



AI State of the Nation Report - Specialist and Supported Housing

Written by the **Housing Learning and Improvement Network** with legal insight by
HCR Law

OCTOBER 2026



Contents

Introduction / Context	2
Methodology	3
Key findings	5
1. AI adoption among respondents	5
2. Where AI is being used	6
3. Tools being used	7
4. Practical examples from the responses	7
5. Productivity: individual benefit versus organisational impact	9
6. Evaluation remains underdeveloped	9
7. Resident involvement	10
8. Risks and barriers	11
9. Data readiness is a practical barrier	13
10. Not all experiences are positive	13
11. Workforce implications	13
Overall emerging narrative	14
AI and the analogue-to-digital switchover	14
Conclusion and recommendations	15
Acknowledgements	16
About HCR Law	16
About the Housing LIN	17
Published by	17

Introduction / Context

The Housing LIN/HCR Law survey explored how AI is being used across specialist and supported housing, including benefits, risks, resident involvement and potential applications. It's the first of two surveys, the second will focus on the impact of AI on older people and people with a disability living in general needs social housing.

The Older People's Housing Taskforce¹ in 2024 called on the sector to be "future proofed" for an increasingly digital age and existing settings should be ready for the analogue-to-digital switch. With the analogue-to-digital switchover due to be completed by the end of January 2027, digital readiness is becoming increasingly important, particularly for specialist and supported housing services that rely on telecare, community alarms and other connected technologies.² Against this backdrop, our survey provides a snapshot of a sector beginning to embrace AI, but still developing its approach to strategy, governance, evidence and resident involvement.

Wider sector research points in a similar direction. A UK-wide survey by Phoenix Software³, in partnership with the National Housing Federation⁴ (NHF), found that 47% of respondents were already using AI in day-to-day operations, while 60% had no AI strategy, 44% had no AI policy and 87% reported low levels of AI knowledge. These findings suggest that adoption is moving ahead of organisational strategy, governance and capability.

More recent research from Housemark⁵ found that only 11% of social housing providers had an AI strategy. Furthermore, 73% said that their core housing and business systems provided limited or no support for AI integration. However, as the NHF's Cara Green states⁶:

"AI should support our mission, not distract from it. It's about opening the door with intention, not rushing through it."

Taken together with our own survey findings, this points to a need for specialist and supported housing providers not only to build their AI capability, but to develop AI approaches with tenants and residents from the outset.

(1) <https://www.housinglin.org.uk/Topics/type/Our-Future-Homes-Housing-that-promotes-wellbeing-and-community-for-an-ageing-population/>

(2) <https://www.housinglin.org.uk/News/Our-Top-5-Priorities-for-2026-No-4-Digital-Switchover-Switching-over-to-digital-before-the-analogue-switch-off/>

(3) <https://www.phoenixs.co.uk/the-state-of-ai-in-housing-2025/>

(4) <https://www.housing.org.uk/globalassets/files/ai-programme-group/5890---nhf-adapting-to-ai-report-a4-2026-v7-accessible.pdf>

(5) <https://www.housemark.co.uk/news/beyond-the-ai-hype-what-ai-adoption-really-looks-like-in-social-housing/>

(6) <https://www.housing.org.uk/news-and-blogs/blogs/cara-green/welcoming-artificial-intelligence-ai-through-the-door-of-social-housing--how-we-can-use-ai-to-improve-delivery/>

This is reinforced in a new Housing LIN blog by CEO Jeremy Porteus⁷, published to coincide with this briefing. The blog draws on Age UK's recent *Digital Done Right* analysis⁸, which found that among people aged 65 and over in England, only 15% are fully digitally included, while 13% – around 1.4 million people – are digitally excluded altogether and a further 25% – around 2.7 million – are partially digitally excluded. Digital exclusion is also associated with factors including disability, poorer health and lower income, all highly relevant when considering specialist and supported housing.

As a result, any AI-enabled service that assumes residents can engage with an app, portal or chatbot risks excluding some of the very people it is intended to serve. Offline and assisted routes therefore need to be designed in from the outset, rather than added as an afterthought.

Methodology

The survey was developed jointly by the Housing LIN and HCR Law and delivered online using SurveyMonkey. It combined multiple-choice questions with open-text questions designed to capture both the extent and nature of AI use, including current applications, perceived benefits and risks, resident involvement, evaluation and wider issues such as digital transformation and the analogue-to-digital switchover.

The survey was promoted through Housing LIN communications and remained open for several weeks, with the closing date extended to encourage further participation. Participation was voluntary and self-selecting.

