“Housing an Ageing Population: The Extra Care Solution”

A report by Tim Brown, Principal Lecturer, De Montfort University

Report commissioned by Keepmoat and the Housing Learning and Improvement Network (LIN).
Supported by Greenwoods Solicitors LLP

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Background to the report...

"Housing an Ageing Population: The Extra Care Solution" is a report which develops the findings from an event hosted in 2010 by Bramall Construction and Greenwoods Solicitors LLP, with support from Department of Health and the Housing Learning and Improvement Network (LIN).

The event, which took place in April 2010 and was titled, *"A Journey through Extra Care: The people, the places the future"*, took delegates through Extra Care, setting the scene as it was, looked at the challenges going forward and surmised what the future of Extra Care housing could look like.

In April 2010 we were facing the possibility of a new Government and uncertainty around public sector provision of housing and services for older and vulnerable people. The 2010 event called on housing and health professionals to plan new and creative ways of delivering suitable accommodation, tailored to the needs of whole sectors of our communities and not merely those who might normally be accommodated in general needs housing.

Last year's conference was organised in order to bring together fellow professionals from a wide range of backgrounds including housing associations, developers, local authorities, health practitioners, architects and consultants with a view to sharing experiences and learning from each other about good practice and innovative delivery methods when it came to Extra Care.

The report *"Housing an Ageing Population: The Extra Care Solution"* is being launched at this year's Extra Care conference *"Delivering Extra Care: funding, development and realisation"* as a response to the new agenda of the coalition government.

The report focuses on :

Aligning Extra Care Provision with Government Policy

- The cuts in public expenditure provide challenges and opportunities for meeting the needs of an ageing society. On the one hand, traditional public capital and revenue streams will be less certain. However, there are positive prospects including:

- Aligning Extra Care provision with the personalisation, choice and individual budgets in health and social care.

- Meeting the needs of vulnerable older people through engaging with the community budget approach that is being piloted by 16 councils and their partners.

- Engaging with the debates on the future direction of public services such as co-production.

- Even more effective partnership working between councils, developers, housing associations and users on the design, development funding and delivery of schemes and services.

Lessons from Abroad

- There are useful lessons that can be learnt from other countries in meeting the needs of an ageing society. In the Netherlands and the USA, there is considerable interest in multi-generational housing as well as in developing naturally occurring retirement communities (NORCs). These are important issues for the UK and the current focus on the big society, which includes a commitment to intra-generational relationships.

Addressing the Challenges of an Ageing Society

- The percentage of the population over 65 years of age grew from 15% in 1984 to 16% in 2009; an increase of 1.7 million people. It is forecast to rise to 23% by 2034. The fastest rise has been in the over 85 age group which has doubled over the last 25 years to 1.4 million. It is estimated that this will rise to 3.5 million over the next 25 years (which will account for over 5% of the population.

- The Alzheimer's Society has highlighted that there are currently 750,000 people living with dementia in England & Wales, and approximately 50,000 people are likely to be placed in residential care because of a lack of suitable support in the home and the community. The vast majority of carers and those with dementia aspire to remain in their own homes wherever possible.

This year, Bramall Construction's parent company Keepmoat has again brought together the expertise of Greenwoods Solicitors LLP, The Department of Health and The Housing LIN to deliver a second high profile conference *"Delivering Extra Care: funding, development and realisation"* in order to highlight how the sector has moved on significantly from the position it was in last year.

We are sure you will leave this year's conference with a deeper knowledge into how we can continue to work together as a sector to ensure that housing for older people can be successfully developed in order to meet the demands of our ageing population.

About the Author...

Tim Brown BSc (Hons), Dip TP, PhD, MCIH.

Tim is a qualified town planner and a corporate member of the Chartered Institute of Housing. He has been a senior and principal lecturer in town planning and housing studies and is currently Director of the Centre for Comparative Housing Research at De Montfort University. The Centre has a close working relationship with OTB Research Institute at Delft University of Technology in the Netherlands, which is the largest housing research centre in Europe.

His main areas of expertise are the housing needs of older people, comparative housing studies, regeneration, housing market studies and choice-based lettings. Tim is involved in consultancy and research for a wide range of local authorities and housing associations. Current projects include work on community budgets, older people and the big society and Extra Care housing.

He has a particular interest in comparative housing studies and has recently visited universities and local authorities in the Netherlands and the USA to research regeneration initiatives as well as the housing needs of an ageing society.

He has been a board member and chairperson of a number of housing associations and is currently a member of Coventry Partnership and Training, Regeneration, Employment, Education and Sustainability (TREES), which is one of the largest social enterprises in the East Midlands.

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About Keepmoat...

Keepmoat is a leader in delivering community regeneration across England, Scotland and Wales.

Through our delivery companies, Bramall Construction, Frank Haslam Milan, Keepmoat Homes and Milnerbuild, Keepmoat has a proven track record of delivering a range of core services including; affordable new homes for sale, rent and shared ownership; social housing new build, refurbishment and older people's accommodation; responsive repairs and maintenance.

Keepmoat are members of several national, regional and local registered provider frameworks, care provider frameworks and HCA Development Partnership Panel and Public Land Initiatives.

At Keepmoat we are passionate about creating vibrant, sustainable communities in which people are proud to live and work.

Keepmoat's Extra Care Expertise

Through our delivery companies Bramall Construction and Frank Haslam Milan, Keepmoat have been developing Extra Care and other supported housing solutions for more than 10 years. We are proud to have successfully delivered in excess of 2575 units in more than fifty five schemes.

We tailor our solutions to meet individual client requirements. We provide:

Bespoke financial solutions
We understand the different financial models available and maximise investment while building high quality developments on a guaranteed and affordable budget.

Innovation through design
Every scheme benefits from our high standards of design and build. Our innovative design solutions are achieved through working closely with a range of trusted experts.

Specialist housing provision
Keepmoat provides housing solutions to meet the growing demand for specialist housing. The established team at Keepmoat has a wealth of experience and can bring added value to projects.

Keepmoat's delivery companies have delivered individual new build, remodelled schemes and Extra Care at the heart of regeneration projects.

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We provide specialist housing solutions through designs that maximise and build efficiency. We have an understanding of design that enables us to value engineer schemes that are high quality yet affordable.

Total project management
We have a full range of skills in-house to provide a total project management package. Working with our partners, we ensure a comprehensive delivery service from beginning to end.

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About Greenwoods...

Greenwoods Solicitors LLP

Excellent Extra Care provision requires team work from inception to operation. That's just what you get from the experts at Greenwoods.

Working with us you can access legal advice on every aspect of the process from development of extra care provision through to delivery and into operation and management.

We are well known for our proactive approach. We look for solutions (rather than just problems) and adopt a "can-do" attitude. We are committed to drafting legal documents in plain English and to communicating with our clients in a straightforward manner. Extra Care projects are complex enough. You need to work with lawyers that simplify not complicate.

We can assist with:

- Site assembly
- Development agreements
- Procurement procedures
- Construction contracts
- Operator contacts
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- Resolving disputes
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- Housing management
- Unit sales

Hopefully our support of this research demonstrates our commitment and wider contribution to the extra care arena.

We are not the biggest law firm, but we have successfully identified the market in which we are best placed to operate. By knowing who we want to work for and having the right lawyers we have focused and developed our strengths to give our clients the very best service.

Talk to us about how we can help you to deliver your extra care project and get the legal framework right for effective future operation.

Graham Cooper, Head of Social Housing, is happy to discuss your ideas and issues on an informal basis.

Graham's direct line is 01733 887626 or email gmcooper@greenwoods.co.uk

About the Housing LIN...

The Housing Learning and Improvement Network

The Housing LIN is the leading ‘knowledge hub’ for over 5,700 housing, health and social care professionals to access the latest on-line information on the design, development and management of housing with care for older people. It also offers opportunities for commissioners and providers to work together to share information regionally on innovation and improvements that both enhance the housing and lifestyle choices of older people in retirement and meets their health and wellbeing needs.

Formerly funded by the Department of Health (DH) and now supported by ADASS and the Homes and Communities Agency (HCA), the Housing LIN has been responsible for implementing the DH’s £227m Extra Care Housing capital programme. Working closely with over 80 authorities that have received grant funding, it has gained considerable experience and expertise on the business processes, market drivers and consumer preferences for Extra Care Housing for rent and for sale. The recent DH announcement of a further £251m capital allocation will provide further opportunities for commissioners and providers to make the case for new Extra Care Housing or refurbish/remodel existing schemes, including making best use of telecare.

