Identifying the need for specialist housing in Torbay

Torbay Council, September 2016

Contents

1. Introduction 3
2. National research- recommendations 4
3. Torbay population 7
   3.1 Households and people 7
   3.2 Deprivation 7
   3.3 Housing Type 8
4 Risk factors leading to the need for specialist housing 9
   4.1 An ageing population 9
   4.2 Homelessness 10
   4.3 Physical disability and mobility issues 11
   4.4 Falls 12
   4.5 Personal care needs 13
   4.6 Unpaid carers 14
   4.7 Illness/ disease 15
   4.8 Learning disability 19
   4.9 Mental health needs 19
   4.10 Substance misuse 20
5. Need and usage 21
   5.1 Social housing 21
   5.2 Extra care housing 32
   5.3 Care homes 32
   5.4 Intermediate care 33
   5.5 Delayed transfers of care 34
6 Supply and predicted demand 35
   6.1 Social housing 35
   6.2 Extra care housing, sheltered housing, care homes 38
7. Views of professionals relating to housing need 41
8. Future identification of housing need 46
9. Summary of main points 47
10. Recommendations 50

Appendix1: Housing and housing need/demand information held by public sector organisations 52

Appendix 2: Explanation of statistical significance 61

1. Introduction

The aim of this report is to identify the need for specialist housing in Torbay, focusing on the social housing sector.

Specialist housing as defined in this report is shown in the diagram below- at the top is the most intensive provision and at the bottom is the least intensive provision:

Nursing care homes **Residential care homes**	Offer care and support throughout the day and night. Staff help with washing, dressing, at meal times and with using the toilet. Nursing homes additionally offer 24-hour medical care from a qualified nurse.
Enhanced supported living	Delivers 24 hour care and support to people within shared accommodation, a single building or buildings within close proximity. The 24/7 staffing within their own accommodation enables people to live with a level of independence in the community which may be difficult to achieve within residential care. Additional care and support can be accessed for more individualised activities. The individual has the right to choose their preferred provider of 1:1 care and support which may be different from the provider of the shared accommodation based support and care.
Extra care housing	Combines care and support to maximise the independence of older people and other vulnerable people; this includes younger people with long term conditions requiring regular high levels of care and/or support. Extra care housing supports them to live independently for as long as possible in their own home within the community. It is intended to divert people away from residential/institutional care whilst taking into account whether an individual can manage to live in their own home independently appropriately supported. There is 24 hour staffing on site.
Enhanced sheltered housing	Reflects additional care and support needs of older residents in sheltered housing (but not high enough levels to require extra care housing).
Supported housing	Housing scheme where housing, support and sometimes care services are provided as an integrated package, to enable service users to live as independently as possible within their community. Service users are empowered to become socially included in the wider sense of community participation. The support provided varies and relates to the nature of the accommodation.
Sheltered housing	(Also known as retirement housing) is accommodation usually in a block, or on a small estate, where most of the other residents are older people (usually over 55). With a few exceptions, all developments provide independent, self-contained homes with their own front doors. Many schemes also have a manager or warden, who manage the scheme and help with housing related services.
General needs	This is social housing, not classed as specialist housing but is included in this report.

This report gathers information about the population, including need; demand based on services available; usage and supply of social and specialist housing. It includes the views of professionals on housing need, as well as estimates and predictions for future need. It includes a mapping exercise of data types currently collected in the public sector that relate to housing and housing need (Appendix 1), the gaps in data available, potential ways of obtaining this information, and both national and local recommendations for ongoing and future actions.

2. National research- recommendations

In summary: 'Potential ways to meet the changing demand for housing could involve providing suitable new homes, ensuring that the existing housing stock is appropriate and adaptable, and helping people to move to a home that is appropriate for their needs.'[1]

Below are recommendations from recent research relating to need for specialist housing- all tenures. Most of the research covered focuses on housing an ageing population. Please note that some of the definitions of housing types in this section may differ slightly from the rest of the report, depending on the author(s) of each document.

Existing housing

- Existing housing should be adapted to meet the needs of an ageing population. However it is stated that 'over half of the non-specialised housing stock is estimated to require structural alterations to provide suitable access for older people, and over a quarter of inaccessible homes are not adaptable at all.'[2]

Existing housing and new build

- In 2011 the Government's Lifetime Neighbourhoods agenda says that as the majority of older people live in general needs housing (90%) the focus needs to be on 'retrofitting accommodation, and in delivering housing related support services across existing neighbourhoods, as well as promoting a greater choice of housing options through new build.'[3] Literature states the importance of improved design and accessibility in mainstream housing.[4] [5]

New build

- New housing should be designed to meet the changing needs of people as they age. It is recommended[6] [7] that the Lifetime Homes standards be applied to all new homes to address future need. These standards are '16 design criteria that can be universally

[1] Future of an ageing population, Harper and Walport, Government Office for Science, Foresight, 2016, page 53
[2] As above, page 51
[3] Lifetime neighbourhoods, Bevan and Croucher, DCLG, December 2011, page 83
[4] Housing in Later Life, Oldman, Age UK, July 2014
[5] Future of an ageing population, Harper and Walport, Government Office for Science, Foresight, 2016
[6] Housing in Later Life, Oldman, Age UK, July 2014
[7] "A vision of care fit for the twenty-first century..." The commission on residential care, Demos, 2014

applied to new homes at minimal cost. Each design feature adds to the comfort and convenience of the home and supports the changing needs of individuals and families at different stages of life. Lifetime Homes are all about flexibility and adaptability'[8]. The Commission on Residential Care also say that at least 10% of new housing should be built to fully wheelchair accessible standards.

- 'Many older people will still want to continue living in mainstream homes, and therefore CIH/Housing LIN continue to call for new homes to be developed to higher energy efficiency and accessible standards, such as Lifetime Homes standards to increase the provision of affordable and accessible homes in the overall supply.'[9]

Downsizing

- It is felt that that older people are occupying housing designed for families.[10] [11] It was noted that attractive housing suitable for older people where they could maintain links to family, friends and the local community could encourage a move which would free up family homes.[12] Not enough of the right type of retirement housing that encourages downsizing is being built- many of the options are only available to a relatively small section of the older population (needs to be attractive, affordable and in the right location)[13]. Evidence suggests that downsizing is wanted by substantial numbers but no suitable properties found. A home should enable a good quality of life and be adaptable to suit health and care needs.[14]

Specialist and adapted housing

- More specialist and adapted housing is particularly likely to be needed due to an ageing population. One prediction suggests a 70% increase in demand in specialist housing by 2033, driven by higher numbers of older people with acute or chronic disabilities.[15] Another said that based on demographic trends, specialist housing will need to increase by between 35% and 75% to keep pace with demand.[16]

Housing with care

- Housing with care [includes entire spectrum of options from care homes to extra care villages and supported living apartments] needs to have a range of options available that can meet the variety of needs, outcomes and preferences of people who need it, and flexible enough for people whose support needs may increase over time.[17]

[8] www.lifetimehomes.org.uk/pages/lifetime-homes.html
[9] New approaches to housing for older people, CIH & Housing LIN, June 2014, page 3
[10] Future of an ageing population, Harper & Walport, Government Office for Science, Foresight, 2016, page 51
[11] New approaches to housing for older people, CIH & Housing LIN, June 2014, page 3
[12] Housing our Ageing Population, Plan for Implementation, All party parliamentary group on housing and care for older people, November 2012, page 10
[13] Housing in Later Life, Oldman, Age UK, July 2014, pages 2 and 28
[14] Future of an ageing population, Harper & Walport, Government Office for Science, Foresight, 2016, page 51
[15] As above, page 52
[16] Housing in Later Life, Oldman, Age UK, July 2014, page 28
[17] "A vision of care fit for the twenty-first century...", The Commission on residential care, Demos, 2014, pages 180-181

- As well as chronic undersupply of new retirement housing to satisfy demand, it is stated that there is a 'chronic imbalance between the supply of Housing with Care units [extra care, assisted living, very sheltered housing, close care] in the UK, and wealthier older people who fall outside of state funded support.' It is calculated that 75% of over 65s fall into the mid to high end of the wealth spectrum (i.e. they have more than £150,000 in wealth) whereas 75% of current supply of housing with care is aimed at the affordable sector and 25% catering to the mid to high end market. The majority of additional housing with care units required will need to target those in the mid to high end parts of the market to match future wealth profile of the over 65s.[18]
- There are higher levels of retired people living in housing with care [extra care, assisted living, very sheltered housing, close care] in countries such as the USA and Australia- over 5% of over 65s compared to 0.6% in the UK.[19]

