# Older Peoples Housing Strategy

# 2006- 2010

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# Glossary of Terms

This glossary is intended to help readers make the most of this strategy and is not intended to give a precise legal definition of terms used.

**Black and Minority Ethnic (BME):** Generic term for people or communities who are not White British.

**Choice Based Lettings: Method** of allocating social housing that puts the emphasis on applicants choosing or 'bidding' for available properties and these bids being prioritised by the Local Authority on the basis of need. Due to be introduced In Oxford in 2007.

**Direct Payments:** Allows a person to have their care funding paid direct to themselves so they can choose and pay for their own care provider.

**Disabled Facility Grant (DFG):** A grant available to disabled people to help with adaptations to the home.

**DOH:** Government Department of Health

**Extra Care Housing:** Independent flats with access to 24 hour care from the scheme. This provides flexibility for people to access care when they need it whilst retaining independence.

**Individual Budgets:** A way of bringing together funding from various sources for an individual to enable services to be provided for and paid for in a more integrated way.

**Primary Care Trust (PCT):** Local bodies responsible for health care budgets, planning and delivery of primary care services.

**Registered Social Landlord (RSL):** Generally used to mean the same as Housing Association.

**Supporting People:** The programme for distributing public spending on housing related support services. The commissioning body is made up of representation from district councils, social services, PCTs, the Probation Service and voluntary agencies.

**Telecare (also called assistive technology):** A range of established and new equipment that can be fitted in people's homes to allow constant monitoring and access to help. The term includes community alarms, which allow a person to access help in an emergency through a personal pendant or pull cord in their home. More recent developments include movement sensors, which can track person's movements and can be especially useful for providing support for someone suffering from dementia.

# Executive Summary

## Introduction

Older people aged over 65 form around 20% of Oxford's total population. The expectations and needs of this group vary widely but include some of the most vulnerable in our society.

Good housing is the fundamental requirement for older people to be able to maintain their independence and continue to enjoy a good quality of life. If housing is well designed, warm, in a good location and affordable other services can be provided within this setting as necessary. Conversely poor housing can have a huge impact on someone's well being. Cold or badly insulated homes can cause or exacerbate conditions including hypothermia. Outstanding repairs can lead to falls, potentially severely affecting someone's ability to be independent. Housing that is located too far from amenities or transport or is in an area that doesn't feel safe can lead to isolation and depression.

Less than a quarter of all older people live in socially rented housing where the Local Authority provides housing directly or in partnership with Registered Social Landlords. It is important to recognise that many older people are owner-occupiers, who are on average asset rich but cash poor, or live in the private rented sector where the condition of properties can be poor. This strategy looks across the needs of all tenure groups to evaluate what the Council is currently providing and how this might be improved.

Consultation with older people has shown that what they want fits well with local and national strategies which focus on quality services, providing choice, integrated services, meeting diversity, promoting independence and involving older people fully in decision making.

It is important to see housing and housing related support services in the context of other services provided by health, social services and the voluntary sector and the strategy tries to link in clearly with the strategic objectives of other agencies.

The strategy provides a profile of older people in Oxford and looks at this against current provision of housing and housing related support services.

The strategy concentrates on 7 key areas: improving the quality of housing, housing related support, improving sheltered housing, working with other agencies, meeting diverse needs, information and advice and involving older people. Each section provides an analysis of the current position and a set of strategic priorities. Actions arising from these can be found within the action plan at the end of the document.

1. **Improving the Quality of Housing.**

The council is on target to meet decent homes standards by 2010 as are the partner RSLs. Accessibility issues are also being tackled as decent homes

work is carried out. The Council has recently carried out a review of its Sheltered Housing and is undertaking a series of option appraisal exercises with the aim of bringing all of these properties up to a minimum design standard.

The new housing health and safety rating is being adopted for use in the private rented sector and a City Council Private Sector Housing strategy is being developed which will focus on energy efficiency, affordable warmth and prevention of falls. This will have a particular impact on older people.

Recent regeneration projects have included older people in the planning of housing improvements although could have taken a more holistic approach to older people's services as a whole in particular localities.

There are a number of excellent schemes operating in the city to help older people feel safe in their housing but this work needs to continue to develop particularly in areas of deprivation.

The main strategic outcomes are therefore:

- To continue the focus of bringing the council housing stock up to decent homes standards by 2010 and improve the accessibility of housing
- To carry out the actions recommended by the private sector housing strategy
- Ensure opportunities are taken during regeneration to evaluate the needs of older people in the area
- Continue to invest staff time and money in safety initiatives, which impact on older people's lives.

## 2. Housing Related Support Services.

Community Alarms, Staying Put Services, Equipment and Adaptations are included in this section.

The Council runs its owns community alarm service which serves a number of sheltered housing providers as well as providing individual alarms for people in all kinds of housing. It is a vital and valued service. The funding for this service has been affected by a number of factors and its future stability depends on a new financial strategy being developed. The centre has huge potential to develop and is going to be involved in a pilot to develop Telecare. The Supporting People strategy is to increase the usage of these alarms for a variety of client groups as they represent good value for money.

The home improvement agency, Staying Put continues to work in partnership to provide a whole range of services for older people in the private sector. However funding for this service is at risk and a concerted council and multi agency approach is needed through the engagement of Supporting People to secure the future of the service.

The budget for equipment and adaptations is still just about sufficient to meet the requests that come through and work is generally carried out very

effectively. People do often need to wait a considerable time for an occupational therapy assessment when this is required and the service remains primarily responsive. Value could be added by having a database of adapted properties in the City, which could then be matched to those needing such housing when they become vacant.

Other floating support services do support older people particularly those with additional problems of a history of homelessness or alcoholism. These services can fit well with those provided by sheltered scheme staff but there may be scope to use this service in a more targeted way to meet the needs of this particular group.

The main strategic outcomes are

- To ensure the council emergency control centre remains financially stable and able to respond to opportunities to develop the service.
- To ensure the future funding of the Staying Put project through Supporting People
- To set up a database of adapted properties in Oxford

## 3. Improving Sheltered Housing

Work is being undertaken by the city and a number of other key providers to improve the quality of sheltered housing in the City.

Within the range of available housing there are two clear gaps.

- A lack of affordable home ownership options for sheltered housing. Despite the number of owner-occupiers in the city there is a lack of provision to buy. What is available may be too expensive for many. There seems to be a clear gap for shared ownership or other affordable housing models.
- A lack of extra care. One scheme is currently being developed by social services but there a joint strategic approach between social services and housing is required to investigate the demand and possible provision of more schemes.

The facilities within sheltered housing could be used more widely for the benefit of the community and there is a great deal of good practice that has led to schemes becoming a real centre for older people in the local community.

It is increasingly recognised that the service provided from staff working in sheltered housing schemes could be used more widely to benefit the community as a whole. This has been one of the main priorities of the local Supporting People strategy. The City would welcome the opportunity to develop the service in this way but recognises that in the current contractual and financial climate progress may be slow.

Key strategic priorities for sheltered housing are:

- Carry out the recommendations form the Sheltered Housing Review to improve the quality of buildings.
- Seek to provide more opportunities for affordable home ownership in sheltered housing
- Form a joint working group to look at demand, funding and possible models for developing extra care in Oxford.
- Increase the usage of sheltered housing common rooms as a resource for the local community.
- To work with Supporting People to develop a contractual model for providing community support to those living outside of Sheltered Housing when this becomes possible.

### 4. Improving joint working with other agencies

Older people's services can be quite fragmented and confusing**.** An issue or problem may require a response from a number of different services. There are examples of improved strategic working between agencies however all parties acknowledge there is still a lack of knowledge about the full range of services.

The strategic actions that are likely to have the greatest impact are:

- To carry out a mapping exercise between health, social services and housing to identify all relevant services and referral routes and identify gaps and duplications.
- Encourage more joint working at all levels. This could include middle managers looking for service improvements and frontline staff having joint training.

### 5. Improving services for people with diverse needs

There is evidence that people from black and minority ethnic backgrounds find it harder to access services and believe that some services are not able to meet their specific needs. There are some culturally specific services in Oxford but more work needs to be done to ensure that the general provision is fully inclusive. The council has recently commissioned a BME housing strategy and this will give more information about how services can improve. Meanwhile the key actions are

- To ensure the specific service provision at John Kallie Court (a sheltered scheme designed for BME elders) is maintained
- Provide updated training for sheltered scheme staff about working with BME elders.

There are small numbers of homeless people within the first stage hostels or living on the street who have issues of aging to contend with as well as a raft of other problems. There is little specific provision for this group. The National Coalition for Older Homelessness is working with the City Council to carry out a needs audit which will lead to some work on improving provision for this group.

Gay and lesbian older people are becoming more ‘visible’ and as such the needs amongst this group are more apparent. The Civil Partnership act has strengthened the legal rights of same sex partnerships but there is still evidence that services remain unaware and insensitive to people’s life experience. The first steps in addressing this need to be

- Staff training particularly for sheltered scheme and frontline staff
- Publicity literature about services that explicitly makes clear services are inclusive of all older people including gay and lesbian people.

## 6. Improving Information and advice

Access to good information and advice is key if older people are going to be empowered to choose services that best meet their needs. Advice tends to be fragmented and getting advice becomes even more difficult as older people face additional obstacles such as mobility or sensory impairments. Some older people remain very isolated and therefore difficult to reach. If contact is made the opportunity needs to be taken to ensure that person is given a full range of advice and not just assessed for one service. Improvements could be made by:

- Providing a centralised information service that could be accessed by professionals and older people themselves
- Providing ‘older peoples champions’ within frontline teams who are trained in the full range of services available and who could act as a resource for colleagues.

## 7. Involving Older People

Involving older people as active citizens rather than as recipients of services will help combat ageism and make services more relevant. A lot of good work is happening across all services but more needs to be done to ensure all groups of older people are able to participate.

