



# SPECIALIST HOUSING DELIVERY PLAN

2017 - 2021

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## **Foreword**

Our needs are changing. We are living longer, which is a success story that we should celebrate, but sadly older people are likely to have at least two long-term conditions as dementia and frailty in later life is soaring. One in four people will experience a mental health condition at some point in their life, with one in six adults experiencing a mental health condition at any one time. Many more of us will have a mixture of needs to do with physical health, and perhaps difficulty in making decisions for ourselves.

Sometimes needs can be complex and expensive to meet. On top of this, Adult social care services in England are facing unprecedented funding pressures, due to the combination of a growing and ageing population, increasingly complex care needs, reductions in funding to local government and increases in care costs.

The UK government has recently announced that housing will play a central role in any new policy on health and social care that can only be met by putting in place a well co-ordinated and 'joined-up' approach.

For this reason it is important we set out how the council working with others will help people to stay living independently in a home of their choice for as long as they are able, regardless of their physical or mental health. It is important we demonstrate through robust evidence the changing needs facing Newcastle, and how we can help meet these needs in a fully costed and compassionate way.

The aim of this plan is to set out how we will fulfil the ambition of increasing personal choice, and secure opportunities to maintain independence through offering a home that fits with current and changing needs. Its primary concern is to bring into one place a schedule of new homes to be delivered to meet specific needs, and actions around helping people maintain their independence.

To deliver this plan we will use the Fairer Housing Unit and the People Directorate to lead this work, but will also work co-operatively with a range of partners to make housing choice for all a reality in Newcastle.



Councillor Jane Streater  
Public Health and Housing



Councillor Karen Kilgour  
Adult Care and Health

## Vision

The vision in Newcastle is one where *'People have access to a range of housing options and support to help them remain independent for as long as possible in a home of their choice'*.

We wish to see people enriched by their home environment which is supportive to their needs throughout their life-course. With this in mind we will provide a broader choice of housing options, including housing based models of care such as assisted living/ extra care, and preventative and early intervention services supported by improved information and advice.

### 1. What is this plan about?

This plan outlines what the council working with others will do to help people to stay living independently for as long as possible in a home of their choice. This could either be via a supply of purpose built housing designed to meet specific needs or needs groups, providing adaptations to existing homes, or signposting to a range of options to help people identify more appropriate housing suited to their current or changing needs.

Taking the above into account, this plan concerns itself with assisting adults with their home environment and independence for the following groups:

- **Older people**
- **People with a learning disability and /or Autism**
- **People with a mental health condition**
- **People with a physical disability.**

In line with our corporate parenting responsibility this plan also makes mention in the action plan the review of accommodation needs of looked after children and young people (LAC&YP). This is only a brief mention at present, but may be expanded within an update of this document following the review of LAC&YP accommodation needs.

The plan's focus is on the home environment (bricks and mortar). It does not seek to identify the personal care provision needed, costs associated with providing personal care, or how this is provided.

While this Plan is primarily concerned with the housing element of supported / specialist housing provision, this cannot be considered in isolation from the support offered. The support element is dependent on health and social care budgets and allocation of resources, this is particularly relevant in the development, commissioning and monitoring of new schemes.

From internal and external discussions it is evident that there is a need for a coordinated approach to ensure we have appropriate and sustainable supported housing solutions. This specialist housing plan sets out our priorities to help us inform our decisions about future specialist and supported housing developments and /or services to help people live to their fullest potential.

The following 3 priorities set out how we will work across the council and with other agencies to deliver the outcome and vision:

**Priority 1. Help people to live independently for as long as possible in their own home**

**Priority 2. Increase and diversify specialist housing provision to give people choice when their current home is unsuitable**

**Priority 3. Make sure people have the advice and information they need to understand the housing options and support available to them**

## **2. What is specialist and supported housing?**

The term *specialist housing* is used to describe a home designed or adapted to meet a specific need, e.g. a bungalow or level access home to meet the needs of older or disabled people, and where no support is immediately needed or provided. Specialist housing can be part of a new development or can include existing housing that has been adapted to include such things as a stair lift, or re-positioned electrical sockets.

*Supported housing* refers to homes where there is a level of support attached, either floating support (a visiting support worker) or where support is on hand 24/7. Supported housing covers a range of different housing types, including: group homes, hostels, refuges, supported living complexes and assisted living sheltered housing.

Due to the support element, rent levels in supported housing tend to be higher than those charged for general needs accommodation. Within this there are many models of provision and tenure type. This does not, however, include residential accommodation - which is part of care provision.

Through specialist and supported housing the express aim is to help increase or maintain independence and to help prevent future reliance on services or sudden crisis.

## **3. Why we need a specialist housing plan**

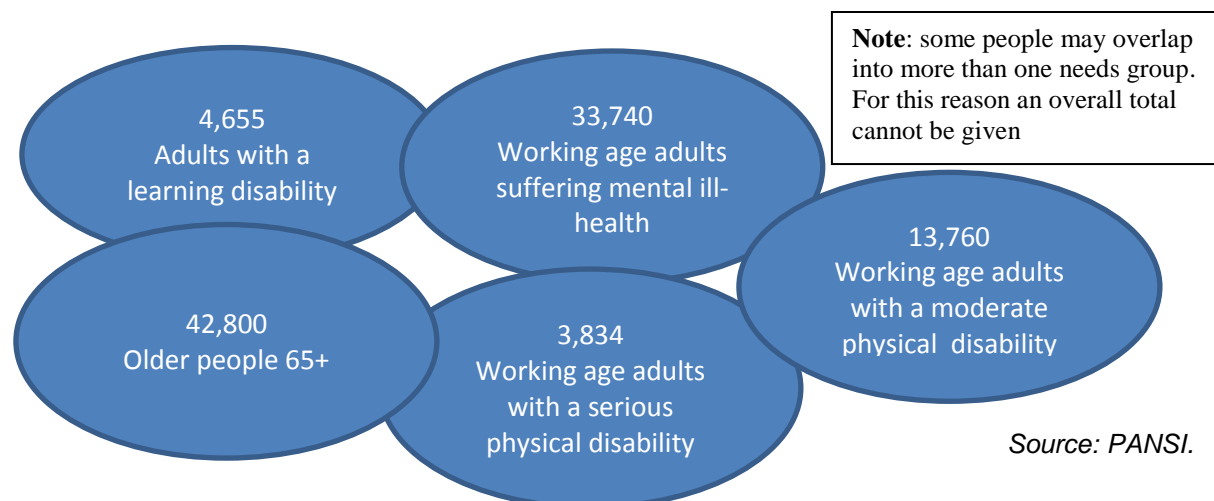
Safe, warm, secure housing is central to a person's health and well-being, to their ability to enjoy and take part in community life, and the ability to work and access education and training.

Being unable to access appropriate housing can contribute towards isolation, a loss of independence and in some cases can lead to a need for residential care, to hospital admissions or to homelessness.

In every community there are some people who require more tailored housing, with a degree of support attached, whether this is on a temporary or permanent basis. They may be vulnerable due to old age or ill health, have a long standing illness or disability, or lack the skills to manage a tenancy and need more support to maintain their independence.

In Newcastle there are a range of needs group requiring support and assistance to help them maintain their independence in a home of their choice that adequately meets their needs. This support and assistance ranges from help with physical support through adaptations to the home, to emotional and wellbeing support for adults with a mental health condition.

Figure 1: Profile of people living in Newcastle with special needs (2017):



For some people specialist or supported housing may be their last step on the housing ladder as they grow older and look for a home which will be able to meet their changing needs.

For others, specialist housing, with or without support, may be a step along the way to fully independent living, for example for those recovering after a period of mental ill-health, or can form a vital part of a planned route into mainstream.

### Linkages between housing and social outcomes

Supported and specialist housing is vital to some of our country's most vulnerable people. It helps many people to lead independent lives or turn their lives around. It is also an investment which brings savings to other parts of the public sector, such as health and social care and underpins a range of policy objectives.

There is a wide and growing array of evidence which demonstrates that housing is critical to social environment (the relationships, social contact and support networks that exist in a community) and health outcomes across the life-course. Some facts and figures from a recent Kings Fund report on 'Health and Housing'<sup>1</sup> outlined that:

- Poor housing costs the NHS in England between £1.4 billion and £2 billion each year due to excess cold, damp and safety issues (Nicol *et al* 2015). By

<sup>1</sup> The Economics of Health and Housing. The Kings Fund. Sept 2016. [https://www.kingsfund.org.uk/sites/files/kf/field/field\\_publication\\_file/Economics\\_housing\\_and\\_health\\_Kings\\_Fund\\_Sep\\_2016.pdf](https://www.kingsfund.org.uk/sites/files/kf/field/field_publication_file/Economics_housing_and_health_Kings_Fund_Sep_2016.pdf)

providing decent and safe housing, housing organisations can contribute to savings.

- Failure to fit adaptations or take other preventive measures is estimated to cost the NHS £414 million annually (Garrett *et al* 2016). Housing associations provide preventive adaptations.
- Falls cost the NHS around £2 billion annually. Housing organisations that offer falls prevention services to their residents and others are likely to be helping to reduce this burden (Tian *et al* 2014).
- The total cost of dementia to the United Kingdom is £26.3 billion, £4.3 billion of which is accounted for by the NHS and £10.3 billion by social care costs. Two-thirds of these costs are incurred by people with dementia and their families, either in unpaid care or in paying for private social care (Alzheimer's Society, undated). Housing organisations can provide support to allow people with dementia to live independently and safely.
- Delayed hospital discharges cost the NHS in England £820 million annually, though the true cost is probably higher, given that treatment may be diverted to the higher-cost private sector as a means of freeing up capacity (National Audit Office 2016). Housing organisations have an important role in helping patients discharged from hospital to return home quickly and safely and avoid re-admission.
- The rate of hospital admissions and accident and emergency (A&E) visits for homeless people is four times higher than for the general public. Overall use of health services by homeless people is between four and eight times that of the general population, at an excess cost of £85 million per year (Department for Communities and Local Government 2012). Provision of homes for more people will contribute to alleviating these costs.

Other reports have demonstrated the linkages between housing and mental health, poverty, obesity, anti-social behaviour, social connections, community cohesion and social isolation. Good quality specialist housing is inextricably linked to a whole range of desirable outcomes for residents - housing therefore has a pivotal role to play in wider public sector reform. These outcomes include:

- improved wellbeing, physical and mental health
- increased pro-social behaviour and community coherence
- increased community resilience, social environment and independence
- increased number of older people living in their own homes
- increased rates of safe discharge from hospital and self-management and care
- reduced fuel poverty and more warm homes reducing winter mortality
- reduced running costs for lower income residents leading to reduced levels of poverty
- improved standards of living and property (damp, overcrowding, fire safety etc.)

## 5. How specialist / supported housing is funded

There are additional costs relating to housing with support, compared with general needs housing. These include: the cost of staffing, the cost of care and support, and the cost of shared facilities and utilities. Part or all of this cost may be covered by a service charge to residents, and elements of this may be eligible for support through the Housing Benefit element of Universal Credit.

Despite these additional costs, supported housing makes good economic sense. It delivers average net savings to the public purse of around £940 per resident per year. Depending on the type of scheme, the level of savings can be even greater; for example for people with learning disabilities the saving is £6,764 per resident per year<sup>2</sup>.

Funding for specialist / supported housing takes the form of 'revenue' and 'capital' funding:

### **Capital Funding:**

Capital funding is the monies used to build the 'bricks and mortar' element and to refurbish the building of specialist and supported housing.

Capital funding is available through the Homes and Communities Agency (HCA) to support the development of supported and specialist housing. This will not be 100% of the funding required, but an amount to 'gap fund' the other sources of capital funding.

Other sources of capital funding are also used. These may include: local authority borrowing from the Public Loans Board, the use of council capital receipts from the sale of council assets (land and buildings), as well as using the Housing Revenue Account (the income from council rents) or reserves from registered housing providers.

### **Revenue Funding:**

Revenue funding covers the staffing costs associated with providing support. This amount varies between individuals dependent on the amount of support needed.

The sources of revenue funding:

- Individual contributions from savings and / or assets
- Housing Benefit / Local Housing Allowance
- Personal Independent Payment (PIP) or Disability Living Allowance (DLA)<sup>3</sup>
- Commissioning budgets for inclusion, prevention, and social care
- Personal contributions from savings and other assets

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<sup>2</sup> Paying for supported housing. House of Commons Briefing Note. June 2017. Ref: 6080

<sup>3</sup> You can keep getting DLA if [you're under 16](#) or you were born on or before 8 April 1948 and have an existing claim.



