



## How can local government be better associated with delivering housing for an ageing population?

This viewpoint draws on PRP Architects' submission to the recent Local Government Association Housing Commission and, in particular, one of the Commission's four themes: health and quality of life for an ageing population - looking at the role of housing in preventing onward costs onto health and social care services.

It offers an overview of the challenges local authorities face in housing and caring for an ageing population and suggests that Local Government must have a key role in meeting this challenge. It proposes a holistic strategy for Local Government including changing perceptions and attitudes towards housing for older people; the need for integration and collaboration across agencies and departments working in the sector; more focussed housing needs assessments and forward-planning; and the facilitation of new specialist housing development at the same time as supporting people in their own homes with a network and infrastructure for community-based care and support.

Adapted for the Housing Learning and Improvement Network by **Roger Battersby**, consultant for and on behalf of PRP Architects

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## **Demographic Change: Twin Crises for Health & Housing**

The demographic profile of the population shows that we are ageing. The number of people over the age of 65 is rising fast and we are living longer.

This shift in demographics is a major contributory factor to both the funding crisis we face in the NHS and Housing supply where the undersupply of housing in turn affects the affordability of homes.

Following the financial crisis of 2007/2008, there has been an unprecedented squeeze on Local Government funding. This has been and remains a major contributory factor to the financial pressures on the NHS as increasing numbers of older people turn to A&E departments in the absence of adequate community-based support services. Once hospitalised, a lack of rehabilitation facilities manifests in older people, often unnecessarily, occupying expensive hospital beds when they would be better off back in the community.

A combination of factors that include our English attitude to housing as an 'investment', a severe shortage of attractive properties for downsizing and the institutional associations of 'retirement' housing has led to unprecedented numbers of couples and single people over 65 under-occupying family homes. It is estimated that there are currently 25 million unoccupied bedrooms in our housing stock and that under-occupancy levels have doubled over the past 10 years. Without intervention to address these issues head-on, they will escalate.

### **So what are some of the pressing issues?**

#### ***An oversupply of Sheltered Stock***

In our view, many local authorities have an oversupply of poor quality sheltered housing stock built in the 1960's and 70's. This oversupply is very probably related to the fact that many older people, even if socially isolated and needing care, would rather stay put in their family home than move into poor quality accommodation characterised by bedsit apartments (in some instances with shared bathrooms); accessibility issues; expensive to heat due to poor/no insulation and with neighbours that might include homeless people, drug users, alcoholics, mental health groups etc.

#### ***Current Policy***

Housing strategy for older people, such as it exists, recognizes the desire of the great majority of older people to 'stay put' in their homes in the community where they can receive care and support from a range of different agencies including LA Adult Services, voluntary sector providers and private care operators.

However, we believe that there is a recognition that 'staying put' does not work for everybody; social isolation can become a major problem; much of our existing housing stock is unsuitable for older people ageing in place and the costs of caring for older people with dementia and other long term conditions in the community can become prohibitive. New housing for older people is therefore needed in addition to supporting the majority in their own homes.

The recent government proposals to introduce a LHA cap to revenue funding for affordable housing has created further uncertainty for the sector and is having a significant effect on supply. Our concern is that, if implemented for specialised housing from April 2017, it is also likely to affect the housing typologies that are developed in the future.

### ***'Extra Care' Housing***

In recent years, most of the new housing for older people developed by the voluntary 'not-for-profit' sector has been Extra Care accommodation that offers 'independent' living with substantial communal and care & support facilities.

The viability of the Extra Care model has become increasingly challenged and its original concept to create active communities of older people with a range of age and dependency levels has been undermined as hard pressed LA commissioners look for alternatives to residential care and case managers allocate the accommodation to people with high care needs. Furthermore, Individual Budgets have also undermined some of the efficiencies that can be achieved through having a single care provider on a site and the proportion of communal space for social activities and wider community involvement to net residential has been questioned as much of this space becomes under-used.

In response, Extra Care projects have become larger (often with around 100 or more apartments rather than 40 which used to be the norm) and community facilities are - in some instances - being limited in scale and being located at the interface with the wider community so that they become more of a community resource. Alternative financial models are being adopted so that commercially viable restaurants, hairdressing and other facilities can cater for both residents and the wider community.

The LHA cap, if implemented in its current form, is likely to further challenge the viability of Extra Care as the revenue funding stream will be greatly reduced.