A total of **41 responses** were received. While this is too small and self-selecting a sample to be treated as representative of the sector as a whole, the responses provide useful qualitative evidence and examples of how AI is beginning to be adopted.

Response numbers also varied between individual questions, particularly the open-text questions, so percentages are based on the number answering each question rather than the full sample in every case.

Respondents came from a range of organisations. The largest group was **housing associations/registered providers (14)**, followed by **local authorities (8)**, **charity, voluntary and community sector organisations (7)**, **consultancy/research/academic organisations (5)** and **technology/digital providers (4)**. There was also **one developer** and **two respondents who selected 'other'**. There were no responses from NHS/Integrated Care Boards, regional or combined authorities, care/support providers, architects or planners, which should also be borne in mind when interpreting the findings.

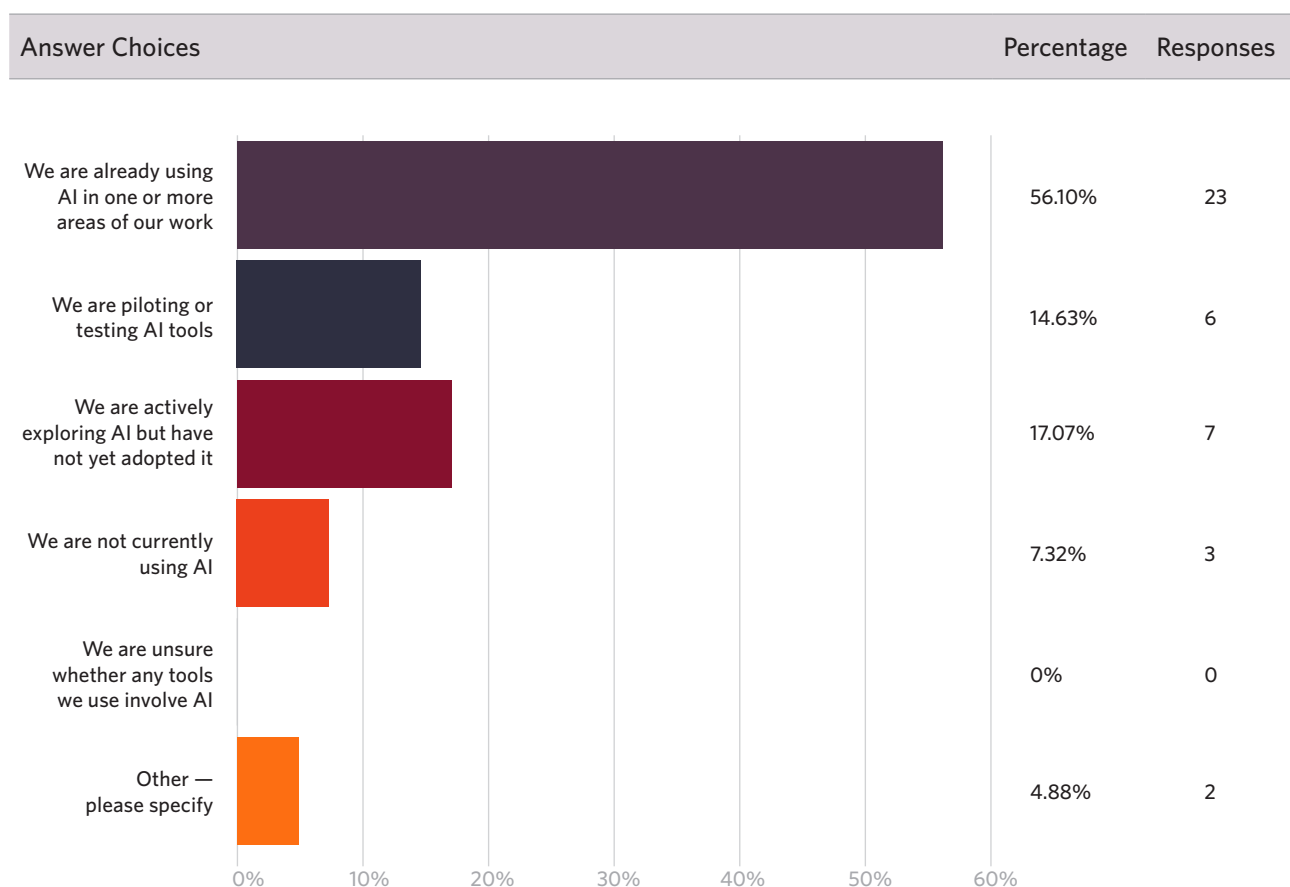
(7) <https://www.housinglin.org.uk/blogs/From-science-fiction-to-science-fiction-AI-tomorrows-world-today/>