Coordinating support services into one site in purpose built supported housing often results in a cost saving that can be used to ensure we can support as many people as possible within reducing budgets.

## **Revenue funding for supported housing post 2020**

In October 2017 the Government released consultation on how supported housing will be funded post April 2020.

This new funding will involve three new methods:

- Sheltered and extra care housing via a 'Sheltered Rent'
- Short-term supported housing: grant funding
- Long-term supported housing funding

The consultation states this new funding method will provide:

- **Flexibility and deliverability:** the model will give local authorities an enhanced role in planning, commissioning and delivering supported housing to meet local needs; and
- **Value for money:** local authorities will be required to seek value for money in commissioning services as well as ensuring those most in need are provided access to supported homes as well as timely move on where appropriate to make best use of provision

Consultation runs until 23<sup>rd</sup> of January 2018, with the proposed new funding methods in place April 2020. The annual update of this plan will take into account the final formula of these new funding methods, and how these are applied.

## **6. Legal duties and responsibilities**

**The Care Act 2014** makes clear that local authorities must provide or arrange services that help prevent people developing needs for care and support, reduce the need for long term social care support, or delay people deteriorating such that they would need ongoing care and support. Services and assistance such as providing adaptations and advice to help people maintain their independence in their home forms part of this duty.

The Care Act also requires the local authority to establish and maintain an information and advice service. The range of topics which must be covered by information and advice are:

- The care and support system locally
- How to access the care and support available locally
- The choice and type of care and support available
- Accessing independent financial advice relating to care and support
- How to raise concerns about the safety or wellbeing of an adult with care and support needs.

Within the act it states that “Local authorities must consider how to meet each person’s specific needs rather than simply considering what service they will fit into. The concept of meeting needs also recognises that modern care and support can be provided in any number of ways, with new models emerging all the time, rather than the previous legislation which focuses primarily on traditional models of residential and domiciliary care.”

“The ambition is for local authorities to influence and drive the pace of change for their whole market, leading to a sustainable and diverse range of care and support providers, continuously improving quality and choice, and delivering better, innovative and cost-effective outcomes that promote the wellbeing of people who need care and support.”

The Care Act 2014 also gives local authorities a responsibility to assess the level of support that a carer may need to undertake their care role.

**Funding for Supported Housing (October 2017).** The government released consultation in October 2017 relating to how supported housing is to be funded from April 2020. The consultation also makes mention of the requirement to be placed on local authorities to develop:

- a. **Local strategic plan:** local authorities will be asked to produce a 5 year local plan, setting out how funding will be used to meet identified local needs;
- b. **Needs assessment:** local authorities will be asked to undertake a needs assessment to identify current provision and future need for all supported housing groups;

Local authorities will be asked to develop the strategic plan in partnership with the district / adjoining authorities, as well as with relevant partners including: Public Health England, Police and Crime Commissioners, Domestic Abuse and Sexual Violence Partnerships, probation services, Clinical Commissioning Groups, Adult Social Care Boards, Health and Wellbeing Boards, and others such as local providers and neighbouring local authorities.

These strategic plans will need to be in place prior to the new funding methods for supported housing going live in April 2020. The annual update of this plan will show how we are making progress in fulfilling this requirement.

## **7. Links to other plans**

This plan builds on and updates the current Older Person’s Housing Delivery Plan 2013 – 2017. The current older person’s plan is scheduled to run its course at the end of 2017. For this reason a new set of activities are needed so that we continue to improve the housing offer and home environment for older people. The older person’s section of this plan will take forward this activity to ensure housing for older people continues to meet expectations and needs over the life-course.

Market Position Statements have been developed that set the context and need of certain groups in the city in relation to housing and support. These market position

statements went through their own consultation and ratification processes, to ensure that they are fit for purpose in establishing the relevant issues and required activity.

This plan has used the data and findings from the market position statements for: Adults Mental Health, and Adults Learning Disability and /or Autism. These two market positions statements can be found via the following links:

[http://www.newcastle.gov.uk/sites/default/files/wwwfileroot/for\\_website\\_-\\_mps\\_mental\\_health\\_amended\\_june\\_2015.pdf](http://www.newcastle.gov.uk/sites/default/files/wwwfileroot/for_website_-_mps_mental_health_amended_june_2015.pdf)

[https://www.newcastle.gov.uk/sites/default/files/wwwfileroot/business/tenders-contracts-and-procurement/ld\\_mps\\_adults\\_final\\_v3.0.doc](https://www.newcastle.gov.uk/sites/default/files/wwwfileroot/business/tenders-contracts-and-procurement/ld_mps_adults_final_v3.0.doc)

<https://www.newcastle.gov.uk/business/tenders-contracts-and-procurement/market-position-statements>

## **8. Recent successes**

Scaling up delivery of specialist and supported housing is important if we are to promote independent living for a range of different households. For example there are now three new models of dementia housing located in Dinnington, Throckley and Walker. Adults who experience a learning disability can access a number of options – dependent upon individual circumstances and need - apartments with onsite 24/7 staffing; wheelchair accessible individual bungalows clustered around a staffing facility; shared housing or individual tenancies with outreach support.

Prior to 2014 there were only two modern Extra Care or Assisted Living schemes in the City catering for older people, providing a total of 84 apartments and bungalows:

- Bowmont House at Newcastle Great Park, and
- Park View Grange in Blakelaw.

Since then, a further 241 apartments have now been built across seven schemes:

- Assisi House in Walkergate,
- Trevelyan Court in Newbiggin Hall,
- Kilbourn House in North Kenton,
- Kenton Lodge in Gosforth.
- Assisted Living Schemes at IRDL in Byker,
- Treetops Village, Walker
- 5 dementia bungalows in Dinnington, and
- 46 self-contained apartments for people living with dementia in Throckley

These schemes have already prevented a number of unnecessary admissions into residential care, created a supportive home environment; while making significant revenue savings to the social care budget.

As a consequence of our approach to older people's housing, Newcastle was selected by the Local Government Association (LGA) in September 2017 as a good practice example for the way we provide and facilitate the delivery of housing for older people. Web link to publication:

[www.local.gov.uk/sites/default/files/documents/5.17%20-%20Housing%20our%20ageing%20population\\_07\\_0.pdf](http://www.local.gov.uk/sites/default/files/documents/5.17%20-%20Housing%20our%20ageing%20population_07_0.pdf)

In January 2017 the Council was awarded a significant grant allocation from the Homes and Communities Agency (HCA) following a challenging and competitive bidding process. Our 'Shared Ownership and Affordable Homes Programme 2016-21' (SOAHP) is the largest municipal allocation in the region and will deliver 449 new affordable and specialist homes. This grant is used in two ways to fund new housing built out within the Housing Revenue Account to be managed by YHN, and to fund development by registered providers (housing associations) in accordance with a brief set by the Council.

We continue to offer adaptations of up to £30,000 to help people to remain living independently in their home for as long as they are able, regardless of age. On average 300 adaptations are made each year, with around 200 of these being major adaptations, such as: stair-lifts, walk in shower and ceiling hoists.

## **9. How we will work**

Our approach is designed to deliver more robust interventions across the specialist housing market through direct intervention. We will do this through the use of resources (investment or council controlled asset) or through partnering and cooperative working where the investment and service plans of partners are aligned to those of the council through negotiations and development of shared objectives.

## **10. Consultation and review of this plan**

This plan has been formulated through engagement with professional and user groups represented in this plan.

The older person's section was developed with the assistance of the City's Elders' Council, a forum of older people who help shape services for older people in Newcastle. A workshop was held in mid-July 2017 to identify activity to be included, with comprehensive feedback received.

The learning disability section has been guided by Skills for People (part of Changing Lives) based in Jesmond<sup>4</sup> who assisted with the narrative and ideas in this section. A series of consultation events were held with service users and carers to determine the new housing suitable for people with LD in July and August as part of the Council's work with Inclusion North to promote the inclusion of people with learning disabilities, their families and carers<sup>5</sup>.

The section detailing people with a mental health condition was developed with assistance from Launchpad<sup>6</sup> and Voluntary Sector Advisory Group (VOLSAG) based in Broadacre House, Newcastle, who gave guidance on relevant issues and terminology.

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<sup>4</sup> Skills for People. Key House, Tankerville Place, Jesmond, Newcastle Upon Tyne, NE2 3AT

<sup>5</sup> <http://inclusionnorth.org/our-work/>

<sup>6</sup> Launchpad Mental Health Charity. <https://launchpadncl.org.uk/>

The development of the document was overseen by the Council's Specialist Housing Delivery Board, a representative board made up of officers from the Council's People and Place Directorates, and from Supported Services in Your Homes Newcastle.

Follow up sessions, discussion and reporting will be held with the above organisations throughout the delivery of this plan.

This plan will be updated annually to ensure it remains relevant, factual and deliverable and is aligned with the council's annual budget review which concludes in February each year.

Reviews will be carried out via consultation with housing specialists and professionals, partners, stakeholders and residents that have volunteered to take part in the process.

If needed, this document will add a dedicated section on the accommodation needs of looked after children and young people (LAC&YP) following the review of the accommodation needs of this cohort.

We have created a standard process for consulting on new specialist housing schemes using the learning and experience we have gained from undertaking reviews of new specialist housing schemes. Feedback from all these mechanisms will be used to further improve development of future delivery plans.

## 11. Older People

### **Key message**

Compared with 2015 figures, the older population (65+) in Newcastle is predicted to increase 34% by 2030 and will make up 47% of all population growth.

### **11.1 Introduction**

Older people are not a homogeneous group. There are differences of culture, social class, life-style, health and expectations, just as much as with any other age-group. Older people seek to be treated as individuals and to know that the diversity of their experiences, life choices and expectations are acknowledged in the way services are developed and delivered.

Older age covers two or even three generations and as a result the group is very diverse with no 'typical' older person. Some people may live very active lives, while others may not. Our housing offer needs to reflect this diversity.

People in later life spend more time in their homes and immediate neighbourhood than any other age group. Good housing and age-friendly environments help people to stay warm, safe and healthy, and enable them to do the things that are important to them. But compared to the rest of the population, people in later life are more likely to live in homes that are in a state of disrepair and pose a threat to health.

The Council is committed to making Newcastle a great place to grow old and a city in which a healthy later life is enjoyed by everyone. We are clear that we no longer wish to support any further development of residential care for older people in the City. To respond to this we will increase the number of assisted living and independent living schemes that meet the requirements of older people in terms of design and location, ensuring they can be easily adapted to meet changing needs over the life-course.

### **11.2 The National Picture**

Britain's population is ageing and people can expect to live longer healthier lives than in previous generations. The older population is forecast to grow to 21.6m by 2037 for the over 60s and from 1.4m (2012) to 3.6m by 2033 for the over 85s. Given this context planning guidance recognises the importance of providing housing for older people.

As older people are living longer, healthier lives, the Government's policy toward Health and Adult Social Care is underpinned by a principle of sustaining people at home for as long as possible – so despite the ageing population, current policy means the number of care homes and nursing homes will actually decline, as people are supported to continue living in their own homes for longer.

Most of the UK population lives in cities or major towns, as defined by the ONS as having a usual resident population over 75,000<sup>7</sup>. As the number of older people living in cities increases, there is growing recognition that cities need to become 'age-friendly' to help people remain independent and active as they age, and improve the quality of life and health of older people.

### Defining an age friendly city:

The concept of an 'age-friendly city' was developed by the World Health Organisation (WHO) and the term refers to a city that enables and encourages people to age well according to their needs, desires and capacities. WHO identifies eight domains of age-friendly cities that enable older people to participate in all aspects of life, including social, economic, cultural and civic affairs.

The eight domains of an age friendly city are:

- **Outdoor spaces and buildings:** A sufficient number of clean, pleasant and accessible public areas with adequate facilities (for example seating and toilets).
- **Transport:** Accessible, reliable, affordable and frequent public transport that has good coverage across city areas.
- **Housing:** Sufficient, affordable and adaptable housing (and home maintenance and support services) available to rent or buy in safe and convenient locations.
- **Social participation:** Conveniently located, accessible, well-lit venues that are easily reached by public transport.
- **Respect and social inclusion:** Regular consultation by public, voluntary and commercial services to ensure that services and products suit varying needs and preferences.
- **Civic participation and employment:** A range of flexible paid opportunities and options for older volunteers.
- **Communication and information:** A basic, regular, accessible and effective communication system across different formats.
- **Community support and health:** Adequate range of free or subsidised health and community support services (including home care services) that are conveniently located and accessible.

