management and reports back his findings to the Housing and Urban Renewal O&S Committee.	Cabinet Member for Housing	January 2010
R8	That the Cabinet Members for Adults and Communities and Housing work closely together in respect of the nomination policy to ensure that the principle of mixed communities of need in Extra Care schemes is maintained and report back to scrutiny on how this will be practically delivered, given the doubts surrounding the level of future Care Centre provision that might now be available.	Cabinet Members for Adults and Communities and Housing	March 2010
R9	That the Cabinet Member for Housing enhances the targeting of assistance, in particular thermal comfort measures, to vulnerable older people living in private sector housing to address non-decency.	Cabinet Member for Housing	March 2010
R10	That following the 2009/10 Private Sector Housing Stock Condition Survey the Cabinet Member for Housing reports back to Housing and Urban Renewal O&S Committee on new methods of measuring the impact of assistance.	Cabinet Member for Housing	March 2010
R11	That the Cabinet Member for Housing monitors the impact on services to older people following the removal of the ring fence on the Supporting People Programme and reports back his findings to the Housing and Urban Renewal O&S Committee.	Cabinet Member for Housing	September 2010



	Recommendation	Responsibility	Completion Date
R12	That the Cabinet Member for Housing reports back to the Housing and Urban Renewal and the Adults and Communities O&S Committees on the implementation of the simplified administrative arrangements of the Supporting People programme.	Cabinet Member for Housing	March 2010
R13	The Cabinet Member for Adults and Communities reports to the Housing and Urban Renewal and the Adults and Communities O&S Committees on progress on implementation of the action plan for the Assistive Technology Strategy, including proposals for monitoring equipment and actions taken to ensure social interaction for older people is maintained.	Cabinet Member for Adults and Communities	March 2010
R14	That progress towards the achievements of these recommendations is reported to the Housing and Urban Renewal O&S Committee in April 2010 in consultation with the Adults and Communities O&S Committee. The Committee will schedule subsequent progress reports thereafter, until all recommendations are implemented.	Cabinet Members for Adults and Communities and Housing	April 2010



2 Terms of Reference

2.1 Reasons for the Review

2.1.1 This review was undertaken jointly by Members of both the Housing and Urban Renewal and the Adults and Communities Overview and Scrutiny (O&S) Committees to explore how effectively the Housing and Constituencies and the Adults and Communities Directorates are working in partnership to develop and deliver a range of housing options and support services for older people.

2.2 Terms of Reference

2.2.1 The key objectives of the enquiry were to:

- Identify the demographic impact on these services.
- Examine current housing provision and related support for older people provided by the Adults and Communities and the Housing and Constituencies Directorates.
- Examine the plans to develop and manage alternatives to residential care and to develop extra care and care centres for older people.
- Explore the extent of partnership working between the two Directorates.
- Examine how the Supporting People function enables older people to live independently.
- Examine if the City Council has a unified policy and programmes in place for responding to the growing agenda for older people.

2.2.2 The proposed outcomes of the exercise were to:

- Understand how the Adults and Communities and the Housing and Constituencies Directorates support older people through the provision of housing and housing-related support services.
- Suggest improvements to the way the Directorates work in partnership in order to support older people to live independently.

2.2.3 The work was undertaken by a Review Group comprising of Members of both the Housing and Urban Renewal and the Adults and Communities O&S Committees. These were:

- Councillor Emily Cox (Chair)
- Councillor Len Clark
- Councillor Barbara Dring (from June 08)
- Councillor Mike Leddy (from June 08)



- Councillor Gwyn Neilly
- Councillor Barbara Wood (from January 08)
- Councillor Geoff Sutton (until January 08)
- former Councillor John Cotton (until May 08)
- former Councillor Steve Bedser (until May 08)

2.2.4 In addition, the Review Group had three co-optee members: Antonio Forsyth, Doug Mellis and Jim Nicholl.

2.2.5 The Review Group was supported by Natalie Borman, Jill Short and Sarah Fradgley from the Scrutiny Office, Louise Collett from the Housing and Constituencies Directorate, and Jon Tomlinson and David Mason from the Adults and Communities Directorate.

2.3 Methodology

2.3.1 The Review Group met with a range of City Council Officers from the two Directorates to hear about the current provision and future plans. In addition, they heard evidence from local Housing Associations, City Councillors and MPs, as well as the Birmingham Advisory Council of Older People (BACOP) and the Older People's Reference Group (OPRG), the Sheltered Housing Liaison Board, the Cabinet Members for Housing and Adults and Communities and the Strategic Directors.

2.3.2 The Review Group wrote to all Registered Social Landlords (RSLs) inviting them to submit comments to the review. In addition the group met five RSLs (Anchor Trust, The ExtraCare Charitable Trust, Nehemiah United Churches Housing Association, The Thomas Pocklington Trust and Waterloo Housing Association).

2.3.3 Members also visited the Assist Birmingham Centre, the Norman Power Care Centre, a variety of sheltered housing schemes in the city and the Lovett Fields Extra Care Retirement Village in Milton Keynes.



3 Background

3.1 Introduction and National Context

3.1.1 This review was undertaken as the Government published its *Lifetime Homes, Lifetime Neighbourhoods - A National Strategy for Housing in an Ageing Society*. This report acknowledges that the ageing society poses one of our greatest housing challenges. It notes that by 2026 older people will account for almost half of the increase in the total number of households resulting in 2.4 million more older households than there are today. The report also points out a range of other significant national factors:

- The 75 plus age group is growing faster than any other.
- The older population is increasingly diverse, with more older men and more older people from black and minority ethnic communities, each with their own needs and aspirations.
- Over a million people are predicted to suffer from dementia by 2025.
- The numbers of older disabled people are increasing.
- There is increasing polarisation in terms of wealth and poverty among older people.

3.1.2 The Strategy recognises that most of our homes and communities are not designed to meet people's changing needs as they grow older. And that older people's options are too often limited to care homes or sheltered housing. Put simply the report sets out the challenge that we need more and better homes for older people now. "As we grow older, we spend more time in our homes, and they become more important to us and more likely to enhance or undermine our health and well-being."

3.1.3 The number of disabled older people is growing and the number of older people with learning disabilities is set to increase significantly. If we do nothing to change the current housing situation, occupied places in care home and hospitals would need to rise by 151%. This has significant implications for provision of specialised housing and for support services for older people in mainstream housing.

3.1.4 Lifestyles are changing fast; this can impact on housing choices and aspirations. New life-style choices have been the hallmark of the post war 'baby boomers' generation and are maintained in retirement. Social attitudes are changing as technology makes more possible.

3.1.5 The Strategy states that to meet the challenges of an ageing society and to make the most of the opportunities we must plan for homes and communities so that people can live out their lives, as long as possible, independently and safely with their families and friends around them. It is therefore essential to ensure that people are able to make the right choices at the right time and that there is the right range of choices of "specialised housing" available to those who need more



support. Housing is central to health and wellbeing, so services need to be planned and integrated to reflect this.

- 3.1.6 It is becoming increasingly evident that housing, health and care are increasingly interdependent. Good housing is critical to managing the mounting pressures of care and support expenditure. Services need to be planned and integrated to reflect this. Increasing longevity, the length of time people are living in poor health, the greater intensity of people's needs, plus changes in family structure and attitudes, all add up to more demand on the system and inevitable difficulties in funding. We live in a mixed public and private economy for older people's housing and social care, with significant variations in the capacity of individuals to pay for themselves.
- 3.1.7 Another report of significance is Age Concern's research into social exclusion in later life *Out of Sight, Out of Mind* which found that severe social exclusion is a significant and pressing problem amongst the elderly. 1.2 million over 50s face social exclusion in three or more areas of their life. It highlights that "the solutions to social exclusion can be simple and relatively inexpensive – repairs around the home, better information and advice, social opportunities and accessible transport". What it believes is missing is a co-ordinated range of support and it calls for Local Authorities to re-model their services to ensure they are joined-up, user-friendly, rooted in the community and flexible enough to reach out to vulnerable older people, irrespective of organisational boundaries and professional demarcations. It recommends local policies and programmes to sustain social contact and independence for as long as possible, low-intensity home services, improved access to suitable housing, home maintenance and repair services and thoughtful planning of local services and transport to help promote independence.
- 3.1.8 The issues raised in these two reports are now being increasingly recognised by all providers of support to older people in that it is not enough simply just to provide for older people's physical needs but it is also essential to give equal priority to their overall emotional and social wellbeing. How Birmingham is responding to this agenda is set out later in this report.

3.2 Growing Older In Birmingham – The Local Context

- 3.2.1 It is important to understand the extent of demographic changes over the next twenty years for Birmingham and the likely impact of an ageing population on housing and housing related services.
- 3.2.2 In 2006 279,500 of Birmingham's residents were aged 50 and over. Population projections produced by the Office for National Statistics indicate that the overall population of Birmingham will increase by 14% over the next twenty years with a significant increase in the number of older people. (See figure 1 below)



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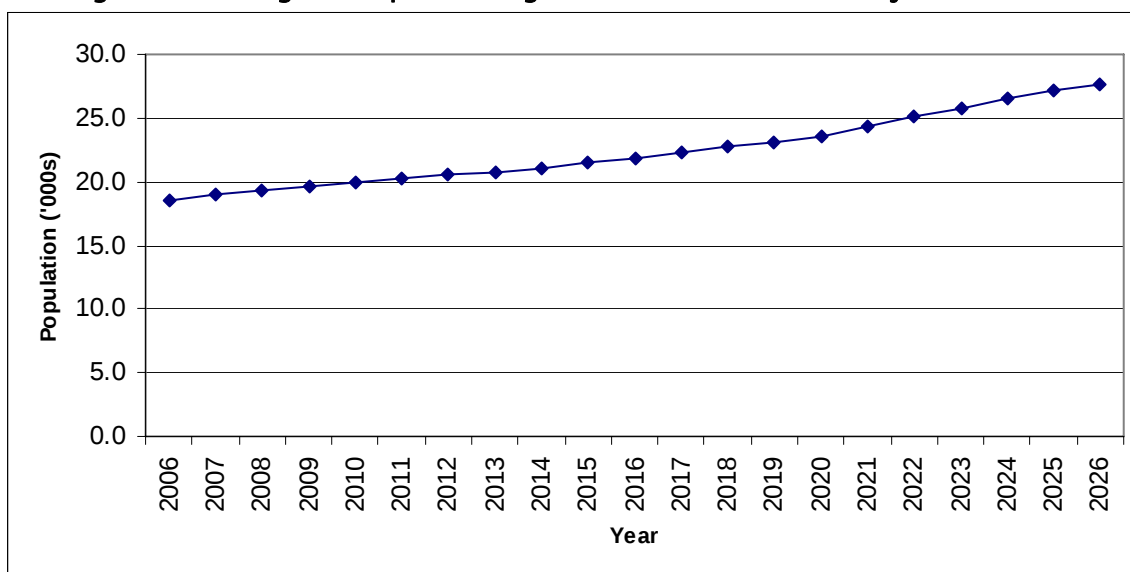
Figure 1: Birmingham Population Projections by Age Group and Year

Age Group	2006	2011	2016	2021	2026
50-64	142,100	148,100	155,200	164,400	162,500
65-75	69,700	68,700	72,500	74,700	77,300
75-79	28,100	27,000	27,400	27,900	31,200
80-84	21,000	20,500	20,700	21,800	22,600
85+	18,600	20,200	21,900	24,300	27,600
Total 50-85+	279,500	284,500	297,700	313,100	321,200
All ages	1,006,500	1,041,000	1,078,200	1,114,300	1,148,100

Source: 2006 based sub-national population projections, Office for National Statistics, June 2008

- 3.2.3 The Birmingham population aged 85 and over is projected to grow by 48% (9,000 people) by 2026. This is illustrated on the chart below.

Figure 2: Birmingham Population Aged 85 Years and Over – Projected to 2026

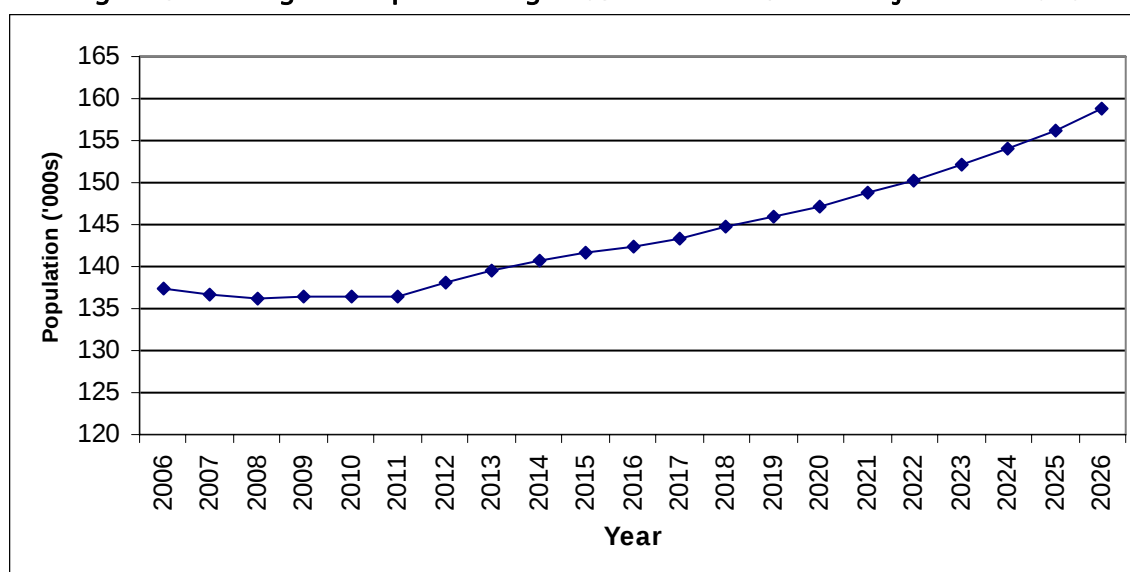


Source: 2006 based sub-national population projections, Office for National Statistics, June 2008

- 3.2.4 However it is the numbers of residents in late middle age that will see the greatest increase over the next twenty years. It is, therefore, imperative that the next few years are used to re-configure services before this population bulge reaches old age. This is illustrated on the following chart.