All strategies are likely to affect older people as they form a large proportion of the community with which we work. As such their needs should be considered specifically when strategies are being developed and if the impact on them is significant older people should be specifically consulted about changes.

Services need to review how far they ‘enable’ older people to maintain their independence and active participation in what happens as opposed to being overly stifling, rescuing or leaving people out on a limb.

There is much good practice within older people’s services within the City. The key now is to ensure services are integrated, embrace diversity and enable older people to remain independent in the way they choose.

# Introduction

There is considerable change in the direction of services for older people at both national and local level. Nationally the government documents 'The National Service Framework for Older People' and 'Quality and Choice for Older people' have set the agenda. Services need to move away from an institutional and paternalistic culture towards seeing aging as a natural stage in life and ensuring services allow for choice and promote independence. At a local level the way services for older people develop is now significantly driven by the Supporting People strategy and all services need to be revaluated in this context.

In 2005 the City Council carried out a review of the housing related services it provides for older people. This highlighted the need for the city to improve the standard of the accommodation provided for older people and looked to the future development of housing related support services. However there remains a need for a wider strategy that will ensure that all older people living in the City can access the housing services they need to live active, independent lives.

The review identified a number of key areas that form the basis of service improvement. These are:

- Providing decent, good quality and well designed housing
- Providing a good range of housing related services such as low level support, equipment and adaptations and ensuring existing services are accessible to all regardless of tenure
- Improving the quality of buildings and range of support provided in Sheltered housing
- Joint working; maximising the use of the services delivered by housing, health, social services and voluntary and private organisations to provide efficient and seamless delivery
- Improving services for older people from minority groups. These include people from different ethnic backgrounds, older people who have a history of being homeless and gay, lesbian and bisexual older people.
- Improving information and accessibility of services for older people.
- The full involvement of a diverse range of older people in the planning and running of services.

**Vision, aims and values**

The Council's ambition is that older people are provided with information and real choices that enable them to determine what they need and how they can access services. This in line with the Councils vision to ensure local government makes a positive difference to people's lives.

The aim of the Strategy is to ensure that older people have access to a range of decent and affordable housing and related services that enable an active life and maintain independence.

The values that should underpin the future direction of provision of housing and services for older people can be taken from Quality and Choice. These are to ensure all services are:

- Integrated
- Holistic
- Involving
- Inclusive
- Preventative

# 2. The National and Local Strategic Context.

This strategy is designed to ensure that it meets national government targets and is also in line with both the City Council's overall strategic aims and connects with other local strategies for older people particularly with Health and Social Services. The following is a summary of some of the key national policies concerning services for older people.

## National strategies

- **Quality and Choice for Older Peoples Housing DETR/DOH 2001**. Provides a strategic framework for developing older peoples housing strategy. The report has two key objectives; to ensure older people secure and sustain independence and to support older people to make active and informed choices about their accommodation by providing appropriate housing, services and advice.

- **National Service Framework for Older People DOH 2001.**These are key objectives for the NHS but are relevant to all policy makers working in the area of services for older people. The framework sets eight standards providers need to work towards. It focuses on rooting out age discrimination, providing person centred care, promoting older peoples health and independence and fitting services around peoples needs. It specifically addresses conditions significant for older people; strokes, falls, mental health problems and dementia.

- **Housing for Older People in England, Housing Corporation 2002.**This sets out the Housing Corporations approach to housing and services for older people. It looks at remodelling as an option in the Approved Development Programme (now the national Affordable Housing Programme) and seeks investment that is based on the preferences of local people, meets future demand and fits with local strategies.

- **White Paper – Our health, our say: a new direction for community services. DOH 2006.**The principal recommendations of this report are:

- Individual budgets, with care brokers helping people to assess their own needs and manage their own budgets. These will help overcome some of the practical difficulties of Direct Payments.
- Development of new responsive care models, such as extra care housing and telecare.
- Streamlined assessments between agencies to provide more proactive, preventative services. The paper refers to developing the single assessment process into a common assessment framework providing a personal health and social care plan for all who want one.
- Ensuring community services such as extra care housing, intermediate care services, community equipment, adaptations, intensive support at home and support for carers are used instead of residential care. Also that more centres are used to locate services together in one place.
- Involving and reaching out to those whose needs are greatest and who are often least heard.

## Local plans and strategies

This strategy whilst primarily being concerned with housing services needs to flow from area plans and takes account of and link into other local strategies that affect older people. The key local plans and strategies are:

**The Local Area Agreement 2005-2009**

This has a section on the needs of older people in the area and contains targets for improvements. These are

- Reducing the number of falls in care homes
- Increasing the number of people remaining at home who have intensive support needs. Intensive support is defined as at least 10 contact hours over 6 or more visits per week.
- Health targets relating to reducing inequalities in health, reducing smoking and increasing physical exercise
- Increasing the take up of direct payments
- Greater support and advice for carers
- Expansion of prevention services including home safety, equipment, small repairs and smoke alarms and establishing a countywide referral route for these services.

**The Oxford Plan 2006**

This is the overarching strategy for Oxford City Council. The main priorities for the council are:

- Reduce inequality through social inclusion
- More housing in Oxford, better housing for all
- Improve the quality of our environment
- Reduce and prevent crime and antisocial behaviour
- Provide leadership in tackling climate change and emotional resource management

- Ensure more efficient and improved services
- Be an open ,intelligent and responsive organisation

**The Community Strategy 2005-2008**

This has the following aims:

- A vibrant and inclusive community
- Safer communities
- A better living environment
- Opportunities for life
- Active and healthy communities

**The City Council Housing Strategy 2005-2008**

This has 9 key objectives.

- Increase the supply of affordable housing
- Improve the affordability of housing
- Increase opportunities for choice and mobility within the housing stock
- Improve the condition of housing in Oxford
- Reduce homelessness in Oxford
- Improving housing and support services for all who need to use them
- Improve the environment on estates and in areas of decline
- Develop housing strategy and policy to support service improvements
- Address the financial pressures on the council for housing related services

**The Community Safety Strategy 2005-2009**

Older people are not defined as a priority as the incidence of crime is low for this group. However fear of crime is higher amongst older people and this is a priority within the strategy

**Oxfordshire Supporting People Strategy (2004-2009)**

The general thrust of the local Supporting People strategy for older people is to

- Move away from accommodation based services towards supporting people where they live regardless of tenure.
- To provide accommodation based services for the very frail (e.g. extra care schemes)
- Improve access to services for older people from BME groups
- Better services for frail and mentally infirm older people
- Accommodation of a suitable standard to meet the needs of the frail elderly

- The integration of housing and support services with other community services

It is recognised that Supporting People funding is facing considerable restraints and that movement towards the above objectives is likely to be slower than initially thought.

**Oxfordshire Social and Health Care Business Plan 2004-2007**

The most relevant objectives are:

Objective 1- to help people stay at home through the provision of intensive home support services, supported living services including sheltered housing, day services including transport and assistive technology.

Objective 4 – Reduce delays in hospital discharge and prevent unnecessary hospital admissions through the provision of intermediate care including those with mental health needs, increasing capacity e.g. transitional beds and home support.

Objective 6 –Improve user autonomy and control through increasing Direct Payments and improving user and carer choice within available resources.

**Oxfordshire Commissioning Strategy for Older People in Oxfordshire 2006-2009 (Oxfordshire Social and Community services)**

The strategy takes the 'triangle of care' from ' All our Tomorrows: Inverting the Triangle of Care' a paper produced by the Local Government Association and the Association of Directors of Social Services which looks at pushing resources down form the most acute needs to the wider and more preventative services which could benefit large numbers of older people. The key targets in the strategy are linked to the City's Housing and Older Peoples Housing Strategy in Appendix 2.

## Summary of the Strategic Direction of Services for Older People

The key messages coming from government documents are clear. Services need to be preventative and designed to promote independence and choice, integrated and designed to fit around people's needs rather than those of the service provider. Particular account needs to be taken of specific health needs such as dementia and falls. There are still issues of age discrimination that need to be rooted out and older people need to be fully involved in the planning and delivery of services.

Local strategies highlight the need for quality housing for older people and increasing the capacity of services to care for people at home. This includes prevention services such as equipment and adaptations, alarms and help with repairs as well as intensive care services at home. There is a need for inclusiveness for older people including those in harder to reach groups.

Targets aim to provide increased flexibility in services to meet individual needs and to ensure community services are integrated so a holistic service can be provided. Older people can be empowered through direct payments or individual budgets and have greater choice to make their own decisions about the services they want to obtain.

# 3. The Profile of Older People in Oxford

As well as understanding the strategic context it is important to understand as much as we can about older people in Oxford in order to gain insight into the services that might be required. The following is a gathering of some key statistics.

## Demographics

There are around 18,500 people aged over 65 in Oxford accounting for about 19.9% of the population. This compares with the surrounding districts in Oxfordshire as follows:

| District | 2001 | 2004/5 | 2008/9 | % |
|---|---|---|---|---|
| **Oxford** | 17,464 | 18,302 | 19,420 | 19.9 |
| **Cherwell** | 17,725 | 18,578 | 19,712 | 20.2 |
| **South** | 19,579 | 20,520 | 21,775 | 22.3 |
| **Vale** | 17,825 | 18,683 | 19,823 | 20.3 |
| **West** | 15,307 | 16,024 | 17,022 | 17.4 |
| **Total** | 87,900 | 92,125 | 97,752 | 100 |

Figures taken from SP strategic review based on 2001 census data

The total numbers of people aged over 55 can be broken down into different age bands as follows.

| District | 55-64 years | % | 65-74 years | % | 75-84 years | % | Over 85 | % |
|---|---|---|---|---|---|---|---|---|
| **Oxford** | 10,215 | 16.8 | 8,631 | 18.8 | 6,373 | 20.6 | 2,454 | 21.7 |
| **Cherwell** | 12,836 | 21 | 9,415 | 20.6 | 6,171 | 19.9 | 2,147 | 19 |
| **South** | 14,471 | 23.8 | 10,242 | 22.2 | 6,777 | 21.9 | 2,562 | 22.7 |
| **Vale** | 12,732 | 20.9 | 9,445 | 20.5 | 6,254 | 20.2 | 2,120 | 18.7 |
| **West** | 10,625 | 17.4 | 7,960 | 17.4 | 5,350 | 17.3 | 2,002 | 17.7 |
| **Total** | 60,879 | | 45,693 | | 30,925 | | 11,285 | |

Figures taken from SP strategic review based on 2001 census data

Although Oxford has the lowest percentage of older people apart from West Oxford, these figures show that the percentage of people over 75 is currently second highest in the County.