Extra care and sheltered housing

- 'There is currently no one agreed mechanism for estimating future needs amongst local populations for extra care housing in England and Wales. The most widely recognised tool in recent times for estimating how many units of extra care are required for local populations is the SHOP@ tool (Strategic Housing for Older People Analysis Tool).'[20] This is used for Torbay in Section 6.2.1 of this report.
- Some local authorities are seeking private sector investment to meet local needs such as Sunderland (Seafarers Way model to provide extra care scheme for dementia- new build element was 100% privately funded) and Newcastle (selling local authority owned site for development of extra care housing- McCarthy and Stone).[21]
- 'Where possible sheltered and extra care housing should act as hubs for the development of peripatetic home support services that reach out to all older people in local neighbourhoods.'[22]

Supported housing

- 'In 2015/16, there is a shortfall of 15,600 available places in supported housing for people of working age [in England], representing over 14% of existing supply. In four years this is expected to grow to a shortfall of almost 30,000 available places.'[23]

Care homes

- Demand for care homes will increase, as the numbers of older people with complex needs (who may not be adequately supported by domiciliary care) rises. The people living in care homes are likely to be older, with more complex needs, than previously.[24]

[18] Retirement living: where is the opportunity?, JLL, November 2015
[19] As above, page 3
[20] Extra care housing- what is it in 2015? Factsheet 1, Riseborough, Fletcher and Gillie**,** Housing LIN, page 11
[21] As above, page 12
[22] Housing in Later Life, Oldman, Age UK, July 2014, page 4
[23] Supported housing: Understanding need and supply, National Housing Federation, 2016, page 2
[24] "A vision of care fit for the twenty-first century...", The Commission for residential care, Demos, 2014, pages 109-110

3. Torbay population

3.1 Households and people

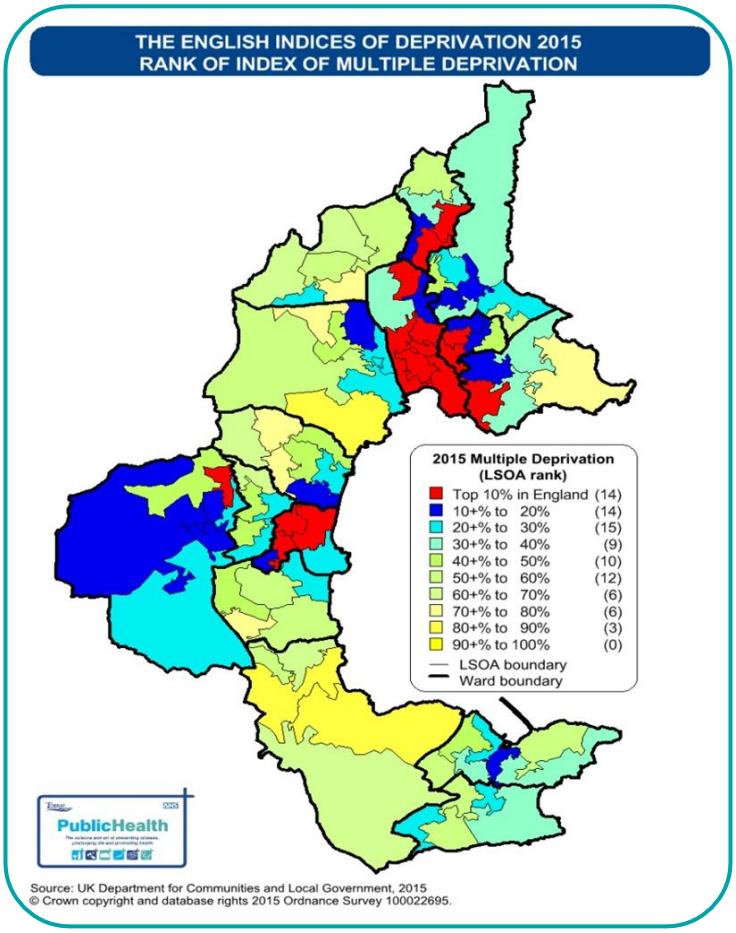
Table 1. Population and households within each town

Town	Number of households	Number of people	% of households within each town
Torquay	29,510	65,245	50%
Paignton	21,764	49,021	37%
Brixham	7,736	16,693	13%
Total in Torbay	**59,010**	**130,959**	

Source: 2011 census, www.nomisweb.co.uk

3.2 Deprivation

Figure 1



The Indices of Multiple Deprivation, 2015, ranks every small area in England and every local authority.

- Torbay is identified as the most deprived district local authority in the South West

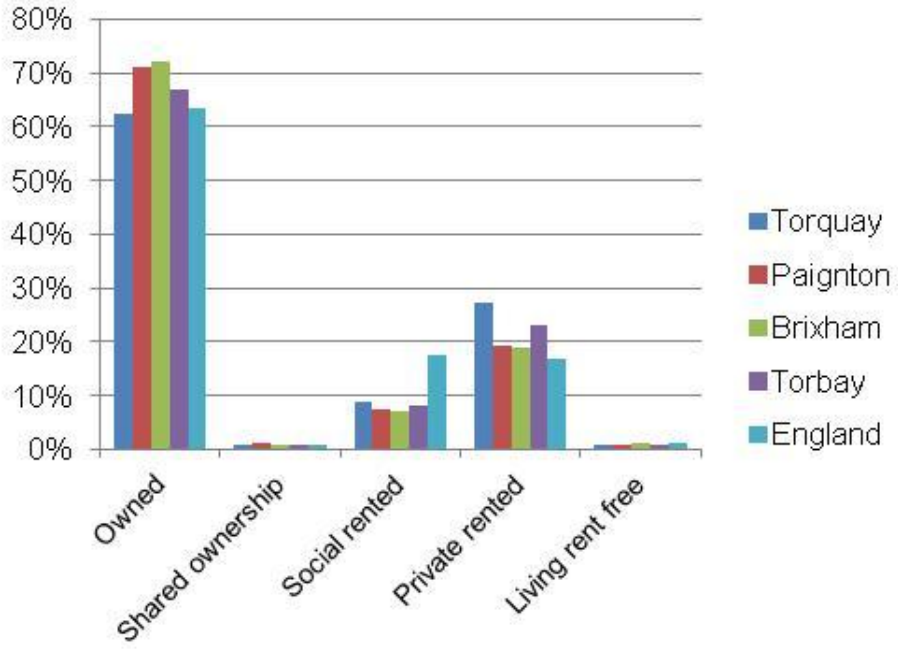
- Levels of relative deprivation have increased in Torbay, since 2010

- The number of residents living in the top 20% most deprived areas in England number approximately 42,000 in 2015, compared to approximately 24,700 in 2010

3.3 Housing Type

The census shows that there is a higher proportion of flats, maisonettes, apartments, and bedsits in Torquay than in Paignton, Brixham or England, whereas Torquay has a much lower proportion of detached or semi-detached houses than these areas.

Figure 2. Tenure of households in each geographical area



Source: 2011 census, www.nomisweb.co.uk

Figure 2 above shows that there is a:

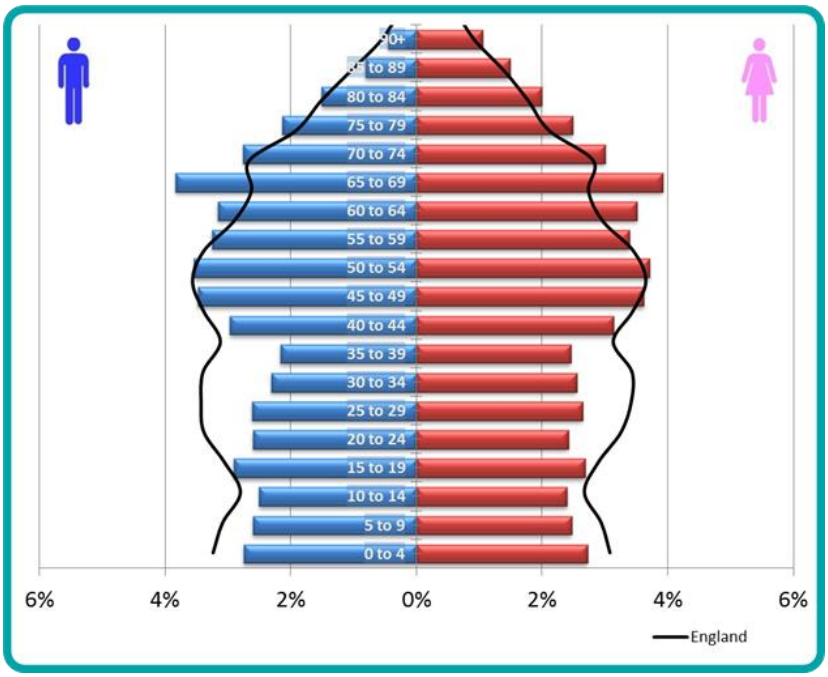
- Higher percentage of home ownership in Paignton and Brixham compared with England
- Considerably lower percentage of social rented housing in all three towns
- Considerably higher percentage of private rented housing in Torbay compared to England, particularly in Torquay

4 Risk factors leading to the need for specialist housing

Risk factors that lead people to use specialist housing are listed below with data relating to these. This is not an exhaustive list of risk factors.