WHO has established a global network of 287 age-friendly cities and communities across 28 countries. Eighteen are in the UK: Belfast, Brighton & Hove, Bristol, Coventry, Derry City and Strabane, Glasgow, Isle of Wight, Leeds, Lewisham, Liverpool, Manchester, **Newcastle**, Nottingham, Salford, Sheffield, Southwark, Stockport and Stoke-on-Trent. For more information about the network see here <https://www.ageing-better.org.uk/our-work/area/age-friendly-communities/>.

In Newcastle, our commitment to become an age-friendly city has taken the focus of developing policies and practices which demonstrate how the city is adapting to

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<sup>7</sup> ONS (2016) Major towns and cities – Methodological note and user guidance.

demographic change and the impact on the city as a whole. Age Friendly is a cross-cutting theme in our Wellbeing for Life Strategy and part of our evolving process to become a healthy city.

The promotion of lifetime neighbourhoods and providing a choice of accommodation is an important factor in the delivery of an age friendly city. Policy CS11 within our Core Strategy and Urban Core Plan (CSUCP) encourages the provision of Lifetime Homes, Wheelchair Accessible Homes, and increasing choice of suitable accommodation for the older population and those with special needs including bungalows, sheltered accommodation and extra care accommodation

### 11.3 The Local Picture – population projections and need

Newcastle’s population is ageing, and currently there is insufficient accommodation to meet this growth as well as the expected diverse range of need.

In Newcastle there is an overall predicted increase in the population from 292,281 in 2015 to 322,963 by 2030; a growth of 30,682, or 10.5% of the population over the forecast period. The most significant feature in the population projections is the projected growth of older people aged 65+. Compared with 2015 figures it is projected this age group will rise 14,194 or 34% by 2030<sup>8</sup>, and will make up 47% of all population growth (2015 – 2030). They are also more likely to have a disability or reduced mobility (over half of households 85+), with resulting housing needs

Figure 2

	2015	2030	Change 2015 - 2030	% Growth
Age 65+	41,783	55,977	14,194	+34%
Total – all ages	292,281	322,963	30,682	+10.5%

Source: Gateshead & Newcastle Strategic Housing Market Assessment Figure 5.

The most notable feature of the population projections is the number of people aged 85 and over, and with this a likely increase in numbers of people living with dementia.

The increase in older households will have implications for support services, extra care housing, adaptations and other age related care requirements. While this presents a range of complex challenges for the city it also presents some exciting possibilities in developing innovative housing design and new housing care and support models for people as they move from one life stage to another. The Council is committed to making sure Newcastle is a great place to grow old, and a city in which a healthy later life is enjoyed by everyone.

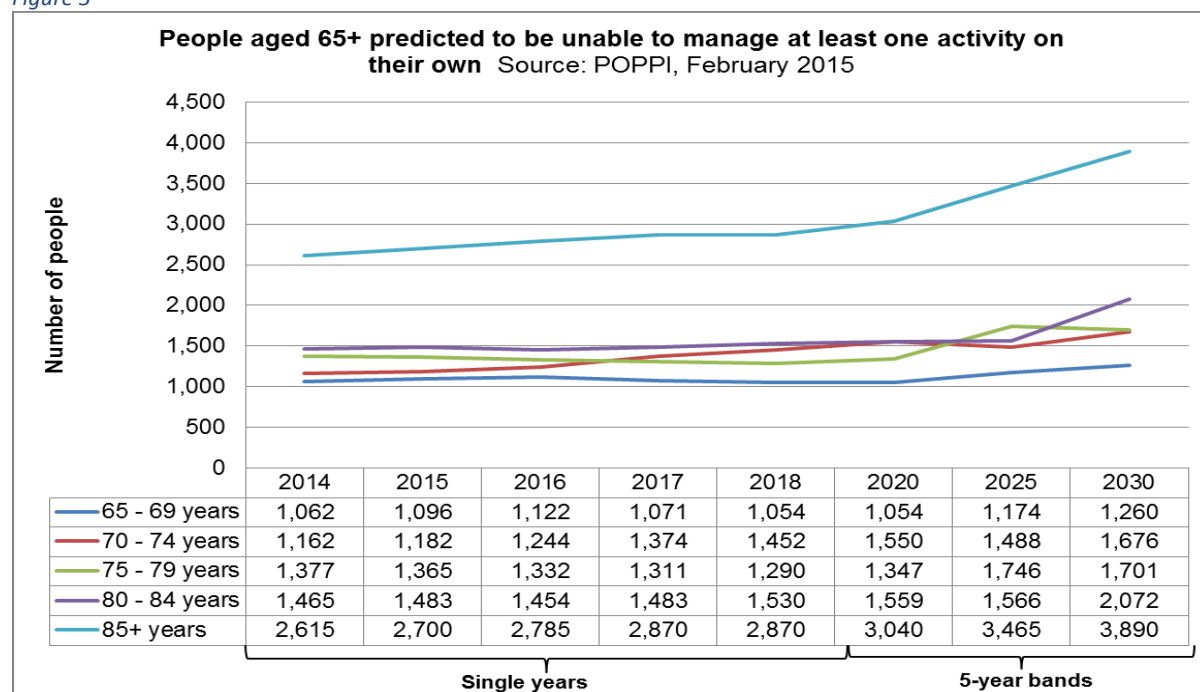
*Projecting Older People Population Information System (POPPI)* provides projections of the number of people age 65 and over unable to manage at least one mobility activity. Activities include: going out of doors and walking down the road;

<sup>8</sup> Gateshead & Newcastle Strategic Housing Market Assessment Figure 5.



getting up and down stairs; getting around the house on the level; getting to the toilet; getting in and out of bed. Overall, the number of people age 65 and over predicted to be unable to manage at least one mobility activity in 2014 was around 7,681. At least a third of these are aged 85 and over. The overall numbers are predicted to increase to 8,550 by 2020, and to 10,599 by 2030.

Figure 3



## Dementia

In England and Wales it is estimated that [1.2 million people will be living with dementia by 2040](#) up from almost 800,000 today – a 57% increase from 2016 figures, largely driven by people living longer<sup>9</sup>. At present the costs of dementia to the UK economy are estimated to be £23bn a year.

In 2015, it is estimated that, among people aged 65 or over in Newcastle, 3,127 have dementia which corresponds to a diagnosis rate of approximately 54%, which is above the England average of 45%<sup>10</sup>.

<sup>9</sup> University College London. Published in the British Medical Journal. July 2017

<sup>10</sup> Know your city: a profile of the people living in Newcastle Page 14 of 32 Part Four: Illness and disease in Newcastle. 4.2 What people are living with. Downloaded from [www.knownewcastle.org.uk](http://www.knownewcastle.org.uk)

**Priority 1. Help people to live independently for as long as possible in their own home**

Our priorities are to increase the numbers of units and diversity of specialist housing for people who need them across all tenures. In doing this each individual will be assessed based on their current situation, and supported to make their own choices about where they want to live, in line with their circumstances and need. If eligible, they will also receive care and support to enable them to live independently.

The Government is keen to promote social wellbeing with the return of a broader public health function to local government from the former Primary Care Trusts (PCTs). One of the aims of transferring public health responsibilities to local authorities was to better integrate health and social care services and other activities that affect health, such as housing and the maintenance of independence for older people. This has led to closer working to develop initiatives aimed at reducing health inequalities through unhealthy homes. **The Care Act 2014** makes it clear that local authorities must provide or arrange services that help prevent people developing needs for care and support or delay people deteriorating such that they would need ongoing care and support. Services and assistance such as providing adaptations and advice to help people maintain their independence in their home forms part of this duty.

#### **11.4 Older People and home ownership**

Data tells us that older people are more likely to own their home than reside in any other tenure. Nationally the majority of older people are home owners<sup>11</sup> (76%), 18% are in social housing and 6% are in private rented housing<sup>12</sup>. 1 in 4 renters are older people of which 43% have owned a property which they sold to clear debt, help children or release funds for their retirement<sup>13</sup>.

In Newcastle 61% (34,020) of older people are home owners, 32% are in social housing and 7% are in private rented housing<sup>14</sup>.

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<sup>11</sup> Ageing Well: A Housing Manifesto – Older People’s Housing Champions May 2017

<sup>12</sup> Homes and ageing in England BRE Bracknell

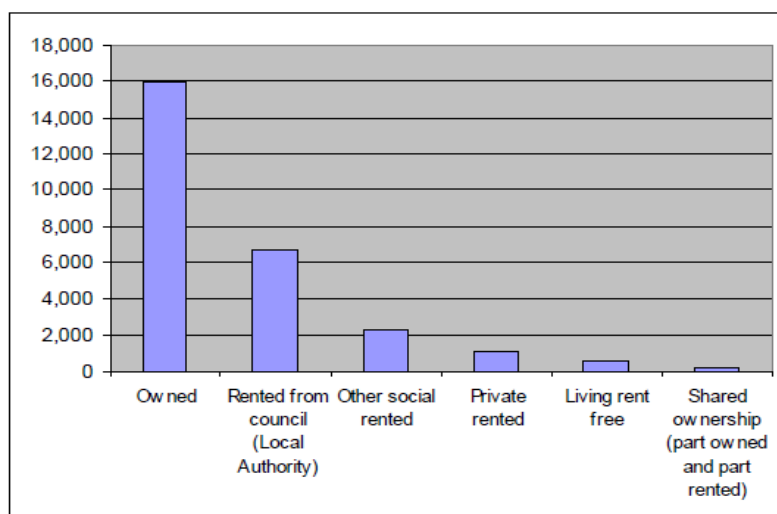
<sup>13</sup> Moneywise – November 2013

<sup>14</sup> Census 2011

Figure 4

## Tenure

### Households aged 65 and over by tenure



The graph shows that owner occupation is the most significant tenure for households where the Household Reference Person (HRP) is aged 65 and over<sup>2</sup>.

Source: Census 2011

For this reason, it is important that housing owned and occupied by older people continues to offer a suitable housing option for as long as they want to or as long as they feel they are able to manage.

Clearly many of the pensioner home owners will be mortgage free. But with incomes in many instances limited to state pension level this will mean many are 'asset rich but cash poor'. In these instances they will be unable to afford to maintain their property to a safe and acceptable standard. The growth in the age group will also put more call on council services to ensure older people's well-being and independence is maintained.

The following programmes of advice, support and interventions aim to allow older people to continue to reside in their home for as long as they wish or are able to and prevent crisis moves into residential care.

### 11.5. Disabled Facilities Grant (DFG)

With the average Disabled Facilities Grant (DFG) costing less than £7,000 as a one-off; the cost savings to health and social care are potentially very high, particularly where it reduces falls. Almost 1 in 3 people aged 65 plus, and 1 in 2 aged 80 plus, experience a fall each year. About 5% experience a fracture or require a stay in hospital. The one off cost of a DFG highlights the positive impact that the provision of adaptations can have for social care budgets<sup>15</sup>.

Annually the City Council and its partners provide around **300 adaptations** funded by a Disabled Facility Grant (DFG) per year; with around 200 of these being major adaptations such as stair-lifts, walk in showers and ceiling hoists. Around 70% of these are for people aged 65 and over. Providing DFGs helps people to stay living in

<sup>15</sup> The Disabled Facilities Grant. Before and after the introduction of the Better Care Fund. Foundations. June 2016

their own home for longer, and avoid having to go into a residential care setting which can be both costly to the Council and for the client.

Based on completions in the two years 2015-2016 and 2016-2017, the average cost per completion of DFGs awarded in Newcastle was £4,485. These DFG awards cover a range of works, such as:

- Widening doors and installing ramps;
- Improving access to rooms and facilities, e.g. stair lifts or a downstairs bathroom;
- Providing a heating system suitable for needs; and
- Adapting heating or lighting controls to make them easier to use.

A survey published in November 2015 by Foundations, the national body for Home Improvement Agency and Handyperson Services, asked local authorities to return the average age of people who had been placed in residential or nursing care according to whether or not they had previously received a DFG, and the average age at which they died.

