Housing and accommodation for an ageing population: a strategic vision for Derbyshire to 2035

Prepared by the Housing LIN for Derbyshire County Council and partners.

Executive summary

This document outlines the strategic vision for a range of housing and accommodation choices and support suited to meet the requirements of an ageing population.

Derbyshire has an ageing population and evidence tells us that there are growing numbers of older people seeking a wider mix of housing choices to meet their expectations of living well in later life, including being supported to live in their current home for as long as possible to moving to housing designed specifically for older people, both to buy and to rent.

The latest statistics highlight that 21.1% of the population is currently aged 65 and over and the population aged 75 and over will increase by 65% between 2018 and 2035. The population aged 90 and over will more than double by 2035. Other factors, such as an increasing prevalence of people living with one or more long term health condition, increasing frailty, social isolation, fuel poverty and affordability of housing are key factors affecting the mix of housing required by older people.

Derbyshire has an East/ West split, with the west of the county being predominantly rural comprised of small villages and market towns. In the East of the County, there is a higher population density, centred on key towns such as Chesterfield. Therefore implementing this strategic vision will require a localised approach reflecting differing local circumstances and priorities.

Research suggests that older people have increasing expectations regarding the quality of housing that is designed to be better suited to an ageing population as well as access to a wide range of facilities and amenities. Therefore, it is important that we provide a number of different housing and accommodation types across a range of tenures that help support the diverse needs of Derbyshire's older population. This document provides a high level overview of the type of housing and accommodation required to support an ageing population across Derbyshire. An initial review of future need for specialised housing and accommodation for older people indicates that there is:

- An estimated undersupply of housing for older people reflecting in particular an under supply of retirement housing available to buy.
- An estimated undersupply of housing with care (often referred to as extra care housing), both for rent and for sale in all areas.
- Minimal additional net need for residential care provision.
- An estimated undersupply of nursing care beds in all areas.

The development of a strategic vision and recommendations has been informed by the voices and views of older people in Derbyshire, alongside national research which suggests that developing attractive 'downsizing' or 'rightsizing' options can encourage individuals to move to a property that meets their needs and supports them in later life as well as a range of practical assistance for those people who wish to 'stay put'.

The document outlines a range of good practice examples and details the different types of housing that will help to address the needs of older people within Derbyshire.

The document also considers the range of integrated and co-ordinated support that needs to be available to older people to enable them to maintain health and improve wellbeing.

A number of strategic recommendations are outlined at the end of this document and these will be taken forward across Derbyshire in partnership with key stakeholders.

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Introduction

This document seeks to:

- Provide a comprehensive understanding of the nature of current housing and accommodation provision for older people.
- Identify the requirements and aspirations of older people in later life specifically in relation to housing and accommodation.
- Identify the need for housing and accommodation suited to an ageing population, including for different types of housing such as extra care housing and retirement housing for rent and for sale.

This strategic vision will result in a well-balanced approach to widening housing choices for older people will include:

- Providing a range of support and adaptation services to assist older people to remain living in their existing homes.
- Matching different housing options to identified need in particular locations/communities to ensure there is a mix of housing options (dwelling and tenure) developed and available to meet future need.
- Developing a range of new age-designated housing, for rent and for sale, that will encourage and attract downsizing.
- Applying HAPPI principles as far as possible both to new build designed for older people specifically and to a proportion of mainstream market housing.
- Adapting and improving existing sheltered housing where feasible.
- Having a mix of care and support delivery models.
- Improved use of technology that enables and supports lifestyle choices and meets care/support needs where appropriate and desired by older people.

It should be noted that there is also a Specialist Accommodation and Support Strategy which is currently being developed and there is also a Housing, Accommodation and Support Strategy for individuals aged 18-64 that are supported by Derbyshire Adult Care. This strategic vision and the other two strategies need to be read as a suite of documents.

Vision

The contents of this document and recommendation supports the following vision to support Derbyshire's ageing population:

Derbyshire is a place that meets the housing needs and aspirations of older people by working in partnership across organisations. This is so that older people can make informed choices and decisions about their homes and housing options to support their independence and enable them to live in a safe, accessible and warm home for as long as they wish, with support and adaptations as required. A range of housing options will be available, including support services and specialist housing.

This is a shared vision of all the local authorities in Derbyshire and their partners. It guides the delivery of our strategic approach to create a wide range of housing and accommodation choices suited to meet the requirements of an ageing population.

Context

There are a range of local and national factors which need to be reflected in a strategic approach to increasing and widening the range of housing and accommodation suited to an ageing population.

There is a growing realisation of the impact of demographic change and an urgency to address what this means for older people's housing, accommodation and support.

Many older people want to stay in their own homes as long as possible; this will require support to enable older people to continue to live independently including advice, housing adaptations and technology enabled care.

However, much existing specialised accommodation for older people is 'sheltered housing' for rent, some of which is now quite dated and lacks the space standards and facilities now accepted as necessary to support people to successfully 'age in place'.

The average age of people living in such older people's housing has moved increasing in the last 20 years bringing higher levels of need for support and care that the design of these buildings does not always allow for.

New types of housing with care have emerged over the last ten years which offer the possibility of supporting higher levels of dependency whilst enabling older people to have a home of their own, for rent or for owner occupation in an environment that supports an active older age.

Older people have increasing expectations regarding the quality of housing that is designed to be better suited to an ageing population as well as access to a wide range of facilities and amenities.

The majority of older people in Derbyshire are homeowners (73%) and for those that wish to move to more suitable accommodation; they are likely to want to be able to purchase alternative housing. Many people will be reluctant to move into rented accommodation in older age.

Research locally and nationally indicates that relatively few older people wish to move to live in residential care.

The national priority for health and social care is to support more people at home and this is referenced in the National Memorandum of Understanding developed between ADASS, the Local Government Association and the Department of Health.

There is growing emphasis on avoiding hospital admissions and facilitating effective hospital discharges particularly where suitable housing (or lack of it) plays a significant role. Whilst Derbyshire has performed well in relation to delayed transfers of care it is recognised that housing plays a significant role in preventing admissions, reducing the length of stay in hospital and enabling timely discharge.

The Derbyshire Sustainability and Transformation Plan (STP), Joined Up Care Derbyshire, which is a 'place based' plan for the future of health and social care proposes to move more services from acute hospital care to community based

services. This approach can only be successful if there is a suitably trained workforce available to keep people safe and well. The pressures on the care workforce need to be taken into account in deciding how to develop specialist housing and accommodation for older people.

As part of Joined Up Care Derbyshire's Place work stream, **Place Alliances** are emerging and in Derbyshire these alliances replicate district and borough local authority areas. Place Alliances will co-ordinate the delivery of high quality care in the community and people's homes, working across organisational boundaries targeting those with frailty and other long-term conditions. The alliances are a key forum where districts and borough colleagues will be able to work in partnership with NHS, county council and other local agencies to support people to remain independent and at home for as long as possible.

In addition to Place Alliances, local **Wellness Hubs** are also being developed at a district and borough footprint to co-ordinate preventative health interventions, including falls prevention, housing advice and personal finance support. Wellness Hubs will support partnership working to address the wider determinants of health.

The **Derbyshire Health and Wellbeing Strategy** is currently in development, the importance of maximising the benefits of housing through the planning system and working in partnership to make sure that individuals live in a healthy home environment are recognised. Moving forward key elements of an approach to Older People's housing and accommodation will support this priority and the Health and Wellbeing Board will be engaged in relation to the implementation plan.

Within **Derbyshire's Council Plan 2017-2021** there is a commitment to 'restart our £30m Care Programme' and an outcome for 'happy healthy people and families with solid networks of support, who feel safe and in control of their personal circumstances'. This strategic vision will help achieve this outcome and provide a direction of travel to support the implementation of the Care Programme alongside a broader partnership approach in which our partners will be fully engaged.

Derbyshire County Council is an **enterprising council** and the authority is currently exploring creative ways to deliver better services for less and ensuring that the Council's operating model is fit for purpose to achieve its ambitions and address the challenges that lie ahead. Being an enterprising council means:

- Value for money is at the heart of everything that we do
- We are efficient and effective
- We focus on getting the best results for our residents whether that's by the Council delivering a service itself or by an external organisation – there's no one size fits all
- We have a bold, innovative and commercial mind set
- We do things 'with' local people rather than 'to' them and we value fairness, openness and partnership
- We are proud of Derbyshire and are ambitious for our public services.

During 2017-18, Adult Care spent £236.2 million on social care services for adults. The largest proportion of this was on services for older people. Expenditure is

divided into eight areas: Residential Care, Nursing Care, Community Services (Home Care and Day Care), Direct Payments, Assessment and Care Management, Supported Accommodation and other services.

The **One Public Estate (OPE) programme** is an established national programme delivered in partnership by the Local Government Association and the Cabinet Office. The focus of OPE is on collaboration and addressing national issues at a local level. It aims to create well connected places where communities can live, work and access the services they need. It is a whole system approach that considers how new housing developments will impact on health and education services in the area and what employment opportunities exist or can be developed in the locality. OPE projects might lead to housing provision, more effective and efficient services (through single point hubs) and closer integration with neighbouring authorities and public organisations. Derbyshire is currently hosting the East Midlands programme and is actively exploring OPE opportunities across the county.

