



Promoting independence: evaluation of Camborne Public Rooms, Cornwall

The Housing LIN has been building up a collection of interesting resources to support commissioners and providers to better understand local housing markets for older people, predict future demand and supply of specialist housing and make better use of existing housing stock.

This case study looks at “Camborne Public Rooms”, Coastline Housing’s scheme of town centre affordable rented flats for over 50’s or those in receipt of higher level Disability Living Allowance to promote and maintain independent living. Interviews with residents clearly demonstrate improvements to their quality of life, and that design can promote the development of a sense of mutuality and community. Listed in this year’s Top 50 Affordable Housing Developments in the UK, the case study considers whether this model could be replicated elsewhere as part of a range of provision.



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Introduction

We need a wide range of differing housing models to address the varying needs of people as they age. This case study looks at one such model and finds that it has had a very positive impact on the quality of life of those it is housing, and is freeing up some much needed family homes. It centres on an evaluation for Coastline Housing through in depth interviews with 10 households (13 people) from the 18 households who moved in during May 2013. The benefits to providers of care and health services of this approach are also considered. The model has no revenue funding and the design sought to encourage the development of a community spirit, which appears to be happening.

Coastline has identified an extensive need in their area of operation in Cornwall, where many people are ageing in unsuitable housing, or in rural locations some distance from facilities and easy social contact. This has resulted in a Corporate Plan target of a new form of housing for older people. Some are facing increasing isolation with risks to health and wellbeing through living in accommodation which may be hard to heat, expensive to run or with risk of falls. Cornwall also has a critical shortage of affordable family sized homes.

Coastline's innovative proposal creates a response wholly suited to the particular needs and circumstances of this rural area. Cornwall has suffered a 40% reduction in Supported People funding and the Council is unable to offer revenue funding other than through personalisation. This requires a solution that will support older people to age in place, maintaining their independence for longer whilst remaining connected to their existing communities, by moving to live in flats together and form resilient communities where people will thrive by being empowered and encouraged in the development of mutuality, or co-production, through their engagement with fellow residents and with the wider community and development of support networks. In other words, an Asset Based Community Development approach.

Camborne Public Rooms

Camborne Public Rooms in Camborne, Cornwall is an affordable rent scheme of 18 lifetime home flats for those over 50 years old or in receipt of higher level Disability Living Allowance. It was developed by Coastline Housing to meet locally identified needs (see below), and with priority for downsizers. The scheme has a lift and the flats are a mix of 1 and 2 bedroom, with level access and hard wired to meet current and future telecare and telehealth needs, and two units are wheelchair standard. There is no support staffing presence on site. When required, residents can use Carrick Lifeline, a telecare system operated by Cornwall Council that Coastline uses across its estate.

This much loved iconic building, set within a World Heritage site, is central to the history of Camborne, and there was considerable local pressure for it to be retained. There is level access to the centre of Camborne and it is close to the railway and bus station, across the road from the library, and a few minutes' walk (50 metres) to Coastline's sheltered scheme at Veor House, where residents will be able to engage with or buy into a wide range of activities. This proximity should enable the Public Rooms to offer "virtual extra care" facilities.

There is no revenue funding for the communal room, and Coastline encourages residents to use it themselves for a wide range of social activities, and has a notice board advising people of other local events and activities. Coastline wishes to help residents interact in the early stages of forming a community and will build up contacts with other local organisations to encourage the development of mutuality. So far the communal room is used by residents for

regular gatherings and parties, as well as residents meetings, but it is not yet used as much on a daily basis as it is hoped it will be.

This scheme offers people the opportunity to move into the centre of their existing facilities hub, whilst, for many of them, being close enough to their previous home to maintain their existing social contacts. The scheme is housing people with a range of needs, and a local lettings policy aims to ensure that a range of support needs is maintained (50% nominations to Cornwall County Council and 50% to Coastline). The Council will nominate those most in need and Coastline will prioritise under-occupiers, with a focus on attracting those who want to plan ahead and move to more suitable housing that may delay the development of significant care and support needs, and this may include pre-retirement households over age 50 affected by the bedroom tax. The scheme aims to address:

- Prevention – design to promote independence
- Protection – a secure environment with easy access to support
- Partnership - with other agencies and facilities

The design of the scheme incorporates HAPPI¹ criteria which were achievable within the constraints of a listed building conversion. The innovative design and approach to the local context is an appropriate solution to current realities in this area and the absence of additional revenue funding. The lifetime homes design seeks to lift people's spirits, encourage confidence and independence, help people achieve their optimal quality of life, and to facilitate the delivery of individual personalised care, and be adaptable to meet changing needs going forward. Each front door has an adjacent "memory box" for ease of identification, and flats have windows to internal "street" corridors.