Population projections for Oxford City to 2021 show a trend of a steady year on year increase across all age bands

| Oxford City | Ages 65-69 | Ages 70-74 | Ages 75-79 | Ages 80-84 | Ages 85+ | All OP |
|---|---|---|---|---|---|---|
| **2000** | 4.5 | 4.2 | 3.9 | 2.5 | 2.9 | 18.0 |
| **2001** | 4.4 | 4.1 | 3.7 | 2.7 | 2.9 | 17.8 |
| **2002** | 4.4 | 4.1 | 3.7 | 2.8 | 2.9 | 17.9 |
| **2003** | 4.5 | 4.0 | 3.6 | 2.9 | 2.8 | 17.8 |
| **2004** | 4.6 | 4.0 | 3.5 | 3.0 | 2.7 | 17.8 |
| **2005** | 4.7 | 4.0 | 3.5 | 2.9 | 2.9 | 18.0 |
| **2006** | 4.6 | 3.9 | 3.5 | 2.8 | 3.0 | 17.8 |
| **2007** | 4.7 | 4.0 | 3.4 | 2.8 | 3.0 | 17.9 |
| **2008** | 4.7 | 4.1 | 3.4 | 2.7 | 3.1 | 18.0 |
| **2009** | 4.8 | 4.1 | 3.4 | 2.7 | 3.1 | 18.1 |
| **2010** | 4.9 | 4.2 | 3.4 | 2.7 | 3.1 | 18.3 |
| **2011** | 5.1 | 4.2 | 3.4 | 2.7 | 3.1 | 18.5 |
| **2012** | 5.4 | 4.2 | 3.4 | 2.7 | 3.1 | 18.8 |
| **2013** | 5.6 | 4.3 | 3.5 | 2.7 | 3.1 | 19.2 |
| **2014** | 5.7 | 4.4 | 3.6 | 2.7 | 3.1 | 19.5 |
| **2015** | 5.9 | 4.5 | 3.6 | 2.7 | 3.1 | 19.8 |
| **2016** | 6.0 | 4.6 | 3.6 | 2.7 | 3.2 | 20.1 |
| **2017** | 5.8 | 4.9 | 3.7 | 2.7 | 3.2 | 20.3 |
| **2018** | 5.8 | 5.1 | 3.7 | 2.8 | 3.2 | 20.6 |
| **2019** | 5.8 | 5.3 | 3.8 | 2.9 | 3.2 | 21.0 |
| **2020** | 5.9 | 5.4 | 3.9 | 2.9 | 3.2 | 21.3 |
| **2021** | 6.0 | 5.5 | 4.1 | 2.9 | 3.3 | 21.8 |

Population in 000s of people of both sexes
Source: Office of National Statistics 1996 - based Subnational population projections. From Laing and Buisson all of Oxfordshire report 2003.

These figures show a temporary dip in the number of older people aged 75 to 84 from 2004/2005 rising again from 2013.

**Other facts about older people in Oxford**

- Age is not necessarily a determinant of need. However DOH guidelines assume that one in four people aged over 85 will have intensive support needs. In Oxford in 2006 this will be around 750 people.

- The gender breakdown between men and women aged over 65 from the 2001 census is 43% male and 57% female.

- 7,526 older people live alone (67% of all older people.) Older people living alone are likely to seek support sooner than those living with partners or family.

**(**From Institute of Public care –Oxfordshire Population needs analysis 2003.).

## Ethnicity

There are slowly increasing numbers of older people from ethnic minority groups. The figures below are for Oxfordshire County and there are no figures available on a district basis. However we do know that most people live in the larger urban areas particularly in Banbury and Oxford. More precise figures will be available once the Oxford City BME strategy is complete.

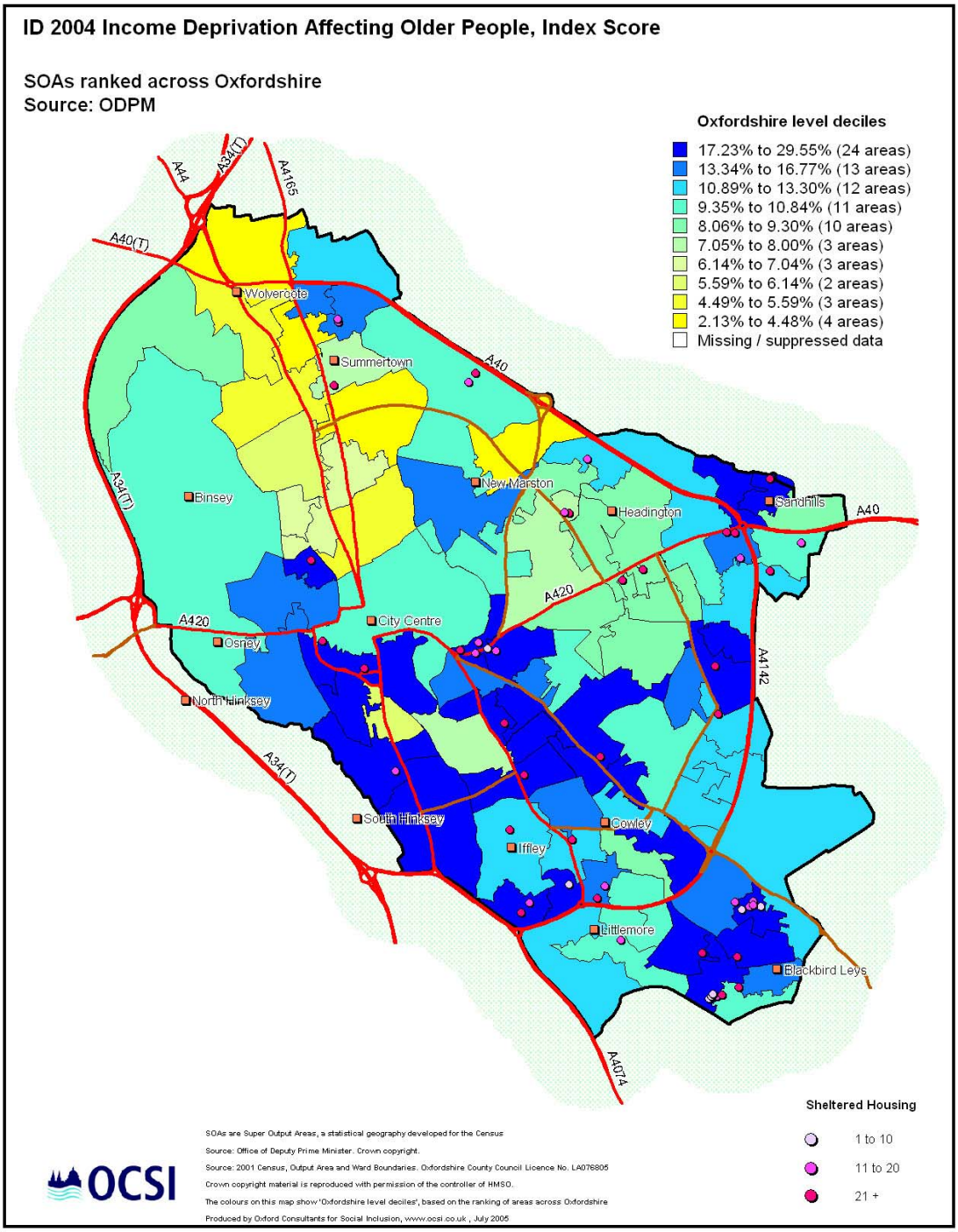
| Ethnicity | All | White British, Irish and other | Asian and mixed Asian | Black and mixed Black | Chinese and mixed Chinese |
|---|---|---|---|---|---|
| **Ages 65-69** | 24,069 | 23,621 | 201 | 151 | 74 |
| **Ages 70-74** | 21,622 | 21,287 | 141 | 113 | 54 |
| **Ages 75-79** | 18,329 | 18,157 | 78 | 52 | 29 |
| **Ages 80-84** | 12,603 | 12,501 | 52 | 27 | 16 |
| **Ages 85+** | 11,277 | 11,190 | 44 | 23 | 20 |
| **Total 65+** | **87,900** | **86,756** | **516** | **366** | **193** |
| **Total population in 2006** | **93,951** | **92,805** | **551** | **390** | **205** |
| **Total Population in 2009** | **97,666** | **96,466** | **577** | **409** | **214** |

Taken from Institute of public care, Oxfordshire population needs analysis older people 2003

Again this shows there will be a steady increase in the population of all groups, although the numbers will remain relatively small.

## Income

The following map of the City shows the considerable diversity in the deprivation levels amongst older people in the different wards of the City. This obviously has implications for ensuring services reach those in most need.




The following table shows that older people tend to have slightly higher savings and equity than other groups but considerably less weekly income**.**

| Financial category | Older person only households | All households |
|---|---|---|
| **Av net weekly income** | 201 | 408 |
| **Av. savings** | 16,982 | 10,587 |
| **Av amount of equity** | 247,372 | 201,39 |

From the City Council Housing Requirements Study 2004

## Health Needs

The links between health and housing are increasingly recognised and housing can have a strong positive or negative effect on a persons well being.

'*Effective housing allied to the right care, support and wider services….can be the springboard that enables older people to remain involved and live their lives to the full.'* (Quality and Choice for Older Peoples Housing DETR)

The major causes of physical ill health in older people are chronic obstructive pulmonary disease, coronary heart disease, strokes and diabetes. Oxfordshire has slightly lower than the national average figures for these conditions but all can result in the need for additional support.