Figure 3: Birmingham Population Aged 65 Years and Over – Projected to 2026



Source: 2006 based sub-national population projections, Office for National Statistics, June 2008

- 3.2.5 The comparatively static number of the 65-84 year age group until 2012 is partially explained by the anticipated migration out to the shires upon retirement of those with the necessary assets to do so. The consequence of this trend is that it will be the less affluent older people with the potentially greater needs who will remain in the city.
- 3.2.6 Future generations of older people will be more ethnically diverse. In 2008 almost 56,130 older people in Birmingham belonged to a non-white ethnic group. This amounts to 19% of the city's older population and is almost 10% above the national and regional averages.
- 3.2.7 National census comparisons already show older people in Birmingham have a greater degree of disadvantage, for example, half of those of retirement age have no car, as opposed to 37% nationally. Nationally, it is estimated that 25% more older people will be living alone by 2013.
- 3.2.8 The geographical distribution of older people across Birmingham shows some variation and has implications for the planning of services for older people. Some outer lying areas contain significant clusters where older people account for over 40% of residents. There are large concentrations of people aged 65 and over in the Sutton Coldfield Constituency as well as Harborne, Selly Oak and Bournville Wards in the south and Shard End, Sheldon and Stechford and Yardley North Wards in the east. The largest concentration of people aged 85 and over is in the Sutton Coldfield Constituency.
- 3.2.9 While medical advances and improved standards of living are continuing to increase life expectancy, those same factors are combining to increase the period of time that people live in a state of ill-health, requiring higher levels of health and social care. This trend is evident from the national statistics for the last 20 years set out in figure 4 below. Birmingham's older residents



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experience higher rates of limiting long-term illness at 45% of the older population, compared with the national average of 38%.

Figure 4: National Life Expectancy and Period of Living in Ill Health (1981–2001)

	Females		Males	
	1981	2001	1981	2001
Life expectancy	76.8yrs	80.4yrs	71.9yrs	75.7yrs
Time lived in ill-health	10.1yrs	11.6yrs	6.5yrs	8.7yrs

Source: Office for National Statistics

3.3 Equalities

- 3.3.1 There is a recognised need to make provision that is shaped by the cultural needs of elders from Black and Minority Ethnic (BME) communities. Whilst the demographic profile of the major BME communities in Birmingham is younger than the general population there are now significant numbers of elders in these communities.
- 3.3.2 According to the 2001 Census there were approximately 17,000 BME elders across the city; 4,000 aged between 75 and 84 years of age and 1,000 aged 85 or over. The largest numbers identified themselves as Asian: Indian, Asian: Pakistani and Black, African Caribbean.
- 3.3.3 The number of BME residents aged 65 and older is expected to grow to 36,000 in 2026, amounting to 25% of the total older population.
- 3.3.4 The largest concentrations of BME communities are to be found in central Birmingham. Within this area there are sufficient numbers of elders within each majority community to provide a critical mass for the development of specialist services and accommodation.
- 3.3.5 Each BME community has particular needs and the aspirations of their elders will vary, just as in the majority community. Some may wish to use facilities that are specific to their community, religion and culture; others will wish to be in a mixed setting. Some will wish to maintain traditional patterns, retaining elders within a multi-generational setting, others will wish to see the development of services and accommodation that are specific to the needs of older people.
- 3.3.6 There are particular challenges to providing appropriately for elders from smaller communities and those who are in areas in which they form a very small minority.
- 3.3.7 It is also clear that expectations change over time and provision for the current generation of BME older people may not be appropriate to future cohorts who have spent a greater proportion of their lives here, accommodated to cultural patterns and expectations of the host community and have English as their language of choice.
- 3.3.8 The future development of services and accommodation for older people from BME communities requires sensitivity and inclusiveness in the general pattern of provision and a willingness to accommodate particular needs with specific provision where that is appropriate and sustainable.



3.4 Some Practical Implications for Housing

3.4.1 Better quality choices and options for housing will need to be provided for older people in the future to address not only the demographic projections, but also the following issues:

- Many of Birmingham's older residents live in accommodation with at least two spare rooms.
- Around 21% live in homes without central heating.
- The development standards and locations of specialised housing for older people vary considerably, ranging from housing that was originally built for general needs accommodation and subsequently re-designated, to new and recently developed purpose built retirement housing.
- Affluent households are disproportionately leaving the city upon retirement. Older people represented just over a third of Birmingham's 7,900 net out-migrating residents during 2007.
- Birmingham's residents experience higher rates of limiting long-term illness, there appears to be a mismatch of types of supported housing provision for older people available in relation to their housing needs and support that may be necessary.

3.5 The Local Policy Framework

3.5.1 There are currently a number of local strategies that set a policy framework for addressing the needs of and delivering housing and housing support services for older people in Birmingham. These are set out below:

3.5.2 As early as 2004 a key recommendation in the '**Old Enough to Live Independently in Birmingham in the 21st Century**' report (Contract Consulting, January 2004) focussed on the need for the development of more extra care housing including mixed tenure schemes to meet the growing demand from older owner occupiers, to allow them to live independently with support.

3.5.3 The **Commissioning Strategy for Older People's Service 2005-2010** sets out the City Council's corporate vision for the development of services for older people. It aims to transform services to meet the changing needs and rising expectations of older people, address the implications of an ageing population and satisfy new national policies and standards. The main areas of service being developed included:

- Care Centres designed to meet the specialist care needs of older people with dementia
- Extra Care sheltered housing to replace the existing Local Authority care homes
- High quality residential care beds in the independent sector
- Support through community links



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In particular the strategy states:

- Priority 6: To expand greatly the provision of extra care housing as a direct replacement for present residential care, as this is the clearly expressed preference of most older people and their carers.
- Commissioning intention 6A – Adults and Communities will collaborate with Housing and Registered Social Landlords to develop a network of mixed tenure extra care housing schemes across city. These schemes will progressively replace the Council's existing residential care homes.
- Commission intention 6B – Housing and Adults and Communities to review existing extra care and sheltered housing schemes to assess their potential for adaptation to the new model of extra care housing.
- Priority 7: Establish equitably across the city a number of [Special] Care Centres that are the focal points for delivering services to older people with a high and/or more complex level of needs. Centres will offer a range of residential and non-residential services.

3.5.4 On 16 March 2009, the City Council's Cabinet considered a report which looked at the programme for building Care Centres and closing elderly person's homes and attached day centres. (This is subject to review and a new older people's services commissioning strategy is planned for 2010 – the detail of this is set out in a later section of the report).

3.5.5 **Birmingham 2026 - Sustainable Community Strategy** sets the strategic direction and long-term vision for the economic, social and environmental well-being of the city and is the basis for all other strategies in the city. It has been written by the City Council and its partners who make up Be Birmingham, the Local Strategic Partnership. The Local Area Agreement is the delivery plan for the strategy and contains three indicators for delivery relevant to this review:

- Increasing the number of people achieving independent living
- Tackling fuel poverty in private sector homes
- Achieving the Decent Homes Standard target for Council and RSL homes

3.5.6 **The Council Plan 2008-2013** includes the following priority actions for the 'Be Healthy' objective:

- Developing extra care and care centres for older people
- Implement a range of schemes to help people live independently
- Enable more people to live independently for longer
- Improving wellbeing

3.5.7 **Planning for Housing in Later Life in Birmingham Strategy.** The development of the strategy included extensive consultation with older people (Surveys and focus groups of older residents and a visioning day of a variety of stakeholders).



- 3.5.8 The strategy is aimed at people as young as 50 and has an emphasis on the Council working in partnership to enable people to think ahead and plan future housing options. It is based on four key themes:
- Advice and Information - developing a comprehensive advice and information system for all services and support available for older people.
 - Housing Options - providing a broad range of accommodation such as the new extra care villages and refurbished sheltered housing, together with promotion of what housing options can provide.
 - Support and Prevention - promoting actions and services to enable older people to remain living independently as possible and raise wellbeing. This includes such actions as progressing the Affordable Warmth and adaptations programmes, and developing a comprehensive range of services to address the gap in low level provision such as gardening.
 - Engagement and Community - to ensure older people are fully involved in what is happening in their neighbourhood and encourage people approaching later life to think about their future housing options.
- 3.5.9 **Be Birmingham Wellbeing Strategy for Older Citizens 2009-2012** (consultation Nov 2008 – March 2009) aims to improve the health and wellbeing of older citizens of Birmingham and is modelled around three main themes of personal, place and social based wellbeing. The implementation of the strategy rests collectively with the Be Birmingham partnership and the Birmingham Health and Wellbeing Partnership. The Director of Public Health will be advising on the prioritisation of the themes to ensure the use of resources is maximised.
- 3.5.10 **Decent Homes Programme** – The Government introduced the Decent Homes Standard for social housing to meet by 2010. The Standard applies to all housing sectors as a recommended assessment of safe and appropriate housing conditions. A decent home is defined as one that:
- Meets the current statutory housing health and safety rating
 - Is in a reasonable state of repair
 - Has reasonably modern facilities and services
 - Provides a reasonable degree of thermal comfort
- 3.5.11 **Supporting People** - A central Government initiative that sought to bring together a number of disparate funding streams into one “pot” to be known as the Supporting People Grant to fund and regulate housing related support for vulnerable adults. (Details on this are set out later in this report).



4 Current Housing Provision for Older People

- 4.1.1 Given that the decision has already been made by the City Council to move away from the direct provision of traditional residential care and to develop programme of alternatives, the Review Group concentrated in its evidence collection on exploring how the Council is working towards this goal rather than exploring in detail current residential provision. Home Care Services have also been the subject of a previous scrutiny review so these were also excluded.
- 4.1.2 The Review Group heard the pattern of future provision is likely to be made up of the following elements:
- High quality residential beds (provided by the independent sector)
 - Care Centres to meet the specialist care needs of older people with dementia
 - Extra Care (villages and schemes)
 - Sheltered Housing
 - A wide variety of support to older people living in their own homes based around the following themes:
 - Improving and maintaining homes e.g. the HouseProud scheme
 - Improving thermal comfort e.g. the Warm Front programme
 - Maintaining independence e.g. adaptations, handyperson schemes, floating support
 - Protecting private tenants e.g. landlord accreditation



5 Findings – Specialised Housing

5.1 What is Sheltered Housing?

5.1.1 Officers advised the Review Group that there are 11,500 units of sheltered accommodation in Birmingham. RSLs manage 200 schemes containing 6,450 units of accommodation. The City Council manages 124 sheltered housing schemes providing 5,050 units. These are made up of:

- 77 Category One Schemes: These are generally purpose built with dispersed accommodation around a communal lounge. Generally low rise flats or bungalows, or a combination of both. Some schemes were previously general needs housing and therefore not purpose built.
- 9 Category Two Schemes: These are purpose built sheltered housing schemes where properties are linked by a corridor to a communal lounge. They have a dedicated Support Officer and a range of communal facilities.
- 38 High-Rise Schemes: These were designated as sheltered accommodation in the 1980s. These properties are located in high rise blocks and have one or two bedrooms.

5.1.2 Of the sheltered units 72% are one-bedroomed and 160 units are bed sitting room or bed recess flats.

5.1.3 Older people occupying sheltered housing account for approximately 5% of 50-85 year olds in Birmingham.

5.1.4 All Council sheltered schemes are staffed by Support Officers and residents are levied service and support charges.

Allocations policy (As set out in the Allocation Policy January 2009)

5.1.5 In order to be allocated a sheltered housing property an applicant must have undergone a support needs assessment by the Older Persons Team. This is in addition to the normal application process. The details of the City Council's Housing Allocations Policy are as follows:

- **Category One Sheltered Schemes:** Applicants must be aged 55 years and over and have undergone a support needs assessment. Applicants with or without a support need (following an assessment) may be allocated. Applicants with children will not be allocated a property. When a property in a Category One Scheme has major adaptations for disabled people, the criteria governing allocation to those in need of adapted properties are also applied. The age restriction may be lowered to enable the City Council to best meet the needs of the applicant, providing a support needs assessment has been carried out.
- **Category Two Sheltered Schemes:** Usually only applicants aged 55 years and above with a support need can be allocated a property. A support needs assessment must have been carried out by the Older Persons Team.



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- **High Rise Sheltered Schemes:** To be allocated one of these properties the applicant is usually aged 50 years or over and must have undergone a support needs assessment. There is no requirement that the applicant has a support need but the assessment must have been carried out.