Examples of memory boxes

The scheme seeks to promote the objectives of:

- Improving peoples health and wellbeing outcomes
- Benefit care and health budgets
- Maintain independence and prevent deterioration
- Reduce isolation and promote social contact

¹ www.housinglin.org.uk/Topics/browse/Design_building/HAPPI2/

- Provide security
- Free up family homes to address the acute local shortage
- Reduce local pressure for care home bedspaces
- Provide affordable housing with lower bills due to the construction and design of the apartments

The scheme seeks to attract downsizers who are either already finding life increasingly difficult, or who are looking ahead, and are attracted by moving to a home that will enable them to “live younger longer”, and preserve or enhance their independence and improve their physical health and wellbeing. Five of the households are downsizers.

The significant identified need in this area is for people who are currently renting, and therefore the Public Rooms is all for affordable rent. As market and thus affordable rents are quite low in this area, this means that service charges must be kept low to meet the design aspirations and loan repayments arising from the considerable challenges of converting this historic building, which required the insertion of a steel frame behind the original façade.

Camborne Public Rooms is winning plaudits. It is one of *Inside Housing's* Top 50 Affordable Housing Developments for 2014 (within the Top 5 Regeneration Schemes), and it has been shortlisted in the RICS South West 2014 Awards under the Regeneration Category. The Public Rooms also won the APS Architectural Project of the Year 2013.

Evaluation through interviewing residents

Coastline have identified a need for additional similar schemes to address the shortage of appropriate housing to support people as they age, as well as facing rural isolation, and the need to encourage more to downsize to free up family homes. They want to evaluate the Public Rooms to see if it is achieving its' intended aspirations, and to learn lessons to take forward into future schemes.

The Public Rooms were funded under the standard new HCA 2011 – 2015 Affordable Housing Programme funding scheme and, in spite of the considerable technical challenges to convert this historic building, it was achieved with under £422,000 HCA grant, plus £90,000 from Cornwall Council. The scheme has wide-ranging regeneration benefits, as it brings back into use a very prominent town centre building.

The scheme has been provided with no revenue funding at all. It would be interesting to assess the current and future benefits to health and care budgets that it is achieving and will in the future:

- One resident has moved into a wheelchair unit in the scheme from a nursing home.
- One resident, who was living at home with his mother, has learning disabilities.
- Of the 10 households interviewed (out of 18 tenancies), 8 said they had moved for health reasons, and all said their health had improved, all except the young man saying they now had a lower risk of falls.
- The resident of the second wheelchair flat (who was not interviewed) had been bed-blocking in hospital.

How are the lives of the residents' changing as a result of moving in?

Analysis of the interviews, which were carried out in January 2014, 8 months after people moved in, shows that:

1. Of the 10 households interviewed, over half came from private rented accommodation, two downsized from homes in the public sector, one came from a nursing home, and one, with learning disabilities, from the family home.
2. The age range of the 13 people interviewed (the 10 households included 3 couples) was from 51 to 76, with one aged 20 (the young man with learning disabilities).
3. Most described their health as poor and 8 had moved for health reasons. Some of them had very serious health problems.
4. When asked whether the move had improved their health and wellbeing, eight of the ten households said 'yes' and the other two were positive.
5. All except one said that the move would reduce the risk of falls. The young man felt the question was not relevant to him.
6. Everyone interviewed was very positive about the proximity to amenities of their new home. They were able to walk to shops and the library and so on. Some had previously been too far away to leave their homes, or had been housebound, needing taxis to get anywhere. Many were now getting out and about, with more exercise and social engagement than before.
7. Most had not been close to amenities in their previous homes.
8. When asked whether the move had made them feel safe and secure, all 10 interviewed were very positive (even though a few of them described teething problems with the door entry system).
9. When asked whether they felt less isolated than before, half felt much less isolated, whilst others said about the same, as they had either maintained their previous contacts (most came from Camborne) or now knew a similar number of people to those they had known before.
"We take care of each other, for example I saw a postcard pushed half through door, so knocked to see if feeling ok."
10. When asked whether they felt part of a local community now, 8 were very positive about feeling a part, and the other 2 felt a bit part of a community (they were both people who said that they did not mix easily, but knew they were in a friendly place with communal activities going on around them, and felt they could join in if they wanted to, and that people were there if they might need them).
11. When asked whether they had been part of the local community in their previous home, six of the ten felt more sociable now.
12. All ten said that they thought the age of ranges in the scheme worked very well. The young man with learning disabilities (Down's Syndrome) is making friends.

