

Cambridgeshire Disability Housing Strategy

2008 - 2011

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For Consultation and Comment

Front page to be designed
To add logo's once approved by partners

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An initial issues and potential action plan is also available for comment

1.0 Introduction

1.1 Partnership Approach

1.1.1 There are a range of partner organisations involved in the planning, development and provision of specific and general housing services and support to disabled people in Cambridgeshire. District Councils have responsibility for the development of local Housing Strategies. The County Council has the lead responsibility for the Supporting People programme and the provision of social care support. Councils work closely with Registered Social Landlords to maximise opportunities.

1.1.2 Listening to and taking account of the views and needs of disabled people in Cambridgeshire is key to ensure a strategic approach is taken to identify and meet the needs of the diverse Cambridgeshire population. The issues and views already identified through past consultation and involvement have been taken into account and have been fed into this document. Further work will ensure that disabled people and key others are able to influence its development and implementation.

1.1.3 It is intended that this strategy provide a basis from which to develop and evolve the provision of services and support best designed to assist and enable disabled people within Cambridgeshire to achieve and maximise their independence.

2.0 Purpose

2.1 Aim

To achieve a coherent multi agency Housing Strategy for disabled adults and young people (learning, physical or sensory) across Cambridgeshire that works towards the provision of housing and support services that removes the barriers to disabled people leading full lives with the maximum degree of independence and choice. (Note: this strategy does not cover people with mental health problems.)

2.2 Objectives

The objectives of this strategy are to:

- Ensure there is a partnership response to helping disabled people to live independently in their homes in respect to their housing and support needs of in Cambridgeshire.
- Ensure there is equity of access to good quality housing and support across the county to those in most need.
- Ensure prompt joint working to address any risk of homelessness.
- Ensure planning and developments take into account the views and needs of disabled people in Cambridgeshire.
- Identify current barriers and shortfalls in knowledge and provision and identify opportunities to address any issues identified.
- Provide a firm foundation on which to build and develop a partnership response to future need.
- Influence regional and local development organisations in order that the housing and support needs of disabled people are taken into account.
- Inform planners in relation to targets for additional or specialised housing provision.
- Set out a framework of standards to which partners should adopt.

2.3 Summary

This document sets out the context and current position in Cambridgeshire relating to housing and support for disabled young people and adults. It identifies and looks at some of the issues shortfalls and future needs for the county and sets out some good practice and standards that need to be taken into account in future development. The initial action plan sets out work needed to address some of the identified issues and the monitoring review process will ensure that the document is refreshed and informed by disabled people and key partners across the county.

2.4 Timescales

The strategy sets out the direction and key actions for 2008 – 2010/11 however it is the intention to review the strategy in time for other key planning documents that will be refreshed for 2011.

3.0 **Background**

3.1 A range of partner organisations have been involved in the initial development of this strategy. The Disability Strategic Housing Network aims to be an inclusive group and welcomes new partners to ensure that the development of services for disabled people are maximised. A list of current partners is attached at Appendix A.

3.2 National Guidance and Legislation

3.2.1 In recent years there have been a number of key national NHS + Social Care and Housing policies designed to improve access to and improve the quality of services and support. It is not our intention to refer to all of the key legislation here. Appendix B lists some of those most relevant. The key policy drivers strategic direction for services in Cambridgeshire are:

- Disability Discrimination Act 1995 and 2005
- National Strategy for Supporting People 2007
- Housing Act 2004
- Independence, Well-being and Choice 2006
- Government White Paper Our Health, Our Care, Our Say
- Improving Life Chances Cabinet Office January 2005
- Valuing People 2001
- Children's legislation including Children Act 1989; Children Act 2004 and Leaving Care Act 1999
- Local Government White Paper: Strong and Prosperous (Local Government and Public Involvement in Health Bill) 2006
- Chronically Sick & Disabled Persons Act 1970, and other associated legislation Disabled Facility Grant Legislation

3.2.2 There are however key duties and responsibilities for local and district authorities. For local housing authorities some of the key responsibilities relate to homelessness; housing advice services; homeless prevention and addressing need as it occurs and the identification and assessment of housing need. Local authorities Social Care departments have a duty to assess need and a duty of care to vulnerable people. All public bodies have a responsibility to address inequality under the Disability Equality Duty and set out a Disability Equality Scheme showing

how it will do this. Later sections look at how partners aim to work together to address need and undertake preventative work. This strategy explores opportunities to meet and address these responsibilities and informs areas for change.

3.3 Best Practice

The strategy seeks to reflect and promote best practice both in relation to planning and development and in relation to provision. Whilst much of the key guidance influencing Housing and Support sets out basic or minimum standards the strategy also seeks to challenge and stretch providers in order that future provision is of a high quality that meets the needs of disabled people. Some details are included in the appendices. It is intended that these provide a useful reference point for clarification of roles and responsibilities.

4.0 **Context**

4.1 National Context

The development of Housing and Support is complex and this strategy clearly needs to reflect work being undertaken in a range of other settings.

4.1.1 Housing Corporation

The Housing Corporation funds new affordable housing and regulates housing associations in England. It does this by:

- *Investing.* Developing and implementing regional and national housing strategies, using public subsidy to procure affordable housing which provides quality homes in the places where help is most needed.
- *Regulating.* As the statutory regulator for housing associations they drive improvements in housing association efficiency and performance, and help to ensure that associations continue to attract private finance at competitive rates to build and improve affordable homes.
- *Influencing.* By helping to shape housing, community and regeneration policy nationally, regionally and locally.

The Corporation administers the National Affordable Housing Programme which provides public funding to build and renovate homes. The 2004-06 programme invested £3.3 billion in over 62,000 affordable homes. Between 2007/8 and 2016 we plan to deliver 47,500 new homes (and provisionally 57,274 additional homes to 2021).

The Corporation oversees the injection of private finance into the affordable housing sector. Since 1989, private sector lenders have invested almost £20 billion in housing associations, dwarfing any other private sector lending initiative into social programmes. This has allowed thousands more homes to be built than would have been possible using public subsidy alone.

Under a risk-based regulatory approach, housing associations classified as low risk benefit from less intrusive regulation while medium and high risk associations receive a proportionate and tailored approach focused on the likely risk and impact of things going wrong, under the Corporation's Regulatory Code.

The Housing Corporation's Disability Equality Scheme explains how they promote equality for disabled people, and work to ensure that people are treated fairly. It aims to make sure that equality for disabled people is at the centre of their work as a regulatory body, and employer of choice for disabled people.

The Housing Corporation work towards three broad objectives that were identified by disabled people. They are:

- making its services more inclusive to disabled people;
- making housing more accessible to disabled people; and
- making sure disabled people are involved and outcomes meet their needs and aspirations.

4.1.2 Supporting People

Supporting People is the government's key funding stream through which lower level housing support is made available to those in need. The National Strategy for Supporting People issued in June 2007 covers 4 key areas:

- Keeping people that need services at the heart of the programme
- Enhancing partnership with the Third Sector
- Delivering in the new government landscape
- Increasing efficiency and reducing bureaucracy

4.2 Regional and Sub-regional

4.2.1 Regional Spatial Strategy / Local Development Framework The Structure Plan 2001 - 2016

Local authorities adopted the Cambridgeshire and Peterborough Structure Plan in October 2003. The Plan was based upon a study of options for accommodating growth for the period 2001-2016. It planned for 47,500 new homes in the Cambridge Sub-region, 50,000 new jobs and more than £2.2bn of infrastructure and improvements needed to create sustainable communities where people enjoy a high quality of life. Some of these homes are already in the pipeline or planned and approximately 10,000 have already been built between 1999 and 2004

The plan's overall approach to development in the Cambridge Sub-region made sequential provision for housing and related development at locations in the following order of preference:

- within the built up area of Cambridge, 8,900 dwellings
- as extensions to Cambridge on land to be removed from the Green Belt, 8,000 dwellings
- in the new town of Northstowe, 6,000 dwellings
- within or as an extension of the surrounding market towns, 24,600 dwellings.

It aimed to redress the imbalance between job opportunities, earnings and affordable housing. Development was planned where good public transport services exist or where they can be provided in order to minimise the need for use of the private car.

The strategy sought to increase the proportion of affordable, including key-worker, housing to 40% or more, to protect and enhance the historic character and setting of Cambridge, and to improve access to the countryside. The strategy also identifies the necessary transport infrastructure improvements to support this development and states that developments dependent on these cannot go ahead until such improvements are in place.

Under the Government's new planning legislation the Structure Plan will be superseded by the Regional Spatial Strategy when it is adopted early in 2008. However certain policies of the plan have been 'saved' and will remain in force until replaced incrementally by the local Core Strategies of each District. The saved policies include those setting out the development strategy for the Cambridge Sub-Region.

4.2.2 The East of England Plan (Regional Spatial Strategy) to 2021

The East of England Plan or 'RSS' sets out the regional strategy for planning and development in the East of England to the year 2021. It covers economic development, housing, the environment, transport, waste management, culture, sport and recreation, mineral extraction and more.

The East of England Plan – Our Housing Requirements (RSS) sets out the framework for development plans in the region until 2016. Appendix E shows the housing trajectory to 2016.

The RSS has a key role in contributing to the sustainable development of the region. It sets out policies which address the needs of the region and key sub-regions. These policies provide a development framework for the next 15 to 20 years that will influence the quality of life, the character of places and how they function, and inform other strategies and plans.

A major feature of RSS is that it identifies the significant investment that will be needed in social, environmental, economic and transport facilities ('infrastructure') if it is to achieve its desired results. That investment will come from a variety of sources, including central and local government funding and private developer funding.

The East of England Plan was first drafted in 2004, after which a complex sequence of consultations, examinations and amendments have been made. Formal publication is not expected until Spring 2008.

What does the RSS say about housing?

The latest (as yet un-adopted) revisions to the East of England Plan are summarised below, however it is important that this text is views as a summary of the main outcomes, and does not replace the full text which is available from the Go-East website at <http://www.gos.gov.uk/goeast/>

Policy H1: Regional Housing Provision 2001 to 2021

In the East of England as a whole provision will be made for at least 508,000 additional dwellings over the period 2001 to 2021. District allocations in this policy should be regarded as minimum targets to be achieved, rather than ceilings that should not be exceeded. Local planning authorities should seek as soon as possible to

(a) achieve at least the annual average development rates for the period 2006 to 2021.

(b) make up any accumulated shortfall.

The tabulated figures include a split between net additions 2001 - 2006 and residual figures for 2006 - 2021. The split shown relies on draft completions data for monitoring year from 2001 onwards. They should aim to exceed the annual average rates for 2006 - 2021 if more housing can be delivered without breaching environmental limits and infrastructure constraints, by:

- Increasing density, consistent with criteria in PPS3;
- Encouraging opportunities on suitable previously developed sites;
- Making best use of policies on exceptions sites to provide affordable housing in rural areas;

To plan for continuous delivery of housing for at least 15 years from the date of adoption, the first round of local development documents should make the assumption that the annual average rate of provision during the early years after 2021 will be the same as for 2006 to 2021 – see Table below.

Policy H3: Affordable Housing

Within the overall housing requirement set by policy H1, Local Development Documents should set affordable housing targets taking into account of the objectives of the RSS, the outcome of local assessments of housing need, the need to set specific targets for social rented and intermediate housing, housing market considerations and the regional Housing Strategy. The expectation is that some 35% of all housing completions across the region will be affordable. The minimum regional housing provision will be distributed as follows:

Area / District	Minimum Dwelling Provision, 2001 to 2021 (net increase, with annual average rates in brackets ¹)		
	Total to build April 2001 to March 2021	Of which already built April 2001- March 06	Minimum still to build April 2006 - March 2021
Cambridge	19,000	2,300 (460)	16,700 (1,110)
East Cambs	8,600	3,240 (650)	5,360 (360)
Fenland	11,000	3,340 (670)	7,660 (510)
Huntingdonshire	11,200	2,890 (580)	8,310 (550)
South Cambs	23,500	3,520 (700)	19,980 (1,330)
Forest Heath	6,400	810 (160)	5,590 (370)
St Edmundsbury	10,000	1,980 (400)	8,020 (530)

Source: Secretary of State's Planned Revision to East of England Plan

4.2.3 Cambridge Sub Region Housing Strategy

The Cambridge Housing Sub-Region produced a strategy that covers 2004 to 2008/09 and relates to seven districts: the five Cambridgeshire Districts, St Edmundsbury and Forrest Heath (in Suffolk). Within the strategy there is a section about supported housing needs, and links with Supporting People. More detail key is available in appendix C.

¹ Due to rounding adjustments the annual average rates in brackets may not match the totals. Totals take precedence.

The sub regional strategy notes:

- there is a large number of supported housing schemes already operating,
- the needs of the population are increasing (population growth and ageing)
- provision needs to be made early in the development of new communities.
- a lack of both revenue and capital to support such schemes.

The sub-regional strategy will be updated in 2008. It will include the outcomes of the new Strategic Housing market Assessment and take into account the outcomes of this disability housing strategy for the County.

Sub-Regional Actions relating to Supported Housing include:

- Make bids for funding to be up to 20% of the total available to the sub-region programme.
- Co-ordinate investment planning between the two administering authorities in respect of capital for new supported housing.

The 2008 to 2011 Regional Housing Investment Programme includes the Cambridge sub region's investment priorities, which include:

- Meet the challenge of significant housing growth to create mixed, balanced and sustainable communities across the sub-region while respecting our environmental assets.
- Invest in rural homes to support vibrant, sustainable communities.
- Respond to the diverse and changing needs of our communities including migrant workers, Gypsies and Travellers and hard-to-reach groups.
- Tackle both housing and support issues for people who are most vulnerable.
- Make best use of existing homes and extend housing options by improving housing conditions, reducing risk, updating sheltered housing and bringing empty homes back into use - focusing on those who are vulnerable and live in private housing.
- Prevent and tackle homelessness, help reduce deprivation and improve health and social inclusion.

4.2.4 Supporting People Eastern Region Group (SPERG)

The Supporting People Region Group (SPERG) is made up of Lead Officers of all the Supporting People Teams in the Eastern Region. SPERG is due to publish its first Strategy in the Autumn of 2007. The Eastern Region SP Strategy will mirror the National Strategy (see section 4.1.2) and will deliver the 4 themes in the national strategy in the Eastern Region.

4.2.5 Housing Corporation

Capital funds are available to contribute towards the cost of building new schemes or refurbishing Social Housing schemes. Applications for capital funding are always higher than available funds. A matrix was developed jointly by the Housing Corporation and the Supporting People Eastern Region Group to assess the relative merits of supported housing schemes with regard to:

- Strategic relevance
- Evidence of need

- Added Value
- Deliverability
- Unique factors

The matrix informs the prioritisation undertaken by the Supporting People Commissioning Body of supported housing priorities for Cambridgeshire.

Fully wheelchair accessible housing for individuals or households that do not require support funded through Supporting People are not categorised as 'supported housing' when bidding for capital funding. However, fully wheelchair accessible housing will require funding over and above that for general housing due to the requirement for larger space and build standards.

Guidance on the funding of specific equipment and fittings for individuals is unclear, for example, a Corporation funded new fully wheelchair accessible property should have walls and ceilings that will accept hoists. However, funding of the provision of the hoist will require additional funding and is often the subject of negotiation between the local authorities and the housing provider involved.

4.2.6 Eastern Region Disability Networks

There are a number of Eastern Region Networks that assist the development and implementation of government policy. Currently the Transitions Network are developing a generic Transitions Strategy and have drafted an Out of Area Placements Protocol that has been circulated for comment. The Eastern Region Learning Disability has also circulated a Protocol about Out of Area placements although this predominantly relates to residential placements. These are being adopted locally.

4.2.7 Cambridge Strategic Housing Market Assessment (SHMA)

Cambridgeshire Horizons is working, with its partners across the Cambridge housing sub-region, to produce a Strategic Housing Market Assessment, which will look into housing markets and housing needs across all tenures.

The SHMA will include information useful to this strategy, including economic and demographic forecasts, assessments of housing markets for older people and younger people, and will work to include an assessment of the market for people with specific housing needs, such as people with disabilities, using the outcomes of this strategy once they are available.

The SHMA is a huge body of work and will continue to grow and build information for the County and the Sub-Region in future, and to form an assessment of the need for future, specific research into areas that would benefit from gathering more information as appropriate.

This commissioning strategy sets out how we are shaping supported housing, we will continue to feed in specific information to the housing market as required to ensure future needs projections are robust.

4.3 County Context

4.3.1 The County Council's vision is: 'To achieve a robust local economy supporting safe, healthy and socially inclusive communities, within a sustainable environment and taking full account of climate change issues'.

4.3.2 The Local Area Agreement (LAA)

The LAA is a countywide document based on the aspirations of the 5-district level Strategic Partnerships in Cambridgeshire. The current LAA has four blocks or areas in it; Children & Young People; Safer & Stronger Communities; Healthier Communities & Older People and Economic Development and Enterprise. Each block has a number of targets and funding across a wide range of agencies is aligned or pooled to help meet the targets. The LAA reflects the engagement of different partners and organisations under the coordination of *Cambridgeshire Together*. The LAA is currently being revised in line with the latest basket of indicators.

4.3.3 Cambridgeshire Together (or Local Area Agreement Board) is the name for the group that develops the Local Area Agreement (LAA). The LAA aims to tackle top national and local priorities at a co-ordinated county level. It includes Councillors from all areas. A Reference Group is made up of officers that comments on and works up proposals for the Board's endorsement. The relevant priorities to disabled people and housing needs are within the sections of Safer and stronger communities and Healthy Communities and Older People.

4.3.4 Local Public Service Agreement

This is the agreement between central government and local partners. The agreement sets out negotiated "stretch targets" to release additional reward grant funds. These targets are generally higher than expected of authorities generally and are linked to one of the LAA's priority areas.

