



**Open Report on behalf of Glen Garrod,
Executive Director - Adult Care and Community Wellbeing**

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| Report to: | Adults and Community Wellbeing Scrutiny Committee |
| Date: | 24 February 2021 |
| Subject: | Lincolnshire Homes for Independence Blueprint |

Summary:

This report invites the Adults and Community Wellbeing Scrutiny Committee to consider a decision report which recommends that Lincolnshire County Council (LCC) adopt the Lincolnshire Homes for Independence blueprint. This is due to be considered by the Executive Councillor for Adult Care, Health and Children's Services between 26 February and 5 March 2021. The views of the Committee will be reported to the Executive Councillor as part of their consideration of this item.

Actions Required:

The Committee is invited to:

- 1) Consider the attached report and determine whether the Committee supports the recommendation to the Executive Councillor; and
- 2) Make any comments to be passed to the Executive Councillor in relation to delivering the objectives in the blueprint.

1. Background

Between 26 February and 5 March 2021 the Executive Councillor for Adult Care, Health and Children's Services is due to consider a report on the Lincolnshire Homes for Independence blueprint. The decision report is attached as Appendix 1 and the blueprint as Appendix A to this report. The blueprint is owned by the Housing Health and Care Delivery Group (HHCDG) and supported by the HHCDG Delivery Plan. The Lincolnshire Health and Wellbeing Board signed off the blueprint on 1 December 2020 and recommended that partner agencies formally adopt it through the appropriate decision-making route.

2. Conclusion

Following consideration of the attached report, the Committee is requested to consider whether it supports the recommendation in the report and whether it wishes to make any comments to the Executive Councillor.

3. Consultation

This Committee is being consulted on the proposed decision of the Executive Councillor between 26 February and 5 March 2021.

4. Appendices

| These are listed below and attached at the back of the report | |
|---|---|
| Appendix 1 | <p>Report to Executive Councillor on Lincolnshire Homes for Independence Blueprint, including:</p> <ul style="list-style-type: none">• Appendix A Lincolnshire Homes for Independence Blueprint• Appendix B Housing Health and Care Delivery Group Membership• Appendix C Housing, Health and Care Delivery Group - Delivery Plan for 2020-22 |

5. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Sean Johnson, who can be contacted on 07917707186 or sean.johnson@lincolnshire.gov.uk

Open Report on behalf of Glen Garrod, Executive Director of Adult Care and Community Wellbeing

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|---------------------|--|
| Report to: | Executive Councillor for Adult Care, Health and Children's Services |
| Date: | Between 26 February to 5 March 2021 |
| Subject: | Lincolnshire Homes for Independence Blueprint |
| Decision Reference: | I021473 |
| Key decision? | Yes |

Summary:

Lincolnshire Homes for Independence is the blueprint of the Housing, Health Care Delivery Group (HHCDG) and seeks to provide a high level vision for the provision of a greater range of housing options for those who need additional support, and better integrated services to promote and sustain independent living. The foreword is endorsed by the Clinical Commissioning Group (CCG) in addition to the Chairmen of the Lincolnshire Health and Wellbeing Board (HWB) and HHCDG.

There is a focus on independent living throughout life (all ages) and giving people choices or housing options. One option is for people to remain living in their current home and so the concept of housing for life is important. Whilst older people are the largest cohort of people with needs, there are others with particular needs highlighted in the blueprint, whose ability to live independently is currently limited by a lack of appropriate housing and/or well integrated services which are easy to navigate.

The majority of the homes that people live in now may not be suitable for their needs, particularly as these needs change over time. In terms of existing housing and service provision to enable people to remain living in their current home, more can be done to ensure that adaptations and equipment are provided through more integrated services which centre on the needs of the person. A business case is being developed to propose a review of existing services to secure better outcomes and use of resources, to support the delivery of this blueprint. The blueprint aims to help people to remain living in their current home, across all tenures, where appropriate. There is a focus on private sector housing including supporting low-income, owner-occupied households living in poor conditions or unsuitable homes to improve and/or adapt them.

The blueprint also looks at helping people to find and move to a different home for life. New-build housing design, quality and accessibility standards are

included, linking to the work of the Housing Infrastructure Group (HIG) on a Lincolnshire Design Guide/Lincolnshire Design Review Panel. Government is at present consulting on Planning for the Future (a White Paper on proposals for reform of the planning system in England) and accessibility standards in building regulations for new homes. Should a standard similar to Lifetime Homes be enshrined in building regulations it would embed the principle of housing for life. National planning policy identifies core requirements and much good practice guidance exists to support the development of new homes that are appropriate for those with additional needs. That said, most housing development is undertaken by businesses whose aim is to make a profit. This can lead to new housing being pared back to meet minimum requirements, particularly in areas where land values are low. Developing this blueprint is a first step in agreeing across local government, social housing providers and communities, the standards we wish to see achieved in Lincolnshire.

Recommendation(s):

That the Executive Councillor for Adult Care, Health and Children's Services approves the adoption of the Lincolnshire Homes for Independence blueprint attached at Appendix A on behalf of Lincolnshire County Council.

Alternatives Considered:

1. That the blueprint is not adopted by Lincolnshire County Council

Reasons for Recommendation:

It is considered appropriate that Lincolnshire County Council formally adopts the Lincolnshire Homes for Independence blueprint to demonstrate its commitment to collaborative working and joint ownership of the vision for the provision of a greater range of housing options for those who need additional support, and better integrated services to promote and sustain independent living in Lincolnshire.

Joint action on the Delivery Objectives throughout the blueprint is essential to the effective delivery of the County Council's Corporate Plan priorities around housing for independence and homes for life.

1. Background

- 1.1 The Lincolnshire Homes for Independence blueprint has been developed over a long period and progressed through the last two Housing, Health and Care Delivery Group (HHCDG) meetings in August and October 2020. There has been extensive consultation with the Chairman and members of HHCDG and comments, including from Lincolnshire County Council's Executive Councillor for Adults, Health and Children's Services, have been incorporated into the document. There is now broad, in principle support for the blueprint; which was signed off by the Health and Wellbeing Board (HWB) on 1 December 2020 and this is the final version (other than design improvements).
- 1.2 The blueprint is a high level statement and call to action to partners to identify and strive to meet the housing and related support needs of those in Lincolnshire who need something other than mainstream market housing. It is not intended to be public facing. By agreeing the blueprint, organisations are buying in to a journey. Alongside there is a HHCDG Delivery Plan, the latest draft of which is attached at Appendix C for the information of the Executive Councillor. When finalised, the Delivery Plan will set out the detail and actions to deliver on the vision. The Delivery Plan will not commit any of the partners to any actions and therefore approval is not being sought to the Delivery Plan in this report. Decisions on the proposed actions will be subject to partners' individual decision-making processes.
- 1.3 The audience for the blueprint in those partner organisations is senior managers and board members who are less familiar with the housing and health agenda than staff working in the field, but they will nevertheless be making commissioning and funding decisions. Those working in the field can use it for their project planning and as justification in their decision-making processes. It aims to focus the efforts of the HHCDG members on actions to secure greater provision of a wider range of housing choices, and to further integrate services designed to support independent living and housing for life.
- 1.4 There have been a number of national and local changes that have taken place in recent years which are relevant to the Lincolnshire Homes for Independence blueprint:
- The One Public Estate (OPE) programme has begun to review public sector land-holding to ensure that best use is made of this to meet local needs and ensure that communities can live, work and access the services they need, in some cases releasing public estate for housing.
 - The Greater Lincolnshire Housing Delivery Group has created a Housing Development Programme to meet rising demand for new homes.
 - The County Council has developed an Extra Care Strategy supported by a capital programme to deliver up to 600 units of accommodation across the county, predominantly for older people. The aim was to provide an alternative to residential care, in places where this did not exist in

sufficient numbers to meet evidenced need. Accommodation was to be designed to adapt as a person's needs change, increasing independence for older people and reducing the cost to the County Council of long-term care.

- The Greater Lincolnshire local authorities (including North and North East Lincolnshire) have jointly commissioned research from Housing LIN, the national advisory body on housing. Phase 1 (2018) was funded through the Local Government Association (LGA) Advisers Programme and reviews current provision and future needs for housing for older people. Phase 2 (2019), funded directly by the ten authorities, explores the appetite and aspirations of older people for options to meet their needs.
- Disabled Facilities Grants (DFGs) have become part of the Better Care Fund (BCF); the district councils have developed policies and protocols for working together more closely, but to date have kept separate services and budgets.
- The Lincolnshire Wellbeing Service has been commissioned for a potential ten year period, helping people stay connected within local communities and supporting access to minor adaptations and equipment. This is now operated by the seven district councils working in partnership.
- National legislation has introduced new duties for local authorities in relation to Care Leavers and for Transforming Care for those with more complex needs.
- National legislation has enhanced and extended the duties of district councils through the Homelessness Reduction Act (2018)
- Lincolnshire County Council has re-commissioned Housing Related Support services for young people and adults, and Domestic Abuse Refuge accommodation; district councils have secured significant but short-term funds to support rough sleepers.
- Lincolnshire County Council colleagues with other partners have developed a Hoarding Protocol which sits within the Lincolnshire Safeguarding Adults Board policies and procedures.