5.2 Evidence Received by the Review Group

5.2.1 The Review Group visited a range of sheltered housing schemes:

- Barrow House, Edgbaston – a High-Rise scheme
- The Poplars, Sutton and Baughan House, Pype Hayes – Category Two schemes
- Henbury Court, Edgbaston – an extra care housing scheme provided by Anchor Trust

5.2.2 The visits and discussions with residents and Officers highlighted a number of issues.

Changing aspirations and challenges with the current stock

5.2.3 The original concept of sheltered housing was to meet the needs of relatively fit and active older people and as a result many properties were not designed to meet the needs of older more frail people. Accessibility within common parts and individual dwellings is sometimes poor. The environment provides little stimulation or opportunity for an active old age. Bathrooms are a particular area of difficulty with a widespread need for baths to be replaced by level access showers. The Review Group saw an award winning scheme built twenty years ago with first floor properties but no lift.

5.2.4 Some schemes, in particular one-bedroomed and bed recess accommodation are unpopular and fail to meet the aspirations of older people. As a result there are long term voids.

5.2.5 Members heard that there were around 200 units of sheltered accommodation void. It was often a struggle to fill the accommodation from the Council's waiting list and accommodation was not offered to other providers. Furthermore there were financial pressures to fill voids and it was recognised that the Council needed to get better at working with other providers because it was important to be able to offer a choice of sheltered accommodation.

5.2.6 Much of the current stock, both Council and RSL, presents major challenges: space standards are often well below those that are now expected (an award winning scheme built twenty years ago has an overall size of 37m² (one bedroom), whereas today a minimum of 51m² would be acceptable).

5.2.7 Some schemes are becoming hard to let. The High Rise Schemes in particular are of varying quality, some have only one lift or lifts do not serve all floors. However many of the two bedroom properties are in such schemes.

5.2.8 Communal areas are also an issue as most schemes were never purpose built. For most high rise schemes the communal area is a converted one bedroom flat, where the bedroom can be used as



an office for the support officer, and the remaining area is unable to accommodate all residents together.

- 5.2.9 The Review Group was advised that the Housing and Constituencies Directorate is engaged in on-going work to upgrade accommodation where that is feasible and the outcomes justify the investment: for example re-modelling schemes to provide two bedroomed flats, adapting bathrooms to make them accessible and similar works. This programme has to 'compete' with Decent Homes work, but may be prioritised post 2010.

Mix of tenants/ allocations

- 5.2.10 Concerns were raised about inappropriate placements within some sheltered housing schemes. Members heard anecdotal examples of the placement in schemes of younger people (who met the age criteria) who had a range of problems including alcohol misuse and the nuisance experienced by other residents as a consequence. In other cases problems arose because there was simply a clash of lifestyles between younger older people and older residents.
- 5.2.11 Questions were raised as to if this was as a result of the pressure on housing management to fill voids. It was felt that such a pressure could conflict with client care.
- 5.2.12 The interim Chair of the city's SHLB emphasised the importance of the mix of residents being considered when allocations were being made. It was important to note that the average age of residents was now over 70 years old and one of their main concerns was safety and security. BACOP also agreed with this point and stated that whilst the age criteria for sheltered housing had been explained to them they still felt that more rigorous checks could be done to determine allocation to this type of property. However, it was also recognised it was always possible that alcohol and mental health problems could develop at any time and it was important that there should be the appropriate support available for residents facing these issues.
- 5.2.13 One witness asked if sufficient support was available within sheltered housing schemes for older people with known specific problems (such as alcohol related ones) and whether it was therefore appropriate to allocate them in these schemes. However if the placement was temporary they needed packages of support to be in place before they moved in.

Addressing anti-social behaviour

- 5.2.14 The need to address the issue of anti-social behaviour in sheltered housing was raised by a number of witnesses to the review including BACOP, ORPG, individual residents and the SHLB. They wanted to see is a prompt response to instances of anti-social behaviour with appropriate action being taken where necessary. They also wanted to see support for those having to live with the problem.
- 5.2.15 Members were advised that all new tenancies are let as introductory tenancies and that the City Council follows the Anti-Social Behaviour Procedure if there is a breach of tenancy. This allows Officers to serve a Notice of Possession Proceeding (NOPP) if a breach occurs. A tenant can



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appeal against this and this is heard by an independent panel of officers. This can result in: no case to answer, the introductory tenancy being extended, or possession of the property. If the NOPP is upheld and the breach continues the Council proceeds to court for possession. It must however, be ensured that support is offered for example mediation or referral to a family intervention project if appropriate. The judge's decision will be based on whether the City Council has followed the correct procedure. The process is reinforced in the tenancy conditions.

- 5.2.16 Members were advised that there are seven dedicated local housing ASB teams across Birmingham working with a range of agencies to resolve cases. The Birmingham Anti Social Behaviour Unit (BASBU) is a centrally based multi disciplinary team dedicated to tackling ASB throughout the city. Through a Service Level Agreement BASBU provide housing teams with training, advice and support with complex cases. When a complaint of ASB is received it is given an initial classification (Category C = minor, Category B = serious, Category A = very serious). The investigating officer will gather all relevant information, decide a course of action and arrange appropriate support in accordance with the City Council ASB Procedure.
- 5.2.17 There are a variety of actions that the investigating officer can propose. These range from preventative measures (warnings, Acceptable Behaviour Contacts and mediation), to legal sanctions and enforcement action under the conditions of tenancy (injunctions, Anti-Social Behaviour Orders, possession proceedings). If legal action is proposed the Local Housing Manager instructs Legal Services via BASBU.
- 5.2.18 Working arrangements between the local ASB teams and BASBU are being reviewed.
- 5.2.19 In addition the Review Group heard that Selly Oak Constituency Tenants' Group has agreed to pilot peer mediation within sheltered schemes. The City SHLB agreed to the project that will offer low level mediation within the schemes. All residents were invited to an open day organised to raise awareness and identify those interested in becoming a volunteer.
- 5.2.20 Members were keen to see the initiatives outlined above but felt that more could possibly be done to support residents through the process and to speed up the management of cases (perhaps by seeking more timely legal advice) to avoid some of the stress experienced by vulnerable tenants in sheltered housing when faced with the anti-social behaviour of other tenants.

Use of common rooms and organised activities

- 5.2.21 Members were advised that all Council sheltered schemes have a common room. There is a varied use across the city and a wide range of activities from bingo and coffee mornings, to Thai Chi and arts and crafts classes.
- 5.2.22 Common rooms are available to all residents living on the scheme and community groups can use the common rooms provided that the residents are in agreement.
- 5.2.23 Common rooms are considered to be an extension of a resident's living room/home and they incur the cost of wear and tear and running costs. Residents pay for the upkeep and maintenance through their service charge.



- 5.2.24 Members heard that an increasing concern for residents of some schemes was the declining use of common rooms and organised activities. For example for most High Rise Schemes the communal area is a converted flat which is unable to accommodate all residents together.
- 5.2.25 Officers told the Review Group that currently service charges vary between schemes and do not fully meet the upkeep and running costs.
- 5.2.26 Members of the Review Group felt that there was potential to increase activities for residents and also generate additional income by hiring out the use of common rooms to organisations and local community and voluntary groups. Members were advised that any move to explore common room hire as a source of income would need to consider the fact that facilities are regarded as an extension to residents' homes and residents would have to be consulted.

Issues of Support Officer versus the traditional warden role

- 5.2.27 Members were advised that the City Council's sheltered housing service no longer has wardens; but there are 86 support officers (non-residential) who deliver the support service to 124 sheltered schemes city-wide. Four extra care schemes have a dedicated scheme manager and nine Category Two sheltered schemes have a dedicated support officer. The remaining support officers generally cover two schemes each, although this is flexible depending on the level of need within each scheme.
- 5.2.28 There has been quite a debate nationally around the issue of the appropriateness of using non-residential support within sheltered housing as opposed to the traditional residential wardens. Some argue that non-residential support, which focuses on providing support in line with the assessed needs of individuals within schemes, reduces the level of general support and day to day companionship which residential wardens were able to provide. It means also that no-one is available to undertake a general community building role and do things like taking the lead in organising activities and ensuring communal facilities are fully utilised.
- 5.2.29 As well as the support provided to residents of sheltered schemes there is also a pilot scheme which has been providing support to older residents in their own homes in the wider community and this may be rolled out to other areas in the city in future.
- 5.2.30 Members were advised that there had been many benefits that had arisen from the move from residential wardens to support officers as the support that they are able to offer is much more targeted and they are now fully trained.
- 5.2.31 One witness to the review felt the move away from dedicated accommodation-based support could have resulted as an unintended consequence of the Supporting People strategy. He felt that on the one hand this approach can have some benefits as it maximises use of limited resources. However on the other hand an approach that simply targets assessed need once it has been identified can lose the dimension that existed in the residential warden's job that was able to focus on prevention.



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Service and Support Charges

- 5.2.32 Members heard the following evidence from the Housing and Constituencies Directorate regarding charges to sheltered housing residents.
- 5.2.33 **Service charges** are charged for maintenance of communal areas, and are building specific. They are calculated based on a Constituency average and vary from £0.99 - £2.99 per week. Service charges are subsidised as they do not yield sufficient income to meet costs, and they are eligible for Housing Benefit.
- 5.2.34 **Support charges** cover the cost of Support Officer salaries, training, office equipment and travel expenses. These vary by schemes from £8.05 - £29.00 per week. Support charges do not reflect the level of need as residents pay for the same regardless of whether they have weekly or daily visits. Around 94% qualify for Supporting People funding and 6% of 'self funders' pay for the service.
- 5.2.35 Officers advised that these charges were currently being reviewed and advised Members of some benchmarking work on charges and service design that had been undertaken, set out in figure 5.

Figure 5: Comparison of Sheltered Housing Service and Support Charges

	Service Charge (per week)	Support Charge (per week)	Service Design
Northern Local Authority	£10.86 - £13.96	£14.10	One warden per scheme carrying out daily visits. Looking to develop service based around need and reduce number of warden posts.
Birmingham RSL	£23.00	£8.30 - Varies between schemes	On-site scheme manager who co-ordinates social activities. This cost is recovered through service charges as not eligible for Supporting People funding.
Birmingham RSL	£32.00 per week combined with support charge	Combined with service charge	On-site scheme manager as above.

Information about what sheltered housing can offer

- 5.2.36 The SHLB felt that many people were not aware of what sheltered housing can offer and more could be done to provide information to older people about the benefits of the range of provision in Birmingham.

Nominations to Housing Associations

- 5.2.37 During evidence taking one Registered Social Landlord highlighted difficulties obtaining sufficient nominations from the City Council to fill vacancies in their sheltered accommodation and that this could have implications for the release of under-occupied Council property. Members were keen to explore if the City Council was maximising its nomination rights to sheltered and extra care sheltered housing schemes.



- 5.2.38 Members were advised that the Housing Directorate monitors RSL performance against the Nominations Agreement on a quarterly basis and RSLs who are not meeting their targets are identified and contacted in order to ensure the underperformance is addressed.
- 5.2.39 With regard sheltered accommodation for the period January 2008 to January 2009, Members were advised that the Council received 60 warden-controlled properties for nomination from RSLs. (see figure 6), achieving 100% performance against the nominations agreement. In total between February 2004 and January 2009 the Council has received 399 warden-controlled properties, once again achieving 100% performance.
- 5.2.40 The allocation of extra care sheltered housing is outside of the Nominations Agreement as all properties are made available to the city for allocation following an assessment of care and housing needs. Members were advised that the two Directorates are working to review arrangements in preparation for new extra care schemes coming on line.

Figure 6 : Nominated Registered Social Landlord Warden Schemes (January 2008–January 2009)

Registered Social Landlord	Number of Nominations
Broadening Choice for Older People	5
Bournville Village Trust	1
Housing 21	1
Mercian	7
Optima	1
Orbit	1
Sanctuary	5
Servite	32
Trident	3
Yardley Great Trust	4
Total	60

Keeping sheltered housing high on the agenda

- 5.2.41 With the emergence of the Extra Care Villages, the SHLB was concerned to ensure that the needs of sheltered housing schemes were not overlooked. They pointed out that the sheltered housing schemes had a very important role to play in offering a range of quality options for older people in the city. As to aspirations for the future, it was hoped that the standard of sheltered housing would be such that it would be an attractive option for new residents offering security and a sense of community. The SBLB would also like to see the Council encouraging the inclusion of older persons serviced housing in new housing developments.

Future proposals for the service

- 5.2.42 The Review Group heard about a range of proposals for the future development of sheltered housing. These include the following:
- Revised support charges to make them fair and equitable.



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- A proposal to reintroduce activity coordinators – but the financial implications of this needs to be fully explored.
- A refurbishment programme.
- An improvements programme to achieve DDA compliance.
- Category One and High Rise schemes to change to floating support.

5.2.43 Members heard that the Council is aiming to provide a comprehensive model for sheltered housing provision that:

- Promotes independence, choice and security.
- Offers opportunities for communal and social activities.
- Promotes schemes as part of the wider community.
- Enhances resident quality of life.
- For some older people offers an alternative to residential care.
- Promotes inclusion of people from a wide range of cultures and backgrounds.



5.3 Care Centres

What are Care Centres?

- 5.3.1 Birmingham currently has 4 Care Centres which are designed to meet the specialist care needs of older people with dementia and higher level needs, as well as providing advice and therapy services to older people living in the surrounding community. Services are provided by Adults and Communities and the Primary Care Trusts (PCTs) co-located under one roof. Each centre has 32 enablement beds funded by the PCT and 32 care home beds with en-suite bathrooms as well as an assistive technology shop, restaurant, internet café, hair salon, activity rooms, gardens and gym.
- 5.3.2 Care Centres also provide respite care, and care for people who need short term care after leaving hospital. Therefore, they provide both interim and long term residential care along with a range of facilities to maintain the independence of older people.
- 5.3.3 In undertaking the review the Members visited the Norman Power Care Centre and were very impressed with the facilities it provides.