To find out more about the Housing LIN, to register to receive news updates on our comprehensive range of resources or events in your areas, either go to: www.housinglin.org.uk, email us at info@housinglin.org.uk or contact us on 020 7820 8077.

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The Report...

HOUSING AN AGEING POPULATION

Summary

- There is a considerable amount of high quality guidance and reports on extra care housing for policy makers and practitioners. This is exemplified by the work of the Housing Learning and Improvement Network (LIN).

- Nevertheless, there are fundamental changes taking place that will influence the future direction of provision. These include the emerging policies of the coalition government, tackling the public expenditure crisis and an ageing society (including addressing issues such as dementia).

- Although these may appear to challenge many aspects of extra care provision, they in fact provide an opportunity to rethink ideas. It is a 'glass half full rather than a glass half empty'.

- Housing policy makers and practitioners need to continue to widen their horizons and be engaged with broader debates on, for example, welfare reform, wider public service reform and the big society, care funding and proposed changes in the National Health Service (NHS). These set the context for the future of extra care.

- There are opportunities to align extra care provision with personalisation, choice and individual budgets in health and social care as well as engaging with the debates on the future direction of public services such as co-production, the big society and volunteering. This will contribute to putting users and carers at the centre of debates and discussions.

- The community budget approach that is being piloted by 16 councils and their partners offer the prospect of rethinking our approach for meeting the needs of vulnerable older people.

- Even more effective partnership working is required between councils, the health sector, developers, registered providers and users on the development, funding and delivery of housing with access to care and support services.

- The role of councils as strategic enablers and facilitators will become more important because of the devolution of powers from national and regional bodies through, for example, the Localism Bill.

- Extra care housing has an important function in helping local housing markets to function more effectively by freeing up under-occupied family housing

- Extra care provision will have an increasing role to play in meeting the needs of a wide range of types of vulnerable people such as those with learning difficulties and those with dementia.

- With the increasing focus on a neighbourhood agenda, the function of extra care provision in meeting the needs of the wider community will become increasingly significant especially as only 5% of older people live in specialist accommodation.

- There are important lessons that can be learnt from other countries in debating a neighbourhood approach in meeting the needs of an ageing society. In the Netherlands and the USA, there is considerable interest in multi-generational housing. The concept of naturally occurring retirement communities (NORCs) has been at the centre of debates in the USA on improving the quality of life for older people who wish to remain in their own home and neighbourhoods, but require access to support services.

- It is clear that one future direction for extra care provision in this country is, to adopt an inclusive neighbourhood approach to local development plans and community regeneration, thus, placing extra care into the heart of all communities.

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Acknowledgements

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Glossary

BSF	Building Schools for the Future
CBL	Choice Based Lettings
CIH	Chartered Institute of Housing
CSED	Care Services Efficiency Delivery
CSIP	Care Service Improvement Partnership
DCLG	Department for Communities & Local Government
DWP	Department for Work and Pensions
ESRC	Economic and Social Research Council
EVOLVE	Evaluation of Older People's Living Environment
GP	General Practitioners
HAPPI	Housing our Ageing Population Panel for Innovation
HCA	Homes and Communities Agency
Housing LIN	Housing Learning and Improvement Network
IDeA	Improvement and Development Agency
ILC-UK	International Longevity Centre-UK
JSNA	Joint Strategic Needs Assessment
LGA	Local Government Association
LGID	Local Government Improvement and Development
LIFT	Local Improvement Finance Trusts
NHF	National Housing Federation
NHS	National Health Service
NORC	Naturally Occurring Retirement Communities
ONS	Office for National Statistics
PCT	Primary Care Trust

PFI	Private Finance Initiative
POPPI	Projecting Older People Population Information System
SEV	Social Housing Experiment Unit
Telecare LIN	Telecare Learning and Improvement Network

1. Introduction

The aim of this report is to contribute to the debate on the future of extra care housing and add to the recent publications by HAPPI (2010) and the National Housing Federation (2011). The Bramall Construction (a Keepmoat Company) and Greenwoods Solicitors LLP Extra Care conference entitled, 'A Journey through Extra Care - the people, the places, the future', was held in Cambridge in April 2010. It focused primarily on current policies and practices for extra care provision. The recorded content of the debates that took place during the discussion sessions at this conference have informed and fed into this report. The Keepmoat follow-up conference in April 2011, 'Delivering Extra Care - funding, development, realisation', supported by Greenwoods Solicitors and the Housing LIN centres on delivering extra care in an uncertain and changing environment as well as looking forward towards the end of this decade.

There is already a wealth of material on existing types of extra care provision. There are good practice guides, toolkits and evaluation studies. The Housing LIN, for example, has over 30 detailed factsheets, good practice case studies and a comprehensive toolkit covering each stage of the process from researching need and demand through to implementation, monitoring and evaluation – see Appendix A.

The external environment is, however, changing. A complex interrelated set of factors will impact on extra care provision over the next decade. These include an ageing society, technology, emerging coalition government policies and the state of public finances. There is a danger that the reaction to these forces will be one of retrenchment to protect the status quo of extra care principles and practice and the lessons that have emerged over the last two decades. The likelihood of this scenario should not be under-estimated. In late 2010 and early 2011, there has been extensive media coverage of the tensions between central and local government on, for example, new funding arrangements post Supporting People, the implications of social care and welfare reform (including the financing of care packages) and cut-backs in capital funding including housing PFIs (private finance initiatives). At the same time, policy makers and providers are faced with immediate problems such as tackling voids in difficult-to-let sheltered housing units and re-designing these types of schemes. It is possible but not inevitable that attention will, thus, focus on the immediate prospects and issues of delivering existing services.

This report, however, argues that the current situation should be seen as an opportunity rather than a challenge. This point has been highlighted by the National Housing Federation (2011, p5)

> *"The Breaking the Mould project aims to help providers to break the current mould of older people's housing and support, and build on the innovation in the sector to create a new and exciting offer."*

This report focuses on the future role for housing associations, also known as Registered Providers. The HAPPI Report (2010) provides a stimulating

perspective on the planning and development options. They both illustrate a willingness to take the ‘once in a decade’ chance to debate a vision for extra care for 2020 onwards. This report is not intended to duplicate the work of these previous studies. Instead, the specific objectives are to:-

- Clarify and set out the changing external environment for extra care;
- Comment on the emerging coalition government policies and their likely trajectory;
- Consider the role of extra care in addressing wider issues; and
- Assess the lessons that can be learnt from other countries especially in relation to a neighbourhood approach.

The material for this report is based on secondary sources. These include a review of literature and policy, tasks associated with the author’s work as a local improvement advisor for Local Government Improvement and Development (formerly the Improvement and Development Agency – IDeA), involvement as an advisor to Hull City Council and discussions with colleagues in North America and the Netherlands. No primary research has been carried out.

The next section focuses on the implications of an ageing society. This is followed by an assessment of emerging government policies. Section four considers how extra care provision can contribute to addressing the needs of vulnerable households as well as the neighbourhood agenda. The penultimate section draws on material from the Netherlands and the USA to highlight that there are useful lessons to be learnt from other countries. This is followed by a set of recommendations.

There is in Appendix A an extensive set of information on recent sources of information. One of the major justifications for its inclusion is that housing policy makers and practitioners need to ensure that they are aware of the broader debates that impact on extra care provision.

2. An Ageing Society

The demographic features of an ageing society are well-established and have been highlighted in numerous reports such as the Audit Commission (2008) and the National Housing Federation (2010) as well as by the Office for National Statistics (2010). A list of sources of information on this theme can be found in Appendix A. The salient features for the UK include:-

- Life expectancy rates at birth continue to rise and currently it is 78 years for males and 82 years for females.

- The percentage of the population over 65 years of age grew from 15% in 1984 to 16% in 2009 – an increase of 1.7 million people. It is forecast to rise to 23% by 2034.

- The fastest rise has been in the over 85 age group which has doubled over the last 25 years to 1.4 million and it is estimated that this will rise to 3.5 million over the next 25 years (which will account for over 5% of the population.

- The number of centenarians has more than tripled in the last 25 years and is forecast to increase eightfold by 2034 to nearly 90,000 people.