The national and local context for the Homes for Independence agenda continues to change:

- The outcome of the Local Government Funding Review is confirmed for one year with a further review expected.
- Integrated Care Systems (ICS) are developing, seeking to align and integrate health and care services.
- Personalisation continues to be a priority.
- New technologies are emerging to support independent living for people with a wide range of needs.
- Further funding has been announced for housing related support and other remedies to end rough sleeping.
- Upper tier authorities will shortly receive new statutory duties to provide suitable domestic refuge accommodation and services.
- Issues to be tackled that have been highlighted by the Coronavirus pandemic.

2. Legal Issues:

Equality Act 2010

Under section 149 of the Equality Act 2010, the Council must, in the exercise of its functions, have due regard to the need to:

- Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act.
- Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

The relevant protected characteristics are age; disability; gender reassignment; pregnancy and maternity; race; religion or belief; sex; and sexual orientation.

Having due regard to the need to advance equality of opportunity involves having due regard, in particular, to the need to:

- Remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic.
- Take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it.
- Encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

The steps involved in meeting the needs of disabled persons that are different from the needs of persons who are not disabled include, in particular, steps to take account of disabled persons' disabilities.

Having due regard to the need to foster good relations between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to tackle prejudice, and promote understanding.

Compliance with the duties in section 149 may involve treating some persons more favourably than others.

The duty cannot be delegated and must be discharged by the decision-maker. To discharge the statutory duty the decision-maker must analyse all the relevant material with the specific statutory obligations in mind. If a risk of adverse impact is identified consideration must be given to measures to avoid that impact as part of the decision making process.

No Equality Impact Analysis has been carried out.

However, the Lincolnshire Homes for Independence blueprint considers cohorts of people requiring homes with care and support attached (e.g. older people and people with disabilities). It is, therefore, anticipated that collaborative actions on the Delivery Objectives throughout the blueprint will have a positive impact on people with some of the protected characteristics. Consideration will also be given to ensure there are no unintended consequences for people with all protected characteristics – although none can be envisaged at this stage of adopting the blueprint.

Joint Strategic Needs Analysis (JSNA and the Joint Health and Wellbeing Strategy (JHWS)

The Council must have regard to the Joint Strategic Needs Assessment (JSNA) and the Joint Health & Well Being Strategy (JHWS) in coming to a decision.

The Lincolnshire Health and Wellbeing Board created the Housing Health and Care Delivery Group (HHCDG) and adopted Housing as one of seven priorities in the Joint Health and Wellbeing Strategy (JHWS) for Lincolnshire, underpinned by two Joint Strategic Needs Assessment (JSNA) topics on housing. The HHCDG members have adopted a Memorandum of Understanding (MOU), agreeing to work together across the housing, health and care sectors to support residents. Lincolnshire Homes for Independence builds on the MOU and underpins the HHCDG Delivery Plan.

Delivery Objectives in the blueprint have been derived, in part, from the JSNA topics on 'Housing Standards' and 'Insecure Homes and Homelessness'. The blueprint itself does not provide the numbers of homes needed but the Delivery Objective on maintaining accurate data and intelligence will strengthen the JSNA evidence base.

Crime and Disorder

Under section 17 of the Crime and Disorder Act 1998, the Council must exercise its various functions with due regard to the likely effect of the exercise of those functions on, and the need to do all that it reasonably can to prevent crime and disorder in its area (including anti-social and other behaviour adversely affecting the local environment), the misuse of drugs, alcohol and other substances in its area and re-offending in its area.

There will be opportunities to reduce the risk of people being the victims of crime in their homes when developing joint actions to meet the Delivery Objectives in the blueprint. The Police and Crime Commissioner expressed his desire for Lincolnshire Police to be an active partner in delivering the Housing Health and Care Delivery Group Delivery Plan at the Lincolnshire Health and Wellbeing Board meeting on 1 December 2020.

3. Conclusion

- 3.1 The Lincolnshire Homes for Independence blueprint will be owned and implementation of the Delivery Plan will be overseen by the HHCDG, reporting annually on progress to the HWB. HHCDG membership is listed in Appendix B for the Executive Councillor to see the breadth and scale of the group and those organisations being asked to sign up to the blueprint.
- 3.2 Lincolnshire is now the rural strategic partner for the Centre for Ageing Better (AB). Their housing lead now attends HHCDG meetings and this alliance will ensure the County Council, local partners and AB (plus other wider national partners such as Care and Repair England) offer mutual support with opportunities to influence national and local policies and to increase local housing choices for people preparing for later life. For example, the AB housing lead has contributed to HHCDG responses to Government consultations on reform of the planning system and accessibility standards for new homes as well as developing a work programme around redesign of aids, adaptations and improvements to existing homes.
- 3.3 Lincolnshire County Council's Corporate Plan objective to enable everyone to enjoy life to the full means that we will promote safe and secure homes and lead the way with others to create accommodation options for greater independence and wellbeing; resulting in more people being able to live independently and positively contribute to their local community. Wider multi-agency action is needed to achieve this and the Homes for Independence blueprint and Delivery Plan will help ensure there is a shared commitment and responsibility across different organisations.
- 3.4 The draft HHCDG Delivery Plan (Appendix C) details a number of collaborative actions which if progressed by multiple organisations, including Lincolnshire County Council, would tackle the objectives outlined in the blueprint. It is, considered appropriate that the Executive Councillor is aware of the Delivery Plan which supports the Council's Corporate Plan objective(s).

4. Legal Comments:

The Council has the power to adopt the blueprint as a sign of its commitment to the vision set out in the document.

Further actions in pursuit of the blueprint or its objectives will be subject to future formal decision-making where necessary.

The decision to adopt the blueprint is consistent with the Lincolnshire County Council Policy Framework and within the remit of the Executive Councillor.

5. Resource Comments:

There are no direct financial implications arising from this report or the Lincolnshire Homes for Independence blueprint. Staff time to support the Council's input is within existing resources. It may become necessary to realign budgets (e.g. between aids, equipment (LCES) and DFG) or pool budgets as a result of changes following implementation of HHCDG Delivery Plan actions and subsequent agreement by Lincolnshire County Council and district councils.

Frontline County Council staff, such as Occupational Therapists, could ultimately need to adapt to new working practices/ processes/ procedures as a result of decisions arising from implementing the Delivery Plan actions; but there is no immediate impact as a result of the County Council adopting the blueprint.

6. Consultation

a) Has Local Member Been Consulted? - n/a

b) Has Executive Councillor Been Consulted? - Yes

c) Scrutiny Comments

The blueprint is being presented to Adults and Community Wellbeing Scrutiny Committee on 24 February 2021 for pre-decision scrutiny. The comments of the Committee will be reported to the Executive Councillor.

d) Housing Health and Care Delivery Group

There have been a number of opportunities for the Housing Health and Care Delivery Group to consider the blueprint, through meetings and direct correspondence with members of the group (both elected district councillors and senior officers).

e) Lincolnshire Health and Wellbeing Board

The Board considered and 'signed off' the blueprint at its meeting on 1 December 2020, recommending that it be passed to partner organisations for "formal adoption".

f) Risks and Impact Analysis

No Risk and Impact Analysis has been carried out.

The Lincolnshire Homes for Independence blueprint is a partnership document and not a Lincolnshire County Council strategy. The reputational and financial risks of endorsing the blueprint are, therefore, considered to be low. However, collaborative action is required to help meet Corporate Plan objectives around homes for independence and so not demonstrating a commitment to the blueprint could pose a risk to the County Council from a lack of partnership working.