4.3.5 Cambridgeshire County Council Adult Support Services Strategy and Disability Strategy

These documents set out the strategic direction for services for older people, adults and disabled people that will deliver the critical elements of independence, choice, control and inclusion. The commitment of the County Council and local Health Services to work in partnership to deliver improvements to the lives of the people of Cambridgeshire is well evidenced by current partnership arrangements. The Strategies both acknowledge that partnerships with District Councils, housing providers and the voluntary and independent sector are key to delivering change.

4.3.6 Cambridgeshire's Supporting People Strategy and Commissioning Strategy

Cambridgeshire Supporting People Strategy 2005-2010 set out the broad context for Supporting People in the county. The vision is to 'improve the quality of life and well-being by ensuring housing and housing support is available that reduces risk and enables vulnerable people to live as full a life as possible'. The 2005-10 Strategy facilitated the client group review programme ending in March 2006 where all 400+ services were reviewed.

During 2007 the Supporting People Commissioning Strategy is being developed which sets out how services will be shaped and modernised following the review programme. The Commissioning Strategy sets out the development priorities in Cambridgeshire which are:

- Increased generic floating support and specialist floating support for particular groups e.g. offenders.
- Increased resettlement support.
- A continuum of support for people with substance misuse problems.
- Remodeled mental health schemes.
- More accommodation for victims of domestic violence, mental health & young people at risk.
- More extra care accommodation for older people & a greater equity of sheltered housing across the county.

The Commissioning Strategy also sets out a Direction of Travel for how services overall will be shaped in the future including:

- An increase in the amount of Floating Support Services with a Countywide Specification.
- Increase in the amount of independent accommodation with a reduction of some accommodation with shared facilities.
- Greater equity in terms of sheltered and extra care accommodation across the county.
- A review of Home Improvement Agencies.
- Greater use of alarms and assistive technology.
- A new Assessment Centre for homeless people in Cambridgeshire
- A standard Countywide Service Specification for Domestic Violence Refuges
- A standard Service Specification for Foyers.
- Clearer pathways to move-on accommodation.
- Designated accommodation for people with complex needs.

4.3.7 Homelessness strategies

All local housing departments are required to have a homeless strategy in place. These are based on a review of all types of homelessness within the area. These strategies set out the local authority's plans for prevention of homelessness and for securing that sufficient accommodation and support are available for people who become homeless or who are at risk of doing so.

The County Council (social services authority) provides all reasonable assistance and the local housing authorities ensures that all organisations whose work can help to prevent homelessness and/ or meet the needs of homeless people in their district are involved in the strategy. This Disability Housing Strategy will provide a good link to local housing authorities housing and homelessness strategies.

4.3.8 Assistive Technology Strategy

Assistive Technology (AT), sometimes referred to as Telecare, describes a range of equipment that can enable individuals to be more independent and safe in their homes in the community. It includes alerts, alarms and monitoring equipment covering a range of issues from reminders to take medicines, pressure mats or

sensors for gas or the operating of alarms.

The Preventative Technology Grant (PTG), which was made available from April 2006, will provide £80 million nationally over two years (£30 million in 2006/07 and £50 million in 2007/08.) In Cambridgeshire the grant has been used to fund workers specialising in Assistive Technology as well as being used to purchase items of equipment. There has been a great deal of proactive work and access across the county continues to develop well. AT is now being promoted and used across a wide range of ages and needs groups.

As a preventative service, it was agreed that clients did not need to meet Social Care's eligibility score of "critical" or substantial" to receive Telecare/Assistive Technology services, but should reach the "moderate" degree of risk (Fair Access to Care Services criteria attached at appendix D). This will be reviewed if funding is insufficient, but this should not be the case for 2007/8. Clients will, however, be prioritised for service on the basis of the their degree of risk.

An Assistive Technology Strategy for 2008-11 is being developed setting out links to other services and strategies. This will form the basis for a business case for future funding into 2008/9. The business case/strategy is needed to secure funding from PCT/County/possible other funders (e.g. SP, LAA reward money. Practice based commissioning partnerships).

4.3.9 Disability Adaptations

Occupational Therapy Services

Community Occupational Therapists (OTs) are employed by the Cambridgeshire Primary Care Trust and are responsible for carrying out assessments of older people and people with disabilities. Referral to the OT service is via the Cambridgeshire Direct Contact Centre. The OT role includes the offering of preventative advice, rehabilitation programmes, equipment provision and making recommendations regarding housing adaptations. These adaptations may be 'minor' (under £1000) and include such things as additional banister rails and small ramps or 'major' adaptations such as stair lifts and extensions to property (see also section on HIAs). The OT service therefore have close working relationships with housing organisations encompassing the private sector, public sector and Housing Associations. The OT service meets on a quarterly basis with the Home Improvement Agencies and public sector housing leads.

4.3.10 OT Housing Liaison group

Membership of the group consists of representatives from Housing Departments dealing with adaptations; Home Improvement Agency Managers; Occupational Therapy locality leads, or their representatives; Representative from Adult and Children's social care services

The group considers the adaptation needs of all disabled people in the County of Cambridgeshire and facilitates open and constructive communication between departments and authorities. It also shares information on products, training and good practice and develops services to facilitate equitable and improved services across the county.

4.3.11 Disabled Facilities Grant (DFG)

The DFG for adults is a means tested grant based on people's income and savings. This test considers income but uses a notional allowance for some expenditure, rather than considering detailed out-goings. Mandatory DFGs are offered up to a maximum limit of £25K. Some District Councils may offer discretionary grants.

4.3.12 Policy for Offering Financial Support for Housing Adaptations (Disabled Facilities Grant (DFG) Top-Up)

This policy document establishes a process for providing financial assistance to people who are required to make a contribution towards the cost of their housing adaptation following a Disabled Facilities Grant (DFG) means test. This is referred to locally as 'DFG Top-up' funding and ensures that the County Council, and other organisations meets its responsibilities under the Chronically Sick & Disabled Persons Act 1970, and other associated legislation.

It should be noted that as of December 2005, there is no DFG means test for families of disabled children. This means that more families will be eligible for a DFG but as many adaptations cost more than the mandatory grant limit, assistance will continue to be sought from the County Council for top-up payments.

<http://www.cambridgeshire.gov.uk/social/disabled/disabled/dppdahousadapco.htm>

<http://www.cambridgeshire.gov.uk/social/disabled/disabled/dppdahousadapt.htm>

4.3.13 Community Equipment & Minor Adaptations

Equipment and minor adaptations, for people living in their own homes, are generally provided via the Integrated Community Equipment Service (ICES) which, for Cambridgeshire and Peterborough, is operated out of a single depot in Huntingdon by Nottingham Rehab Supplies (NRS). Equipment is requisitioned from NRS following an assessment of need.

Assessments resulting in requests for housing adaptations will usually have been carried out by occupational therapy staff. Equipment for people in public sector and housing association property is also available via ICES. However, it is expected that minor adaptations, for people living in housing association property, will be provided by the landlord in line with the College of OTs guidance document 'Minor Adaptations without Delay: A practical guide and technical specifications for housing associations' 2006. Copies of this can be downloaded from the College's website: www.cot.org.uk/newpublic/about/minor_works.php

It is really important that all partners acknowledge their responsibility in this area and ensure that their properties are designed and adapted to meet the needs of their disabled tenants.

4.3.14 Sensory Equipment

Certain equipment for people with sensory impairments can be provided following an assessment by Sensory Services staff. Housing Associations may also make minor provisions.

4.4 Local Context

4.4.1 Local Strategic Partnerships

There are 5 District area based LSP's. These groups are non statutory partnerships bringing together at a local level private, community and voluntary sector organisations to improve the quality of life for local communities. Their role is to deliver the partnership strategy known as the local Sustainable Community Strategy. These have key sections including Health and Wellbeing. It is this section that includes objectives to support vulnerable people to live independently.

Links to emerging Local Strategic Partnerships' Sustainable Community Strategies to reflect the diversity of their communities in setting the priorities for their local areas.

4.4.2 District Councils Housing Strategies

All District Authorities have an overarching Housing Strategy. In addition they are likely to have client or other specific strategies that are likely to include the housing needs of vulnerable adults. For example these might include:

- Homelessness Strategy
- Single Homeless and Rough Sleepers Strategy
- Black and Minority Ethnic Housing Strategy
- Children and Young People's Strategy
- Community Safety Strategy
- Health Improvement Strategy

4.4.3 Prevention of homelessness

The main focus within homeless and housing advice services at the local housing authorities is homeless prevention. Therefore early notification of housing difficulties is essential to ensure appropriate advice, and where necessary, intervention is taken before the situation reaches crisis. Such early intervention and assistance can prevent households becoming homeless and experiencing the uncertainty and insecurity of temporary accommodation, and provides them with better housing solutions.

Schemes operated by the different district/city council will vary, however, they may include the following:

- The provision of advice and information on housing related issues.
- Advice and assistance on tenancy related rights and obligations.
- Advice and action relating to harassment and illegal eviction.
- Negotiations with landlord or mortgage lenders.
- Benefits advice.
- Debt advice.
- Rent deposit/ rent deposit guarantee schemes.
- Other assistance with accessing privately rented accommodation.
- Mediation scheme.
- Floating support schemes.
- Spend to save schemes.
- Sanctuary type schemes (to provide extra security measures in cases of

domestic violence).

- Advice about applying for accommodation via social rented waiting list (or through choice based lettings scheme due to become operational in Feb 2008).
- Tenancy Sustainment Officer / Programme.

4.5 Interagency Protocols

4.5.1 There are a number of interagency protocols developed to address specific issues.

4.5.2 An Interagency Guideline and Procedure for the Management of Hoarders in Cambridge City and South Cambridgeshire was recently developed and adopted. This paper provides the various agencies across the two authority areas with guidance and commitment that agencies such as Social Service, Mental Health, PCT, Housing, Environmental Health and voluntary agencies will support each other to achieve the best outcome possible for the individual concerned. It is our intention either to develop a similar document or possibly to expand on the one already in place so that it covers more than just hoarders.

5.0 **Demography**

5.1 The diverse demographic nature of Cambridgeshire

5.1.1 Cambridgeshire consists of 5 districts; Cambridge City Council area and four largely rural districts although East Cambridgeshire has within it Ely a fast growing City. Cambridgeshire has a total population of 553,000 (2001 Census) and is one of the fastest growing areas of the country with a projected population for 2012 of 629,900. It is anticipated that there is to be around 57,000 new homes planned over the next 5 – 10 years.

5.1.1 Cambridgeshire has a non-white population of 4%, the majority living in Cambridge and with a quarter being students. There are around 5,500 Gypsies and Travellers in the County - the largest single minority ethnic group.

5.1.2 Since the enlargement of the European Union in 2004 and 2006, large numbers of migrant workers have arrived in the UK from eastern Europe. East Anglia, London and the South West are the top three destinations for these groups. However, there are no reliable figures on actual numbers living in the UK as there is no system in place to recording when migrants return home making it hard to predict future need. However, the number of migrant workers in the region has increased significantly over the last two years. The East of England with its diverse economy and seasonal work has always attracted migrant workers.

5.1.3 Most of the population state their religion as Christian (71.5%), with 18% having no religion and other religions each constituting less than 1% of the population.

5.1.4 Cambridgeshire is predominately a rural county bringing with it specific implications of access to disabled people. A number of issues are picked up in section ?? these include access to community facilities, healthcare, employment and in particular accessible transport.

5.2 Planned growth and New Towns

5.2.1 Cambridgeshire is one of the fastest growing counties in the country. In recent years it has already seen extensive growth both in new and existing communities. The new settlement of Cambourne is to enter a second phase and the planning of a further new development, Northstowe, is well under way to address the continuing demand for housing.

5.2.2 The main developments planned are:

- Southern Fringe (Trumpington)
- Northern Fringe (Arbury Park)
- Northstowe
- Cambridge East Newmarket Rd Area (Fulbourn) 10,000 potential new homes.
- Cambourne Phase 2
- Market Towns
- Rural Centres
- Cambridge City:
 - Station area – plans for 400 flats (10% suitable for people with disabilities - no decision been made yet and work will not start until at least 2009)
 - George Nuttall Court – plans for 55 units (10% suitable for people with disabilities)

Table : Forecast Population Growth, Cambridge Sub-region Districts, 2001 to 2021, '000

District	Y2001	Y2021	Change 2001 - 2021	Population % change	% of 2021 population
Cambridge City	109.9	149.9	40.0	36.4%	17.8%
East Cambs	70.9	80.7	9.8	13.8%	9.6%
Fenland	83.7	99.3	15.6	18.6%	11.8%
Huntingdonshire	157.2	165.6	8.4	5.3%	19.7%
South Cambs	130.6	170.5	39.9	30.6%	20.3%
Forest Heath	55.9	66.1	10.2	18.2%	7.9%
St Edmundsbury	98.4	108.8	10.4	10.6%	12.9%
Cambridge sub-region	706.6	840.9	134.3	19.0%	100.0%

Sources: % Cambridgeshire Districts: Cambridgeshire County Council Research Group; Suffolk Districts: Anglia Ruskin University

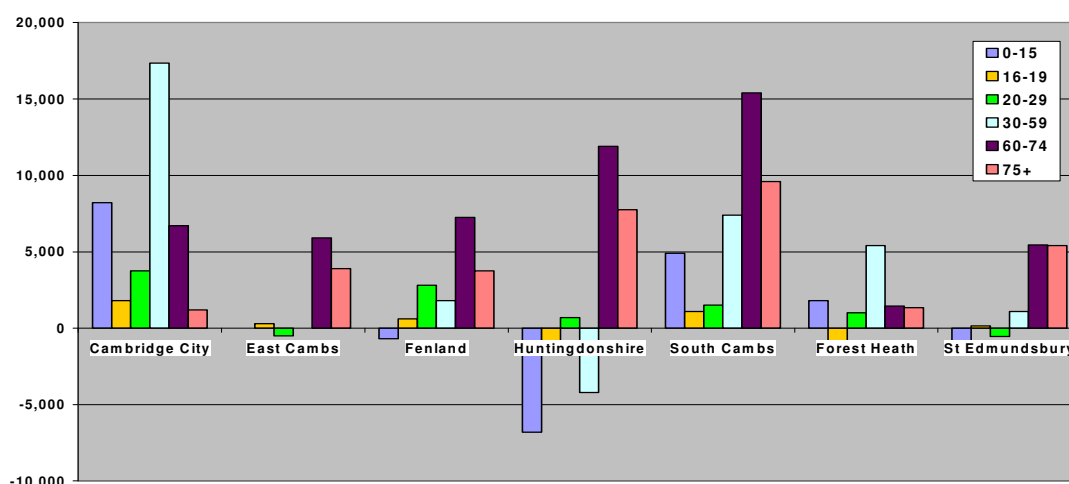
Additional demographic information is in the appendices or can be found at:

http://www.cambridgeshirehorizons.co.uk/doclib/S3_Ch_10_Demographic_context.pdf

Table : Change in Population by Broad Age Groups, 2001 to 2021, Cambridge sub-region districts

District	0-15	16-19	20-29	30-59	60-74	75+	Total
Cambridge City	8,200	1,800	3,750	17,350	6,700	1,200	39,040
East Cambs	0	300	-500	0	5,900	3,900	9,650
Fenland	-700	600	2,800	1,800	7,250	3,750	15,550
Huntingdonshire	-6,800	-900	700	-4,200	11,900	7,750	8,450
South Cambs	4,900	1,100	1,500	7,400	15,400	9,600	39,900
Forest Heath	1,800	-850	1,000	5,400	1,450	1,350	10,150
St Edmundsbury	-1,150	150	-550	1,100	5,450	5,400	10,400
Cambridge sub-regi	6,250	2,200	8,700	28,850	54,050	32,950	133,140
<i>% increase</i>	<i>4.5%</i>	<i>6.4%</i>	<i>9.1%</i>	<i>9.6%</i>	<i>60.7%</i>	<i>65.4%</i>	<i>18.8%</i>

Fig. 5: Forecast Population Change, by Broad Age Groups, Cambridge Sub-region Districts, 2001 to 2021



5.3 Disability

5.3.1 Whilst research data is helpful in mapping the extent and spread of disabled people, disabled people are by their very nature individuals and the associated housing and support needs differ immensely. 15% of Cambridgeshire residents report a limiting long-term illness, although estimates of disability can be as high as 22%. Among potential areas of age discrimination are the 19% of people aged 50 – 65 and the 14% of people aged 16 – 25. There are specific pockets of deprivation and linkages with the incidence of disability.

5.3.2 Attached at Appendix F are charts and maps providing detailed information relating to the demography and needs of disabled people in Cambridgeshire, details relate to both general and specific disabilities.

5.3.3 The nature and level of disability has been impacted by improved healthcare and a lower mortality rate. These relate to all types and causes of disability both from birth and acquired. There has generally been an increase in the numbers of people with higher levels of a disability as a result of these factors. 25% of households have identified a member as being disabled in some way.

5.3.4 Physical Disability

The specific nature and level of disability clearly impacts on the housing and support needs of the individual. Demographic data does help to some extent with future planning but there are limitations. Not all disabled people require wheelchair accessible properties and even amongst wheelchair users the implication for housing and support vary immensely.

5.3.5 Acquired Head Injury

Similarly the specific nature and level of disability resulting from an acquired Head Injury will impact on the housing and support needs of the individual. For this client group however rather than wheelchair access being an issue, there can often be the need for supported living as short term memory loss can present 24hr support needs'

5.3.7 Sensory Disability

The housing needs of this group are often addressed only as part of generic studies or generic planning for wider disability groups. People with sensory disabilities are likely to require a different and individualised approach and often require specialised equipment fitted which housing agencies provide prior to or after build.