From an international perspective, it is noteworthy that the UK population is now not ageing as rapidly as countries such as Germany and Japan. In 2009, 16% of the UK population was over 65 years of age compared with 20% in Germany and 22% in Japan. Nevertheless, it is estimated that by 2050, over a third of the population in Europe will be over 60 years of age. This has generated considerable debate on the 'economics of an ageing world' (see, for instance, Lisenkova, McQuaid and Wright, 2010). This has concentrated on a wide range of macro-economic and labour market consequences including the participation of older workers, retirement age and the cost of welfare including subsidised housing. It raises important issues for housing providers if, for example, there is trend towards later voluntary or statutory retirement age. Should allocation of specialist housing be targeted at much older age groups?

But, it is equally important to emphasise the positive features of demographic change. For instance, the proportion of economically active pensioners has doubled over the last fifteen years. Furthermore, approximately 65% of volunteers and 25% of carers are over 60 years of age. Recognising the significance of these growing contributions is important in planning services especially with the focus of the coalition government on localism and the big society.

It is, however, important to drill down below the headline figures for England and the UK. The patterns of demographic change vary by local authority area. For example, it is primarily counties throughout England as well as unitary authorities in the South East that are faced with the most intense growth in the

population over 85 years of age over the next 20-25 years (Ridgeway Associates, 2011).

In contrast, many inner London borough and urban conurbations face a lower intensity of demographic change. Similarly, there are wide variations by local authority area of the rate of increase of black and minority ethnic elders. Overall, in England, there is likely to be a tenfold increase to 1.8 million people by 2028. But this will be a specific challenge to some local authority areas that are not in general terms facing a rise in the over 85 years of age population. The role of councils and their partners as strategic enablers in setting the policy framework based on robust research that identifies challenges and opportunities is essential.

From a socio-economic perspective, there is a growing consensus that we need to move away from bland generalities such as ‘asset rich revenue poor’ older households. Similarly, assumptions that older people trust and welcome decisions of service providers over what is appropriate are no longer valid. Personalisation, choice and empowerment are equally relevant for older people (see Brown and Yates, 2010). The reality is one of diversity. For example, the National Housing Federation (2011) distinguishes between:-

- Asset rich and high aspiration older households who own outright their home and are able to benefit from significant savings and investment as well as generous pensions. Approximately 60% of households with a head of household over 65 own their properties without recourse to a mortgage

- Asset rich and income poor households who struggle to maintain a reasonable quality of life including adequate housing. There has been considerable debate over the last decade on how these assets can be released. Terry and Gibson (2010) point out that there are a million home owners with over £100,000 worth of housing equity who can’t afford a high quality of life at home.

- No assets and little income households that are often attempting to survive on the breadline. It is estimated that nearly a quarter of older households live below the poverty line.

Again, the positives need stressing. As Sinclair (2010) points out, there are opportunities for public, private and voluntary sector providers to develop products and services that meet the aspirations and expectations of each of these groups especially ‘asset rich and aspirational older households’. The development of private sector retirement villages and extra care housing schemes is illustrative of this approach. There is clearly potential for organisations to make use of customer relationship management and profiling techniques (e.g. customer insight) to rethink the product and service offer for the diverse range of older people.

It is, however, important to highlight that only 5% of older people live in specialist purpose-built accommodation. Even with optimistic scenarios on development, funding and prioritisation for new development and the

remodelling of existing schemes, this is not likely to alter significantly by the end of this decade. By 2020, between 80 and 90% of older people will be living in the community with a diversity of needs and requirements. Policy makers and providers will thus need to address this part of the 'market' inclusively.

The diversity of an ageing society is further exemplified by issues of disability, illness and poor health. Although their likelihood increases with age, there is not a straightforward or simplistic relationship. Categorising people over 85 as the 'frail elderly' is not necessarily helpful if it results in a set of assumptions about service provision and eligibility. Furthermore, there has been a growing recognition in recent years of the importance of addressing issues such as dementia. The basic data is stark. The Alzheimer's Society (2011) has highlighted:-

- There are currently 750,000 people living with dementia in England & Wales and this is likely to double over the next 30 years and the costs are likely to treble.

- Approximately 50,000 people are likely to be placed in residential care because of a lack of suitable support in the home and the community.

- The vast majority of carers and those with dementia aspire to remain in their own homes wherever possible.

Overall, there are a series of key messages for housing authorities, providers and developers about an ageing society:-

- Policies and services should be customised to reflect the diversity of older households and their needs and requirements.

- The focus of provision must be on both purpose-built / specialist accommodation and on households living in 'general needs' housing in the community.

- Tough decisions will need to be made by providers and commissioners on prioritising the allocation of services and specialist accommodation because of an ageing society and an increasing attention that needs to be given to addressing issues such as dementia.

- New thinking is required to address the emerging challenges over the next 25 years such as the rapid increase in the number of households over 85 years of age and the growing concern on how best to address dementia.

- There is no 'one size fits all approach' as there is a geographical differentiation of the scale and nature of requirements. Different policies, provision and services will be required in different areas, including planning, to reflect a growing demand for a spectrum of accommodation and housing-based care and support for older people.

- Local authorities have a vital leadership role in working with partners and users to identify the specific requirements of an area and developing appropriate strategies.

- The opportunities of an ageing society should be grasped such as the willingness of some older people to continue to work past retirement age and undertake voluntary work. The links with the coalition government's big society agenda are thus important.

3. Emerging Coalition Government Policies

Politicians and their advisors in new governments frequently emphasise their differences with a previous administration. Nevertheless, there is often a continuation of broad principles as well, as consensus on the issues if not the solutions. This is certainly the situation with regards to an ageing society and the needs of older people. All three main political parties in England, for instance, focus on personalisation, choice and empowerment. Therefore, this section looks at the similarities, differences and continuing challenges for the coalition government.

Similarities

The consensus and similarities should not be under-estimated. In the second half of the last decade, the Labour Government published a stream of policy statements beginning with its 'opportunity age' report in 2005 that provided a national strategy on ageing. In 2008, the Department for Communities and Local Government launched its policy statement on 'Lifetime Homes, Lifetime Neighbourhoods' while in 2009 the Labour administration published 'Building a Society for all Ages'. A re-occurring message in these statements was that age by itself was less important than individual capability and that public, private and voluntary sector agencies needed to develop products and services that took this theme on board. Although there has been no formal policy statement on an ageing society or the housing needs of older people since the general election, there is no reason to doubt that the coalition government supports this perspective.

From an organisational perspective, continuity is also evident with little change of departmental responsibilities between the three main players – the Departments of Communities and Local Government, Health and Work and Pensions. Brown and Yates (2010) point out that there is a political consensus on the principles of personalisation, choice and empowerment. This continuity is emphasised in, for example, the Department of Health's vision for adult social care published in November 2010. One of the themes that is emphasised is personalisation

> *"Individuals not institutions take control of their care. Personal budgets, preferably as direct payments, are provided to all eligible people. Information about care and support is available for all local people, regardless of whether or not they fund their own care." (Department of Health, 2010)*

At a practical level, the Department for Communities and Local Government has published a good practice guide to social housing landlords and other stakeholders on helping disadvantaged groups to maximise the potential of choice-based lettings (CBL). It urges them to consider setting up accessible housing registers (Lomax and Pawson, 2011). There is a particular focus on helping older households who may, for instance, not exercise choice because of a lack of information in a suitable medium. It is also emphasised that

specialist accommodation (including extra care housing) should wherever possible be allocated and let through CBL.

There are other common interrelated themes between the current and previous administrations including:-

- Proactive community-based preventative approaches that are aimed at addressing the needs of households before there is a need for major intervention. The benefits of this type of approach are well-known and have been highlighted by the Centre for Policy on Ageing (2011).

- Partnership working and collaboration between health, housing and social care sectors. This is illustrated by the continuing commitment at a policy level to joint strategic needs assessments (JSNAs) and the relevance of older people's strategies. At a practice level, examples include a common single assessment system for vulnerable households and specific initiatives such as additional funding to address issues such as bed blocking.