(8) <https://www.ageuk.org.uk/siteassets/documents/reports-and-publications/reports-and-briefings/active-communities/digital-done-right-report>

Geographically, the survey was weighted towards England. **33 respondents** said their organisation operated in England, **4 in Scotland**, **1 in Wales** and **1 in Northern Ireland**, while **7 described themselves as UK-wide** and **2 selected another geography**. Respondents could select more than one geographical area, so these figures are not mutually exclusive.

The analysis therefore combines the quantitative responses with a qualitative review of the written answers, looking for recurring themes, practical examples, emerging applications and areas of concern. Given the sample size and composition, the findings are best understood as an indicative snapshot of emerging practice and issues, rather than as a quantitative assessment of AI adoption across the sector.

Q: Which of the following best describes your organisation's current use of AI?



Key findings

The survey suggests that AI is already beginning to influence how specialist and supported housing organisations work, but adoption remains uneven and is often at an early stage. Among respondents, the most common uses were around productivity, administration, research and decision-making, with tools such as Microsoft Copilot, ChatGPT, Claude and Magic Notes/Beam featuring prominently. There were also emerging examples of AI being applied more directly to housing, care and support services, including support planning, customer insight, resident-facing services, property monitoring and home safety.

Across the responses, a consistent picture emerges of experimentation moving faster than formal strategy, governance and evaluation. Respondents frequently described time savings and improved efficiency, but relatively few had robustly measured the impact of AI or could demonstrate how individual productivity gains were translating into wider organisational or resident outcomes. Concerns around data quality, privacy, security, accuracy, human oversight and the potential loss of personal interaction also featured strongly.

Resident involvement was similarly mixed. Some organisations had involved residents in pilots, sought consent or used co-production approaches, while many had not yet involved residents or planned to do so later. Taken together, the findings suggest that the sector is moving from experimentation towards more purposeful adoption, but that questions of **strategy, evidence, governance, resident involvement** and **workforce capability** will become increasingly important as AI moves closer to frontline services and decision-making.

1. AI adoption among respondents

AI use was relatively high among those who responded:

- **23 of 41** said they were already using AI in one or more areas;
- **6** were piloting or testing AI;
- **7** were actively exploring it but had not yet adopted it.