Review of the Commissioning Strategy for Older People's Services

- 5.3.4 The original intention as set out in the Commissioning Strategy for Older People's Services 2005-2010 was to provide a network of Care Centres across the city. However during the course of this review the position was subject to change and on 16 March 2009, the Cabinet considered a report which looked at the programme for building Care Centres and closing elderly person's homes and attached day centres. This report stated that while the commitment to close the elderly person's home's remains the priority, the Council needs to reconsider the speed of the closure programme, while at the same time providing choice and quality. It states that in order to determine the way forward, over the summer and autumn, the Adults and Communities Directorate will undertake a much wider consultation exercise, alongside partners in health and housing, to bring the Older People's Commissioning Strategy up to date, ready for a launch in 2010. This will allow the Council to:
- Test and re-affirm older people's views.
 - Test the Care Centre model, as a key plank of meeting the needs of people with dementia.
 - Address the agenda of 'personalisation'.
- 5.3.5 It states that at the same time the strategy can take account of the current financial position of the Council and the worldwide recession which has had a major impact on the plans to finance capital development schemes through the sale of land available from vacant sites, following the closure of the council run homes for older people.



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- 5.3.6 Given the current economic climate, it is highly likely that capital receipts will be substantially less than envisaged and borrowing costs will remain at around £3.5m (£2.6m after budgeted costs) per year for the near future.
- 5.3.7 Faced with such uncertainty over key elements of the Directorate's financial plan, the preferred option is to propose a pause to the modernisation programme and to continue with the closure of the elderly person's homes identified within Phase 1 of the closure programme so as to provide sufficient revenue budgets for the direct care costs of Care Centres, thereby reducing double running costs. This option retains flexibility of investment within the Directorate at a time of considerable national and local uncertainty as well as affording the opportunity to appropriately reflect upon the commissioning challenges that will be brought about by 'personalisation'.
- 5.3.8 Given the timing of this announcement was towards the end of this review it was not possible for the Review Group to explore the implications of this proposal in more detail. It will be clearly be a matter for the Adults and Communities O&S Committee to monitor this closely over the coming months.**



5.4 Extra Care Housing

What is Extra Care?

5.4.1 Extra Care provides a housing environment for older people with low level care needs – it provides adapted accommodation with flexible on-site care and community facilities.

- **Extra Care Schemes** – The Council currently has 4 extra care schemes and the RSLs have 14 schemes. Schemes offer residents individual homes with their own front door, flexible support from home care staff on site 24 hours a day for those assessed as requiring personal care, as well as communal facilities such as a lounge, laundry, guest room, library and an assisted bathroom.
- **Extra Care Villages** - The proposal is to develop 5 extra care villages in Birmingham in partnership with the ExtraCare Charitable Trust, Housing 21 and Midland Heart Housing Association. The first is under development at New Oscott with an anticipated completion in spring 2010. Extra care villages offer all of facilities of the extra care schemes and in addition they will offer facilities such as a bar and coffee shop, well-being facilities, activity room, gym, computer room and a shop. The facilities can be used by older people living in the wider community.

5.4.2 The City Council is committed to the development of extra care housing. The main thrust of current strategy is to focus on the development of retirement villages built to the Extra Care model. Members were informed that the Council's Extra Care development programme is:

- 2010/2011 - 440 apartments (1 village, 2 schemes)
- 2011/2012 – 260 apartments (1 scheme)
- 2012/2013 – 632 apartments (3 villages, 2 schemes)
- 2013/2014 – 180 apartments (1 village)

5.4.3 Extra care housing offers housing in an environment enhanced to meet the needs of older adults. It is housing with low care needs (and up to low levels of dementia). Step down from hospital is provided in villages with some support from PCTs. It is about improving life quality through facilitation, and encouraging people to look after and support one another, thereby enjoying their own home. Residents are encouraged to become involved in activities contributing to their well-being. The individual units have level access showers, are increasingly 2 beds and can be easily adapted to meet increasing needs of older people. The combination of adapted accommodation and on site care minimises the likelihood of any individual having to move to institutional care regardless of increasing need.

5.4.4 Officers stated that Extra Care housing is seen to be capable of supporting a balanced community that will promote a positive environment for older people. Thus it does not offer a direct replacement for one of the current models: sheltered housing or registered social care, rather it



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spans these categories and provides an environment in which people can age in place and where changing care needs can be accommodated without having to move to an institutional setting.

- 5.4.5 Members were told it is an agreed principle that the extra care villages will have a balance of care needs and will be mixed-tenure (combining units for rent, shared ownership and outright sale) to enable all older citizens to benefit from extra care housing. This is set out in the allocations policy below.

Allocations and Nominations to Extra Care Housing – Allocations policy (as set out in the Council's Allocations Policy January 2009)

- 5.4.6 Applicants for extra care properties must be aged 60 and over with support needs and a balance of care needs. In addition to the normal application process they must have undergone a support needs assessment by the Older Persons Team and will usually have a care needs assessment carried out by a project group that consists of a scheme manager, a senior support officer and a social worker from the Adults and Communities Directorate. This determines the number of hours care an applicant needs per week. This information along with the number of allocation points an applicant has been awarded is taken into account when allocating accommodation in an Extra Care Scheme. Applicants are categorised according to the level of care required.
- 5.4.7 To retain a balance, when a property becomes available for allocation in a scheme, the scheme manager will examine the overall balance of current care needs in the scheme and determine which care category the property should be allocated to. The property will be allocated to the applicant with that category of care need who has the highest number of points on the housing register and who has been chosen to be considered for that Extra Care scheme.

Allocations to Extra Care Villages

- 5.4.8 The City Council will have 100% nomination rights to rented and shared ownership properties in the extra care villages, both on initial and future lettings in perpetuity. All subsequent lettings will continue to be made via a Joint Allocation Panel comprising of Housing, Social Care and Health and the chosen development partner's representatives. The Panel will have the responsibility of ensuring there is a 'balanced community' with agreed dependency levels ranging from active older people through to the very frail and most dependent.

Member visit to Lovett Fields Extra Care Village, Milton Keynes

- 5.4.9 As part of its evidence gathering the Review Group visited Lovett Fields Extra Care Retirement Village in Milton Keynes run in partnership with The ExtraCare Charitable Trust. Members saw the balance between facilities that supported an active lifestyle: exercise suite, restaurant, communal lounges, gardens and crafts workshops, with facilities that support the delivery of social care: assisted bathing and treatment rooms. Members were shown an apartment and toured the communal facilities which were open to older people from the local area to join in organised activities. Members looked forward to similar villages opening in Birmingham.



5.4.10 Officers also visited The Pocklington Trust Extra Care Scheme in Birmingham which provides similar facilities on a smaller scale, designed specifically for people with sight loss.

Issues raised by Registered Social Landlords

5.4.11 As part of the evidence taking RSLs raised the following issues with Members:

5.4.12 Some of the RSLs we spoke to mentioned a perceived lack of co-ordination between City Council Directorates in implementing the Extra Care strategy and one was concerned the strategy may not meet future demand for intensive care.

5.4.13 One Association raised concerns about the relationship with Adults and Communities Directorate on assessments and allocations and highlighted the variations between local teams. Despite the Extra Care Partnership Agreement for assessments often allocations were made before that assessment had been carried out due to pressure on the Association to let empty properties quickly.

5.4.14 Members were advised that it was a future aspiration to have a single nominations process with RSLs but there were a number of developments that needed to be set in place first including the roll-out of Choice Based Lettings. A common allocations policy would be considered and there were discussions taking place with RSLs on how that might happen. Integrated computer systems would be needed and this may need to be considered in the next phase of Housing Transformation.

Managing transition

5.4.15 Members were keen to ensure Extra Care offered balanced communities and that during the period of transition all older people had access to the type of specialised accommodation that met their needs and aspirations. Officers pointed out that the closure of the first residential homes in Phase 1 is progressing and their replacement is through a range of measures:

- Care Centres - 4 new centres have been built and are now fully operational
- Extra Care housing and;
- Additional contracted replacement provision from independent suppliers

5.4.16 4 out of 70 residents (6%) have moved into Extra Care from the assessments completed so far. This is within the original estimate that around 10% of residents would move to extra care from existing residential care schemes.

5.4.17 As stated above the allocations policy for Extra Care will need to ensure a balanced community is maintained. This should ensure that extra care does not become a replacement for residential care and that people of all abilities and levels of need will want to live in the schemes. Although Members felt that Priority 6 of the existing Commissioning Strategy for Older People's Services (see paragraph 3.5.3 of this report) should be reviewed to clarify this. Given that changing plans for the pattern of Care Centre provision across the city and the planned review of the



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Commissioning Strategy for Older People's Services, the Extra Care allocations policy will need to be closely monitored to ensure that it is not compromised.

Equalities

- 5.4.18 Members were keen to ensure that given the growing number of black and minority ethnic elders likely to need care provision in the future, forward planning for extra care provision in terms of location and provision of culturally sensitive services was being considered. It was noted that the Council had engaged with a broad range of older people on their future aspirations and the need to broaden the housing choices for all residents had been recognised. It was accepted that Extra Care housing was not a solution for all and so in the next stage of strategy development there would be mapping of the range of services and choices available with the aim of achieving an individualised service.
- 5.4.19 Members were told that initial research with regional colleagues and evidence from consultation suggested that schemes which met language and cultural needs but which were part of mainstream provision were preferred.
- 5.4.20 The Acting Strategic Director for Housing and Constituencies drew Members' attention to the retirement village to be developed in Newtown and advised that in the planning process there had been research of the aspirations of older Asian citizens and the Directorate was working with specialist organisations to inform future service planning. The implications of population growth were being assessed for housing services as they were for all Council services. One Member voiced some doubts as to whether the location of the proposed retirement village was the most suitable for Asian residents suggesting that the area was not one generally populated by or familiar to Asian communities.



6 Findings – Housing Related Support for Older People in their Own Homes

6.1 Introduction

- 6.1.1 Most older people would prefer to stay put rather than move home but as health and mobility declines many need some help to enable them to remain living in their home in safety and comfort.
- 6.1.2 Older people's falls alone cost the NHS £34bn a year as well as often precipitating a permanent move to a care home. By making minor home safety modifications many falls can be prevented.
- 6.1.3 The 2006 Wanless Social Care Review found evidence that providing social care for people with lower needs often in the community, can delay the need for higher end care such as care homes and can prevent, reduce or delay the use of hospital services. This view has been supported by the National Strategy for Housing in an Ageing Society.
- 6.1.4 The Adults and Communities Directorate puts in place a range of care packages based on assessed need to enable people to remain independent and in their place of residence. In addition the Housing and Constituencies Directorate co-ordinates a range of housing support services for older people living in general housing based around the themes:
- Improving and maintaining homes
 - Improving thermal comfort
 - Maintaining independence
 - Protecting private tenants
- 6.1.5 The Review Group examined the profile of older people living in general housing and the nature of the general housing stock. It found that :
- 18,500 Council tenants are over sixty
 - There are 45,000 private rented households
 - 151,000 residents are classed as vulnerable households
 - 100,000+ residents suffer with a Long Term Limiting Illness (2001 Census)
 - 70% of housing in the Birmingham is private sector, two-thirds of which was built before 1945
 - 52% of private sector housing failed the Government's Decent Homes Standard
 - 54% of vulnerable households live in a non-decent home, of which 44% (36,000) are aged over 60.



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- 6.1.6 Members heard that Birmingham has a high proportion of vulnerable households. These are defined by the Government as being households receiving a means tested or a disability related benefit. Under the current economic climate it is anticipated that the number of vulnerable households will increase; a situation over which the Local Authority has no control.
- 6.1.7 The Council's Private Sector Stock Condition Survey undertaken in 2005/2006 showed there were significant issues in relation to housing conditions and vulnerable households. It identified the main cause of failure against the Government's Decent Homes Standard related to thermal comfort issues.
- 6.1.8 Members examined the range of Council initiatives that support older people to improve and maintain the fabric of their home, increase thermal comfort and also the provision of community equipment, adaptations and assistive technology devices for independent living.

6.2 Services for Older People to Improve and Maintain Homes

Decent Homes Programme

- 6.2.1 The Government has set a minimum standard which all social housing stock should meet by 2010. It defines a decent home as one that:
- Meets the current statutory minimum health and safety standards for housing
 - Is in a reasonable state of repair
 - Has reasonably modern facilities and services
 - Provides a reasonable degree of thermal comfort
- 6.2.2 The Council and its RSL partners are on target to achieve the Decent Home Standard for social housing stock. The Council also co-ordinates a range of interventions to help raise the decency standards in private sector housing including HouseProud, HomeWorks and the Affordable Warmth Programme.
- 6.2.3 Members heard that the average cost to address non-decency is estimated to be below £2,000 per property.
- 6.2.4 Officers advised that the capital investment made by the Council in addressing private sector housing conditions has exceeded £33m since 2006 for home improvements. In addition there has been significant leverage of external finance including government-funded schemes, private finance and fuel utility providers.

HouseProud

- 6.2.5 HouseProud is a Council scheme targeted to Birmingham homeowners that are over 60 years of age or have a disability who wish to self-fund improvements or adaptations. Typical work includes



bathroom, bedroom, kitchen conversion, creating a “level” home environment and improving access.