- Piloting joined up thinking including pooled / single budgets has been emphasised by the current and previous administrations. The present terminology is 'community budgets'. Previous jargon included 'total place', 'total capital' and 'place-based budgets'. The emphasis is on radically rethinking organisational structures and financial arrangements to better delivery services at less cost. Currently, there are 16 community budget pilots. These are focusing on households with multiple needs. Clearly, there are considerable opportunities to adopt this approach to meet the needs of some groups of older people.

However, each of these three themes illustrates the gap between principles and reality. The credit crunch, recession and public expenditure cuts are making it increasingly difficult to fund low level preventative support (see Richardson, 2010). The principles of partnership working are well-established but policy changes may hinder joint working between housing, health and social care when primary care trusts are abolished and replaced by GP commissioning under reforms to the National Health Service. Finally, in relation to community budgets, there is continued coverage in, for instance, the Local Government Chronicle and Municipal Journal over the concerns expressed by councils over the reluctance of some government departments to abandon ring fenced allocations so as to enabling the pooling of budgets at a local level.

Differences: Public Expenditure, Localism and NHS Reforms

The major difference between the coalition government and the previous administration is over the pace and timing of public expenditure cuts (see Richardson, 2010). A useful overview of the impact of the initial credit crunch on extra care housing provision can be found in King and Howarth (2009).

The current emphasis is on taking rapid action from 2011/2012. Although some protection has been given to the health sector, local government, housing and social care are faced with unprecedented financial pressures. This is manifesting itself in many ways that directly or indirectly affect housing for older people including:-

- Reductions in Supporting People funding, which has been magnified by the abolition of the ring-fencing mechanism.

- Decreases, changes and uncertainty in capital funding for housing:-

    - The Comprehensive Spending Review in October 2010 highlighted that £4.4 billion would be invested in new affordable housing over the next four years. This represented a 60% reduction compared to the £8.4 billion over the previous three years.
    - The Treasury withdrew support for housing PFIs as well as initiating a value for money review of this funding mechanism. This is particularly relevant for extra care housing as the Private Finance Initiative is one of the major sources of funding.
    - The Department of Health has set aside £251 million for councils to commission a range of capital programmes for the next two years including extra care housing.

- Cut-backs by councils in grants to voluntary and third sector organisations that often play a significant role in, for example, providing advice and support for older people.

- Reviewing priorities with councils frequently starting from a baseline situation of statutory requirements. This puts enormous pressure on principles of pro-active preventative low level interventions.

In addition, many older and disabled people will also be affected by the proposed welfare reforms. This is likely to have a significant impact upon the viability of many schemes where residents may be dependant upon a range of welfare payments, including housing benefit. Further savings are likely to be achieved by the coalition government through measures such as:-

- The replacement of Disability Living Allowance by a Personal Independence Payment.

- Limiting Employment and Support Allowance for a year for some contributory claimants.

- Changes to non-dependant deductions for those who may have a carer living with them, may result in a reduction in Housing Benefit as will restricting a claimant in, say, a two-bedroom extra care property, to the Housing Benefit payable in respect of a one-bedroom property. However, a significant concession is that this is dependant upon the extent of disability needs.

- The phased removal of Housing Benefit leading to the full implementation of the Universal Credit and transfer of local Housing Benefit budget from Local Authorities to the Department for Work and Pensions.

A second difference relevant to meeting the needs of older people is the emphasis on localism and the big society (as identified in the Department for Communities and Local Government structural reform plan). The focus on neighbourhoods and local communities aligns with the issue of the majority of older people living in 'general needs' housing rather than specialist / purpose built accommodation. There are opportunities to consider the relevance of a range of emerging policies such as the community right to buy and the community right to challenge. The former refers to opportunities for local groups to request that councils list assets that are of community value. These might include shops and community buildings, which are often vital resources for older people. Subsequently, if these assets are put up for sale, local groups have extra time to submit bids to take over their running. The latter relates to the ability of voluntary groups, community associations and local authority staff to take over the running of local public services.

A third difference is the reform package for the National Health Service. This has already been referred to in the previous section. There is growing evidence that there has, over the last decade, been more effective collaborative working between councils and primary care trusts (PCTs). This has been especially clear in localities where there are joint management teams e.g. Herefordshire. Glasby and Littlechild (2009) highlight the trend in the first decade of this century towards aligned budgets for specific groups as well as joint working on personalisation and choice. At best, the abolition of PCTs and their replacement by GP commissioning creates a period of uncertainty in relation to collaboration on addressing the requirements of groups such as older people.

Continuing Challenges

The fundamental challenge is addressing the rising cost of care in an ageing society. There has been much debate over the last decade that has usefully been summarised in a series of studies by the Joseph Rowntree Foundation and a report by the Kings Fund – see Appendix A for more details. Stone and Wood (2010) identify the following four salient principles. Firstly, a system must be seen as 'fair' i.e. a wide range of stakeholders need to 'buy in' to any settlement. This includes central and local government, other public as well as private and voluntary sector providers, tax-payers and, most importantly, users. Secondly, it must be straight forward and simple to understand. Thirdly, it has to be sustainable from both a financial perspective and socially. The latter relates back to the ageing society phenomenon (see previous section). A system must address current and future socio-demographic patterns. Lastly, it must take account of the policy consensus over personalisation, choice and empowerment.

There is general agreement over these four principles. The 'devil is in the detail' of converting these ideas into a policy and practice reality. The

Coalition Government set up an independent commission in May 2010 to consider how to ensure affordable and sustainable funding for care and support for all adults in England (including older people). It is scheduled to report back in late summer 2011. The Commission on Funding of Care and Support (also known as the Dilnot Commission) issued as part of its 'call for evidence' a briefing paper highlighting key issues – see Appendix A for links. These include:-

- Balancing the cost of care and support between the individual and the state.

- Addressing the issue of the assets (e.g. property) held by people in need of care and support now and in the future.

- Making effective use of public funding.

- Devising proposals that can be implemented in a reasonable timescale and have the support of a range of stakeholders including current and future users.

A number of housing organisations have made detailed submissions to the Dilnot Commission. The National Housing Federation, for instance, argues for a single funding system, a consistent and long term approach that is not subject to frequent amendments, balancing low level and acute needs, a detailed examination of the use of housing equity to fund care and support and an alignment with the emerging housing investment framework so as to enable the development of specialist provision (Bird, 2011).

The outcome of the Dilnot Commission and the response by the Coalition Government is likely to propose fundamental changes to the existing system of funding for care and support. This will be followed by a Social Care White Paper later in 2011. The timing of the introduction of a new system, however, is uncertain. Housing organisations are, thus, faced with a major challenge. They have to meet existing and short term requirements for provision of services based on the current complex, fragmented and unsustainable framework, while at the same time having regard for a new long term 'solution'.

4. A Future Direction for Extra Care Housing: Neighbourhoods

There are many emerging ideas to take forward extra care provision. HAPPI (2010), for instance, suggests that the best examples of innovative practice include a hub or local point or common room which offer residents the opportunity to engage with others as well as providing space to accommodate diversity – a key theme in the earlier section on an ageing society. The National Housing Federation (2011) argues that there is a strong business case for registered providers ensuring that the products and services are user-centred. This creates extra care schemes that are successful and generate surpluses that can be re-invested in care and support. The Local Government Association (2010) reminds us that much of the current housing stock (including specialist provision) does not address the needs of an ageing population. It suggests that a fundamental change for the better can only be delivered if local government works more effectively together with developers and users on extra care and other solutions.

The proposal for a neighbourhood approach in this section, which is a key theme of this report, is only one of many futures for extra care provision. It, nevertheless, dovetails with the recommendations in these other reports. A hub or local point or common room could function for older people in the neighbourhood as well as for the specific scheme. It, additionally, could provide a focus for the local community as a whole and thus contribute to intra-generational community cohesion. From a registered provider perspective, a successful scheme that serves the wider community may generate additional revenue that can be re-invested. From a local authority viewpoint, a community-orientation begins to address a broad range of policy requirements. These include providing support for older and vulnerable households living in their own homes, enhancing neighbourhood sustainability and promoting community cohesion. An example of this is the Heald Farm Court scheme in St Helens that was the winner of the HAPPI category in the National Housing Design Awards[1]. It comprises 89 two bedroom apartments and three bungalows with a mix of tenure options. It functions as a village hub for a further 166 properties in the neighbourhood through the provision of dining, leisure and health care facilities.

At the same time, a neighbourhood approach takes account of a number of the issues highlighted about an ageing society (e.g. diversity of needs and requirements), and the emerging coalition government agenda (e.g. localism).