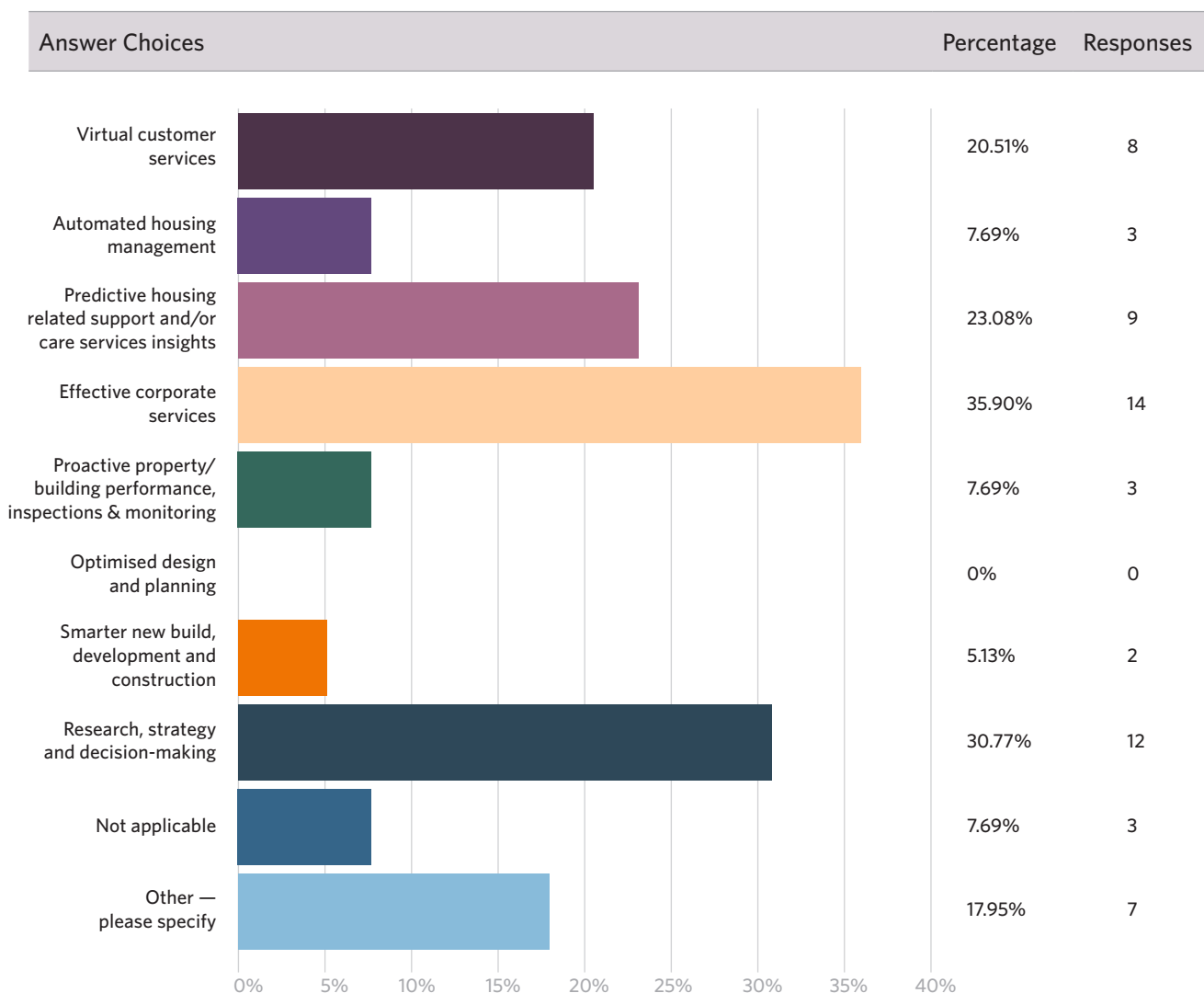
This should not be interpreted as an indication of sector-wide adoption because respondents with an existing interest in AI may have been more likely to complete the survey.

2. Where AI is being used

Thirty-nine respondents answered the question about areas of use and could select more than one option:

- **14 (36%)** – corporate services;
- **12 (31%)** – research, strategy and decision-making;
- **9 (23%)** – predictive housing-related support and/or care;
- **8 (21%)** – virtual customer services;
- **3 (8%)** – automated housing management;
- **3 (8%)** – property/building performance;
- **2 (5%)** – new build/development.

Q: If you/your organisation are using AI, in what work areas have you adopted it?



This suggests that AI is currently strongest around **productivity, administration and analysis**, but there is also emerging activity closer to frontline housing, care and customer services.

3. Tools being used

Thirty-four respondents provided information on the tools or systems they were using.

Microsoft Copilot was by far the most frequently mentioned, by around 20 respondents. Other commonly mentioned tools included:

- ChatGPT – 7;
- Claude – 5;
- Magic Notes/Beam – 4;
- Gemini/Google AI – 3.

More specialist examples included **Birdie Smart Plans**, **HousingAI**, **Peggy resident concierge**, **Income Analytics**, **sensors and bespoke/in-house AI tools**.

4. Practical examples from the responses

The written responses provide useful examples of how AI is beginning to be applied in practice beyond the headline survey figures.

Productivity and support planning

One local authority reported using Magic Notes/Beam for housing meetings, support planning and form-filling. The respondent estimated that this saved around **70% of the time** they would otherwise have spent writing up meeting notes, minutes and housing and support-planning forms. They also reported that housing meeting minutes could be available within ten minutes and that support-planning documentation was produced much more quickly.

“It saves about 70% of time we would have spent writing up meeting notes and minutes, completing housing and support planning forms.”

Care and resident-facing services

One housing association/registered provider reported using or testing a range of AI applications, including **Birdie Smart Plans for care**, **HousingAI**, **Copilot** and a **resident concierge**, alongside AI for cyber security. The response also highlighted issues around data readiness, privacy and profiling, and stressed that AI should enable rather than replace interaction and decision-making involving residents.

“Freeing up staff time on administrative activities to allow more time for qualitative interactions.”

Customer insight

One research and consultancy organisation reported using **AI sentiment analysis**, providing an early example of AI being applied to customer/resident insight rather than solely to internal administrative tasks. The respondent said this work was still at an early stage, although residents/service users had been involved and the use of AI had been evaluated.