A recent survey by University College London noted that in general people wanted accommodation in a familiar area, close to public transport, to employment and leisure opportunities, and to local amenities. The location of housing can be critical to the degree of independence that is attained. Adequate space was another top priority for adults with sight loss. Space was needed for low vision aids and assistive technology, to allow people to move around safely, to house a guide dog, and to accommodate guests or care staff. Other aspects of the housing space were also important: good lighting and contrast in colour and tone tailored to individual requirements, and the facility to adapt the space as an individual's needs change. People felt secure in their accommodation when there was some control on access. This might be perimeter fencing with a locked security gate, external security lighting and porch lighting, CCTV, an entry-phone or intercom, secure locks on doors and windows, and burglar and smoke alarms.

5.3.8 Learning Disability

The Department of Health definition describes learning disability as “a state of arrested or incomplete development of mind that includes significant impairment of intelligence and social functioning”. This definition includes people with mild, moderate and severe / profound learning disabilities and generally refers to those who have acquired learning difficulties at or before birth or at an early age.

A statistical definition of people with intellectual impairment, those with IQ's below 70 indicates that between 2% and 2.5% of the population come within this range. Those with severe impairment having IQ's probably below 50. The Health of the Nation's strategy for people with learning disability indicates a prevalence rate between 3 to 4 per 1000 of people requiring support.

LAC (92) 15 Social care for adults with learning disabilities, suggests that most people with severe or profound disabilities will require “considerable help in order to live, initially in their homes and later in appropriate residential accommodation”. Those with a mild or moderate degree of learning disability are more likely than the general population “to require additional emotional, mental, health and social support”. Some of these individuals may have a challenging behaviour.

5.3.8 Mild Learning Difficulties or Aspergers Syndrome

Access to Social Care support is only available to those meeting the County Council's eligibility criteria. People with milder learning disabilities or some people with Aspergers syndrome may not be eligible for social care but may well need assistance to manage their tenancy or to live independently. Supporting People funded housing support can be a crucial service that enables independent living.

5.5 Projected growth of disabled population

5.5.1 Research has shown that over the past 2 decades the prevalence of severe disability and complex needs in children and young adults has risen. Babies born

prematurely are more likely to survive, as are children after severe trauma or illness. Innovations in medical practice and technological advances have meant that children are now surviving what were once-fatal diseases.

The impact of improved treatment for life limiting conditions as well as the increase in survival rates of premature babies means that the number of children requiring complex medical care will grow 1% a year over the next 15 years. Over 85% of children with congenital or chronic conditions now survive into adolescence. Children and young people with learning disabilities also have a greater prevalence of mental health problems. The number of children with autistic spectrum disorder has also risen over the last 10 years.

- 5.5.2 These changes have created additional demand for both care and support in the community but also impact on housing need. Family expectations have also led to an increasing demand for accommodation and support for young disabled adults. Demography data is available in Appendix F.

6.0 **Current provision**

- 6.1 This section has been split into the following sections:

- Housing provision
 - Access arrangements.
 - Social rented Housing.
 - Private rented.
 - low cost housing.
 - Housing providers
- Support Services
 - Supporting People
 - Social Care
 - Assistive Technology
- Advice and general support services
 - Home aid agencies

6.2 Access to Housing

- 6.2.1 With the aim of preventing homelessness or resolving other housing difficulties a number of housing options can be explored to find a suitable solution for the individual/ family. Request to access housing is generally made through the local District authority or their agent or by approaching one of the local Registered Social Landlords (RSL's) or Housing Associations.

6.2.2 The Housing Register for social rented accommodation

There is a high demand for social rented accommodation across the county and therefore this will not provide a viable solution for many people. However, the allocation of social rented homes takes into account the housing needs of those waiting for such accommodation. For most of the local housing authorities lettings are presently determined through reference to Housing registers, which are prioritised through a banding scheme and properties are let in line with their lettings policy. Cambridge City use a 'special housing needs register' for those that need special accommodation of an adapted nature.

6.2.3 Access arrangements: Choice Based Lettings

From Feb 2008, a Sub-regional Choice Based Lettings (CBL) scheme, Home Link, will be implemented throughout the area. The local housing authority lettings policy may vary on some issues however, all of the policies will operate through the same principles including the same banding system which prioritises housing need. Fenland plans to implement in November 2008. The implementation of CBL represents a huge change in the way social rented properties will be let. Under the scheme, available properties will be advertised and the onus will be on the applicants registered on the housing register to submit an expression of interest for the properties. From those received, a shortlist will be produced based on the lettings policy and housing need. The result being that all homes are allocated to those in the greatest need who have specifically requested to live there, and thereby increasing choice to the applicants and sustainability of the tenancy.

6.2.4 One of the main concerns voiced about the scheme is the ability of vulnerable applicants to engage with the scheme. The CBL sub-regional partnership have been keen to address this through raising awareness with other agencies and prior to the introduction of CBL disabled people were consulted extensively. This consultation led to the development of an access strategy, which aims to identify and assist vulnerable applicants who may require additional assistance to ensure they are not disadvantaged.

6.2.5 Another benefit of the CBL scheme is that regular feedback will be provided to applicants. This ensures the scheme is open and transparent and will assist in applicants making appropriate choices over their rehousing and the options to pursue.

6.3 Social rented homes

6.3.1 Social rented homes include those let by local housing authorities and housing associations. Local housing authorities offer secure tenancies or in some cases initially an introductory tenancy. These are listed in more detail in appendix G.

6.4 Private renting

Privately rented accommodation comes in different types including bedsits, flats, houses or shared flats and houses. In some cases the house or flat may be shared with the landlord. In others, the property may be managed by a letting agent or managing agent. Properties for private renting may either be furnished or unfurnished. Rents for the different types of property are likely to vary accordingly. Most landlords ask for a deposit, usually the same as a months rent before letting a room or a property.

Depending on the type of agreement held and the nature of the accommodation, either a licence or a tenancy will be created.

6.5 Low cost home ownership

6.5.1 Shared ownership schemes allow you to buy a share of a property while a registered social landlord owns the rest. A mortgage is paid on the share owned by the occupier, and usually a rent on the rest. Further shares can usually be purchased at a later date.

6.5.2 Homebuy is a type of shared ownership and enables some people to buy properties on the open market. A loan is provided to cover a percentage of the property price. This can be, but does not need to be repaid whilst occupying the property. When the property is sold the housing association will take back the percentage of the sale price (or less if repayments have been made).

Some Housing Associations offer shared ownership although these are sometimes limited and targeted at specific key worker groups like teachers and nurses.

6.5.3 HOLD Home Ownership with Long-term Disabilities

HOLD is different to other shared ownership schemes. Unlike general shared equity schemes where a RSL does not have responsibility for repairs in HOLD schemes the RSL do have repair responsibilities to the property.

Whilst it is similar to other shared equity schemes it has significant differences. It:

- is only accessible for people with long-term disabilities
- means people can raise a mortgage on the level of disability benefits as it enables access to housing benefit for the mortgage component

As with other shared ownerships the owner pays part mortgage and part rent to the RSL for the leased component.

HOLD schemes:

- Enable families to assist with purchase if that is wanted
- Do not allow shared purchase with other people. Example parent of person with Id who wants to leave home

HOLD Schemes have been in place in a number of other areas and are starting to be explored and developed within Cambridgeshire.

6.5.4 Shared ownership is now becoming increasingly a popular option for disabled people.

A private Housing Association can be established to provide suitable accommodation for one or more people with special needs. The occupant(s) can then enter into a shared ownership lease with the newly formed Housing Association whereby they will own a proportion of the property and rent the remaining portion from the Housing Association. The occupant(s) will fund their accommodation by means of an interest only mortgage (on which DWP will pay the interest) and rental payments (funded by housing benefit from the Local Authority).

The County Council Disability services have some basic information available for individuals wishing to consider this option.

6.6 Housing Providers

6.6.1 **Registered Social Landlords** (R S L's) or Housing Associations

A RSL or Housing Association is an organization that provides social housing for rent, or shared ownership and in some cases housing for outright sale. They vary in size from fewer than 10 homes, to more than 50,000. Altogether, housing

associations provide about two million homes for five million people across England.

Housing associations are independent (except where they are subsidiaries of other housing associations) and properly constituted not-for-profit organisations. Many receive government funding, for example for building new homes, providing specialist housing or regenerating neighbourhoods, but most income comes from rents and they borrow against property holdings on the private market.

Some housing associations offer support for people with a range of needs including older people, people with disabilities and learning difficulties, and people who have been homeless. Many are involved in community initiatives such as employment training, regeneration and projects with children and young people.

They operate financially sustainable and efficient businesses and should be committed to and primarily focused on providing good and responsive housing and related services and amenities for those whose personal circumstances make it difficult for them to meet their housing needs in the open market. In doing so housing associations conduct their business according to the Housing Corporation's regulatory code. The regulatory code can be found on the Housing Corporation's website: www.housingcorp.gov.uk. A summary of the key elements of their management is an appendix H.

6.6.2 District Authorities

Many District and Local Authorities have transferred the ownership and management of their homes to RSL's or Housing Associations with the approval of the Housing Corporation. South Cambridgeshire and Cambridge City have, to date retained their housing stock and therefore provide landlord services to existing homes. Like Housing Associations they provide social housing to those in housing need via the housing register.

6.6.3 Partnership Approach

Where one or more RSL's manages the property within a district areas, there are partnerships formed between Districts and RSLs to monitor the management of the properties and support provided.

The Districts remain responsible for commissioning schemes and look at strategic planning to meet the local need and excluded groups. RSLs are linked into this strategic planning by developing the housing required as a result of the Districts' needs and then managing the housing. Arrangements are usually in place that enable the district / city councils to provide nominations to the RSL for vacancies in either existing stock or on new developments. The district area remaining responsible for strategic planning.

6.7 Existing housing

6.7.1 Current housing provision used by disabled people varies according to the individual need. In broad terms housing could normally be seen to fall into one of the following formats:

- Ordinary housing not adapted
 - single or multiple occupancy with family or non disabled others

- but used by / identified for small group of disabled individuals
- Ordinary housing but adapted
 - to meet individual need (single or multiple occupancy with family or non disabled others)
 - but used by / identified for small group of disabled individuals
- Single clustered accommodation
 - adapted
 - not adapted
- Purpose built
 - Single adapted (individual or grouped occupancy)
 - Single fully wheelchair accessible standard (built to whatever higher space and design standards that applied at the time of the build – some of these properties will have been subsequently adapted further to meet individual occupants specific needs)
 - Clustered accommodation (likely to be adapted)

6.7.2 An initial analysis of housing used by disabled people in Cambridgeshire identified a lack of coherent detailed information. The current systems do not allow an easy extraction detailing the level and type of current adapted properties. There are details available of services supported by Supporting People and or Social Care. However it has been difficult to split these by adapted properties and to account for adapted property where there is no commissioned support provided. The need for further work has been acknowledged.

6.7.3 All housing providers will need to submit details of the different types of accommodation available for let as vacancies arise from February 2008 when Choice Based Lettings (CBL) is launched. When vacancies occur details of any disabled access / adaptations/ facilities will be recorded on the system and an indication of their accessibility, by broad category will be advertised. Over a period of time the knowledge of disabled facilities and adapted properties will expand. As part of the action plan attached to this Strategy, details of the range of accommodation will be obtained after the launch of CBL.

6.7.4 Table 1 provides a broad overview of the level of general housing stock by district.

Table 1 General Housing stock by district

Authority area	Total inc leasehold properties	General Total	General No of lets ave over 5 years)	Sheltered Total	Sheltered No of lets ave over 5 years)
Cambridge City	7524	6854	608	670	90
East Cambridgeshire	To follow	5014	352	869	85
Fenland	5091	4284	368	807	64
Huntingdonshire	8503		500		43
South Cambridgeshire	5804	4439	209	1365	135

Table 2: Dwelling stock by tenure, 2005/06

	Local Authority (including owned by others)	Registered Social Landlord	Other Public Sector	Private Sector	Total
Cambridge City	7,600	3,526	30	35,113	46,269
East Cambridgeshire	1	4,666	0	28,522	33,189
Fenland	3,811	1,191	0	34,880	39,882
Huntingdonshire	0	8,442	1,117	58,664	68,223
South Cambridgeshire	5,638	2,165	563	49,119	57,485
Forest Heath	0	3,184	525	22,510	26,219
St Edmundsbury	0	7,238	476	36,966	44,680
Sub-region	17,050	30,412	2,711	265,774	315,947

Source: Housing Strategy Statistical Appendix form, 2005/6

6.8 Existing Support Services

6.8.1 Not all disabled people require support but some do. General advice and information is available to those needing it this is covered in sections 4.4.3, 6.11, 6.12. Short term or on going housing and support services are funded and provided either via:

- Supporting People Housing support (see section 6.9)
- Social Care – subject to eligibility criteria (as in appendix D)

6.8.2 Support is available to people in different settings and in different ways.

- Individual tenancies or own homes with visiting support.
- Small group tenancies with visiting support.
- Small group tenancies with 24-hour support.
- Individual tenancies or own homes where the individual receives direct payments to buy their own support.

Those who receive visiting support might have this provided via Supporting People funded Housing support providers and /or social care funded domiciliary social care providers. Those living in grouped tenancies are most likely to receive some social care support. This could be as part of a commissioned “supported living” service, this is most common where 24hr support is provided.

6.8.3 Social Care Support

Access to social care support is available only to those who have been assessed as meeting the County Council’s eligibility criteria as set out in the Governments Fair Access to Care guidance Appendix D (web link also provided below). The majority of social care support is provided through one of the numerous independent providers. Social care might be provided via block or spot contracts with providers. Increasingly however there is a move towards direct payments or individualised budgets where support the individual is able to purchase the support they require from their chosen provider.

http://www.cambridgeshire.gov.uk/social/accessing/Eligibility.htm?wbc_purpose=Basic%22%3ewww.cambridgeshire

Self directed support / Individual Budgets

The aim of self directed support or individual budgets is to give recipients of social care and associated services increased opportunities to design a package of services that meets their specific needs. Service users will be given a notional or cash sum of funding to use in developing their care package. This can be provided either as a direct payment or in the form of commissioned services. The principles of choice and control are critical to this policy development.

Individual Budgets can, in the longer term, include a variety of existing service and funding streams including Local Authority provided social care services, Supporting People, Independent Living Fund, Community Equipment Services, Access to Work and Disabled Facilities Grants. Cambridgeshire are currently introducing individual budgets.

6.8.4 Independent Social Care providers

The local independent sector market is very well developed. Domiciliary and Supported Living social care services have to be registered with CSCI. The County Council has robust systems for commissioning and monitoring the quality of these services including the use of:

- Service specifications.
- Tendering and contracting process.
- Safe in the Knowledge Contract Monitoring.
- Regular consultation with independent providers.

6.9 Supporting People

6.9.1 Supporting People funds over 400 services in Cambridgeshire providing housing related support aiming to enable people to live more independently. Each service is attached to a Supporting People Contract that is monitored and reviewed by dedicated Contract Officers who work with the Contract Holder to ensure the support provided to the end user is of good quality. Appendix I including pie charts.

Housing related support helps people with things such as:

- Setting up utilities such as gas and water
- Setting up a budget and paying bills
- Accessing training, education and employment
- Claiming benefits

Supporting People does not fund care services such as those listed below:

- Personal care
- Domestic tasks
- Specialist counseling
- Childcare

Where individuals have both housing related support needs and social care needs joint SP and Social Care Packages are in place.

6.9.2 Supporting People funds provide support to disabled people through:

- Floating or visiting support where they live independently.
- Dedicated supporting housing designed specifically for people with disabilities.

6.9.3 Physical & Sensory Disabilities Supporting People Funding

The projected spend for 2007/08 is £564,000. There are currently eight services funded by Supporting People for this client group. Two of these services are currently being funded on a short term bids (5 Jan 07 to 31 Mar 08) however the effectiveness of these are to be reviewed and funding may be extended subject to availability. The 8 services have a maximum capacity for 363 people / households.

The majority of the funding is currently allocated in the Cambridge City and South Cambs areas. There are fewer services in Hunts and Fenland and none in East Cambs area.

6.9.4 Learning Disabilities Supporting People Funding

The projected spend for 2007/08 is £1,979,000. There are 73 separate services under for this client group. The maximum number of individuals / households that can be supported is 210. 158 are currently being funded. The distribution of provision is generally more even although historically the provision means the largest amount of funding goes to Huntingdon and then Cambridge. South Cambs has by far the lowest amount of funding. A summary chart is in appendix I.

6.9.5 Floating Support

Research was undertaken in 2007 by the County Council's Research Group and has involved a detailed study of the operation of floating support projects not only in Cambridgeshire, but also as being developed and practised elsewhere in the country. Plans are now being developed to improve the equity of access, publicise services more effectively and address gaps in service. Plans will also make improvements to the management of services and improve outcomes for service users and ensure services are more tenure neutral.

6.10 Assistive Technology

A dedicated Team currently assesses eligible individuals and provides access to a range of Assistive and Telecare devices to support people and their carers to address challenges to everyday living in their homes. As a preventative service, clients do not need to be "critical" or "substantial" to receive Telecare/Assistive Technology services, but should reach the "moderate" degree of risk. Clients are prioritised for service on the basis of the degree of risk.

The eventual intention should be for AT to be mainstreamed across locality teams and other services, this would however take time to achieve. The service would probably not be effective without a dedicated team in the interim. Specialist workers are currently available to advise other professionals.

6.11 Housing Advice

As described in 4.4.3 advice is available from Councils. Information and advice can also be accessed from Citizen's Advice Bureaus, Home Improvement Agency or the County Councils Contact Centre.