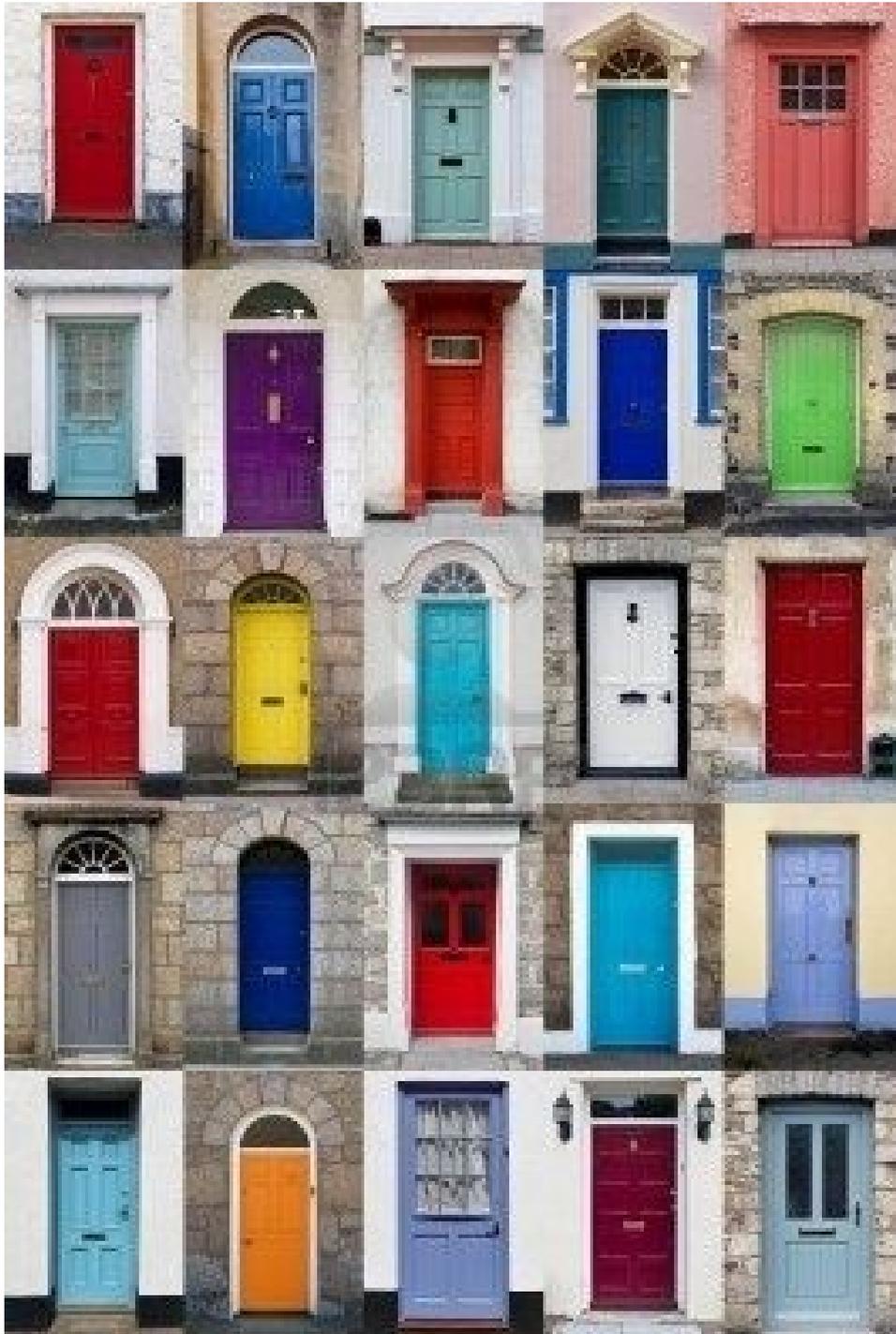
7. Appendices

| | |
|---|---|
| These are listed below and attached at the back of the report | |
| Appendix A | Lincolnshire Homes for Independence Blueprint |
| Appendix B | Housing Health and Care Delivery Group Membership |
| Appendix C | Housing, Health and Care Delivery Group - Delivery Plan for 2020-22 |

8. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

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Lincolnshire Homes for Independence

Blueprint for the Housing Health and Care Delivery Group

Contents

Foreword3

1. Housing, health and care - an introduction4

2. Understanding needs and opportunities6

3. Housing for people with care and support needs14

4. Helping people remain in their current home18

5. Helping people move to a suitable home22

6. What's next working together on the vision?26

Glossary27

Bibliography.....27



CITY OF
Lincoln
COUNCIL



Foreword

People of whatever age and from whatever background deserve to live in a safe, warm home with as much independence as they can achieve, with appropriate and timely support.

Those of us that have come together to create this blueprint for Lincolnshire Homes for Independence recognise the multiple benefits to residents and our organisations of having the right homes, of good design, in the places where people choose to live their lives.

It is more than having a roof over our heads. Having somewhere that we call 'home' is a fundamental requirement for us to maintain good physical and mental health. That is why, working in collaboration through our countywide partnerships, we will do more to address the shortcomings of current housing and ensure that new homes provide the quality of life that people desire.

We look forward to working together to deliver more, high quality, flexible, contemporary housing and support for Lincolnshire's residents.



Cllr Wendy Bowkett
Chairman
Housing Health and Care Delivery Group



Cllr Sue Woolley
Chairman
Health and Wellbeing Board



John Turner
Chief Executive
NHS Lincolnshire Clinical Commissioning Group

1. Housing, health and care – an introduction

"A job, a safe and warm home and someone to care for and about are the foundation of what works for improving health"

Duncan Selbie, Former Chief Executive, Public Health England

Introduction

Evidence shows that living in familiar, safe, accessible, warm accommodation that we call 'home' is more likely to promote mental and physical wellbeing, and to reduce hospital admissions, social isolation and loneliness.

Our vision is for people to live independently, stay connected and have greater choice in where and how they live.

People need reliable information to make informed choices, and a choice of quality housing that is affordable, which meets their needs. Right-sized, contemporary, well designed and equipped homes allow people to live and age well in their current home and/or move to a home better suited to their needs. Where people need support, better integrated housing, health and care services can help them live safely and independently in their chosen home.

Lincolnshire Homes for Independence blueprint does not address all aspects of housing but does identify those who may need extra help to maintain their wellbeing and independence e.g. those with health needs, those moving from a hospital in-patient facility and care leavers amongst others. It considers the need to build different types of homes, to use new technologies, and to develop new working practices. It is a **call to action** for all agencies, including businesses and housing developers, to work together to secure the best possible homes and services for Lincolnshire's residents, now and in the future.

Lincolnshire's Health and Wellbeing Board (HWB) prioritised housing in its Joint Health and Wellbeing Strategy (JHWS) recognising its importance to achieving improvement in health and wellbeing outcomes. The Housing, Health and Care Delivery Group (HHCDG) set up by the Board includes the County Council, the seven District Councils, Registered Providers (Housing Associations), local National Health Service (NHS) bodies and the Department of Work and Pensions (DWP).

Through this countywide forum we are committed to working together as it is clear that housing conditions influence our physical and mental health and wellbeing at all stages of our lives. Poor housing is associated with increased levels of stress, anxiety and depression. Living in a warm and dry home can improve general health outcomes specifically reduce respiratory conditions. The partnership is, therefore, committed to improving health and wellbeing through the home.

This blueprint responds directly to the need for a safe and warm home. The objectives set within the document and the associated Delivery Plan determine how collectively and through the wider support services, independent living and contribution to jobs and social contact can be achieved. In doing so it addresses health inequalities which exist, making it more difficult for some people to maintain a home than others. The Coronavirus pandemic

lockdown in early 2020 highlighted these issues where people were asked to remain in unsuitable homes for many weeks, with a noticeable decline in their personal wellbeing.

The blueprint is a high level statement and call to action to partners to identify and strive to meet the housing and related support needs of those in Lincolnshire who need something other than mainstream market housing. Organisations are buying in to a journey and committed to shared ownership of the HHCDG Delivery Plan actions. The HHCDG Delivery Plan sets out the detailed actions to achieve the blueprint's objectives. Outcomes from these actions might require partners to take things through individual decision-making processes.

The audience for the blueprint in the partner organisations is senior managers and board members who are less familiar with the housing and health agenda than those working in the field – but who will nevertheless be making commissioning and funding decisions. Those working in the field can use it for their project planning and as justification in their decision-making processes. It aims to focus the efforts of the HHCDG members on actions to secure greater provision of a wider range of housing choices, and to further integrate services designed to support independent living and housing for life.

2. Understanding needs and opportunities

Lincolnshire's Joint Strategic Needs Assessment

Joint Strategic Needs Assessment (JSNA) topics provide a robust evidence base of housing issues and need. These are updated regularly,

| <p style="text-align: center;">Housing Standards and Unsuitable Homes</p> | <p style="text-align: center;">Insecure Homes and Homelessness</p> |
|--|--|
|  | <p>This considers people who do not have the security of a decent home</p> <ul style="list-style-type: none"> • Factors leading to people losing their homes • Homelessness or the risk of becoming homeless • Rough sleeping |
| <p>This looks at the following and the effect on health and care:</p> <ul style="list-style-type: none"> • Poor condition existing homes • Cold homes and fuel poverty • Unsuitable homes (e.g. overcrowded or needing adaptations) • Design standards for new homes • Demand for supported housing |  |

Lincolnshire's population is diverse and geographically dispersed, requiring a range of housing and care provision to meet local needs. There is a shared understanding of the importance of suitable housing to a sense of wellbeing and good health, as noted in the [Care Act \(2014\)](#) statutory guidance:

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

Housing Supply

Greater Lincolnshire¹ local authorities are committed to building more homes to meet the demand arising from population growth. Up to 100,000 new homes are estimated to be needed by 2031. The Housing Infrastructure Group (HIG), reporting to Lincolnshire's Chief Executives, has developed Lincolnshire's **Growth Strategy**, incorporating the **2050 Vision**, ensuring appropriate infrastructure to facilitate housing development.

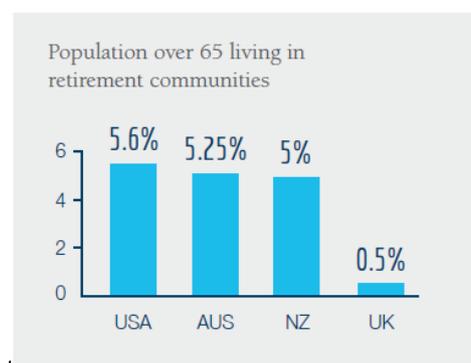
This blueprint complements the **Local Industrial Strategy** and Growth Plan developed by Greater Lincolnshire Local Economic Partnership (GLLEP). A thriving economy needs housing for its workforce; housing, health and care agencies need a skilled workforce; being employed helps people have greater housing option choices in the short and long term.

More homes of all types are needed. For example, currently, some people with mental health issues or learning difficulties are placed in homes out of the county. However, this blueprint emphasises the importance of quality, good design and integration with the surroundings to create resilient communities.

Houses need designing to reduce the need for people to move home or for costly adaptations to their homes as their needs change over time. Some thoughtful design such as considering the location of sockets and the width of doorframes does not have to significantly increase build costs but will extend choice and promote independence for more people. Building Regulations set a minimum specification covering accessibility for visitors with disabilities. Local Plan policies can set space and design standards and higher standards for accessibility, including for full wheelchair use and additional design standards can be set in supplementary planning documents. Some people will wish to move a smaller home when families disperse or they become less able to maintain it. For people who need to move to meet a specific complex need, particular design requirements may be negotiable, especially with Registered Providers (Housing Associations) but also with private developers.