<b>Average Age</b>	<b>No DFG</b>	<b>Had a DFG</b>
Move in to Residential/Nursing Care	76	80
At Death	82	82

For people who have had to move into residential care, those who had previously received a DFG on average moved just before their 80th birthday and stayed there for 2 years. Those people who hadn't applied for a DFG moved when they were 76 and stayed in residential care for another 6 years.

Funding for DFGs is not ring-fenced and from April 2014 the DFG budget was combined with other funding streams including: Carers Break and Re-ablement to form the Better Care Fund (BCF). This pooling of budgets is intended to encourage authorities to take a joined up approach to improving outcomes across health, housing and social care. The fund could be used to support the objectives of the BCF supporting initiatives that facilitate speedy hospital discharge and prevent readmission. In support of these principles the annual national budget for Disabled Facilities Grant was increased in 2016/7 by almost 80% and will have increased by a further 22% by 2019/20.

<b>Year</b>	<b>BCF</b>
2017/18	£1,867,086
2018/19	£1,867,086
2019/20	£2,294,240 (estimated)

Further information can be found by clicking on the following link: [adapting-your-home](https://www.informationnow.org.uk/information/browse-by-category/?catName=adapting-your-home) : Or by pasting the following address into your web browser <https://www.informationnow.org.uk/information/browse-by-category/?catName=adapting-your-home>

### **11.6 Care and Repair Newcastle' - Home Repair Loans (formerly Helping Hands)**

Clearly many of the pensioner home owners will be mortgage free but incomes in many instances will be limited to state pension level. This means many are 'asset rich but cash poor'.

The review of the Disabled Facilities Grant (DFG) service carried out in 2015 considered alternative mechanisms for delivery of the adaptations service and concluded that the service was already acting as a Home Improvement Agency (HIA) because clients are guided and supported through the entire process. In view of this, approval was given to establish a Home Improvement Agency, Care and Repair Newcastle, which was established in November 2016.

The Council continues to support the provision of home loans to carry out essential repairs and administration of these loans is now carried out by Care and Repair Newcastle. This is a recyclable fund which enables new loans to be awarded as funds are repaid. However austerity means this funding is limited, with priority given to applications from older and vulnerable households to assist them to carry out essential repairs to their properties if they cannot access commercial funding. Home owners can access loans from £500 - £15,000 which are secured by placing a charge on the property.

Email: [careandrepairnewcastle@newcastle.gov.uk](mailto:careandrepairnewcastle@newcastle.gov.uk)

Hyperlink: [Care & Repair Newcastle](#)

Web Address: [www.newcastle.gov.uk/health-and-social-care/disabilities/equipment-and-adaptations-home/disabled-facilities-grants](http://www.newcastle.gov.uk/health-and-social-care/disabilities/equipment-and-adaptations-home/disabled-facilities-grants)

Historically applications for assistance have been low however a proactive marketing campaign will be undertaken in 2017/18 to raise awareness with the aim of providing at least **6 new loans each year**.

### **11.7 Telecare**

Telecare - telecare and 'telehealth' services use technology to help people live more independently at home; which include personal alarms and health-monitoring devices. Telecare and telehealth services are especially helpful for older people and people with long-term conditions, as they can give the client and relatives peace of mind and can help people live independently in their own home for longer. This helps people avoid a hospital stay, and, or delay moving into a residential care home. YHN's Telecare Service, (Ostara), is an example of this type of prevention service, which at the end of March 2014 had more than 4,900 clients, including many within the private sector.

Ostara – Newcastle

Ostara is the name of the community care alarm system delivered by Your Homes Newcastle.

State of the art alarm equipment and a 24 hour response service create a safe home environment, striking the balance between peace of mind and independence that enables our customers and their families to get on with their lives as freely as possible.

We have a menu of equipment to choose from, ranging from simple alarm buttons to fall detectors, pill dispensers and door opening sensors so that you can choose what is right for you and will make you feel safe.

Our experienced team of response officers is based in Newcastle upon Tyne and works around the clock every day of the year and will always be there when you need them. Prices start from £5.95 per week with no installation or set-up costs.

Phone: 0191 277 7470

Email: [contactus@ostara.org.uk](mailto:contactus@ostara.org.uk)

<http://www.ostara.org.uk/contact/>

**Priority 2. Increase and diversify specialist housing provision to give people choice when their current home is unsuitable**

National Planning Policy outlines that in order to create inclusive and mixed communities, local planning authorities should plan for a mix of housing based on the needs of different groups in the community. New residential accommodation should be adaptable to changes in individual circumstances.

***Housing for older people***

*The need to provide housing for older people is critical given the projected increase in the number of households aged 65 and over ... Plan makers will need to consider the size, location and quality of dwellings needed in the future for older people in order to allow them to live independently and safely in their own home for as long as possible, or to move to more suitable accommodation if they so wish. Supporting independent living can help to reduce the costs to health and social services, and providing more options for older people to move could also free up houses that are under occupied.*

**Planning Practice Guidance (March 2015), ID 2a-021**

### **11.8 New Homes for Older People**

Good quality homes in decent and well connected neighbourhoods are very important to people's health and wellbeing. This is especially true as we get older because we tend to spend more time at home and in our local areas as we age and there is increasing likelihood that we live alone.

#### Benefits of retirement living:

- Neighbourly form of development.
- Reduces demands on health and social services as single visits are possible to pool resources.
- Provides companionship and a community which reduces isolation, loneliness and depression.
- Well-located to shops and essential services, reducing the need to travel by car.
- Helps to maintain an independent lifestyle and health and general wellbeing.
- Safety and security features reduce anxieties and worries experienced by many older people.
- Ongoing maintenance provided by the management company<sup>16</sup>.

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<sup>16</sup> Retirement Living Explained. A Guide for Planning & Design Professionals. Newcastle University. April 2017

## 11.9 Local Policy

Over the last three years, 1,116 adaptations were made to existing housing through the Disabled Facilities Grant (DFG), demonstrating a need for adaptable and accessible properties. Furthermore, completing these adaptations is very costly and so building homes to a higher standard for adaptability and accessibility will help reduce the financial burden on the Council and on residents themselves to adapt their home to make it more suitable for their needs. Moreover, not all properties can be adapted – nationally, 27.7% of all housing cannot be made to meet the current minimum standards for accessibility even with adaptations, and a further 15.3% could meet the standards but only with major work. This leaves 43% of housing which could be made more accessible, although again this could involve significant building work and still does not mean that these properties could be made to meet the accessible/adaptable standards proposed.

A key finding of our Strategic Housing Market Assessment [SHMA] 2017 is that the very significant forecast growth in the numbers of older people will have major implications for demands for support resources and specialist accommodation. While this presents a range of complex challenges for the city, it also presents some exciting possibilities in developing innovative housing design and new housing care and support models for people as they move from one life stage to another.

Our priorities will be to increase the numbers of units and diversity of specialist housing for older people in order to better meet the needs of all older people across all tenures, including providing an alternative to residential care and reducing revenue care costs.

Our joint Core Strategy and Urban Core Plan with Gateshead sets out policy for delivering the new homes, including those needed to cater for older people.

### **Policy CS11 Providing a Range and Choice of Housing**

Promoting lifetime neighbourhoods with a good range and choice of accommodation, services and facilities to meet varied and changing needs, will be achieved by:

1. Requiring 60% of new private housing across the plan area being suitable for & attractive to families, with a minimum target of 16k new homes to have 3 or more bedrooms
2. Encouraging provision of Lifetime Homes and Wheelchair-Accessible Homes
3. Increasing the choice of suitable accommodation for the elderly population and those with special needs including bungalows, sheltered accommodation and extra care accommodation.
4. Providing adequate space inside and outside of the home to meet the needs of residents.
5. Providing 15% affordable homes on all developments of 15 or more dwellings, subject to development viability.
6. Focussing the provision of purpose built student accommodation within the Urban Core



### CS14 Wellbeing and Health

The wellbeing and health of communities will be maintained and improved by:

1. Requiring development to contribute to creating an age friendly, healthy and equitable living environment through:
  - Creating an inclusive built and natural environment,
  - Promoting and facilitating active and healthy lifestyles,
  - Providing good access for all to health and social care facilities, and
  - Promoting access for all to green spaces, sports facilities, play and recreation opportunities.
2. Promoting allotments and gardens for exercise, recreation and for healthy locally produced food.

**Policy DM6** within Newcastle's Development and Allocations Plan – DAP (2015-2030) sets out accessibility requirements for new homes. This policy stipulates a requirement for new housing developments of 11 dwellings or more to provide 25% of dwellings to be built to general accessible and adaptable standard.

**Policy DM8** of the DAP sets out criteria for the development of specialist residential accommodation. All development providing specialist residential accommodation will be required to be:

1. Located within an existing community to deliver a mix of housing within that community.
2. Easily accessible to existing local services and facilities, including local health care services.
3. Designed to adaptable and accessible and adaptable and/or wheelchair adaptable standard.

The aim of local policy is to increase the number and supply of housing that meets the requirements of older people in terms of design and location, ensuring they can be easily adapted to meet changing needs, so that individual residents are able to maintain their independence for as long as possible. Housing for older people can include, but not limited to:

- Sheltered housing,
- Extra care / assisted living housing,
- Retirement villages

### 11.10 Innovation in Delivery

**Annuity Leaseback Model (ALBM):** As a result of reduced Government funding for social and affordable housing, the Council has been exploring ways to secure finance that would allow us to continue to deliver homes for affordable rent (rent at 80% of local market rent). One approach being taken forward is an *Annuity Lease*

*Back Model (ALBM)*. This involves the Council procuring a partner to finance, design and build homes for affordable rent. The Council would then lease the homes from the developer for a set period of time, enabling the partner to secure a long term fixed return for their investment. At the end of the agreed period the leases would come to an end and all of the properties would revert back into Council ownership.

For older people's housing there are a number of sites for inclusion as part of the overall ALBM.

Older people's housing schemes included in the ALBM are:

- 20 assisted living apartments, including for dementia care at Clumber Street, Westgate,
- 53 units of assisted living and retirement apts. at Parkway (phase1)
- 22 units on the site of the former Westerhope Day Centre.
- 34 units – mixture of apartments and bungalows in Coniston Court, Fenham
- 19 units of older persons housing on land at Avison Street, Westgate

The Fairer Housing Unit has started the process of procuring for the preferred partner, with the aim of starting development in 2018 and completed 2021.

**Future Homes:** A cross sector partnership of Newcastle University, Newcastle City Council, industry partners and third sector/community organisations has come together to form the exciting Future Homes project. This is developing new models of housing for older people that will combine in one place modular building ideas, flexible living, low energy heating systems and digital technology that provides support for everyone throughout their lives. The design for these dwellings is being developed from a rich programme of co-design workshops, public engagement and specialist workshops with health professionals. This is not just a research project. We have development finance, through our partner Karbon Homes, to build 4 demonstrators in 2018 and then, in 2019, to continue with a further 30 units.

**Improved energy efficiency standards:** In line with our commitment to be carbon neutral by 2050 we will work with developers to improve energy efficiency standards in new build properties to reduce heating costs and to help the environment.

One standard in discussion is the *Association for Environment Conscious Building (AECB)*. The objective and aims of the AECB is to facilitate environmentally responsible practices within building. Specifically the AECB aims to:

- promote the use of products and materials which are safe, healthy and sustainable
- encourage members projects that respect, protect and enhance the environment
- make available comprehensive information and guidance about products, methods and projects
- support the interests and endeavor of members in achieving these aims

More information can be obtained via the following web link:

[Association for Environment Conscious Building](#)

### 11.11 Planned Delivery of Older People's Housing

By 2020 we expect the older people's housing market to provide a choice of mixed tenure housing option. This will comprise specialist housing linked to care to meet the diverse needs, such as assisted living. Similarly, the programme will include a range of options such as bungalows and apartments, with or without support, which will continue to meet the needs of older people as they progress through the life-course

The impact of new build activities over the life-time of this plan (up to April 2021) will see the construction of over 582 homes for older people, including level access units. All of these will be either wheelchair accessible to allow immediate use for a wheelchair user; or will have sufficient space standards and design to be wheelchair adaptable, should the need arise in the future.