4.1 An ageing population

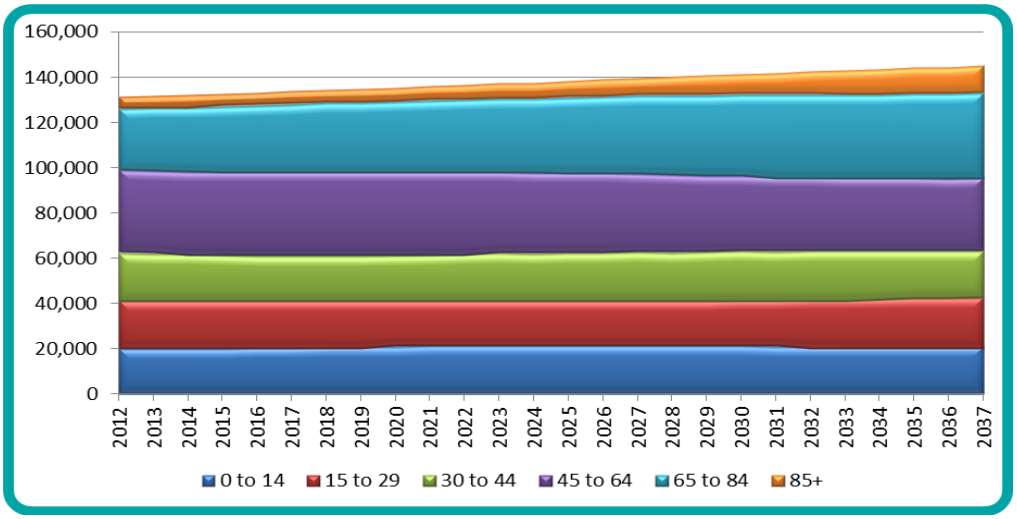
Figure 3: Population pyramid for Torbay compared to England – 2014 (ONS mid-year resident population)



The solid bars on the chart represent the Torbay population. Each bar shows each age group split by gender. Each bar shows the proportion of the total population in that age group and gender. This is compared to England which is shown by the black line.

An ageing population: Torbay has a higher percentage of both men and women aged 60 and over and a much lower percentage of the population in the younger age groups compared with England**.** This could potentially mean that more services are required to support those aged 60 years and over.

Figure 4: Estimates of the age of the future population in Torbay- up to 2037



Source: 2012 based subnational population projections, Office of National Statistics

Overall there is expected to be an increase in Torbay's resident population, most noticeably those aged 65 and over and those aged 85 years and over. The population is projected to rise from 132,200 in the year 2014 to 145,200 in 2037.

Table 2. Percentage of people aged over 65 years living alone (2011)

Area	% aged over 65 years living alone	Statistical significance*
Torbay	31.1%	Not significant
South Devon and Torbay Clinical Commissioning Group (CCG)	30.3%	Significantly lower
England	31.2%	

Source: www.southdevonandtorbay.info, 2011 Census; *Explanation in Appendix 2

Proportions of people aged over 65 living alone in Torbay is not significantly different compared to the England average, whereas the CCG is significantly lower compared with England.

'Social isolation and loneliness have a detrimental effect on health and wellbeing. Studies show that being lonely or isolated can impact on blood pressure, and is closely linked to depression. Older people are particularly vulnerable to social isolation and loneliness owing to loss of friends and family, mobility or low income.' [25]

4.2 Homelessness

Households can make an application for homeless assistance to the Local Authority. The Authority then investigates their situation to determine what duty, if any, is owed to them. To be owed the 'Full Housing Duty' applicants need to be eligible for assistance, in priority need for accommodation and homeless unintentionally.

Table 3: Households accepted as owed the full housing duty, Torbay

	Couple with dependent children*		Lone parent with dependent children*		One person household		All other household groups		
Year	Number	%	Number	%	Number	%	Number	%	Total
2013/14	5-9	9-16%	23	41%	26	46%	Under 5	Under 8%	**56**
2014/15	5-9	8-14%	24	37%	32	49%	Under 5	Under7%	**65**
2015/16	7	12%	13	22%	33	57%	5	9%	**58**

Source: Housing Options Service, Torbay Council, Government P1E returns

* Please note that these categories include expectant mothers with no other dependent children

Table 3 shows the household type of households accepted as owed the full housing duty. In 2015/16 over half are one person households.

[25] Joint Strategic Needs Assessment- JSNA, Ageing and Dying Well, page 2

4.3 Physical disability and mobility issues

Table 4: People with a disability that limits day to day activities

Area	People with disability that limited day to day activities	
	Limited a lot	Limited in some way
Torquay	11%	23%
Paignton	12%	25%
Brixham	13%	26%
Torbay	12%	24%
England	8%	18%

Source: 2011 census, www.nomisweb.co.uk

This shows that Torbay has a higher proportion of people self reporting in the census that their day to day activities were limited by a disability/health issue compared to England. Further analysis (age standardisation) shows that this is not due to age, even though there is a higher proportion of older people living in Torbay. A possible explanation could be the higher prevalence of diagnosed long term conditions in the population compared with England, based on GP practice data.

In section 5.1.1, data from the Devon Home Choice social housing register records the mobility needs of applicants. It shows that on 9 June 2016 28% (573) households on the register who wanted to live in Torbay had a mobility need.

In section 5.1.3, data on new social housing lettings in 2014/15 demonstrates requirements for fully wheelchair accessible housing or access to essential rooms, requirement for level access housing, and other disability related requirements: 18% of households entering general needs properties and 17% of households entering affordable rent general needs properties were known to have some kind of disability requirement.

A research paper made an estimation of the number of wheelchair users in local authorities[26]. Using a similar methodology it has been estimated that Torbay had approximately 2,875 wheelchair users in 2014. The paper says 'Despite its numerous flaws, the dataset presented here is the only publicly available study of this type. Further studies will need to be conducted and made available to the public in order to further verify these figures.'

Torbay Council Housing Options Service report that there are currently a small number (under 5) of wheelchair users in temporary accommodation who are aged under 55. It is a struggle to find accommodation for younger wheelchair users.

[26] Perry F.C, Stand up and be counted: An attempt to estimate the number of wheelchair users within the areas used by the 2011 census

Table 5: Torbay- Number of people aged 65 and over predicted to be unable to manage at least one mobility activity on their own, projected to 2030

Year	2014	2015	2020	2025	2030	% Change
Number aged 65 and over	6,400	6,478	7,188	8,133	9,273	44.9%

Source: www.poppi.org.uk (Projecting Older People Population Information System), prevalence rates have been applied to ONS population projections

Activities in Table 5 include: going out of doors and walking down the road; getting up and down stairs; getting around the house on the level; getting to the toilet; getting in and out of bed. The table predicts an increase, which would mean more need for services, due to the predicted increase in the older population in the coming years.

Table 6: Torbay- Number of people aged 18-64 predicted to have a moderate or serious physical disability, projected to 2030

Year	2014	2015	2020	2025	2030	% Change
Number aged 18-64 - Moderate physical disability	6,192	6,198	6,260	6,220	5,985	-3.34%
Number aged 18-64- Serious physical disability	1,897	1,900	1,942	1,953	1,867	-1.58%

Source: www.pansi.org.uk (Projecting Adult Needs and Service Information), prevalence rates have been applied to ONS population projections

Table 6 predicts an increase in moderate or serious physical disability initially and then a decrease by 2030.

The Commission on Residential Care states that 'Disabled people, many who might have died in childhood just 20 years ago, are living longer – into adulthood and with a desire to live independent lives.'[27] They say this will include demand for supported housing options and other types of housing with support for different levels of need.

4.4 Falls

Table 7: Torbay- Number of people aged 65 and over predicted to have a fall, projected to 2030

Year	2014	2015	2020	2025	2030	% Change
Number aged 65 and over	9,110	9,246	10,124	11,238	12,689	39.3%

Source: www.poppi.org.uk, prevalence rates have been applied to ONS population projections

[27] "A vision of care fit for the twenty-first century..." The commission on residential care, Demos, 2014, page 23

Table 8: Torbay- Number of people aged 65 and over predicted to be admitted to hospital as a result of falls, projected to 2030

Year	2014	2015	2020	2025	2030	% Change
Number aged 65 and over	712	722	819	959	1,057	48.5%

Source: www.poppi.org.uk, prevalence rates have been applied to ONS population projections

Tables 7 and 8 predict an increase over the years, potentially due to the predicted increase in the older population.