Where people of any age feel vulnerable due to their circumstances (e.g. being at risk becoming homeless or having a disability) or their mental or physical health declines or they live alone or need additional care and support; a wider range of accommodation is needed as a realistic alternative to remaining in unsuitable accommodation or moving to residential care, which are currently the only options for many. This accommodation should offer a range of tenures with options to purchase (outright or shared ownership) or rent (social and private) depending upon people's preference and circumstances.

In the UK, there is an under-provision of retirement accommodation compared to other countries. Where the private market does not provide it the state may need to intervene to deliver or provide financial support to the private sector. Councils and Registered Providers may build and manage such accommodation. In certain cases public money (Government and/or local authority funds) could be



¹ Greater Lincolnshire refers to the local authorities making up the county of Lincolnshire, North Lincolnshire and North East Lincolnshire

offered to private developers to help meet specific needs.

Source: Associated Retirement Community Operators, 2019

In the UK, there are around 60,000 units for people over 65 with the proportion of the population predicted to need this rising to 2.5% by 2030 requiring an additional 250,000 new or adapted units.

We will maintain details of and map the location of extra care housing and units of accommodation for younger people with health needs in Lincolnshire and make this information available.

Greater Lincolnshire's Housing Authorities commissioned research in 2018 to identify housing needs of older people. As at September 2019, the net additional demand in Lincolnshire is for 2,040 units of housing with care, including extra care housing ([Housing LIN report, 2018](#)). The outcomes highlighted the need for other affordable options including shared ownership.

Housing LIN Research in Lincolnshire in 2018

- A shortage of units of housing for older people, and a significant shortage of units for sale / shared ownership compared to those for rent
- A shortage of housing with care, both for rent and for sale in most Districts, including extra care / 'assisted living' schemes with 24/7 care available on-site and housing schemes that offer bespoke care services, even if these are not full on-site 24/7 care, both for rent and for sale
- A significant number of residential care beds and nursing care beds with evidence of over-provision in some areas.

National Evidence

A national discussion paper² determined that 9,400 housing support units are required for working age adults (WAA) with Physical Disability (PD) in England in 2020, rising to 9,600 by 2030 (based on ONS projections of population increase during that time period).

Local Intelligence

As part of modelling work around need and demand for ECH in Lincolnshire, the Public Health Intelligence Team (PHIT) reviewed national evidence to determine a provisional estimated number of supported housing units required in the county for different cohorts. Lincolnshire's population represents 1.2 per cent of the population of England; 116 units (for 2020) is the 1.2 per cent of the total units estimated for the country. These demand estimates need to be reviewed in relation to Learning Disabilities and mental health and will be used to inform the emerging Specialist Adult Services Accommodation Strategy.

PANSI data projects a 1.33 per cent reduction in the number of 18 to 64 year olds with a serious disability in Lincolnshire between 2020 and 2030.

² Projected Demand for Supported Housing in Great Britain 2015 to 2030, PSSRU Discussion Paper DP2931, LSE, March 2017, Raphael Wittenberg and Bo Hu

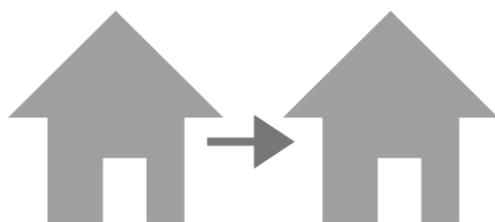
Based on these projections it appears there will be little increase in demand for supported accommodation for Working Age Adults, but a significant increased demand for people with Learning Disabilities. The focus is on current supply and utilisation to help assess whether current supply is sufficient to meet current demand.

| Table 1 Provisional estimated units of supported housing using national ratios Lincolnshire³ | 2020 | 2030 | 2018-30% |
|--|--------------|---------------|-----------------|
| Older people population (65+) | 182,482 | 221,067 | 21.1% |
| Est. units of supported housing older people (65+) | 7,431 | 8,963 | 20.6% |
| Working age adults population (18-64) | 431,183 | 427,428 | -0.9% |
| Learning disability | 497 | 737 | 48.2% |
| Mental health problems | 381 | 384 | 0.9% |
| Physical disability or sensory impairment | 116 | 118 | 1.8% |
| Single homeless people | 387 | 384 | -0.8% |
| Other working age clients | 665 | 661 | -0.5% |
| Est. units of supported housing adults (18-64) | 2,046 | 2,285 | 11.7% |
| Sum Total units of supported housing | 9,477 | 11,248 | 18.7% |

Source: Public Health Intelligence Team, 2019

The same authorities commissioned further research in 2019 ([Housing LIN report, 2019](#)) which identified that many older people are keen to move, and many of those who are undecided will consider other available options. Supporting people to move is likely to release 3 and 4 bedroom homes into the general housing stock, relieving some of the overall pressure on demand for housing.

Focus group key message



53% are considering a move at some point in the future

The main reasons for people moving were:

- **Live in a smaller home (46%)**
- **Live in a more accessible home (37%)**
- **Change of personal circumstances (35%)**
- **Closer to family / friends 27%**



Source: Housing Learning and Improvement Network, August 2019

Housing Quality and Environment:

There are opportunities to improve the quality of homes and the environment around them in both new build developments and regeneration areas. Planning and infrastructure matters in relation to the growth agenda and bringing forward housing delivery are

³ Rates derived from: Projected Demand for Supported Housing in Great Britain 2015 to 2030, PSSRU Discussion Paper DP2931, LSE, March 2017, Raphael Wittenberg and Bo Hu Population projection 2016 based (ONS)

overseen by the Housing Infrastructure Group (HIG) and so the Housing and Health and Care Delivery Group (HHCDG) will work closely with HIG to achieve common objectives.

Proposals to reform the national Planning system emphasise design guides. These are particularly important where conversion of redundant commercial units into housing may be permitted development rights rather than requiring planning permission and the requirements that this might bring.

There are a number of things to take into account:

- Location - connected to community, work and services.
- Visual impact, layout and landscaping.
- Open space.
- Routes and movement.
- Size and layout of the home and accessibility within the home – able to provide for all the household's requirements.
- Noise, light, services and adaptability.
- Accessibility within the home.
- Sustainability - the design should include standards on insulation, glazing, fuel efficiency to reduce fuel poverty, support climate change and our aspirations around decarbonisation and the move to net zero carbon emissions.
- External environment.

Housing design needs to take account of how people want to use their home and its surroundings. The home needs to remain affordable to the resident and provide a stable and secure base, but the layout of streets, the level of footfall, type of lighting, access to green space, etc. all matter and may differ in urban and rural locations. Smart homes which use new technologies in their build and a support how people live are also important particularly for those in caring roles and for those living with disabilities and long term conditions. Building to higher standards may have some impact on build costs and so it will be ensured that development viability and deliverability is not compromised. Mechanisms for ensuring housing is built to this standard will need to be embedded in to development management processes at district council level.

There are a number of existing best practice guides around developments and integrating with existing settlements that can influence the development of a Lincolnshire Design Guide for health and wellbeing:

1. **Building for a Healthy Life** (formerly Building for Life 12)
2. **Putting Health into Place** – the guidance resulting from the **NHS Healthy New Towns Programme**.

Local design codes will need to avoid simply repeating the commitments in guides such as these and instead should offer practical standards to drive improvements in development quality across the county.

There is a strong emphasis on the need for Green and Blue Infrastructure with the benefits of:

- Improving people's mental and physical health
- Encouraging physical activity
- Reducing air pollution, if carefully designed

- Protecting against climate change; for instance, by helping to reduce flood risk, cooling urban areas during heat waves, storing carbon, or preventing soil erosion
- Increasing biodiversity
- Growing food locally
- Attracting investment
- Improving the soundscape

There are changes to national policies under way maintaining a theme on quality, environmental housing standards (Future Homes Standard) and improving accessibility (disability) standards within the home. The outcome of these emerging policies and regulations will be reflected in the Lincolnshire Design Guide.

Housing Standards: Safe and Warm Housing

Whilst new homes and specialist accommodation is needed to house working age adults with a serious disability and a growing and ageing population, most people live in and will continue to live in existing housing. A significant amount of existing private sector housing is in poor condition (e.g. hazards, cold homes), overcrowded or under-occupied which impacts on the physical and mental wellbeing of its occupants.

The Health Foundation produced a report entitled [How Does Housing Influence Our Health?](#) in 2017 which states that:

“....., [1 in 5 dwellings in England do not meet the Decent Homes standard](#), and a third of these are in the private rental sector, the fastest growing segment of the UK housing market. There is also unequal distribution of good quality housing. Those who are elderly or young, isolated, or without a support network, and adults with disabilities are more likely to be affected. It’s not surprising that young people are concerned about this when they [spend nearly a quarter of their income on housing](#) – a theme that they are exploring in their [Young people’s future health inquiry](#).