- 226 Bungalows
- 94 Tyneside apartment
- 135 Sheltered apartments, and
- 127 Assisted living apartments

For full list of new homes and timeframe for delivery see [Appendix One](#):

### 11.12 Housing our Ageing Population Panel for Innovation (HAPPI)

We encourage new build schemes suitable for older people to follow the HAPPI principles. These principles are based on 10 key design criteria. Many are recognisable from good design generally - good light, ventilation, room to move around and good storage - but they have particular relevance to the spectrum of older persons' housing which needs to both offer an attractive alternative to the family home, and be able to adapt over time to meet changing needs.

HAPPI principles reflect:

- Space and flexibility
- Daylight in the home and in shared spaces
- Balconies and outdoor space (where appropriate)
- Adaptability and 'care ready' design
- Positive use of circulation space
- Shared facilities and 'hubs'
- Plants, trees, and the natural environment
- Energy efficiency and sustainable design
- Storage for belongings and bicycles
- External shared surfaces and 'home zones'

For more information on the HAPPI principles visit:

[www.housinglin.org.uk/Topics/browse/Design-building/HAPPI/](http://www.housinglin.org.uk/Topics/browse/Design-building/HAPPI/)

**Priority 3. Make sure people have the advice and information they need to understand the housing options and support available to them**

There are several options older people may wish to consider if the home is no longer as suitable as it once was. When considering option we must be open to thinking about moving, but also look into services that might help with 'staying put' successfully. Below are links to some of the main options.

### **11.13 Staying put and adapting your home**

Most older people wish to stay put, and if this is what you want to do, the challenge is to do it well. Much can be done to make most houses or flats easier to use, and there are reliable services to help organise adaptations or repairs to make your home more suitable or comfortable. A bit of help can be arranged, as can trips out; and an emergency call system could give peace of mind.

For further information click on the following link: [Read more about staying put and independent living](#)

### **11.14 Moving to sheltered housing**

For some older people, moving to sheltered housing is a choice, for others it is a necessity. Either way, sheltered housing offers a positive option for those seeking a viable housing alternative.

There is a wide range of housing in the UK built specially for older people, from traditional sheltered accommodation to retirement villages. More and more 'schemes' have care staff discretely at hand to provide assistance, when needed, to frailer and more vulnerable old people.

For further information click on the following link: [Read about housing with support or care and assisted living](#)

### **11.15 Helping Older Households Downsize**

As we grow older our needs change. Our homes may become too large and unmanageable and the desire to down size to a more appropriate property to help maintain independence and well-being becomes evident. It might be worth considering moving to a new home without stairs, in a more convenient location, in better repair, easier to maintain or without a large garden.

Data provided in *Figure 4 on page 18* shows owner occupation as the largest tenure of households aged 65 and over. Evidence tells us that many older owner occupier households needing to downsize would prefer to remain as owner occupiers rather than moving to a smaller home on a shared ownership basis or rent from the council or a housing association.

For this reason, it is important that we provide as part of our ambitious new build programme an option to offer older owner occupiers the choice to purchase a smaller home or bungalow. We will also explore working with developers to offer a

number of bungalows on a discounted purchase basis for those who wish to downsize, but where the value of their current home does not cover the full purchase price of a new bungalow.

There are services to help you find a suitable home and to help with all that's involved – from packing, to finances to arranging the move itself. For further information click on the following link:

For further information click on the following link:

[Read about moving to more suitable property and retirement accommodation](#)

### **11.16 Tyne and Wear Homes Housing Options Service**

In 2016 we developed the housing options approach for older people as part of Tyne and Wear Homes – our sub-regional allocations and lettings system. The aim of this is to assist people to plan and make informed decisions about the options that could meet their requirements and by doing this will contribute to prevention, early intervention and crisis intervention.

This includes:

- ensuring Tyne and Wear Homes is an integral part of the information and advice offer in Newcastle
- targeting information and advice to people with care and support needs
- identifying opportunities to promote housing options to people who may not be actively thinking about their requirements

This activity contributes to our duty under the Care Act 2014 to provide information and advice for people with care and support needs or who could develop needs in the future. The duty requires the inclusion of housing information and advice. YHN, in partnership with the Council's People Directorate, have restructured their services to provide a greater focus on delivering advice and assisting people to realise their housing options. Advice on the suitability and benefits of Assisted Living is now included in individual care assessments, a model we would like to explore for other housing options.

The Disabled Adaptations Service Review has recommended the inclusion of housing options advice when people request an assessment for adaptations. As part of a review of their Telecare Service YHN are working with the People Directorate to look at the inclusion of advice on Telecare options in care assessments. The social care section on the Council's website has been updated to meet the requirements of the Care Act and includes links to relevant housing information such as Tyne and Wear Homes.

The website can be found by clicking on the following link [Housing options for older-people](#)

Or by pasting the following address into your web browser

<https://www.informationnow.org.uk/article/housing-for-older-people/>

### 11.17 Equity Release

Equity is the difference between the market value of a property and the value of any mortgage or other charges secured against it. If there is no mortgage (as is often the case with older residents), then the equity is the full market value. It is the Government's view that, where equity exists in a property, with the exception of Disabled Facility Grants, some of this potential value should be released to fund any renovations or improvement work that is necessary.

This is not a service which is offered by the Council as it is heavily regulated. Numerous financial institutions who offer this service and charge a fee based on the amount of capital released.

Home owners are advised to seek independent legal and financial advice before pursuing this option.

### 11.18 Energy efficiency

The level of energy efficiency has a direct impact on the living conditions of the resident, the fabric of the building, and importantly the health and wellbeing of occupants. An inefficient property will be cold, expensive to heat, damp and draughty which will adversely affect the health and well-being of the occupier. These homes have a bigger impact on vulnerable residents exacerbating health conditions in the older population and those with an existing illnesses. Where residents are on low income, in extreme cases they may be in fuel poverty and be faced with a choice between 'heat or eat'. In short there are three main causes of fuel poverty:

- High energy prices
- Low household income
- Poor energy efficiency of the property

It is estimated that poor insulation means around £1 in every £4 currently spent heating UK homes is wasted.

Newcastle residents can contact Energy Services at Newcastle City Council for advice on energy efficiency and energy bills.

Phone  : 0191 278 3427. Email: [energy@newcastle.gov.uk](mailto:energy@newcastle.gov.uk),

Web: [www.newcastle.gov.uk/energyadvice](http://www.newcastle.gov.uk/energyadvice)

### 11.19 Information NOW

It is important that older people have access to information related to housing options that suit their current and changing needs over the life-course. For this reason, the Council in partnership with others, facilitate advice to help older people make an informed choice on the options available to them.

Newcastle City Council has invested in the development of Information NOW – an information and advice website for older people and their families and carers in

Newcastle upon Tyne. Information NOW is a comprehensive website offering advice and information about organisations and services and events and activities in the area, including a section on Housing and helping with housing costs.

At the centre of the Partnership are the voices and experiences of older people. The Elders Council of Newcastle is the city's older people's forum and is leading on supporting older people across the city to raise issues, tell their stories and put forward ideas. The website can be found by clicking on the following link [Information Now](https://www.informationnow.org.uk/).

Or by pasting the following address into your web browser:  
<https://www.informationnow.org.uk/>

## 12. Adults with Mental Health Conditions

### **Key message:**

One in four people will experience a mental health condition at some point in their life, with one in six adults experiencing a mental health condition at any one time. Common mental health conditions include: stress, anxiety and depression.

### **12.1 Introduction**

This section of the document does not attempt to deal with the causes of mental health conditions nor the impacts of social isolation. It is instead aimed at the provision of housing and related support services for those with complex fluctuating support needs and / or challenging behaviour.

Mental health conditions can affect the way people think, feel and behave. They affect around one in four people in Britain, and range from common mental health conditions, such as depression and anxiety, to more rare problems such as schizophrenia and bipolar disorder. Mixed anxiety & depression is the most common mental disorder in Britain, with **7.8%** of people meeting criteria for diagnosis<sup>17</sup>. Stable and appropriate housing is vital to allow people to address and receive treatment / support for mental ill-health. This promotes individual outcomes and reduces impact on families, communities and care services.

Our vision for Newcastle is that those with mental health support needs should have these met through mainstream housing wherever possible, rather than in residential or institutional settings. Supported housing can be key to achieving this, by providing a more intensively supported environment as part of the route back into mainstream housing. Close links with community mental health teams and with other involved professionals are vital.

### **12.2 The national context**

The annual cost of mental health to the NHS and society in England are estimated at £105 billion<sup>18</sup>, and treatment costs are expected to double within the next 20 years. Mental health is influenced by a number of biological and social risk factors, including genetic characteristics, age and gender, socio-economic characteristics (employment, marital status), individual circumstances (life events, social support), geography, and societal factors (deprivation, crime). There are also a number of vulnerable groups who are at a particularly high risk of developing mental health conditions, including asylum seekers, offenders, homeless, substance misusers, looked after children, people with a physical illness, and the unemployed.

A mental health condition can feel just as bad, or worse, as any other physical illness – only it is not visible and can often be stigmatised.

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<sup>17</sup> NICE (2011). Common mental health disorders | Guidance and guidelines | NICE. [online] Available at: <http://www.nice.org.uk/guidance/cg123> [Accessed 25 Aug 2015].

<sup>18</sup> <https://www.gov.uk/government/news/new-investment-in-mental-health-services>



A mental health condition is often not experienced in isolation. National figures show:

Table 4

<b>18 to 64 years of age</b>	% male	% female
Common mental disorder	12.5	19.7
Borderline personality disorder	0.3	0.6
Ant-social personality disorder	0.6	0.1
Psychotic disorder	0.3	0.5
Two or more psychiatric disorders	6.9	7.5

*Source: PANSI – accessed July 2017*

- 43% of those accessing homeless services have a mental health condition
- An estimated 69% of rough sleepers have both a mental health and a substance misuse problem<sup>19</sup>

### 12.3 The local context

Over 33,740 people in Newcastle aged 18 to 64 are estimated to suffer from a mental health condition (short and long-term). It is predicted that figures for mental health conditions, psychiatric and psychotic conditions will increase marginally by 2020 (source: PANSI).

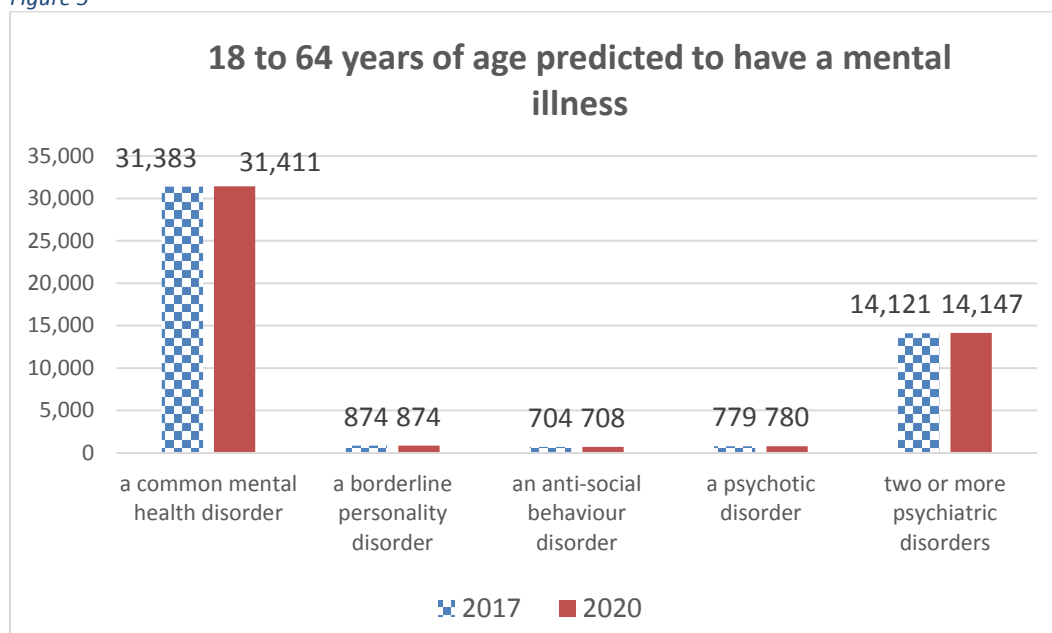
Table 5

<b>18 to 64 years of age predicted to have</b>	<b>2017</b>	<b>2020</b>	<b>Change</b>
a common mental health disorder	31,383	31,411	+28
a borderline personality disorder	874	874	0
an anti-social behaviour disorder	704	708	+4
a psychotic disorder	779	780	+1
two or more psychiatric disorders	14,121	14,147	+26

*Source: PANSI – accessed July 2017*

<sup>19</sup> Key facts and trends in mental health (mental health network NHS confederation)

Figure 5



### Active inclusion – Gateway

The number of people referred through the Newcastle Gateway to Supported Accommodation for people with a mental health condition can be an indicator of what is happening ‘on the ground’. Data for the last three years shows an increase in referrals:

	2016/17	2015/16	2014/15
<b>Referrals</b>	338	315	265*
<b>Admissions</b>	12	12	12

\*Calculated from 9 months worth of data due to changes in how figures are collected

For most people suffering a mental health condition general needs housing is the best place to live, with visiting care or support tailored to their needs. In Newcastle, 74.3% of those we support with mental health needs live independently. For some, however, supported housing is required as a ‘step down’ from residential or hospital based care, or can be a temporary ‘step up’ for people struggling to manage in their existing home. A small minority of people may always require some level of supported housing.