Derbyshire's ageing population

In 2016, Derbyshire and its district and borough partners undertook a Housing and Health Needs Assessment, which looked at a range of housing issues across all age bands. The data and learning from this report has helped shaped the direction of travel for older people's housing across Derbyshire. This work informed a subsequent best practice review and the development of this strategic vision. A summary of the key statistics from this and other resources are included below:

Demography

Derbyshire has a population of 785,765 people, of which 166,026 are aged 65 and over. This is 21.1% of the population.

By 2039 the population of Derbyshire which is aged 65 and over will increase by 58.5%.

The population aged 75 and over across Derbyshire will increase by 65% between 2018 and 2035. In Amber Valley and High Peak the increase will be over 70%. In South Derbyshire the increase will be over 80%. Analysis by borough is shown in table 1.

Table 1: Derbyshire population aged 75+ to 2035

Local Authority	2018	2020	2025	2030	2035
Amber Valley	12,300	13,400	16,900	19,000	21,000
Bolsover	7,000	7,500	9,000	10,000	11,100
Chesterfield	9,900	10,600	12,800	14,200	15,600
Derbyshire Dales	8,600	9,400	11,600	12,900	14,200
Erewash	11,100	11,800	14,300	15,700	17,400
High Peak	8,300	9,000	11,300	12,800	14,300
North East Derbyshire	11,100	12,200	14,900	16,300	17,500
South Derbyshire	7,800	8,700	11,300	13,100	14,700
Derbyshire	**76,100**	**82,600**	**102,100**	**114,000**	**125,800**

Source: 2014 based subnational Population Projections, ONS.

By 2039 nearly three in every ten people in Derbyshire will be aged 65 and over (249,000 people). The population aged 90 and over will more than double by 2035, from 7,800 in 2017 to 18,100 in 2035.

Over the next 20 years, in relation to the 'older, older' population, Amber Valley will have nearly 4,500 more over 85s, the biggest population increase in districts and boroughs; Bolsover has the lowest population increase of 1,850.

Nationally, life expectancy is predicted to increase (although this has slowed) and this will be reflected in Derbyshire. This will increase the proportion of people that are older in Derbyshire. Projections are only available at England level (table 2), not by local authority but we can expect Derbyshire to broadly follow a similar pattern.

Table 2: 2014-based principal projection and high and low life expectancy variants for England, in 5, 10 and 20 years' time

	2014 Baseline	5 years (2019)	10 years (2024)	20 years (2034)
Males	79.3	80.6 (80.3-80.9)	81.7 (81.2-82.3)	83.5 (82.1-84.8)
Females	83.0	84.0 (83.7-84.3)	84.9 (84.4-85.4)	86.4 (85.1-87.6)

Source: Office of National Statistics, 2014

The Health Profiles 2017 indicates that life expectancy at birth varies across Derbyshire, with males in Bolsover expected to live for 77.6 years, compared to 80.5 years in Derbyshire Dales. Similarly for females, life expectancy in Bolsover is 81.4 years, compared to 84.0 years in Derbyshire Dales.

The Derbyshire Joint Strategic Needs Assessment (2017) indicates that male life expectancy at 75 years is 9.7 years for individuals living in Bolsover, compared to 11.4 years for a male living in North East Derbyshire. Female life expectancy at 75 years is 12.0 years for individuals living in Bolsover, compared to 13.2 years for Derbyshire Dales.

Healthy Life Expectancy for both males and females in Derbyshire is currently before state retirement age at 63.5 years for males and 63.8 years for females.

Population characteristics

Dementia

The positive correlation between the incidence of Dementia and age means that Derbyshire will see a dramatic increase in people with Dementia. The actual number of people with Dementia in Derbyshire aged over 65 in 2016 was 9,344. The estimated number for 2017 is 11,295. (The difference is accounted for by people who have not yet been diagnosed). According to POPPI statistics, it is estimated that by 2030 17,275 people will be living with Dementia, an increase of 53%.

Frailty

According to POPPI statistics, there is currently estimated to be 17,000 people with frailty and this will increase to 25,500 by 2034. Frailty increases the risk of adverse health outcomes including falls, less mobility, less independence, hospitalisation, disability and death.

Tenure

According to the 2011 Census, older people in Derbyshire live across a full range of tenures, with the same proportion nationally that are owner occupiers (73%). This does vary slightly across the districts and boroughs, with a much higher percentage in social rented accommodation in Bolsover, Chesterfield and North East Derbyshire. Private rented is slightly higher in Derbyshire Dales and High Peak.

Amber Valley has the highest number (9,143) and South Derbyshire the highest percentage (78%) of owner occupiers. Bolsover has both the lowest number (4,825) and percentage (64.7%) of owner occupiers. Bolsover has the highest percentage (28.3%) in the social rented sector, North East Derbyshire the highest number (2,708). Derbyshire Dales has both the highest number (482) and percentage (5.7%) in the private rented sector.

Living alone

According to the 2011 Census Summary Profile in Derbyshire 28.9% (96,233) of people live in one person households. For people aged 65 and over this increases to 56.9% (43,270). Chesterfield has the highest percentage (59.4%) and second highest number of one person households occupied by people aged 65 and over with Amber Valley having the highest number (6,718).

Older people in poverty/fuel poverty

The 2015 Index of Multiple Deprivation (IMD) states that14% of older people in Derbyshire live in low income households and this equates to over 22,300 older people. In addition low income households are at much greater risk of being in fuel poverty. According to the Public Health Outcomes Framework 9.8% of households in Derbyshire are in fuel poverty. Therefore, approximately 7,500 older people households in Derbyshire experiencing fuel poverty and the number may be higher as older people are likely to be over represented within this cohort.

These vulnerable older people are likely to require additional support to maintain their properties to maximise their health and wellbeing and independence.

Rurality

Derbyshire has an East/ West split across the County in terms of rurality, as shown on the map in Annexe 1. Areas such as High Peak and the Derbyshire Dales are more rural and therefore many older people in these areas live in smaller villages and can be some distance away from hospitals and other health or social care services. Whereas, in the East of the County there are a mix of small towns and villages, alongside larger towns such as Chesterfield that provide a range of health and care services. The Index of Multiple Deprivation 2015 considers barriers to housing and services and the pattern of results for this domain is vastly different from the main deprivation index. Of the 13 highest ranking Lower Super Output Areas (LSOAs) in Derbyshire, seven are within Derbyshire Dales. This is likely to reflect the high house prices and long distances to travel to key services in rural parts of the County.

Affordability

Median house price varies significantly by district, with houses in Bolsover costing on average £124,000, compared to property in the Derbyshire Dales which sells for an average of £245,000. Although home ownership rates are relatively high amongst older people in Derbyshire at 73%, varying house values mean that older people will have very different levels of housing equity with which to fund a move to more suitable housing for sale. The minority of older people who live in rented housing will require affordable rented housing suited to an ageing population's needs. Therefore developing a range of older people's housing options across a mix of tenures will be important.

Social care and health needs

There are currently 13,239 people resident in Derbyshire who are current clients of Adult Care services.

Derbyshire has an East-West split, with the West of the County being predominantly rural comprised of small villages and market towns. In parts of High Peak and Derbyshire Dales, which fall within the Peak District National Park, travel time to key services can be lengthy. In the East of the County, there is a higher population density, centred on key towns such as Chesterfield. Deprivation and health inequalities are more commonly a factor in the eastern areas of the county.

Further information about the health needs of Older People can be found on the Derbyshire Observatory.

Older people's needs across Derbyshire

Whilst the analysis in the previous section considers Derbyshire as a whole, consideration of Older People's housing and support needs is most appropriately undertaken at a district and borough level as this allows some of the variation in terms of need and demand for services across the county to be fully analysed. Below is a district by district summary outlining some of the key factors which need to be considered when planning future housing, accommodation and support needs:

Amber Valley

Amber Valley has the largest population in Derbyshire at 124,645 people and 21.7% of its inhabitants are aged 65 or over, this is 26,993 people.

Parts of Amber Valley border Derby City, which is important in terms of health provision at the acute hospital in the city, it is also the preferred location of a range of other services that operates across Derbyshire.

The district is comprised of a number of small towns and rural areas, it covers a large geographical area so rurality is an issue in the West and North of the district.

Amber Valley has the highest number of people providing unpaid care in Derbyshire according to the 2011 Census.

Key statistics

- 3,312 people provide 50 hours of more informal care per week.
- There are 2,234 current service users aged 65 and over in receipt of Adult Care Services.
- 1,853 people over the age of 65 are living with Dementia and this is projected to increase to 3,368 by 2035, an increase of 81.8%.
- 12.8% of total households are single persons aged 65 and over living alone, this is 6,718 households.
- 755 care home beds with nursing and 479 care home beds are currently available in 33 settings.
- 13 private home care agencies work alongside Direct Care's domiciliary care service.

Bolsover

Bolsover has a population of 78,082 people, of which 19.8% are aged 65 and over.

