This study examines the evidence, and the gaps in it, to consider what sheltered and retirement housing offers in terms of quality of life. Sheltered housing has changed significantly over the past decade, yet has received little attention from researchers and policy-makers. Recent and forthcoming changes to funding and benefits for older people’s housing and support services need underpinning by robust evidence.

Key points

- The UK has around 550,000 units of housing with support for older people, mainly social rented but also for sale, provided by not-for-profit and private organisations.

- In the changing world of housing and welfare policy, gaps in the evidence on sheltered housing ought to be of concern to policy-makers and commissioners of housing, support and care commissioners because of the effects on existing and prospective residents.

- The review found limited data on quality of accommodation; extent of support provision; and the age, health, care and support needs of social tenants in England.

- English data suggests a wider range of people now living in social rented sheltered housing: more people under pension age (a third of new tenants); more with different needs; and significant numbers aged 85+. Less data is available on owner-occupied and private rented retirement housing, and on the rest of the UK.

- There is little recent academic or resident-led research evidence on the quality of accommodation or services.

- Many sheltered housing schemes have diminishing levels of on-site staffing. This has affected the quality of life for some residents, especially those aged 85+ and/or with high support needs.

- Changes to residents’ characteristics and to on-site staff are less evident in owner-occupied retirement housing.

The research
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BACKGROUND

Around 5 per cent of the older population live in specialist housing with support. Across the UK there are nearly 18,000 developments and around 550,000 units (480,000 in England) of such housing, built and managed by not-for-profit and private providers. There is a wide range of accommodation and level of support.

Who lives in supported housing for older people?

Social rented housing
A widening range of people moving into and living in sheltered housing in England includes: an increasing proportion of younger tenants (below pension age); significant numbers of tenants aged over 85; new residents with a wider range of support needs and reasons for moving, including homelessness.

Overall, around 60 per cent of new residents reported a ‘disability-related requirement’ (with higher percentages among older movers) and 18 per cent moved for reasons connected to homelessness (with higher percentages among younger movers).

Existing residents reported a wide range of impairments and ill-health: mobility (43 per cent), physical health (40 per cent), sensory impairment (12 per cent visual, 15 per cent hearing), chronic disability/illness (13 per cent), and mental health (9 per cent). In terms of support needed to manage health issues, four years’ data showed no change in most categories, but a slight (and statistically significant) increase in needing support to manage mental health or substance use. This may confirm anecdotal evidence from existing residents reported in some studies.

Over a quarter of existing residents are over 85, and more than half have disabilities and health conditions. Many of these residents probably have care packages, indicated by evidence of joint working with health/social services (18 per cent of residents) and some research.

Owner-occupied retirement housing
The review found no evidence of a change in the provision of scheme-based staff, nor in the profile of residents in owner-occupied retirement housing. Their average age has remained static over two decades, at around 80. Most people moving into owner-occupied retirement housing are still over pension age. Although there is less evidence than for social rented housing, new and existing residents appear to be more homogeneous in terms of their age and background; significant numbers appear to have health and care needs.

Private rented retirement housing
Limited evidence shows increasing numbers of older people renting private retirement housing, but there is no other research evidence on this growing sector.

Quality of life for residents with high support needs

Social rented housing
Much of the evidence on the positive impact of sheltered housing is based on a traditional model, with support provided by an on-site warden/scheme manager. Recent evidence shows residents’ satisfaction with the quality of life (e.g. accommodation, social activities) in some sheltered housing, mainly with on-site staff. However, residents have also expressed concerns, especially where costs have increased and support services have been significantly reduced.

Limited evidence indicates that where support from staff based at the scheme has been reduced or removed, residents with high support needs (particularly the most elderly residents) may be especially
affected. A combination of reduced staffing and a wider range of ages and support needs can affect community cohesion, and may also reduce the possibility of residents providing informal support for each other. There is some evidence of elderly residents having to replace services previously provided by scheme-based staff, including maintaining the security of the building, and supporting and caring for frailer neighbours.

Little evidence relates specifically to older people with high support needs. Qualitative evidence suggests that sheltered housing can promote self-determination, safety/security, privacy to conduct personal relationships (especially for couples) and opportunities for wider social interaction.