### ***Housing Market Assessments & Local Plans***

Although most local authorities have undertaken Strategic Housing Market Assessments (SHMA) and Strategic Housing Land Availability Assessments (SHLAA), many have yet to complete their Local Plans. Relatively few of those completed include a strategy promoting the development of housing for older people or allocating appropriate sites for the sector. Despite the availability of the free online Strategic Housing for Older People Analysis Tool (SHOP@<sup>1</sup>), many have a poor forecast of the market for housing for an ageing population in their areas particularly for older homeowners.

### ***Awareness of and Prevailing Attitudes on Housing for Older People***

Many local authorities remain in denial of the challenges posed by their ageing populations and, in our practice's experience, a number actively resist new development for older people due to potential demand on the public purse. There has also been a rise in NIMBY reactions to planning applications involving housing for older people following the Care Act (although the funding element now deferred) which capped the amount an individual must pay to cover his/her care costs.

### ***Silo'd Structures***

The agencies and funding streams, across central and local government, responsible for housing and care for older people tend to be silo'd and therefore protective of their budgets rather than looking to collaborate to achieve greater efficiencies. There is often poor communication between LA Housing, Adult Services and Planning departments and even less between the LA's and Health Trusts. This situation can be exacerbated as Adult Services and other aspects of local governance are outsourced to private contractors.

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<sup>1</sup> [www.housinglin.org.uk/SHOPAT/](http://www.housinglin.org.uk/SHOPAT/)

There has been some recognition and funding made available by government through the Better Care Fund to promote closer working between Health and Adult Services. However, both are cash-strapped and likely therefore to be protective of their limited funding. There has been little acknowledgement of the importance that good quality housing can have in contributing to the good health and wellbeing of older people.

## **Towards a Housing and Care Strategy for Older People**

We believe that the LGA should be promoting a strategic integrated approach to housing and care for older people to all its members.

The strategy should involve a five point plan:

1. Promote Awareness and Change Attitudes
2. Promote an Integrated Approach for Housing and Care
3. Plan for an Ageing Population
4. Promote a Culture and Infrastructure for Community-Based Care
5. Facilitate new Housing for Older People across the Public and Private sectors

### **Promote Awareness and Change Attitudes**

The demographic challenges we face must be highlighted to local and national politicians and the benefits of developing housing that creates 'room at the top of the housing ladder' should be highlighted to influence future housing strategy and to change attitudes towards housing for older people.

### ***The Benefits of Providing New Housing for Older People***

There are clear benefits to providing good quality, well-located, inclusively-designed housing for older people.

- We are all aspiring to a good quality of life as we get older and this is largely contingent on where we live and the quality of our housing.
- The quality of housing is closely related to health and well-being. Inclusive design can greatly lessen the incidence of accidents in the home and well-located development at the heart of communities can maintain social connections and enable family, friends and neighbours to keep in touch with and help to support loved ones.
- It can be efficient in terms of density and land use with predominantly 1 & 2 bedroom apartments and lower levels of parking provision than general housing.
- Efficiencies can be achieved in the delivery of care & support in developments exclusively for older people both by virtue of scale and the mutual support within the resident group.
- For every new apartment provided, there is the potential for a family home to be released back to the market.
- Intergenerational, age-friendly communities are more sustainable and stable due to their mix of residents. Older people spend more time at home and can therefore play an important part in improving the security of communities through their presence.

- A range of communal facilities at the interface between residents and the community can provide a community HUB as a catalyst for community cohesion around health & wellbeing, and a range of other facilities that might include a crèche or nursery school, library, café/ bistro, etc.
- Housing for older people can be a significant source of employment in a community.

In our view, decision-makers must be encouraged to take a longer-term view and accept that investment will be needed in order to reap the benefits of future savings.

## **Promote an Integrated Approach to Housing & Care**

There are many aspects to integration that offer greater efficiencies in service delivery:

### ***Health, Housing & Adult Services***

Integration must start with tackling the departmental silos within local government and the relationship between the NHS and local government. This transformation process is under way and some local authorities have at an operational level merged their health and adult services operations for older people. Supported by an additional capital allocation to deliver Disabled Facilities Grants, others are making use of the Better Care Fund to invest in home improvements and adaptations. But this is patchy and needs to be greatly accelerated, especially in terms of prioritising the housing aspect in reducing demand on local health and care services.

### ***Public & Private Sectors***

Perhaps the greatest area of deficiency in many communities is the absence of attractive, well-located, good quality retirement housing for private sale. An increasing proportion of new social/affordable housing is being delivered under Section 106 agreements on the back of private housing development. Partnerships between local government, private developers and the voluntary sector are therefore becoming very important for the delivery of new affordable housing for older people. It is essential therefore that housing for older people is considered holistically across the public and private sectors.