Although population density is lower than Chesterfield, it is one of the highest in the county.

Bolsover is also the most deprived of Derbyshire's districts, according to the Index of Multiple Deprivation (2015).

The main industry in Bolsover for a long time was coal mining. This has had a direct effect on the prevalence of certain health conditions in the area, particularly respiratory disease.

According to the 2011 Census, Bolsover has a relatively high proportion of its population as carers, ranking sixth in England and Wales for the percentage of the

population who are unpaid carers, seventh for those who provide 20-49 hours a week of care and 17th for those providing 50 or more hours a week of care.

Key statistics

- 2.689 people provide 50 hours of more informal care per week.
- There are 1,773 current service users aged 65 and over in receipt of Adult Care Services.
- 1,029 people over the age of 65 are living with Dementia and this is set to increase to 1,725 by 2035, an increase of 67.6%.
- 13.4% of total households are single persons aged 65 and over living alone, this is 4,411 households.
- 457 care with nursing beds and 269 care home beds are currently available in 20 settings.
- 12 private home care agencies work alongside Direct Care's domiciliary care service.

Chesterfield

Chesterfield has a population of 104,420 people and being a comparatively small geographic area, has by far the highest population density in the county.

According to the IMD, Chesterfield is the second most deprived part of Derbyshire. Within the IMD's Health Deprivation and Disability domain there are 87 LSOAs in Derbyshire that fall within the most deprived 20% nationally. Whilst all districts contain at least one such area, 40% of these LSOAs are within Chesterfield.

Key statistics

- 3,358 people provide 50 hours of more informal care per week.
- There are 2,028 current service users aged 65 and over in receipt of Adult Care Services.
- 1,494 people over the age of 65 are living with Dementia and this is set to increase to 2,437 by 2035, an increase of 63.1%.
- 13.5% of total households are single persons aged 65 and over living alone, this is 6,318 households.
- 468 care home with nursing beds and 498 care beds are currently available in 29 settings.
- 14 private home care agencies work alongside Direct Care's domiciliary care service.

Derbyshire Dales

Derbyshire Dales has a population of 71,288 and as such is the smallest population of Derbyshire's districts, despite covering the largest geographical area.

26.2% of the population is age 65 or over, the highest percentage of all Derbyshire's districts

The low population density and older population makes the commissioning and provision of services and accommodation for older people more challenging.

Derbyshire Dales has one of the highest proportions of people providing unpaid care, although numerically this is the lowest number of people across the county.

According the 2011 Census, the district ranks highest in England and Wales for the proportion of people providing 1-19 hours a week of care and eighth overall for total care provision.

Key statistics

- 1,542 people provide 50 hours of more informal care per week.
- There are 1,083 current service users aged 65 and over in receipt of Adult Care Services.
- 1,279 people over the age of 65 are living with Dementia and this is set to increase to 2,254 by 2035, an increase of 76.2%.
- 15.1% of total households are single persons aged 65 and over living alone, this is 4,656 households.
- 532 care home with nursing beds and 332care beds are currently available in 26 settings.
- 15 private home care agencies work alongside Direct Care's domiciliary care service.

Erewash

Erewash has a population of 114,891 people and covers a fairly small geographic area bordering Derby City to the west and extending very near to Nottingham to the east. The two main towns, Ilkeston and Long Eaton are both on the east of the district. Like in Amber Valley, this geography may lead to some variability in where people may wish to access service provision and some of this may be out of county.

Erewash contains the most deprived LSOA in Derbyshire; Hopewell North, lies within Ilkeston North Ward and covers part of the Cotmanhay area. It ranks within the top 1% most deprived areas in England.

Key statistics

- 1,542 people provide 50 hours of more informal care per week.
- There are 1,953 current service users aged 65 and over in receipt of Adult Care Services.
- 1,279 people over the age of 65 are living with Dementia and this is set to increase to 2,254 by 2035, an increase of 68.9%.
- 15.1% of total households are single persons aged 65 and over living alone, this is 4,656 households.
- 586 care home with nursing beds and 556 care beds are currently available in 34 settings.
- 17 private home care agencies work alongside Direct Care's domiciliary care service.

High Peak

High Peak has a population of 91,662 people, the third lowest population of Derbyshire's districts.

High Peak occupies the second largest geographical area meaning that like the Derbyshire Dales it has a comparatively low population density. The sparse population distribution can make the provision of services which meets the needs of a rural community a challenge.

The proportion of people aged 65 and over in High Peak is 20.3%.

The proximity of parts of High Peak to Stockport, Manchester and Macclesfield and the fact that Glossopdale is covered by Tameside and Glossop Clinical Commissioning Group adds further complexity to the co-ordination and integration of services within this area as there is significant out-flow to other areas for health provision.

Key statistics

- 2,034 people provide 50 hours of more informal care per week.
- There are 1,275 current service users aged 65 and over in receipt of Adult Care Services.
- 1,226 people over the age of 65 are living with Dementia and this is set to increase to 2,232 by 2035, an increase of 82.1%.
- 12.7% of total households are single persons aged 65 and over living alone, this is 4,962 households.
- 266 care home with nursing beds and 560 care beds are currently available in 27 settings.
- Seven private home care agencies work alongside Direct Care's domiciliary care service.

North East Derbyshire

North East Derbyshire has a population of 100,423 people. It has the second highest proportion of people aged 65 and over at 24.0% when compared to other Derbyshire districts. Like Bolsover this is an area with a strong background in mining so there is also a significant number of people with long-term health conditions. Unlike Bolsover, the area has a much older population profile.

Key statistics

- 3,011 people provide 50 hours of more informal care per week.
- There are 1,595 current service users aged 65 and over in receipt of Adult Care Services.
- 1,621 people over the age of 65 are living with Dementia and this is set to increase to 2,762 by 2035, an increase of 70.4%.
- 14.0% of total households are single persons aged 65 and over living alone, this is 6,049 households.
- 402 care home with nursing beds and 368 care beds are currently available in 19 settings.
- 370 day care places are currently available at three locations provided by Direct Care. There are a further 44 centres provided by external providers.
- 15 private home care agencies work alongside Direct Care's domiciliary care service.

South Derbyshire

South Derbyshire has a population of 100.334 people and has the lowest percentage of people aged 65 and over at 17%. It is projected that this part of Derbyshire will see the largest increase in population. The district borders both Derby City and Burton-on-Trent so as with other parts of the county a large number of people may access services outside of Derbyshire. Parts of South Derbyshire are rural and there are small villages throughout the area. South Derbyshire is the district with the lowest proportion of people providing unpaid care.

Key statistics

- 2,022 people provide 50 hours of more informal care per week.
- There are 1,213 current service users aged 65 and over in receipt of Adult Care Services.
- 1,174 people over the age of 65 are living with Dementia and this is set to increase to 2,311 by 2035, an increase of 96.8%.
- 10.4% of total households are single persons aged 65 and over living alone, this is 4,072 households.
- 374 care home with nursing beds and 501 care beds are currently available in 35 settings.
- 15 private home care agencies work alongside Direct Care's domiciliary care service.

Supply of specialised housing and accommodation

When considering current supply and future demand for older people's housing, accommodation and support across Derbyshire, the strategic approach is best considered across four broad accommodation types:

- **Housing for older people:** social sector sheltered and age-exclusive housing and private sector leasehold retirement housing. This will include schemes, for rent and for sale, with on-site staff support, those with locality-based support services and schemes with no associated support services.
- **Housing with care:** includes extra care schemes, often called 'assisted living' in the private sector, with 24/7 care available on-site and housing schemes that offer bespoke care services, even if these are not full on-site 24/7 care, across both the social and private sector.
- **Residential care:** residential accommodation together with personal care, i.e. a care home.
- **Nursing care**: residential accommodation together with nursing care i.e. a care home with nursing.

The following tables set out the current supply of the range of specialised housing and accommodation for older people across Derbyshire.