'There is growing evidence of the impact of impaired vision on falls. The evidence suggests that older adults with Age-related macular degeneration had a higher incidence of falls and injuries. Almost half (47 per cent) of all falls in the population with visual impairment were directly attributable to their visual impairment.'[28] Table 22 in the section on long term conditions predicts an increase in visual impairment amongst those aged 65 and over and a decrease in severe visual impairment in those aged 18-64 in Torbay.

4.5 Personal care needs

Table 9: Torbay- Number of people aged 18-64 predicted to have a moderate or serious personal care disability, projected to 2030

Year	2014	2015	2020	2025	2030	% Change
Number aged 18-64- Moderate personal care disability	3,124	3,128	3,187	3,189	3,045	-2.5
Number aged 18-64- Serious personal care disability	683	683	691	686	660	-3.4%
Total aged 18-64- Moderate or serious personal care disability	**3,807**	**3,812**	**3,878**	**3,876**	**3,704**	**-2.7%**

Source: www.pansi.org.uk, prevalence rates have been applied to ONS population projections. Figures may not sum due to rounding

This table is based on adults with physical disabilities requiring personal care. This includes: getting in and out of bed, getting in and out of a chair, dressing, washing, feeding, and use of the toilet. A moderate personal care disability means the task can be performed with some difficulty; a severe personal care disability means that the task requires someone else to help.

Table 9 predicts little change in this age range until 2025, and then a decrease by 2030.

[28] JSNA, Ageing and dying well, page 48

Table 10: Torbay- Number of people aged 65 and over predicted to be unable to manage at least one self-care activity on their own, projected to 2030

Year	2014	2015	2020	2025	2030	% Change
Number aged 65 and over	11,533	11,690	12,871	14,504	16,347	41.7%

Source: www.poppi.org.uk, prevalence rates have been applied to ONS population projections

Activities in Table 10 include: bathe, shower or wash all over, dress and undress, wash their face and hands, feed, cut their toenails, and take medicines. Table 10 predicts an increase.

4.6 Unpaid carers

The census shows that across Torbay as a whole there are higher proportions of people of all ages self reporting that they provide unpaid care compared with England.[29]

'Isolation is a particular issue for carers with loss of employment, social contact and activity resulting from long term caring. Loss of confidence leads to low self-esteem and a cycle of exclusion.'[30]

'Using the Census (2011) estimate of young unpaid carers under 25 years and including claimants of carers allowance aged 18 to 24 years of age (2011); it is estimated that there were around 1,170 young carers in Torbay in 2011. (Census figures are widely believed to under report the true prevalence of young unpaid carers as it asks parents as opposed to children to complete). This equates to approximately 35 young carers per 1,000 young persons aged less than 25 years – significantly higher than the England average. ... Compared to England, over half of the wards of Torbay had significantly more young unpaid carers who also provided more intensive levels of support.'[31]

'As the population ages, and people with disability and serious illness live longer, they are more likely to live at home. Going forward, we might expect community based care to rely increasingly on family and community members as carers.'[32]

Table 11: Percentage of people aged over 65 years providing unpaid care (2011)

Area	% aged over 65 years providing unpaid care	*Statistical significance
Torbay	15.1%	Significantly higher
South Devon and Torbay CCG	14.8%	Significantly higher
England	13.8%	

Source: www.southdevonandtorbay.info, 2011 census, *Explanation in Appendix 2

Torbay and the CCG has a signifcantly higher proportion aged over 65 providing unpaid care compared with England.

[29] JSNA, Living and Working Well, page 59
[30] JSNA, Ageing and dying well, page 30
[31] Draft Children and Young People's Needs Assessment, Torbay Council, 2016, page 7
[32] JSNA, Ageing and dying Well, page 2

4.7 Illness/ disease

4.7.1 Premature/preventable mortality

Table 12: Mortality from causes considered preventable (2012-2014)

Area	Rate per 100,000 population	*Statistical significance
Torbay	189.4	Not significant
South Devon and Torbay CCG	171.5	Significantly lower
England	182.7	

Source: http://healthierlives.phe.org.uk/topic/mortality, Rate is directly age standardised rate, *Explanation in Appendix 2

The basic concept of preventable mortality is that deaths are considered preventable if, in the light of the understanding of the determinants of health at the time of death, all or most deaths from the underlying cause (subject to age limits if appropriate) could potentially be avoided by public health interventions in the broadest sense.

Table 12 shows that when Torbay is compared with England then the difference is not statistically significant, but the CCG has significantly lower preventable mortality when compared with England.

Table 13: Premature all-cause mortality (2012-2014)

Area	Rate per 100,000 aged under 75 years	*Statistical significance
Torbay	350.7	Not significant
South Devon and Torbay CCG	322.2	Significantly lower
England	337.1	

Source: Primary care mortality data (PCMD), Rate is directly age standardised rate, *Explanation in Appendix 2

Premature mortality rates in Torbay are not significantly different compared with England, but the CCG has significantly lower premature mortality when compared with England.

'The causes of premature mortality fall disproportionately on the poorest in society.'[33]

4.7.2 Emergency activity

Table 14: Ambulance activity- See and Convey to urgent care (2013/14)

Area	Rate per 10,000 population	*Statistical significance
Torbay	1056	Significantly higher
South Devon and Torbay CCG	927	

Source: www.southdevonandtorbay.info, Rate is directly age standardised rate, *Explanation in Appendix 2

[33] JSNA, Ageing and Dying Well, page 2

See and convey is 'where the patient requires conveyance in an ambulance, this could be to an accident and emergency department, or to another treatment facility.'[34] The rate in Torbay is significantly higher than the CCG rate.

Table 15: Non-elective emergency admissions (2011/12-2013/14)

Area	Rate per 10,000 population	*Statistical significance
Torbay	971	Significantly higher
South Devon and Torbay CCG	909	

Source: www.southdevonandtorbay.info, Rate is directly age standardised rate, *Explanation in Appendix 2

'Non-elective admissions (emergency admissions) are where patients require attention at short notice and stay one or more nights. This could be for specific acute conditions such as heart attacks, or the results of unintentional or deliberate injuries. Non-elective admissions also include maternity data within.'[35] The rate in Torbay is significantly higher compared with the CCG area.

4.7.3 Long term conditions

'Long term conditions are those that, at present, cannot be cured but can be managed through treatment and behaviour. These include conditions such as heart disease, diabetes and mental health problems.'[36]

'Half of people aged over 60 in England have a long term condition. With an ageing population and the growth of health harming behaviours such as physical inactivity, harmful alcohol consumption and smoking, we would expect the prevalence of long term conditions to rise. The number of people with comorbidities (more than one morbidity) is expected to rise by a third in the next ten years.'[37]

'There are estimated to be thousands of people living with a long term condition but who aren't known to, or managed by their GP across South Devon and Torbay.'[38]

People with a long term condition are the most frequent users of health care services.[39]

There is a higher prevalence of diagnosed long term conditions in the Torbay population compared with England, based on GP practice data.

Predictions for future numbers of people with some long term conditions are below:

[34] JSNA, Ageing and Dying Well, page 53
[35] JSNA, Ageing and Dying Well, page 54
[36] JSNA, Ageing and dying well, page 30
[37] JSNA, Ageing and Dying Well, page 30
[38] JSNA, Living and Working Well, page 2
[39] JSNA, Living and Working Well, page 2

Table 16: Torbay- Number of people predicted to have a longstanding health condition caused by a stroke, predicted to 2030

Year	2014	2015	2020	2025	2030	% Change
Number aged 18-64	255	256	255	247	235	-7.8%
Number aged 65 and over	783	797	875	980	1085	38.6%
Total aged 18 and over	**1,038**	**1,053**	**1,130**	**1,227**	**1,319**	**27.1%**

Source: www.pansi.org.uk and www.poppi.org.uk , prevalence rates have been applied to ONS population projections. Figures may not sum due to rounding

Table 17: Torbay- Number of people predicted to have Type 1 or Type 2 diabetes, projected to 2030

Year	2014	2015	2020	2025	2030	% Change
Number aged 18-64	2,668	2,672	2,697	2,680	2,561	-4.0%
Number aged 65 and over	4,184	4,287	4,610	5,030	5,566	33.0%
Total aged 18 and over	**6,851**	**6,960**	**7,307**	**7,709**	**8,127**	**18.6%**

Source: www.pansi.org.uk and www.poppi.org.uk , prevalence rates have been applied to ONS population projections. Figures may not sum due to rounding

Table 18: Torbay- People aged 65 and over predicted to have dementia, projected to 2030

Year	2014	2015	2020	2025	2030	% Change
Number aged 65 and over	2,507	2,572	2,885	3,376	3,962	58.0%

Source: www.poppi.org.uk, prevalence rates have been applied to ONS population projections

Table 19: Torbay- People aged 65 and over predicted to have a longstanding health condition caused by a heart attack, projected to 2030