One of the main contributing factors to a person losing independence can be from a fall. Again the link to good housing plus early assessments of need is crucial in limiting falls.

Nationally a third of the population aged over 65 has a fall –this indicates around 30,000 people in Oxfordshire will experience a fall (5,700 in Oxford)

- 57% falls are due to stairs or steps
- 18% falling from one level to a different level (e.g. out of bed)
- 14% are slips and trips
- 75% fall related deaths occur in the home
- 40% care home admissions result from a fall
- In people less than 75 falls are the result of external factors such as uneven pavements or loose carpets
- In people over 75 falls are due to physical factors from aging -reduced mobility, poor balance and medication

(Figures from the joint social services and health strategy for older people 2006)

Mental health issues in older people particularly depression and dementia are likely to impact on the need for more intensive support. Housing related issues can exacerbate depression (for example isolation from the community or ongoing problems with poor accommodation). Appropriate housing related support can enable people suffering from dementia to remain at home for longer.

Depression affects between 10 and 15% of over 65's. About 3.5% suffer depression of such severity that requires it treatment and support from specialist agencies. People are more likely to suffer from depression if they are in poor health, lack social support and suffer problems over a long period of time.

**Projected figures for depression in over 65s in whole of Oxfordshire (with estimate for Oxford City)**

| Population | 2005 | 2006 | 2007 | 2008 | 2009 | 2006 Oxford |
|---|---|---|---|---|---|---|
| Total population 65+ | 91,800 | 92,500 | 93,400 | 95,000 | 96,900 | 18,578 |
| Estimated numbers at 10% rate | 9.180 | 9,250 | 9,340 | 9,500 | 9,690 | 1840 |
| Estimated numbers at 3.5 % rate | 3,213 | 3,237 | 3,269 | 3,325 | 3,391 | 644 |

Taken from joint health and social care strategy 2006

**Predicted numbers with diagnosis of dementia for Oxfordshire (and estimated Oxford City)**

| Age band | 2005 | 2006 | 2007 | 2008 | 2009 | 2006 Oxford |
|---|---|---|---|---|---|---|
| 65-79 | 2,620 | 2,630 | 2,650 | 2,700 | 2,760 | 523 |
| 80+ | 6,580 | 6,700 | 6,800 | 6,830 | 6,950 | 1,333 |
| Total 65+ | 9,190 | 9,333 | 9,450 | 9,530 | 9,710 | 1,856 |

(Based on 1 in 25 people over 65 suffering dementia and I in 4 over 80)

## Housing

By far the greatest numbers of older people are Owner Occupiers. The breakdown of older people by tenure is as follows.

| Tenure | Older person only households | Households with older and younger people | Total Number of households |
|---|---|---|---|
| Owner occupied (no mort) | 7,224 | 7,441 | 14,665 |
| Owner occupied (with mort) | 357 | 15,078 | 15,435 |
| Council | 2,684 | 5,459 | 8143 |
| RSL | 715 | 2,806 | 3521 |
| Private rented sector | 256 | 7901 | 8157 |

Taken from Oxford City Housing Requirements study 2004

Most older people are now owner-occupiers with no mortgage. This clearly links to the income table above which shows older people to be asset rich although often having low incomes.

The number of older people living in rented sheltered housing is low, estimated to be no more than 1500 people (about 10% of all households with older people).

In terms of the quality of their housing 97.5% of older people believe that their housing is suitable for them. Most older people also felt their housing was not in serious disrepair.

| Type of tenure | Serious problem | No serious problem | Number of households | % total households with serious problem |
|---|---|---|---|---|
| **Owner occupier (no mortgage)** | **302** | **6,921** | **7,223** | **4.2%** |
| **Owner occupier (with mortgage)** | **87** | **270** | **357** | **24.4%** |
| **Council** | **269** | **2,415** | **2,684** | **10.0%** |
| **RSL** | **0** | **715** | **715** | **0.0%** |
| **Private rented** | **0** | **256** | **256** | **0.0%** |
| **TOTAL** | **658** | **10,577** | **11,235** | **5.9%** |

(Taken from Oxford City Housing Requirement Study 2004)

Repair problems were only reported amongst the owner- occupiers and council tenants.

However Oxford does have a relatively large percentage of privately rented housing most of which is older property and the results of the Environmental Health private sector survey clearly showed problems of disrepair for older people living in this type of housing. The private sector survey carried out in 2004 showed 30.7% of private sector housing failed to meet at least one element of the decent home standard and that 70.5% of households living in private rented property do not have a decent level of thermal comfort.

The incidence of fuel poverty in Oxford is above the national average at 27%.

## Implications for Services

Whilst the overall numbers of older people in the City are lower that the other districts in Oxfordshire (other than the West) there are relatively more older people at the higher end of the age range pointing to the need for a similar provision of services to other districts.

Although the population of older people from BME groups is likely to remain relatively small there is evidence of high needs amongst this group and of a lack of accessible services. This is dealt with partly in this strategy (see part

10 of this strategy) but further evidence of needs will be gained as part of the BME strategy.

The deprivation level amongst older people varies greatly across different areas of the city, which has implications as to where services should be targeted.

The fact that older people are often ‘asset rich’ as owner occupiers would point to the potential of affordable ownership options for older people choosing specialist accommodation.

The numbers of older people likely to fall is great and therefore liable to have a big impact on intensive services. Housing related services such as visits from sheltered housing and other support staff, and the staying put and small repairs scheme can have a positive effect on reducing falls. Reducing the number of falls is also a key aim in the City’s private sector strategy.

There are significant numbers of older people who suffer from dementia and more services are required to enable these people to remain at home as their condition worsens. Appropriate levels of extra care housing and use of telecare monitoring equipment could contribute to this.

There is evidence that depression is linked to ongoing problems for which the person feels they have no support and to social isolation. Good housing and related services could make a significant impact on the incidence of depression.

Numbers of older people living in Council stock outside of that designated for older people is high leading to further potential for incentive schemes to release accommodation for families. However alternative housing needs to be attractive to make this a real choice for older people.

The higher evidence of fuel poverty in Oxford highlights is likely to be having a significant impact on older people and points to the need for a robust affordable warmth strategy. This is also being addressed through the City’s Private Sector strategy.

# 4. Housing and Related Support Services

## Accommodation

There are around 1100 units of rented sheltered accommodation in Oxford City owned and managed by 9 different providers. Although most provide a degree of low- level support the service varies considerably from provider to provider. This is currently being addressed by Supporting People who want to commission a standardised service.

There are very few opportunities to purchase Sheltered Housing either outright or through some form of shared ownership. Given the level of owner occupation in the City this would appear to be a gap in the market.

The waiting list for sheltered housing is currently around 400 (with some additional applicants on waiting lists held by individual providers.) However there is evidence that most of the demand is for higher quality accommodation leaving some of the older style accommodation (for example bed sitting room accommodation and housing in unpopular locations) difficult to let.

There are currently no extra care schemes within the City. One 20 bed scheme is being developed by Social and Health Care. The need for extra care has been promoted by Supporting People particularly in the light of residential home closures. The Supporting People strategy wants to ensure that sheltered housing can provide services for the frailest older people so ensuring people can remain in their own homes. To achieve this accommodation must be of a high design standard suitable for a range of disabilities and services must be able to be delivered efficiently and effectively.

Apart from this specialist accommodation there are number of rented units throughout the City let only to people aged over 55. These often have a community alarm service attached to the property. There are around 300 units of RSL accommodation that is largely purpose built. The City Council is planning to reduce the amount of its own designated housing following the Older Peoples Services review and to only retain units to be let solely to older people that are of good quality and design.

At the higher end of the care spectrum, residential homes are being replaced with nursing homes and a few extra care bed spaces but there is still an insufficient supply, particularly for people with mental health needs. The loss of residential care beds in the City has fallen from 573 to 521 in the past 3 years. Social and Community services are currently tendering for new provision particularly for mental health needs.

## Housing Related Support Services

The key services are as follows:

### Oxford City Council Emergency Alarm Control Centre

This provides 24 hour emergency cover for most of the sheltered housing schemes in the City.

In addition it also provides emergency alarm monitoring to 1500 individuals with alarms. This may include a personal warden response to an alarm call or contact with a key holder or emergency service provider depending on the type of contract.

### Sheltered Housing Support Workers

Wardens, scheme managers and sheltered housing officers provide a service to their own organisations sheltered housing residents. The services do vary from provider to provider with some doing more community based work than others.

**Staying Put Scheme (Home Improvement Agency)**

Staying Put is a joint venture between the City Council, Anchor Housing Association and some funding direct from the government. The agency delivers a range of services including advice and advocacy, financial advice, and technical support. They link into the provision of equipment and adaptations. Other services include:

- A rapid response hospital discharge with the potential to provide a comprehensive assessment of needs (e.g. falls and benefit advice)
- A home security service fitting locks and external lighting
- Garden repairs and minor decorations and the service can refer people for garden clearing
- Energy efficiency advice including working in partnership with the Councils energy efficiency staff and fitting low energy light bulbs free for those on low incomes.

The Oxford branch is maintaining services following the closure of the shop front premises. The service also operates a small repairs scheme.

The Supporting People Strategy for Home Improvement Agencies is to merge the services across the County.

## Floating Support services

In addition to warden services provided by the control centre a number of more vulnerable older people are supported by various agencies including the Elmore team and Connection. This support is generally targeted at older people with more complex needs such as problematic alcohol use or a history of homelessness.

**What conclusions can we draw from the supply of services against the needs of older people in Oxfordshire?**

The most obvious gap is in accommodation and support for frailer older people, particularly those suffering from dementia. The closures of residential homes together with the strategic aim to keep people living independently both indicate a need for extra care sheltered housing and a range of other options to enable people to stay at home for longer.