Large residential developments, urban extensions and estate regeneration projects present particularly good opportunities for the inclusion and integration of housing for older people, at or close to their 'heart', in order to create sustainable, age-friendly communities. The Healthy New Towns initiative provides an opportunity to test this out further.<sup>2</sup>

### ***Integration by Design***

The negative perception of the market that 'housing for older people' is institutional in nature rather than presenting an attractive lifestyle alternative, needs to be tackled by developers and their designers.

New housing that is contextual, well-located and indistinguishable from general residential development, will help to address this misconception.

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<sup>2</sup> <https://www.england.nhs.uk/ourwork/innovation/healthy-new-towns/>

### ***Intergenerational and Mixed Tenure***

Older people generally wish to stay engaged with their families and communities. More intergenerational housing which brings older people into contact with their children and grandchildren's generations should be encouraged. Furthermore, the informal care and support that many older people provide to family and relatives cannot be underestimated (socially or financially).

In addition, tenures are more easily integrated in housing for older people. Shared ownership, in particular, should be promoted as there is a large middle market whose equity in property is insufficient to both purchase a new apartment and meet ongoing living and care expenses or self-care.

## **Planning for an Ageing Population**

### ***Strategic Planning***

A more strategic approach is required in planning for an ageing population so that realistic targets can be established for new homes across a range of tenures.

### ***SHMA's & SCHLAA's***

As highlighted above, housing needs assessments but these must take into consideration the local demography across public and private sectors. Using the SHOP@ tool, information regarding care and support needs from Adult Services and Health Authorities and public and private care agencies should be gathered to provide the full picture of local housing need.

At the same time, information should be collated on all existing housing and care provision for older people including stock condition surveys as to its fitness for purpose. From this information a reasonably accurate assessment could be drawn as to likely future demand across various tenures and housing typologies.

### ***Local Plans***

The location of new housing for older people is of critical importance. Local Plans should allocate sites for this sector in strategic locations and include sites within all major residential developments, urban extensions, new garden cities, urban and estate regeneration projects etc.

### ***Public Sector Land Disposal***

The disposal of public sector land also presents a good opportunity for ensuring that sites in good locations are allocated for housing for older people.

NHS land disposal also provides a good opportunity for the provision of community-based health facilities and 'housing with care' to be integrated with private residential development.

### ***Planning Facilitation***

There is a strong case for promoting and facilitating the development of housing for older people across both the public and private sectors. Due to the enhanced space standards required for 'inclusively' designed housing and the provision of communal facilities, it is difficult for developers to compete with general housing developers on the open market.

Consideration should therefore be given to reducing or waiving the application of the Community Infrastructure Levy (CIL) on housing for older people. Depending on the tenure profile and housing needs in particular areas, consideration could also be given to reducing or waiving

affordable housing contributions under Section 106 agreements, should the viability of private sector development warrant it.

Housing for older people should also be exempt from off-site contribution for new starter homes under the new legislation currently being enacted.

### ***Planning Use Classes***

In our view, there is a great deal of inconsistency between local planning authorities as to the use class categorisation of 'housing with care' developments. This uncertainty presents risk to developers as it can have an impact on viability (with C3 general residential attracting affordable housing contributions, enhanced parking standards etc).

Many developments are currently regarded as 'sui generis' by local authority planners and then become subject to negotiation depending on the housing model and typologies proposed. The outcome often depends on the experience of the individual case officers and their knowledge of the sector.

It would be of great benefit to the sector if some clear guidelines could be published by the LGA clarifying the different housing models/typologies for older people with appropriate recommendations regarding Use Class and planning facilitation measures for the assessment of applications.

## **Promote a Culture and Infrastructure for Community Based Care**

### ***Care & Repair: Home Care & Improvement Agencies***

As the majority of people will always wish to stay put within the community in their family homes, a key strand of any strategy must involve the community based care and support services that this will demand; Home Care, Home Improvement/Staying Put and Floating Support Services. Many of these services are under threat as a result of local authority funding cuts.

However, the sustainability of the system is largely dependent on the informal care sector provided by spouses, family and friends. As highlighted above, recognition needs to be given to the fact that the carers will also need support.

### ***Community HUB's & Resource Centres***

A community care and support infrastructure and network of Community Care HUB's will be required to supplement home care services. A Community Care HUB can take many different forms and provide a range of facilities tailored to the needs within its neighbourhood. Services and facilities provided might include: a Resource Centre, a Care Base for Adult Services and other agencies operating in the area, Dementia Care, Respite Care, Day Care, Rehabilitation Facilities and/or accommodation, a Health & Wellbeing Centre, Library, Post Office etc.