6.12 Home Improvement Agencies (HIA)

There is a Home Improvement Agency within each of the five District Council areas across Cambridgeshire. Their remit is to support people in their own homes by providing repairs assistance, major adaptation or improvement to individuals' property so that they are able to live in a warm, safe, secure and accessible environment. The work of the HIAs specifically targets older people, people with disabilities and those on low incomes.

HIA's are funded by a range of partners including: District Councils, Cambs County Council, Supporting People, Cambs PCT and other sources. They also charge a fee for their work, which is based on a % of the cost of work. Although the funding streams are similar, the amount of funding contributions and fees charged differ slightly throughout the County.

The HIA's are responsible for operating and administering the Disabled Facilities Grant (DFG) process. DFG's are available to people who have been assessed by an Occupational Therapist as needing major housing adaptations such as stair-lifts, level access showers and ground floor extensions to property. DFG's are means tested grants and people may be required to make a financial contribution towards the work.

HIA services are available to:

- people in the private sector and housing associations. There is an expectation that tenants of local authorities will receive the same level of service from their landlord.
- regardless of their income. If people are ineligible for DFG funded work, the HIA may offer to support the client through the repair or adaptation process and may charge a fee for this work.

Further information regarding the detailed work of the HIAs is contained within the Home Improvement Agencies: Core Specification 2004.

HIA's all offer a core service, however some HIA's also offer security schemes, handy person schemes and also re-location packages to more suitable properties. It should be noted that HIA's predominately work with older people.

HIA Review

The five HIAs were reviewed by a multi agency working group in 2004/5 and a core specification was agreed and implemented. All HIAs now offer the same core service to customers although there are differences in additional services offered for example, help home from hospital, handyperson.

A further review is taking place to identify the scope for rationalising the provision whilst maintaining or enhancing the service and achieving cost savings. The review is due for completion June-July 2008. The outcome of the review could have an impact. The intention is that, no district should have a lesser service than is currently provided and that where efficiencies can be achieved, either in cash, staff, or service provision, these should be realised.

7.0 **Issues**

7.1 This section will not detail all of the issues and shortfall identified thus far. However all issues identified to date have been logged in a draft action plan in order not to be lost. At this stage the Disability Housing Strategy Network have agreed to record all issues even where there has been no identified action to address it or the responsible body has not been identified. The issues have been identified through a range of means including recent consultations with disabled people and families. Also included are issues gained through individual casework raised either through the Housing systems or through social care management. It is anticipated that during the consultation process of this un-adopted draft strategy further issues will be identified. Some of the broad themes are referred to in this section.

7.2 Current Provision and information on adapted property

Currently data of the number of and types of adapted property is poor. Systems are not in place to record the level of adapted properties and a consistent definition of level of accessibility is not applied. Choice Based Lettings will change this from February 2008 as accommodation becomes available for letting.

7.3 Accessing suitable properties

It is acknowledged that a disabled person might have to wait a very long time for a suitable property to come up. It was also noted that some temporary provision is not suitable for people with a disability. It is felt that that providers need to aim to provide access to homeless accommodation for disabled people. The Strategy calls for a joint working protocol to be developed between Health, Disability Services and RSLs to find alternative funding solutions to provide adaptations required by disabled people in general needs housing. It is really important that all partners acknowledge their responsibility in this area and ensure that their properties are designed and adapted to meet the needs of their disabled tenants.

Issues for new build has been partly addressed under part B of the Building regulations. The Housing Corporation are also looking to adopt Lifetime Homes Standards but this will have financial implications. Although these standards will not adequately meet all, particularly the higher needs of some individuals.

Historically there have been past reports of confusion as to the capacity of individuals to make a homeless application or to hold a tenancy. This has been an issue in the past however sections 8.3 and 8.4 provide clarification.

7.4 Accessible Information

Customer consultation has indicated that the provision of information is a significant issue of concern for disabled people. Disabled people have indicated that information relating is needed in easy read, Braille or large print formats. Older people from BME communities require information in the community language of their choice. Disability Equality Schemes should instigate the need to establish the range of information in different formats. General housing information and tenancy agreements are not always in formats that meet the needs of the prospective tenant (particularly applies to people with reading / comprehension difficulties).

7.5 Choice

In order to make a choice there is a prerequisite for any of the housing options is the availability of basic information on options and access. Knowledge of these is often low. Best practice might offer:

- Flexible procedures in moving to independent housing such as allowing trial visits.
- Flexible procedures in respect of family issues ie offering accommodation in close proximity that allows someone to move from the family home.
- Recognition of the housing implications of the additional / specific disabilities.

It is noted however that there would be legal implications and this would require extensive work to achieve this best practice.

7.6 Access and safety in the Community

The location of a property and the accessibility of the external environment can be just as important to disabled people as the accessibility of the property itself. Disabled people identified that the impact of “new town blues” can impact on them particularly if there is a delay in development or lack of community facilities.

Research carried out by the Disability Living Commission identified that one in five disabled people had suffered harassment that related to their impairment. The 1995 British Crime Survey identified that disabled women are twice as likely to encounter domestic violence as other women.

Other issues raised include:

- A very limited number of high spec adapted toilet facilities in the community.
- Limited accessible transport routes.
- Poor access to healthcare, employment etc etc
- Lack of disabled parking bays / on street parking / permits / dropped kerbs.

7.7 Current Demand and Projected Growth

7.7.1 The available data on the projected need for accessible properties or special needs housing is limited. Improved systems would enable more accurate projections.

It is essential that the current prevalence and population figures are used rather than waiting to generate new figures. Projections need to be reviewed regularly. Further research work needs to include the housing needs of disabled people. Links are needed with researches (Cambridgeshire Observatory / OPCS / Disability charities and pressure groups etc). A Joint Needs Analysis on disabled adults is planned during 2008 led by the Director of Public Health and the Director of Adult Social Care. The information in this strategy on need for and impact of housing needs will be of assistance. Current demand across the county will be more readily available through CBL scheme as this covers the County and will avoid duplication on authorities registers. The Supporting People Team are also keen to assist in further research work.

7.7.2 Current demand for both housing and support outstrips available resources. The main pressure points are seen as:

- People living longer (low move through rate).
- As people live longer there can be an increase in health needs which impacts on the type of accommodation and care needs (this can sometimes mean a delayed discharge from hospital as a result of changing needs and those who are not able to return to their original home).
- Increased expectation of carers (particularly younger carers – early solutions needed).
- Increased expectations of service users (independence / small or individual homes).
- Cost of property / rent levels / housing benefits / home ownership.
- Availability of staffing affects the viability of services.
- Long term impact of closure of hospital resulting in need for exceptional solutions for extensive health, physical and care needs.
- Older carers reaching crisis point and unable to maintain caring role.
- Hidden older carers needing emergency placements.
- Appropriate shared accommodation in all areas / local to family.
- Limited revenue and the need to exploring other funding streams.
- Some individuals currently placed in out of county residential placements wish to return to Cambridgeshire were suitable property and support available. (The majority of these placements were due to the complexity of the service users' needs and lack of suitable facilities within the county.)
- Increase in prevalence of obesity and the numbers of people with other larger space requirements for equipment and wheelchairs.

7.7.3 It is acknowledged that many people with disability need a flat/house that is not especially adapted or part of a specialist purpose built supported housing scheme – and therefore we are not talking about accessing “supported housing” capital but nominating people with disabilities to general housing funded by general capital.

7.7.4 The 1996 Housing Act (as amended) states that housing applicants, who meet certain criteria, should be given ‘reasonable preference’ for rehousing. The legislation cites applicants who need to be rehoused on medical grounds as one of the groups who should be considered to have ‘reasonable preference’ for rehousing. However, there is no statutory duty to rehouse an applicant on the grounds of medical need.

7.8 Social Care Priorities

7.8.1 Disabled people needing social care support and housing are frequently, identified by the Disability Service Team staff. There are significant financial pressures on social care budgets. In order to prioritise limited resources the Disability Service has identified priority groups.

7.8.2 *High priority:*

- Person is in ‘unsafe’ accommodation (ie Protection of Vulnerable Adults).
- Person is homeless or at high risk of becoming so in very near future.
- Young person is currently ‘looked after’ (Leaving Care).
- Family / carer unable to maintain their role or at high risk of becoming unable to do so.
- The person is unable to remain in their current accommodation.

7.8.3 Following assessment the Team will look to find the most appropriate accommodation to meet the assessed and eligible needs of the individual. The views of the user and their family as to the type of and geographic location of accommodation will be considered.

It should be noted however if the placement is urgent it is not always possible to find accommodation in the chosen geographic area or of the specific chosen type (shared, single etc).

7.8.4 Nor is it possible to predict when accommodation in a specific area will become available. A balanced view as to the urgency of placement need versus geographic area / specific accommodation choice will need to be made.

Temporary placements may be used although the preferred model is for a single placement to minimise changes of residence.

7.8.5 *Medium priority*

Forward planning is undertaken in order to plan for future demands and reduce the likelihood of emergency placements or urgent placements. Some move-ons will be undertaken where it has been assessed that there is a strong likelihood to be an urgent need in the near future.

There will also be occasions when people are assisted to move into more independent placements as their skills and needs have changed.

7.8.6 *Low general housing need*

The Disability Service is **not** able to support access to accommodation where

- It is purely the preference of the individual or their family.
- It is perceived the individual will benefit from move-on.

7.8.7 Any individual may approach their District Council to apply for registration on the housing register. This however does not mean the person will be allocated accommodation. Nor does it mean that support services will necessarily be available to support their independence in the accommodation if allocated.

7.9 The research report 'Better outcomes, lower costs' identifies that structural and funding arrangements often inhibit the capacity of adaptation services to maximise the cost and outcome benefits outlined in the report.

7.10 Current Housing Developments

7.10.1 Disabled people have made the following comments:

- Larger homes are often needed for families with disabled children to meet the additional space for wheelchairs; hoists; moving and handling and storage.
- High density developments sometimes impacts on parking or access.
- Small Housing units or lack of garden space might limit ability for future adaptations to meet acquired disability needs or facilitate an individual or family to move in if a there is a disability.
- 3 storey Town Houses are not generally suitable for adaptations – ie not able to use through floor lifts.

7.10.2 It is felt that the Local Development Frameworks for planning purposes need to recognise the housing needs of disabled people in order to set the appropriate framework for the production of site specific design and development briefs and to aid master planning and locality planning. Section 106 agreements need to be specific on the requirement for supported housing and fully wheelchair accessible housing.

7.11 Support Services

7.11.1 Comments and issues raised regarding the range, level and quality of support services included:

- Limited staff time to monitor services and practice regularly.
- Contract monitoring needs to link with individual reviews better.
- Service users and carers could be involved more in monitoring of services.
- Difficulties in recruitment and retention of staff.
- Concerns that lack of training results in under performing services.
- The cost and availability of training creates problems for some support providers.

7.11.2 Floating support

Supporting People research found Cambridgeshire is under-provided for in terms of floating support compared with other areas by 30-50%. Following the announcement of the 3 year settlement for the Supporting People programme (November 2007) the Supporting People Commissioning Body will consider how much extra investment to make in floating support services in Cambridgeshire.

7.12 Starting Point

The ongoing identification of issues, shortfalls and areas for development is vital in order for this strategy document and allied action plan to be an evolving and key driver for change. It is anticipated that the work programme arising from the strategy will respond to initial consultation and the ongoing dialogue with disabled people and partner organisations will be key to ensure responsive plans are developed.

8.0 **Standards**

8.1 Best Practice standards

8.1.1 The building of new housing for disabled people and adaptation of existing housing is currently governed by a wide range of legislative and regulatory requirements guided by extensive examples of best practice. Some of the more relevant standards that make up this framework are listed below

- Housing Corporation – Wheelchair-user Housing
- Housing Corporation - Supported Housing
- Lifetime Homes
- Part M of the Building Regulations
- Code for Sustainable Homes
- Registered Care Homes
- Nursing Homes

- 8.1.2 Other related requirements set new and existing housing within the planning framework and set standards for the 'public realm' and the development of new communities. For example;
- Disability Discrimination Act requirement for Access Statements
 - Planning Policy Statements 3

8.1.3 Further detail on the more pertinent of these standards are shown in Appendix J. In addition, Cambridgeshire Occupational Therapists have produced recommendations around more detailed specifications of accessibility for general housing and fully wheelchair accessible housing. This strategy endorses these standard as best practice and partners would seek to achieve them wherever possible.

8.2 Expectations

- 8.2.1 Equally important to disabled people are expectations and standards that relate to:
- Rights and general access
 - Confidentiality
 - Attitude
 - Access to information

It can be hard to quantify some of these more general standards for example: What people might expect in terms of a good home – some make seek a self contained flat in cluster with communal facilities adjacent, others would have different expectations. Clearly individuals needs and wishes will vary.

- 8.2.2 Taking into account government guidance, the views of disabled people and research best practice would therefore indicate that developments need to ensure:
- People have information and support to access mainstream housing.
 - New services being developed and purchased:
 - offer a person-centred approach to service provision taking into account resource limitations.
 - offer supported living as a preferred model but accept service users right to choice.
 - are put out to tender – make sure the best people provide the service.
 - generally offer access to a choice of day opportunities from their home.
- 8.2.3 It is noted that best practice would wish to see that where new housing and support services are being developed that the following issues will be taken into consideration when choosing a location:
- cost of property and adaptation costs
 - availability of staffing
 - local facilities
 - public transport to go elsewhere for services
 - current density of provision
 - capacity of local health personnel to support the project
 - wherever possible the existing networks of the potential service users
- 8.2.4 Changes in expectations and principles of ordinary living in the community mean that there is increasingly a demand for single or smaller accommodation units. The move away from residential homes and grouped living arrangements means that

housing development are increasingly seeing a development of non segregated settings for disabled people needing support.

8.3 Mental Capacity and holding a tenancy

8.3.1 This strategy endorses disabled people's right to a tenancy. There is no reason for a social landlord to treat a person without capacity less favourably than a person with capacity in the allocation of social rented housing (less favourable treatment is likely to constitute unlawful discrimination under the Disability Discrimination Act 1995). The Mental Capacity Act 2005 confirmed what had previously been the common law position.

8.3.2 In general, a contract entered into by a person, who lacks the capacity to enter into that contract is voidable if the other person knew or must have known of the lack of capacity. However, this does not apply if "necessaries" are supplied. When necessaries are supplied the person lacking capacity must still pay a reasonable price and comply with other reasonable terms. Therefore the provision of suitable accommodation for somebody who needs it, but who lacks the capacity to understand the terms of the tenancy agreement, will still have a binding contract in terms that are neither harsh nor onerous, can still be enforced. Therefore the tenant will be obliged to pay a reasonable rent, but the landlord could not require him/ her to pay an excessive rent.

8.4 Capacity to make a homeless application

8.4.1 The legislation relating to homelessness can seem contradictory with the above principles. A homeless application can only be considered from someone who has the mental capacity to understand and respond to an offer of accommodation and to undertake its responsibilities or they can authorise an agent to do so on their behalf. (It is not anticipated that the decision not to consider a homeless application would be made in anything other than extreme circumstances).

8.4.2 Effectively this means that the decision to take a homeless application depends on the applicants ability to understand the responsibility of a tenancy agreement, however, these same reasons would not prevent the offer of a tenancy should their turn be reached via the housing register. The effect of this will be that the independent rehousing of vulnerable applicants is carried out in a more planned way and their emergency rehousing needs would be the responsibility of the social services authority.

8.4.3 This strategy provides an ideal opportunity for local housing authorities, social service and support providers to work effectively together to ensure notification and action is taken at the earliest opportunity to secure a housing solution for vulnerable applicants, through a planned approach which provides the best possible outcome for the individuals.

8.4.4 Partners will seek to co-operate and ensure an individual's rights are upheld, and that individuals would not be placed into accommodation that they couldn't cope with. Partners will continue to support people to understand the responsibilities of a tenancy agreement and explore interim arrangements are made possible for those who do not fall within the provisions of the homeless legislation, whilst a longer term housing solution is arranged.

8.5 Equality and Diversity

Whilst all partner agencies have their own Diversity or Equality strategies and relevant action plans clearly a core standard for this strategy must be around equality of access to support, information and services should be available to all people and not be impacted by their race, gender, beliefs or faith or sexual orientation. Whilst this strategy relates primarily to young people and adults with a physical, sensory or learning disability the general principles of partnership working and standards apply across all age groups.

9.0 **Gap Analysis**

9.1 Future need and Demographic Growth

9.1.1 One of the key aims of the Disabled People's Housing Strategy is to establish a firm evidence base to inform strategic planning. Census data and demographic projections has given an indication of the number of people living in the county who have a disability or life limiting long-term illness. This helps to highlight that the housing needs of disabled people will become an increasingly important priority for housing practitioners. Having effective arrangements for gathering information on services for disabled people is a key element.

9.1.2 However, it is clear that currently there are significant gaps in the availability of information required to inform strategic planning. It is not currently known how many disabled people are living in unsuitable housing or are in some form of housing need. This is perhaps most significant in relation to the owner occupied sector. It is likely that there are a significant number of disabled homeowners who are living in unsuitable housing or are in housing need. This area of work will therefore become a priority.

9.2 Next Steps

The immediate priority is therefore to establish the level of housing need. Looking at the available data there are 3 main demographic growth issues:

- general population growth
- people moving into the area
- acquired disability

Current known demand can be shown in 3 groupings:

- Young people leaving care or parental home (Transitions)
- Disabled adults unable to remain in parental home
- Disabled adults in existing residential or other accommodation not meeting needs.

9.3 Models and best practice

It is widely acknowledged that people have a right to secure accommodation and to maximise their independence in the local community. The move from a model of residential provision and grouped living arrangements to that of single or shared, where requested, tenancies and home ownership is seen as a core priority. This strategy endorses these rights and work will ensure that people have information to facilitate choice and support to explore their options.