### 12.4 Needs analysis

Specialist interventions are provided by a range of health based community teams with a range of floating support commissioned through the Council.

Demand on mental health services in Newcastle is expected to increase:

- in-line with working age adult population growth (just over 3%) over the next few years
- ongoing economic uncertainty and cuts to welfare.

There are a relatively small number of people with multiple needs and exclusions. These may include a mental health condition, substance misuse, homelessness, long term homelessness or offending. These individuals can struggle to access services, as it is not clear which is the 'primary presenting need', or they fail to fit service criteria due to substance misuse, or chaotic lifestyle. There are three main factors for clients in this group:

1. Accessibility –often accommodation most suitable for someone is not available either because of their poor tenancy history or because of the current level of their support needs around drug and alcohol/Mental Health. Our clients are often seen to be too chaotic and disruptive to other tenants in more therapeutic and supportive housing options.
2. Suitability – as a result of accessibility issues clients are often given unsuitable housing options like direct access hostels which either means they turn down the housing option and choose instead to sleep rough/sofa surf or when they are housed, their support needs are seen to be too high (particularly around mental health) for the service to deal with. We often feel that a mental health specific supported accommodation option would be most suitable but they are very rarely available to our clients (and/or no capacity).
3. Sustainability – as a result of unsuitable housing placements, things generally breakdown quite quickly and we have poor sustainability rates/high turn-over and placements

These individuals can represent a disproportionate cost to services and the community, as they are more likely to become 'revolving door' admissions as the situation breaks down in one place, and they are forced to move on. They can remain stuck in the homeless resettlement route, as they are unable to achieve resettlement outcomes.

## 12.5 Current provision for adults suffering from a mental health condition

There is a clear drive for a co-ordinated approach between the council and health partners and for joint commissioning on supported housing for people with mental health conditions.

### **Local drivers**

- Focus on community based services
- Alternatives to in-patient care.
- Focus on carers
- Authorities budgetary pressures

*Source: Market Position Statement for mental health June 2015*

The NHS provide the majority of expenditure on mental health on:

- GP services and therapeutic interventions
- Specialist community based mental health services
- In-patient units
- Services for people with especially complex mental health needs, including older people with an organic disorder including dementia

They aim to support people in the least restrictive setting, focusing on early interventions and strengthening community services. A report by the Care Quality Commission (CQC) in July 2017 rated Northumberland, Tyne and Wear NHS Foundation Trust as one of only two NHS Trusts in the country as outstanding in the services provided for people suffering a mental health condition. It was found by the CQC that patients are placed at the centre of everything they do. This was confirmed by the highly positive feedback received from people who use the Trust's services<sup>20</sup>.

Newcastle City Council and its partners provide help to residents to sustain their independence through prevention services, emergency responses and targeted support to avoid repeat episodes of crisis. Services to assist this include:

- Specialist home care
- Advocacy
- Supporting carers

Supported housing with packaged support is also available. Current provision at Scrogg Road, Walker, covers 16 self-contained one bed flats (3 wheelchair accessible) offering rehabilitation, crisis support and outreach support to those experiencing or recovering from mental ill health who live in the community.

## **12.6 Planned Delivery of housing for people with a mental health condition**

Newcastle City Council's ambition is to help people live independently in the community with the best quality of life open to them, with the understanding that some people will require long periods of rehabilitation to enable such a level of recovery.

By 2020 we will provide a choice of mixed tenure housing options for people suffering a mental health condition. This will comprise specialist housing linked to care to meet the diverse needs, such as supported living and floating support.

The impact of new build activities over the life-time of this plan (2018-2020) will see the construction of a **7 unit 'step-up step-down'** service to support vulnerable people with mental health conditions to live independently in their communities. By Step Up we mean short to medium term support provided to help a person when their needs escalate or in response to crises in their life. By Step Down we mean a service aimed at, for example, young people in transition who have lived in a residential / fostering setting and require a period of support to adjust to living in the community.

For full list of schemes and timeframe see [Appendix One](#):

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<sup>20</sup> The State of Care in Mental Health Services. 2014 – 2017. The CQC. July 2017

## 13. Adults with a Learning Disability and /or Autism

### **Key message**

A learning disability can be mild, moderate or severe. It is thought up to 350,000 people nationally have severe learning disabilities

### 13.1 Introduction

A learning disability is a reduced intellectual ability and difficulty with everyday activities – for example household tasks, socialising or managing money – which affects someone for the whole of their life. People with a learning disability tend to take longer to learn and may need support to develop new skills, understand complicated information and interact with other people.

#### **Mild, moderate or severe learning disability**

A learning disability can be mild, moderate or severe. Some people with a mild learning disability can talk easily and look after themselves, but take a bit longer than usual to learn new skills.

It is estimated that around 1.5m people in the UK have a learning disability. This means they can have difficulty:

- understanding new or complex information
- learning new skills
- coping independently

Others may not be able to communicate at all and have more than one disability ([Profound and multiple learning disability](#)).

It is thought that up to 350,000 people nationally have severe learning disabilities<sup>21</sup>.

The level of support someone needs depends on the individual. For example, someone with a mild learning disability may only need support with things like finding training or employment: While someone with a severe or profound learning disability will often need fulltime care and support with every aspect of their life – they may also have physical disabilities.

People with certain specific conditions can have a learning disability too. For example, people with Down's syndrome and some people with autism.

It's important to remember that with the right support, most people with a learning disability can lead independent, fulfilling and rewarding lives.

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<sup>21</sup> <http://www.nhs.uk/livewell/childrenwithlearningdisability/pages/whatislearningdisability.aspx>

### 13.2 Needs analysis - the Local Context

Using data from *Projecting Adult Needs and Service Information (PANSI)*, and *Projecting Older People Population Information (POPPI)*, it is estimated that 4,655 people aged 18-64 years have a learning disability in Newcastle. The trend is expected to remain similar to 2030 (4,632 people). For those aged 65 and over, the numbers are estimated to increase from 852 in 2014 to 942 in 2020 and 1,157 by 2030.

Figure 6

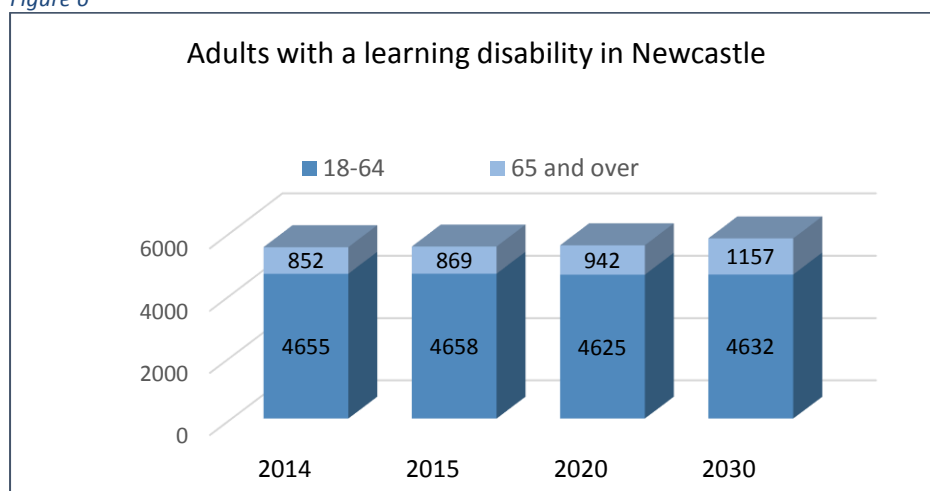
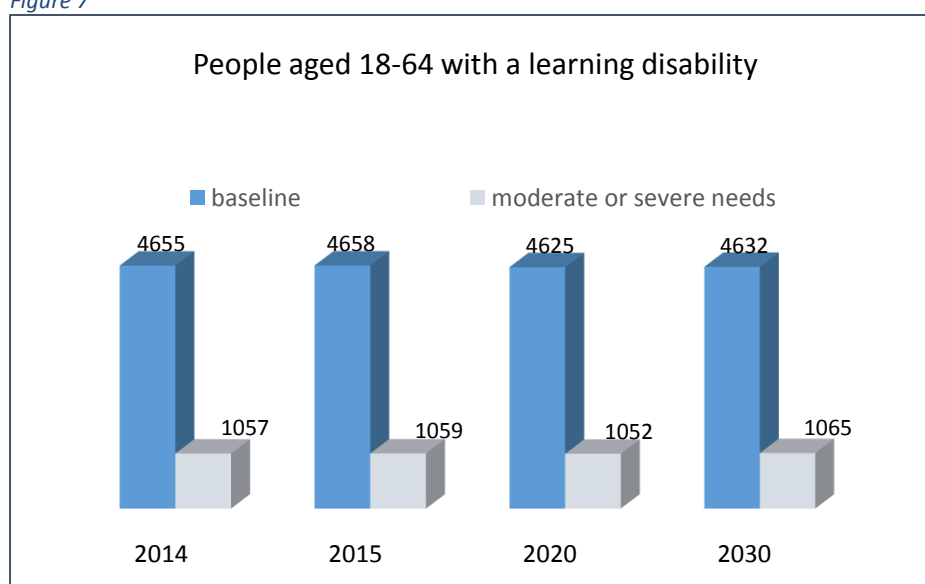


Figure 7



For people with a learning disability, there are similar trends mirroring the general population. Projections show:

- a very small decrease in 18-64 age group from 4655 in 2014 to 4632 by 2030.
- an increase from 852 to 1157 in the 65 plus age group.
- a similar percentage increase in number of older people with moderate and severe needs.

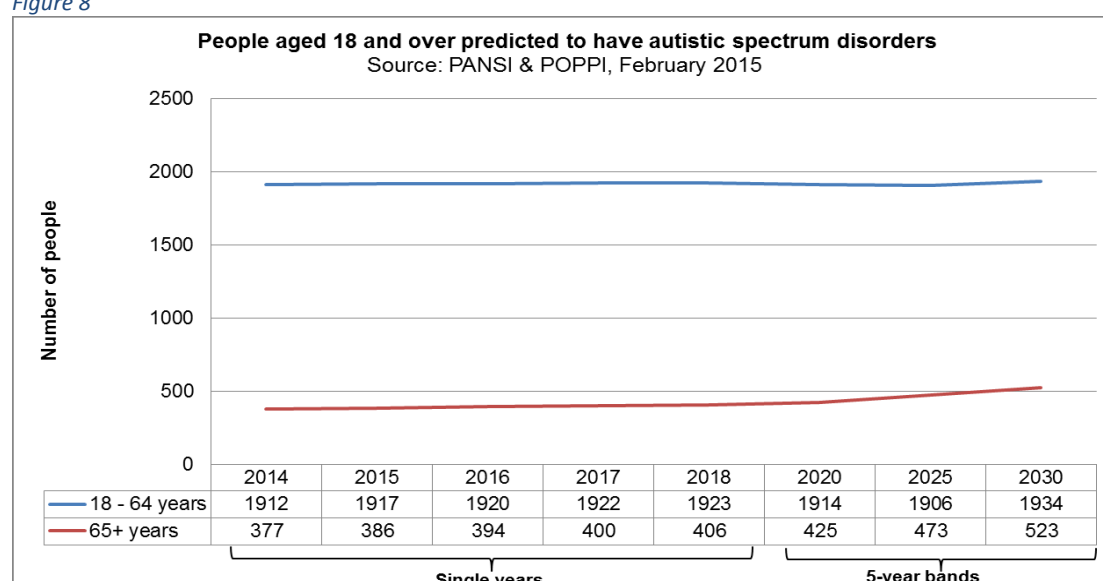
This means that all services will need to increase their capacity to meet the needs of people with a learning disability, who are likely to have increasing health needs as they grow older.