The high number of owner occupiers and relatively few opportunities to purchase would indicate a need to encourage more home ownership opportunities for older people.

The sheltered housing support service could be used more widely as a key prevention and advice service if older people outside of sheltered housing could access it. There is a relatively high level of provision serving only a small number of older people living in sheltered housing. The service also has greater potential to offer scheme-based activities that could help reduce the loneliness and isolation of some older people.

There is an indication that the community alarm service could be used more widely particularly with the introduction of more sophisticated telecare equipment. This could help the home support of older people in the early stages of dementia.

There is still evidence that services are not sufficiently relevant to older people from harder to reach groups particularly those from BME communities and more work needs to be undertaken to see how services could be adapted or whether more specifically targeted services are required.

There is a still a gap for practical low level support services such as gardening, cleaning, shopping etc. particularly during periods of ill heath.

# 5. What do older people want?

## Local Consultations

There has been a great deal of national and local consultation with older people in recent years. Some examples of recent local consultation include:

**The Supporting People Strategic Review of Older Peoples services.** A sample of residents of and applicants for sheltered housing were sent a survey questionnaire. The returns showed

- Sheltered housing remains a popular choice. 89% of respondents were satisfied or very satisfied with their service, only 1.4% were dissatisfied.
- For applicants the most important reasons for moving to sheltered housing were on site support, wanting to live with other older people and needing housing suitable for their mobility needs
- Residents thought the most important benefits offered in sheltered housing were safety and security and support.
- Most applicants want a one or two bedroom bungalow or flat. Only 15% would even consider a bedsit.

### Consultation with the Age Concern Oxfordshire Older People's Forum

Age Concern Oxfordshire held a consultation meeting, which was used as part of the review. Attendees were asked what their hopes were for the future as they aged. Many of the things wished for were modest but highlighted gaps in the current service. These included

- Good quality accommodation
- A feeling of safety and security
- To make sure carers needs are looked after
- Low level support such as repairs, gardening, cleaning and opportunities for companionship
- Access to information to be able to make informed choices

**The Joint Health and Social Care Strategy Consultation**

Key points from older people were

- To be involved in decision making
- For older people to be viewed positively and not discriminated against due to age
- To have opportunities for a full life
- To have information and choice about services
- To reduce isolation that so often affects older people
- To know that support is available at a time of crisis

**Consultation meeting on Older People's Housing Strategy**

A meeting involving staff from relevant agencies and older people was held to gain information for this strategy. The three key themes that emerged was the need for more access to information and advice and for clear referral systems between agencies. People felt the main priority for their accommodation needs was location; being close to transport and amenities and living within an inclusive and safe community were critical to people feeling their home would remain suitable as they age.

Planning of services needs to account for the expectations of future generations of older people as well as today's. A national consultation carried out in 2005 explored this.

## The 20/20 vision project

This was run by a consortium of agencies involved in providing services to older people and consultation was carried out with older people, younger people and service providers to establish how services should be developed to meet the needs of older people in 2020. Recommendations included

- Upgrading sheltered housing and using it as a 'hub' for the local community where people could access information, activities and care.
- Ensuring provision is made to purchase as well as rent sheltered and extra care housing
- Making sure that support staff are playing the most effective role in overall service provision
- Increasing accessibility for telecare
- More individual budgets and direct payments
- Better information and advice through one stop shops and advertising targeting hard to reach communities

## Key messages

Consultations with older people generally confirm the direction of local and national strategies is correct. Older people want good quality housing that is safe and secure. They want opportunities to live a fulfilling life as part of the community whilst at the same time knowing that support is available when

they need it. They want the information that enables them to maintain control over their needs and to be involved in how services are planned and delivered.

Having collected information about the strategic direction, the profile of older people in Oxford, current service provision and the views of older people themselves a number of areas have emerged as fundamental and therefore priorities for improving services for older people in the city. The following sections explore these areas of service in more detail.

# 6. Providing Quality Housing

Good quality housing is crucial if older people are going to have the choice to remain at home and lead healthy and active lives within their communities.

Housing needs to be well maintained, able to be adapted for mobility needs, warm, affordable, in a location close to amenities and transport and with access to other support services when they are needed.

It is estimated that older people spend between 70 and 90 % of their time in their home (ODPM report 'Planning for Mixed Communities'). This highlights the impact housing can have on a person's mental and physical well being.

Poor housing can exacerbate health problems in older people. For example cold homes can exacerbate existing respiratory and pulmonary diseases amongst older people.

Many older people are asset rich but income poor and some need assistance in accessing grants and equity release schemes in order to maintain their homes.

Suitable housing does not just depend on the quality of the individual dwelling but also on being located in a safe and thriving community

## Social Housing

The Council has a target to ensure all properties in the social rented sector are brought up to decent homes standards by 2010.A decent home is one which is wind and weather tight, warm and has modern facilities. 49% of Council Housing was deemed to meet decent homes standards in 2005. It now has a planned maintenance programme to ensure all properties meet the standard by 2010. The Registered Social Landlord stock mostly meets decent homes standards already. The Council is committed to ensuring houses are adapted for accessibility if it is discovered residents require this whilst the planned works are carried out.

The council has just carried out a review of its housing for older people and is in the process of appraising how to best improve the quality of its sheltered housing stock and bring this up to an agreed minimum design standard. This is dealt with more fully in part 8 of this strategy. It has also started a process

of appraising all its housing designated for older people to assess its suitability for this client group.

## Private Sector Housing

The government has brought in a new way of assessing private rented stock condition. The Housing Health and Safety rating focuses on the link between housing and health and is therefore of particular relevance to older people. The council is developing a private sector strategy to improve conditions in the private sector and much of the work is focussing on older peoples households. The priorities for this strategy include energy efficiency, addressing fuel poverty and the prevention of falls. The council has set up a private sector housing group to deliver and monitor improvements in the sector. Actions from this strategy include:

- Securing long term funding of posts to improve the energy efficiency of dwellings
- Research vulnerable households through the use of an energy survey working with partner agencies and other organisations
- Producing a health and housing advice guide
- Improving the take up of government grants for energy efficiency and maintaining properties.

There is a range of grants available to help owner-occupiers on low incomes improve their properties. These include essential repairs grants and The House Proud scheme (assistance with arranging an equity loan) and Disabled Facilities Grants.

## New Build Housing

All new build affordable housing is commissioned to Lifetime Homes standards and so contributes to the ability for older people to remain at home as long as they choose. All new build also conforms to Housing Corporation Eco homes standards, which provide affordable warmth and other low energy costs.

There are few new developments planned for older people in the foreseeable future. Those that are planned are replacements of existing schemes. The Council is currently involved in a regeneration scheme in Rose Hill, which involves replacing two sheltered blocks with a new build scheme. Older people have been involved in planning and designing the scheme but officers report there has not been a holistic approach to looking at older peoples services on the estate and such an approach may have increased opportunities for improving services overall.

## Safe Environments, Safe Homes and Transport

Safe Environments

Older people want to feel safe and connected with the communities in which they are living. Although older people are not at risk of violent crime as much as other groups media interest in crimes against older people can have the effect of creating fear. Older people are more at risk from distraction burglary.

A number of schemes are in place, which have a particular impact on older people's safety and these show good partnership working with the police and other local authority departments. These include:

- Neighbourhood Watch –this is particularly strong in the City even in some of the more deprived areas.
- Target hardening. This scheme enables victims of burglary to have locks and other security measures fitted in their property immediately following a crime. It has a dedicated police officer responsible for the scheme who has built up the knowledge to help more vulnerable older people access the services they might need.
- A new scheme is being developed to address the problem of cold calling and rogue traders, which will target the outer edges of the city and more vulnerable households where this issue is a particular problem.

The council employs street wardens who work alongside the police community support officers to provide a presence in the community. As such they provide a resource for community development work in more deprived areas, which could include calling on and assessing some of the most isolated older people who may be missed by other services. This is an area where their role could be developed. There is a need for further ongoing multi agency working on a district and countywide basis to continue to ensure resources are used effectively across all agencies to provide safe and inclusive communities.

Safe Homes

In terms of safety in the home, one of the biggest risks is fire. Although older people are not at as great a risk as younger people they are more likely to be killed if fire does break out. . Insert what we do currently.

Falls are another key risk. Risk of falls is now categorised as a category one hazard in the new Housing Health and Safety Rating System and therefore Councils must consider action if such a hazard is identified.

Transport

The council recognises that transport is a vital component for older people to live independent lives. The City is well served by public transport and the City Council has a concessionary fares scheme for people over 60 or with a disability. The County Council controls bus services but city workers do advocate for older people if a bus service is closed.

It is particularly important when planning older peoples housing to ensure good transport links and this is done as part of the planning and development process.

Parking is a major problem in Oxford. The County Council runs a blue badge scheme which can give access to having a disabled parking bay painted outside of someone's home. Nonetheless older people have raised issues of not being able to park close to home or difficulties in carers being able to park. Again the City can only really influence this through planning to ensure adequate parking is allowed for when developing housing.

| **Key Strategic Actions** |
| --- |
| ➢ **Continue to use the decent homes programme as an opportunity to improve the accessibility of council and other social rented housing.**<br>➢ **Carry out the recommendations of the Sheltered Housing Review to ensure only suitable accommodation is designated as older peoples housing.**<br>➢ **Carry out the strategic recommendations from the Private Rented Sector Strategy to improve the housing of older people**<br>➢ **Support safety initiatives likely to have a positive impact on older people through funding and by attending multi agency groups.**<br>➢ **If future regeneration projects are undertaken set up specific client forums so that services affecting the group can be addressed more holistically.** |

# 7. Housing Related Support Services

As well as the provision of good quality housing the council is either responsible for or provides funding to other related support services. These are explained and assessed in this section. The staff who provide support in sheltered housing schemes are part of this range of services. This service is considered in part 8 of this strategy.