9.4 Promoting Independence

As the action plan is developed this will take account the need to explore and address issues that enhance independence particularly in the following areas:

- Development of and access to Assistive technology
- Development of and access to Adaptations
- Outcome from the Home Improvement Agency review
- Shared ownership / mortgages
- Remodelling existing schemes
- Development of floating support

9.5 Capital – Housing Corporation

The last bid round was in October 2007 for 2008 /09 The Disability Strategy Housing Network will need to do forward thinking as to next bid round.

9.6 Summary of gaps and priorities

9.6.1 In essence then the main priority areas for action identified to date are:

- Undertake further work to refine knowledge about the level of housing need and shortfalls in provision.
- Ensure information is available and accessible to all.
- Move from a model of residential provision and grouped living arrangements to that of single or shared, where requested, tenancies and home ownership.
- Maintain access to adaptations and assistive technology to maintain and develop independence.
- Maintain consultation and involvement of disabled people in the continuing development of housing and support.
- Develop flexible support services to include floating and where necessary specialist support services.
- Ensure best practice and standards inform developments across the county.
- Take account of 16+ needs to avoid the need for out of county placement. (develop work practices and a protocol between local housing authorities and social care including young people with an aim if possible to include 16+).

9.7 Links

The action plan will also need to link to and take account of:

- The forthcoming Joint Strategic Needs Assessment.
- The Local Area Agreements and potential link with Supporting People funds.
- A move towards developing self directed support ('personalised services')

through Individual Budgets.

- A commitment to pursue joint commissioning in appropriate areas.
- Following Cambridgeshire County Council Contract Regulations.
- Ensure this strategy informs and feeds into other existing strategies so the aims are adopted across the board.

10.0 Consultation

10.1 Comments are sought in the first instance on the broad principles set out in this first initial Cambridgeshire Disability Housing Strategy. An initial action plan is being developed and views are sought as to the content of the Action plan. At this stage a chart identifying the issues and potential issues is attached to the strategy that could provide the framework for a future action plan.

Comments can be sent by 30th April to the leads identified in the covering letter or sent to Service Development and Commissioning Manager, SS1415, Shire Hall, Cambridge CB3 0AP.

10.2 Following consultation and final ratification it is hoped that the Disability Housing Strategy Network group can then proceed on a basis of reasonable assumptions. The development of an action plan is key to its success. The group will continue to identify how consultative and lobbying groups can influence and inform partners.

10.3 Districts will be undertaking local consultation activities. This strategy will also be circulated and presented to:

- Local voluntary organisations
- The Learning Disability Partnership Board
- The Physical Disability and Sensory Partnership Board
- Partners management and Executive groups

11.0 Monitoring and Review

11.1 It is anticipated that the Strategy and action plan will be monitored and reviewed by the Disability Housing Strategy Network group on a six monthly basis. Regular reports will be provided to the boards as listed at 10.3 and Partners management and Executive groups.

Appendix A

Partners involved in the production of the Strategy

- Cambridgeshire County Council
 - Office of Environment and Community Adult Support Disability Service and Office of Children and Young People
- Cambridge City Council
- East Cambs District Council
- Fenland District Council
- Huntingdonshire District Council
- South Cambs District Council
- Supporting People Team
- Accent Nene
- Axiom Housing Association
- Cambridge Housing Society
- Granta Housing Society
- Luminus group
- Muir Housing Association
- Papworth Trust
- Sanctuary Supported Housing (Sanctuary Hereward)

Appendix B Key Legislation and National Guidance

Includes:

- Some of the key Legislation
- National Guidance
- Legislative Duties
- Regulatory Bodies

Human Rights

The Human Rights Act 1998 (Article 14) prohibits discrimination. People must be allowed to enjoy their rights and freedoms under the Human Rights Convention without discrimination on any grounds such as sex, race, colour, language, religion, political or other opinion, national or social origin or association with a national minority.

Housing Act 2004

- Strengthens the powers of local authorities in relation to the assessment of need and provision of housing services.
- Requirement to introduce Choice Based lettings

National Strategy for Supporting People - June 2007

Department of Communities & Local Government

The Strategy covered 4 key areas:

- Keeping people that need services at the heart of the programme
- Enhancing partnership with the Third Sector
- Delivering in the new government landscape
- Increasing efficiency and reducing bureaucracy

Independence, Well-being and Choice

Department of Health

- sets out the vision for the future of social care for adults.
- places people at the centre of service delivery, promotes independence, choice and control, and improved access to the full range of universal public services.

Government White Paper Our Health, Our Care, Our Say January 2006

- sets out the Government's vision of a more effective health and social care service in the community.

The Disability Discrimination Act 1995

- introduced new measures aimed at ending the discrimination faced by many disabled people. It protects disabled people in the areas of:
 - employment
 - access to goods, facilities and services
 - the management, buying or renting of land or property.

The Act places a statutory duty on public bodies to promote disability equality by eliminating unlawful disability discrimination and disability related harassment, promote positive attitudes towards disabled people and encourage participation of

disabled people in public life and facilitate equality of opportunity for disabled people and employees and to publish a Disability Equality Scheme.

- includes a duty on public bodies to promote equality of opportunity for disabled people

Improving Life Chances Cabinet Office January 2005

- sets out the vision that “By 2025 disabled people in Britain should have full opportunities and choices to improve their quality of life and will be respected and included as equal members of society.”

Valuing People Department of Health March 2001

- sets out the strategy for children and adults with learning disabilities, and their families, to live full and independent lives as part of their local community.

Local Government White Paper : Strong and Prosperous (Local Government and Public Involvement in Health Bill) 2006

offers a stronger role for authorities to lead community development and a more bottom up accountability.

NHS and Community Care Act 1990

Section 47 duty to carry out an assessment of an individual's need for community care services and decide whether his needs call for the provision of services by the local authority or other authorities – promote development of domiciliary day and respite services to enable people to live in their own homes wherever feasible and sensible.

if an assessment of need (ie a community care assessment) has been carried out and has identified the housing adaptation as a need, then the authority or organisation responsible for providing social care services is responsible for ensuring that the need is met.

National Assistance Act 1948

Section 29 “make arrangements for promoting welfare of people over 18 who are blind, deaf, dumb, mentally disordered, substantially and permanently handicapped by illness, injury, congenital deformity etc”.

Part III, Section 21 Duty of local authorities to provide: a social work services/accommodation for people 18 and over.

Chronically Sick and Disabled Persons Act 1970

Section 2 – Practical assistance in home and recreational facilities to Section 29 NNA clients. Individual rights to services (where it is necessary)/ facilitate the taking of holidays/ provision of meals, telephones or special equipment/ duty to issue orange badges. (LAC 12/70 and LAC 3/91).

social care services have a duty to *‘arrange practical assistance in the home, and any works of adaptations or the provision of additional facilities designed to secure greater safety, comfort or convenience.’*

The Children Act 1989: places a duty on authorities to provide a range of family support services for children in need. The definition of children in need includes disabled children.

‘Every Child Matters’-

‘Every Child Matters’ is the government’s policy agenda for promoting greater multi-agency working in relation to delivering services for children. The aims of the policy are that every child, irrespective of their background and circumstances, has the opportunity to be healthy, stay safe, enjoy and achieve, make a positive contribution and achieve economic well-being.

Housing Grants Construction and Regeneration Act 1996

introduction of mandatory Disabled Facilities Grants administered by the District Councils. This does not remove the duty from Social Services authorities to assist service users when they are unable to meet their financial contribution

Delivering Housing Adaptations for Disabled People: A Good Practice Guide. ODPM November 2004

Regulatory and Advisory Organisations

CSCI (commission for social care inspection) promotes improvement in social care through statutory registration & inspection of services, using national minimum standards criteria. CSCI ensures social care services within the community meet people’s real needs and work as efficiently as possible.

Legislative Duties

Duties to homeless applicants:

Where homelessness cannot be prevented, duties to homeless applicants are determined by the following questions and assessments:

Is the applicant homeless or threatened with homelessness?

Applicants are homeless if there is no accommodation available to them that they can lawfully occupy that is reasonable for the applicant and their household. This means that there must be no alternative accommodation available to them anywhere, not just in the area.

By law someone is threatened with homelessness if they are likely to become homeless within 28 days. Immediate help should be sought for people in this situation.

Is the applicant eligible for assistance?

Some applicants who are subject to immigration control or who have been living outside the UK may not qualify for help even if they have nowhere to live. If applicants do not qualify they will be given advice about other help that may be available to them, such as asking social services to consider them for assistance under other legislation.

Is the applicant in priority need?

Applicants are in a priority need category if:

- they have dependent children who live with them
- they are pregnant
- they are aged 16 / 17
- they are vulnerable* due to age, mental illness, physical disability or as a result of spending time in the armed forces, serving a prison sentence or having been in care or some other special reason
- they are homeless in an emergency due to, for example, fire or flood.

* when assessing vulnerability, consideration will be given to how these issues prevent the applicant from finding accommodation and if they would be less able to cope than another person if they were homeless.

If applicants are not in priority need local housing authority duties will be limited to providing advice and assistance to help them to find alternative accommodation.

Temporary accommodation will only be provided for those people found to be homeless, eligible for assistance and in priority need.

Is the applicant intentionally homeless?

Investigations will be made into the reasons for homelessness. If applicants are found to be homeless due to a deliberate act or something they haven't done they may be found intentionally homeless. This will mean that we will not accept a full housing duty.

Instead temporary accommodation is provided for a limited period (usually 28 days) to give the applicant time to find another place to stay. Examples of people being found intentionally homeless may include:

- having lost accommodation by not paying the rent or mortgage when they had enough money and the ability to pay
- having lost accommodation due to unreasonable behaviour.

Does the applicant have a local connection?

The housing authority will also determine if the applicants has a local connection with district/ city. The following are general guidelines for determining a local connection (and are not exhaustive):

- residence in the district for six of the last 12 months or three out of the last five years
- permanent employment in the district
- close relatives (parent, sister, brother or adult child) who have lived in the district for the last five years
- there is a special reason

If an applicant does not have a local connection with the housing authority they have applied to, they may be referred to another local authority where they do have a local connection.

Duties to households who are homeless, eligible for assistance, in priority need, and not intentionally homeless

For applicants who are assessed as being homeless, eligible for assistance, in priority need, and not intentionally homeless a 'full housing duty' is accepted. Applicants will be provided with temporary accommodation, until one of the following applies:

- They accept an offer of accommodation through the housing register.
- They refuse a suitable offer of accommodation made via the housing register.
- They accept a qualifying offer (this means a suitable private rented tenancy which they agree discharges the council's duties).
- They become intentionally homeless from the temporary accommodation.
- They voluntarily leave the temporary accommodation.

It is difficult to predict how long someone may be waiting in temporary accommodation before an offer of permanent accommodation may be made, but other housing options can be explored during this time.

Right to a review

Under the Housing Act applicants have the right to a formal review of some of the decisions made about their homeless application. This includes decisions that they are not homeless, they are not eligible for assistance, they are not in priority need, they are intentionally homeless or they do not have a local connection with the authority area. Review requests are usually required to be made within 21 days of the date of decision.

Supporting People

Since April 2003, most supported housing has received its revenue funding through the government programme "Supporting People" (SP). The SP administering authorities are themselves partnerships between relevant districts, County, Primary Care Trusts and Probation, and close partnership working has been essential to establishing appropriate decision-making structures and developing joint strategies. There is little value in attempting to mirror these within a sub-regional context, and hence the sub-regional strategy draws from the county-based arrangements.

Investment needs

The authorities of the sub-region have identified new supported housing as a key priority for additional investment, both capital and revenue.

Several of the SP client groups are already facing a significant undersupply in appropriate supported accommodation, and this is expected to increase, due partly to changes in the existing population, and partly to growth pressures.

For example, there is expected to be an increase in the numbers of frail elderly people requiring extra-care (also known as very-sheltered housing), as the population ages, and as institutional models of care for very frail older people become unacceptable and undesirable.

In terms of growth, it is expected that increases in population of the size outlined in Section 4 will include significant numbers of people who require some support in order to live independently. This will include people from most if not all the SP client groups, and the Cambridge sub-region authorities do not wish to see new settlements developed without provision for those who need support, as this will create unbalanced communities, and difficulties in meeting needs in the future.

Some needs may be met through floating support, where support is not tied to a specific property but to an individual. These schemes have proved to be a cost-effective solution in meeting the needs of a number of groups. Floating support can be flexible in reaching people in rural settings and preventing homelessness. Additional capital investment would not be needed to progress such solutions, but significantly increased revenue would be required. However, for some groups, including those with severe needs or high degrees of physical frailty, specialised buildings will continue to be the best option.

Continuing budget reductions will have implications for service users, and would hamper the ability of the authorities to meet the needs of a growing population.

It is proposed that if a funding allocation were made available for the sub-region, it should be top-sliced for Supported Housing schemes, so long as those schemes are able to demonstrate revenue funding (from SP streams or health/social care). Given constraints on revenue, it is not expected that this top-slice would jeopardise a general housing programme, but to ensure this, the top-slice should be limited to a maximum of 20% of the overall programme.

All supported housing services are subject to review within the first three years of their contracts.

Appendix D

NEEDS	DEGREE OF RISK			
	LOW (1)	MODERATE (2)	SUBSTANTIAL (3)	CRITICAL (4)
A PHYSICAL SAFETY OF INDIVIDUAL AND OTHERS			Abuse or neglect (including self-neglect) has occurred, or will occur	Life is threatened or will be. Serious abuse or neglect (including self-neglect) has occurred or will occur. Cannot be left alone
B PHYSICAL HEALTH/ DISABILITY OF INDIVIDUAL AND OTHERS	Concerns about physical health but unlikely to deteriorate in the next six months	Concerns about physical health and may deteriorate in the next six months	Significant concerns about physical health and likely to deteriorate in the next six months. Carer under severe stress	Significant health problems have developed or will develop. Carer at risk of collapse
C MENTAL HEALTH OF INDIVIDUAL AND OTHERS	Concerns about mental health but unlikely to deteriorate in the next six months	Concerns about mental health and may deteriorate in the next six months	Ability to care for self or relate to others limited by mental state. Mental health is likely to deteriorate	Likelihood of self-harm or harm to others. Mental health is likely to deteriorate or is deteriorating.

D INDEPENDENT LIVING SKILLS	Is, or will be, unable to carry out one or two personal care and domestic routines	Is, or will be, unable to carry out several personal care and domestic routines	There is, or will be, only partial choice and control over the immediate environment. Is, or will be, unable to carry out the majority of personal care and domestic routines	There is, or will be, little or no choice and control over vital aspects of the immediate environment. Is, or will be, unable to carry out vital personal care and domestic routines
E INVOLVEMENT IN WORK, EDUCATION OR LEARNING	Involvement in one or two aspects cannot, or will not, be sustained	Involvement in several aspects cannot, or will not, be sustained	Involvement in many aspects cannot, or will not, be sustained	Vital involvement cannot, or will not, be sustained
F SOCIAL ROLES, RELATIONSHIPS AND RESPONSIBILITIES	One or two social support systems and relationships cannot, or will not, be sustained. One or two family and other social roles and responsibilities cannot, or will not, be undertaken	Several social support systems and relationships cannot, or will not, be sustained. Several family and other social roles and responsibilities cannot, or will not, be undertaken	Majority of social support systems and relationships cannot, or will not, be sustained. Majority of family and other social roles and responsibilities cannot, or will not, be undertaken	Vital social support systems and relationships cannot, or will not, be sustained. Vital family and other social roles and responsibilities cannot, or will not, be undertaken

Appendix E Housing Trajectories

The Cambridgeshire Housing Trajectory – all homes

Cambridgeshire sets out its programme to deliver homes in its housing trajectory. This tool is used to plan, monitor and manage our programme of delivery across the County, between 2001 and 2016.

The trajectory takes into account past completion figures published by the County Council, and future projections that have been forecast by the five district councils up to 2016 through their Annual Monitoring Reports. Information on the expected build rates and phases on major strategic sites comes from negotiations on and detailed project management of each site.

Information regarding commencement dates and build rates on the strategic development sites are robust, but likely to experience some variation as risks and issues are identified, met and overcome. This information is updated at frequent intervals as project managers receive updates from developers on projected completions.

For non-strategic and smaller sites, the trajectory uses information from district annual monitoring returns published in December 2006.

Using the trajectory

PLAN (orange line): The planned strategic allocation is set out in the current RSS. This gives an overall target of 47,500 homes to be delivered between 1999 and 2016.

MANAGE (green line): This line represents the numbers of homes still to be delivered up to 2016.

MONITOR (red line): Taking into account the number of homes we have completed already and plan to complete each year, the monitor line signifies the number of dwellings above or below the annual planned target i.e. compares our annual completions and planned numbers to our annual target.

Outputs

- By 2006/7 we had delivered some 18,971 homes. (2,292 of these were complete at the end of 2001/2).
- Between 2007/8 and 2016 we plan to deliver 47,500 new homes (and provisionally 57,274 additional homes to 2021).
- Looking further into the future, our projections total 76,245 homes being delivered overall to 2021, which would mean we would exceed the draft RSS target of 73,500 by some 2,745 homes.

POPULATIONS: Disabled Adults

1. Demography

As shown in Table 1 below, OPCS prevalence rates would suggest that in 2001 there were around 62,500 people aged over 16 in Cambridgeshire with some form of disability. Figures of the number of people who self-defined as having a limiting long-term illness, health problem or disability in the 2001 Census were 23% higher at 76,400. Not all of these people would require specialist services, support or advice. For the population aged 16-59, OPCS prevalence rates suggest there are around 20,900 disabled people, while the Census showed 32,200 people declaring an LLTI (this is over 50% higher). In comparison, the number of people aged 16-59 claiming Disability Living Allowance is significantly lower, at just 8,700.