### Adults with autistic spectrum disorders

PANSI and POPPI data based on existing prevalence rates shows that in 2014, 1,912 people aged 18 to 64 years were predicted to have autistic spectrum disorders and a further 377 people aged 65 and over. By 2030, the numbers are predicted to increase by 22 people aged 18 to 64 years and by 146 people aged over 65 years

The data from the state school census suggests we should expect approximately 40 people with autistic spectrum disorder to transition into adulthood each year and this will rise over time (assuming no migration of families in and out of the city).

Figure 8



In Newcastle, of those with a learning disability known to social services:

- 89% (766 clients) of the LD population are in settled accommodation
- 10% (90 clients) are in unsettled accommodation<sup>22</sup>
- 1% (8 clients) are unknown

### 13.3 Current provision

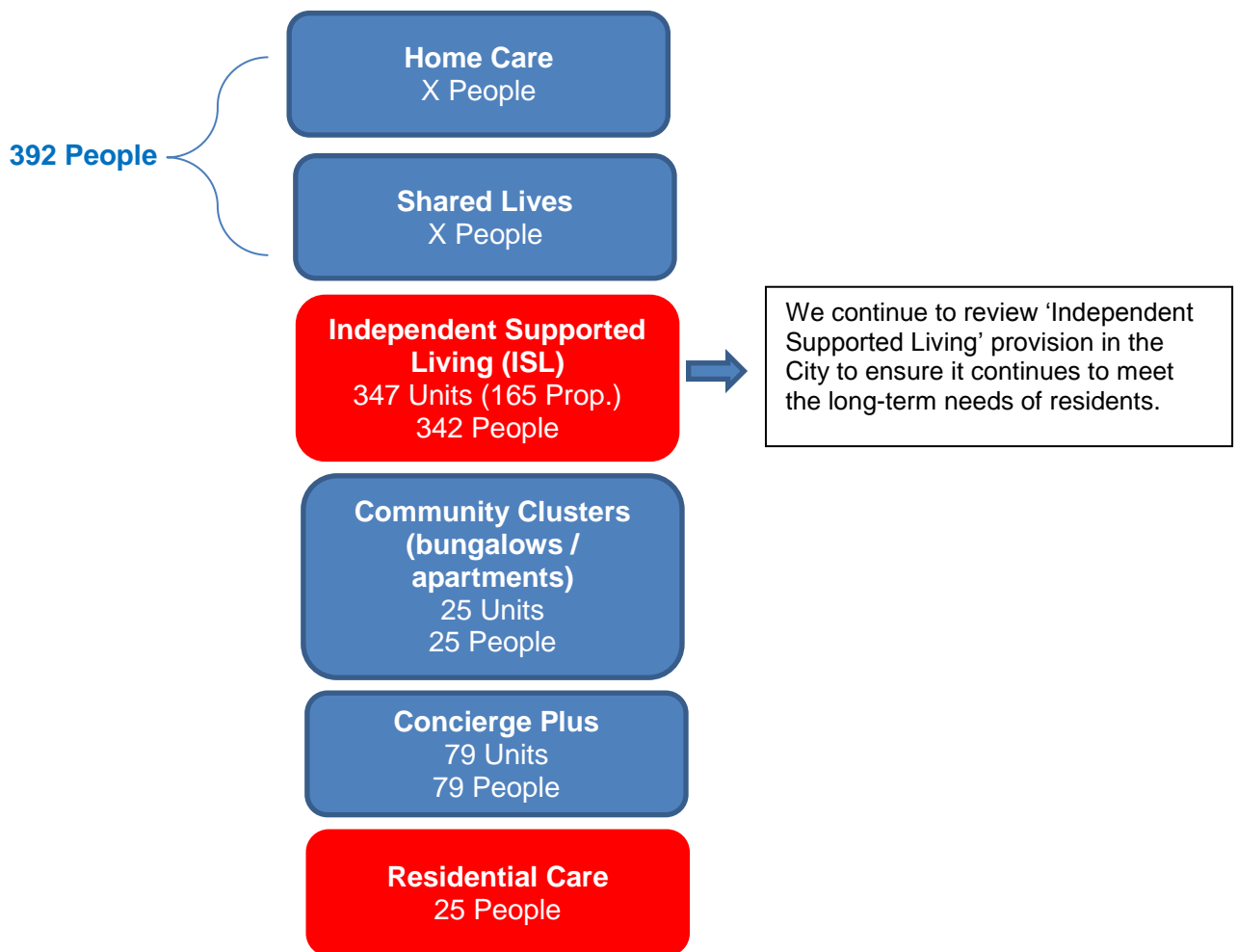
Newcastle already has a wide ranging offer of housing with support options available to people with a Learning Disability and/or autism. Alongside home care services, we provide a range of Independent Supported Living options, either in purpose built accommodation such as Concierge Plus or in a large number of smaller, shared tenancies. For people with more complex needs we have invested in recent years in

<sup>22</sup> It should be noted that the 90 people who are in 'unsettled accommodation' are in residential care. This is a statutory definition and relates to the type of accommodation and tenure. It does not mean accommodation is unsuitable. It may mean their needs are being 'over catered' for in entirely appropriate settings

Community Cluster services, and in exceptional circumstances we will place people in residential care services.

Current housing provision for adults with LD and /or autism

The actual number of people receiving different types of housing and support varies, but we **estimate** that the number of people living in different accommodation types is as follows:



### 13.4 Consultation with people with LD and /or autism

A series of community engagement sessions with Newcastle residents who have a learning disability and / or autism were held over the Summer 2017 to seek views on housing. These sessions were administered by Skills for People with the aim of:

- exploring whether the proposed (additional) models of housing and support would be effective in meeting the needs of a person with a learning disability and/or autism;
- providing Newcastle City Council with feedback relating to these proposed models of housing and support, including any changes or alternative suggestions.



In order to explore the effectiveness of these models in meeting the needs of a person with a learning disability and/or autism, the need to speak to several 'stakeholders' was identified:

- 55 People with a learning disability and/or autism
- 18 Family carers of people with a learning disability and/or autism
- 11 Professionals including service providers, commissioners and social workers

It is not possible to include the full findings in this section, but the following summary shows what participants saw as important factors in making any housing to cater for people with LD a success. Themes that emerged were:

- Maintaining the home
- Independence, inclusion and accessing the community
- Receiving appropriate support
- Staying safe/risk management
- Developing and/or maintaining relationships

Maintaining the home was a priority for people with a learning disability and/or autism, and people discussed this in terms of long-term stability and independence. The concern that people with learning disabilities and/or autism identified most often as important is that the home is "affordable", that they would be able to pay their bills and rent on time, and that they would be able to afford to keep the home 'warm'.

The full report on the findings can be obtained from:

[sean.cocking@newcastle.gov.uk](mailto:sean.cocking@newcastle.gov.uk)

### **13.5 Future supply of suitable housing for people with a learning disability and / or autism**

The Council has made a significant investment in ensuring that there is a strong, broad range of housing options available for people with a learning disability and / or autism. However we are working to strengthen our provision and to meet challenging budget targets set by reductions in government funding.

#### New housing options

By 2020 we will broaden the range of specialist and supported housing options for people with a learning disability and/or autism.

During the period to 2020, we will create up to 60 specialist units suitable for people with a learning disability and/or autism. This new provision will be in the form of two new types of service, which build on models we have implemented successfully in recent years. We are currently consulting service user groups on these options and will update this plan (and our development plans, where necessary) based on that feedback.

We aim to deliver 3 **Enhanced Concierge Plus** schemes, providing support for adults with learning disabilities who need support to live in the community. The

service will be aimed at people who need more support than our current Concierge Plus schemes. A single care provider will provide 24/7 support, offering an on call service, direct one to one social care support, housing and welfare support and day time activities. Each scheme will contain 15 one- or two- bedroom apartments. We are currently considering the following sites for these services:

1. Site of former Belmont Church, Walker
2. Wansford Avenue, Fenham
3. Location to be confirmed

In addition to this, we will build on the success of our Community Clusters by creating 3 new '**Virtual** Clusters' within the City. With a similar support model to our existing Community Clusters (with a dedicated care team providing 24/7 support to up to 5 people), these new clusters will have a wider geographic spread, enabling people with slightly less complex needs to live more independently in the community. Each of the 3 schemes will comprise of 5-6 bungalows within short distance of each other, with staff facilities located close by. We are currently considering the following sites for these services:

1. Ridgewood Gardens, East Gosforth
2. Thornley Road, Denton
3. Hartburn Walk, Kenton

For a full list of schemes and timeframe for delivery see [Appendix One](#)

### **13.5 Home Ownership for people with Long-term Disabilities Scheme (HOLD)**

Clients who have a mild learning disability and who are employed can access mortgage funding from mainstream lenders as there are no requirements to declare disability on a mortgage application - unless they do not have capacity. (Clients who do not have capacity must have an authorised appointed advocate to act on their behalf).

To assist those who fall within this criteria, the government's '*Home Ownership for people with Long-term Disabilities Scheme*' (HOLD) assists people to buy any home for sale on a shared ownership basis. The minimum share is 25% and the maximum 75% - with rent payable on the unpurchased share. The mortgage itself is paid through Support Mortgage Interest (SMI) with additional top up payment being made from other benefits.

## 14. Adults with a Physical Disability

### 14.1 National guidance

Paragraph 50 of the National Planning Policy Framework (NPPF) stipulates that local planning authorities should plan for households with specific needs. Planning Practice Guidance (PPG) states:

#### ***Households with specific needs***

*There is no one source of information about disabled people who require adaptations in the home, either now or in the future.*

*The Census provides information on the number of people with long-term limiting illness and plan makers can access information from the Department of Work and Pensions on the numbers of Disability Living Allowance/Attendance Allowance benefit claimants. Whilst these data can provide a good indication of the number of disabled people, not all of the people included within these counts will require adaptations in the home.*

*Applications for Disabled Facilities Grant will provide an indication of levels of expressed need, although this could underestimate total need. If necessary, plan makers can engage with partners to better understand their housing requirements.*

Planning Practice Guidance (March 2015), ID 2a-021

As previously noted, the Government's reform of Health and Adult Social Care is underpinned by a principle of sustaining people at home for as long as possible. This is reflected in the recent changes to building regulations relating to adaptations and wheelchair accessible homes published in the Building Regulations 2010 Approved Document Part M: Access to and use of buildings (2015 edition incorporating 2016 amendments – for use in England)<sup>23</sup>. Three standards are covered:

- M4(1) Category 1: Visitable dwellings (Mandatory)
- M4(2) Category 2: Accessible and adapted dwellings (Optional, similar to the Lifetime Homes standard)
- M4(3) Category 3: Wheelchair user dwellings (Optional, equivalent to the wheelchair accessible standard)

National policy states that local authorities should identify the proportion of dwellings in new developments that should comply with the requirements for Category 2 and Category 3 as part of the Local Plan, based on the likely future need for housing for older and disabled people (including wheelchair user dwellings) and taking account of the overall impact on viability<sup>24</sup>.

<sup>23</sup> <https://www.gov.uk/government/publications/access-to-and-use-of-buildings-approved-document-m>

<sup>24</sup> Planning Practice Guidance. ID 56-007

## 14.2 Local context

In Newcastle the following numbers of working age people are predicted to have a moderate or serious physical disability:

<i>Table 6</i>	2017	2018	2019	2020	2021
Total population aged 18-64 predicted to have a moderate physical disability	13,760	13,817	13,844	13,853	13,825
Total population aged 18-64 predicted to have a serious physical disability	3,834	3,856	3,872	3,883	3,880
% of 18-64 population with a serious physical disability	1.9	1.9	1.9	1.9	1.9

*Source: PANSI – accessed July 2017*

The above data shows that the proportion of the working age population in Newcastle with a serious physical disability will stay stable at 1.9% of those aged 18-64 over the next five years. If we project these figures up to 2035 using PANSI data, then this will remain constant at 1.9%.