- 6.2.6 Service users fund the works through a variety of means including their own savings, affordable loans and equity release loans.
- 6.2.7 The HouseProud team provides a comprehensive service including identifying funding options, designing a scheme to individual requirements and appointing an approved contractor. The scheme enables older homeowners to have repairs and improvements carried out to their homes confident that they will not be at the mercy of cowboy builders and loansharks.
- 6.2.8 Members heard that during 2007/2008 203 owner-occupiers over the age of 60 were assisted through the HouseProud service or the Council's Home Improvement Partners (Anchor Home Improvement Trust and Black Country Housing). The value of this work was £780,000.
- 6.2.9 Members were told that in the year to February 2009 HouseProud had 759 clients requesting a visit as part of the service and had completed 326 cases so far. Ten complaints were received.

HomeWorks

- 6.2.10 HomeWorks is a Council programme to assist vulnerable homeowners maintain and improve their homes and is targeted to address non-decent homes in the private sector. It includes a full property condition survey with particular advice on decent homes standards; information and advice; access to affordable loans through Kick Start (a regional loan funding scheme); and full assistance including Council approved contractors.
- 6.2.11 Members heard that in 2007/2008 1,130+ homes were made decent under the HomeWorks programme.

6.3 Services for Older People to Improve Thermal Comfort

- 6.3.1 The Council's Affordable Warmth Programme is designed to improve domestic energy efficiency and alleviate fuel poverty amongst vulnerable people of all tenures. This is delivered in partnership with energy and fuel utility providers as part of the Government's Warm Front programme. The Council provides 'top-up' funding for vulnerable households where the cost of works required exceed the maximum grant available.
- 6.3.2 Members heard that approximately 5,700 low income households were helped to improve thermal efficiency of their homes during 2007/2008 under the Affordable Warmth Programme. 388 vulnerable homeowners unable to afford their Warm Front contribution received financial assistance from the Council and 5,000 households had work undertaken on their home following a Health Through Warmth referral.



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Warm Front

6.3.3 The Government Warm Front scheme provides vulnerable homeowners and tenants in the private rented sector a grant for insulation and heating improvements up to the value of £2,700 (or £4,000 if oil central heating is recommended). Those that do not qualify for a Warm Front grant, because they are not in receipt of a relevant benefit, may still be eligible for a £300 Government rebate. This rebate is available to all householders aged 60 or over who own their home or rent it from a private landlord, who either have no central heating system or one which is inoperable.

Service quality and grant top-ups

6.3.4 Members heard the following concerns in relation to Warm Front:

- The Warm Front grant limit of £2,700 is proving to be insufficient to cover the cost of the works. Nationally, 60% of applicants who qualify for central heating or boiler replacement are being asked to make a contribution towards the cost of the work of up to £2,000. This figure is replicated for Birmingham.
- As a result EAGA, the schemes delivery agent, have a large number of applicants eligible for the Warm Front grant who can not be processed because they are unable to pay their contribution.
- Long delays are sometimes being experienced often leaving older people without hot water and heating during winter months.
- Poor workmanship is causing distress and requires follow-up work to homes at additional cost.
- Inadequate or contradictory information is provided with little consultation about how the heating system should be installed, for example the location of boilers or radiators.

6.3.5 Members heard that the reputation of the Warm Front programme was declining and this may present a barrier to others using the grants, as word of mouth referrals are important amongst hard to reach pensioners and other groups.

6.3.6 In addition it was suggested by BACOP that the scheme could be more effective if it was expanded to include double glazing to help reduce energy costs.

6.3.7 In response to the concerns highlighted Members were advised by Officers that it was important to note that EAGA are the appointed national delivery agents for the Warm Front scheme and work directly for central Government. The City Council has no direct influence as to how they operate or choose installers. The prices and specification for the work are set and agreed by central Government and are also outside the control of the City Council.

6.3.8 In relation to the insufficiency of the Warm Front grant Members heard:

- The available grant limit of £2,700 has not been increased since its introduction.
- The pricing structure does not allow for installers to reflect local market conditions in their costs. They are required to undertake the work at their original tendered price.



- There was no mechanism put in place to assist applicants who would be required to make a contribution.

6.3.9 Members were told that the Council has negotiated with EAGA a protocol and process to assist Birmingham residents who are unable to pay their contribution towards the cost of central heating/boiler replacement.

6.3.10 The Council's Safety Net Grant Policy (approved by Council in April 2008) allows the approval of a grant of up to £1,000 where officers are satisfied that:

- There is a category 1 hazard existing within the property – where there is a lack of central heating within the property, this would constitute a category 1 hazard under the “excessive cold” criteria.
- That the applicant has no other reasonable means of funding the works.

6.3.11 Subject to the two requirements above being met, it has been agreed with EAGA that that where the cost of the contribution is less than £475 (net) they can proceed immediately to instruct the contractor to carry out the work. This process provides a fast track mechanism for over 80% of the cases that EAGA deal with in Birmingham.

6.3.12 For those cases where the contribution is in excess of £475, these are referred to the Council in order that officers can visit the property, to be satisfied that that the quotation provides value for money and is appropriate for the applicant's needs. The team has an internal target to deal with any such request within 10 working days. Where it is deemed that the costs are appropriate (in line with the tendered costs), EAGA are instructed to carry out the works.

6.3.13 Subject to completion of the applicant's benefits check and agreement for EAGA to share their customer details with the Council, no applicant should have to wait longer than 10 working days for a decision as to whether they will receive assistance in paying their contribution.

6.3.14 In the last 12 months the Council has assisted 388 vulnerable residents with their Warm Front contributions.

Health Through Warmth

6.3.15 Health Through Warmth is a national project aimed at reducing health inequalities linked to housing conditions. It operates through locally based partnerships that trained frontline workers to identify households whose health is adversely affected by lack of adequate heating in their homes and refer clients for advice and practical help with energy efficiency and heating improvements. The Council works in partnership with utility providers, three Birmingham PCTs and a number of local GP surgeries and health centres.

6.3.16 Members heard that since the project started in 2001 2,200 local frontline workers have received training, approximately 8,000 households have been referred, of which 5,000 cases have had works completed to their homes.



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Targeting older people without central heating

- 6.3.17 The Review Group noted with concern the proportion of older people in Birmingham identified by the 2001 Census as living without central heating and questioned whether there was any engagement with residents to address that in the context of affordable warmth schemes. Officers stated that Census figures were likely to be out of date and did not take account of initiatives including the Decent Homes Programme and Affordable Warmth Programme which would have impacted on that situation. Programmes were cross-tenure and those living in the private sector had benefited predominately. It was agreed it was important to ensure that residents were fully aware of the options available and that the assistance was targeted to vulnerable older people living in non-decent housing conditions.
- 6.3.18 Members made reference to the Private Sector Housing Condition survey and to the estimated cost to make properties decent. In relation to the Health Through Warmth programme it was noted that less than a 1000 cases per year had been completed since the scheme started in 2001 and concerns were voiced about the ability of this programme to respond to the need for thermal comfort improvements for older people.
- 6.3.19 It was highlighted that there are difficulties both encouraging homeowners to undertake essential repairs and maintenance and measuring impact of assistance:
- Many homeowners request advice but undertake improvements themselves in own time.
 - Improvement work does not always address all non-decency issues. Without a comprehensive survey it is difficult to ascertain if the property now meets the decent homes standard.
 - There is no obligation on homeowners to address non-decency issues, nor a statutory obligation on the local authority to intervene.
- 6.3.20 Members welcomed that fact that it was proposed to commission a new Private Sector Housing Stock Condition Survey and revisit methods of assessing and measuring dwelling decency particularly post intervention. They looked forward to hearing the detail of this in future.

Move from a grant giving culture to equity release and loans

- 6.3.21 Members recognised the substantial assistance that is now being made available to homeowners through the range of programmes but it was noted that there had over recent years been a substantial shift away from traditional grant giving towards equity release and loans, with the expectation that owner occupiers might deploy the equity in their property to effect repairs and improvements. This was accepted as being realistically the only way that such programmes might be able to assist the widest number of people. There were however concerns raised as to the continuing affordability of equity release schemes in the current housing market and the impact in the longer term on the equity left available to vulnerable homeowners to fund their future care needs.



- 6.3.22 Members were advised that regulated (FSA) financial advice is provided by the Council. This means that an assessment is made to ensure the correct loan product is recommended that reflects homeowner's circumstances. The aim is to ensure that the recommended repairs will allow the homeowner to remain in the property for the medium to long term. There is no repossession guarantee while the homeowner is using their home as their main residence.
- 6.3.23 Members were also advised that HouseProud works with a number of charities to identify alternative sources of financial assistance such as the Royal British Legion and SSAFA Forces. A number are very specific to the individual's circumstances and tend to be based around a client's past employment e.g. the Civil Service.

6.4 Services for Older People to Maintain Independence

- 6.4.1 The Review Group heard that in addition to schemes available to owner-occupiers to adapt their homes, the Council co-ordinates a range of housing related services to help older people maintain their independence.

Aids and adaptations

- 6.4.2 Two types of services are provided by the City Council, major adaptations generally funded by the Government subsidised Disabled Facilities Grant (DFG) for example wheelchair accessible showers and minor adaptations funded by the Council for works costing below £1000 such as grab rails.
- 6.4.3 The Independent Living Team in the Housing and Constituencies Directorate work closely with colleagues in Adults and Communities to provide a range of cross sector housing solutions to vulnerable or elderly people with disabilities who are assessed as in need of assistance to live more independently at home.
- 6.4.4 The age profile of service users is largely static. Over the last three years there has been a fairly similar age distribution residents accessing services from Independent Living with around 75% of service users aged 60 or over. Around 5000 older people each year make up the bulk of the 7000 clients per annum receiving services from the Independent Living Team.
- 6.4.5 The table below provides a snapshot of Independent Living Service users distributed by tenure and age for 2005/2006.

Figure 7: Independent Service Users by Tenure and Age (2005– 2006)

Tenure	AGE PROFILE (%)			
	18 – 59	60 - 74	75 - 84	85+
Council Tenant	8.7	10.5	10.7	5.2
Owner Occupier	11.1	16.1	17.3	9.6
RSL / Housing Association	2.5	2.0	0.0	1.5
Private Tenant / Landlord	0.5	0.6	0.6	0.5
	22.7	29.2	28.5	16.8



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- 6.4.6 The table below summarises the volume of adaptations split by major and minor adaptations completed for 3 financial years.

Figure 8: Volume of Major and Minor Adaptations 2005–2008

All Adaptations	Major Adaptations Completed	Minor Adaptations Completed
2005/2006	1435	5651
2006/2007	1217	6675
2007/2008	1219	6875

- 6.4.7 Over the last eighteen months there has been a focus on installing level access showers in a number of Council sheltered housing schemes. All four extra care schemes now have level access showers (74 showers installed).

Waiting times for aids and adaptations

- 6.4.8 Both the older persons groups (BACOP and OPRG) who met with Members as part of the review felt that waiting times for aids and adaptations were lengthy and could be improved. Members heard that this has been a concern to the Council and following a recent review of the joint working arrangements between the two Directorates this is being addressed and will improve service delivery in the future. This is a matter of concern to Members. Both the Adults and Communities and the Housing and Urban Renewal O&S Committees now receive regular update reports on service performance and will be closely monitoring the situation over the coming months to ensure the proposed service improvements are effective.
- 6.4.9 One Registered Social Landlord stated that they had in the past had difficulties accessing Disabled Facilities Grants for their residents.

Handypersons schemes

- 6.4.10 Members heard how invaluable handypersons schemes are in terms of assisting older people to remain in their own home by providing practical support such as odd jobs and small building repairs. There are currently some handyperson services operating in Birmingham but they are far from comprehensive in their coverage. The Council's Private Sector Housing Strategy and the Supporting People Commissioning Plan include actions around developing this service.
- 6.4.11 There is an overall current committed allocation to two handyperson schemes of £65,500 within the Adults and Communities Directorate.
- 6.4.12 Some of the older people who met with the Review Group felt that there was a clear need to ensure there was a city-wide scheme available to all but that it should build upon the existing provision that was already available in the city and the Council should not try to reinvent the wheel.



City-wide handyperson scheme

- 6.4.13 During 2009 Birmingham successfully bid for a Department for Communities and Local Government grant for handyperson services (2009/2010 - £150k, 2010/11 - £220k). This is specifically for the older people client group.
- 6.4.14 The Birmingham model proposes the following:
- To part fund a coordinator function (to be located in the Housing Directorate) to coordinate and prioritise all requests for handypersons services and act as a single point of entry.
 - To coordinate, monitor and quality control all handypersons services.
 - To part fund a hospital discharge scheme to make the homes habitable with minor repair works and prevention work relating to trips, slips and falls.
 - To facilitate minor adaptations works e.g. putting up grab rails.
 - To promote community based social enterprise schemes (however they will receive referrals via the coordinator function).
- 6.4.15 It was suggested that the funding available for the handyperson service could be a catalyst to explore the potential for social enterprise handyperson schemes. Officers informed the Review Group that the handyperson service was being discussed at the Supporting People Strategy Group with there being a working group involving the third sector, housing etc. which demonstrated a joined-up approach.
- 6.4.16 Members noted that with the move to individualised budgets there was a need to be mindful when engaging with the third sector of the risks of overprovision of services. Some concerns were raised that the provision of grant aid could conflict with individualised budgets.