Homes and property

One respondent involved in a sensor pilot reported better information about homes and repairs, reduced heating costs, improved air quality and the ability to intervene before equipment failure. They also reported reduced communal heating bills. Residents were engaged before participating in the pilot, with around **75% signing up**, although privacy was identified as a concern.

Older people and home safety

One technology provider is developing an AI-enabled home-safety assessment that uses phone video to identify hazards and falls risks. The intended aim is to increase access to home assessments for older people, identify hazards earlier and help people remain safely and independently at home for longer. However, the system is still **pre-pilot**, so these are intended benefits rather than measured outcomes at this stage.

Wider evidence also illustrates the potential for more proactive approaches. Research has linked disrupted sleep and reduced mobility among older people with increased falls risk. A proof-of-concept undertaken by Everon and Howz found that data already generated by digital pendant devices could be analysed using machine learning to identify changes in activity, routine and sleep, without requiring additional hardware. In one council example, movement data showed that an extra-care housing resident who was thought to be at risk of wandering at night was not in fact active overnight. This provided reassurance to the family and enabled monitoring and care resources to be directed towards residents with greater need.⁹

Consent and transparency become particularly important as AI moves closer to care and support. Research commissioned by Social Work England found that informed consent becomes more complex where issues of vulnerability or capacity arise. It also highlighted the challenge of ensuring that people genuinely understand how AI is using their information and are able, where appropriate, to consent or decline.¹⁰ These considerations are directly relevant to specialist and supported housing, particularly where AI is used in assessment, support planning or other resident-facing services.

(9) <https://everon.net/blog/independent-living-intelligent-insight-the-role-of-everon-care-in-the-next-generation-of-tecs/>

(10) <https://www.socialworkengland.org.uk/about/publications/the-emerging-use-of-artificial-intelligence-ai-in-social-work/>

5. Productivity: individual benefit versus organisational impact

For many, time saving is one of the clearest themes across the responses, particularly around administrative tasks such as:

- drafting and editing;
- research;
- meeting notes and transcription;
- forms and support planning;
- reports and correspondence.

However, it was noted that there is very little robust measurement of these benefits.

One local authority respondent made an important distinction: they were seeing **“significant productivity improvements for individuals”**, but said the organisational impact was still in question.

“Significant productivity improvements for individuals, but organisational impact is in question.”

This raises a useful question for further investigation:

What happens to the time AI saves, and does that translate into better organisational performance or better outcomes for residents?

6. Evaluation remains underdeveloped

Although some respondents said they had evaluated their AI use, relatively few supplied evidence of systematic measurement of outcomes.

Overall, the responses suggest that **experimentation is currently ahead of formal evaluation**. This makes it difficult to distinguish between perceived benefits, genuine productivity improvements and measurable resident/service outcomes.

Of the 33 respondents who answered the question on evaluation, eight said they had evaluated or measured their use of AI, while others described more informal approaches such as checking outputs or gathering feedback.

Respondents frequently reported time savings, improved efficiency or better services, but in most cases these benefits had not been quantified or independently assessed.

For providers, the practical implication is that AI pilots should be accompanied by clear measures of success from the outset — not only whether a tool saves time, but whether it improves service quality, resident outcomes, safety and staff capacity, and whether any unintended consequences emerge.

7. Resident involvement

Despite the importance of co-production identified in the TAPPI project 'test beds' at <https://www.housinglin.org.uk/tappi/>, resident / service-user involvement also appears relatively limited or at an early stage.

There are some positive examples of consent, co-production and involvement in pilots, but many respondents had either not yet involved residents or planned to do so later.

As AI becomes more closely connected to care, support, customer services or decision-making, this is likely to become increasingly important.

Co-production was at the heart of the TAPPI programme, with residents involved across most of its test beds in discussing which technologies would meet their needs and in shaping service design.¹¹ Against this background, resident and service-user involvement in AI adoption appears relatively limited or at an early stage.

Of the 40 respondents who answered this question, only **five (12.5%)** selected "Yes" when asked whether residents or service users had been involved in decisions about AI adoption, design, testing or evaluation. **Thirteen (32.5%)** said "No", while **12 (30%)** said they had not yet involved residents but planned to do so.

There were some positive examples in the written responses. These included engagement through co-production groups, seeking tenants' permission before using AI with them, and involving residents in a sensor pilot that achieved around 75% participation.

However, one tenant respondent summed up the potential gap starkly:

"Tenants are usually last to know with this Housing Association."

Involving residents from the outset should go beyond informing people that AI is being used, and include opportunities to influence its design, testing, evaluation and the choices available to them.