Year	2014	2015	2020	2025	2030	% Change
Number aged 65 and over	1,657	1,686	1,830	2,025	2,240	35.2%

Source: www.poppi.org.uk , prevalence rates have been applied to ONS population projections

Table 20: Torbay- People aged 65 and over predicted to have a longstanding health condition caused by bronchitis and emphysema, projected to 2030

Year	2014	2015	2020	2025	2030	% Change
Number aged 65 and over	570	580	629	691	765	34.2%

Source: www.poppi.org.uk, prevalence rates have been applied to ONS population projections

Table 21: Torbay- People aged 65 and over predicted to be obese or morbidly obese, projected to 2030

Year	2014	2015	2020	2025	2030	% Change
Number aged 65 and over with a BMI (Body Mass Index) of 30 or more	8,726	8,893	9,407	10,113	11,051	26.6%

Source: www.poppi.org.uk, prevalence rates have been applied to ONS population projections

Table 22: Torbay- People predicted to have a serious visual impairment (aged 18-64), a moderate or severe visual impairment (aged 65+), and registrable eye conditions (aged 75+), projected to 2030

Year	2014	2015	2020	2025	2030	% Change
Number aged 18-64- serious visual impairment	48	48	47	47	46	-4.2%
Number aged 65 and over- moderate or severe visual impairment	2,981	3,023	3,342	3,798	4,208	41.2%
Number aged 75 and over- registrable eye conditions	1,024	1,037	1,190	1,440	1,594	55.7%

Source: www.poppi.org.uk and www.pansi.org.uk , prevalence rates have been applied to ONS population projections

Table 23: Torbay- People predicted to have a moderate or severe, or profound, hearing impairment, projected to 2030

Year	2014	2015	2020	2025	2030	% Change
Number aged 18 and over- moderate or severe hearing impairment	17,947	18,156	19,927	22,591	24,601	37.1%
Number aged 18 and over- profound hearing impairment	434	437	480	544	627	44.5%

Source: www.poppi.org.uk, prevalence rates have been applied to ONS population projections

In general the tables above show that the number with these long term conditions in the 18-64 age range is predicted to decrease whereas the 64 years and over age range is predicted to increase by 2030.

4.8 Learning disability

Table 24: Torbay- Number of people predicted to have a learning disability, projected to 2030

Age range	2014	2015	2020	2025	2030	% Change
18-24	257	257	235	223	247	-3.9%
25-34	336	339	356	351	331	-1.5%
35-44	349	336	323	343	359	2.9%
45-54	441	442	407	355	344	-22.0%
55-64	397	401	441	465	431	8.6%
65-74	383	390	404	390	433	13.1%
75-84	214	218	252	310	322	50.5%
85 and over	101	101	117	142	177	75.3%
Total	**2,477**	**2,485**	**2,534**	**2,580**	**2,645**	**6.8%**

Source: www.pansi.org.uk , prevalence rates have been applied to ONS population projections

4.9 Mental health needs

Table 25: Torbay- People aged 18-64 predicted to have a mental health problem, projected to 2030

Year	2014	2015	2020	2025	2030	% Change
Common mental disorder	11,927	11,893	11,759	11,655	11,383	-4.6%
Borderline personality disorder	334	333	329	326	319	-4.5%
Antisocial personality disorder	254	255	251	249	245	-3.5%
Psychotic disorder	297	296	292	290	283	-4.7%
Two or more psychiatric disorders	5,312	5,303	5,239	5,195	5,079	-4.4%

Source: www.pansi.org.uk, , prevalence rates have been applied to ONS population projections

Table 25 shows a predicted decrease.

'The percentage of the GP registered population on the mental health register (2014/15) is higher in Torbay at 1.11% compared with 0.88% in England.'[40]

'Depression is the most common mental health problem of later life, affecting 10–20 per cent of older people (National Institute for Mental Health in England) and up to 40 per cent of care home residents. However, in older people depression is often under-diagnosed and undertreated.'[41]

'Children and young people with poor mental health are more likely to have poor educational attainment and employment prospects, social relationship difficulties, physical ill health and substance misuse problems and to become involved in offending.'[42]

[40] A Market Position Statement for Adult Social Care and Support and Children's Services in Torbay 2016+, page 14
[41] JSNA, Ageing and dying well, page 21
[42] Draft Children's and Young People's Needs Assessment, Torbay Council, 2016, page 4

The rate of hospital admissions for mental health conditions for 0-17 year olds in 2014/15 (crude rate per 100,000 aged 0-17 years) is significantly worse than the England average.[43]

'A key priority to come out of the OFSTED improvement plan [for Children's Services in Torbay] is to work with partners to ensure that timely and effective services are in place, particularly in relation to domestic abuse, adult mental health and Child and Adolescent Mental Health Services (CAMHS) and the emergency duty service.'[44]

4.10 Substance misuse

The rate of alcohol admission episodes for alcohol-related conditions[45] (2014/15) in Torbay (770 per 100,000 population, all ages, directly age standardised rate) is worse than the rate for England (641).[46]

Regarding children and young people specifically- hospital admissions due to alcohol specific conditions (2011/12-2013/14, crude rate per 100,000 under 18 year olds) are significantly higher in Torbay than the England average as is the rate of hospital admissions for substance misuse (2012/13-2014/15, directly standardised rate per 100,000 15-24 year olds).[47]

'Although alcohol abuse is a problem for people of all ages, it is more likely to go unrecognised among older people. Reasons for alcohol abuse in older age include bereavement and other losses, loneliness, physical ill health, disability and pain, loss of independence, boredom and depression, which is also linked to the other factors.'[48]

Table 26: Torbay- People aged 18-64 predicted to have a drug or alcohol problem, projected to 2030

	2014	2015	2020	2025	2030	% Change
Aged 18-64 predicted to have alcohol dependence	4,376	4,384	4,321	4,291	4,206	-3.9%
Aged 18-64 predicted to be dependent on drugs	2,487	2,489	2,455	2,437	2,387	-4.0%

Source: www.pansi.org.uk, prevalence rates have been applied to ONS population projections

Table 26 shows a predicted decrease in this age group

[43] Torbay Child Health Profile March 2016, www.chimat.org.uk
[44] Draft Children's and Young People's Needs Assessment, Torbay Council, 2016, page 4
[45] Hospital admissions for alcohol-related conditions (narrow definition): Primary diagnosis is an alcohol attributable code or a secondary diagnosis is an alcohol- attributable external cause code
[46] Public Health Outcomes Framework, www.phoutcomes.info
[47] Torbay Child Health Profile March 2016, www.chimat.org.uk
[48] JSNA, Ageing and dying well, page 20

5. Need and usage

5.1 Social housing

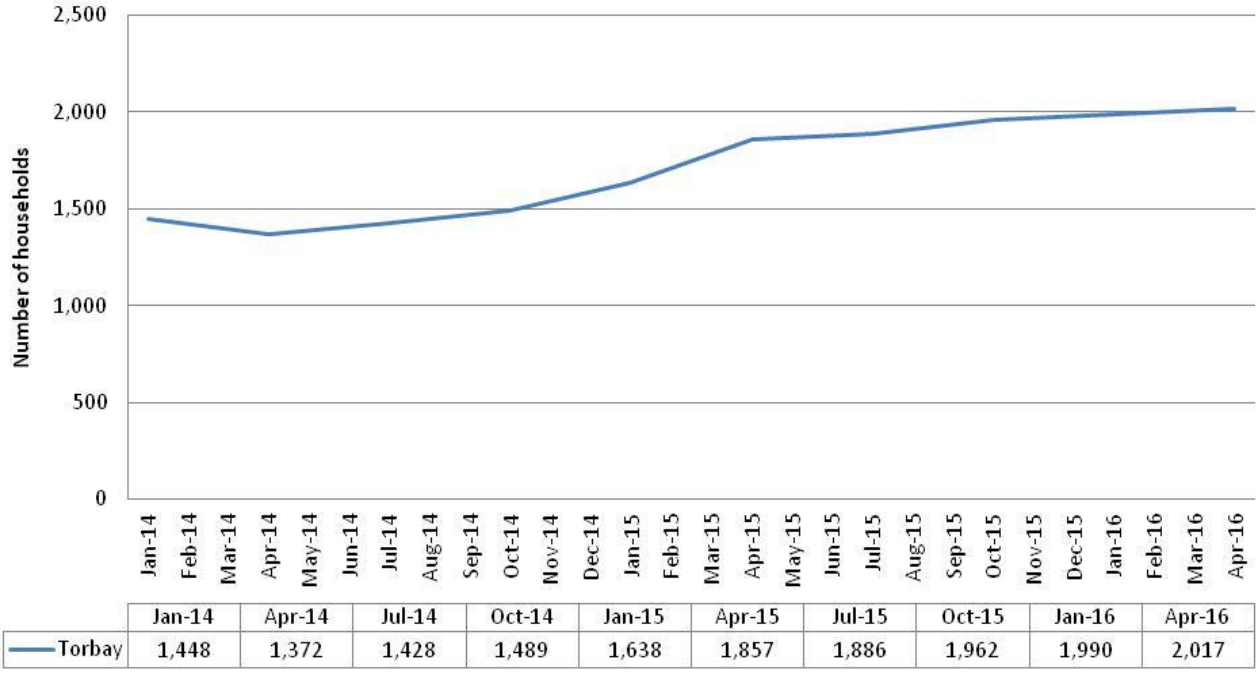
5.1.1 Applicants on the Torbay social housing register

Council and housing association homes available to rent are advertised through Devon Home Choice. Applicants can look for and apply for social housing within all local authority areas within Devon.