Table 1: Cambridgeshire estimated disability prevalence - adults

	Age	OPCS Disability Surveys	2001 Census LLTI	% difference	In receipt of Disability Living Allowance
					No's at May 01
Total	16-24	1,600	3,200	100%	8,700 (aged 16-59)
	25-59	19,300	29,000	50%	
	60-74	18,400	21,700	18%	
	75+	23,045	22,700	-1%	
	Total	62,300	76,400	23%	8,700

2. Mapping

Attached are a number of maps that demonstrate the spread across Cambridgeshire. Map 1 shows clearly that there are more adults with an long term limiting illness in deprived areas than would be expected on the basis of disability prevalence estimates. It is interesting to note that, while the proportion of the population with an LLTI is much higher than the likely prevalence of disability, when compared by ward, many of the wards show roughly similar levels.

Map 2 shows the proportion of adults aged 16-59 claiming Disability Living Allowance. This shows a similar relationship to deprivation, with a higher rate of claimants in wards considered to be more deprived. It is interesting to speculate the extent to which actual disability is higher in these wards or whether the population in these wards is more inclined to claim benefits. It is possible that in more affluent areas of the county, some people who would be eligible for benefits do not claim as they do not perceive themselves to receive support from the state. Papworth ward shows a much higher rate of claimants than the surrounding rural wards; this is likely to reflect the location of the Papworth Trust, where a number of disabled adults have supported housing.

Map 3 shows a similar picture to map 1. Across most of the county, there are many fewer DLA claimants than the expected number of disabled adult. In general, more deprived areas show less of a discrepancy. In Waterlees ward, in Wisbech, which is generally considered to be the most deprived ward in the county, there are 18% more DLA claimants that would be expected on the basis of prevalence rates. DLA claimants must reach the threshold disability criteria, which are higher than the baseline threshold for the OPCS Surveys, so this evidence does suggest that some areas of Cambridgeshire have higher levels of disability than would be expected, and that this may correlate to some extent with deprivation.

3. Future demand for Disability Services

Table 2: Cambridgeshire estimated disability prevalence

	Age	OPCS Disability Surveys	2001 Census LLTI	% difference	Statement of SEN excl behavioural	Children in receipt of Disability Living Allowance
					No's at Oct 05	No's at May 01
Male	0-4	440	480	9.1%	-	100
	5-9	800	840	5.0%	484	600
	10-15	830	1,050	26.5%	988	500
	Total	2,070	2,370	14.5%		1,200
Female	0-4	340	320	-5.9%	-	100
	5-9	720	530	-26.4%	155	300
	10-15	640	730	14.1%	413	300
	Total	1,700	1,580	-7.1%		700
Total	0-4	780	810	3.8%	-	200
	5-9	1,510	1,370	-9.3%	639	900
	10-15	1,470	1,770	20.4%	1,401	800
	Total	3,760	3,950	5.1%	-	1,900

Table 2 above also shows the number of children with a statement of special educational needs at ages 5-9 and 10-15, along with the number of children for whom Disability Living Allowance is being claimed. In total, for the 10-15 age-group, the number of stated children is very similar to the OPCS estimate of the number of disabled children. Again, however, there is considerable variation by sex, with a higher number of statements among boys than would be expected, and a lower number among girls. Note that the data given above excludes children stated because of a behavioural or emotional problem; this mostly affects the data for boys.

Overall, Disability Living Allowance is claimed for far fewer children than are likely to be disabled, and fewer than are stated. This may be because of different eligibility criteria, although it is possible that some families do not claim benefits to which they would be entitled.

A full analysis of future requirements in relation to disability would include an assessment of the implications of demographic change, health improvement and medical advance and policy changes to the way that disabled people are supported. Demographic change, both in terms of the county's overall population, and its age, sex and socio-economic structures, will affect the numbers of disabled people. Health improvement and medical advance may affect prevalence rates; an example here would be increased life expectancy among people with learning disabilities. Policy changes may affect the types of services the Council provides, how those

services are provided, and the threshold at which people are considered eligible for services.

Table 5 below shows the potential population growth and age structure on the likely number of disabled people. These figures assume that there is no change in prevalence in the future. Overall, demographic change would imply an 11% increase in the number of disabled children, amounting to an additional 410 children. The number of disabled adults would increase by 42%, amounting to nearly 26,000 additional people. As a whole the population of Cambridgeshire is projected to increase by 22%; the different levels of increase for disabled adults and children reflect the trend towards an ageing population, magnified by higher disability prevalence among older people.

Table 5: Projected number of disabled children in Cambridgeshire, 2001-2021

Sex	Age	2001	2011	2021	% change 2001-2021
Male	0-4	440	450	520	18.2%
	5-9	880	890	970	10.2%
	10-15	1,000	1,030	1,070	7.0%
Female	0-4	320	320	370	15.6%
	5-9	560	570	620	10.7%
	10-15	650	680	700	7.7%
Total	0-4	760	770	900	18.4%
	5-9	1,440	1,450	1,590	10.4%
	10-15	1,650	1,710	1,770	7.3%
Total children		3,850	3,930	4,260	10.6%

Source: OPCS Survey prevalence rates applied to CCC Research Group mid-2003 based population forecasts

Table 6: Projected number of disabled adults in Cambridgeshire, 2001-2021

Age group	2001	2011	2021	% change 2001-2021
16-24	1,590	1,910	2,070	29.8%
25-59	19,270	20,150	22,760	18.1%
60-74	18,450	23,170	26,810	45.3%
75+	23,040	27,480	36,590	58.8%
Total adults	62,350	72,710	88,220	41.5%

Source: OPCS Survey prevalence rates applied to CCC Research Group mid-2003 based population forecasts

See Maps 4 to 7.

4. Conclusions

On the basis of existing data sources it should be possible to obtain a reasonable understanding of disability in Cambridgeshire, although final results are likely to indicate ranges rather than single numbers. Initial work suggests a combination of the OPCS Disability Survey prevalence rates, local administrative data and local LLTI data would prove most helpful.

With the population mapped, it would then be possible to examine the equity of financial and human resource distribution, and to start to examine service accessibility.

A key part of the project should be likely changes to the size and nature of the disabled population. This should include some simple sensitivity analysis around changes to disability prevalence over time.

The project could vary in detail and length depending on the amount of time and money that could be put into it. Assuming no additional primary research were required, good use of the available data and literature could be made within three to six months, depending on the agreed scope of the project. If financial assessments are to be included this would bring the time closer to the six month mark. With more time, and money, the logical step would be to attempt additional primary research. This would significantly lengthen the scope and duration of the project and, while extremely interesting, would probably be beyond the capacity of locally funded work or work to be carried out by the Research Group.

Estimated numbers of children (aged 0-24) with associated disorders

	% of those with severe LD	N Pet PCT	S Pet PCT	Fenland PCT	Hunts PCT	S Cambs PCG	E Cambs PCG	Cambs City PCG	CHA
No of People aged 0-24		141	114	97	169	102	72	215	909
Epilepsy	20-50%	28-70	22-57	19-49	34-85	20-51	14-36	43-108	182-454
Cerebral Palsy	15-40%	21-56	17-46	14-39	25-68	15-41	10-29	32-86	136-364
Visual disorders	10-30%	14-42	12-36	10-29	17-51	10-31	7-22	21-65	90-273
Hearing defects	5%	7	6	5	8	5	4	11	45
Speech defects	60-85%	84-120	68-97	58-82	101-144	61-87	43-61	129-183	545-773
Minor Behavioural problems	common								
Serious disturbed behaviour	5-10%	7-14	6-12	5-10	8-17	5-10	4-7	11-22	45-91

Source of percentage of those with severe LD associated with other disorders: Fryers T. Public Health approaches to mental retardation: handicap due to intellectual impairment. In: Holland WW, Detels R, Knox G. Oxford Textbook of Public Health. Oxford University Press 1991; 29-499-500.

Estimated numbers of adults (aged >24) with associated disorders

		N Pet PCT	S Pet PCT	Fenland PCT	Hunts PCT	S Cambs PCG	E Cambs PCG	Cambs City PCG	CHA
No of adults aged >-24		180	149	142	249	157	107	235	235
Impaired communication or social st	50%	90	74	71	125	79	54	117	117
Visual disorders	15%	27	22	21	38	24	16	35	35
Hearing defects	20%	36	30	28	50	32	22	47	47
Mental illness or problem behaviour	25-50%	45-90	37-74	35-71	62-125	39-79	26-54	58-117	304-1109

Source of percentage of those with severe LD associated with other disorders:
 Ellis D. the epidemiology of visual impairment in people with a mental handicap. In: Ellis D (ed). Sensory impairments in mentally handicapped people. London: Croom Helm, 1986
 Kropka Bl, Williams C. the epidemiology of hearing impairment in people with mental handicap. Sensory impairments in mentally handicapped people. London: Croom Helm, 1986
 Lund J. The prevalence of psychiatric morbidity in mentally retarded adults. Acta Psychiatrica Scandinavica a. 1

Supporting People

PROJECTED SPEND 2007/08 (£000's) BY CLIENT GROUP

CLIENT GROUP	£000's
Homeless Families with Support Needs	324
Single Homeless with Support Needs	2,603
Teenage Parents	170
Young People at Risk	2,039
Offenders or People at risk of offending	586
Older People with Support Needs	2,410
Frail Elderly	209
People with Physical or Sensory Disabilities	564
People with Mental Health Problems	1,556
Women at Risk of Domestic Violence	352
People with Learning Difficulties	1,979
Travellers	76
People with HIV/AIDS	22
People with Drug & Alcohol Problems	183
TOTAL	13,073

PROJECTED SPEND 2007/08 (£000's) BY DISTRICT

DISTRICT	£000's	%age of spend	Mid 2005 Population	%age of population
Cambridge City	5,916	45%	111,000	20%
East Cambridgeshire	1,213	9%	75,500	13%
Fenland	1,674	13%	87,500	15%
Huntingdonshire	2,517	19%	159,700	28%
South Cambridgeshire	1,753	14%	136,500	24%
TOTAL	13,073		570,200	

- Agreed at DIG on the 16th of November 2006

- People experiencing or at risk of social exclusion

- People living independently with support only

People in receipt of care with support

- Generic cross-tenure floating support for: Older people, Refugees, People with a LD, Young People at Risk; Travellers, People with HIV/AIDS, People with MH problems, Substance misusers, Teenage Parents, Victims of Domestic Violence
- Specialist floating support for Ex-Offenders
- Specialist floating support for people with Sensory Impairment
- More resettlement workers to facilitate move on through short-term resettlement support
- Continuum of support for Substance Misusers from use to non-use
- Remodel schemes to maximise independence for people with Mental Health problems
- Accommodation for women at Risk of Domestic Violence, joint commissioned with, e.g. a neighbouring authority

- Accommodation in East Cambs, Hunts and Fenland for people with Mental Health problems
- Resource (county-wide) for Young People with complex needs (e.g. challenging behaviour, substance misuse, offending)

SHELTERED & EXTRA CARE (RING FENCED BUDGET)

- More extra care places for elderly people (indicative targets for each district are available) sited to give a continuum of support at single locations.
- Also convert existing sheltered schemes for older people to make them flexible enough to become 'extra care' without having to move the tenant when extra care is needed.
- More sheltered units for older people (with peripatetic warden) in Hunts and Fenland – sited to give a continuum of support at single locations.

Appendix ??? Types of Tenancy

Secure tenancies

A secure tenancy enables someone to live in their home as long as they don't breach the conditions of their tenancy agreement. A council can only evict someone from a secure tenancy by following the correct procedures and getting a court order. Written notice must be provided and the council would have to prove a legal reason why someone should be evicted before a court order was granted.

Introductory or Starter tenancies

An introductory tenancy is a one year trial council tenancy, which some authorities in the County operate. It provides most of the same rights as a secure council tenancy but it is possible to evict more easily if there is a breach of the tenancy conditions. Introductory tenants will automatically become a secure tenant if they don't breach their tenancy agreement. A starter tenancy is a one year trial housing association tenancy and operates on much the same basis as an introductory tenancy used by some councils.

Assured tenancies

Most housing association tenants have assured tenancies. This type of tenancy enables tenants to remain in their home as long as they do not breach the tenancy conditions. In the same way as a secure tenancy, the landlord must prove a legal reason before a court order would be granted.

Assured short hold tenancies

Most privately rented tenancies will be an assured shorthold tenancy. This type of tenancy provides a legal right to live in the accommodation for a period of time. This may be a fixed term tenancy (usually 6 or 12 months) or it may be a periodic tenancy, where it rolls on a month-to-month basis. A minimum of two months written notice must be provided by the landlord to end the tenancy, and a landlord is unable to take possession of the property without a court order, although they do not necessarily have to prove a reason for ending the tenancy.

Licence

This is the type of agreement usually in place for shared accommodation or if living with a resident landlord (a room in their home). A Licence effectively gives someone permission to occupy the accommodation rather than a legal right and as such it provides less security of tenure than a tenancy.

GENERAL ACCESSIBILITY STANDARDS All properties	
Scheme Development Standards	Supplementary Standards
External and internal environments should provide access for user groups and visitors with limited mobility.	
<p>Some further interpretation of the following tests may be found in the accessibility section of the NHF’s publication ‘Standards and quality in development’. The Technical illustrations appendix is particularly helpful.</p> <p>Note: The Corporation’s internal requirements are not mandatory for upper floor flats and maisonettes accessed by communal staircases without communal lift provision and individual first floor exposed access ‘walk-up’ flats. Ground floor units and any upper units accessed by communal lift are required to meet the Corporation’s accessibility requirements.</p>	<p>The supplementary standards listed here are the recommendations from the Cambridgeshire Occupational Therapists to accommodate the needs of both adults and children with disability. They are based on extensive experience of working with disabled people and the common barriers that the environment presents to supporting independence.</p> <p>Key references have been:</p> <ul style="list-style-type: none"> • Part M approved document, • BS 8300:2001 Code of Practice: design of buildings and their approaches to meet the needs of disabled people • Life time Home Standards
<p>Tests of compliance – essential items:</p> <p>Approach to the dwelling: paths skip-resistant and smooth, 900mm wide, max. cross falls 1:40, shallow crossings?</p> <p>ramps max. 5m at 1:12 or max. 10m at 1:15?</p> <p>protected edges to pathways where higher than adjoining levels?</p> <p>entrance landing, normally level, min. 1.2m x 1.2m (inward opening door)?</p> <p>unavoidable steps (not to occur within ramps), max. riser 150mm, min. going 280mm</p> <p>path protected with handrail or like where adjacent drop in level exceeds 380mm?</p> <p>contrasting textures or kerb used to</p>	<p>1000mm wide</p> <p>ramp gradients: 2m @ 1:12 5 m @ 1.15 10m @ 1:20</p> <p>Kerb upstands 100mm minimum</p> <p>The platform and any landings should be at least the width of the ramp and a minimum of 1500mm long, clear of any door swing. (BS8300:2001: 5.8.4).</p> <p>If a ramp is ‘more than 2m long between landings, or if there is no alternative stepped access, handrails should be provided on each side. If a ramp is 2m long or less between landings, and there is alternative stepped access, a handrail should be provided on at least one side’ (BS 8300:2001: 5.8.5). Handrail height 900-1000mm and diameter 40-50mm</p>

<p>distinguish between foot and vehicular access?</p> <p>dropped kerbs used at roadway crossings?</p> <p>path gateways provide min 850mm clear opening (no step at gateway)?</p>	<p>circular or oval and should extend 300mm top and bottom horizontally.</p>
<p>Main entrance to the dwelling (including main entrance from communal lobby or landing). clear opening min. 800mm? nominally flat threshold (max upstand 15mm)?</p>	<p>Illuminated</p> <p>Level thresholds</p>
<p>Other doorways at entrance level: secondary external doors min. 750mm clear openings? ▪ internal doors min. 750mm clear openings (wider where turning from 900mm passage)?</p>	
<p>Ground floor passageways (includes upper floor units accessed by communal lift): ▪ passage widths min. 900mm generally (750mm where limited intrusions e.g. radiators)? ▪ where turning into 750mm doorway, area of wider passageway provided or doorway width increased? ▪ where corridors turn 90°, protruding corner splayed or one passageway 1200mm wide?</p>	
<p>Entrance level WC and basin provided (all units)?</p>	<p>Must have noggins to allow retro fit of extra rails on walls around toilet sufficient to support person weight. Also supports for rails to be fitted on doors Distance from wall to centre of toilet pan is minimum of 450mm. Door to WC should hang outwards in case of fall within WC and access needed to WC. Sink should be wall mounted with lever taps.</p>
<p>Staircase suitable for future BS stair-lift, in terms of width and top and bottom landings?</p>	<p>Must have noggins to allow retro fit of extra banister rail on wall side sufficient to support person weight Stairs should be straight</p>
<p>Tests of performance – recommended items:</p>	

Accessible paving outside external door?	
All external doors wheelchair accessible?	Level threshold
Ground floor WC is fully wheelchair accessible?	
Living room situated at entrance level?	
In dwellings of more than one storey, a ground floor space could be used as a bed space?	
Adequate space for turning of a wheelchair in kitchens, dining areas and living rooms?	Now recommend 1700mm x 1700mm turning circle because many more larger wheelchairs require this
Stair configuration: full flight at 35% pitch or half landing within a stair of 42% pitch?	
Door handles, switches and thermostats, etc. set between 900-1200mm above floor?	
Socket outlets set between 450-600mm above room floor level?	