A Neighbourhood Approach

As will be seen in the next section, there are stimulating ideas on a neighbourhood perspective that can be gleaned from the Netherlands and the USA. It is, however, not necessary to focus solely on other countries. There are emerging examples of good practice in England. Birmingham, for example, is increasingly referred to as the 'the UK's extra care capital' (see

[1] For more details, go to http://www.idea.gov.uk/idk/core/page.do?pageId=23346195 and http://www.hdawards.org/archive/2010/winning_schemes/happi_winners/heald_farm_court.php.

also Lines 2010). Similar terminology has been used in respect of Stoke-on-Trent.

There are also emerging examples of good practice in the North of England. Sunderland, for example, is a city council taking the lead in driving forward a large extra care programme. It is in the process of negotiating the delivery of 1300 extra care units with existing partners. It has invested significant resources in developing a design guide for accommodation with support and care (Prentice, 2009). This initiative is particularly interesting as it is aligned with earlier projects on promoting social inclusion through local e-government (Brown, 2008). The projects centred on creating a network of electronic village halls to help socially excluded groups (such as older people) make use of the potential of information communications technology. North Yorkshire County Council, the largest rural county in the country is leading the continued development and delivery of the older persons and extra care housing strategy across the seven district local authorities with a further 30 schemes identified as required over and above its existing 16 schemes already operating or nearing completion. Both Sunderland and North Yorkshire have developed their strategies for extra care based on detailed and robust joint strategic needs assessments (JSNAs).

Wolverhampton City Council has developed a 64 unit extra care scheme as part of its regeneration plan for the Low Hill area (Bradley and Fielding, 2010, for a detailed analysis and description of this example). In summary, the development and delivery of the project has involved a wide range of partners including Keepmoat, the Primary Care Trust and Accord Housing Association as well as the local authority. As well as the extra care provision, regeneration initiatives have included the provision of a health centre through the Local Improvement Finance Trust (LIFT), a public park, and allotments.

Both the Birmingham and Stoke case studies featured prominently in an unpublished paper by the author for Hull City Council on housing provision for older people. Key interrelated elements of successful extra care provision include:-

- Scheme innovation: Birmingham and Stoke-on-Trent Councils have promoted retirement and extra care villages. These schemes are linked to telecare and e-health initiatives as well as assistive technology. There is also a strong emphasis on high quality design. Of equal significance, has been the emphasis on a continuum of types of provision for older people.

- Integration with wider neighbourhood regeneration initiatives: Stoke-on-Trent places considerable emphasis on extra care PFI projects contributing to the regeneration of low demand neighbourhoods. There is close collaboration with the housing market pathfinder.

- Strategic policy for the needs of older people and for extra care provision: Both Birmingham City Council and Stoke-on-Trent Council have well established strategies for older people and for providing new / remodelled

facilities and services. Funding bids for specific projects highlight this policy framework.

- Evidence-based approach i.e. there is a wide range of data and information to support proposals. Consultants or in-house teams have provided robust needs assessment studies e.g. JSNAs

- Multi-agency partnership: Both Birmingham City Council and Stoke-on-Trent Council have developed their strategies and projects with a wide range of partners including the public sector (PCTs), voluntary sector agencies (social enterprises and third sector agencies such as Age Concern now Age UK) and the private sector.

- Awareness of the broader policy and research framework: Both councils highlight their awareness of Audit Commission national studies, Joseph Rowntree Foundation research findings and the work of organisations such as the Housing LIN and Telecare LIN.

- Innovation: They emphasise the relevance of robust academic research leading to greater opportunities for sector innovation as well as developing better evidence of value for money and metrics that demonstrate customer outcomes, including the utilisation of assistive technology.

An example of the benefits to be generated through a multiple partnership / stakeholder development, is the extra care village / retirement village in Birmingham Acocks Green, which was the fourth of five to be approved and has Department of Health extra care funding. The following partnership will develop/deliver the proposal; the City Council, a charitable trust, a housing association and a private developer. Housing provision includes a mix of homes for rent, shared ownership and outright sale. The Council has 100% nomination rights. The majority of properties have two bedrooms so as to meet rising expectations among older people. The scheme includes a wide range of facilities for older people in the village and the surrounding neighbourhood e.g. a village hall, restaurant, café, bar, spa pool, fitness gym, shop, arts and craft centre, ICT suite, hair dressing salon, library, greenhouse and landscaped gardens. The accommodation is targeted at people in need of extra care including those with dementia. The Acocks Green scheme and the other retirement villages are all part of larger neighbourhood regeneration projects that have included investment through LIFT (for health centre development), BSF (for education provision including life long learning), New Deal for Communities and the Working Neighbourhood Fund.

The developments have been the result of an overall commissioning strategy that was agreed in the middle part of the last decade. This included the five retirement villages as well as remodelling sheltered housing and the development of smaller stand alone extra care schemes. It forms part of a 10–15 year plan for housing for older people. There is also an extensive database and information function underpinning the strategy. This makes use of, for example, the POPPI (Projecting Older People Population Information) system.

The Council estimates that the proportion of people over 85 years old will double in the next 20 years.

Joined-Up Thinking

A re-occurring theme of a neighbourhood approach based on an extra care village is that it links with a wide range of other policy initiatives – some of which have been highlighted in previous paragraphs. In summary, they include for example:-

- Addressing dementia: A neighbourhood focus provides 'care ready' services for older people seeking to exercise a lifestyle choice by supporting independent living for those with a long term condition. The Alzheimer's Society (2011) has highlighted that people with dementia have few choices and that they are often forced into care homes because of the lack of support services in their own homes

- Serving the needs of other groups: An extra care village or integrated extra care housing schemes into communities can provide services for those with physical disabilities and those with mental health issues and help as a stepping stone to longer term independence.

- Community cohesion: There is a concern that extra care and retirement villages unintentionally may lead to 'gated communities' (see next section) i.e. cohesive internal communities that have few links to the neighbourhood in which they are located. Intra-generational cohesion can be achieved through a neighbourhood approach on extra care as well as contributing to the achievement of the 'big society'.

- Neighbourhood regeneration: As has already been highlighted, local authorities in Wolverhampton, Birmingham and Stoke have placed considerable emphasis on using extra care housing as a key part of regeneration. This clearly ties in with the coalition government's thinking on localism, neighbourhood planning and community-led regeneration.

- Service quality: Extra care can act as an exemplar of high quality services for older people in the neighbourhood. This is an important emerging issue as there are concerns over the adequacy of home-based care. The Equality and Human Rights Commission launched an inquiry in November 2010 into the complex and confusing pattern of services.

- Telecare and e-health: Extra care can act as a hub to promote and enhance the use of assistive technology in the community (see also Brown, 2008). A number of local authorities are developing innovative approaches using the internet, broadband and mobile phones as well as local television and this can be developed at a community scale.

A Strategic Perspective

As has already been pointed out, a neighbourhood approach for extra care provision requires a strategic framework led by the local authority. This has been illustrated in the examples of Wolverhampton, Birmingham, Sunderland, North Yorkshire and Stoke-on-Trent. However as the National Housing Federation (2011) has pointed out, nearly a third of councils in a survey in 2010 had no strategy for housing for older people. This, nevertheless, represents a significant improvement on the situation in the early part of the last decade when only 6% of local authorities had a strategy. Progress continues to be made. Hull City Council, for example, developed a strategy for older people in 2008 and an accompanying action plan jointly with its health partners and the local strategic partnership, One Hull. This momentum has been maintained:-

- Health, care and well-being needs are annually updated for older people (and other groups) through the Joint Strategic Needs Assessment, which is undertaken by the Council and the Primary Care Trust. It includes data at a neighbourhood level.

- The telecare agenda has been taken forward. The Council and its partners (including technology providers) are involved in a pan-European project to explore how assistive technology could help older people and their carers. In addition, there is joint working with the University of Hull on telecare and telehealth.

- There is extensive collaboration and partnership working with a wide range of public, private and voluntary sector organisation. This includes the Goodwin Trust, a social enterprise, that leads on a ‘connecting neighbourhoods project’ which centres on the role of technology to improve the quality of life for older people.