Applicants are assessed and given a band A-D, depending on housing need and placed on the housing register. Once on the housing register applicants can bid for properties they are interested in. In 2011 the Localism Act allowed Councils to restrict access to their housing registers. In May 2014 Torbay and other areas removed a fifth band- E (no housing need) from the register.

The information in this section relates to households on the Torbay housing register, so applicants who have stated a wish to live in Torbay. It analyses the register at a single point in time- 9 June 2016.

Figure 5: Number of applicant households on the Torbay housing register within Bands A-D of housing need



	Jan-14	Apr-14	Jul-14	Oct-14	Jan-15	Apr-15	Jul-15	Oct-15	Jan-16	Apr-16
Torbay	1,448	1,372	1,428	1,489	1,638	1,857	1,886	1,962	1,990	2,017

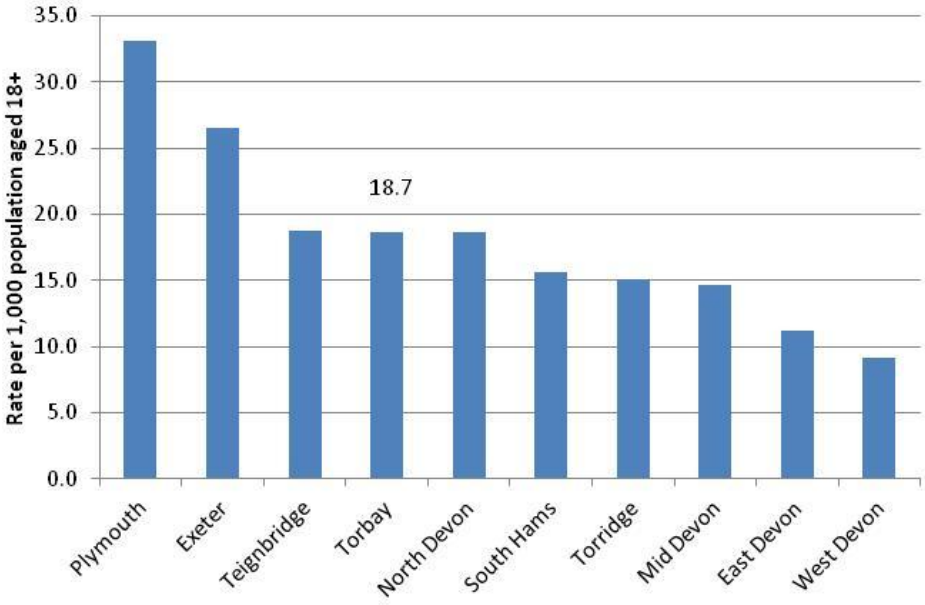
Source: Devon Home Choice, Quarterly monitoring report, April 2016, www.devonhomechoice.com, as on first of each month or closest date available

Figure 5 shows that the number on the Torbay register (within bands A-D) is increasing, a similar trend to most local authorities in Devon. Following a change of computer system in

June 2014 the number of applications increased whilst a process to remove out of date applications is developed. Once in place it is anticipated that numbers on the register will start to fall as old applications are removed.

The greatest need across all Local Authority areas across Devon as at April 2016 was for one bedroom properties.[49]

Figure 6: Number of people on social housing register in Bands A-D per 1,000 of the population aged 18+, April 2016



Source: Devon Home Choice , ONS mid-2014 population estimates

Figure 6 above shows that Torbay has a rate of 18.7 aged 18+ on the housing register per 1,000 of the population. Out of Devon local authorities, Plymouth has the highest rate (33.1) and West Devon has the lowest (9.1).

[49] DHC quarterly monitoring report, April 2016

Table 27: Number of applicant households on the Torbay register, 9 June 2016

Number of bedrooms needed	Band of housing need of applicant households					
	Band A (Emergency need)	**Band B (High need)**	**Band C (Medium need)**	**Band D (Low need)**	**Band E (No need)**	**Total**
1 bedroom		192	166	781		**1141**
2 bedrooms		80	161	292		**533**
3 bedrooms		25	111	89		**227**
4 bedrooms		21	58	23		**102**
5 bedrooms or more		22	9	9		**40**
Total	**Under 5**	**340**	**505**	**1194**	**Under 5**	**2043**

Source: Devon Home Choice

The largest number of applicants (781) have been placed in band D (low housing need) with a requirement for one bedroom, 629 of these live in Torbay. Table 31 in section 5.1.2 shows, however, that the highest proportion of lettings in 2015/16 (48%) were of two bedroom properties.

Since May 2014 Torbay has no longer been allowing applicants who would be in band E (No housing need) on the housing register. The small number in band E in the table above will be cases which are awaiting review and will be either re-banded or closed.

Reasons for banding- Table 28 below shows some of the reasons for applicant households being categorised in Bands A-D on the register. There are other reasons for banding not included in the table. These are:

- Fleeing violence
- Social need or support delivery of another service
- Effective management of social housing within Devon
- Children under 8 above the 3rd floor
- Moves for work
- Shared facilities
- Notice to quit

Table 28: Reasons for banding

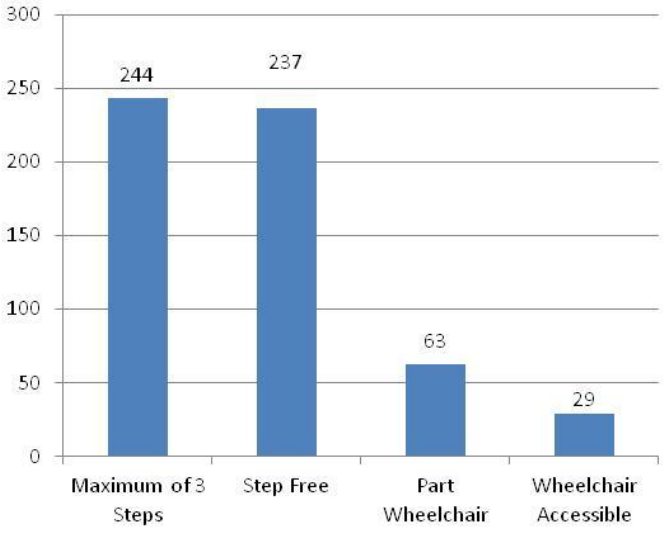
A selection of reasons for banding	Number of applicant households	% of applicant households
Lacking 1 bedroom	508	25%
Low health and wellbeing need	337	16%
Medium health and wellbeing need	243	12%
Under occupying tenant	159	8%
Severe overcrowding	112	5%
No permanent home	92	5%
Ready for move on from supported accommodation within Devon	49	2%
High health and wellbeing need	43	2%
Prevention Of Homelessness Applicants Within Devon	20	1%
Statutorily homeless households	16	1%
Member of armed forces in housing need	16	1%
High disrepair	Under 5	
Urgent health and wellbeing need	Under 5	
Emergency disrepair	0	0%

Source: Devon Home Choice, Under 5- number suppressed due to data confidentiality

These figures do not sum as households may be given more than one reason for banding or some may have none of the needs recorded in this table.

The main reason for banding in the table above is 'lacking 1 bedroom' followed by 'low health and wellbeing need'.

Figure 7: Mobility needs of households for a property



The total number of applicant households with a mobility need was 573 out of 2,043 (28%) on the register, 484 of these were resident in Torbay.

- 71% of households on the register with a mobility need required one bedroom
- 20% required two bedrooms
- The highest need was for one bedroom step free properties at 179

Source: Devon Home Choice, 9 June 2016

Table 29: Number of bedrooms required by households with mobility needs relating to wheelchair use

Number of bedrooms needed	Part Wheelchair	Wheelchair accessible
1 bedroom	38	16
2 bedrooms	14	-
3 bedrooms	6	6
4 bedrooms or more	5	Under 5
Total	**63**	**29**

Source: Devon Home Choice, Under 5- number suppressed due to data confidentiality, '-' number suppressed so low number cannot be calculated

The majority of households in the above table require one bedroom properties.