## Community Alarms and Telecare

Community alarms and telecare equipment can provide additional security for older people wherever they choose to live. They are also relatively cheap to provide. As such they offer a low cost, flexible and efficient service to older people. Telecare can help to support a person suffering form dementia in their own home through monitoring systems and could provide an increased level of services for this group without the need to be moved to a residential or nursing care setting.

Community alarms are viewed by the Supporting People commissioners as a cost effective way of providing services and the Supporting People strategy seeks to increase the usage of these alarms across all tenures. There is increasing access and funding for new telecare technology and a pilot project is currently being run by Social and Health Care with monitoring being provided from the City Council Emergency Control Centre.

There is a need to further identify ways to increase the range of new technology for older people including those suffering form dementia and other forms of mental illness.

The Councils community alarm service should look to expand its services to all who need them

## Staying Put

The scheme continues to offer a good responsive service despite a funding crisis due to the lack of certainty at this point about the Supporting People contract for the service. The agency is clearly well placed to offer a whole range of advice and practical services to older people, particularly those living in the private sector. This could include expanding the range of preventative work currently carried out.
Home Improvement Agencies are a model of partnership working and contribute to strategies for older people in housing, community care, crime and safety, energy efficiency and fuel poverty, health and neighbourhood renewal.
It is crucial that this service is maintained and developed. It plays a critical role in helping older people to maintain independence in their chosen home

## Equipment and Adaptations

Demand for disabled facilities grants increases year by year and the number carried out each year always outstrips the assumptions. However in general the service works well as a responsive service. In the year 2006/07 council tenants who previously would have accessed adaptations through the Councils Oxford Building Solutions will be treated in the same way as other older people and be routed through the Disabled Facility Grant system. It is right that the service is ‘tenure blind’ but the impact on funding needs to be monitored and appropriate use should be made of Councils capital budgets.

The service does work very responsively which can make it difficult to plan and budget. More could be done to involve older people in the planning of services.

It is important that the City has access to a disabled housing register whereby disabled people looking for housing can be matched to similar properties. This would ensure adaptations are reused and can be used for both affordable and private sector housing.

## Floating Support Services

These services are primarily provided by two agencies (Connection and Elmore teams) who receive some funding from housing providers. A number of their clients are older and they provide important support to the most vulnerable in maintaining a place to live. This service is particularly important when looking at the needs of older homeless people.

| Key Strategic Actions |
| --- |
| ➢ **Continue to look for funding opportunities to develop the community alarm service**<br>➢ **Continue to seek funding from existing and new sources for the Staying Put scheme**<br>➢ **Set up or join an existing disabled property register.** |

# 8. Sheltered Housing

Sheltered housing is designed and built with older people in mind, is connected to an emergency alarm system, and has the services of support staff (scheme manager or warden).

Older people have higher expectations about the size and standard of accommodation they want and need as compared to the 1960s and 1970s when many schemes were built.

National and local strategies for older people make clear the need for sheltered housing to change. The Oxfordshire Supporting People strategy is clear about the need to move away from accommodation based services towards floating support that can be accessed on the basis of need and regardless of tenure. At the same time the design and standard of accommodation needs to be improved to enable people to stay in their housing as they age.

## Improving the Quality of Sheltered Housing buildings in the City

There are around 1,100 units of rented sheltered accommodation in the City managed by 9 different providers, the largest of which are Oxford City Council and Oxford Citizens Housing Association. Schemes are found in most areas of the city.

There is comparatively little sheltered housing for sale. There are currently about 200 units of leasehold sheltered housing in the City and so very little is on the market at any one time. Furthermore what is available may still be out of the price range of many. There appears to be a gap in the market here since most older people are owner-occupiers and may be able to afford to buy on some basis. Providers may wish to offer shared ownership options for example. This should be considered as part of the options appraisal programme for the City's sheltered stock.

The quality of the rented housing varies greatly. 296 units are bedsits of which 25 share facilities. Out of a total of 37 schemes only 18 have lifts covering all areas of the building although a further 15 have lifts serving parts of the scheme. Most of the accommodation dates from the 1960s although some blocks have been refurbished. There are some newer schemes with a greater range of facilities and better disabled access generally. Both Oxford City

Council and some of the partner RSLs are in the process of trying to improve the quality of their stock by either redeveloping or refurbishing schemes.

Supporting People will eventually take the standard of accommodation into account when commissioning services. This together with the need to ensure their accommodation continues to be competitive with that of other providers means providers need to work swiftly to improve their stock.

## Improving the Services in Sheltered Housing to meet the needs of Older People

Two main areas were identified by the older people's review to ensure sheltered housing was better able to serve all sections of the community.

1. The community support model.

The way support services are currently contracted through Supporting People means it is difficult for providers to be flexible about who they support. Supporting People are keen to change this to allow providers to use any capacity within their support service to support those who need this type of support within the local community.

This would require an agreed assessment process and eligibility criteria to define the level of need. It will only work effectively if providers work together to make best use of their current staffing and other resources. However such remodelling would ensure that older people could benefit from this service regardless of their type of housing and would go along way to providing extra choice for older people who need some additional support to maintain their independence.

It will be almost impossible to move to this model without changes in Supporting People funding.

2. Sheltered housing as a resource centre for older people.

Good quality sheltered housing has a range of facilities including:

- Common room
- Communal kitchen
- Assisted bathing
- Hairdressing or treatment room.

Many sheltered housing schemes run various activities, which may or may not be open to the local community. Activities include

- Exercise classes and other health related activities
- Community education
- Information events
- Social activities and day centres

Scheme staff are in an ideal position to reach out and involve older people not living at the scheme and offer real opportunities for support and involvement. Providers need to take a joint approach where they have schemes in close proximity so that activities can be shared and not duplicated.

Schemes could be used to provide a variety of health related activities such as older people's health clinics, flu jab centres etc.

### Meeting the needs of Frailer Older People

Good quality sheltered housing provides preventative support giving older people access to information and services and a feeling of security that there is someone there to help. When care is provided it is brought in from a variety of agencies as would happen in any other housing. However when a person's care needs become more intensive this can be difficult to manage. Some of these issues (particularly a need for 24 hour monitoring) may be addressed by telecare in future and the newest redevelopments are incorporating the basic wiring for telecare equipment into the schemes.

A higher degree of care along with efficiency savings can be made through the extra care model of housing. There is currently only one extra care scheme being provided in the City. However providers need to look carefully at the type of model they can provide as ongoing revenue funding for the projects can be risky. This option will be considered as the City sheltered schemes go through the options appraisal process.

| **Key Strategic Actions** |
| --- |
| ➢ **Carry out the options appraisals of Sheltered Housing so that a costed plan to improve scheme quality is implemented.**<br>➢ **Work with Supporting People on moving towards a community model for the sheltered housing support service as and when funding allows**<br>➢ **Increase the number of community activities on sheltered sites across the City**<br>➢ **Set up a multi agency group to investigate models and funding for the provision of extra care schemes in the City and ensure this option is considered as part of the options appraisal process.**<br>➢ **Ensure affordable home ownership options are considered when looking at options for existing schemes or new development opportunities.** |

## 9. Joint Working with Other Services

To maintain their independence and good quality of life older people need access to affordable, well-maintained and adaptable housing. They also need to be able to access a variety of services including transport, amenities such as shops and leisure and learning activities as well as health and personal

care services in times of illness. They also need to feel safe and secure within their home and neighbourhood.

Older people are therefore affected by the raft of strategies in place by local authority services, as are all sectors of the population. However within this older people need to be seen as having additional concerns and their needs should therefore be addressed specifically within these strategies.

The need for better joined up working between health services, social services and housing has been highlighted nationally and locally. To be effective services need to link together at a strategic level. This has been harder in Oxford due to it being a two-tier authority. This strategy therefore seeks to make definite links with the Joint Health and Social care strategy for older people and to have some shared targets.

Consultation with staff from the Oxford PCT and Social and community services has highlighted a lack of knowledge about the full range of services for older people across the different departments.

## What is happening now?

There is some evidence of good joint working between services. This includes:

Supporting People programme: This is now well established with an agreed strategic direction for services, which involves all relevant agencies.

The SHOP group; The Strategic Housing in Oxford Partnership brings together key staff from the PCT, social services, the City Council, Registered Social Landlords and other agencies involved in housing to try and ensure strategies are comprehensive and linked. The group covers a wide remit, which includes older peoples housing.

The home from hospital scheme; Units in sheltered housing schemes being used to provide short term adapted accommodation for people ready to leave hospital but awaiting adaptations to their permanent home.

Single assessment process: This has now been produced with the involvement of a housing representative and includes questions to identify housing issues.

A telecare pilot is planned using the city emergency control centre as the monitoring agent. This pilot will focus on providing equipment to monitor people with dementia.

## What more needs to happen?

Joint working is sporadic and tends to be focussed around specific projects. Because of a lack of general understanding of what is provided by each service a joint mapping exercise should be undertaken to look at areas of possible duplication or where staffing roles could be changed to provide more effective, efficient and holistic services.

Once this is done a joint action plan can be developed to ensure services are joined up as far as possible within current structures.

The older people's services review made a number of suggestions for increasing knowledge of other services and professional roles. These included increasing opportunities for middle managers involved in providing services to older people to meet together to discuss improvements in cross agency processes and using sheltered housing facilities more effectively for health and community activities. Enhanced joint working at a strategic level will help promote opportunities for greater joint working at all levels.

| **Key Strategic priorities** |
| --- |
| ➢ **Carry out a joint mapping exercise with Health and Social services as a first stage to develop knowledge of total service provision and identify opportunities for joint working.**<br>➢ **Encourage interagency meetings at all strategic and operational levels.** |

# 10. Improving Services for Older People with Diverse needs

## Older People from Black and Ethnic Minority Communities

Although the numbers of older people from BME groups are small there is evidence to suggest there are high needs amongst this group and that access to services may be more difficult than for other groups. National statistics suggest that some ethnic groups live in significantly worse housing. For example in a 2001 Age Concern Survey highlighted that older people from Bangladeshi and Pakistani communities live in the worst housing in terms of overcrowding, lack of adaptations, disrepair, and poor health and safety. Older Black Caribbean's are more likely to reside in Local authority owned accommodation.