Community HUB's could be planned in conjunction with health facilities including GP Surgeries or Community Health Centres, or they could be integrated with Housing with Care (Extra Care) developments in residential neighbourhoods.

## **Facilitate new Housing for Older People across the Public and Private sectors**

Emerging trends in the development of new housing for older people would suggest that there is a move towards the development of 'Lifestyle Housing' for younger-older people (extended middle age) at the one end of the spectrum and, at the other end, more care-focussed community-based housing and institutional developments for the very frail.

## ***Private Sector***

The private sector's focus is generally on 'lifestyle' products that will extend the variety and choice of housing for downsizing, increasingly adopting the HAPPI principles.<sup>3</sup> For their offer to be of interest to this market, it must have at its heart attractive, inclusively-designed apartments – predominantly two bedroom but with a proportion of one and even three bedroom – but it must also be well-located, preferably in a Lifetime Neighbourhood easily accessible for older people where public transport, shopping, leisure, health and other facilities are within walking distance. The development should include some multi-functional communal space for socialising and, ideally, offer a level of control to residents over their housing management functions and financial circumstances.

A new generation of residential care/nursing homes, underpinned by Private Equity funding is being developed. At the upper end of the market a product more akin to a 'Care Hotel' is being developed as a 'lifestyle' product with 24 hour care and support.

## ***Public Sector***

In response to these changes in the political and funding landscape, those developing new housing for older people are adapting to these new circumstances.

Emerging trends would suggest that we are starting to see a move away from the development of Extra Care housing with its costly and extensive communal facilities towards more independent living (less institutional) 'lifestyle' focussed housing on the one hand and more care-focussed institutional products for much higher care needs, on the other.

In a way, this is a return to the Category 2 sheltered housing of the 1960's & '70's but with dramatically improved space and accessibility standards underpinned by the philosophy of 'inclusive' design.

Much more emphasis will be placed on the location of new developments to ensure that they are close to the heart of their residential communities to enable older people to keep in touch with family and friends.

They will rely very much more on their context/immediate neighbourhood in terms of access to a range of facilities. Therefore, the scale of new development becomes much less of an issue as the financial burden of extensive communal facilities is lifted.

Communal facilities can be minimised by provide a multi-functional space for socialising, a domestic kitchen, laundry and staff office.

Specialist Care Homes are likely to be integrated with or act as a Community Care HUB which can provide both outreach services in the form of meals-on-wheels, laundry and home care in addition to in-reach for respite, intermediate (rehab), and day care.

## **And finally....**

The aim of the LGA and LA's must be to develop a more strategic and integrated approach to housing and caring for an ageing population in order to promote, plan for and facilitate the delivery of a wide range of housing products for older people in age-friendly environments at the heart of their own communities.

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<sup>3</sup> [www.housinglin.org.uk/Topics/browse/Design\\_building/HAPPI/](http://www.housinglin.org.uk/Topics/browse/Design_building/HAPPI/)

## 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 Author

Roger Battersby was the Managing Partner at PRP from 2007 - 2015. He has worked in the field of housing for older people for more than 20 years. He was a member of the HAPPI [Housing an Ageing Population: Panel for Innovation] expert panel which culminated in the publication of the influential HAPPI report in December 2009. More recently, he has been a member of the HCA's VOPAG (Vulnerable and Older People's Advisory Group 2013-2016) and is currently sitting on an APPG (All Party Parliamentary Group) enquiry panel (HAPPI 3) looking into the management aspects of housing for older people.

## About PRP

PRP is one of the leading architectural and multidisciplinary practices specialising in the field of housing with care for older people. Over the past 20 years, the practice has delivered over 10,000 supported housing units and Care Home bedrooms for voluntary sector and private developer clients. PRP has and continues to work with many Local Authorities, either directly in informing strategy, reviewing and redeveloping their sheltered housing stock or in partnership with RP's and LA's.

## About the Housing LIN

The Housing LIN is a sophisticated network bringing together over 40,000 housing, health and social care professionals in England and Wales to exemplify innovative housing solutions for an ageing population.

Recognised by government and industry as a leading 'knowledge hub' on specialist housing, our online and regional networked activities:

- Connect people, ideas and resources to inform and improve the range of housing choices that enable older and disabled people to live independently
- Provide intelligence on latest funding, research, policy and practice developments, and
- Raise the profile of specialist housing with developers, commissioners and providers to plan, design and deliver aspirational housing for an ageing population

For information about the Housing LIN's comprehensive list of online resources on designing for an ageing population, visit our 'design hub' at:

[www.housinglin.org.uk/Topics/browse/Design\\_building/](http://www.housinglin.org.uk/Topics/browse/Design_building/)

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