Social housing is in general much better but there are particular issues in the private rented sector. However, greater numbers of people are living in owner occupied homes, including many homes which contain serious hazards. Older people in particular can have a significant amount of equity in their home but be 'cash poor' and less able to afford appropriate levels of heating, repairs and maintenance as their income is more limited. Where people live in private rented accommodation, landlords may only maintain properties to the minimum standard required in law. Cold homes and those which are excessively hot pose risks to health for individuals resulting in unplanned hospital admissions and other service pressures.

| Housing tenures in Lincolnshire | | | |
|--|----------------|--------|---------|
| (Source: BRE Housing Stock Modelling report, 2017) | | | |
| Number of Dwellings | | | |
| Private Sector Stock | | Social | TOTAL |
| Owner Occupied | Private Rented | | |
| 220,233 | 71,952 | 45,985 | 338,170 |
| Age profile of private sector housing stock in Lincolnshire | | | |
| (Source: CPC Housing Condition Survey report, 2009) | | | |

| Pre 1919 | 1919-44 | 1945-64 | 1965-80 | 1981-90 | Post 1990 |
|----------|---------|---------|---------|---------|-----------|
| 55,081 | 19,360 | 40,356 | 62,171 | 34,903 | 80,314 |

The majority of households in Lincolnshire are owner occupiers but in recent years the proportion of private rented sector homes has grown to exceed those in the social housing sector. The private rented accommodation in areas of deprivation tends to the poorer end of the market but still has challenges around maintenance and adaptation.

Private sector housing conditions in Lincolnshire
 (Source: **BRE Housing Stock Modelling report, 2017**)

| | | | | | | | | | |
|---|---|--------------------|--|--|----------------------|--|---|------------------------------|---|
| <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;">Serious hazards</td> <td style="text-align: right; padding: 5px;">18%</td> </tr> <tr> <td style="padding: 5px;"> <ul style="list-style-type: none"> • Owner occupied • Private rented </td> <td style="text-align: right; padding: 5px;"> <ul style="list-style-type: none"> 17% 19% </td> </tr> <tr> <td style="padding: 5px;">Falls hazards</td> <td style="text-align: right; padding: 5px;">9%</td> </tr> <tr> <td style="padding: 5px;">Dwellings in disrepair (Decent Homes Standard)</td> <td style="text-align: right; padding: 5px;">4%</td> </tr> </table> | Serious hazards | 18% | <ul style="list-style-type: none"> • Owner occupied • Private rented | <ul style="list-style-type: none"> 17% 19% | Falls hazards | 9% | Dwellings in disrepair (Decent Homes Standard) | 4% |  |
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| Fuel Poverty | 10% | | | | | | | | |
| <ul style="list-style-type: none"> • Owner occupied • Private rented | <ul style="list-style-type: none"> 8% 15% | | | | | | | | |
| Low-income households | 17% | | | | | | | | |

13% of owner occupiers in the county are estimated to be living on a low income and could need financial help with repairs and improvements or relocating (Source: BRE Housing Stock Modelling report, 2017).

Cost effectiveness

In addition to ensuring that we meet locally emerging need successfully, there are additional benefits from developing and linking housing and health together that relate to value for money at local and national level.

There is growing interest in how investment in housing can lead to benefits in health and potentially lead to cost savings in other service areas. Where appropriately designed housing, both in general and for specific needs, helps meet health and care needs there is a business case to be made. A number of reviews have gathered and assessed the evidence of the cost effectiveness of housing interventions to improve health.

Some examples of where savings can be achieved are:

1. Having to place people with mental health needs out of the county in inpatient beds is a huge cost (around £1,000 per day). Even bringing people back in to the county on to an acute mental health ward or a residential placement costs in excess of £300 per day. Whilst a patient is taking up a bed when ready for discharge the Clinical Commissioning Group (CCG) may have to commission out of area for someone else, so supported housing accommodation versus an inpatient bed is important.
2. The financial benefits of Extra Care Housing (ECH) are predicated on the basis that the costs of providing care within an ECH setting are materially lower than in traditional residential and nursing settings. The expected cost for older people ranged from £502 to £553 per week in 2019/20, with the average annual residential care cost estimated to be a little over £27,500 per annum. Initial analysis suggests the gross cost of providing care within an ECH setting at 20 hours per week would be £309 per week, with an annual cost of £16,111. This represents a gross saving of £11,445 per annum or 41.5%; which reduces to £9,118 (33%) once the impact of income loss is taken into consideration as the average placement income within a residential setting is higher than service user contributions derived from an ECH setting.
3. Health impact assessments quantifying the health-cost benefits of improvements to existing poor condition housing improvements can provide local authorities with the information they need to drive up public health standards and reduce health costs. They identify the most beneficial and cost effective improvements to housing. Research on quantifying the health-cost benefits of improving homes has provided a very strong case for this approach. For example, a BRE Trust report on the cost of poor housing highlights potential savings to the NHS in England of more than £1.4 billion a year from dealing with the most pressing housing problems. Meanwhile the cost of poor housing to the wider society has been estimated at £18.6 billion a year (from this BRE report).

We will continue to build up the case for investment in housing to reduce future costs elsewhere. This may require partners to think differently about how they use funds available to them and potentially lead to pooling of some budgets across organisations or transfer of budgets from one organisation to another.

Understanding needs and opportunities - delivery objectives

2.1 We will review the evidence base and develop analysis to maintain an up to date picture of demand for homes with care and support and preferred locations and clarify the priorities for future investment

2.2 We will make a strong case for investment in housing to reduce health and care costs

2.2 We will facilitate or influence appropriate design of new build housing to take account of how people want to live while maintaining viability

2.3 We will improve our understanding of housing conditions in Lincolnshire, the impact on physical and mental health, and the potential cost of poor housing to health, care and society

2.4 We will maximise the financial resources available to tackle poor housing standards and ensure they are effectively targeted

2.5 We will support good landlords to increase the supply of quality, housing that is affordable made available to people with health and care needs.

2.6 We will make best use of enforcement powers available across different organisations to target criminal landlords

3. Housing for people with care and support needs



Increasing choice of housing that is affordable and accessible supports people's physical, mental and financial wellbeing, and avoids upheaval. It reduces costs to the public purse arising from avoidable hospital admissions, delayed hospital discharge, and avoidable and permanent admission to care homes. People may need support to find to the right housing choice for their specific circumstances.

Children and Young People

The County Council and its partners have a statutory duty under The Children and Family Act 2017 to support Care Leavers to access safe and suitable accommodation up to the age of 21 and now through to 25, which requires the help of all partners to achieve this. District Councils share corporate parenting responsibilities, in supporting care leavers which can include certain exemptions in housing benefit, relative priority on housing waiting lists and council tax provisions under local flexibilities.

Most children and young people live within their family network. Where they experience difficulties, they are supported through early help to stay with or return to live with their family. The 'Future 4 Me' service works with those who are at greater risk and vulnerability

to help provide stability for the longer term. Where a child or young person needs to make a planned move into independent accommodation, or support to find and sustain independent living arrangements, the County Council commissions Housing Related Support Services with 72 units of accommodation re-commissioned in 2020. Working closely with District Councils, it ensures that where they cannot be connected back to their home, they are housed appropriately by local housing authorities and supported by other relevant agencies.

More children are growing up and going into adulthood with complex health conditions, and they and their families need more flexible, bespoke housing solutions. Equipment, home adaptations and potentially alternative housing may be needed to provide greater independence, whilst enabling on-going family support.

Working Age Adults

A **Specialist Adult Services Accommodation Strategy** (for adults with learning disability, autism and/ or mental health needs) is under development to support the Lincolnshire Homes for Independence blueprint. This will consider the need for Residential and Nursing Care as well as Supported Accommodation, Shared Lives Services and other accommodation for working age adults with complex needs.

Four levels of independence are considered as follows:

- Level One: Secure Accommodation and Mental Health Inpatient Care;
- Level Two: High Complexity Residential and Community Supported Living;
- Level Three: Residential Care and 24 Hour Community Supported Living;
- Level Four: Independent Living - Including shared lives placements, own home ownership, rented accommodation or living with family and friends.

We want to achieve a proportional move towards Level Four through a maximising independence approach. The lead commissioner for Specialist Adult Services will work closely with the Housing, Health and Care Delivery Group (HHCDG) in relation to access to the wider housing market for related service users. In particular Level Four is the key area to develop adequate housing options.

The **National Autism Self-Assessment Framework 2018** identified the importance of local housing strategies recognising the needs of people with autism. It also recommends the provision of autism awareness training for those who work in the housing sectors.

The Transforming Care programme aims to improve the lives of children, young people and adults with a learning disability and/or autism who display behaviours that challenge, including those with a mental health condition. The programme has three key aims:

- To improve quality of care for people with a learning disability and/or autism
- To improve quality of life for people with a learning disability and/or autism
- To enhance community capacity, thereby reducing inappropriate hospital admissions and length of stay.

It makes specific reference to the need to find appropriate accommodation for people with these needs. This is something that needs to be improved in Lincolnshire to avoid the need for out of county placements as hospital in-patients, which cost more for our services but more importantly disconnect people from their families, friends and community networks.

Older Adults

People are living longer but often in poorer health in older age. Many people want to live in their existing home, staying close to family, friends, social networks and familiar amenities. New technologies are developing to support people with increasing levels of need and there is a growing role for occupational therapy in conjunction with technology to support people to stay in their own homes as an alternative to long term care provision.