The Local Government Association (2010) has usefully summarised the major requirements of a strategic approach by councils. Firstly, they have a vital role in building and maintaining a strong evidence-base on the needs and requirements of older people. Secondly, they can align their plans and strategies so that there is a comprehensive approach and integration of health, housing and social care policies. Thirdly, they can facilitate partnership working with other public, private and voluntary sector agencies so that there is effective co-ordination. Fourthly, councils have a pivotal role in leading discussions with older people and their representatives on their needs.

One linked aspect that is stressed by the Local Government Association is the role of place-based budgets, which are now referred to as community budgets. There are 16 community budget pilots in England that were announced as part of the comprehensive spending review in October 2010. The focus is on families with multiple needs. Clearly, this has relevance for addressing the needs of an ageing society. These pilots build on previous and on-going workstreams such as total place, total capital and place-based budgets. The over-riding principle is to provide better services at less cost through the aligning and pooling of public sector capital and revenue budgets. In relation to a neighbourhood approach on extra care housing, this might

include social housing grant, supporting people funding, warm front grant, home improvement loans and disabled facilities grants. The challenge is for central government departments to provide local authorities and other public sector agencies with greater freedoms to pool resources.

A strategic perspective involves taking a broader housing market perspective. Extra care housing provides an additional range of housing to address the diverse needs of an ageing society as well as providing more choice and options. At the same time, it can help to ensure a more balanced housing market. A range of high quality attractive types of extra care provision can facilitate tackling issues of under-occupation and older people living in family housing that is no longer suitable for their needs. This, then, frees up accommodation in the social rented and private sectors for other households[2].

Finally, the strategic perspective must be aligned with the business case for extra care housing. Baumker, Netten and Darton (2010) found that the overall cost per person increased after a move to extra care housing. But there were improved social care outcomes and improvements in the quality of life. Frontier Economics (2010) in a detailed study of the financial benefits of investment in specialist housing concluded that there is a net financial benefit for older people. Furthermore, although this study was carried out a national scale, the modelling is replicable at a local scale to justify decisions on the provision of specialist accommodation. Similarly, Ridgeway Associates (2011) – for the Housing LIN and South East Joint Improvement Partnership found that investment in extra care housing could help in reducing care budgets by diverting funds from relatively expensive residential care by helping people to remain in the community.

[2] The Housing Minister, Grant Shapps, announced in January 2011 funding of £13 million to help 50 councils develop initiatives to support older people to move from large unsuitable houses to more suitable accommodation – see http://www.communities.gov.uk/news/corporate/1821513.

5. Learning Lessons from Abroad

There is much debate on the relevance of a comparative perspective in public policy. But, apart from Brown and Yates (2005), there has been little coverage in the supported housing arena. One of the benefits that is frequently claimed for a comparative approach is that it promotes innovation through policy transfer i.e. successful ideas in one country are transferred to another. However, the practicality of policy transfer is frequently over-stated in that differences in the economic, political and social environments make such an approach problematic. A more fruitful stance is to use a comparative perspective as 'shock therapy' i.e. using policies and practices in other countries to challenge existing and traditional approaches without any necessary commitment on adoption. It is this latter approach that is used in this section of the report.

As has already been pointed out, many countries in North America, parts of Asia and Europe are faced with the phenomenon of an ageing society. In some countries, the scale of this issue is more pronounced than in Britain. Italy, Japan and Germany already have over 20% of their population aged over 65 compared to 16% in the UK. In the case of Japan, political observers have noted that an ageing population is one of the major issues facing the government and that the inability to address the consequences contributes to political instability. There are also significant differences in culture. In the Netherlands, for instance, there is a high level of respect for older people. This has manifested itself in policies and practices. An interesting housing-related example is that in the late 1990s under the Dutch equivalent of our CBL approach on allocations and lettings, the selection criteria in some areas for responses to property adverts was age of head of household. Similarly, in Japan, there is great reverence for older people as illustrated by the national senior citizens day on 15th September each year (which was established in 1947) and the national senior citizens week. This predates the United Nations international older peoples day on 1st October each year, which was well established in 1990. There is relatively little indication of much activity on this front in the UK apart from the publication of data on an ageing society by the Office for National Statistics (2010).

At a policy level, there are two approaches that have been developed in the USA and the Netherlands that provide interesting insights into a neighbourhood approach for extra care provision. These are multi-generational housing and Naturally Occurring Retirement Communities (NORCs). Each of these is now discussed in turn.

Multi-generational housing

There are a range of factors that have driven forward the idea of multi-generational housing in both the Netherlands and the USA. These are:-

- In the case of the Netherlands, the respect for older people (see above) has created an environment in which the elderly are regarded as important members of society, communities and the extended family. Multi-

generational housing is, thus, just one of a number of housing options available. The HAPPI Report (2010) includes a number of case studies from the Netherlands on other types of provision including the equivalent of our extra care housing.

- Promoting innovation in social housing is facilitated in the Netherlands through the social housing experiment unit (SEV). This is a government sponsored independent organisation that encourages innovation by municipalities and housing associations and carries out independent evaluation. There are ten programme areas and these include housing and care.

- Political support is important in both countries. In the Netherlands the Christian Democrat Party (CVA) has a policy commitment to encourage large scale building of multi-generational housing. – 0.5 million homes by 2040. In the USA, both the Democrats and the Republicans have emphasised the relevance of multi-generational housing.

- The economic crisis and the recession has encouraged families to consider 'more than one generation living under the same roof'. A survey in 2009 by real estate companies in the north east of the USA found that over 70% of property professionals expected a growing demand for this type of housing. Benefits included the pooling of financial resources, providing low level social care and health for elderly family members and readily available help with child care.

There has been little discussion of multi-generational housing in the UK in recent decades as well as a paucity of research (see Bottomley, 2007). The limited focus of the debate has been on whether the credit crunch and the recession will result in coping strategies by families faced by increases in house prices, the burden of debt and concerns of taxation of assets. But, as the experience of the USA and the Netherlands shows, multi-generational housing could be a lifestyle choice so meeting the aspirations of some types of older households. It would be worth organisations in the UK thinking carefully about customer aspirations in this area.

Naturally Occurring Retirement Communities (NORCs)

NORCs or naturally occurring retirement areas (NORAs) have become an important part of the policy debate in the USA as evidenced by a special edition of the *Journal of Housing for the Elderly* (2010) on this topic. It is generally considered as an area that was 'not originally defined for seniors but that has a large proportion of residents over 60 years of age'. They have evolved naturally. Municipalities have responded by developing support programmes around heath, housing and social care.

The term, NORC, appears to have been first used in academic circles in the early 1980s by planners and geographers interested in the changing socio-demographic patterns in neighbourhoods. A standard formal definition has been a locality of family housing where over 50% of residents are over 60

years of age. From a policy perspective, there are considerable variations with, for instance, New York adopting a definition of 45% of housing units being headed by older people with a minimum figure of at least 250 older people. The literature indicates that the process of a neighbourhood becoming a NORC involved up to three different trends. These are, firstly, 'aged in place' i.e. the ageing of in-situ younger households. Secondly, there is in-migration of older people. Thirdly, there is out-migration of younger households. The policy response has to take account of these dynamics.

A distinction is drawn between vertical and horizontal NORCs. The former (which are occasionally known as closed NORCs) refers to an apartment building or cluster of high rise housing under single management specifically aimed at older people. Of course, this has resonance with policies in the UK, where local authorities (such as Birmingham) have implemented strategies for tower blocks that focus on their provision for a designated group (e.g. older people). The latter refers to neighbourhood or open NORCs that typically comprise areas of family housing. It is this type of NORC that has not generally been considered as a policy response in the UK to the issue of an ageing society.

The housing, health and social care programmes are generally referred to as 'supportive service programs'. The characteristics are:-

- Community-based often with a specific organisational arrangement such as local trust or a community corporation.

- Reliance in some cases on a high degree of volunteering by 'fit and able' older people.

- Partnership working that involves housing organisations, neighbourhood agencies (e.g. community development corporations), public and private health care agencies and residents groups.

- Mix of public and private funding including government financing, philanthropic donations / gifts, in-kind support and corporate sponsorship.

- A hub or centre in the neighbourhood that acts as a focal point for services and assistance.

- A diverse range of additional services such as recreation and leisure, education and training. and transportation.

