

Improving the immovable

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At the risk of sounding a touch melodramatic, housing associations (HAs) appear to be facing an unstoppable force rapidly approaching an immovable object. They have to cope with the implications of our well-publicised ageing population (the unstoppable force). These go beyond the construction of new age-appropriate and accessibly designed housing – vital though that is.

The National Housing Federation (NHF) highlighted a second strand of the asset management challenge posed by changing demographics: the implications of increasingly older tenants with greater levels of disability living in general needs housing. Its report, 'In your lifetime', noted that 42% of households in social housing included at least one member who was disabled or had a limiting long-term health condition. An ageing general needs housing stock needs to be upgraded based on principles of inclusion and quality design initially intended for new specialist housing. However, the NHF report stated: "The rapid growth in demand for adaptations exists in a context of uncertainty among housing providers about how to fund adaptations to meet the needs of their tenants."

These principles dominate the report of the HAPPI panel (Housing our Ageing Population: Panel for Innovation) and subsequent All Party Parliamentary Group on Housing and Care for Older People inquiry which predominantly focussed on new stock. Indeed, it noted that HAs (and commissioners) have faced the dilemma that investing in new specialist housing or upgrading existing stock brings short-term costs yet the long-term benefits are often reaped by health and social care organisations. These take the form of lower demand for costly NHS and social care services from people living in appropriate housing. However, the immediate benefits are enjoyed by their tenants in terms of improved housing conditions, better quality of life and more independence.

HAs should be reassured that national policy, backed by some funding, is moving towards integration and prevention. NHS England and Department of Health (DH) funding trends could ease the financial implications for associations. For example, as part of the £3.8b Better Care Fund, NHS England has announced a £220m capital programme with local authorities to accommodate next year's (2015/2016) Disabled Facilities Grant arrangements. It is also expected that this autumn the DH will announce investment of around £100m for phase two of the Care and Support Specialist Housing Fund in England.

This should go a little way to addressing calls for financial measures from organisations such as Leonard Cheshire Disability. The charity's recent report, 'Home truths: the hidden cost of housing', found many older people were unable to afford vital aides and adaptations to their homes. It found that these would allow them to retain their independence and sense of dignity. However, whatever level of investment HAs are able to make in improving their general needs stock, it is vital that improvements are based around the principles of high-quality design and inclusion set out in the reports for new build housing referred to above.

At the Housing Learning and Improvement Network (LIN), we are broadening our existing online design hub - extending the focus from older people's housing to design and inclusion standards for people affected by physical disabilities, mental health problems or learning disabilities.

Housing associations should join architects and local authority planners in exploiting the hub's resources. These are geared towards improving standards in both new specialist housing and an ageing general needs housing stock. Existing general needs stock might be an immovable object - but that doesn't mean it can't be adapted and improved.

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