Table 30: Disability needs of applicant households

Disability/health issue	Number of households	% of households on the register
Physical disability	699	34%
Mental illness	443	22%
Other	326	16%
Learning disability	172	8%
Hearing impairment	157	8%
Visual impairment	109	5%
Speech impairment	50	2%
Autism	49	2%
Total with disability/health need	**1,133**	**55%**

Source: Devon Home Choice

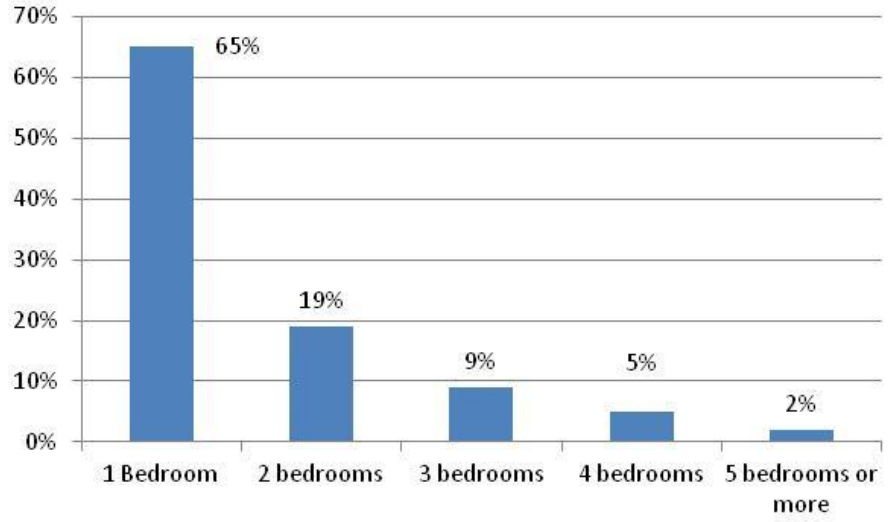
There are duplicates between rows in table 30 above where households identify themselves with more than one health issue/ disability.

Applicant households are asked on the application form if they identify themselves with a disability. The form says: 'Disability can be described as any long-term illness, health problem or disability which limits your daily activities or the work you can do, including problems that are due to old age.' Table 30 are self reported figures and not all will have been verified.

Table 30 above shows that:

- A third of the register identify themselves with a physical disability- 699 households out of 2,043 on the register. The majority require one bedroom- 66%
- The second highest stated need is mental illness at 22% of the register
- Autism- there are similar needs for one, two, three and four bedroom properties where an applicant household is stated to contain a person with Autism. Highest need is for one bedroom at 15 households and the need decreases as number of bedrooms increase

Figure 8: Bedroom need of households with a disability/health issue



Source: Devon Home Choice

Figure 8 above shows the number of bedrooms required by the 1,133 households who identify themselves as having a disability/health issue. The highest number by far require one bedroom.

Out of the 1,133 households who identify themselves with a disability/health issue, 939 live in Torbay.

Support needs- Number of applicants who stated that they (or anyone who needs to be rehoused with them):

- Need additional support to live independently- 276 (227 of these live in Torbay)
- Need additional support to access Devon Home Choice- 272. This is 13% of applicant households

Finances:

- 497 applicants (24%) state they are struggling to afford their current home
- 53 applicants (3%) say that they or those that need to be rehoused with them have rent arrears of over £500 from current or previous accommodation over the last two years

Sheltered housing- 279 applicants wish to live in sheltered housing (228 of these are currently resident in Torbay):

- The vast majority require one bedroom accommodation
- 184 have mobility needs, the majority relating to steps

5.1.2 Lettings from Torbay register of social housing

The table below shows lettings made between 2010/11 and 2015/16.

Table 31: General needs homes let in Torbay to applicants on the register

Year	Number and % of bedrooms in the properties								Total
	1 bedroom		2 bedrooms		3 bedrooms		4 bedrooms or more		
	Number	%	Number	%	Number	%	Number	%	
2010/11	103	38%	99	36%	60	22%	11	4%	**273**
2011/12	111	33%	138	41%	-		Under 5		**337**
2012/13	94	41%	94	41%	36	16%	7	3%	**231**
2013/14	92	23%	189	48%	89	23%	23	6%	**393**
2014/15	82	28%	139	47%	66	23%	6	2%	**293**
2015/16	79	31%	124	48%	49	19%	7	3%	**259**

Source: Devon Home Choice, Under 5- number suppressed due to data confidentiality, '-' number suppressed so low number cannot be calculated

General needs includes social rent and affordable rent properties. A letting is categorised as sheltered housing when described as such by the Provider. There is no supported housing included.

The highest number and proportion of general needs lettings made in the last three years is of properties with two bedrooms- 47%-48%. Table 27 in section 5.1.1, however, shows that the majority of applicant households on the register on 9 June 2016 had a need for one bedroom properties (58%) whilst the percentage of lettings of one bedroom properties in 2015/16 shown in table 31 above was 31%.

Most sheltered homes let in Torbay to applicants on the register were one bedroom properties. In 2015/16, there were slightly more homes let with two bedrooms- 15 lettings out of 62. The register on 9 June 2016 showed the majority of applicant households who wanted to live in sheltered accommodation required one bedroom.

5.1.3 Social housing lettings in Torbay, CORE data

CORE (COntinuous REcording) records information on new social housing lettings and sales by private registered providers (PRPs) that own social housing stock. Information about the tenancy, the tenants and the property is collected by data providers each time there is a new letting of a social housing property. The categories of lettings are:

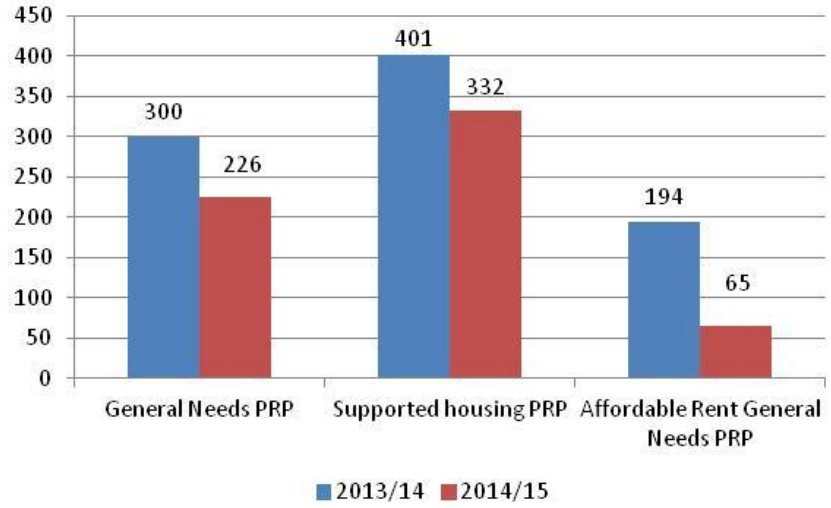
General needs housing- this is stock that does not have a designated support purpose or does not have the special design features that are specific to supported housing

Supported housing- categorised as supported housing within CORE on the basis of either design facilities or features and are designated for a particular client group. If housing is

targeted at a specific client group but does not have a designated support purpose or the required special design features then it is classed as general needs housing. There must be tangible property features or services associated with the property for it to be correctly classified as supported housing. Types of supported housing can include direct access hostels, group homes, purpose-built self-contained housing, residential care and nursing homes. Housing for older people must be intended for older people (regardless of the actual characteristics of each tenant). They must have special design features or be designated supported housing for older people. The distinctive design features should be over and above lifetime homes adaptations to general needs properties.

Affordable rent general needs housing- Affordable Rent is the Government initiative that allows providers to charge up to 80% of the local market rent.

Figure 9: Reported new social housing lettings in Torbay, 2013/14 and 2014/15



Source: COntinuous REcording (CORE) data

The total number of reported new social housing lettings was 895 in 2013/14 and 623 in 2014/15. CORE figures show a reduction in lettings.

In 2014/15, most lettings in Torbay by general needs (64%) and affordable rent PRPs (66%) were flats/maisonettes. The rest were houses or bungalows.