This is consistent with research commissioned by Social Work England, which involved people with lived experience in its own research and recommends that changes to professional standards and guidance on AI should be developed in consultation with people with lived and learned experience.¹²

"Clients must be made aware of what is being used and able to have a choice."

(11) <https://www.housinglin.org.uk/tappi/what-we-learnt/what-we-did/co-production-in-tappi/>

(12) <https://www.socialworkengland.org.uk/about/publications/the-emerging-use-of-artificial-intelligence-ai-in-social-work/>

8. Risks and barriers

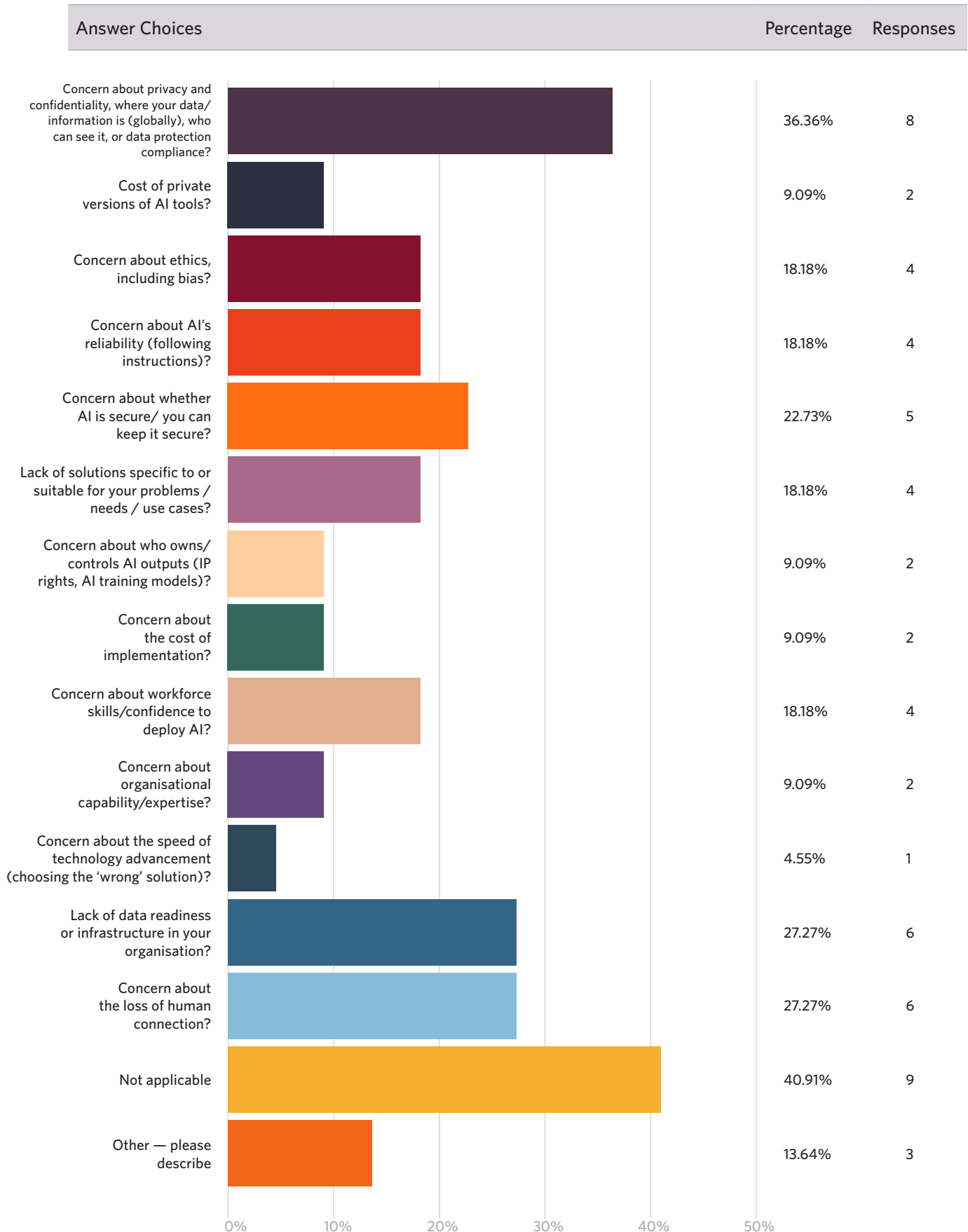
In terms of risks and barriers, there were a number of recurring concerns. These included:

- privacy, confidentiality and data protection;
- security;
- inaccurate or fabricated information;
- ethics and bias;
- data readiness;
- workforce skills;
- maintaining human judgement and human interaction.