WHEELCHAIR ACCESSIBLE STANDARDS 10% of affordable housing	
Scheme Development Standards	Supplementary standards
Full accessibility and ease of manoeuvrability should be provided in environments designed for use by wheelchair users.	
In assessing the extent to which this standard has been met the Housing Corporation will have regard to the 'Wheelchair Housing Design Guide' 2006, Stephen Thorpe and Habinteg Housing Association, BRE Press. The Housing Corporation's requirements comprise all of the WHDG published requirements.	The supplementary standards listed here are the recommendations from the Cambridgeshire Occupational Therapists to accommodate the needs of both adults and children with disability. They are based on extensive experience of working with disabled people and the common barriers that the environment presents to supporting independence. Key references have been: <ul style="list-style-type: none"> • Part M approved document 2004 • BS 8300: 2001 Code of Practice: design of buildings and their approaches to meet the needs of disabled people • Life Time Home Standards
Tests of compliance – essential items: <i>Compliance with WHDG sections:</i> 1.3.2.1 Moving around outside: paths slip-resistant and smooth, 1200mm wide, max. cross falls 1:40, shallow crossings? ▪ ramps max. 5m at 1:12 or max. 10m at 1:15?	Gradients: 2m @ 1:12, 5m @ 1:15, 10m @ 1:20 Width 1200mm between upstands <i>Kerbed upstands 100mm minimum</i>

<p>protected edges to pathways where higher than adjoining levels?</p>	<p>The platform and any landings should be at least the width of the ramp and a minimum of 1500mm long, clear of any door swing. (BS8300:2001: 5.8.4).</p>
<p>Using outdoor spaces:</p> <ul style="list-style-type: none"> ▪ path gateways provide min. 850mm clear opening? ▪ accessible paving outside external door? ▪ accessible clothes drying facilities? ▪ accessible route from external door, external storage and external gate? 	<p>Gateway 950mm clear opening</p>
<p>Approaching the home:</p> <ul style="list-style-type: none"> ▪ car port – slip resistant smooth paved area min. 5.4m x 3.6m, covered at a height of 2.2m? ▪ accessible route to entrance? (Note: may overlap car port paving) ▪ entrance landing, nominally level, min. 1.5m x 1.5, x 1.5m? ▪ canope min. 1.2m set at max. height 2.3m) ▪ lighting to transfer space, route and entrance with PIR detectors and internal switching)? 	<p>Car port 6.0m x 3.6m paved area</p> <p>The platform and any landings should be at least the width of the ramp and a minimum of 1500mm long, clear of any door swing. (BS8300:2001: 5.8.4).</p>
<p>Negotiating the entrance door:</p> <ul style="list-style-type: none"> ▪ clear opening min. 800mm, relevant approach space, accessible threshold? ▪ suitably positioned: secure lock, latch with lever pull handles, or remote system? ▪ suitable provision for future installation of remote controlled door opener? 	<p>Level threshold</p>
<p>Entering and leaving, dealing with callers:</p> <ul style="list-style-type: none"> ▪ clear space upon entering for transfer to second chair? ▪ adjacent storing and charging of wheelchair, turning space min. ▪ suitably positioned: post collector and provision for future installation of entry phone? 	<p>Now 1700 x 1700mm turning space</p>
<p>Negotiating the secondary door:</p> <ul style="list-style-type: none"> ▪ external nominally level landing min. 1.5m x1.5m? ▪ clear opening min. 800mm, relevant approach space, accessible threshold? ▪ suitably positioned: secure lock (or multi-locking) pull handles and stays? ▪ external lighting to door and routes with PIR detectors and internal 	<p>Height of handles 900-1100mm from floor</p>

switching	
<p>Moving around inside/storing things:</p> <ul style="list-style-type: none"> ▪ all passage widths min. 900mm ▪ where 90° turn, protruding corner splayed or one passageway 1.2m wide? ▪ where 180° turn necessary, passageway 1.5m wide? ▪ clear door opening min. 775mm , relevant approach and operating space? ▪ storage depth and width, in combination with shelving layout, provides suitable access? 	<p>Passage width 1200mm minimum Straight on: Door: 800mm At right angles from 1500 wide: 800 At right angles from 1200 wide: 900</p> <p>Unobstructed space of 300mm between leading edge of a door and a return wall at both entrance level doors and internal doors.</p> <p>Storage for medical equipment, pads, hoists, walking frame and wheelchair. Need charging points.</p>
<p>Moving between levels:</p> <ul style="list-style-type: none"> ▪ where provision on more than one level: vertical through-floor lift to BS5900 (1991), full range of safety features, space to use? 	<p>Manoeuvring space in front of the lift 1700mm x 1700mm</p>
<p>Using living spaces:</p> <ul style="list-style-type: none"> ▪ extra space for wheelchair user to circulate, transfer, use furniture and operate fittings? 	<p>Living room – no dimensions less than 3000mm Adequate space for turning circle of 1700 X 1700mm with space to transfer to a chair over and above space to accommodate usual range of furniture</p>
<p>Using the kitchen:</p> <ul style="list-style-type: none"> ▪ extra space, suitable worktop and fitting layout for practical use by a wheelchair user? ▪ clear manoeuvring area min. 1.8m x 1.4m ▪ kitchen storage in a position and format which is largely wheelchair user accessible? ▪ built-in hob and oven, extra serviced spaces for three appliances (or four in 5p+ units)? ▪ All controls and socket outlets accessible, remote and labelled switching as required? ▪ suitable internal refuse arrangements manageable from wheelchair? 	<p>1 - 2 person dwelling 2550 x 3100mm 3 – 5 person dwelling 3200 x 3900mm 5 person dwelling 3600 x 4000mm 6 – 7 person dwelling 3640 x 4100mm</p> <p>1700 x 1700mm turning space and slip resistant flooring</p> <p>Recommend five spaces for appliances(not related to size of property) because of associated continence issues need space for washing machine and dryer as well as accessible fridge and accessible freezer and accessible dishwasher Built in hob and oven Safety cut off to local gas appliance Accessible mechanism for opening the window</p> <p>Open plan designs offer greater accessibility and flexibility of use of space however access to the kitchen space should be designed to support retrofit of gate for safety with children</p>
<p>Using bathrooms/WCs:</p> <ul style="list-style-type: none"> ▪ 5p + units: both a ‘wheel-in’ shower and bath fully installed? ▪ for units of less than 5p: either a ‘wheel-in’ shower or bath provided, with space provided to change installation in 	<p>Recommend for 4 person units and above</p> <p>Support for ceiling track hoist over bath, shower and WC areas</p>

<p>the future from shower to bath or vice versa?</p> <ul style="list-style-type: none"> ▪ for units on schemes with separate assisted bathing facilities, a 'wheel-in' shower fully installed, with space provided to change installation to a bath in the future. ▪ 'wheel-in' shower provision fully accessible with dished floor (min 1000 x 1000mm) fitted with floor drain? (Note: provided beneath or adjacent to bath if bath fully installed initially). ▪ 4p+ units: second WC provided with opposite hand transfer arrangement to main WC? ▪ layout ensures independent approach, manoeuvre, transfer and use of all fittings? ▪ suitable positioning of fittings to showers, baths and WCs, with all fittings selected for ease of operation? 	<p>Supports for rails through out bath, shower and WC areas.</p> <p>1200mm x 1200mm because most shower chairs are now 950mm long and many are 1150mm long</p> <p>Slip resistant flooring</p> <p>1-2 person property one wheelchair accessible toilet 3+ person property two wheelchair accessible toilets</p> <p>Must have noggins to allow retro fit of extra rails on walls around toilet sufficient to support person weight. Also supports for rails to be fitted on doors</p>
<p>Using bedrooms:</p> <ul style="list-style-type: none"> ▪ extra space to ensure wheelchair user access to beds, furniture, fittings and facilities? ▪ sensibly positioned: double socket outlets, TV/FM points, two-way light, entry phone point? ▪ main bedroom to bathroom future route enabled by full height knock-out panel, or other means? ▪ suitable provision for future hoists to run between main bedroom and bathroom? 	<p>Support of overhead tracking hoists</p> <p>Single bedroom wheelchair user with assistance of one person min 2900 x 3200mm Single bedroom wheelchair user with assistance of two carers min 2900 x 4200mm Double bedroom wheelchair user with assistance of one person min 3800 x 4100mm Double bedroom wheelchair user with assistance of two carers min 4100 x 4300mm</p>
<p>Operating doors:</p> <ul style="list-style-type: none"> ▪ door constructions suitable for subsequent fixing of pulls or other fittings? ▪ all doors have suitably positioned, easily operated handles, pulls, etc? ▪ inward opening doors to bathrooms/WC/showers openable in emergency from outside? ▪ any self-closing doors used are capable of independent operation by wheelchair user? 	<p>'D' handles and easy grip lever handles</p> <p>Opening force at leading edge no greater than 20 newtons</p>
<p>Operating windows:</p> <ul style="list-style-type: none"> ▪ opening and ventilation controls operable by wheelchair user (manual/geared/power)? ▪ Windows opening over paths do not create hazards? ▪ glazing line in living/dining/bedrooms no higher than 810mm above room floor level? 	<p>Optimum height from floor for handles is 900-1100mm without having to lean over anything</p>

<ul style="list-style-type: none"> ▪ full width transoms avoided in window areas below 1.5m above room floor level? ▪ full width transoms avoided in window areas below 1.5m above room floor level? 	
<p>Controlling services:</p> <ul style="list-style-type: none"> ▪ suitable control of mains water stopcock, gas and electric main consumer units? ▪ suitable isolating valves to sink, washing machine, WC, etc.? ▪ flexible plumbing to adjustable fittings, where provided? ▪ low surface temperature radiators in restricted areas? ▪ suitable electrical and heating control fittings provided? ▪ Suitable provision of personal alarms and for smoke alarms? ▪ Suitable provision for future telephone and intruder alarm installation? 	<p>Accessible position and easy lever mechanisms</p>

Appendix G

Registered Social Landlords (R S L's) or Housing Associations

The following is a summary of its key elements:

Housing Associations are viable, properly governed and properly managed. They are also sometimes called Registered Social Landlords (RSL). Some other Registered Social Landlords might be Trusts, cooperatives or companies.

Viable

Housing Associations operate viable businesses based on a robust business plan and fulfill their loan-agreement covenants, and identify and manage risks. The surplus made from renting out their housing is put back into the business to develop more homes and services.

Properly governed

Housing associations operate according to the law and statutory/regulatory requirements, and must be headed by an effective board with sufficient expertise to capably lead and control its work. Housing associations foster positive relationships and are accountable and transparent to service users and stakeholders. They protect public investment - using their social housing assets only for social housing purposes. Housing associations are responsive to service user views and priorities - enabling them to take part in decision-making and play their part in how services are managed and provided. They work towards the elimination of discrimination and demonstrate an equitable approach to the rights and responsibilities of all groups.

Properly managed

Housing associations employ staff to develop and manage good quality homes that seek to meet people's needs and preferences. They provide good quality housing services – by seeking to offer a choice of home with the most secure form of tenure compatible with the purpose of the housing, and use lettings policies that are fair and reflect the diversity of their client groups. Many housing associations also provide support services for vulnerable people. They work with local authorities to enable the latter to fulfill their duties to homeless people, those in priority need and to vulnerable people. In so doing, housing associations have strategies that link with regional and local housing strategies.

Types of Tenancy

Secure tenancies

A secure tenancy enables someone to live in their home as long as they don't breach the conditions of their tenancy agreement. A council can only evict someone from a secure tenancy by following the correct procedures and getting a court order. Written notice must be provided and the council would have to prove a legal reason why someone should be evicted before a court order was granted.

Introductory or Starter tenancies

An introductory tenancy is a one year trial council tenancy, which some authorities in the County operate. It provides most of the same rights as a secure council tenancy but it is possible to evict more easily if there is a breach of the tenancy conditions. Introductory tenants will automatically become a secure tenant if they don't breach their tenancy agreement. A starter tenancy is a one year trial housing association tenancy and operates on much the same basis as an introductory tenancy used by some councils.

Assured tenancies

Most housing association tenants have assured tenancies. This type of tenancy enables tenants to remain in their home as long as they do not breach the tenancy conditions. In the same way as a secure tenancy, the landlord must prove a legal reason before a court order would be granted.

Assured short hold tenancies

Most privately rented tenancies will be an assured shorthold tenancy. This type of tenancy provides a legal right to live in the accommodation for a period of time. This may be a fixed term tenancy (usually 6 or 12 months) or it may be a periodic tenancy, where it rolls on a month-to-month basis. A minimum of two months written notice must be provided by the landlord to end the tenancy, and a landlord is unable to take possession of the property without a court order, although they do not necessarily have to prove a reason for ending the tenancy.

Licence

This is the type of agreement usually in place for shared accommodation, (including registered care schemes and hostels) or if living with a resident landlord (a room in their home). A Licence effectively gives someone permission to occupy the accommodation rather than a legal right and as such it provides less security of tenure than a tenancy.

Appendix H Housing Corporation's Disability Equality Scheme

This aims to:

- explain how the Housing Corporation will promote equality for disabled people;
- show how disabled people were involved in developing our scheme;
- challenge discrimination against disabled people;
- help remove barriers for all disabled people; and
- show how we will ensure that housing associations respond to the needs of disabled people.

The Scheme is accompanied by an action plan that details the steps the Housing Corporation will take to meet out moral and legal obligations to disabled people and the wider equality agenda. These include:

Outcome 1 Making services more inclusive for disabled people

- Developing a culture at the Housing Corporation that is inclusive and accessible to disabled people
- Removing barriers to employment for disabled people in the Corporation
- Aim to ensure that all Housing Corporation information is available and accessible for disabled people
- Ensuring that the Housing Corporation's Offices are accessible to disabled people
- Ensure that disability and associated action plans are mainstreamed into the Corporation's relevant functions

Outcome area 2 Making housing more accessible

- Examine the demand for Lifetime Homes within the sector
- Work in partnership with key agencies to assess the cost and viability of developing new stock to Lifetime Homes standard.
- To work in partnership with the sector and Government to promote the Lifetime Homes agenda.
- The Corporation will seek to make effective use housing stock within the sector for disabled people
- Consideration is given to the needs of disabled people when drawing up plans for the development/maintenance and improvement of stock
- The Corporation to promote the inclusion of equality issues including disability into Regional Housing Strategies

- Outcome area 3 Making sure we involve disabled people and that our outcomes meet their needs
- All major Housing Corporation policies will be produced with the involvement of disabled people
- The Housing Corporation will involve disabled people in the development of policy as proportionate and appropriate

Appendix I Supporting People

PROJECTED SPEND 2007/08 (£000's) BY CLIENT GROUP

CLIENT GROUP	£000's
Homeless Families with Support Needs	324
Single Homeless with Support Needs	2,603
Teenage Parents	170
Young People at Risk	2,039
Offenders or People at risk of offending	586
Older People with Support Needs	2,410
Frail Elderly	209
People with Physical or Sensory Disabilities	564
People with Mental Health Problems	1,556
Women at Risk of Domestic Violence	352
People with Learning Difficulties	1,979
Travellers	76
People with HIV/AIDS	22
People with Drug & Alcohol Problems	183
TOTAL	13,073

PROJECTED SPEND 2007/08 (£000's) BY DISTRICT

DISTRICT	£000's	%age of spend	Mid 2005 Population	%age of population
Cambridge City	5,916	45%	111,000	20%
East Cambridgeshire	1,213	9%	75,500	13%
Fenland	1,674	13%	87,500	15%
Huntingdonshire	2,517	19%	159,700	28%
South Cambridgeshire	1,753	14%	136,500	24%
TOTAL	13,073		570,200	

Appendix J GENERAL ACCESSIBILITY STANDARDS

GENERAL ACCESSIBILITY STANDARDS	All properties
Scheme Development Standards	Supplementary Standards
<p>External and internal environments should provide access for user groups and visitors with limited mobility.</p>	
<p>Some further interpretation of the following tests may be found in the accessibility section of the NHF's publication 'Standards and quality in development'. The Technical illustrations appendix is particularly helpful.</p> <p>Note: The Corporation's internal requirements are not mandatory for upper floor flats and maisonettes accessed by communal staircases without communal lift provision and individual first floor exposed access 'walk-up' flats. Ground floor units and any upper units accessed by communal lift are required to meet the Corporation's accessibility requirements.</p>	<p>The supplementary standards listed here are the recommendations from the Cambridgeshire Occupational Therapists to accommodate the needs of both adults and children with disability. They are based on extensive experience of working with disabled people and the common barriers that the environment presents to supporting independence.</p> <p>Key references have been:</p> <ul style="list-style-type: none"> • Part M approved document, • BS 8300:2001 Code of Practice: design of buildings and their approaches to meet the needs of disabled people • Life time Home Standards
<p>Tests of compliance – essential items: Approach to the dwelling: paths skip-resistant and smooth, 900mm wide, max. cross falls 1:40, shallow crossings? ramps max. 5m at 1:12 or max. 10m at 1:15? protected edges to pathways where higher than adjoining levels? entrance landing, normally level, min. 1.2m x 1.2m (inward opening door)? unavoidable steps (not to occur within ramps), max. riser 150mm, min. going 280mm path protected with handrail or like where adjacent drop in level exceeds 380mm? contrasting textures or kerb used to distinguish between foot and vehicular access?</p>	<p>1000mm wide</p> <p>ramp gradients: 2m @ 1:12 5 m @ 1.15 10m @ 1:20</p> <p>Kerb upstands 100mm minimum</p> <p>The platform and any landings should be at least the width of the ramp and a minimum of 1500mm long, clear of any door swing. (BS8300:2001: 5.8.4).</p> <p>If a ramp is 'more than 2m long between landings, or if there is no alternative stepped access, handrails should be provided on each side. If a ramp is 2m long or less between landings, and there is alternative stepped access, a handrail should be provided on at least one side' (BS 8300:2001: 5.8.5). Handrail height 900-1000mm and diameter 40-50mm circular or oval and should extend 300mm top and bottom horizontally.</p>

dropped kerbs used at roadway crossings?	
path gateways provide min 850mm clear opening (no step at gateway)?	
Main entrance to the dwelling (including main entrance from communal lobby or landing). clear opening min. 800mm? nominally flat threshold (max upstand 15mm)?	Illuminated Level thresholds
Other doorways at entrance level: secondary external doors min. 750mm clear openings? ▪ internal doors min. 750mm clear openings (wider where turning from 900mm passage)?	
Ground floor passageways (includes upper floor units accessed by communal lift): ▪ passage widths min. 900mm generally (750mm where limited intrusions e.g. radiators)? ▪ where turning into 750mm doorway, area of wider passageway provided or doorway width increased? ▪ where corridors turn 90°, protruding corner splayed or one passageway 1200mm wide?	
Entrance level WC and basin provided (all units)?	Must have noggins to allow retro fit of extra rails on walls around toilet sufficient to support person weight. Also supports for rails to be fitted on doors Distance from wall to centre of toilet pan is minimum of 450mm. Door to WC should hang outwards in case of fall within WC and access needed to WC. Sink should be wall mounted with lever taps.
Staircase suitable for future BS stair-lift, in terms of width and top and bottom landings?	Must have noggins to allow retro fit of extra banister rail on wall side sufficient to support person weight Stairs should be straight
Tests of performance – recommended items:	
Accessible paving outside external door?	
All external doors wheelchair accessible?	Level threshold
Ground floor WC is fully wheelchair accessible?	