Homeless People

There was a general increase in the number of homeless applications received by district councils in the ten years up to 2017/18. Homelessness and rough sleeping have risen sharply nationally and locally in recent years and data has been gathered and collated differently since 2018/19. **Lincolnshire's Homelessness and Rough Sleeping Strategy** identifies levels of need, statutory duties and opportunities for multi-agency working to prevent and relieve homelessness.

| Homelessness assessments (2019-20) | |
|---|-------|
| Source: Ministry of Housing, Communities and Local Government (MHCLG) | |
| Number of initial assessments | 3,972 |
| Total owed a prevention of relief duty | 3,868 |
| Threatened with homelessness within 56 days (prevention duty owed) | 2,002 |
| Homeless relief duty owed | 1,866 |

The Government's 'Everyone In' campaign to house all rough sleepers during the Coronavirus pandemic lockdown in 2020 was hugely successful. However, as the emergency funding has ceased and there is a probable rise in unemployment arising from the economic impact of the Coronavirus pandemic, there is the potential for family breakdowns, evictions from rented accommodation and repossessions where people fall behind with mortgage repayments - leading to people becoming at risk of being homeless, homeless or sleeping rough. Numbers of homeless applications and the situation leading to these is closely monitored. The pandemic demonstrated what can be achieved when agencies work together to address homelessness as a public health issue.

We also need to reflect the needs of young homeless people, those who are chaotic, and those who misuse substances combined with mental health issues. Often viewed as underserving and unpopular, this cohort needs intensive support and access to accommodation.

People Who Hoard

People who hoard have a recognised disorder that puts themselves, their families and neighbours at increased risks. Hoarders often have additional health and wellbeing needs and even face eviction from their home or formal action being taken against them. In Lincolnshire we have produced a multi-agency **Hoarding Protocol** to assist agencies to identify, advise and support those who need help with Lincolnshire Fire and Rescue hosting a Hoarding Advocate. Much has been achieved to help people in this situation declutter and get their homes back to a manageable state; however, more needs to be done to address their underlying issues and treat hoarding as a mental health issue.

Domestic Abuse Victims



Victims of domestic abuse can be men and women, older and young people, with adverse impacts on children. Safe homes and appropriate support are vital to support people to retain or regain their independence. Domestic Abuse Refuges are provided in Lincolnshire as a commissioned service and through the local voluntary sector to support some of those affected to secure safe accommodation and support near to home. Some people will go outside Lincolnshire to be safer at a distance from the

perpetrator and others will take up places in refuges in Lincolnshire to get away from the area they are from.

Different housing options must be available to victims of domestic abuse. Location and affordability are likely to be the deciding factors for general needs housing rather than its nature. Ensuring appropriate supply is, therefore, difficult but the **Domestic Abuse Bill** will when enacted require the County Council to form a partnership board and complete a needs assessment.

4,805 adults and children have been kept safe and supported through domestic abuse, thanks to organisations in Lincolnshire working together over the ten years up to 2018. District Councils can advise about housing, including offering emergency or temporary accommodation if people are made homeless and are vulnerable and in priority need as a result of domestic abuse or other reason.

Carers

Unpaid carers are crucial to enable people with care needs to maintain independent living and are recognised as a priority in their own right in the Lincolnshire Health and Wellbeing Strategy alongside Housing. At the 2011 Census just short of 80,000 people said they were providing unpaid care to someone. In 2018/19, 10,325 people caring for adults received support from the County Council.



Housing services and housing related support need to recognise the specific needs of carers as well as those they care for and make appropriate provisions. This includes making best use of digital technology to reduce the burden of caring and enable working age carers to remain in employment.

Armed Forces Personnel and Veterans

The Armed Forces has long-standing links with Lincolnshire, through an extensive network of Air Force bases and a significant number of service personnel and veterans. The **Lincolnshire Armed Forces Covenant** commits agencies to working together to recognise and support them. District Councils can use local flexibilities to support serving personnel and veterans recognising that their role involves frequent moves which may make it harder to secure settled accommodation. Partners include the Royal British Legion and SSAFA: the Armed Forces Charity.

Housing for people with care and support needs - delivery objectives

3.1 We will facilitate quality, choice and diversity of housing for people with care and support needs

3.2 We will achieve a proportional move towards maximising independence for working-age adults and older people needing care

3.3 We will improve services to extend people's housing choices in preparation for later life

3.4 We will address the underlying causes leading to homelessness whilst still providing appropriate support and housing for those who need it

3.5 We will increase units of single person accommodation to house those who would otherwise be sleeping rough

3.6 We will strengthen healthcare inclusion services for homeless people across the county

4. Helping people remain in their current home

Given the choice, many people prefer to stay in their own homes as their needs change. Memories and personal attachment, familiarity with neighbours and local surroundings are hugely significant to people. Staying at home and remaining connected can be an option with the help of equipment, digital technologies, home adaptations and personal support.

Adult Care Services in the County Council are under increasing pressure but continue to deliver quality and essential services, including home care that enables people who are eligible to remain living independently for as long as possible. This provides in the region of 62,000 visits each week to support people at home. In order to signpost people to wider services and tackle issues such as loneliness and social isolation, the County Council and the NHS has commissioned **Connect 2 Support Lincolnshire** as a library of information on support services that are available from both statutory organisations and the community and voluntary sector.

Occupational Therapy Services are provided by the County Council and the NHS to work with people to identify barriers to independence in their homes, making recommendations to remove these and increase independence.

County Council Occupational Therapists (OTs) work to enable children and adults with disabilities (mental and physical) and debilitating conditions such as Cerebral Palsy and Parkinson's Disease to carry out essential activities, with the aim of maintaining or improving a persons' independence at home. Occupation means any way in which people spend their time from personal care (washing, dressing, toileting) to productivity (paid or unpaid work, housework and education); to leisure (games, sports, hobbies and social activities).

NHS Occupational Therapists based in Lincolnshire's hospitals and community health providers work within a similar ethos to community-based Occupational Therapists. They are building up their knowledge of housing and wider determinants of health through engagement with integrated neighbourhood working; however, the role is more focused on recovery and rehabilitation than longer term needs.

Lincolnshire Fire and Rescue Service's 'Safe and Well checks' create clear referral pathways to identify, report, support and stabilise people's wellbeing, enabling them to 'stay put' or 'move on' as appropriate. These build on the long-standing success of the Home Safety Checks (HSC) that helped to protect thousands of people throughout the county from the risk of fire in their homes. Safe and Well Checks will still incorporate fire safety but also include advice to help an individual improve their health and wellbeing, with the ultimate goal to help people to stay safe in their own homes. Home visits include vital checks on smoke alarms, but also a frailty assessment and, given the significant number of cooking related incidents, fire fighters offer specific advice on cooking safely.



A new initiative to highlight people most at risk from fires in their homes and to support them to get help has been launched by Lincolnshire Fire and Rescue. SHERMAN highlights 7 key factors that may make people at greater risk of having or being less likely to react to a fire. These are:

- **Smoking**
- **Hoarding**
- **Elderly people or those who live alone**
- **Reduced mobility, hearing or visual impairments**
- **Mental health issues**
- **Alcohol misuse, drugs/medication dependence**
- **Needing care or support**
- It aims to increase both the public and professionals' awareness of the risk factors and encourage them to get in contact with the service through a Safe and Well check.

The **Wellbeing Service** Wellbeing Lincs is commissioned by the County Council and delivered by the District Councils working in collaboration to support access to equipment, and minor adaptations on a fee-paying basis, alongside support to improve financial and social wellbeing.

| Wellbeing Lincs | |
|---|-------|
| Number of referrals to the County Council Wellbeing Service in 2019/20 | 7,700 |
| People helped to access small aids (e.g. grab rails) in 2019/20 | 790 |
| Wellbeing Lincs case studies | |
| <p>N has mental health issues and alcohol addiction and has been diagnosed with Schizophrenia. N needs prompting to manage his personal care and doesn't wash regularly. His home environment is not pleasant as N cannot manage to clean either himself or his home. Wellbeing Lincs provided a list of gardening services and cleaners, made a referral to the Carers team for N's mother and chased the District Council for fitting of rails.</p> <p>D had started to feel very isolated and need support to go out. D wanted to set up a funeral plan and was also having problems with her fuel supplier. Wellbeing Lincs completed an online form for a Blue Badge, registered D with Call Connect with a home pick up, contacted ASC to find out how much direct payment D has been given for how many hours a week social inclusion, phoned and liaised with a local funeral director then set up a home meeting for D and changed the tariff that D was on with her fuel provider. D is now more independent and socially active, has a funeral plan and the difference in the fuel tariff is helping with bills.</p> | |

In an emergency response to the Coronavirus pandemic in 2020 the District councils worked quickly and effectively with the County Council and the Lincolnshire Resilience Forum to reorganise the Wellbeing Service, supporting large numbers of people at

greatest risk from Covid-19. Elements of these adaptations have been retained and built in to the service as business as usual.

The Wellbeing Service includes a hospital in-reach element which now sits alongside two permanently funded Hospital Housing Link Workers. This helps ensure that housing issues are picked up early in discharge planning and can be addressed to help people get homes as soon as possible and avoid them staying in hospital longer than is necessary.