Table 3: Residential and nursing care home provision, older people (beds)

Local Authority	No. of homes (Nursing)	No. of beds (Nursing)	No. of homes (Residential)	No. of beds (Residential)
Amber Valley	17	755	16	479
Bolsover	11	457	9	269
Chesterfield	10	437	15	455
Derbyshire Dales	10	425	12	322
Erewash	14	586	16	489
High Peak	5	235	20	553
North East Derbyshire	9	402	10	368
South Derbyshire	8	351	16	501
Derbyshire	84	3,648	114	3,436

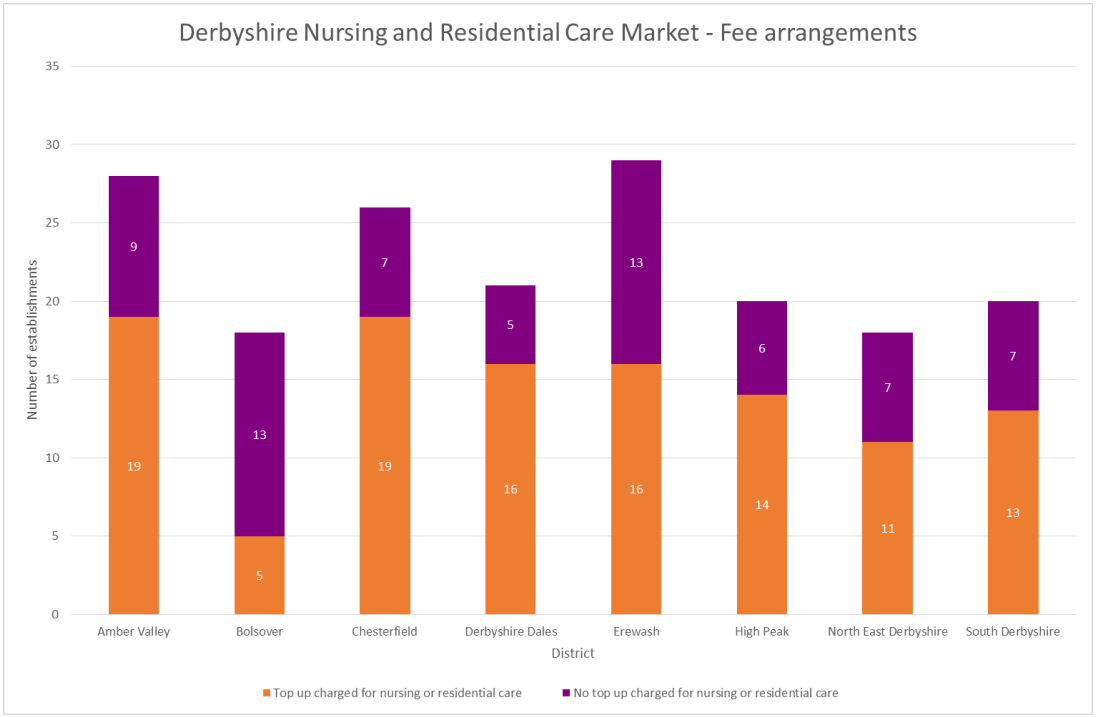
Source: DCC Adult Care Commissioning and Contracts Team, June 2018

Table 4: Residential and nursing care home permanent admissions per 100,000 population.

Local Authority	No. of permanent admissions to residential and nursing care aged 65+	Rate per 100,000 population aged 65+	Rate is above/ below Derbyshire average
Amber Valley	176	656.4	↓
Bolsover	166	1,078.8	↑
Chesterfield	195	910.7	↑
Derbyshire Dales	123	663.4	↓
Erewash	189	831.6	↑
High Peak	149	807.9	↑
North East Derbyshire	160	667	↓
South Derbyshire	142	802.3	↑
Derbyshire	**1,300**	**787.9**	

Source: DCC Service Trends (data for 12 months March 2017- March 2018)

Charts 1 and 2: Number of residential and nursing homes charging 'top-up' fees.



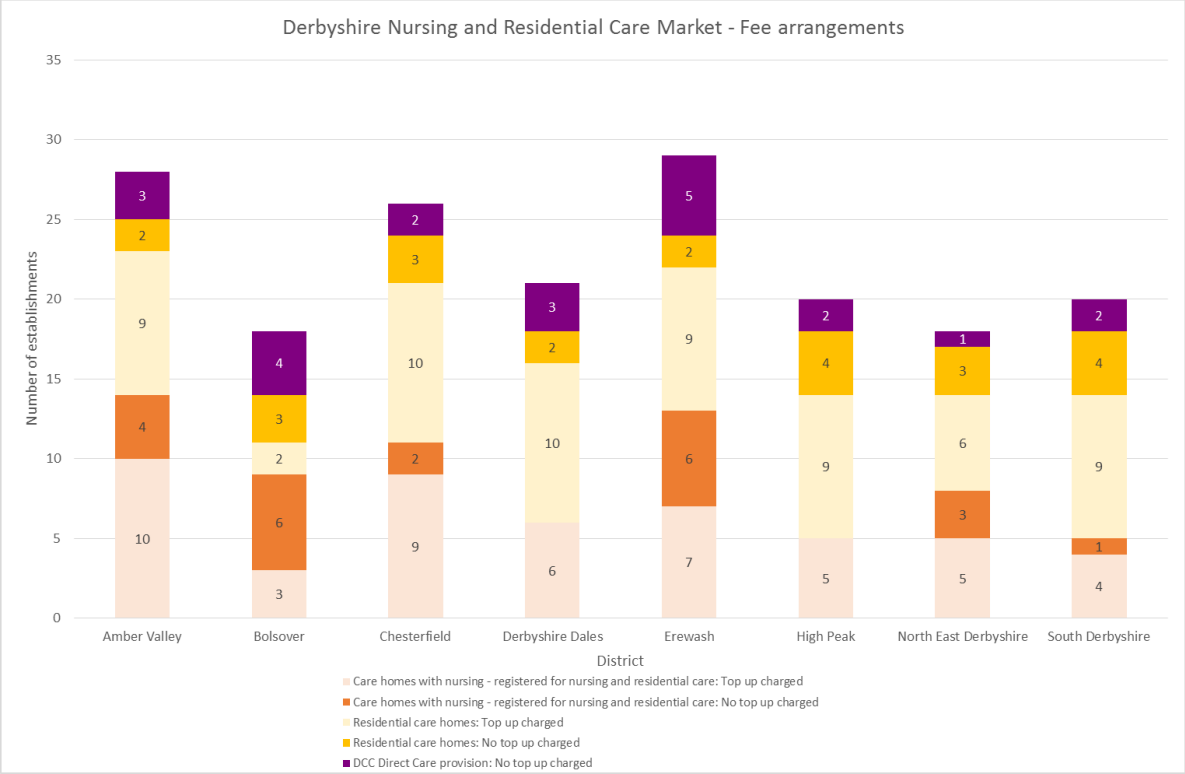


Table 5: Housing with care provision (units), 2018

Local Authority	Units	Owner Occupied	Shared Ownership	Rental
Amber Valley	52	0	17	35
Bolsover	0	0	0	0
Chesterfield[1]	55	0	0	55
Derbyshire Dales[2]	164	142	0	22
Erewash	61	0	21	40
High Peak[3]	98	34	14	50
NE Derbyshire	60	8	10	42
South Derbyshire	213	149	11	53
Derbyshire	703	333	73	297

Notes:
1. Care services are available 7am to 10pm only in 31 of these units at one site
2. One site has an additional 2 beds, under contract for respite
3. One site, that will provide 31 units, is currently under construction

Source: Adult Care DCC Commissioning Team, for Best Practice Review 2017

Table 6 shows the current supply of older people's housing schemes for rent and for sale (excluding housing with care) in Derbyshire.

Local Authority	Total
Amber Valley	3,279
Bolsover	2,702
Chesterfield	1,193
Derbyshire Dales	1,281
Erewash	1,872
High Peak	792
North East Derbyshire	2,493
South Derbyshire	948
Derbyshire	14,363

Source: EAC/District Councils, June 2018

A full assessment of future estimated need for specialised housing and accommodation for older people, across each District in Derbyshire, will be undertaken as pre-cursor to the development of an implementation plan. Due to the degree of variation between district and borough authority areas in Derbyshire and local contextual factors that will influence future need, this assessment will be undertaken with the district and borough authorities.

However, an initial review of future need for specialised housing and accommodation for older people at a countywide level and following discussion with district and borough councils, indicates that to 2035 utilising the Housing LIN's modelling tool known as SHOP@

SHOP@ benchmarks

SHOP@ is based on future prevalence rates that match local plans and strategies, and development intent, in relation to older people's housing and accommodation. Table 6 below shows the current older people's housing and accommodation expressed as comparative average prevalence rates for Derbyshire and England (prevalence rates are the number of units/beds per 1,000 people 75+). The following benchmark/prevalence rates for use in projecting future need (SHOP@ prevalence rates) are suggested.

Table 7: SHOP@ benchmarks: Derbyshire

		Derbyshire average prevalence rate	National average prevalence rate	2018: suggested prevalence rate	2035: suggested prevalence rate
Housing for Older people	Social	190	93	105	120
	Private	7	28		
	Total	197	121		
Housing with Care	Social	6.5	11.5	15	25
	Private	4.5	4		
	Total	11	15.5		
Nursing		50	43	50	50
Residential		46	40	45	25

The rationale for the above benchmarks and the assumptions informing them are summarised on the next page.

Table 8: SHOP@ benchmark assumptions

Housing for Older People	At this stage provision benchmarks for housing for older people for rent are held at current levels of provision. This will be refined following discussion with District/Borough Councils. Current provision for retirement housing for sale in Derbyshire is below the overall national average. . A provision trend for retirement housing for sale towards the national average is assumed for the period 2018 - 2035.
Housing with Care	Currently provision is significantly below the national average. Based on local intelligence in relation to older

	people's housing/care preferences and the national trend amongst similar sized authorities, it is assumed there is intent to meet/exceed the current national average and increase provision further by 2035.
Nursing Care	Current provision is above the national average. Based on local intelligence in relation to the increasing 'older, older' population, it is assumed that provision will likely be required to remain at this level of prevalence to 2035.
Residential Care	Current provision is above national average. Based on maintaining above average provision of nursing care, an estimated increase in provision of housing with care and intelligence in relation to older people's housing/care preferences, it is assumed that likely requirements will reduce below national average by 2035.