13. People were given a list of five items and asked to rank what was most important to them about the building from 1 to 5, and to add in other features that they thought were important.

- *Level access everywhere and the lift* had the most votes for first place (6), followed up by *location* (4).
- Looking at first and second choices together, with 7 votes each, *level access everywhere and the lift* is joined by *warm*, which had 2 first choice and 5 second choice votes. *Video intercom* and *location* each had 5 votes.
- Looking at 1st, 2nd and 3rd choices together, *level access everywhere and the lift*, *warm* and *location* each gained 9 votes, and *video intercom* 7 votes.
- *Car parking* had nine votes for fifth place, and thus was of least importance.

14. The communal room was appreciated and used by 7 of the households interviewed, whilst 3 thought it a good thing but had not used it yet. It has tea making facilities. One couple had organised weekly gatherings, where people bring food and drink, and these were seen as a great success (now being held monthly, as social connections have been made). When asked if the gatherings might have happened without their organising them, they were not so sure, but they have really helped people to get to know one another, and many people now pop in to see each other. The adjoining block of flats for the over 50's are also invited. The same couple organised a Christmas party, which all said was excellent, and other people have held a joint birthday party. The residents' association meet there, and some of the residents are organising table tennis bats and bingo materials and so on, to encourage more use. Newspapers are placed there once read, and one resident likes to sit there, and in summer, open the door to the street and watch the world go by. To keep the service charge as low as possible, the common room is only heated when people put the heating on, and some gave its coldness as a reason for not using it more.



Part of communal room

15. When asked what had been the key motivation to move, 6 gave health reasons. One had downsized and moved because of the bedroom tax, one had been evicted from the private sector, one had moved to be close to family and one to be independent (the young man).

16. When asked what it would have been like, growing old in their previous property, people described a range of problems with their homes:

- The stairs were a problem
- It was very cold – hard to keep warm – large draughty house – cold, damp and windy
- It was hell, very cold and damp and seriously damaging health (this a man with serious chest problems in a privately rented miner's cottage in very poor condition, and with a landlord refusing to do anything)

- Far from transport – no buses
- Big house, full of clutter
- Struggling with decorating, paying rent and so on.
- Awful landlady / landlord

“It would have been hopeless to grow old there, and no amenities. I was depressed and my doctor said move here near to other people.”

“You have to downsize sometime”

17. When asked if the move will support their independence as they age, all interviewed said yes.

“If he gets worse, he will be better off here with people around him”.

“Most definitely, we can see ourselves here for ever”

“This will be more suitable for me, more secure with access to everything. It will help me remain independent.”

18. When asked if the move will improve their quality of life, all said yes, most very positively.

“We feel very changed, and old neighbours say you have both totally changed, you are both beaming and happy and healthy”

“Everything convenient here, shops etc. Wonderful, I cannot fault Coastline”.

“Life is nice in general here, people are not in your face but there when you need them”

“Oh yes. It’s smaller. The move has improved my life. It was strange at first. I had become almost suicidal in the old place, but I’m not giving in to my age”

“Yes, 100%. I couldn’t have survived in my old home. There are people around and I’m in town.”



The strategic case for housing for older people in Cornwall

Schemes such as Camborne Public Rooms appear to have a significant synergy with Cornwall’s Housing and Health and Wellbeing strategies and to have a key role to play in helping to achieve their strategic aims.

Cornwall has an ageing population. As described in its Strategic Housing Market and Needs Assessment (SHMNA)², compared to the England and Wales profile, Cornwall’s population profile is skewed more towards those aged above 60 years. Over the last ten years whilst the proportion of those aged over 60 has increased, there has been a proportionate fall of key working age groups such as those aged 30 – 40 in the share they make up of the overall

² Cornwall, Plymouth, South Hams, West Devon & Dartmoor NP SHMNA Appendix 2 – Cornwall Overview Report

population. Some community network areas have a higher proportion of population aged 65+ years:

Camborne, Pool and Redruth	19.6% aged 65+ of total population 58,891
Cornwall (Total)	21.7% aged 65+ of total population 532,273

Various scenarios are proposed projecting forward and, under all of the scenarios, the number of older persons (those aged over 74) increases significantly from 10.3% of the total population in 2011, and projected to increase to between 14.7% to 15.8% of the population by 2031. This changing demographic profile of the authority is likely to influence the types and sizes of houses which will be required in the future, with a higher demand for smaller properties suitable for meeting the needs of older person households in Cornwall. Specifically, in terms of affordable housing, the analysis indicates that there will be a high demand for smaller properties, 1 – 2 bed, with need for this size of property making up 82% of total need.