The **Lincolnshire Community Equipment Service** combines County Council and NHS resources to provide simple, often low cost equipment to allow people to remain independent at home. Low cost interventions such as additional hand/grab rails, improved lighting, etc., help prevent falls and support people to remain independent.

| Lincolnshire Community Equipment Service | | |
|--|------------|-------------|
| | 2018/19 | 2019/20 |
| Number of clients supported | 55,359 | 56,916 |
| Number of items delivered | 103,426 | 104,681 |
| Number of items collected | 61,348 | 66,051 |
| Total cost | £6,426,471 | £ 5,922,987 |

Telehealth provides opportunities for remote monitoring of health outcomes, reducing the need for travel to medical centres, providing greater peace of mind for individuals and carers and reducing the risk of unplanned emergency hospital admissions.

Telecare and new forms of **Assistive Technology** support individuals to live independently at home and complement traditional care more cost effectively, offering better outcomes and increased satisfaction for people with long-term care needs. There are around 4,500 people with Telecare in their homes costing £500,000. Devices such as 'Alexa' offer opportunities which need to be explored fully.



85% place importance on provision of alarm system in designated housing for older people

Source: Housing Learning and Improvement Network, August 2019

Disabled Facilities Grants (DFGs) are provided by District Councils. Mandatory DFGs fund essential home adaptations, giving disabled people better freedom of movement into and around their homes (e.g. stair lifts, ramped access) and providing access to essential facilities within the home (e.g. level access showers). Other support, including repairs, may be provided through discretionary housing assistance. Most District Councils have discretionary policies and a countywide Housing Assistance Policy is under development.

| Disabled Facilities Grants | | |
|----------------------------|------------|------------|
| | 2018/19 | 2019/20 |
| Number of grants completed | 644 | 632 |
| Total DFG spend | £4,325,644 | £4,336,385 |
| Number of grants approved | 160 | 269 |
| Value of DFGs approved | £1,232,405 | £1,327,356 |

These services are all valuable but all operate independently, making it harder for individuals and those who support them to navigate the support available. A key objective of the programme of work to embed DFGs as part of a system-wide approach to keeping people independent in a home of their own is to integrate these to create a seamless, customer-friendly, efficient and cost effective service with the person at its centre. This is being taken forward with the seven district councils working collaboratively and with the County Council and partners through a Moving Forward with DFGs group.

Lincs 4 Warmer Homes

In order to address the issues of excess cold homes and fuel poverty the councils across Greater Lincolnshire have formed a partnership to connect residents with installers and funding to complete heating and insulation improvements in private sector homes. This is predominantly to support owner occupiers living on a low income and in a high energy cost home or who have a condition that makes them more susceptible to the cold.

Overseen by the Greater Lincolnshire Energy Efficiency Network (GLEEN), **Lincs 4 Warmer Homes** (L4WH) has created a framework of installers to refer residents to access funding from the energy suppliers' Energy Company Obligation (ECO) scheme. Following a successful bid, Warm Homes Fund money is also available for first-time central heating installations for a limited time. Government has also introduced Green Homes Grants to help people with more costly improvements such as solid wall insulation and renewable heating systems. This is in part in response to the Coronavirus pandemic to re-stimulate the market and to prepare people for possible future lockdown(s) when they could be told to stay in a cold home.

The partnership has the potential to do more and to implement the recommendations made to Health and Wellbeing Boards in National Institute for Clinical Health and Care Excellence (NICE) guidance NG6: **Excess winter deaths and illness and the health risks associated with cold homes.**

Housing Related Support

Where people are unable to secure or maintain accommodation, often due to a combination of poor mental health, substance or alcohol misuse, family breakdown, loss of income and debt, they may need additional support. District Councils have statutory duties to prevent and relieve homelessness, but those people with more complex needs need effective multi-agency approaches that combine suitable accommodation and support to enable them to achieve independence.

Since being commissioned in 2015, housing related support services have supported over 8,000 people to improve their health and wellbeing, and regain their independence by either sustaining or finding suitable accommodation. Housing Related Support Services (HRS) for young people and for adults, and Domestic Abuse Refuges, have been re-commissioned by the County Council to start in October 2020 with a budget of £2 million; with the HRS service estimated to help an estimated 1,167 adults per annum.

Helping people remain in their current home - delivery objectives

4.1 We will ensure services to support people to remain living in their current home complement each other as a system-wide approach

4.2 We will develop a seamless, customer-friendly 'one-stop shop' to deliver cost effective services with the person at the centre

4.3 We will make best use of new digital technologies to enable homes for life

5. Helping people find and move to a suitable home

Lincolnshire Homes for Independence is a **call to action** providing a narrative and a description of how increasing the amount of good quality housing that is affordable and accessible for residents that wish to move can reduce the need for the services referenced in the previous section. More specialist homes with care and support need to be available for where the general housing market does not meet peoples' needs. Older people in particular are clear about what they wish to achieve:

Focus group key message



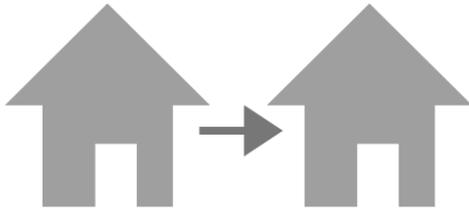
69% of people would like to move to a smaller house

When considering a move the most popular location is town/city outskirts (53%)



10% of people would move from a rural village

Focus group key message



60% would consider or are undecided about moving to designated housing for older people



84% would consider or are undecided about paying a service charge, in addition to rent for housing services

The most essential things the property would need to have were:

- **Own front door (93%)**
- **Able to take own furniture (83%)**
- **Parking (78%)**
- **Accessible location near amenities (77%)**
- **Own garden (70%)**



Source: Housing Learning and Improvement Network, August 2019

To enable people to plan ahead with greater choice and insight at the right time for them, it is essential that there is a range of homes across different tenures available in the right locations to meet needs. Those who are currently owner occupiers might wish to remain in owner occupation or free up some capital through shared ownership; others might want to rent in the private or social housing sectors.

Different levels of housing with care are needed. Evidence to support the need for accessible homes will be strengthened as a basis for requiring developers to build greater proportions of new build housing to the higher levels of accessibility in the building regulations and for us to encourage, support and fund both Registered Providers and private developers to go further. There is also scope to work with developers on bespoke schemes for people with complex needs where existing homes cannot be easily adapted.

More emphasis will be placed on providing people with housing options information so they can decide to either remain living where they are now or move. Relocating can be more appropriate than expensive adaptations to current homes, especially where other factors make the home unsuitable (e.g. under-occupation, poor location (isolated), unmanageable).

Where people do come to require a higher level of care and support, every effort will be taken to avoid this coming in the form of residential or nursing care homes.



Finding a new home in later life is seen as a progression, a road map with the aim of accessing residential and nursing care only as a last resort (not losing sight of the fact that sufficient provision of this must be available).

But needing a home with some care and support provided is not all about later life. Care and Extra Care can be required by people of all ages who could be living independently. Multi-generational developments where young and old can live alongside each other, receiving the support and care they need whilst being of mutual support and company to each other should be considered. We particularly want to secure the provision of homes that encourage and facilitate people being treated as individuals and care being personalised to their particular requirements and wishes. Where possible, we want to see housing with support designed to be adaptable to change and allowed to evolve as

opposed to being categorised. It should be both reactive and responsive to the assessed needs and demands of those who live there with the support of the local community.

One standard used by LACE Housing, a Registered Provider that specialises in housing for older people, has four levels of supported housing that provides a supported environment for those wishing to retain / regain independence within a community / environment in which they are familiar:

- Level 4 – Extra Care Housing
- Level 3 – Extra Care Lite
- Level 2 – Specialist older peoples' housing
- Level 1 – Retirement plus older peoples' housing

Extra Care Housing

There is some excellent housing for people with a range of needs but not enough for everyone to have a full range of choice that is affordable to them. The County Council's Extra Care programme, working with District Councils, Registered Providers, developers and communities, seeks to address the shortage of provision where demand is high, where the market is less active and where there is scope to meet the needs of adult care service users more effectively. Mainly supporting older people, this will also support working age adults, creating mixed, inclusive communities wherever possible. The programme aims to increase capacity in the areas of highest need in the county and encourage further development.



In a large rural county, with dispersed populations, mixed accommodation which builds around and enhances natural communities is the preferred model.

We believe that all such new accommodation should be:

- Built well and maintained to high quality standards
- Affordable and economical throughout its lifetime
- Designed for all age living, flexible and able to adapt to meet future needs
- Designed to promote social connectedness, wellbeing and community activity
- Close to or will incorporate open space
- In easy reach of amenities without the need for extensive travel

- Sensitive to the scale and diversity of Lincolnshire's communities
- Marketed locally
- Co-produced from design through to day-to-day management wherever possible with the people who will be living there.

Helping people move to a suitable home - delivery objectives

5.1 We will influence delivery of new-build housing to provide greater choice of homes with care and support across all tenures

5.2 We will support people with care and support needs to access social and private rented homes

5.3 We will provide more extra care housing of different levels to meet demand

6. What's next working together on the vision?

The County Council has a legal duty to provide children's and adult social care services. The seven district councils are the local housing and planning authorities responsible for developing and implementing Local Plans and securing new housing. Others including developers, Register Providers (Housing Associations), public bodies (e.g. NHS (linking in to the Transforming Care programme and reducing mental health patients using out of county in-patient facilities), DWP) and charities have a key role to play in delivering more Homes for Independence and integrating support services to promote and sustain independence.