Nevertheless, there are emerging interrelated challenges faced by NORCs that have been highlighted in the *Journal of Housing for the Elderly* (2010). These include:-

- A greater focus is required on pro-active promotion of healthy lifestyles rather than a reactive approach on the basis of individual acute problems.

- More effective collaboration between local public health agencies and municipalities on prioritisation and resource allocation.

- Greater emphasis is required on tackling housing issues in horizontal NORCs.

- The ‘missed opportunity’ of encouraging higher levels of participation and volunteering.

- Most importantly, addressing concerns that the needs of other groups in the population are being marginalised.

Nevertheless, this is reasonably robust evidence from detailed case study evaluation that NORCs deliver successful outcomes. For example in a detailed review of St Louis, residential care / nursing home placements from a NORC were well-under half the national and federal state levels.

Overall, this is not to suggest that we should uncritically adopt NORCs. Instead, we should consider and discuss what lessons we can learn in putting together a neighbourhood-based extra care approach.

6. Conclusions and Recommendations

This study has emphasised the challenges and opportunities of taking forward the agenda for extra care housing provision. Issues such as an ageing society and the uncertainty of the funding of care along with the emerging coalition government policies can be seen as a threat. However, they can also be considered as an opportunity. It is thus a useful and opportune time to debate and discuss the future of extra care housing in the context of the needs of older people. There are a number of recent reports that are already stimulating ideas – see HAPPI (2010), Local Government Association (2010) and the National Housing Federation (2011).

The focus of this report is not to duplicate these other studies. Instead, it puts forward an additional agenda – one based on a neighbourhood approach to extra care housing. The key specific recommendations are:-

- Housing organisations and other stakeholders must continue to widen their horizons and be engaged with broader debates on, for example, public service reform and the big society, neighbourhood regeneration, care funding and proposed changes in the National Health Service (NHS). These set the context for the long term future of extra care and sustainable housing with access to care and support choices to meet future demand and expectations.

- The leadership role of councils is fundamental in setting the agenda and facilitating new initiatives such as a neighbourhood approach.

- The function of extra care provision in meeting the needs of the wider community is significant especially as only 5% of older people presently live in specialist accommodation.

- There are important lessons that can be learnt from other countries in taking forward a neighbourhood approach. In the Netherlands and the USA, there is a focus on multi-generational housing and naturally occurring retirement communities (NORCs). The opportunities to adapt these approaches should be embraced.

- Extra care provision of whatever form will have an increasing role to play in meeting the needs of a wide range of types of vulnerable people such as those with learning difficulties and those with dementia as well as older people.

- There are opportunities to link neighbourhood approach with other policy agendas and initiatives including personalisation, community budgets and neighbourhood regeneration.

- Even more effective partnership working is required between councils, the health sector, developers, registered providers and customers on the development, funding and delivery of extra care so that a consensus is reached on future directions.

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Appendix A : Key Sources of Information

This section provides guidance on recent sources of information relevant for taking forward the debate on extra care provision. It is sub-divided alphabetically into the following headings:-

- *Ageing society*
- *Care funding*
- *Dementia*
- *Extra care housing*
- *Government policies and responsibilities*
- *Housing and older people*
- *Learning lessons from abroad*
- *Technology and meeting the needs of older people*

Ageing Society

The Audit Commission has taken a specific interest in the role of councils in addressing the issue of an ageing society. As well as a number of key reports (together with supporting literature reviews etc), there are a series of toolkits that are available

Key reports include:-

Audit Commission (2008) *Don't Stop Me Now: Preparing for an ageing society*, London, Audit Commission.

Audit Commission (2010) *Under Pressure: Tackling the financial challenge for councils of an ageing population*, London, Audit Commission

Toolkits include:-

Value for money – see http://www.audit-commission.gov.uk/nationalstudies/localgov/underpressure/planningforanageingpopulation/Pages/default.aspx.

Ageing population forecasting data – see http://www.audit-commission.gov.uk/nationalstudies/localgov/dontstopmenow/pages/popincmap.aspx and http://www.audit-commission.gov.uk/nationalstudies/localgov/dontstopmenow/pages/agepopmap.aspx.

The Economic and Social Research Council (ESRC) is funding a multi-disciplinary research programme on 'improving the quality of life of older people' – see http://www.esrc.ac.uk/about-esrc/what-we-do/our-research/NDA.aspx. The focus is on scientific, technological and design solutions

The Institute of Public Care at Oxford Brookes University runs the POPPI system (Projecting Older People Population Information System) – see http://www.poppi.org.uk/. This provides a valuable source of information on demographic change in older age groups for population projections.

The Joseph Rowntree Foundation completed a research programme in 2010 on older people with high support needs. A summary overview of eleven reviews has been published:-

> Blood, I. (2010) *Older people with high support needs: how can we empower them to enjoy a better life*, York, Joseph Rowntree Foundation.

A related Joseph Rowntree Foundation funded project focuses on low level support that promotes health, well-being and quality of life in the communities where people want to live.

> Centre for Policy on Ageing (2011) *How can local authorities with less money support better outcomes for older people?*, York, Joseph Rowntree Foundation.

The International Longevity Centre – UK (ILC – UK) website has a wealth of material on ageing and population change – see http://www.ilcuk.org.uk/. Recent reports include studies on quality of life in old age and older people as consumers in the market place

> ILC-UK (2011) *Good Neighbours: Measuring quality of life in old age*, London, International Longevity Centre – UK.
>
> Sinclair, D. (2010) *The Golden Economy: The consumer market place in an ageing society*, London, Age UK.

Local Government Improvement and Development (formerly the Improvement and Development Agency – IDeA) has an extensive set of webpages on 'ageing well' – see http://www.idea.gov.uk/idk/core/page.do?pageId=20344655.

> These contain information on regularly updated news item, events and publications as well as case studies, videos and self-assessment toolkits for councils.

The latter includes a helpful self-assessment toolkit for councils and their partners in evaluating the adequacy of their policies and services – see http://www.idea.gov.uk/idk/core/page.do?pageId=24328309.

London School of Economics and Deloitte (2010) *Improving Service Delivery to an Ageing Population: Strategies for Local Authorities*, London, London School of Economics.

This study focuses on the role of councils in meeting the challenges of an ageing society. It includes a ranking of local authorities according to the scale of the service as well as on service delivery.

Care Funding

There is an extensive literature on the debate on the future direction for care funding. The main sources are:-

The government perspective was set out in a press release in November 2010 – see http://www.dh.gov.uk/en/MediaCentre/Factsheets/DH_121461. The salient points are:-

- An independent commission will report in summer 2011 on how to ensure affordable and sustainable funding for care and support.
- During the transition to a new system later in this decade, the government is committed to meet the needs of an ageing society.
- Personalisation and individual budgets remain a priority – see below.

The independent commission was established formally in July 2010 and is due to report by the end of summer 2011. It is known as the Dilnot Commission or the Commission on the Funding of Care and Support. It has an extensive website – see http://www.dilnotcommission.dh.gov.uk/. A 'call for evidence' was announced in December 2010 with a closing date of the end of January 2011. This included a useful overview of the issues – see http://www.dilnotcommission.dh.gov.uk/files/2010/12/1.1-Call-for-Evidence-FINAL-pdf.pdf.

The Joseph Rowntree Foundation has published a number of studies including:-

Beresford, P. (2010) *Funding Social Care: What Service Users Say*, York, Joseph Rowntree Foundation. This study attempt to redress the balance of the debate by focussing on a user perspective.

Smith, C. and Cavill, M. (2010) *Shaping Public Spending Priorities for Adult Social Care*, York, Joseph Rowntree Foundation. It investigates users / carers organisations' perspectives and local authority decision makers' views.

Stone, M. and Wood, C. (2010) *A Funding Settlement that Works for People, not Services*, York, Joseph Rowntree Foundation. It focuses on the context for funding by setting out the debate on the reform of social care.

The Kings Fund updated in 2010 the Wanless Review of the funding of social care for older people:-

Humphries, R., Forder, J. and Fernandez, J-L. (2010) *Securing Good Care for More People*, London, Kings Fund. It proposes a partnership model between the state and the individual.

Dementia

Alzheimer's Society (2011) *Support Stay Save: Care and support of people with dementia in their own homes*, London, Alzheimer's Society.

This study highlights that a neglected aspect of policy is the provision of support for people with dementia living in their own homes. If this issue is not addressed, people are inappropriately forced into care homes resulting in additional financial burdens for the state and for individuals.