Living room situated at entrance level?	
In dwellings of more than one storey, a ground floor space could be used as a bed space?	
Adequate space for turning of a wheelchair in kitchens, dining areas and living rooms?	Now recommend 1700mm x 1700mm turning circle because many more larger wheelchairs require this
Stair configuration: full flight at 35% pitch or half landing within a stair of 42% pitch?	
Door handles, switches and thermostats, etc. set between 900-1200mm above floor?	
Socket outlets set between 450-600mm above room floor level?	
WHEELCHAIR ACCESSIBLE STANDARDS 10% of affordable housing	
Scheme Development Standards	Supplementary standards
Full accessibility and ease of manoeuvrability should be provided in environments designed for use by wheelchair users.	
In assessing the extent to which this standard has been met the Housing Corporation will have regard to the 'Wheelchair Housing Design Guide' 2006, Stephen Thorpe and Habinteg Housing Association, BRE Press. The Housing Corporation's requirements comprise all of the WHDG published requirements.	The supplementary standards listed here are the recommendations from the Cambridgeshire Occupational Therapists to accommodate the needs of both adults and children with disability. They are based on extensive experience of working with disabled people and the common barriers that the environment presents to supporting independence. Key references have been: <ul style="list-style-type: none"> • Part M approved document 2004 • BS 8300: 2001 Code of Practice: design of buildings and their approaches to meet the needs of disabled people • Life Time Home Standards
Tests of compliance – essential items: <i>Compliance with WHDG sections:</i> 1.3.2.1 Moving around outside: paths slip-resistant and smooth, 1200mm wide, max. cross falls 1:40, shallow crossings? ▪ ramps max. 5m at 1:12 or max. 10m at 1:15? protected edges to pathways where higher than adjoining levels?	Gradients: 2m @ 1:12, 5m @ 1:15, 10m @ 1:20 Width 1200mm between upstands <i>Kerbed upstands 100mm minimum</i> The platform and any landings should be at least the width of the ramp and a minimum of 1500mm long, clear of any door swing. (BS8300:2001: 5.8.4).
Using outdoor spaces: ▪ path gateways provide min. 850mm clear	Gateway 950mm clear opening

<p>opening?</p> <ul style="list-style-type: none"> ▪ accessible paving outside external door? ▪ accessible clothes drying facilities? ▪ accessible route from external door, external storage and external gate? 	
<p>Approaching the home:</p> <ul style="list-style-type: none"> ▪ car port – slip resistant smooth paved area min. 5.4m x 3.6m, covered at a height of 2.2m? ▪ accessible route to entrance? (Note: may overlap car port paving) ▪ entrance landing, nominally level, min. 1.5m x 1.5, x 1.5m? ▪ canope min. 1.2m set at max. height 2.3m) ▪ lighting to transfer space, route and entrance with PIR detectors and internal switching)? 	<p>Car port 6.0m x 3.6m paved area</p> <p>The platform and any landings should be at least the width of the ramp and a minimum of 1500mm long, clear of any door swing. (BS8300:2001: 5.8.4).</p>
<p>Negotiating the entrance door:</p> <ul style="list-style-type: none"> ▪ clear opening min. 800mm, relevant approach space, accessible threshold? ▪ suitably positioned: secure lock, latch with lever pull handles, or remote system? ▪ suitable provision for future installation of remote controlled door opener? 	<p>Level threshold</p>
<p>Entering and leaving, dealing with callers:</p> <ul style="list-style-type: none"> ▪ clear space upon entering for transfer to second chair? ▪ adjacent storing and charging of wheelchair, turning space min. ▪ suitably positioned: post collector and provision for future installation of entry phone? 	<p>Now 1700 x 1700mm turning space</p>
<p>Negotiating the secondary door:</p> <ul style="list-style-type: none"> ▪ external nominally level landing min. 1.5m x1.5m? ▪ clear opening min. 800mm, relevant approach space, accessible threshold? ▪ suitably positioned: secure lock (or multi-locking) pull handles and stays? ▪ external lighting to door and routes with PIR detectors and internal switching 	<p>Height of handles 900-1100mm from floor</p>
<p>Moving around inside/storing things:</p> <ul style="list-style-type: none"> ▪ all passage widths min. 900mm ▪ where 90° turn, protruding corner splayed or one passageway 1.2m wide? ▪ where 180° turn necessary, passageway 1.5m wide? ▪ clear door opening min. 775mm , relevant approach and operating space? ▪ storage depth and width, in combination with shelving layout, provides suitable access? 	<p>Passage width 1200mm minimum Straight on: Door: 800mm At right angles from 1500 wide: 800 At right angles from 1200 wide: 900</p> <p>Unobstructed space of 300mm between leading edge of a door and a return wall at both entrance level doors and internal doors.</p> <p>Storage for medical equipment, pads, hoists, walking frame and wheelchair. Need charging</p>

	points.
<p>Moving between levels:</p> <ul style="list-style-type: none"> ▪ where provision on more than one level: vertical through-floor lift to BS5900 (1991), full range of safety features, space to use? 	Manoeuvring space in front of the lift 1700mm x 1700mm
<p>Using living spaces:</p> <ul style="list-style-type: none"> ▪ extra space for wheelchair user to circulate, transfer, use furniture and operate fittings? 	Living room – no dimensions less than 3000mm Adequate space for turning circle of 1700 X 1700mm with space to transfer to a chair over and above space to accommodate usual range of furniture
<p>Using the kitchen:</p> <ul style="list-style-type: none"> ▪ extra space, suitable worktop and fitting layout for practical use by a wheelchair user? ▪ clear manoeuvring area min. 1.8m x 1.4m ▪ kitchen storage in a position and format which is largely wheelchair user accessible? ▪ built-in hob and oven, extra serviced spaces for three appliances (or four in 5p+ units)? ▪ All controls and socket outlets accessible, remote and labelled switching as required? ▪ suitable internal refuse arrangements manageable from wheelchair? 	<p>1 - 2 person dwelling 2550 x 3100mm 3 – 5 person dwelling 3200 x 3900mm 5 person dwelling 3600 x 4000mm 6 – 7 person dwelling 3640 x 4100mm</p> <p>1700 x 1700mm turning space and slip resistant flooring</p> <p>Recommend five spaces for appliances(not related to size of property) because of associated continence issues need space for washing machine and dryer as well as accessible fridge and accessible freezer and accessible dishwasher Built in hob and oven Safety cut off to local gas appliance Accessible mechanism for opening the window</p> <p>Open plan designs offer greater accessibility and flexibility of use of space however access to the kitchen space should be designed to support retrofit of gate for safety with children</p>
<p>Using bathrooms/WCs:</p> <ul style="list-style-type: none"> ▪ 5p + units: both a ‘wheel-in’ shower and bath fully installed? ▪ for units of less than 5p: either a ‘wheel-in’ shower or bath provided, with space provided to change installation in the future from shower to bath or vice versa? ▪ for units on schemes with separate assisted bathing facilities, a ‘wheel-in’ shower fully installed, with space provided to change installation to a bath in the future. ▪ ‘wheel-in’ shower provision fully accessible with dished floor (min 1000 x 1000mm) fitted with floor drain? (Note: provided beneath or adjacent to bath if bath fully installed initially). ▪ 4p+ units: second WC provided with opposite hand transfer arrangement to main WC? ▪ layout ensures independent approach, 	<p>Recommend for 4 person units and above</p> <p>Support for ceiling track hoist over bath, shower and WC areas</p> <p>Supports for rails through out bath, shower and WC areas.</p> <p>1200mm x 1200mm because most shower chairs are now 950mm long and many are 1150mm long</p> <p>Slip resistant flooring</p> <p>1-2 person property one wheelchair accessible toilet 3+ person property two wheelchair accessible toilets</p>

<p>manoeuvre, transfer and use of all fittings?</p> <ul style="list-style-type: none"> ▪ suitable positioning of fittings to showers, baths and WCs, with all fittings selected for ease of operation? 	<p>Must have noggins to allow retro fit of extra rails on walls around toilet sufficient to support person weight. Also supports for rails to be fitted on doors</p>
<p>Using bedrooms:</p> <ul style="list-style-type: none"> ▪ extra space to ensure wheelchair user access to beds, furniture, fittings and facilities? ▪ sensibly positioned: double socket outlets, TV/FM points, two-way light, entry phone point? ▪ main bedroom to bathroom future route enabled by full height knock-out panel, or other means? ▪ suitable provision for future hoists to run between main bedroom and bathroom? 	<p>Support of overhead tracking hoists</p> <p>Single bedroom wheelchair user with assistance of one person min 2900 x 3200mm Single bedroom wheelchair user with assistance of two carers min 2900 x 4200mm Double bedroom wheelchair user with assistance of one person min 3800 x 4100mm Double bedroom wheelchair user with assistance of two carers min 4100 x 4300mm</p>
<p>Operating doors:</p> <ul style="list-style-type: none"> ▪ door constructions suitable for subsequent fixing of pulls or other fittings? ▪ all doors have suitably positioned, easily operated handles, pulls, etc? ▪ inward opening doors to bathrooms/WC/showers openable in emergency from outside? ▪ any self-closing doors used are capable of independent operation by wheelchair user? 	<p>'D' handles and easy grip lever handles</p> <p>Opening force at leading edge no greater than 20 newtons</p>
<p>Operating windows:</p> <ul style="list-style-type: none"> ▪ opening and ventilation controls operable by wheelchair user (manual/geared/power)? ▪ Windows opening over paths do not create hazards? ▪ glazing line in living/dining/bedrooms no higher than 810mm above room floor level? ▪ full width transoms avoided in window areas below 1.5m above room floor level? ▪ full width transoms avoided in window areas below 1.5m above room floor level? 	<p>Optimum height from floor for handles is 900-1100mm without having to lean over anything</p>
<p>Controlling services:</p> <ul style="list-style-type: none"> ▪ suitable control of mains water stopcock, gas and electric main consumer units? ▪ suitable isolating valves to sink, washing machine, WC, etc.? ▪ flexible plumbing to adjustable fittings, where provided? ▪ low surface temperature radiators in restricted areas? ▪ suitable electrical and heating control fittings provided? ▪ Suitable provision of personal alarms and for smoke alarms? ▪ Suitable provision for future telephone and intruder alarm installation? 	<p>Accessible position and easy lever mechanisms</p>

Good practice checklist 1:

Setting local eligibility criteria for Supporting People funding

(1) What elements are you using to determine the eligibility of services for Supporting People funding?

- (a) Eligible and non-eligible tasks
- (b) Limit on number of hours of support per week
- (c) Limit on cost of support per hour
- (d) Limit on cost of support per week
- (e) Limit on overall cost of support
- (f) Limit on duration of support

(2) How transparent are your eligibility criteria?

- (a) Do provider organisations understand them?
- (b) Do tenants and support workers understand them?
- (c) Are they reviewed regularly?

(3) How do your existing eligibility criteria impact on existing and potential service users?

- (a) Are certain groups excluded from services?
- (b) Is extra support available, at least in the short term, to people moving into independent living for the first time?
- (c) Can levels of support be varied as individual support needs change over the lifecourse or in response to changes in personal circumstances?

(4) Do you encourage or discourage the use of 'mixed packages' of support and care?

- (a) Why?
- (b) What impact does this have on service users?
- (c) Which service users might benefit from mixed packages?

(5) Do you routinely check whether individuals carry a 'statutory duty' and are therefore entitled to receive funding from other sources?

Good practice checklist 2: Rights, responsibilities and tenancies

What types of tenancies (see Glossary) are issued to tenants with learning disabilities by your agency? Is a simplified/jargon-free version of the tenancy agreement available to tenants? Has someone gone through it with them?

- Does the simplified tenancy agreement explain the *rights* as well as the *responsibilities* that the agreement confers?
- Have support staff been given training on tenancy agreements and the implications these may have for the way in which they offer support and advice to tenants?
- Have the circumstances in which a tenancy might be terminated been made clear to all parties?
- Where people live in shared accommodation, what contingencies are in place to arbitrate if a serious disagreement arises *between* tenants?

Good practice checklist 3: Accessing housing

- Are people with learning disabilities supported to get their names on housing waiting lists of local councils and/or housing associations?
- Where choice-based lettings systems are in operation, are people with learning disabilities supported to take part?
- Where there are long waiting lists for social housing, are people with learning disabilities being supported to investigate the option of renting in the private sector?
- Is the option of home ownership being made available to people with learning disabilities supported in your area or agency?
- What frameworks for housing and support are available in your area or agency?
 - Individual tenancies?
 - Clustered tenancies?
 - Shared tenancies?
- Are individuals given an informed choice between these options?
- Are the likely advantages and disadvantages of each option explained to them, in a way that they can understand?

Good practice checklist 4: Providing the right support

- Is there a clear separation between housing and support in local provision, so that organisations do not act as both landlord and support provider to any individual?
- How are tenants supported to become more socially integrated in their local community? If local Supporting People interpretation precludes this, what additional funding could be drawn in?
- What training might staff need to maximise their ability to support tenants' social activities and involvement in local networks and activities?

Good practice checklist 5: Choice and control

- In which aspects of their lives can and do tenants supported by this agency make their own choices?
 - Are these areas in which tenants can make informed choices?
 - If not, what might they need to know to assist their decision making?
- What support is available to help tenants make important and/or difficult choices?
 - Self-advocacy?
 - Independent advocacy?

- Family and friends?
 - Care managers/social workers?
 - Accessible information?
- What aspects of tenants' lives in your area or agency remain under the control of others?
 - How could the balance be shifted towards giving tenants greater choice in important aspects of their lives, such as where and with whom they live?
 - How do you ensure that the views of tenants with learning disabilities are fed into the strategic planning of Supporting People services?

Good practice checklist 6: Risk

(1) Consider the various types of risk to which individuals may be exposed:

- physical risks
 - external/environmental (eg risk of falling down stairs)
 - internal/biological (eg risk of heart disease from poor diet)
- social risks
 - emotional/psychological (eg bullying, harassment)
 - sexual (ie sexual abuse)
- financial risks
 - acts of commission (eg money being stolen or otherwise misused)
 - acts of omission (eg tenants not informed of the benefits to which they may be entitled).

(2) Think about *who* may be at risk as a result of a particular action or inaction:

- tenant himself/herself
- other tenants or neighbours in same building
- support staff
- others living in the local community.

(3) Think about different timescales over which any risk might arise:

- immediate risk (eg fire, as a result of smoking in bed)
- long-term risk (eg damage to health as a result of lack of exercise).

(4) Balance what might happen if an individual decided to take a particular risk *against the consequences of not taking that risk*:

- likelihood of a negative outcome
- seriousness of the possible negative outcome
- duration of the possible negative outcome.

(5) When undertaking risk assessments, remember that such assessments:

- cannot (and should not aim to) eliminate risk
- do not (of themselves) make anything less risky
- should identify *all* dimensions of risk associated with a particular individual or activity
- can and should be used to enable, not prevent, risk-taking
- can provide *evidence* of staff meeting their 'duty of care'.

Good practice checklist 7: Tenants' finances

(1) Are all tenants receiving *all* of the benefits to which they are entitled?

(a) Whose job is it to do this?

- (b) How often do you check whether tenants' circumstances and entitlements have changed?
- (2) How are tenants supported to not only live within their financial means, but also to understand where their money comes from and where it is spent?
 - (a) Do tenants understand the amounts they pay for rent, household bills, Council Tax, television licence, etc?
 - (b) What training do staff receive in relation to supporting tenants to budget effectively (in particular, in how to explain financial matters to tenants)?
- (3) To what extent are tenants in control of their own finances?
 - (a) Do they have to get receipts for all monies spent? If so, why?
 - (b) Are they given support to save for more costly items or activities, should they wish to do so?
 - (c) Has the possibility of employment been fully explored – including explaining the financial implications?
- (4) How are tenants' social support costs met?
 - (a) Who pays the out-of-pocket expenses of support staff?
 - (b) How might tenants who are 'cash rich' but 'social support poor' be enabled to purchase social support hours?

Good practice checklist 8: Organisational finances/commissioning Considerations

- (1) How are the cost of 'voids' shared between the commissioning agency and the support provider organisation?
- (2) Do contracts allow for year-on-year cost uplifts that reflect the true cost of wage inflation and increases in non-staff costs?
- (3) What impact is the current balance of financial risk having on the willingness of support providers to develop new services?
- (4) How is the commissioning of housing-related support services linked, at a strategic level, with the development of bricks-and-mortar housing?

<http://www.jrf.org.uk/knowledge/findings/socialcare/2106.asp>