Moving-on incentives

- 6.4.17 The City Council is currently piloting a scheme to provide support and assistance to older people to move from family-sized housing into smaller/extra care/sheltered housing. This includes advice on finding a suitable property and hands-on support to organise the move such as arranging removals, disconnection and reconnection of services etc.
- 6.4.18 This approach will be further developed in the context of the Government's Overcrowding Action Plan. The Review Group was advised that the pilot project was focused on moves in council housing to release family-sized properties but it was hoped in future to expand this to all tenures.
- 6.4.19 Members acknowledged that there were a number of reasons for under occupancy in older resident households including choice, location, lack of information of alternative housing options and perhaps the image of sheltered housing. This highlighted the value of encouraging people to plan for the future. Members were however keen to ensure that any initiatives were taken forward sensitively and on the basis of assisting people to make positive choices about their future.



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- 6.4.20 BACOP representatives thought more could be done to build upon the initiatives that the Council has taken with its own housing stock by providing incentives and support to older people living in private sector housing who may need assistance for them to move from larger housing into accommodation more suitable to their needs.

Floating support

- 6.4.21 This involves providing support to older people who live in their own homes. Currently 60 people have been assisted by a pilot scheme. The plan is that this will be to be rolled out cross-tenure in the future. The Housing and Constituencies Directorate wants to start developing a service for Asian elders and therefore will be targeting Sparkbrook and Washwood Heath areas of the city in the next phase.
- 6.4.22 Members were interested to hear about the plans to expand floating support. There had been concerns raised by some witnesses that the City Council was using this model in its sheltered housing but Members were advised that no sheltered housing scheme currently receives a floating support service.

Protecting private sector tenants

- 6.4.23 Members acknowledged that the private rented sector is not just made up of just students and young families and there are a number of older people living in private rented properties. Officers advised that the Council offers advice and assistance for private tenants to seek to improve thermal comfort and works with private landlords to ensure appropriate standards through education and accreditation. 550 landlords had been accredited to date. The Council is also responsible for inspection and licensing of Houses of Multiple Occupation to assess condition and risk and has issued 1,100 licenses to date.

Impact of housing related support for older people

- 6.4.24 Members referred to the figures reported on the number of households improved and commented that at the current rate of progress it could take some 25 years to address all the properties requiring improvement.
- 6.4.25 It was explained that in addition to the measures outlined there were mainstream schemes operating which had seen around 5,700 properties per year being dealt with. Nevertheless Members recognised the extent of the challenge faced particularly in the light of the economic downturn and the expected increase in the number of vulnerable households. It was therefore important to explore and secure all available sources of funding and to target those resources to areas of greatest need.
- 6.4.26 It was suggested that a major capital investment programme could be one way of addressing the rate of improvement.
- 6.4.27 Members were advised that good practice has been acknowledged by the Audit Commission in the recent Strategic Housing Inspection including:



- The robust approach to the prioritisation of applications for aids and adaptations.
- Targeted assistance is improving living conditions for vulnerable homeowners.
- Promotional activity and resources are focussed on areas with the greatest need and the Council has implemented a range of funding options to help more people benefit from improved conditions.
- The Council's approach to affordable warmth is having significant impact through targeted advice and assistance.
- Intervention is improving housing conditions for tenants in the private rented sector.

6.4.28 Members felt that essentially more could be done to target assistance to address non-decent housing conditions of vulnerable older people, in particular thermal comfort measures, and looked forward to hearing more details of the new methods used to measure the impact of initiatives.

Publicity of schemes to eligible groups

6.4.29 Both of the older persons groups felt that more could be done to publicise the schemes and programmes to eligible groups. In particular it was suggested that it would be helpful if there was a single contact number where older people could access all the information available.

6.4.30 Members were shown some of the promotional material used by the Housing and Constituencies Directorate and were particularly impressed by the HouseProud DVD which is sent to all potential referrers of clients and to anyone requesting an information pack.

6.4.31 In addition Member heard that the service has a city-wide marketing strategy and leaflets are supplied through neighbourhood offices, libraries, advertising on buses, on library mouse mats etc. It also ran its own advice and information day linked to the launch of the new DVD. Marketing is also targeted at people with disabilities through professionals in Adults and Communities, PCTs, mobility shops and doctors surgeries. For older people there are specialist magazines (e.g. Retired & Living) and Age Concern advice days. For BME communities through specialist magazines (e.g. The Vine) presentations to community groups (e.g. at Handsworth Fire Station and UK Asian Women's Centre). Marketing has also included general community groups and lunch clubs.

6.4.32 The reluctance of homeowners to apply for financial assistance was recognised and Officers indicated that the HouseProud DVD showed how the process was being simplified for that service to try and overcome this issue.

6.4.33 A booklet has been produced for people with disabilities, of all tenures, providing advice on the different housing options available to them and where they can get assistance and further advice. This booklet covers sheltered housing, Careline, advice on specialist estate agents selling mobility friendly homes and services provided by adults and communities.



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Reducing bureaucracy

- 6.4.34 Representatives from the older persons groups asked if various forms could be standardised and made less complex. It was also felt that the bureaucracy associated with the aids and adaptations assessment process could be simplified and they voiced support for the proposals for individual budgets which would allow people to access retail outlets for equipment.
- 6.4.35 Not all older people understood why some of the forms used asked for so much detail on personal finances.



6.5 Assistive Technology

What is Assistive Technology?

6.5.1 Assistive technology is defined as any device or piece of equipment that enables a vulnerable person to maintain their independence and be supported in their own home. It can be grouped into three areas:

- Community equipment – items that assist the user in their daily life, such as grab rails.
- Telecare – devices that help the user to manage their activity and environment so that if a trigger event occurs, such as a fall, a message is sent to a response centre where the agreed actions are initiated.
- Telemedicine/Telehealth – life signs monitoring that include devices patients wear or use to measure vital signs, such as blood pressure. Data is passed to a response centre where it is assessed. Arrangements to feed back data to the patient through digital TV and the web is under development.

6.5.2 Assistive technology is an important element in the ability of citizens to be supported at home with independence and dignity. New technologies will allow users and carers to communicate with the Council in real time and open the way for more sophisticated care management systems, IT can reduce the cost of long term care and hospital admissions.

Assistive Technology Strategy and Project Charter

6.5.3 Members were given a presentation about the City Council's Assistive Technology Strategy. This essentially comprises of two main elements as follows:

- Developing a technology structure with partners
- Developing a community equipment services in line with the 'retail model'

6.5.4 The Council's Assistive Technology Strategy identifies that citizens of Birmingham require a vibrant market place where they can self-assess and select equipment and services from reputable organisations.

6.5.5 The Strategy aims to deliver more opportunities for citizens to obtain information and advice about equipment and technology available via a network of information points branded ASSIST BIRMINGHAM, located in Care Centres. It will also provide opportunities for third sector involvement and accredited retail outlets.

Assist Birmingham Centre visit

6.5.6 To find out more about assistive technology in practice the Review Group visited the Assist Birmingham Centre (ABC) in Ladywood. They toured the lounge, bedroom, kitchen, bathing and stair-lift assessment areas containing technology, equipment and adaptations that can assist



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people to remain in their own home. Members also saw the information suite containing plasma screens and web based information kiosks and heard of proposals to develop mini ABCs in the new care centres.

- 6.5.7 Members were advised the ABC was working in partnership with Birmingham's PCTs to develop Telecare and Telehealth systems, including the Birmingham OwnHealth service that provided telephone-based healthcare support to 27,000 people in Birmingham with long term conditions to log and monitor vital health readings.
- 6.5.8 The ABC also works in partnership the Mental Health Trust and the Prison Service to provide specialist technology at Winson Green Prison as 23% of inmates are old or disabled.
- 6.5.9 The ABC also has an active service user group and worked with the third sector.
- 6.5.10 Members heard of plans to have a Housing Improvement Officer based at ABC to give advice on the planning process, provide sketch plans and give information on downsizing and sheltered housing and extra care housing options.
- 6.5.11 Members heard that applicants for low level equipment are directed to an Access and Referral Officer who conducts a telephone assessment – 50% of applications are dealt with by this method, rather than waiting for a home assessment. Applicants for higher level needs e.g. bathing assistance, visit ABC for an assessment. Approximately 10 bathing assessments a day are undertaken at the Centre. At the time of the visit there was a five-week waiting list for ABC assessments. Applicants with complex and long term conditions are referred to area teams for assessment.
- 6.5.12 The ABC also gives advice to self-funding clients who are Birmingham Council Tax payers. It holds a drop in session on Saturday mornings, has a mobile unit and has looked at evening opening. The centre is a specialist learning centre for the Midlands to provide Trusted Assessor and Technician training and is developing mini ABC centres around the city with information, self assessment and equipment demonstration facilities.
- 6.5.13 Members heard that there is currently little choice in the type of assistive technology equipment due to bulk purchasing. It is envisaged that 'The retail model' for community equipment and technology which focuses on customer choice when redeeming individual budgets will open up the market and encourage refinement of devices.

Promoting the ABC Service

- 6.5.14 Members were told that the ABC Manager's key focus was to increase the number of people using the service. The Centre has increased assessment activity and undertaken some marketing linked to the opening launch (e.g. leaflet at GP surgeries) but it relied heavily on word of mouth. More marketing is therefore needed.



Issues regarding Telecare and Careline

- 6.5.15 Members saw a range of assistive technology devices including the 'Just Checking System' that uses wireless movement sensors to log a person's daily activity and relay information via a secure website to family members, wireless remotely controlled pill dispenser that generates telephone reminder if not used, and bed /chair occupancy sensor.
- 6.5.16 It was noted that these devices could save significant staff cost as they replace the need for carers to visit throughout the day.
- 6.5.17 Officers advised that Birmingham had a Department of Health target to install 3,000 pieces of telecare by March 2009 and in April 2006 the Department of Health had allocated Birmingham a £1.8m Preventative Technology Grant to invest in telecare to support individuals in the community. The focus of the grant was to reduce blue light emergency services calls, hospital admissions and delayed hospital discharges. Telecare monitoring could generate data from alarm calls that could be analysed and translated in individual care packages.
- 6.5.18 Members were told that Telecare equipment can be monitored via pager units and small residential homes use this method of monitoring. It is not however linked to the Council's Careline control centre for monitoring.
- 6.5.19 The Council provides the Careline Service managed by the Older Persons Team. Currently there are links to:
- 6151 dispersed units
 - 1800 BCC linked bungalows
 - 1360 RSL properties
 - 363 other dispersed units (hostels etc.)
- 6.5.20 Members heard in the early stages of the review that the technology for the Careline service was dated and would not support additional services that telecare can offer. However the Review Group now acknowledge improvements have been made and Careline has been upgraded to a system which can support the monitoring of assistive technology, which includes fall detectors (some are already connected to the system), temperature sensors, wandering alerts, flood detectors, bogus door contacts and inactivity monitors. The system is already being used successfully in other parts of the country for this purpose. Careline has also recently been awarded Telecare Services Accreditation, which recognises the high quality of both technology and customer service.
- 6.5.21 The Adults and Communities Directorate is in discussion with NHS Direct as an element of the Assistive Technology Strategy to enable NHS Direct to provide a telephone response service and also a triage service to avoid admissions to hospital via A&E. A range of technological innovations will then be offered to older people including extreme temperature sensors, fall detectors and in appropriate cases, epilepsy monitoring equipment. It is expected that this innovation will



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contribute to the Adults and Communities Transformation Programme to extend the service to a larger group of citizens.

- 6.5.22 If negotiations with NHS Direct are successful, the City Council will explore how the new arrangements can be used to support and enhance the service provided by Careline.
- 6.5.23 Members looked forward to receiving more details on the implementation of the Assistive Technology Strategy and the work to create a comprehensive and cost effective system of telecare that addressed the current incompatibility of some systems.

Maintaining social contact

- 6.5.24 Members were keen to ensure that technology was used to give people more choice about whether to have carers visit them throughout the day or not. They were however mindful of the importance of maintaining social interaction for older people. In addition technology should not be used to replace personal care services. Equipment should be used to identify and take away risks associated with older person living independently and provide peace of mind for the family.



7 Supporting People

7.1 Evidence from the Supporting People Team

- 7.1.1 One of the objectives of the review was to examine how the Supporting Programme supports older people to live independently. Evidence received on this issue is set out below.
- 7.1.2 The Supporting People Programme aims to help vulnerable people improve their quality of life by providing a variety of housing related support to enable them to establish and maintain independence in the community.
- 7.1.3 It is a Government funded programme established in 2003 that brought together a number of funding streams into one “pot” to fund and regulate housing related support. A large number of vulnerable groups are supported through the programme including frail older people and older people with support needs.
- 7.1.4 Nearly all the services funded through the programme were in existence prior to April 2003 when the programme went live and since 2003 the Supporting People Team has established a service review process to quality assess them.
- 7.1.5 In 2004, a Five Year Strategy was agreed which set out the vision for the programme from 2005 – 2010. This was revised and updated in 2007. The strategy explains the key objective of the programme is to provide continued funding for preventative services that intervene at a point before people fall into crisis or escalate to a substantial and critical need. The vision was to create a suite of services that would underpin social, health and housing services, that would be available to people across the city irrespective of where they lived, whether they were tenants or owner occupiers, living in shared housing or completely independent. As part of the strategy revision in 2007 there was an increase in resources directed at older people.
- 7.1.6 The key decision making body for the programme is the Commissioning Body. This group consists of partners from Birmingham City Council (Housing and Constituencies, Adults and Communities, Children, Young People and Families), the Primary Care Trusts, and the Probation Service. The Vice Chairman of the Housing and Urban Renewal O&S Committee is the Member representative on the group. In addition, Birmingham has a network of provider forums that represent the interests of each of the client group market sectors and a Citizens Panel that represents the interests of service users.
- 7.1.7 The governance structure for the programme includes the Commissioning Body, a Core Strategy Group, plus accountable and lead officers. The Council acts as the administering body for the purposes of the grant but decisions are taken via the Commissioning Body.
- 7.1.8 The Audit Commission inspected the programme in 2005 and in 2007. The second inspection in 2007 acknowledged that improvements had been achieved in the management of the programme.