The Alzheimer's Society also provides administrative and secretarial support to the All Party Parliamentary Group on Dementia – see http://alzheimers.org.uk/appg.

Dutton, R. (2009) *Extra Care Housing and People with Dementia: A scoping review of the literature 1998-2008*, London, Housing and Dementia Research Consortium, London – available at http://www.dhcarenetworks.org.uk/IndependentLivingChoices/Housing/Topics/browse/HousingExtraCare/Evaluation/?parent=3664&child=5844

This is the major definitive review of housing and dementia

The Department of Health is the government lead on policy – see http://www.dh.gov.uk/en/SocialCare/NationalDementiaStrategy/index.htm.

There is a national dementia strategy and a good practice compendium was published in January 2011 along with a commitment to increase research funding to address this issue.

Pati, A. (2010) Dealing with Dementia, *Inside Housing*, 16th July.

This brief article covers a pilot project by Accord Housing Association to help residents with dementia to remain in their own homes.

Extra Care Housing

Evaluation of Extra Care Housing Initiatives has been carried out by the Personal Social Services Research Unit, which is based at three universities – Kent, London School of Economics and Manchester. A list of publications can be found at http://www.pssru.ac.uk/projects/echi.htm. Staff at this research unit have published papers in a number of academic journals e.g.

Baumker, T., Netten, R. and Darton, R. (2010) Costs and Outcomes of an Extra Care Housing Scheme in England, *Journal of Housing for the Elderly*, Vol 24 Issue 2, pp 151-170.

Callaghan, L., Netten, R. and Darton, R. (2009) *The Development of Social Well-Being in New Extra Schemes*, York, Joseph Rowntree Foundation.

Evaluation of Older People's Living Environment (EVOLVE). This toolkit developed by a team led by the University of Sheffield and funded by the Housing LIN can be used to assess the extent to which a building enhances the physical support needed by older people as well as their personal well-being. Although it can be applied to any form of housing, it was designed in relation to extra care housing. It can be downloaded from http://www.dhcarenetworks.org.uk/IndependentLivingChoices/Housing/Topics/browse/Design/DesignGuides/?parent=6594&child=7997.

The Housing LIN (Learning Improvement Network) has a wealth of information on its webpages including:-

Extra care toolkit at http://www.dhcarenetworks.org.uk/IndependentLivingChoices/Housing/Topics/browse/HousingExtraCare/Evaluation/?parent=3664&child=5844. It provides comprehensive coverage including definitions, planning and development, needs and demand analysis right through to implementation, monitoring and evaluation.

Extra care strategies including good practice case studies at http://www.dhcarenetworks.org.uk/IndependentLivingChoices/Housing/Topics/browse/HousingExtraCare/Evaluation/?parent=3664&child=5844.

Impact of the credit crunch on extra care provision – see http://www.dhcarenetworks.org.uk/IndependentLivingChoices/Housing/Topics/browse/HousingExtraCare/Evaluation/?parent=3664&child=5844.

Factsheets on many aspects of extra care provision – see http://www.dhcarenetworks.org.uk/IndependentLivingChoices/Housing/Topics/HousingLINProducts/index.cfm?tag=Factsheet.

Note: From April 2011, Housing LIN resources previously held on the DH Care Networks website pages can be found at the Housing LIN's new standalone website at http://www.housinglin.org.uk/.

Government Policies and Responsibilities

There are three relevant government departments;-

The Department for Communities and Local Government (DCLG) – see http://www.communities.gov.uk/housing/housingolderpeople/

These webpages and links provide a useful overview. They cover:-

- Disabled facilities grants;
- Supporting people; and
- Housing for older people.

The later makes reference to lifetime neighbourhoods, home improvement agencies, and handypersons services.

The Department for Work and Pensions (DWP) has a section of its website devoted to an ageing society – see http://www.dwp.gov.uk/policy/ageing-society/.

These webpages include the ageing well initiative launched in summer 2010 to help councils improve their services for older people and the results of the LinkAge Plus pilots on joining up services between councils, the health sector and voluntary agencies.

The Department of Health is responsible for social care and health. Of particular relevance as set out in the 'vision for adult social care' in November 2010 (see http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_121508) are:-

- Personalisation i.e. individuals being empowered through individual budgets and direct payments to take control of their care.
- Partnerships between the public, private and voluntary sectors as well as users and carers. Housing is specifically mentioned in this context.
- Diversity of service provision.

From a health policy perspective, there are two relevant and interrelated developments and these are:-

- Proposed changes to the National Health Service (NHS) including GP commissioning – see http://www.dh.gov.uk/en/Healthcare/LiberatingtheNHS/index.htm.

- Direct payments for health care – see http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_117477. There is currently a pilot programme.

The Department of Health was formerly also responsible for Learning and Improvement Networks (LINs). Relevant examples include the Housing LIN and the Telecare LIN (see below). In addition, there is the Care Services Efficiency Delivery (CSED) webpages at http://www.csed.dh.gov.uk/. It focuses on helping councils to implement social care policies more effectively.

Housing and Older People

Evans, S. (2009) *Community and Ageing: Maintaining quality of life in housing with care settings*, Bristol, Policy Press.

This book is one of a series of publications by Policy Press on 'ageing and the lifecourse'. Chapter four focuses on housing with care communities in the UK and investigates both extra care housing and retirement villages. Chapter five provides an international perspective on retirement villages.

HAPPI (Housing our Ageing Population Panel for Innovation) was commissioned by the Department for Communities and Local Government and the Department of Health to take forward the government's national strategy for housing in an ageing society - see http://www.homesandcommunities.co.uk/housing-ageing-population-panel-innovation.htm. The panel four major recommendations centred around:-

- Need for a national commitment to address housing issues.

- Initiating a pro-active approach to develop a wide range of housing choices for users.

- Importance of high standards of design and layout that could become an exemplar for mainstream developments.

- Key role for councils in strategic enabling and facilitating.

Journal of Housing for the Elderly – see http://www.informaworld.com/smpp/title~db=all~content=t792306896~tab=issueslist.

This is the only specialist journal on housing and older people. Although it is edited in the USA, it adopts a cross-national perspective.

Local Government Association (2010) *Good Homes in which to Grow Old*. London, Local Government Association.

This publication focuses on the role of councils in meeting the housing needs of an ageing population. It pays specific attention to the needs of older people who wish to remain in their own homes.

The National Housing Federation has been running a project on 'breaking the mould: re-visioning older people's housing, care and support'. The outputs from this project have included:-

National Housing Federation (2011) *Breaking the Mould: Re-visioning older people's housing*, London, National Housing Federation.

National Housing Federation (2010) *Literature Review: Breaking the Mould – Re-visioning older people's housing*, London, National Housing Federation.

Learning Lessons from Abroad

Evans, S. (2009) *Community and Ageing: Maintaining quality of life in housing with care settings*, Bristol, Policy Press. [See above]

Chapter five focuses on retirement villages from an international perspective.

The HAPPI (Housing our Ageing Population Panel for Innovation) investigated good practice in Europe in meeting the housing needs of older people – see http://www.homesandcommunities.co.uk/housing-ageing-population-panel-innovation.htm.

Journal of Housing for the Elderly (2010) Special Issue on NORCs (naturally occurring retirement communities, Vol 23 Issue 3 & 4

As well as an editorial overview, there are eleven specially commissioned articles on NORCs in the USA.

Stockdale, L. (2010) There's no place like home, *Inside Housing*, 10th September, pp 34-35

This brief article reports on examples from the USA and Singapore

Technology and Meeting the Needs of Older People

There is an extensive literature on this topic covering including policy, good practice and research. A useful, though slightly dated, starting point is a report by the Audit Commission in 2004:-

Audit Commission (2004) *Older People: Implementing telecare*, London, Audit Commission.

Other sources include:-

Telecare LIN (Learning and Improvement Network) – see http://www.telecarelin.org.uk/. There are monthly e-newsletters and weekly news briefings.

Telecare toolkit developed by CSED (Care Services Efficiency Delivery – see above) at http://www.dhcarenetworks.org.uk/IndependentLivingChoices/Housing/Topics/browse/HousingOlderPeople/OlderPeopleHousingProvision/Telecare/?parent=987&child=8050.

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Housing Learning and Improvement Network

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