The Older People's Service review carried out some consultation with older people from Asian and Black Caribbean backgrounds which highlighted the lack of clear information about services, barriers due to language and a lack of services meeting cultural and religious needs. However there is still a need for wider consultation to establish the extent and range of the needs of this group.

What is currently available?

There is one sheltered housing scheme in Oxford specifically designed for elders from BME groups. However since the scheme first opened the numbers from minority groups has dwindled and the schemes lettings policy is not clearly targeting vacancies for take up by these groups. The scheme needs to have a clear allocation policy that protects it as a specialist provision as far as is possible within legal guidelines and the running and activities of the scheme need to be more firmly linked to the communities that it serves.

The landlord of this scheme (Oxford Citizens Housing Association) is seeking to form a steering group for the project and is working with Oxford City Council on the allocations policy.

There are two lunch clubs operational in Oxford for older people from the Afro Caribbean and Asian communities (both groups are open to older people from all communities but services are culturally specific).

Age Concern Oxfordshire has established a forum for older people from BME groups to increase involvement in policy decisions across all areas. This group could contribute towards a greater understanding of housing and support needs.

Some housing providers also seek to involve their residents from BME groups via specific forums.

Part of the problem in making services culturally specific stems from a profile of predominantly white scheme support staff within sheltered housing services. This needs to be actively addressed. In the shorter term all front line staff working in housing related support service should have training in the needs of older people from different faith and ethnic backgrounds.

Opportunities to involve older people in service planning should ensure that there is diverse representation and special attention should be given to inviting representation form the main ethnic groups.

**Key Strategic Actions**

- **Use information gathered as part of the BME housing strategy and the existing consultation groups to formulate a clearer picture of the needs of this group**
- **Ensure the existing specific service provision at John Kallie court is maintained as a scheme for ethnic elders as far as possible within legal guidelines and that representation from the main ethnic communities are involved in the running of the scheme**
- **Ensure frontline staff are fully trained in cultural and religious diversity and that action is taken to increase staff diversity particularly within sheltered housing services.**

## Older Homeless People

There are currently approximately 138 people aged 45 or over who are homeless; either on the street or living in short term hostel or other temporary housing. Because of the problems of earlier ageing caused by the stresses of an unsettled way of life and through alcohol and drug misuse many of these people may already be showing symptoms associated with ageing. 44 of these people are aged over 55 and nine are aged over 65. Of these 44, 35 have identified drug, alcohol or mental health issues.

Although numbers are relatively small this is the most acute end of a spectrum of older people who have similar issues. Hostels report that the services they provide become increasingly unsuitable as people age and they are less able to cope with sharing facilities with younger and potentially more aggressive people. Referrals are made to re –house clients in sheltered housing. This has worked in some cases where the environment suits an individual and a support package often involving a floating support services is given in addition to the scheme support staff. However too often the tenancy breaks down resulting in the older person either abandoning or being evicted from their home.

Realistically many older people are not able to make significant changes to their substance misuse patterns and there is a lack of provision for drinkers with just a handful of bedspaces at Lucy Faithful House.

More research and consultation needs to be carried out with this group to identify the most appropriate ways to support them. Some work has recently begun in conjunction with The National Coalition for Older Homelessness to identify the needs and wishes of this client group and this needs to be followed up with an action plan for improving opportunities for appropriate accommodation and support.

**Key Strategic Actions**

- **Carry out the audit of older homeless people and hold focus groups with users in order to identify service provision gaps**
- **Instigate a multi agency project group to address identified service gaps**

## Gay, Lesbian and Bisexual Older People

There is still little current research on the needs of gay and lesbian older people. However as it becomes more common for people to be open about their sexuality this group their needs will become more visible. Furthermore the Civil Partnership Act 2004 gives gay and lesbian couples the right to make a civil partnership giving the same rights and duties in law as for marriage, for instance the right to inherit a tenancy. It is estimated that about 6 % of the population is gay or lesbian.

Age Concerns policy paper ' Issues facing Older Lesbians, Gay Men and Bisexuals' (2002) identified 4 key issues:

**Discrimination:** Although the Civil Partnerships Act has helped end legal discrimination there is still discrimination in the attitudes and lack of understanding about sexuality within care processes.
**Access:** There are few targeted services for gay and lesbian older people and little open acknowledgement of need in mainstream services
**Social isolation:** Social isolation is an increasing risk as we age and may be worse for gay and lesbian older people who face the further risk of homophobia and abuse.

**Consultation and involvement** There is little evidence of specific consultation with this group by public policy makers.

> *'In the [sheltered] accommodation I live in, nobody knows I am a lesbian. They mustn't. It is so gossipy and they pick on anybody who is different. It makes me very lonely.'*
>
> Jean (66), East Midlands' (from a report by Polari)

Age Concern Oxfordshire have two workers who are taking a lead in promoting the needs and wishes of gay and lesbian older people and has developed training courses for staff in this area. They have talked to older people who feel worried about accessing sheltered or residential services or about receiving care at home because they believe that their lifestyle will be criticised or ridiculed.

Age Concern Oxfordshire believe that staff training and publicity literature that is clearly inclusive will start to make services more accessible to all groups.

**Key Strategic Actions**

- **Ensure all sheltered housing staff attend training on working with older gay and lesbian people**
- **When reviewing literature and publicity about housing related support services ensure this promotes inclusiveness.**

# 11. Improving Information and Advice

## Current Services

One of the common themes emerging from all consultation sessions is the need for improved information about services for older people. In fact this often becomes the key issue when looking at possible service improvements. Information about services can be fragmented and confusing.

People need advice about a wide range of housing, support and related issues such as homelessness, debt, benefits, fuel poverty, maintaining their home, safety and security, equipment and housing options.

People have needs that may require solutions from a variety of agencies and it can it be difficult to know where to go to get advice that meets all their needs. It is only when people have good information that they can make independent choices about what they want. We need to make sure that information about services is easily available to all regardless of where they are living.

Some older people face additional obstacles in getting advice and information due to sight, hearing and mobility problems or because of isolation and depression meaning they need extra support to seek out help. People from certain ethnic minority groups may also face language barriers and may perceive information is not relevant to their needs. It is important not only to

provide the advice but also to try and reach these more vulnerable groups. Older people can seek advice and information from a number of agencies:

- Information leaflets such as Age Concern and City Council information
- Age Concern information line
- Their landlord
- Advice centres such as Barton Information Centre, Blackbird Leys advice centre and the Citizens Advice Bureau.
- Older peoples centres such as the Clockhouse and day centres and lunch clubs.
- Housing Benefit offices
- National advice lines and internet sites such as the Accommodation Counsel and Help the Aged

Sources of information for older people include family, friends, carers, and professionals with whom they have regular contact e.g. home care staff, sheltered housing staff and day care workers. In addition older people may be assessed at any point by a number of workers who could be in a position to offer advice and information on a range of services. This includes housing benefit assessors, grant assessors, health visitors, care managers, local authority and RSL housing officers. These staff need to know where they can easily find information about what is available and how to refer a person to the most appropriate service.

Opportunities are often missed for professionals to give people a full range of advice when they assess for one service. For example Environmental Health officers talk about older people they discover living in poor housing conditions who could have been helped by grants, staying put services etc. These people may well have been visited by carers, housing benefit staff etc but not given information about other services they need.

The introduction of Choice Based Lettings provides an opportunity to change the way people are advised about their housing options when they apply for housing. Information packs for older people are going to be created with the introduction of the common housing register and include a range of solutions for people to consider when looking at their own housing needs.

| **Key Strategic Actions** |
| --- |
| ➢ **Create a 'one stop' information system for older people and professionals that gives comprehensive advice about all available services for older people across Oxfordshire. This could be a one stop shop, an Internet directory or through an older peoples information co-ordinator post.**<br>➢ **Set up joint training for staff on major issues affecting older people for example grants, benefits, and access to social and health care services. Teams could consider having an older people's 'champion' who would be trained in the range of older people's services and could act as a resource within their own teams.** |

- **Involve older people directly in projects to improve information and consider the needs of all groups particularly those disadvantaged by health, income or language difficulties.**

# 12. Involving Older people

Older people have a huge amount to offer their communities particularly in terms of time and experience. Older people should not be seen as mere recipients of services but as active citizens who are well able to say what they want and how this should be provided.

Ageism in the provision of services needs to be recognised. One way to challenge ageist attitudes within services is to ensure the involvement of older people.

There are also barriers for older people wanting to get involved in the planning and delivery of services. Some of these are practical such as transport or disability needs but some are about a lack of understanding of the issues and a lack of confidence in the ability to change things.

## The Current Service

There are currently a number of ways older people can get involved in the way housing and housing related services are delivered.

- Residents of sheltered housing, or general needs social housing can get involved through their own organisations tenant participation structures.
- Age Concern Oxfordshire run older peoples panels and forums to look at service changes
- Social services and Health have consultation panels e.g. The Patient and Public Information forum
- Speakers at various groups –Oxford Pensioners forum for example.
- Special event days for older people
- Membership of steering groups for major policy changes –for example the Stock Options Appraisal Group.

However these groups only involve some older people and may exclude the most vulnerable.