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Improvements highlighted included the way in which the programme and budget were organised and managed and recognition was given to the work undertaken with service users.

- 7.1.9 Of the £50m programme £8.2m is allocated to the funding of housing related support services to approximately 25,000 older people. The following table shows spend for 2008/2009. Currently 45 organisations provide these services.

Figure 9: Supporting People Spend (Older People) 2008/2009

Service Type	Deliveries	Forecast spend £'000s 2008/2009
Accommodation based schemes	Sheltered Housing	54,878
	Very Sheltered Housing	948,294
	Alms Houses	7,059
	Sheltered Housing	5,054,534
	Supported Housing (shared or self contained)	172,118
	Very Sheltered Housing	276,863
Sub-total accommodation		6,513,746
Floating Support		824,454
Community or social alarm service		706,411
Home Improvement Agency (HIA) Service		69,666
Total		8,114,278

- 7.1.10 The way in which the Supporting People grant can be spent is determined against an eligibility criteria. The Department for Communities and Local Government specify that the money can only be used for housing related support, i.e. not for health or care services, housing management functions nor social activities. The grant conditions do not stipulate where and how services can be delivered, but Birmingham City Council and its partners on the Commissioning Body are expected to ensure that money is spent in accordance with its strategic priorities and to ensure maximum benefit to the vulnerable people in the city.

7.2 New Supporting People Commissioning and Procurement Process

- 7.2.1 Up until now there has been no selection of providers funded through the programme but these contracts are now due to expire and there is a legal requirement to undertake a competitive process for the award of future contracts to ensure a fair and transparent process to deliver good quality, value for money services. The Commissioning Body has agreed a number of key principles to inform the commissioning and procurement activity. These included the requirement that services should be available irrespective of tenure and that small, third sector and BME provider provision would be encouraged.
- 7.2.2 A series of detailed strategic reviews for each client group sector are underway involving service users and other stakeholders to ensure services commissioned through this process meet identified



need, dovetail with and support other strategic priorities, and add value and underpin the statutory and third sector service provision in the city.

- 7.2.3 These reviews will develop a commissioning strategy for each client group, which will form the basis of detailed service specifications. The commissioning strategy for services to older people was due to be finalised by the end of February 2009.
- 7.2.4 The Review Group examined the commissioning and procurement process in some detail, including the Value for Money matrix used in the assessments.
- 7.2.5 The first stage of the process consisted of a Performance Evaluation Test (PET) to establish the organisational competency of providers and determine which would be invited to submit a tender in the negotiation stage. Following submission of self-assessment information by the provider an on-site validation visit is carried out by a team involving service user representatives and staff. A PET score was awarded to each provider and any that achieved a poor rating were excluded from proceeding and decommissioned.
- 7.2.6 At the negotiation stage bids are assessed against the key principles set by the Commissioning Body and using a value for money matrix to plot quality and cost. Contracts will be awarded to the best performing providers, who have demonstrated competence, quality and value for money.
- 7.2.7 Members were advised that the contract negotiation process for the client group containing services to older people was expected to start in June 2009 and conclude by September 2009.
- 7.2.8 Members were keen to ensure that the commissioning process was fair and did not adversely affect smaller organisations who might need support and guidance to participate in the process, and that assessment arrangements were robust.
- 7.2.9 Officers explained the PET process was not only based on written submissions but also a field work/validation stage involving service users. The key principles agreed by the Commissioning Body included the aim to retain the diversity of provision and ensure that small providers were not 'squeezed out' of the process. There was also a moderation process of the PET rating scores and providers were given written feedback and that would offer them an opportunity to raise queries.

7.3 Review Group Issues

Market capacity

- 7.3.1 Members were keen to know about the outcome of the bidding process in terms of quality and value for money. They also asked if an assessment of the market had been conducted prior to developing commissioning strategies. Officers advised that an analysis had been undertaken which had established that a significant number of providers were third sector organisations and only a small number were commercial concerns.
- 7.3.2 Members questioned whether capacity in the market had been determined and whether services would be affected by competition, perhaps from other Local Authorities. Officers stated that the



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providers selected would provide support across the city and would be contracted to deliver an agreed level of support in terms of hours. Payment would be in arrears and based on the number of hours of support delivered.

Loss of funding ring fence

- 7.3.3 The Review Group acknowledged that significant changes were being made nationally to the Supporting People funding stream, and, from April 2009, the ring fence that ensured the grant could only be used for housing related support is being removed and it would in future be part of the Local Area Agreement. Members were told that the Commissioning Body wished to ensure housing related support remained a priority for the city in recognition of the valuable part it has to play in providing preventative services for a wide range of vulnerable groups. For that reason, the Local Area Agreement includes a national indicator which reflects the difference that Supporting People makes to peoples' lives. The contracts awarded to service providers will also give some certainty of funding for the future and assist with forward business planning and delivery.
- 7.3.4 Members were keen to monitor the impact on services provided to older people following the removal of the Supporting People funding ring fence.

Communication and administration

- 7.3.5 As part of their evidence taking Members heard that for some partner organisations that there was a lack of clarity around the future commissioning arrangements for Supporting People and that better communication of plans was needed.
- 7.3.6 Members also heard that the programme creates large administrative and data collection burdens which are sometimes applied on tight timescales this can be difficult for smaller organisations to manage. It was suggested that a simplified annual Supporting People form (or only when recipients' circumstances change) or a single form for each organisation could go some way to reduce this burden.
- 7.3.7 It was felt that there could also be more sharing of best practice and the Supporting People Team was best placed to do this.



8 Joint Working

8.1 How the two Directorates Work Together

8.1.1 Previous chapters of this report have explored the range of specialist housing and housing support services that are provided to older people in Birmingham. However a key objective of the review was to explore the degree to which the Housing and Constituencies and Adults and Communities Directorates are working together to respond to the growing agenda for older people in the city and to develop and deliver a range of housing options and support to enable older people to live independently. The following examples of joint working were presented to the Review Group to indicate the ways in which the Directorates have sought to engage with colleagues across a range of practical and policy developments that will advance the agenda of shaping housing and care to meet the needs and aspirations of older people in Birmingham.

At citywide level

8.1.2 The Strategic Directors of Adults and Communities and Housing and Constituencies sit on the Birmingham Health and Wellbeing Partnership Executive, along with PCT Chief Executives.

At strategic level

8.1.3 The Directorates have worked together to produce or contribute towards the development of the following strategies.

- Joint Commissioning Strategy for Older People 2005-2010. Following extensive consultation with older people and their carers the Commissioning Strategy for Older People (2005-2010) was finalised. A joint report was submitted to Cabinet in December 2005 setting out the business case for the commissioning of the first phase of Care Centres, the commencement of consultation on the proposed timescales for decommissioning of the authority's residential care homes linked to the commissioning of Care Centres and Extra Care Housing.
- Planning for Housing in Later Life Strategy.
- Birmingham Health and Wellbeing Partnership Wellbeing Strategy (currently out for consultation).

8.1.4 In addition the Directorates are working together on a joint plan for integrated home-care and support, employing assistive technology, including the future development of Careline.

8.1.5 Joint strategy meetings take place to ensure that there is a synergy between Directorate strategies, reviews and inspection preparation is done jointly and policy is developed together.



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At commissioning level

- 8.1.6 The Joint Commissioning Group has senior officer representation from both Directorates.
- 8.1.7 The Audit Commission report following the inspection of the Supporting People Programme in 2007 contained several recommendations relating to strengthening the engagement of Adults and Communities in the programme. As a result a joint commissioning post has been established to work across the two Directorates on the programme. The jointly funded post is assisting in the ongoing developments for the programme.

At operational level

- 8.1.8 Staff from both Directorates work closely on a number of its work streams on the Older Adults Modernisation Board (which is working on the remodelling of residential care). Extra care housing is a key plank within the Commissioning Strategy and is integral to the decommissioning of the current residential care stock and the provision of housing choices in the future. The future policy direction needs to be agreed through the governance arrangements in place for Older People's Modernisation. This arrangement includes both Cabinet Members.
- 8.1.9 There are also joint working arrangements for the assessment and provision of aids and adaptations for independent living. This includes implementation of the new assessment process for the Independent Living Service as agreed by Cabinet.

8.2 Review Group Issues

- 8.2.1 Members discussed the following issues in relation to the level of joint working between the two Directorates.

Impact of individualised budgets

- 8.2.2 Members noted that the self directed care, individualised budget agenda will switch the power to commission services over to the individual service user. This may need to be managed very carefully so the Directorates are able to continue to work together on maintaining individuals in their own home. Members were told that this was being addressed in a number of ways for example reconfiguration of the HouseProud Service was also being examined with partners in order to ensure that it fit with the agenda of personalisation and officers and relevant partners were exploring how to develop the handyperson service given this agenda.

Pooling resources

- 8.2.3 Referring to the scope of the Planning for Housing in Later Life Strategy, one Member commented that housing was the issue which cut across the spectrum of support and care services. He had noted points made about the need for collaboration between the two Directorates but felt that something more than that could be needed to deliver an effective strategy. For example greater integration of resources/ budgets. The Acting Strategic Director of Housing and Constituencies



stated that commissioning processes were joint and, while resources were not yet pooled, the Local Area Agreement (LAA) would be a driver for this as there were partnership targets relating to independent living. She also made reference to the work of the Health and Wellbeing Partnership Executive. Members felt that shared resources were needed and that this should be progressed. The Acting Strategic Director highlighted the extent of joint commissioning of support services for older people and explained that for 2009/10 the Supporting People budget would no longer be ring fenced and would contribute to an area based grant which she believed should encourage greater involvement by health services in partnerships.

Communication and collaboration

- 8.2.4 Despite all this evidence of increased joint working Members heard that it was still the view held by some partner organisations and older people groups that there was still potential for improved collaboration between Council Directorates and their strategies. One Registered Social Landlord said that they would like to see the establishment of a designated older person's Council department or champion responsible for all older people's services and a joined-up approach to funding, planning and service delivery. They also wanted to see a true joint commissioning process involving health, social care, housing and support and improved multi-agency communications. They felt that this would be the way to ensure that holistic and comprehensive services were made available to older people in the locality that they live.



9 Conclusions and Recommendations

9.1 Joint Working and Strategies

9.1.1 The ageing society poses a significant housing challenge because as the numbers of older people increase the level of demand on care and support services will intensify and this will put a corresponding unaffordable strain on available budgets, even if nothing else changes. It is clearly not an option to simply ration services further by tightening eligibility criteria for existing services. This is because older people's aspirations are changing and the traditional largely residential model of care for the elderly is becoming increasingly outmoded. Many older people want to stay in their own homes for as long as possible and have more choice over what type of support they receive and when they access it in order to help them to continue to live independently. It has also been recognised by service providers that shifting resources into preventative services can mean that demand for more acute services is significantly reduced. For example, evidence shows that earlier investment in housing support can prevent avoidable hospital admissions and moves into residential care. It is therefore clear that housing, health and care services are becoming increasingly interdependent and that how these services will be delivered in the future will continue to have to change and evolve.

9.1.2 The Review Group heard of the wide range of strategies and policies at both a national and local level that are in place or are currently being developed that impact on housing provision for older people in Birmingham. The common vision outlined within these various strategies is very much welcomed by the Review Group as it:

- Recognises the need to respond to the changing aspirations of older people and move the focus towards developing a range of preventative services that will support people to live independently in their own homes.
- Sets in place opportunities for older people who need more support to be able to make choices about what support they need and puts in place a range of specialised housing to support this.
- Recognises that an increasing proportion of older people fund or part-fund their access to accommodation and care but require information and advice to make decisions and sometimes assistance to support their independence.
- Gives priority to promoting the broader wellbeing of older people.

9.1.3 However the Review Group noted that the establishment of this overall vision is still only in the early stages and at the time of undertaking this review both the Wellbeing Strategy and the Planning for Housing in Later Life Strategy were still to be finalised. All of the hard work involved in developing these new policies is acknowledged but it also raises some concerns. For example, given the number of different strategies owned by different directorates or partnerships it can seem confusing to identify how they will all work together in practice to deliver all the benefits that they



propose. For example it is not really clear at the moment when the Wellbeing Strategy will be finalised and it is therefore unclear how it will be owned and how its actions will be resourced

9.1.4 Of perhaps more significance is the fact that as the Review Group was completing its work it was announced that as a result of the Recession the Commissioning Strategy for Older People's Services would be subject to review and the financial implications of and demand for the development of a further programme of Care Centres would need be re-evaluated. The overall position in relation to the planned pattern of provision for the future is now therefore currently subject to considerable change.

9.1.5 The delivery of any future vision for housing services for older people cannot be achieved by directorates, agencies and organisations working in isolation and will require ever increasing partnership working, collaboration and perhaps pooling of resources between Housing and Constituencies, Adults and Communities and the Primary Care Trust partners. The Review Group heard of the significant progress that the two Directorates have made in terms of developing joint working across a range of areas within the services. It is essential that this effort and impetus is maintained and successfully translated into the proposed practical action but Members felt that even more collaboration is going to be needed in the future to make the step changes needed to meet the challenges to be faced.