## 14.3 Planned Delivery of housing for people with a serious physical disability

In keeping with Planning Practice Guidance (PPG) the council has identified the need for suitable housing to cater for those with a physical disability who may need level access housing. See Appendix One for a full list of accessible housing, some suitable for people with a physical disability, to be delivered.

## 14.4 Helping physically disabled people maintain independence

Annually the Council and its partners provide around **300 adaptations** funded by a Disabled Facility Grant (DFG) per year, with around 200 of these being major adaptations such as stair-lifts, walk in showers and ceiling hoists. Around 30% of these are for people aged under 65. Providing DFGs helps people manage living in their own home or cut back on the need for care.

Grants cover a range of works, such as:

- Widening doors and installing ramps;
- Improving access to rooms and facilities, e.g. stair lifts or a downstairs bathroom;
- Providing a heating system suitable for needs; and
- Adapting heating or lighting controls to make them easier to use.

## 15. Activities to help meet our Priorities

<b>Outcome: 'People have access to a range of housing options and support to help them remain independent for as long as possible in a home of their choice'</b>			
<b>Priority 1.</b> Help people to live independently for as long as possible in their own home <b>(P1)</b>			
<b>Priority 2.</b> Increase and diversify specialist housing provision to give people choice when their current home is <b>(P2)</b> unsuitable			
<b>Priority 3.</b> Make sure people have the advice and information they need to understand the housing options and support available to them <b>(P3)</b>			
<b>Key Actions</b>	<b>Target / End Date</b>	<b>Lead</b>	<b>Relevant Priority</b>
1. Provide adaptations and improvements to households who have physical disabilities or sensory loss so that they live in a home which meets their requirements. These adaptations are available for people of both working and of pensionable age.	300 Per annum	Fairer Housing Unit	P1
2. Provide helping hands to applications from older and vulnerable households to assist them to carry out essential repairs to their properties if they cannot access commercial funding	6 new loans each year.	Fairer Housing Unit	P1
3. Carry out a review into the scope and delivery of disability housing services to ensure resources & standards reflect customer experience and promotes a 'right first time' approach to advice & support	<ul style="list-style-type: none"> <li>• August 2017 - Initial scope to Specialist Housing Delivery Board</li> <li>• March 2018 - Recommendations</li> <li>• April 2018 – Roll out recommendations</li> </ul>	Fairer Housing Unit	P1

*Newcastle Specialist Housing Delivery Plan 2017 - 2021*

4. Commission a new Housing with Care Framework for older people	July 2018	Inclusion, Commissioning & Procurement	P1
5. Commission a Specialist Home Care Framework for adults aged under 65	April 2018	Inclusion, Commissioning & Procurement	P1
6. New Tenancy Agreement is written in easy read format to ensure it is understandable and accessible for those with special needs and communication difficulties	April 2018	Fairer Housing Unit / YHN	P1
7. Expand Ostara services to other user groups. Ostara is a 24 hour connected alarm service administered by YHN to help people maintain independence	<ul style="list-style-type: none"> <li>• Pilot technology with different needs groups</li> <li>• Develop a clear vision to enhance the older persons' offer by pulling together and creating services to give added value.</li> <li>• April 2019</li> </ul>	YHN	P1
8. Respond to government consultation on the funding methods for supported housing to be applied April 2020	<ul style="list-style-type: none"> <li>• Consultation submission deadline 23<sup>rd</sup> January 2018</li> <li>• New funding method set out in update of the Specialist Housing Delivery Plan – November 2019</li> </ul>	FUH WCL YHN	P1

Newcastle Specialist Housing Delivery Plan 2017 - 2021

<p>9. Fulfil the requirement placed upon local authorities to carry out a supported housing needs assessment and to develop a Local Supported Housing Strategic Plan</p>	<ul style="list-style-type: none"> <li>• Ahead of new funding methods for supported housing coming into force in April 2020</li> </ul>	<p>FHU WCL YHN</p>	<p>P2</p>
<p>10. By April 2021 we will facilitate the delivery of 582 new homes suitable for older people, including level access units, as they move through the life-course</p>	<ul style="list-style-type: none"> <li>• 226 bungalows,</li> <li>• 94 Tyneside apartment</li> <li>• 135 sheltered apartments, and</li> <li>• 127 assisted living apartments</li> </ul> <p>(See Appendix One for full list)</p>	<p>Fairer Housing Unit</p>	<p>P2</p>
<p>11. Carry out evaluation of older people's specialist housing schemes to gain feedback on scheme design, resident satisfaction &amp; lessons learned</p>	<p>Evaluate all schemes receiving capital grant and/or HRA funding six months after opening.</p>	<p>Fairer Housing Unit</p>	<p>P2</p>
<p>12. Work with house builders to offer older people the opportunity to downsize through discounted purchase options</p>	<ul style="list-style-type: none"> <li>• Chapel Park – 4 bungalows (shared ownership)</li> <li>• Dene – 20 assisted living apartments (shared ownership)</li> <li>• West Denton – 3 bungalows (shared ownership)</li> <li>• Lemington. 8 bungalows (shared ownership)</li> </ul>	<p>Fairer Housing Unit</p>	<p>P2</p>
<p>13. Future Homes Project. Deliver an innovative exemplar project of connected and energy efficient homes for older people.</p>	<p>Build 4 demonstrators in 2018 and then, in 2019, to continue with a further 30 units of housing</p>	<p>Newcastle University  Karbon Homes</p>	<p>P2</p>

<p>14. Deliver 3 new schemes of 15 units each suitable for people with a learning disability and / autism requiring low level support:</p> <ol style="list-style-type: none"> <li>1. Walker</li> <li>2. Fenham</li> <li>3. Site to be confirmed</li> </ol>	<p>March 2019 November 2019 March 2020 <a href="#">(See Appendix One for full list)</a></p>	<p>Fairer Housing Unit</p>	<p>P2</p>
<p>15. Deliver 3 core &amp; cluster developments of 5-6 bungalows each suitable for learning disabilities and / autism clustered within a short walking distance of support for clients requiring more high end needs</p> <ul style="list-style-type: none"> <li>○ East Gosforth</li> <li>○ Denton</li> <li>○ Denton</li> </ul>	<p>April 2019 Nov 2019 Dec 2019 <a href="#">(See Appendix One for full list)</a></p>	<p>Fairer Housing Unit</p>	<p>P2</p>
<p>16. Deliver 7 units of 'step-up step-down' concierge plus apartments suitable for people with mental health conditions.</p> <ul style="list-style-type: none"> <li>○ Woolsington</li> </ul>	<p>March 2018 <a href="#">(See Appendix One)</a></p>	<p>Fairer Housing Unit</p>	<p>P2</p>
<p>17. Connect ITT. Create smart homes for up to 30 people with learning disabilities to enable them to better manage risk and maintain their health, promote independence and provide a safe and cost effective way of providing support.</p>	<ul style="list-style-type: none"> <li>• Roll out programme 2017/18.</li> <li>• Evaluate project on a rolling basis 1 year from initial installation</li> </ul>	<p>Adult Social Care</p>	<p>P2</p>



Newcastle Specialist Housing Delivery Plan 2017 - 2021

18. Continue the review of Independent Supported Living (ISL) properties to ensure current provision is up to standard	Continuous programme of review	Adult Social Care	P2
19. Promote 'Home Ownership for people with Long-term Disabilities Scheme' (HOLD)	Explore this option in Newcastle for people with a learning disability and / or autism	Fairer Housing Unit	P2
20. Carry out a review of the numbers of people with a learning disability in Newcastle to help inform future service planning	October 2017	Fairer Housing Unit	P3
21. Set up a Learning Disability / autistic user forum as a way to connect the city council to users of services so that support services are shaped by users and carers	November 2017	Adult Social Care	P3
22. Explore Housing Options for Older People (HOOP) a phone based housing option tool to guide older people through the choices available to them	<ul style="list-style-type: none"> <li>• Hold engagement session with Tyne &amp; Wear Homes / Elders Council to assess interest– Nov 2017</li> <li>• Based on interest - roll out thereafter – early 2018</li> </ul>	Fairer Housing Unit  Elders' Council  Tyne & Wear Homes	P3

<p>23. Make available sufficient high quality accommodation to meet the needs of looked after children and young people (LAC&amp;YP) and care leavers within the community, close to home wherever possible including those who are harder to place</p>	<ul style="list-style-type: none"> <li>• Develop a business case to open additional accommodation within Newcastle for those with complex needs. – January 2018</li> <li>• Carry out reviews of young people in external residential care to see if their needs can be better met in Newcastle – January 2018</li> </ul>	<p>Myra Milne Children's Services</p>	<p>P2</p>
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Appendix One: Development Pipeline – specialist and level access housing										
Ward	Dementia bungalows	Assisted Living apartments	Sheltered apartments	Tyneside apartments	Bungalows	2017/18	2018/19	2019/20	2020/21	TOTAL
Castle	5		24	4	4	37				37
Newburn		46			4	50				50
Walkergate			31			31				31
Westerhope			31			31				31
Fawdon					3	3				3
Benwell & Scotswood					42	21	21			42
Denton				12	6		18			18
Woolsington					10		10			10
Benwell & Scotswood					9		9			9
Blakelaw				8	10		18			18
Kenton				4	4		8			8
Woolsington					1		1			1
Walkergate			25				25			25
Westgate		20						20		20
Elswick				14	5			19		19
Woolsington				16	6			22		22
Westerhope			26					26		26

Newcastle Specialist Housing Delivery Plan 2017 - 2021

Ward	Dementia bungalows	Assisted Living apartments	Sheltered apartments	Tyneside apartments	Bungalows	2017/18	2018/19	2019/20	2020/21	TOTAL
Westerhope		32		12	6			50		50
Kenton					6			6		6
Newburn					8			8		8
Byker					10			10		10
North East of City		30						30		30
Westerhope					4			4		4
Fenham			22	12				32		32
Kenton					8			8		8
Walker				4	10			14		14
Blakelaw					10			10		10
Walker				4	26				30	30
Kenton				8	6				12	12
Benwell & Scotswood		45							45	45
Denton					8				8	8
Lemington					20				20	20
Walker					8				8	8
<b>Totals</b>	<b>5</b>	<b>173</b>	<b>159</b>	<b>98</b>	<b>234</b>	<b>173</b>	<b>110</b>	<b>259</b>	<b>123</b>	<b>669</b>

<b>New build housing for people with a learning disability and /or autism</b>								
<b>Ward</b>	<b>Core &amp; Cluster bungalows</b>	<b>Enhanced concierge plus apartments</b>	<b>Shared living apartments</b>	<b>2017/18</b>	<b>2018/19</b>	<b>2019/20</b>	<b>2020/21</b>	<b>TOTAL</b>
Denton			4		4			4
East Gosforth	6				6			6
Walker		15				15		15
Kenton	5					5		5
TBC		15				15		15
Fenham		15				15		15
Denton	5					5		5
<b>Total</b>	<b>16</b>	<b>45</b>	<b>4</b>	<b>0</b>	<b>10</b>	<b>55</b>	<b>0</b>	<b>65</b>

<b>New build housing for people with a mental health condition</b>						
<b>Ward</b>	<b>Tyneside apartments</b>	<b>2017/18</b>	<b>2018/19</b>	<b>2019/20</b>	<b>2020/21</b>	<b>Total</b>
Woolsington	7			7		7

**Terms of Reference**

ALBM	Annuity Leaseback Model.
CSUCP	Core Strategy and Urban Core Plan. The City Council's planning document outlining rules on new development
CQC	Care Quality Commission
DCLG	Department for Communities and Local Government
DFG	Disabled Facilities Grant
FHU	The Fairer Housing Unit
HCA	Homes and Communities Agency
HOLD	Home Ownership for People with Long-term Disabilities
HMPS	Housing Market Position Statement.
HRA	The Housing Revenue Account
ISL	Independent Supported Living
NCC	Newcastle City Council
NHS	National Health Service
ONS	Office for National Statistics
PANSI	Projecting Adult Needs and Service Information
PCTs	Primary Care Trusts
POPPI	Projecting Older People Population Information System
PPG	Planning Practice Guidance
Ostara	24 connected alarm service to help people maintain independence
WHO	World Health Organisation
YHN	Your Homes Newcastle

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