Initial high level analysis suggests the following modelling for residential and nursing care provision

Table 9: Estimated net additional need for older people's housing and accommodation to 2035

Local Authority	Residential care (beds)		Nursing care (beds)	
	Current provision	Net additional need 2035	Current provision	Net additional need 2035
Amber Valley	479	46	755	295
Bolsover	269	9	457	98
Chesterfield	455	-65	437	343
Derbyshire Dales	322	33	425	285
Erewash	489	-54	586	284
High Peak	553	-196	235	480
North East Derbyshire	368	70	402	473
South Derbyshire	501	-134	351	384
Derbyshire	3,436	-291	3,648	2,642

NB. Negative numbers indicate a (theoretical) oversupply

At a county wide level there is also a need for additional housing for older people across a range of tenures at approximately 4,750 units by 2035 and a further 2,300 units of Extra Care

Utilising the data modelling and also national learning from the Housing LIN, the following can be outlined in terms of mapping future demand for a range of housing options across a range of tenures in Derbyshire:

Tenure mix of specialised housing for older people

Derbyshire has relatively limited provision of private retirement housing (typically leasehold) schemes. In line with Care Act responsibilities and a 'whole population' approach to meeting the housing needs of older people, consideration needs to be given to the requirements of older people's housing both for social/affordable rent and for sale. The tenure mix is dependent on the relative affluence/deprivation of the local authority area. The IMD rank has been used to estimate the tenure split in each

authority. The higher the IMD rank, the more relatively affluent an authority area, the higher the percentage of for sale (leasehold) properties expected. The Derbyshire authorities' IMD scores/rank and the suggested tenure splits are shown in table 10 below.

Table 10: Estimated tenure split, housing for older people

Local Authority	IMD Rank	Decile	Rent/Sale(%)
Amber Valley	166	51	60/40
Bolsover	57	17	85/15
Chesterfield	70	21	85/15
Derbyshire Dales	255	78	50/50
Erewash	165	51	60/40
High Peak	124	38	70/25
North East Derbyshire	155	48	60/40
South Derbyshire	191	59	60/40

Source: https://www.gov.uk/government/statistics/english-indices-of-deprivation-2015

These are district level assumptions and more detailed sub-district level assumptions can be used to support the implementation of this strategy as there are significant pockets of deprivations within areas such Amber Valley, Erewash and North East Derbyshire that needs to be considered.

The estimated need for older people's housing to 2035 is summarised in table 11.

Table 11: Estimated net additional need for older people's housing to 2035

Local Authority	Housing for older people (units)				Housing with Care (units)			
	Current provision	Net additional need (rent) 2035	Net additional need (sale) 2035	Total net additional need 2035	Current provision	Net additional need (rent) 2035	Net additional need (sale) 2035	Total net additional need 2035
Amber Valley	3,279	0	925	925	52	263	210	473
Bolsover	2,702	0	200	200	0	236	42	278
Chesterfield	2,798	0	281	281	55	277	59	336
Derbyshire Dales	1,281	0	788	788	164	156	36	192
Erewash	1,872	0	741	741	61	200	174	374
High Peak	792	538	386	924	98	204	55	259
North East Derbyshire	2,493	0	840	840	60	211	167	378
South Derbyshire	948	110	706	816	213	157	0	157
Derbyshire	14,560	1,184	4,728	5,913	703	1,704	744	2,448

In summary this indicates that to 2035:

- There is an estimated undersupply of housing for older people particularly reflecting an under supply of older people's housing for sale (private retirement housing).
- There is an estimated undersupply of housing with care, both for rent and for sale in all areas.
- There is minimal additional net need for residential care provision. In most areas there is no net additional need for residential care provision.

- There is an estimated undersupply of nursing care beds in all areas.

Older people's perspectives

This document draws on evidence available locally and nationally regarding the preferences and aspirations of older people in relation to their housing and accommodation requirements.

Local evidence

A survey of older people was undertaken by Derbyshire County Council in 2017 and brought together social care; district and borough councils; health and voluntary sector stakeholders to reflect the whole range of housing needs for older people in Derbyshire.

The key messages from this survey are summarised below.

- 24% of respondents did not feel that their current home will meet their future needs. When asked why:
  - 72%, stated that mobility in and around the home was the biggest issue
  - 49% said that too much maintenance would be required; and,
  - 44% said their house was too big.
- When asked if they should require care in the future what their preference would in relation to where and how that care would be provided,
- 69% would prefer to stay in their existing home with care and support provided from a care provider with 30% preferring support from family and friends.
- 39% would move to a smaller home. 33% indicated that they would consider moving to housing with care.
- 82% felt that it was important to them if they cannot stay in their own home that they would chose to stay in their home town/village.
- 93% of respondents said that it was important to live near to public transport links and amenities in your old age.
- In relation to information and advice about suitable alternative housing options in the local area, 37% were informed and 35% uninformed. 35% felt fairly or very uniformed.
- In relation to information specifically available regarding 'downsizing' options 28% felt very or fairly informed but 34% felt fairly or very uninformed.
- Over half of the respondents (55%) felt informed about adaptations to enable them to remain living in their own home. 28% (45) felt fairly or very uniformed.

The key messages from focus groups and interviews conducted by DCC with older people, to complement the survey, are summarised below:

- It is important that housing options aimed at older people are affordable for different socio-economic groups.
- A majority of older people wish to be supported, if required, to remain living in their existing homes.

- Many people were concerned about loneliness and isolation amongst older people.
- In relation to people who were potentially interested in moving to alternative housing better suited to their requirements as they age, important factors were:
    - Two bedroomed properties need to be a minimum to allow additional support
    - Ensuite facilities
    - Need to be near shops, doctors, pharmacy
    - A need for affordable housing developments with suitable homes for older people
    - Provision of bungalows or ground floor flats
- Those people who were familiar with extra care housing identified the following:
    - This model works really well, the café is the social hub, with a warm welcome.
    - Extra care is a good option, with all facilities in one place.
    - It provides the ability to easily socialise with people if you wish to.
    - Security can be an important issue for many people and you feel safe in Extra Care facilities.
- Other factors that participants considered to be important were:
    - 'Future proofing': the need to plan in a timely way for your future housing requirements
    - A lack of availability of suitable properties for older people.
    - Location of any new housing designed for older people needs to be near chemists, doctors, shops and transport links.
    - Moving home: the need for help with paperwork of moving and the cost.
    - More support being available to stay in your existing home.

National evidence

National evidence based on published research and reports tends to corroborate the local evidence in relation to older people's preferences and requirements.

The actual demand amongst older households aged 65 and over to move and to 'downsize' will be influenced by a range of factors that influence the decision to move. In this context 'downsizer' homes may be defined as mainstream or 'general needs' housing, i.e. non-age designated housing, as well as housing designed and designated specifically for older people, that are suited to the requirements and aspirations of older people. The most prevalent reasons, according to research by the National House Builders Federation, for moving given by older people are most typically:

- To have a home that is easier to maintain.
- To have a home with reduced running and maintenance costs.
- To have your home more suited to you as you grow older.
- To have cash left over from the sale of the home.
- To move to a property that is in a better state of repair.
- To move to a smaller property.

The underlying factors that influence a decision to move/downsize can be more nuanced. Some of the most significant factors influencing the lifestyle decisions to move amongst older people include:

- A desire to remain living locally in people's existing communities and retaining support networks.
- Good quality, accessible design; this is good for everyone – not just older people.
- Attractive interiors and modern fixtures and fittings; for example, a Bake Off oven.
- Homes that allow them to be used when a person's mobility reduces and so facilitate 'ageing in place'.
- The importance of community life; housing isn't just about bricks and mortar, but communities. The implication is about designing communities and places, not just new houses.
- Downsizing needs to also mean 'rightsizing' (and in some cases 'upsizing). People 'don't want to live in shoeboxes'. People want sufficient space (e.g. two bedrooms), access to a garden and space for keeping pets.
- Flexibility including more choice to rent privately as well as part-own, and 'try before you buy' options.

Policy and practice considerations

National policy context

There has been relatively limited UK Government policy in relation to supported and older people's housing over the last ten years.

The role of housing, including for older people and vulnerable groups, as a determinant of health has been reflected in recent policy. The statutory guidance around the implementation of the Care Act (2014) asserts that:

> 'Housing is therefore a crucial health-related service which is to be integrated with care and support and health services to promote the wellbeing of adults and carers and improve the quality of services offered.'

Councils are required to have regard to ensuring sufficient capacity and capability to meet anticipated needs for all people in their area needing care and support – regardless of how they are funded with housing options at the centre. Older people's and supported housing can play a vital part of promoting wellbeing. It offers positive solutions for those with care needs who want to continue living in and remaining independent for as long as possible in an environment suited to their changing needs. Living in well-designed housing, including specialised housing designated for older people, can be instrumental in improving the health and wellbeing of many people.