	Recommendation	Responsibility	Completion Date
R1	That given the challenges that must be faced in the future, existing arrangements for joint working between the Adults and Communities and Housing and Constituencies Directorates should be evaluated and possibly revised to ensure that they are able to meet emerging demographic and resource challenges.	Cabinet Members for Adults and Communities and Housing	October 2010
R2	That by June 2010 the Cabinet Member for Adults and Communities reports to the Adults and Communities and Housing and Urban Renewal O&S Committees on progress in taking forward the review of the Commissioning Strategy for Older People's Services 2005-2010 and in particular - the specific plans for Care Centres in the city; and - how, whilst having regard to the impact of individual budgets on demand, the proposed provision will meet projected demand.	Cabinet Member for Adults and Communities	June 2010
R3	That the Cabinet Members make regular six monthly progress reports to the relevant O&S Committees on the implementation of the following: - Planning for Housing in Later Life Strategy. - The Wellbeing Strategy for Older Citizens.	Cabinet Members for Adults and Communities and Housing	March 2010



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9.2 Involvement of Older People/Information About Services

9.2.1 It is clear that to be able to make the right choices older people need easy access to up to date clear, comprehensive and accessible information on the housing /support options that are available to them. This is an issue that has been identified at both a national level in the National Strategy for Housing in an Ageing Society and at a local level via consultation undertaken by both the Housing and Constituencies Directorate as part of the Planning for Housing in Later Life Strategy and by the Adults and Communities Directorate as part of its ongoing work to develop its services. This message was also endorsed by the older people's groups who met with the Review Group. The key issues here are:

- The need for better co-ordination of information from all providers – one suggestion was that a guidebook for older people which set out both their rights as well as the full range of services available to them might be produced. Other suggestions included establishing a one stop shop or single contact number.
- The need to advertise/ market services for older people more and make the information accessible to all.
- The need to provide access to advocacy and support assistance to older people to engage them with local authority services and other agencies.

9.2.2 This is not to say that there is not plenty of very good information out there on specific programmes and schemes (such as the HouseProud DVD and the wide range of information provided by the Assist Birmingham Centre) but that it needs to be all pulled together irrespective of the provider into a city-wide comprehensive advice service. The Review Group welcomed the progress that is being made by the two Directorates on this issue.

9.2.3 In addition both of the older people's groups wanted to see greater involvement of older people in the decision making processes within the Directorates. The Review Group however recognised that progress is being made on this matter and noted the good practice employed in terms of involvement of older people in the development of the recent Planning for Housing in Later Life Strategy. However the connections between the range of different strategies relating to older people services was not always clear and they felt that communication on this could be improved.

	Recommendation	Responsibility	Completion Date
R4	That the Cabinet Members for Adults and Communities and Housing finalise proposals for the creation of a corporate and comprehensive city-wide advice and advocacy service for older people in Birmingham and report back to both of the relevant O&S Committees on the detail of the scheme and involvement of all partners by March 2010.	Cabinet Members for Adults and Communities and Housing	March 2010



9.3 Sheltered Housing

- 9.3.1 The Review Group spent a large part of its time receiving evidence about the City Council's existing specialised housing provision and in particular the range of sheltered housing.
- 9.3.2 It was recognised that some of the existing sheltered housing stock is now quite old and it lacks the space standards and amenities to meet the changing aspirations of older people. This had resulted in a number of voids and some schemes being hard to let. Members heard that the need to refurbish remodel and decommission some of the less popular stock had been identified as far back as 2006. It was noted that a review was now underway and action on this was prioritised within the Planning for Housing for Later Life Strategy but that any developments would need to compete for capital resources with programmes such as Decent Homes.
- 9.3.3 Some existing schemes have seen a retreat of local amenities such as local shops and proximity to local transport making independent life for their residents more difficult. In terms of the development of any new sheltered housing or extra care schemes in the future it will be important to ensure that they are sited close to shops and community amenities and public transport.
- 9.3.4 The Review Group also heard about concerns raised by tenants about how to deal with both what they thought to be at times inappropriate allocations which resulted in a clash of lifestyles arising between different residents, and with anti-social behaviour when it arises within sheltered housing schemes.
- 9.3.5 In terms of dealing with allocations issues the Housing and Constituencies Directorate has recently reviewed its allocations policy and the age for eligibility for sheltered housing has been raised. In addition the Directorate has been piloting a peer mediation scheme to help to deal with lower level neighbour disputes within sheltered housing schemes. Members of the review felt that it might also help to ensure that maximum use is made of probationary tenancies.
- 9.3.6 In relation to dealing with anti-social behaviour Members received evidence from the Directorate about the procedure used by the Council and heard concerns from sheltered housing residents about the stress and tension dealing with this causes and how long and drawn out that they felt that the process was. Members were keen to explore if more could be done both to keep residents better informed and supported when they were going through the process and also to examine if the process could in some way be fast tracked given the vulnerability of tenants within sheltered housing.
- 9.3.7 Some people felt that the shift away from staffing the schemes with residential wardens to support officers had resulted in their traditional role changing significantly and that staff now had less time to do things such as support and organise activities for all the residents.
- 9.3.8 Members also heard concerns about the decline in use of some of the communal facilities attached to some of the schemes which some residents felt had fallen into disuse as there was now no-one available to organise activities.



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9.3.9 Members felt that it was important that a community building role was maintained by staffing in the schemes and that facilities available were maximised perhaps by being utilised more for wider community and voluntary sector activity. Members were pleased to see these issues included for action within the Planning for Housing in Later Life Strategy but accepted that the issue of who would pay for this would need to be resolved. Members felt that some creative thinking might be picked up on this under the Wellbeing agenda.

9.3.10 Action is therefore needed to:

- Monitor progress on developments/improvements to the fabric of sheltered housing projects.
- Make sure that better use is made of sheltered housing communal facilities.
- Develop a community-building role for relevant staffing.
- Explore if improvements can be made in terms of addressing the response to managing anti-social behaviour in sheltered housing schemes by for example enforcement of probationary tenancies/ensuring residents understand the processes required to manage cases and perhaps speeding up the process.

	Recommendation	Responsibility	Completion Date
R5	That the Cabinet Member for Housing reports to the Housing and Urban Renewal O&S Committee on the implementation of service charge proposals and the detail and progress of the investment programme approved in July 2009 for the refurbishment of the Council's sheltered housing schemes.	Cabinet Member for Housing	June 2010
R6	That the Cabinet Member for Housing monitors the role development of the newly appointed Activity Co-ordinators for sheltered schemes (including how they are making best use of communal facilities) and further, carries out consultation with residents to measure their effectiveness, and reports back to the Housing and Urban Renewal O&S Committee in January 2011.	Cabinet Member for Housing	January 2011
R7	That the Cabinet Member for Housing reviews the process for managing anti-social behaviour within sheltered housing schemes to explore if improvements can be made to increase the speed of case management and reports back his findings to the Housing and Urban Renewal O&S Committee.	Cabinet Member for Housing	January 2010



9.4 Extra Care

- 9.4.1 The Review Group was very impressed with the plans for the provision of Extra Care Schemes and Villages across the city and it welcomed the very real addition to the choice and quality of housing provision and facilities for older people in Birmingham from all tenures that they will deliver. Members recognised that the allocation arrangements for these schemes will be the key to their success as these very directly influence the age and care profile of the resident groups within the schemes. Nomination arrangements need to be carefully considered at an early stage and be flexible enough to enable the profile of the extra care community to be managed effectively to fulfil their objectives.
- 9.4.2 Since extra care housing is a fusion of housing and care, it is important that there is clarity as to its role in responding to the sometimes competing pressures of care and housing needs.
- 9.4.3 Members heard the City Council is keen to ensure that there is a wide variety of older people with a balanced spectrum of needs within each village scheme. It is therefore essential that both Directorates work closely together to ensure that Extra Care Villages are able in practice to deliver the mixed communities of need that are essential to the Extra Care principle.
- 9.4.4 This must not be allowed to be compromised as a result of the changing plans for Care Centre provision in the city that might arise as a result of the current review.

	Recommendation	Responsibility	Completion Date
R8	That the Cabinet Members for Adults and Communities and Housing work closely together in respect of the nomination policy to ensure that the principle of mixed communities of need in Extra Care schemes is maintained and report back to scrutiny on how this will be practically delivered, given the doubts surrounding the level of future Care Centre provision that might now be available.	Cabinet Members for Adults and Communities and Housing	March 2010

9.5 Housing Related Support for Older People in Their Own Homes

- 9.5.1 Most older people prefer to remain in their own homes for as long as possible but as their health and mobility declines they may need some extra help to enable them to remain living independently. In addition it has been estimated that older people's falls cost the NHS £¾bn a year as well as often precipitating a permanent move to a care home. Making minor home safety modifications can ensure many falls are prevented. It is clear therefore that providing some preventative measures and practical support for older people in their own homes can have



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significant wellbeing and budgetary benefits. Members heard about the range of services and support available from the two Directorates for older people living in their own homes. This included Adults and Communities provision of care packages based upon assessed need and Housing and Constituencies initiatives aimed at improving and maintaining homes, improving thermal comfort, maintaining independence and protecting private tenants. Members particularly welcomed the joint working between the Directorates that will result in the development of a city-wide handypersons scheme.

- 9.5.2 Members heard that the Private Sector Stock Condition survey conducted in 2005/6 found that a high proportion of that housing stock failed the Government's Decent Homes Standard. It was also noted that a large number of vulnerable households live in non decent housing stock. The most common cause of failure to meet the standard is identified as being related to thermal comfort issues. The Council coordinates a range of interventions to help to address non decency in the private sector however it has no direct control over the take up of these initiatives. Members were keen to ensure that measures were taken to enhance the targeting of assistance particularly of thermal comfort measures to vulnerable older people and looked forward to hearing the results of 2009/10 Private Sector Housing Stock Condition Survey which would give an up to date assessment of the current position and enable consideration to be given to new methods of measuring the impact of assistance provided.

	Recommendation	Responsibility	Completion Date
R9	That the Cabinet Member for Housing enhances the targeting of assistance, in particular thermal comfort measures, to vulnerable older people living in private sector housing to address non-decency.	Cabinet Member for Housing	March 2010
R10	That following the 2009/10 Private Sector Housing Stock Condition Survey the Cabinet Member for Housing reports back to Housing and Urban Renewal O&S Committee on new methods of measuring the impact of assistance.	Cabinet Member for Housing	March 2010

9.6 Supporting People

- 9.6.1 The Supporting People Programme offers a huge range of housing support to vulnerable people in the city. It currently funds projects supporting older people to the tune of £8m. The key objective of the programme is to provide funding for preventative services that intervene at a point before people fall into crisis or escalate to a substantial or critical need. It provides a suite of services that underpin social, health and housing services that are available to people regardless of housing tenure.
- 9.6.2 Members heard that the programme is now subject to considerable change. Up until recently there had been no selection of providers of services. This will now change as a competitive process (as



required nationally) is being undertaken to award future contracts. The contract negotiation process for services to older people will conclude in September 2009.

- 9.6.3 In addition the ring fence that ensured that the Supporting People resources could only be used for housing support is being removed and in future the resources would be part of the Local Area Agreement.
- 9.6.4 As part of the review Members looked closely at the commissioning process being employed by the team and were pleased to hear of the safeguards that were in place to ensure that the process did not adversely affect smaller providers from the voluntary and community sector or black and ethnic minority organisations. Members heard from some organisations about the burden that some of the administration requirements of the programme place upon them and the Review Group was keen to see if these could be simplified.
- 9.6.5 Members were concerned about the loss of the ring fence and the degree to which services for older people within the Supporting People programme might be reduced as a result of this. The Review Group was pleased to hear that the City Council was making the case for maintaining if not increasing the level of resources for housing related support and that the Local Area Agreement includes an indicator that reflects the difference that Supporting People makes to people's lives. Given the wide scale nature of the changes that are taking place with the programme it would be appropriate for Scrutiny to play a role in monitoring the outcome of these developments.

	Recommendation	Responsibility	Completion Date
R11	That the Cabinet Member for Housing monitors the impact on services to older people following the removal of the ring fence on the Supporting People Programme and reports back his findings to the Housing and Urban Renewal O&S Committee.	Cabinet Member for Housing	September 2010
R12	That the Cabinet Member for Housing reports back to the Housing and Urban Renewal and the Adults and Communities O&S Committees on the implementation of the simplified administrative arrangements of the Supporting People programme.	Cabinet Member for Housing	March 2010

9.7 Assistive Technology

- 9.7.1 Technology has huge potential to deliver significant improvements to the lives of older people and Members were impressed with the range of assistive technology that is currently available to support people to live independently in their own homes. However the Review Group was convinced that it was important that there is a balance to be maintained in terms of utilising this solution as relying too heavily on telecare risks creating an environment devoid of human



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interaction. The Council's Assistive Technology Strategy is being developed to ensure that this balance is maintained and that appropriate systems are fully utilised.

	Recommendation	Responsibility	Completion Date
R13	The Cabinet Member for Adults and Communities reports to the Housing and Urban Renewal and the Adults and Communities O&S Committees on progress on implementation of the action plan for the Assistive Technology Strategy, including proposals for monitoring equipment and actions taken to ensure social interaction for older people is maintained.	Cabinet Member for Adults and Communities	March 2010
R14	That progress towards the achievements of these recommendations is reported to the Housing and Urban Renewal O&S Committee in April 2010 in consultation with the Adults and Communities O&S Committee. The Committee will schedule subsequent progress reports thereafter, until all recommendations are implemented.	Cabinet Members for Adults and Communities and Housing	April 2010