Cornwall Council's new Strategic Housing Framework (May 2014) identifies:

- 1. The need to encourage people to downsize to free up family homes for reletting to families, and other initiatives to help achieve this.*

It recognises the need to promote downsizing to increase the supply of family homes for which there is a great need, and also to help make sure that people are not suffering from living in accommodation which is no longer appropriate for their needs. Specific initiatives have not yet been agreed by the Council but they may move away from the old-style lump sum downsizing grants towards more targeted and practical assistance such as help to find a suitable alternative property and/or practical and financial assistance with moving house.

The SHMNA analysis indicates that to maintain a level of working age population to match employment opportunities there will be an ongoing need for family housing within the authority, and that there is an annual deficit of 1,314 affordable homes available over the next 5 years to meet the level of new affordable housing need arising annually in Cornwall. The level of overall need reflects the impact of rising house prices and continued pressures on wages and household income. It also reflects the fact that currently affordable housing makes up a relatively low proportion of the overall stock in the authority, approximately 12%, which is considerably below the national average of 17%. The lower levels of turnover in larger properties also suggests that in order to address future need and the current backlog, new larger affordable properties will also be required to allow choice within the housing market, and clearly promoting downsizing can help free up family homes. A range of different affordable housing products will be required to meet housing needs.

The Council's representative says that schemes such as Camborne Public Rooms fit very well with their stated intention to work with the health and wellbeing sector to plan proactively for the future needs of Cornwall's population and to develop cost-effective solutions, although it is important to ensure that schemes are developed in the right locations in order to avoid creating a scheme which nobody wants to live in. Across the Housing and Adult Care agendas, the Council is actively promoting extra care models over older style sheltered or residential accommodation. Cornwall Council is currently preparing a Market Position Statement on extra care housing.

The Health and Wellbeing Strategy³ refers to housing, although at present Housing does not formally contribute to the Health and Wellbeing Board. However, this should change, as

³ "Changing Lives" Adult Care, Health and Wellbeing Commissioning Strategy. Last updated: 25/03/2014

the Strategic Housing Framework makes very clear the need to work together to deliver an integrated, preventative approach to housing and health issues.

The principles driving the scheme at Camborne Public Rooms address many of the principles of this Strategy, 'Changing Lives', which is aimed at improving the health and wellbeing of people in Cornwall by encouraging communities to take control and responsibility. It encourages a shift away from 'problem management' towards preventative activities. It aims to help with reducing health inequalities, tackling social exclusion, and improving community cohesion. The key principles are:

- Place individuals at the centre of local commissioning and integrated service delivery.
- Develop services based on evidence of multiple outcomes and shared impact.
- Build on what people can do through self-management and self-care.
- Create access points which make sense to local people.
- Don't layer solutions but work to connect local services and people together.
- Provide individual brokerage and signposting.
- Mainstream prevention throughout.
- Create a shift towards mutual aid and people supporting each other.

By embedding these principles in the future strategic commissioning of services, Adult Care, Health and Wellbeing will identify new opportunities to make the best use of resources and improve outcomes for both individuals and local communities. The central aim of the strategy is to ensure that the Changing Lives principles are observed in Adult Care, Health and Wellbeing's contribution to the wellbeing of local communities and in the future commissioning of services for early intervention and targeted prevention, seeking to improve quality of life and use the resources available to achieve the best possible outcomes.

Cornwall's Housing Strategy identifies that it will be increasingly difficult to meet the high and growing demand for Disabled Facilities Grants, and to award grants to all in need. Cornwall Council also identify that whilst the majority of people live in the private sector, private sector renewal is the smallest element of the housing capital programme.

Bed-blocking has been a serious problem in the area, thus schemes which relieve this bring significant benefits to health budgets.