(See data on next page)

Interestingly, cost appears less prominent than the above reported issues, although the relevant survey question needs to be treated cautiously because some respondents already using AI also completed it.

Q: If you responded that you are not using AI or unsure, which of the following reasons best describe why?



9. Data readiness is a practical barrier

One particularly useful example came from a housing association that described a **failed predictive rent-management pilot**. The respondent said the organisation did not yet have a sufficiently robust data foundation for AI to work effectively and is now prioritising data cleansing before applying AI more widely.

This provides a useful practical lesson: **AI capability depends on the quality, consistency and accessibility of the underlying organisational data**. Where records are incomplete, inconsistent or poorly structured, AI may reproduce or amplify those weaknesses rather than resolve them.

For providers, this means that investment in AI should go hand in hand with good data governance, data quality and clarity about which data are suitable for which purposes. This is particularly important where AI is being considered for resident-facing, care or other higher-risk applications.

10. Not all experiences are positive

The survey also provides useful critical evidence, underlining that AI adoption can introduce new risks as well as opportunities.

“Delay in alarm call answering ... could result in time delays in getting help to residents.”

One involved resident raised concerns about what they described as **AI-enabled alarm call handling**, including possible delays in answering calls, repeated questions about whether an alarm was a test, difficulties recognising accents or non-English speakers, and circumstances where somebody may be unable to speak following a stroke or heart attack.

These concerns reinforce the importance of testing AI-enabled systems in real-world conditions, involving residents in their design and evaluation, and ensuring that human oversight and alternative routes remain available where safety could be affected.

They could also provide useful evidence for a future **Housing LIN State of the Nation report**, helping to ensure that the opportunities presented by AI are considered alongside the risks and practical challenges emerging from its use.

11. Workforce implications

The responses also raise questions beyond immediate productivity. One respondent described a potential **“skills gap paradox”**: if AI increasingly takes on entry-level or customer-service work, how will future staff and leaders acquire the skills and experience traditionally developed through those roles?

“If AI takes on the role of Customer Service Officers or low-level employees, where do the future leaders with those skill sets come from?”

Another specialist housing provider similarly questioned what AI adoption could mean for employment opportunities and the introduction of younger people into the workforce. The respondent also stressed the continuing need for knowledgeable and skilled staff who understand the organisation and can assess the accuracy of AI outputs.

Wider research suggests that workforce preparation has some catching up to do. Social Work England found that **86% of social workers who had qualified in the previous five years had received no specific preparation on using AI during their education and training**. Respondents were also considerably more positive about AI's potential to reduce administrative burden than about its use in areas such as professional decision-making and identifying risk and need.¹³

For providers, the practical challenge is therefore not simply to train staff to use AI, but to ensure they retain the professional knowledge, critical thinking and judgement needed to question its outputs and know when human decision-making must take precedence.

Overall emerging narrative

Our survey suggests that, among respondents, AI adoption is currently concentrated on productivity and administrative uses, but there are early signs of it moving closer to core housing, support, care and resident-facing functions. As this develops, questions around evidence, data quality, governance, resident involvement and human judgement will become increasingly important.

AI and the analogue-to-digital switchover

The analogue-to-digital transition affecting telecare, due to be completed by the end of January 2027, is more than an infrastructure challenge. It also provides an opportunity for providers to consider how new digital systems could support more proactive and preventative approaches, including through remote monitoring, data analytics and AI.

Peter Kerly, Managing Director of Everon UK, has described the transition as marking a move towards more *"proactive, preventative and insight-driven care"*.¹⁴

This also brings new responsibilities. Digital and AI-enabled systems can generate and analyse much richer information about people's homes, routines and support needs, but their design and use need to reflect the needs and choices of older and disabled people. As the survey findings illustrate, **resident involvement, good governance, data quality, human oversight and careful evaluation** will be particularly important where technology is being used to support people's safety, care or wellbeing.

(13) <https://www.socialworkengland.org.uk/about/publications/the-emerging-use-of-artificial-intelligence-ai-in-social-work/>

(14) <https://www.housinglin.org.uk/blogs/The-future-of-digital-care-The-trends-were-likely-to-see-in-health-technology-in-2026/>

Conclusion and recommendations

The survey suggests that AI already has broad relevance to specialist and supported housing, with applications ranging from routine administration and research to care and support, customer insight, property monitoring and resident-facing services.