The role of the Homes and Community Agency (HCA) regulation is anticipated to be extended for Registered Providers (RPs) in relation to the combined rent and service charges in sheltered and extra care housing, under the Government's 'sheltered rent' funding proposals. The details of this additional regulatory requirement on RPs is yet to be made clear.

The Care Quality Commission's most recent guidance on regulated activities for providers of supported living and extra care housing clearly sets out their expectation to see housing and care services provided by separate organisations.

This relative policy vacuum has been filled by a range of 'informal' policy, guidance and research (see below) which has created a clear sense of what high quality desirable housing for an ageing population looks like both for rent and for sale.

Housing for an ageing population: contemporary practice

The preferences of older people are not always well supported by the choices available in the current housing market. A variety of housing alternatives are required that focus on providing attractive housing offers that support healthy, longer-term independent living and build greater personal and community resilience, thereby reducing pressures on social care and health services in the longer term.

The overall trend in the provision of housing and care for older people has been geared, over the past decade or more, to shift care provision from institutional

settings toward more independent housing typologies that integrate housing and support for older people into the community.

There is a relatively recent evidence about the value of extra care housing. A scoping review by Bligh et al (2015) found convincing evidence that extra care housing (ECH) can delay admission into a care home by providing alternative accommodation at the point where someone has to leave their original home and as a means of enabling them to live independently for longer.

A recent evaluation by Aston University measured the impact of an ExtraCare Charitable Trust Well-being Service (an informal drop-in service for preventive health care and day-to-day chronic illness support) on 162 new extra care housing residents. Findings reported include: reduced costs to the NHS; reduction in the duration of unplanned hospital stays; reduction in GP visits; significant cost savings to social care; and reduction in depressive symptoms.

Similarly there is evidence in relation to the value of other housing designated for older people, such as sheltered housing for rent.

A review of the research about sheltered housing commissioned by the National Housing Federation says, 'the weight of evidence through case studies, audits and research, shows that there is an unequivocal health gain to be made through the provision of all forms of retirement housing'. All evidence indicated 'a substantial improvement in health, a diminution in the volume of care and support required and a greater sense of security and well-being'.

Nationally, housing specifically for older people accounts for just 6 per cent of existing stock and of just 7,000 of the 155,000 homes built in 2014/15. The Personal Social Services Research unit projected demand for supported housing in Great Britain 2015 to 2030. They estimated that, to keep pace with demographic pressures, the number of supported housing units for older people will need to rise from 460,000 in 2015 to 625,000 in 2030, an increase of 35%.

'Housing our Ageing Population: Panel for Innovation' (HAPPI) has arguably been the single most important 'unofficial' policy driver affecting the future for older peoples housing and associated services. This is a developing body of work with three reports so far and a fourth published in May 2018. If housing for older people, including sheltered housing and extra care housing, is to reflect the aspirational needs and expectations of current and future older people in Derbyshire, the development and adoption of more aspirational designs for all forms of housing for older people is necessary, reflecting the HAPPI principles.

The HAPPI reports have highlighted a series of inspirational case studies and examples of housing that reflect the needs and aspirations of an ageing society, suggesting that:

- we should all plan ahead positively, creating demand for better choice through a greater range of housing opportunities.
- housing for older people should become an exemplar for mainstream housing and meet higher design standards for space and quality.

Last year's English Local Government Association's report Housing our ageing population: Learning from councils meeting the housing need for our ageing population focusses on good practice by local authorities in relation to meeting the housing needs of older people. Key themes identified from this work, which help to inform this strategic vision, are:

- **Having a clear vision: promoting awareness and changing attitudes.** This is about councils shaping housing markets to deliver good quality, well located, and inclusively designed housing for older people.
- **Planning for an ageing population.** This involves using a mix of demographic data; planning tools alongside localised contextual information and what older people say.
- **Delivering and enabling new housing for older people across the public and private sectors.** This includes encouraging and supporting private sector retirement housing development which can help to meet the future housing needs of older home owners.
- **Promoting an integrated approach to housing, care and health**. The report states that sensitive and well-designed housing aimed at people with complex care needs and/or dementia can be a highly effective alternative to residential care. None of the local authority showcased in this report were developing directly or facilitating additional *residential care* capacity.
- **Sustaining older people in mainstream housing**. This refers to commissioning and providing home improvement agency type services across council boundaries which offers scope for economies of scale.

A strategic approach to housing an ageing population in Derbyshire

Older people's housing and accommodation: A typology

The evidence of what is needed to meet older people's future housing and accommodation requirements is complex suggesting that a sophisticated mix of housing types and approaches will be required over the next ten to twenty years.

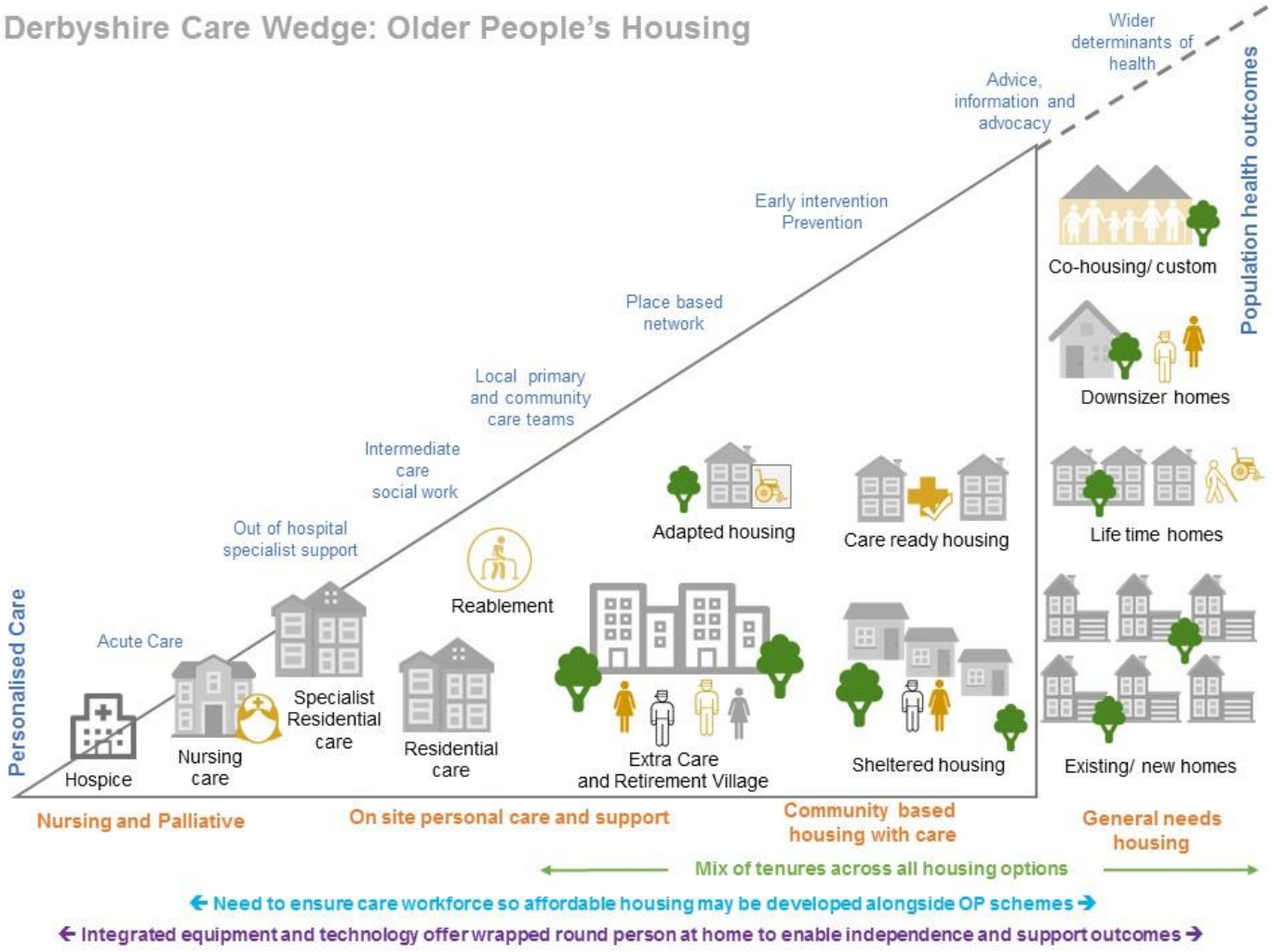
A typology, i.e. a way of describing and understanding housing/accommodation options for an ageing population, is set out in Figure 1. This is based on the DWELL programme. This shows the range of housing and accommodation options in relation to addressing the needs of an ageing population. This range covers general needs (mainstream) housing, specialist housing (i.e. housing specifically for older people) and care-based provision (residential/nursing care, hospital based care).

This typology is suggested as a *guide* to specifying the housing and accommodation requirements for Derbyshire that are indicated by the evidence base, specifically estimated housing and accommodation need and what older people say they need and want, including:

- General needs housing: existing housing/adapted housing
- General needs housing: new mainstream housing including Lifetime Homes wheelchair adapted homes. This includes the potential for 'inter-generational' housing.
- Age designated housing and contemporary 'sheltered'/retirement housing.
- Extra care housing
- Co-housing schemes
- Retirement villages
- Housing/accommodation that is suited to the needs of people living with dementia and other complex needs.