Rural Isolation in Cornwall

The problem of social isolation in rural communities has been highlighted in several studies, including the 2012 report by the Commission for Rural Communities,⁴ which highlights issues with social care, transport and housing in rural areas in England. The report states that local authority funding follows historic patterns and does not necessarily reflect the level of need in an area or the higher cost of providing services in more sparsely populated areas. This results in lower spending per head. Additionally, the report states that older people in rural areas without access to their own transport have a higher chance of experiencing social isolation and have been worst affected by cuts to public transport subsidies and concessionary fare reimbursements.

⁴ Commission for Rural Communities (2012) Social exclusion experienced by older people in rural communities. Online at: www.agenda-efa.org.uk/site/wp-content/uploads/2012/09/Social-isolation-experienced-by-older-people-in-rural-communities-final-sep-11-12.pdf

A 2010 study by CAB Cornwall⁵ considered the availability of a range of services to communities in rural areas using public transport, from 27 rural locations in Cornwall. The key findings include:

- 26% of locations had no access to public transport.
- Access to services is poorest in rural areas in the North East of Cornwall.
- The services most easily accessible in rural areas are Post Offices and GPs, while major hospitals, county courts and job centres are most difficult to access.
- Infrequency of bus services, long journey times and high fares are often prohibitive, leading to a reliance on private vehicles.

The report also includes several case studies of instances where people have been unable to access key services due to difficulties with transport.

According to the 2011 census 17.3% of households in Cornwall do not have access to a car or van. The proportion of households with access to a car or van is highest in more rural areas in Cornwall.

Lessons learned

The interviews with the tenants demonstrate very clearly how the Camborne Public Rooms is improving their quality of life, in some cases very dramatically, and a strong case can be made for other similar schemes to be considered as part of the range of approaches to address the housing needs of older people. This scheme is not an alternative to Extra Care Housing, and its proximity to Coastline's adjacent sheltered scheme is a key part of its viability, with the intention that people can buy into services there on a core and cluster model. The scheme was developed without revenue funding as there was none available, and it appeared better to find a solution for people in intolerable or difficult housing situations. Each person will need to rely on personalisation to provide revenue for any care needs they may have or develop, and whilst all (except one) said that they wished to live there for a long time, it is not yet known whether some may need to move on if their needs for care and support cannot be met in this scheme in the future, unless at some future time revenue becomes available to provide support. However, it is very clear from the interviews that Camborne Public Rooms is an excellent home for the active or semi active elderly, and is giving people renewed energy and zest for living.

Issues raised:

- As affordable rents are quite low in this area, the service charge element needs to be kept as low as possible as it is included in the rent, which must also cover loan repayment. Camborne Public Rooms was a complex conversion, requiring all available capital, and this has put pressure on the services provided. The common room is funded by a small service charge, and it is only heated whilst in use, and if it was warm all of the time it may be that more would use it casually (one resident regularly goes there to read the papers and have a cup of tea). Some felt that the corridors were cold, again this is to keep service charges as low as possible.
- Central to the aim of the scheme is developing mutuality and a sense of community, and this clearly is being achieved, greatly facilitated by one couple who have organised weekly social gatherings. If they had not taken this on, could Coastline have found the resources to initiate social events?

⁵ CAB Cornwall (2010) Remote Access. Online at: www.cabcornwall.org.uk/docs/remote_access.pdf

- The constraints of the listed building and its location and high cost of conversion meant that not all HAPPI principles could be applied. All flats achieve Lifetime Homes design standards but, in particular, garden and outdoor space is limited and few flats have balconies, so not all lifetime neighbourhood criteria are met. However, people love living in such a historic building, and so centrally. A bench outside the library opposite was suggested as a sitting out area.
- It is adjacent to Apprentice Court, which was developed by Coastline for over 50's downsizers (and was considerably oversubscribed) and let shortly before the Public Rooms. The Public Rooms shares a buggy store and dryer located in Apprentice Court, and was intended to share the small garden/sitting area between the two schemes, although residents appeared to think this area was just for tenants of Apprentice Court, and some commented that there was nowhere to sit outside.
- Over time residents may become more frail, and support in addition to that provided through personalisation may be required. Funding could be sought to enable Coastline to extend their customer care service.
- Coastline have considered an exit strategy if in the future needs change. The flats could be let as a general needs block, and the communal living room be let either as a shop or community facility.
- One resident could not bring her dog, as communal corridors are internal. She may wish to transfer so that she can have a pet. The possibility of pets should be considered in future schemes.
- The scheme has windows from the kitchens to the corridor to promote a sense of community but with blinds fitted to enable residents to gain privacy as required.
- Two households commented on the need to provide their own internal floor covering, which they found hard to afford.
- Coastline will continue to explore with Cornwall Council the need for shared ownership and affordable rent for possible future schemes.