Factors that may improve or reduce quality of life include:

- personal factors such as the extent of regular contact with family and on-going involvement in the community, and the impact of longer-term disabilities versus those acquired later in life;
- accommodation, such as space standards, location, security;
- on-site service provision, for example scheme manager/support model, quality of staff;
- availability of additional care/support, including specialist support for residents with specific needs.

The expectations of residents and their relatives also influence views on quality of life. This applies especially where there have been changes (e.g. to scheme-based services, cost increases) and where residents felt that they were not sufficiently consulted or involved before changes were made.

Owner-occupied retirement housing

There is evidence of resident satisfaction with quality of life in some owner-occupied retirement housing, including private and not-for-profit providers. The largest research studies have covered only two providers, and one study dates back to the 1990s.

Does supported housing provide a home for life?

Studies consistently show that most residents hope to stay living in their supported housing until the end of their life, and it appears that the majority succeed in doing so. Few move to Supported housing for older people in the UK: An evidence review by Jenny Pannell and Imogen Blood, is published by the Joseph Rowntree Foundation. It is available as a free PDF from www.jrf.org.uk.

Estimates of the proportion moving to institutional settings such as residential/nursing homes vary between 13 and 21 per cent.

Staff management and training

A key issue is the lack of clarity and unrealistic expectations of relatives, professionals and residents regarding the role of scheme-based staff, especially around hospital discharge. There are, however, examples of good practice. More recent studies indicate that staff and residents have concerns about training and support. They also have concerns about whether staff still have the time and skills to build relationships with residents who have high support needs, as staff roles have changed.

Conclusions

In recent years, the main research emphasis has been on housing with care, even though this comprises only around 10 per cent of the total supported housing stock; other supported housing for older people has been largely ignored. There is little evidence on owner-occupied retirement housing, and none on the growing private rented market. Most qualitative evidence on social rented sheltered housing describes a relatively homogeneous model with a dedicated warden/scheme manager service; it pre-dates significant changes and reductions in services.
Limited up-to-date quantitative data exists for England (social renting), but there is almost none for the other nations of the UK, nor for retirement housing for sale or private rent. Even the English data provides limited information on health/disability, and nothing on provision for care needs. So it is difficult to make informed judgements on the quality of life or numbers of residents with high support needs.

There is recent evidence that residents and providers in all sectors are concerned about costs and affordability. Significant changes are taking place, and proposed, in government policies for housing and support and the welfare system. The lack of robust evidence on the current situation is a cause for concern for residents, providers and commissioners of housing, support and care.

This review identified the following gaps in UK-wide publicly available statistical data:

- comprehensive data on specialist housing, support and care (models, services, needs, provision);
- integrated data on resident profiles (linking age, health, support/care needs, ethnicity and sexual identity).

Further gaps suggest the need for research to:

- explore what effects changes to staff and support services in social rented sheltered housing are having on residents (especially those with high support needs);
- confirm or challenge anecdotal evidence from tenants about the impact of a wider range of ages, and care and support needs in sheltered housing
- explore the role of owner-occupied retirement housing and residents’ views, across different developers and managers from the not-for-profit and private sectors;
- examine the growth of retirement housing for private renting, and the use of the ‘Right to Manage’ (i.e. private leaseholders’ legal right to change managers, and perhaps improve quality/ save money);
- discuss and clarify the current range of different models, costs and tenures available.

About the project

This study is one of several in the JRF’s Better Life programme. The review of evidence was carried out between June and August 2012. It included a literature search examining over 100 publications, mainly from 2000 onwards. Analysis of official statistics in two English datasets was commissioned: from the New Policy Institute for CORE (Continuous Recording of Lettings and Sales in Social Housing in England), and from the Centre for Housing Research, University of St Andrews, for Supporting People monitoring.

FOR FURTHER INFORMATION

This summary is part of JRF’s research and development programme. The views are those of the authors and not necessarily those of the JRF. The full report, Supported housing for older people in the UK: An evidence review by Jenny Pannell and Imogen Blood, is published by the Joseph Rowntree Foundation. It is available as a free PDF from www.jrf.org.uk.

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