Services need to ensure they promote an empowering rather than dependency culture. For example the sheltered housing service can make the warden or scheme manager responsible for everything that happens on the scheme or can use the service to empower residents to support each other, run social activities, set up a residents association etc. Services can be evaluated using the following model

| **Stifling** | **Enabling** |
|---|---|
| 'Heavy handed' support where everything is done for someone | Information and advice services<br>Extra care housing |

| | |
|---|---|
| Residential care? | Timely staying put services |
| **Rescuing**<br><br>Unplanned admission into hospital care? | **Out on a Limb**<br><br>Loneliness and isolation at home?<br>Lack of support for carers |

| **Key Strategic Actions** |
|---|
| ➢ Older people should be considered as specific client group when developing strategies across all areas. If changes are likely to impact particularly on older people they should be consulted as a group.<br>➢ Service providers should evaluate their service against the enabling model and if necessary make adjustments to ensure their service does enable people as far as possible. |

## 13. How will this happen and how will the strategy be monitored?

The action plan at appendix one lays out the key actions from the identified strategic priorities and lists the officers responsible for carrying out the actions. Some of these will be relatively quick. Others are much more long term and will keep services in the right direction rather than be able to solve bigger problems in the short term. Progress against this plan will be monitored by SHOP (Strategic Housing in Oxfordshire Partnership) and through the Councils Housing Scrutiny Committee. The Council will seek out views of older people if changes are made so that we can evaluate the effectiveness of the actions we have taken.

## APPENDIX 1

## Summary of Key Objectives to be Achieved and Action Plan (staff key at end of table)

| Service Provision | Desired Outcome | Actions Needed | Agencies/ Lead officer | Timescale |
|---|---|---|---|---|
| **Quality Housing** | | | | |
| Public Sector Housing | All Sheltered Housing owned by the City Council to be brought up to minimum standard by 2012. At least half of schemes to be brought up to standard by 2009. | Carry out the full options appraisals as detailed in the Older Peoples review report.<br><br>Plan and budget work programme | Neighbourhood Renewal (VJ and SN)<br>Housing Services (GS)<br>Oxford Building Solutions (SP) | 2012 |
| | All housing to be brought up to decent homes standards by 2010 | Continue to monitor and review decent home standards plans<br><br>Continue to ensure accessibility issues are dealt with as work is carried out as part of the programme. | Oxford Building Solutions (CP) | 2010 |
| | Housing designated for older people is suitable for the group and let only to those over 55 years. | Carry out appraisals on designated elderly housing in the City to de-designate unsuitable properties.<br>Raise minimum age limit for designated elderly housing to 55 | Housing Services (GS/SP)<br><br>Housing Needs (MU) | First stage by 2007<br><br>September 2006 as part of allocations review |
| | Regeneration projects include a | Include consultation with older | Neighbourhood | Ongoing |

| | | | | |
|---|---|---|---|---|
| | holistic appraisal of the needs of older people in the locality | people as a specific client group when investing in communities. | Renewal (VJ) | dependent on resources |
| Private Sector Housing | Improved safety and warmth of older people living in private sector housing | Carry out all actions as identified in the private sector strategy as they relate to older people | Private sector group (JC) | |
| Safety | A range of safety initiatives that will have an impact on older peoples sense of safety | Attend multi agency groups dealing with community safety<br><br>Look at the role of street wardens in the support of older people in areas of deprivation. | Community Safety (RA) | Ongoing |
| **Housing Related Support Services** | | | | |
| Technology | Expansion of the community alarm service | Continue to look for opportunities to develop services | Housing Services (GS/JR) | Ongoing |
| Staying Put | Home Improvement Agency develops a range of services to meet needs of older people in the private sector | Secure council wide and multi agency (SP) support for the continuation of the Staying Put project. | Environmental Health (JC) | 2006/7 |
| Disabled adaptations | There is a database of disabled adapted properties and a matching system for people who need them | Set up or join an existing database holding details of adapted properties | Environmental Health/ Housing Needs<br><br>(JC/DS) | 2006/7 |
| **Sheltered Housing** | | | | |
| Services | Sheltered housing staff are able to provide support to older people regardless of tenure | Work with Supporting People to bring in a new model to fund more flexible support | Neighbourhood renewal/ Elderly Services (LW/JR) | 2007 onwards (as Supporting People funding allows) |
| | | | | |

| | | | | |
|---|---|---|---|---|
| | Sheltered housing schemes are used as centres for services to older people living in the local community | Staff are encouraged to develop activities on schemes in partnership with other agencies | Elderly services (JR) | 2007 |
| Extending the range of provision | Options for providing extra care schemes in the City are fully explored | Multi agency group to be established under SHOP to investigate options working in conjunction with the sheltered scheme appraisals | SHOP (GS) | 2006 |
| | Explore options for providing affordable home ownership | Look at shared ownership potential as part of the options appraisal on existing schemes and as part of new development opportunities | Neighbourhood Renewal (SN) | 2006 onwards |
| **Joint Working with Other Agencies** | | | | |
| Overview of services for older people | Clear inter-agency understanding of fit between the full range of services for older people so as to understand gaps and duplications | Carry out a mapping exercise of services for older people across health, housing and social services | SHOP | 2006 |
| Joint working | Staff from health, housing and social services have opportunities to work and train together. | Service managers to identify opportunities for joint working groups and joint training for staff at all levels, | Housing Services (JR/SP) | 2006/7 |
| **Reaching Diverse groups** | | | | |
| BME Elders | Gain a clearer understanding of the needs of black and ethnic minority elders.<br><br>Ensure John Kallie Court remains culturally relevant and | Use information gathered as part of the BME housing strategy<br><br>Work with Oxford Citizens Housing Association on lettings | Housing Services/Strategy and Review (GS/FB) | 2006 |

| | | | | |
|---|---|---|---|---|
| | accessed by BME groups | policy and other initiatives to work with local minority communities<br><br>Ensure sheltered housing staff receive updated training on BME residents needs | Housing Services MU<br><br>Elderly Services (JR) | 2006<br><br>2007 |
| Older homeless people | Gain a greater understanding of the needs of this group | Carry out an audit of current needs and follow up with options about how needs might be better catered for. | Strategy and Review/ Neighbourhood renewal (NP/FB/DB) | 2006 |
| Gay and lesbian older people | Ensure sheltered housing schemes are inclusive for this group. | Train sheltered housing staff in working with gay and lesbian older people.<br><br>Review promotional literature about schemes and services to make it clear they welcome all sections of the community | Elderly services (JR/SP) | 2007 |
| **Information Services for Older People** | | | | |
| Centralised information service | Provide a centralised information resource for older people and professionals | Investigate a thorough cost effective system that should be countywide to include all services ensuring older people are involved in planning this. | SHIG via GS | 2006/07 |
| Staff training and knowledge | Promotion of older people's advice across all teams. | Have older peoples champions in all front line teams who will | GS/SP/DB | 2007/8 |

| | | | | |
|---|---|---|---|---|
| | | receive specialist training in older peoples services and act as a resource for colleagues | | |
| **Involving Older People** | | | | |
| Involvement in all strategic planning | All strategies should consider older people as a specific client group. | People who develop strategy should ensure older people's needs are considered and where necessary consult directly with this group. | Strategy and Review (JB) | 2006 onwards |
| Service culture | Reviews of services for older people will include an analysis of how far the service is 'enabling' and promotes independence. | Staff to build this into service reviews | Environmental Health/Housing Services IW/ GS | 2006 onwards |

Staff Key

| Initial | Name | Role |
|---|---|---|
| CP | Chris Pyle | Policy and Technical Services Manager |
| DB | Dennis Boobier | Housing Needs Manager |
| DS | Dave Scholes | Choice Based Lettings Manager |
| FB | Fiona Brown | Housing Advisor |
| GS | Graham Stratford | Housing Services Business Manager |
| JB | Janet Banfield | Strategy and Review Business Manager |
| JR | Jenny Robinson | Elderly Services Manager |
| MU | Marianne Upton | Allocations Manager |
| NP | Nerys Parry | Street Services Coordinator |
| RA | Richard Adams | Community Safety Manager |
| SN | Steve Northey | Housing Development Co-ordinator |
| SP | Simon Price | Tenancy Services Manager |
| VJ | Val Johnson | Neighbourhood and Renewal Business Manager |

## Appendix 2

## Links between objectives of the Oxford City Council Housing Strategy, Oxfordshire Social and Community Services Commissioning strategy for Older Peoples Services and Oxford City Council Older Peoples Housing Strategy

| Housing Strategy | Older Peoples Housing Strategy | Social Services Commissioning Strategy |
|---|---|---|
| Ob.1.Increase the supply of housing for people in need (through options appraisal and redevelopment)<br>Ob.4 Improve the condition of housing in Oxford<br>Ob 6 Increase housing and support services for all who need them | • All Sheltered Housing to be brought up to a minimum standard including a good range of facilities and equipment<br>• Investigate extra care options<br>• Improve the quality of housing across all tenures including warmth and reduction of falls.<br>• Expanding the community alarm service<br>• Investigate further provision of extra care in the City<br>• Seek to protect existing and find future funding for the staying put service | Enable people to stay at home by providing timely assessments and services that prevent unnecessary admissions to hospital and long term care and reduce delays in hospital discharge |
| Ob.3 Increase opportunities for mobility and choice within the housing stock | • Community safety work<br>• Community support model for | Provide services that promote independence, reduce dependence and |

| | | |
|---|---|---|
| (disabled database/affordable home ownership) | warden services<br>• Telecare | support carers |
| Ob 6 Increase housing and support services for all who need them<br>Ob 7 Improve the environment on estates and in areas of decline (community safety) | • Set up a database of properties for the disabled<br>• Increase the range of housing available including affordable home ownership | Increase opportunities for user autonomy and choice |
| Ob 6 Increase housing and support services for all who need them | • Ensure older people are considered as a specific client group in new developments and social development.<br>• Increase use of Sheltered Housing common rooms by the local community<br>• Find out more about the needs of BME, homeless and gay and lesbian older people to provide more sensitive services<br>• Provide a one stop information service for health, social services, housing and voluntary sector | Improve user and carer participation and social exclusion |
| Ob 6 Increase housing and support services for all who need them<br>Ob 8 Develop housing strategy and policy to support service improvements | • Carry out a mapping exercise of services for older people across health, social services and housing.<br>• Look for opportunities for joint working at all levels | Improve efficiency by streamlining internal processes and joint working |