Whilst the typology set out in Figure 1 clearly identifies housing types for downsizing purposes, the evidence from older people in Derbyshire and elsewhere indicates that all the different general needs and specialist forms of housing will present downsizing opportunities if they are sufficiently well designed and located to respond to what are the different motivations for downsizing at different ages.

Figure 1. Older people's housing and accommodation: A typology



Older people's housing and services: Contemporary practice examples

Contemporary practice examples in relation to older people's housing and services are considered as potentially applicable to Derbyshire. For new build examples, the focus is on HAPPI compliant design and the creation of future proofed, aspirational living environments. In relation to remodelling existing older people's/sheltered housing the focus is on the extent to which HAPPI design principles can be applied to create rejuvenated housing and associated service models that are relevant and attractive to older people.

Age specific housing for people aged 60 and over across all tenures;

New build developments

Examples of new build developments in urban settings and/or involving reusing sites of former sheltered housing schemes are **Ocean Housing's** Prince Charles house in St Austell, Cornwall and **Birmingham City Council's** 'downsizer' bungalow model. These development and housing models vary in scale, Price Charles House has 31 apartments for rent whilst the 'downsizer' bungalows in Birmingham tend to occupy relatively small sites and are for rent and for sale. Both examples have the following common features:

- Designed to HAPPI principles
- Care ready
- Aspirational housing in urban settings;
- Extensive use of technology to support lifestyle and support/carte needs
- Promote health and wellbeing though design and provision of communal space and/or activity.

'New Grounds' - the **Barnet Older Women's Co-Housing** (OWCH) mixed tenure scheme built to HAPPI principles - won the national 2017 Housing Design Awards this month. The OWCH complex has 17 leasehold flats and eight for social rent. Such has been the demand that there are currently no vacancies. Residents said:

"We are carving out a path for others in our age group to follow. We hope they have an easier journey than ours, now we have shown the way. The senior co-housing community could enrich the last years of many, and reduce pressures on health and care services, if local authorities, planners, policy makers and housing developers helped to remove the many obstacles society puts in its way".

Making best use of existing older people's housing

Examples of remodelled sheltered housing schemes include **Derwentside** Housing's Castle Court (below right), a remodelled sheltered housing scheme on the site of a previous care home in County Durham. The intention has been to:

- Redesign and refashion existing sheltered housing
- Improve age friendliness
- Extend the building's useful lifespan
- Focus on making sheltered housing a more attractive housing choice with a focus on the 'pull' factors

Age specific housing that offers a range of care and support options;

New build developments

Newcastle City Council has developed 'assisted living' schemes for older people using both regeneration opportunities and making use of sites previously occupied by outdated sheltered housing or other forms of housing. These are relatively small in scale, approximately 40 to 50 units, that are designed to HAPPI standards and intended to be either 'care ready' or to be used as extra care housing depending on local needs and circumstances.

Making best use of existing older people's housing

North Tyneside Council has over 1,000 tenants aged over 60 living in sheltered accommodation. This accommodation includes 26 sheltered housing schemes (10 of these have adjacent bungalows) and six group dwelling developments. North Tyneside Homes (NTH) embarked on a transformative refurbishment and building programme of its entire sheltered housing stock. The buildings will meet Lifetime Homes Standards, have state of the art equipment, be fully accessible, be adjustable to the changing conditions of the tenant and will be dementia friendly.

Alongside the programme to transform the built environment the sheltered housing service has been rebranded and marketed and is now: North Tyneside Living (NTL). This is to give a refreshed, modern image of future housing for older people. The service delivery model aims to optimize the benefits of these environments, and to support tenants to age-in-place. The model that has been evolving is preventative and enabling; and where necessary provides early intervention through partnership arrangements giving access to health and social care services

There will be some incidence of dementia in any housing development for older people and the design should consider good practice in terms of the physical design and operational management for dementia. The Alzheimer's Society has worked with the sector a produced useful dementia-friendly housing charter. While Guinness Care and Support has adopted an organisation wide approach to improving support for people living with dementia whether they live in older people's housing or general needs housing. There are several different approaches to accommodating older people with mild to moderate levels of dementia in extra care housing. These range from small dedicated units or wings specifically for this group, to clusters of flats with shared communal facilities, to a pepper-potted approach where individual care needs are simply catered for within their flats.

Llys Jasmine is managed by **Wales and West Housing** in partnership with Flintshire County Council. comprises 61 apartments (33 one bedroom, 28 two bedroom) and two two-bedroom bungalows for residents aged 65 and over with care and support needs. Fifteen of the purpose-built apartments are specifically designed for people with dementia and located in one area of the site. The scheme was built on the site of an existing Flintshire Council traditional sheltered housing scheme. It incorporates a range of design features, across the scheme, aimed at assisting people with dementia.

The ***Belong*** **approach** in North West England promotes village-type communities as opposed to traditional care homes, where the maintenance of residents' independence is key. The villages include apartments for sale or rent; as well as 'households' in which 10 to 12 residents who need higher levels of care live. *Belong* households are designed so that the communal areas are open-plan; this reduces dependence on memory and promotes an environment in which residents are encouraged to take part in preparing and serving meals. *Belong* villages are also open to the public; the village centre has facilities such as a bistro and hair salon, and 'experience days' invite members of the public (including those with dementia) to come to events such as film screenings and exercise classes at the village. Belong invests heavily in dementia training and has its own Admiral Nurse, yet its marketing and branding around dementia is discreet and the villages are intended to be inclusive of people with a range of needs. Belong can thus be seen to advocate an integrated approach to dementia within Extra Care Housing. The philosophy is that the care should be brought to the place where the person is living wherever possible - whether it be in a household, in one of the apartments, or to their own home in the surrounding area - rather than that people should be moved through a series of 'placements' as their needs increase.

Supporting people to remain in their existing homes: 'staying put'

Whilst this document outlines ways to widen housing choices for older people, a majority of older people typically wish to remain living in their existing homes. The strategic vision and recommendations at the end of this document are designed to support that preference.

The home and related support services are central to improving health and promoting the wellbeing of some older people as they typically spend so much time at home. Key features of the right home environment (both permanent and temporary) are:

- It is warm and affordable to heat;
- It is free from hazards, safe from harm and promotes a sense of security;
- It enables movement around the home and is accessible, including to visitors
- There is support from others if needed

There are a range of initiatives which can support people to make informed choices about their present / future accommodation needs to maintain good health and wellbeing and support people to stay in their own home. These initiatives and approaches are set out below.

Making Every Contact Count

Partners recognise the importance of making every contact count in relation to housing choices and housing options. A range of health and social care professionals, alongside other local authority officers or partners in the voluntary sector visit individuals in their own homes. These members of our workforce play an important role in enabling preventative approaches that allow people to stay safe and well in their own home, but they can also provide advice and information which may encourage an individual to move to a house that better meets their needs early on in their care and support journey.

Advice and Information

Whilst there are various sources of information available regarding housing and care options, there is not one single place where the full range of information is available from. Only one district council, Derbyshire Dales, has a Housing Options service for older people, but there is potential for this to be replicated should appropriate funding models be developed.

Developing comprehensive advice and information about housing choices and options is a shared objective, as is ensuring that this information is up to date and accessible to older people.

Falls Prevention

Falls and fall-related injuries are a common and serious problem for older people. According to NICE research, people aged 65 and older have the highest risk of falling, with 30% of people older than 65 and 50% of people older than 80, falling at least once a year.

The Derbyshire Falls Pathway recognises that ensuring a safe home environment can reduce the risk of an older person falling at home. Low cost interventions such as additional hand/grab rails, improved lighting can help prevent falls and support someone to remain independent in their own home.

Assistive Technology

An integrated assistive technology offer is an important element of the housing, health and social care service model which can support and enhance older people's options and improve health and being. It's an integral part of the solution for coping with a changing demographic profile, reduction in available workforce and an increased prevalence of limiting long-term illness/disability among the general population.

Assistive Technology can support individuals to live at home and complement traditional care. Assistive Technology services are more cost effective than registered care or nursing accommodation, offering better outcomes and increased satisfaction for people with long-term care needs.

Derbyshire County Council is currently exploring through the Enterprising Council approach how the range of technology utilised by eligible Adult Care clients can be increased and form part of a personalised package care. This will form a complimentary piece of work to work relating to older people's housing accommodation and support as there are clear interdependencies.

Equipment and Minor Adaptations

The Integrated Community Equipment Service provides a range of simple, often low cost equipment to allow individuals to remain independent at home.

The Derbyshire Handy Van Service provides practical support to help older and vulnerable people to live independently in their own homes. The service is available to people aged 60 and over.

Disabled Facilities Grant

Disabled Facilities Grants (DFGs) are grants provided by local housing authorities to fund essential home adaptations. These can give disabled people better freedom of movement into and around their homes (e.g. stairlifts, ramped access) and provide access to essential facilities within the home (e.g. level access showers). DFG's are a mandatory grant which is means tested for adults but not for children.