However, among respondents, adoption often appears to be developing **tactically rather than strategically**: organisations are experimenting with individual tools and applications, while formal approaches to governance, evaluation, data readiness and resident involvement are less developed.

There is an opportunity for the sector to move from this relatively informal experimentation towards more deliberate and responsible adoption. This does not mean avoiding experimentation or expecting every pilot to succeed. Rather, organisations should be clear about the problems they are trying to solve, test AI in a managed way, evaluate both benefits and risks, and ensure that human judgement remains central where decisions affect residents, care or wellbeing.

Based on the survey findings and wider evidence considered in this briefing, we suggest five priorities for providers and their partners:

- **Move from tactical use towards an organisational approach to AI.** Providers should consider how AI fits within their wider strategy, governance and risk-management arrangements, including clear responsibilities for approving, procuring and overseeing AI tools.
- **Build evaluation into experimentation from the outset.** Pilots should have clear measures of success and should consider not only time or cost savings, but service quality, resident outcomes, safety and unintended consequences. Failure can itself provide useful learning if it is identified and shared.
- **Get the foundations right.** Good-quality, accessible and well-governed data are essential where AI depends on organisational information. The survey's example of a failed predictive rent-management pilot illustrates why data readiness should be considered before, rather than after, wider AI deployment.
- **Invest in people as well as technology.** Staff need more than the ability to operate AI tools. They need the confidence and skills to question outputs, identify errors or bias, understand when AI should not be relied upon, and retain the professional judgement and human relationships that specialist and supported housing depend on.
- **Collaborate at three levels.**
 - Providers can benefit from sharing experience, learning and practical resources with one another;
 - housing organisations increasingly need to work with health, social care, local government and voluntary-sector partners where services and data intersect;

- and residents and service users are encouraged to be involved in the design, testing and evaluation of AI-enabled services, including for strengthening community participation. The Oxford Project on responsible generative AI in social care similarly places consultation and co-production at the centre of responsible adoption.¹⁵

The survey contains some striking examples of potential benefit, including one respondent reporting an estimated **70% reduction in time spent preparing meeting notes, minutes and housing and support-planning documentation**. But such examples should be treated as early evidence rather than proof of sector-wide impact.

The challenge now is to understand where AI genuinely adds value and to develop the governance, evidence, skills and collaboration needed to use it well.

Acknowledgements

We are grateful to everyone who took the time to respond to the survey and share their experiences, perspectives and concerns about the use of AI in specialist and supported housing.

We would also like to thank colleagues at the Housing LIN and HCR Law who contributed to the development of the survey, analysis of the findings and preparation of this practice briefing.

About HCR Law

HCR Law is a leading full-service law firm with offices across England and Wales. The firm's housing and social housing team advises a wide range of clients including registered providers, local authorities, developers, and investors on all aspects of housing law, regulation, and governance. With extensive experience in supported and specialist housing, HCR Law provides strategic advice on regulatory compliance, development projects, funding structures, and operational matters.

<https://www.hcrlaw.com/>

HCR Law are proud to be a sponsor of the Housing LIN.

(15) <https://www.digitalcarehub.co.uk/ai-and-robotics/oxford-project-the-responsible-use-of-generative-ai-in-social-care/>

About the Housing LIN

The Housing LIN is a sophisticated network bringing together over 15,000 housing, health and social care professionals in England, Wales and Scotland to exemplify innovative housing solutions for an ageing population.

Recognised by government and industry as a leading 'ideas lab' on specialist/supported housing, our online and regional networked activities, and consultancy services:

- connect people, ideas and resources to inform and improve the range of housing that enables older and disabled people to live independently
- provide access to intelligence on the latest funding, research, policy and practice
- raise the profile of specialist and supported housing with developers, commissioners and operators, and
- attract business to help and support clients plan, design and operate aspirational housing and services for people of all ages.

And, if you found this of interest, the Housing LIN curates dedicated pages on Smart Housing and Telecare at:

<https://www.housinglin.org.uk/Topics/browse/HousingOlderPeople/OlderPeopleHousingProvision/Telecare/>

Published by

Housing Learning and Improvement Network
c/o The Ideas Store
10 Lindsey Street, Clerkenwell
London EC1A 9HP

Email: info@housinglin.org.uk

Web: www.housinglin.org.uk

LinkedIn: @Housing-LIN

Bluesky: [@housinglin.bsky.social](https://bsky.app/profile/housinglin.bsky.social)