Replicating the Public Rooms

Coastline has identified a significant demand for similar schemes in small Cornish towns or large villages or the urban centre of an area with an extensive rural hinterground where many older people are in housing need. They may be currently living in isolation, or perhaps in no longer suitable family accommodation from which they could downsize, or in poor conditions in privately rented accommodation. There are currently 3,229 people aged 50 or over who are waiting for 1 bedroom accommodation in this area. Coastline are currently developing two further similar schemes.

The proposal is to create a series of small blocks each of about 18 flats, based in small urban settings (small towns or large villages) close to a range of amenities and facilities such as shops, doctor's surgeries, libraries, transport, and also in close proximity to care 'hubs' provided by other Coastline sheltered facilities, on the basis of a 'core and cluster' or 'hub and spoke' model. The concept is that through personalisation and/or self care, residents will be able to buy in support to meet their changing needs.

Downsizers may be put off a move to a new home if the rent will be higher than they are currently paying, and this may be an issue in some areas with Affordable Rents. The adjacent scheme at Apprentice Court, with priority for downsizers and which was oversubscribed, was developed under the previous Homes and Communities Agency funding regime, and let at social rents.

Each block of flats will have at its heart a multi-purpose communal room with tea making facilities to encourage and support resident social interaction with a range of activities. By maintaining a range of support needs and encouraging the development of social interaction between residents and with outside agencies and voluntary groups, a community of mutuality can be encouraged to develop. The design of the scheme and of each flat, the communal room and outdoor amenity space, will support people's wellbeing and independence. Coastline will liaise with all other agencies and GP practices and will maximise other sources of support and funding. Residents will be able to access activities and buy into services, using their personal budgets, from the nearby Coastline sheltered schemes.

This approach may also be suitable as part of the range of provision in other rural areas, if linked to extra care or care and support provision.

If the scheme is replicated elsewhere, it would be beneficial to budget some community development work for at least the first year, to help establish regular use of the communal room, and build a sense of community, and perhaps build links with other organisations, voluntary activities and so on.

Future schemes should include outdoor gardens or sitting out areas, as well as balconies if possible.

Conclusion

Whilst it may appear surprising to propose a scheme for older people with no revenue funding, the scheme is well thought through and is of a scale where it appears that it will offer a huge improvement for those who choose it in preference to staying put in homes which will not support them as they age, which may have poor insulation or risk of falls, and where they may be isolated. It will also offer improved outcomes for the services providing care and support.

The interviews clearly showed that a community is developing, with so many people saying "we look out for each other", and "I know I can call on people". It is a unique proposal that responds to the particular circumstances of this area, and there clearly is a need for more similar schemes as part of the range of housing options. However, people's needs will change over time and either some tenants may need to move to receive more support, or the scheme may need to be adapted to provide more support as residents age in place.

Half of the interviewees came from the private rented sector, and most had been living in difficult circumstances. It would be interesting to carry out an evaluation of the benefits of rehousing into schemes such as the Public Rooms, compared to the costs of Disabled Facilities Grants (DFG's) to adapt existing homes, or of the extra costs to the health and care services of people in inappropriate housing, as well as assessing the current and future benefits to health and care budgets that will be achieved by living in a scheme that promotes independence.

Other areas of the country with high levels of housing need may be able to provide similar urban centre schemes, carefully designed to promote a sense of community and independence, and linked to a range of provision including extra care. Some may be able to include a level of revenue funding and support which was not possible here.

The individuals interviewed show clearly the benefits brought by schemes like this which seek to facilitate resilience and community development, and add to the range and flexibility of provision. There is a strong case to be made for more schemes which help people live independently in mainstream housing, who may be helped to "live younger longer", and thereby bring significant savings to care and health budgets, and who may need less specialist housing in the future, or need it for a shorter period.

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Note

The views expressed in this paper are those of the author and not necessarily those of the Housing Learning and Improvement Network.

About the Housing LIN

Previously responsible for managing the Department of Health's Extra Care Housing Fund, the Housing Learning and Improvement Network (LIN) is the leading 'learning lab' for a growing network of housing, health and social care professionals in England involved in planning, commissioning, designing, funding, building and managing housing, care and support services for older people and vulnerable adults with long term conditions.

The Housing LIN welcomes contributions on a range of issues pertinent to housing with care for older and vulnerable adults. If there is a subject that you feel should be addressed, please contact us.

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