The Housing, Health and Care Delivery Group (HHCDG) adopted a memorandum of understanding (MOU) to support joint action in Lincolnshire on improving health and wellbeing through the home. Mirroring the national MOU, this underpins joint working to deliver better housing outcomes, including achieving greater choice and independence, for Lincolnshire's residents. The Lincolnshire Homes for Independence is the blueprint for HHCDG partners which builds on the commitment in the MOU to develop collaborative actions and achieve the objectives set out in it.

By understanding each other's responsibilities and working better together, we will provide greater choice and help people to be better prepared, make better informed, longer term plans to meet housing and support needs. We have mapped the Housing and Planning Groups (multi-agency partnerships) that have a role to play in an organogram to support better integrated working across the county and maximise the efforts of all partners to deliver homes for independence.

Programmes of work that contribute to the homes for independence agenda are delivered through a Delivery Plan supporting the HHCDG to oversee the Housing priority in the Lincolnshire Joint Health and Wellbeing Strategy. The plan sets out the direct actions the HHCDG will take to achieve outcomes under each of the objectives outlined throughout this document. It also identifies complementary activity which is managed elsewhere but indirectly supports the delivery of homes for independence. The plan will be reviewed and updated annually.

Meeting the housing needs for the whole community is complex as it involves multiple organisations. But, by working better together under the direction of the Health and Wellbeing Board (HWB) on a range of programmes and activities around this the agenda, we can make a difference.

The HHCDG will provide an annual progress report to the HWB. Previous reports can be found here:

[Housing Priority Report to the Housing Health & Care Delivery Group September 2019](#)

Much has been achieved already by organisations in Lincolnshire working more closely together to meet the wider needs of the whole community, but also through people's passion to develop healthy communities and their willingness to be innovative, embracing new technologies. Decent, housing that is affordable has reduced overcrowding, accidents and disease, improved people's mental and physical health, and enabled the development of welcoming and safe communities.

There is more to do. We are equally ambitious, passionate and innovative as we work together to achieve our vision **for people to live independently, stay connected and have greater choice in where and how they live.**

Glossary

Bibliography

Housing, Health and Care Delivery Group Membership

| | |
|--|---|
| Chair and Member of the HWB | Councillor Wendy Bowkett |
| Lincolnshire County Council | Glen Garrod (Executive Director – Adult Care and Community Wellbeing) Gareth Everton (Adult Care) Semantha Neal (Public Health) Lisa Loy (Public Health) Sean Johnson (Public Health) Roz Cordy (Children's Services) Andy Morris (Children's Services) Karen Gardner (Lincolnshire Fire and Rescue) |
| District Councils | Councillor M Griggs (Boston Borough) Councillor P Skinner (Boston Borough) Andy Fisher (Boston Borough) Councillor C Lawton (South Holland District) Jason King (South Holland District) Councillor B Dobson (South Kesteven District) Councillor R Reid (South Kesteven District) Councillor O Bierley (West Lindsey District) Diane Krochmal (West Lindsey District) Councillor D Nannestad (City of Lincoln) Yvonne Fox (City of Lincoln) Matthew Hillman (City of Lincoln) Andrew McNeil (City of Lincoln) Michelle Howard (East Lindsey District) Philip Roberts (North Kesteven District) Steve Priestley (North Kesteven District) Councillor L Cawrey (North Kesteven District) Councillor I Carrington (North Kesteven District) Alison Timmins (County Homelessness Partnerships Manager) |
| Lincolnshire Partnership NHS Foundation Trust (LPFT) | Claire Darbyshire |
| Department of Work and Pensions (DWP) | Graham Metcalfe |
| LACE Housing | Nick Chambers |
| United Lincolnshire NHS Hospitals Trust (ULHT) | Michelle Harris (Deputy Director of Operations, Urgent Care) Kathryn Sayles |
| Lincolnshire Community Health Services (LCHS) | Kim Barr (Neighbourhood Lead) Beckie McConville (Neighbourhood Lead – Lincoln North) |
| NHS Lincolnshire Clinical Commissioning Group | Jacqui Bunce Rachel Redgrave |

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| (CCG) | |
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Lincolnshire Homes for Independence Housing Health and Care Delivery Group - Delivery Plan for 2020-22

Our **vision** is for people to live independently, stay connected and have greater choice in where and how they live.

The right home environment is essential to health and wellbeing, throughout life. Timely and appropriate support services enable people to live at home safely and independently. We are committed to working together, across local government, housing, health, care, and voluntary and community sectors to understand and respond to current and future needs in Lincolnshire."

This Delivery Plan has a number of collaborative actions that are supported by each organisation aligned to the 'Lincolnshire Homes for Independence' blueprint delivery objectives. In order to avoid duplication of efforts and ensure a strategic systems approach this Delivery Plan captures tasks from a range of work streams, including that of the Centre for Ageing Better.

| ID | Delivery objective | How will this be achieved? | Completion Date | Responsible Group and Lead | Update |
|--|--|--|-----------------|----------------------------|--------|
| Understanding needs and opportunities | | | | | |
| 2.1 | We will review the evidence base and develop analysis to maintain an up to date picture of demand for homes with care and support and preferred locations and clarify the priorities for future investment | Recruit Housing Analyst dedicated role to link data to housing issues, linked to or based alongside Public Health Intelligence Team, also to work across the CCG | | | |
| | | JSNA - Re-schedule topic review/ update | | | |
| 2.2 | We will make a strong case for investment in housing to reduce health and care costs | | | | |

**Lincolnshire Homes for Independence
Housing Health and Care Delivery Group - Delivery Plan for 2020-22**

| ID | Delivery objective | How will this be achieved? | Completion Date | Responsible Group and Lead | Update |
|-----|---|---|-----------------|----------------------------|--------|
| | | | | | |
| 2.3 | We will facilitate or influence appropriate design of new build housing to take account of how people want to live while maintaining viability | Enabling relationships - Homes England - Housing Infrastructure Group (HIG) Link to Housing Infrastructure Group (HIG) Action Plan. HIG remit covers new builds & need a link between HIG and HHCDG. | | | |
| 2.4 | We will improve our understanding of housing conditions in Lincolnshire, the impact on physical and mental health, and the potential cost of poor housing to health, care and society | | | | |
| 2.5 | We will maximise the financial resources available to tackle poor housing standards and ensure they are effectively targeted | Health issues caused by poor housing- SJ has met with Jacqui Bunce to talk about how to do this and to measure the impact (e.g. less medication, or GP visits) | | | |
| 2.6 | We will make best use of enforcement powers available across different organisations to target criminal landlords | | | | |

**Lincolnshire Homes for Independence
Housing Health and Care Delivery Group - Delivery Plan for 2020-22**

| ID | Delivery objective | How will this be achieved? | Completion Date | Responsible Group and Lead | Update |
|---|--|-------------------------------|-----------------|----------------------------|--------|
| Housing for people with care and support needs | | | | | |
| 3.1 | We will facilitate quality, choice and diversity of housing for people with care and support needs | | | | |
| 3.2 | We will achieve a proportional move towards maximising independence for working-age adults and older people needing care | | | | |
| 3.3 | We will improve services to extend people's housing choices in preparation for later life | | | | |
| 3.4 | We will address the underlying causes leading to homelessness whilst still providing appropriate support and housing for those who need it | Rough Sleeping & Homelessness | | | |
| 3.5 | We will increase units of single person accommodation to house those who would otherwise be sleeping rough | | | | |

**Lincolnshire Homes for Independence
Housing Health and Care Delivery Group - Delivery Plan for 2020-22**

| ID | Delivery objective | How will this be achieved? | Completion Date | Responsible Group and Lead | Update |
|--|--|---|-----------------|----------------------------|--------|
| 3.6 | We will strengthen healthcare inclusion services for homeless people across the county | <ul style="list-style-type: none"> • Support services for vulnerable people (early intervention, young people, homelessness, care leavers, drugs and alcohol) • Continue & embed integrated NHS & mental health support following Covid | | | |
| Helping people remain in their current home | | | | | |
| 4.1 | We will ensure services to support people to remain living in their current home complement each other as a system-wide approach | | | | |
| 4.2 | We will develop a seamless, customer-friendly 'one-stop shop' to deliver cost effective services with the person at the centre | <ul style="list-style-type: none"> • DFG post recruitment to start once recruitment restrictions are lifted. • DFG- DFG and equipment budgets- pooled budgets to work better together and look at use of digital technology • Centre for Ageing Better support to re-design & evaluate impacts of new integrated service | | | |
| 4.3 | We will make best use of new digital technologies to enable homes for life | Ambulance Service pilot to pick up on housing conditions- possible pilot of hand held devices to record housing conditions. Could form part of the Housing MOT. A mechanism for self-reporting to be developed. | | | |

**Lincolnshire Homes for Independence
Housing Health and Care Delivery Group - Delivery Plan for 2020-22**

| ID | Delivery objective | How will this be achieved? | Completion Date | Responsible Group and Lead | Update |
|---|---|--|-----------------|----------------------------|--------|
| Helping people find and move to a new, suitable home | | | | | |
| 5.1 | We will influence delivery of new-build housing to provide greater choice of homes with care and support across all tenures | <ul style="list-style-type: none"> • Greater Homes England - use options from Covid recovery to develop social housing with care- through one public estate - land to build on – Homes England staff to research best practice – design and build proposal • Hospital discharge / avoidance • Improve housing/hospital interface- focused on hospital avoidance & discharge | | | |
| 5.2 | We will support people with care and support needs to access social and private rented homes | | | | |
| 5.3 | We will provide more extra care housing of different levels to meet demand | | | | |

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