They are delivered in a partnership between the County Council, housing authorities and the Home Improvement Agency. The delivery differs in each district/borough area as service delivery has emerged. The main types of adaptations funded are:

- Shower/bathroom adaptations
- Through floor lifts
- Vehicle hardstanding
- Kitchen adaptations
- Conversion of outbuildings
- Garage conversions
- Extensions

Repairs

Access to public funding for repairs is limited, with only a small proportion of the Councils in Derbyshire able to offer grants or loans to fund repairs. The countywide Home Improvement Agency (HIA) is able to support residents to access charitable and other forms of funding available to eligible households.

Affordable Warmth

The Healthy Homes project, through the Nottinghamshire and Derbyshire Local Authority Energy Partnership, has successfully secured external funding to help vulnerable residents. Whilst the service supports all age groups there has been emphasis placed on older people. In addition some district and borough Councils are able to provide a local offer which is dependent on funding and criteria which varies according to local priorities. The Home Improvement Agency can access funding from Foundations to help residents and can have a broader but less intensive remit than the Healthy Homes project.

Help to move

Most support and services are designed around helping someone to stay put. But older people, their families, and relevant professionals increasingly understand that often investment to help someone stay put is not sustainable and that a well-timed move to more suitable accommodation offers better outcomes.With an increase reliance on self-serving internet based choice based lettings processes there is a concerns that even if older people can be encouraged to think about moving there is inadequate support for them to do so.

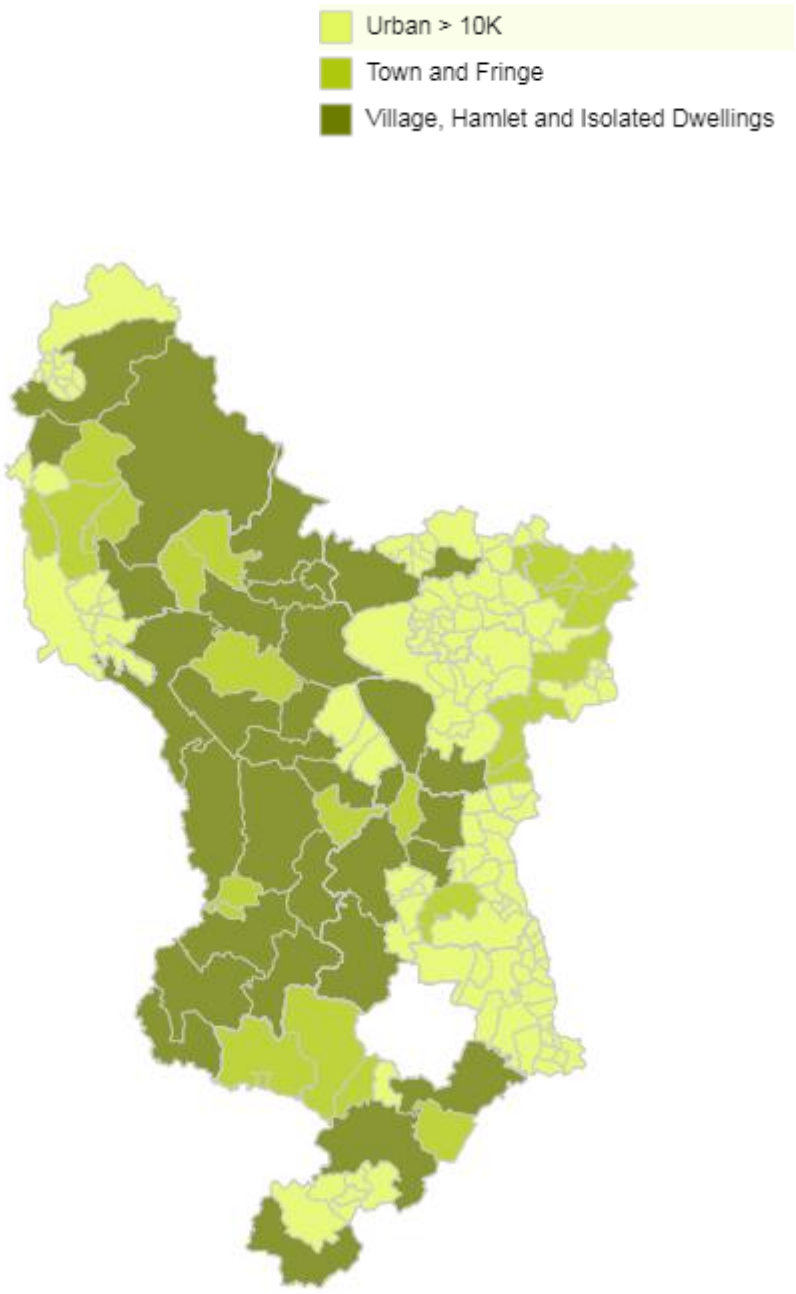
Workforce

In addition to technology, equipment and other forms of support we need to make sure an appropriately skilled and developed workforce is available to support many of the housing, care and support options outlined. Derbyshire has nearly full employment across the County, but in some geographic locations this creates a challenge in terms of recruitment and retention to key health and social care roles, such as registered nurses and domiciliary care workers. Derbyshire and its partners are working together through the Health and Social Care Talent Academy, to consider innovative solutions, but it is recognised that workforce supply and availability needs to be specifically considered implementing the recommendations within this document.

Recommendations: housing an ageing population in Derbyshire

Based on the policy and practice context, the supply and demand assessment, and the key findings from the research with older people, the following recommendations are proposed:

- To meet older people's needs and aspirations develop a **mix of** purpose-built **housing types and tenures** that will facilitate **'downsizing'/'rightsizing',** creating a climate where moving in later life becomes a realistic and positive choice, including:
    - **Contemporary 'care ready' retirement housing**, for rent and for sale, that is HAPPI or lifetime homes compliant i.e. without care on-site, but designed to enable people to age in place, to allow for decreased mobility and permit individuals to be cared for easily in their own homes should that be required. This offer can vary in size and scale making it suitable for urban and rural settings.
    - Mainstream housing developments that include well designed units to appeal to older people, i.e. that offer the features of 'care ready' housing but is part of an **inter-generational housing** offer to appeal to older people who don't want to move to age-designated housing.
    - Increase the delivery of housing with care options including **extra care housing, for rent and for sale;** however, it needs to remain a vibrant community and the benefits need to be effectively marketed to older people.
- Extend the range of information, advice and assistance available to homeowners to make adaptations and/or assistive technology as necessary to support enable ageing in place for older people wish to **remain living in their existing housing**. Whilst there are a range of projects and services which support people to remain at home, these are fragmented resulting in an individual receiving support from a range of organisations. Therefore there is scope to explore whether a county wide partnership could provide a more coordinated approach to the utilisation of equipment, adaptations and assistive technology to ensure that individuals are effectively supported to remain at home for as long as possible. A more co-ordinated approach would enable an individual to remain supported following a period of ill health, promote independence and contribute to preventing or delaying the need for more formal care and support away from their home.
- Identify existing **sheltered housing** schemes that can be improved to better support ageing in place for an increasing older population with growing care and support needs. Over time this is likely to mean that more people living in sheltered housing will have support needs.

- Consider decommissioning or re-designating existing sheltered housing schemes that are no longer fit for purpose in terms of design and location and replace with **care ready housing** where the site can accommodate a larger footprint.
- Proactively consider the housing and accommodation requirements of the increasing number of **people living with Dementia**. This will require service providers to tailor their offer to be Dementia friendly but also the potential development of hybrid **housing and nursing care models** that can cater for people living with Dementia with a wide range of care needs.
- Stimulate the market to encourage **a range of housing providers** to work in Derbyshire and develop the range of housing offers that older people need and aspire to live in.
- Effectively manage and work with the care home sector to support **development of sufficient nursing care capacity** and reduce the capacity of residential care to meet future need.
- **Develop the workforce to ensure availability of appropriately trained staff**, such as registered nurses or domiciliary care workers, which are locally based to support to delivery of different housing options for older people.
- Support the delivery of older people's housing by also **developing key worker housing or affordable housing options** in a mixed model approach to planning and development.
- Increase the development of **'step-down' housing-based models of care** as part of a wider reablement strategy to ensure timely discharge from hospital and/or prevent unnecessary readmissions. These can be potentially incorporated into more multi-disciplinary housing, health and care service models.
- A generational shift is underway and, over time, older people will become **increasingly sophisticated in their use of technology and social media**. Make homes technologically smarter and to maximise the use of technology, including **telecare**, to enhance the health and independence of individuals.
- Test out new **housing choices and ownership models** for people in later life including the scope to expand the use made of shared ownership aimed at older people: for example, to offer downsizing options to both 'care ready' and extra care housing.
- Identify strategic sites that can be released through the **One Public Estate** programme that can support the development and delivery of older people's housing.
- And as recognised by the recent UK Government Homes, Communities and Local Government Select Committee, develop a comprehensive **information and advice service in relation to housing options for older people** that enables older people and their families to be well informed in relation to planning future moves.

Annexe 1: 2011 Rural and Urban classification (2013), Office of National Statistics