2014/15- Household type- highest proportion:

- General needs PRP- one adult household (68 lettings), one adult and one+ children household (66 lettings)
- Affordable rent general needs PRP- one adult and one+ children household (33 lettings)
- Supported housing PRP- one adult household (173 lettings)

Table 32: Number of wheelchair standard lettings, 2014/15

	General needs PRPs			Affordable rent general needs PRPs		
	Number (Torbay)	% (Torbay)	% (England)	Number (Torbay)	% (Torbay)	% (England)
Wheelchair standard	5	2%	4%	4	6%	9%
Total lettings	**226**			**65**		

Source: COntinuous REcording (CORE) data

Table 33: Mobility standards of supported housing lettings, 2014/15

	Supported housing PRPs		
	Number (Torbay)	% (Torbay)	% (England)
None	237	71%	47%
Fitted with equipment or adaptations	72	22%	41%
Designed to wheelchair user standard	23	7%	12%
Designed to accessible general standard	0	0%	0%
Total lettings	**332**		

Source: COntinuous REcording (CORE) data

Table 34: Disability requirements of households in Torbay, 2014/15

	General needs PRPs		Supported housing PRPs		Affordable rent general needs PRPs	
	Number	%	Number	%	Number	%
No disability related housing design or adaptation requirements	186	82%	240	72%	51	78%
Other disability related requirements	26	12%	15	5%	11	17%
Requires level access housing	12	5%	24	7%	0	0%
Don't know if disability related housing design or adaptations required	4	2%	40	12%	3	5%
Requires fully wheelchair accessible housing or access to essential rooms	2	1%	15	5%	0	0%
Total lettings	**226**		**332**		**65**	

Source: COntinuous REcording (CORE) data

Tables 32 – 34 shows that in 2014/15:

- 2% (5) of General needs PRPs and 6% (4) of affordable rent general needs PRPs were wheelchair standard lettings in Torbay. This is lower than the proportion across all England
- 22% of supported housing lettings in Torbay were fitted with aids and adaptations, lower than the 41% in England as a whole
- 7% of supported housing lettings in Torbay were designed to wheelchair standard compared to 12% in England as a whole

- Around 17% of households entering general needs properties had a disability requirement for their property

Figure 7 shows the mobility needs of households on the Torbay social housing register as on 9 June 2016- for general needs and sheltered housing. It shows that 92 households required part wheelchair or wheelchair accessible properties.

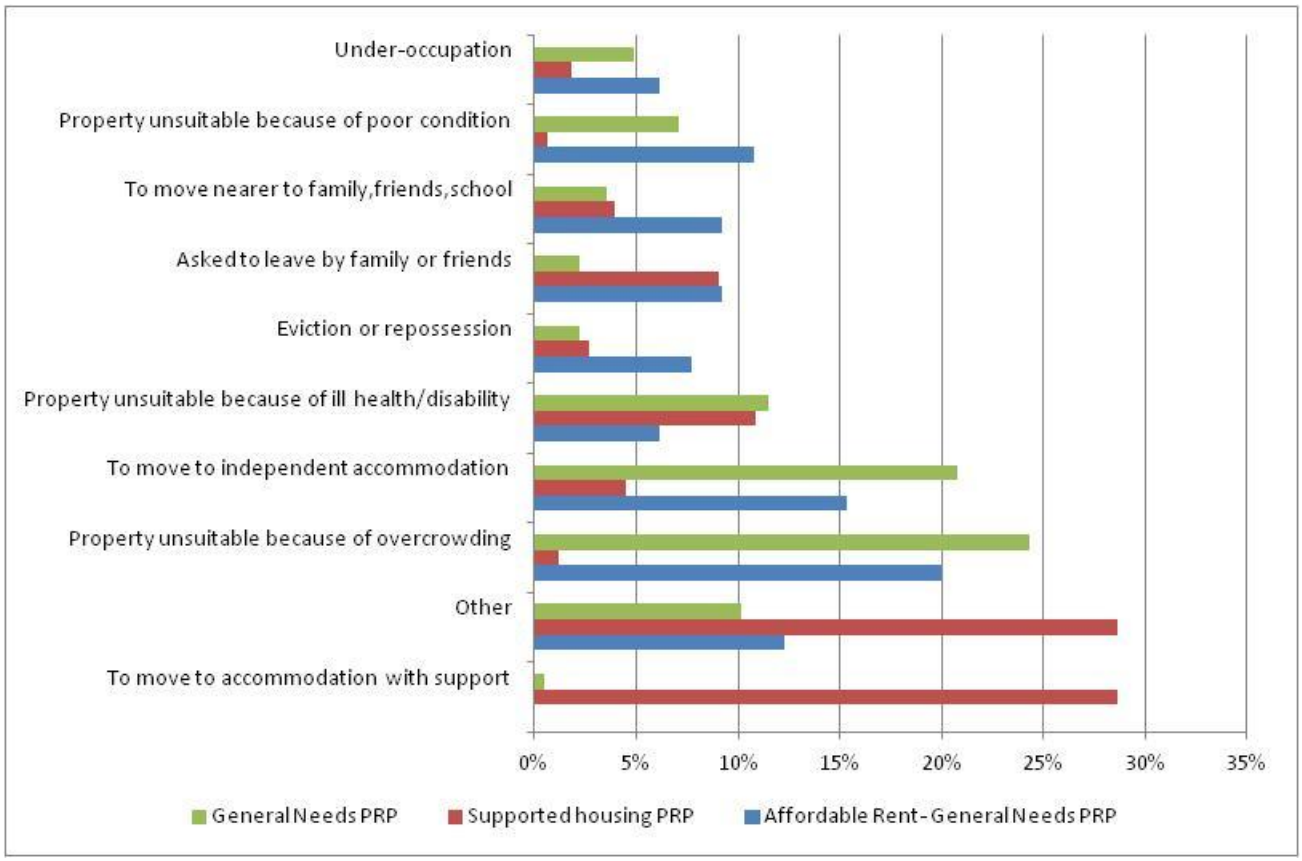
The Housing Act 1996 requires that 'Reasonable Preference' for housing must be given to people in certain categories. Applicants are assessed and given a band depending on housing need. Table 35 below shows where reasonable preference has been given and the reasons for this preference.

Table 35: Households given reasonable preference in Torbay, 2014/15

Reasonable Preference given:	General Need PRPs	Supported Housing PRPs	Affordable Rent General Needs PRPs
Homeless	6	1	2
Insanitary/Unsatisfactory housing	3	0	1
Medical welfare	4	15	1
Hardship	0	2	0
Total	**13**	**18**	**4**

Source: COntinuous REcording (CORE) data

Figure 10: Reason the household left their last settled home, for new social housing lettings in Torbay- Most common reasons, 2014/15



Source: : COntinuous REcording (CORE) data

The most common reasons for moving into:

- Supported housing are 'To move to accommodation with support' and 'Other'
- General needs and affordable rent general needs housing was because the property was unsuitable because of overcrowding

Reasons which included less than 5% of lettings for all types of PRP are not included in this chart. These were:

- Permanently decanted from another property owned by this landlord
- Loss of tied accommodation
- End of Assured Shorthold or Fixed Term tenancy
- (Non violent) relationship breakdown with partner
- Could not afford rent or mortgage
- To move nearer work
- Do not know

5.2 Extra care housing

5.2.1 Extra care housing applications

Extra Care housing is located in Torquay and Paignton. There are 84 rented units.

As in May 2016, there were 106 out of 419 applications for rented units (since 2011) which were successful. Lack of success was mainly due to not meeting the eligibility criteria which requires applicants to have a certain level of care and/or support needs.

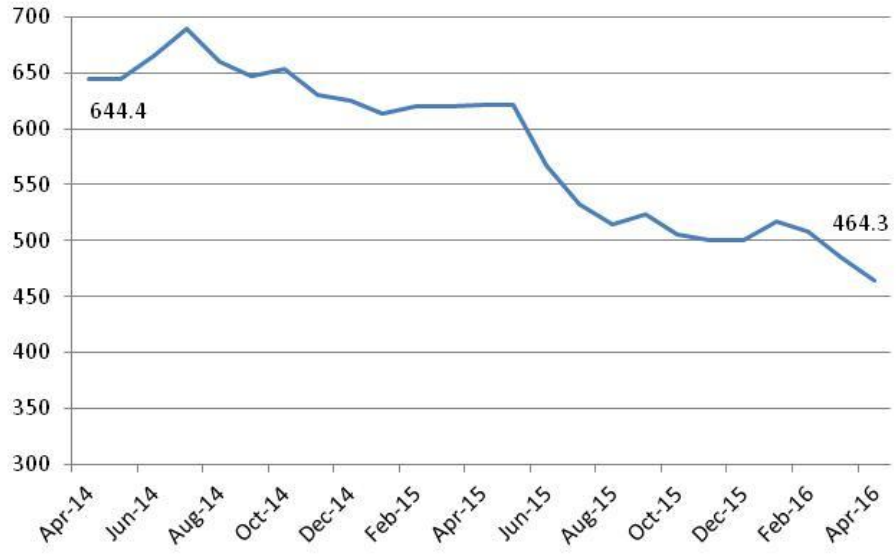
Mobility needs were not collected from commencement. The mobility needs, therefore, of 267 of the applicants for rented extra care housing were as follows:

- Wheelchair user- 93 applications (35% of the 267 recorded)
- Impaired mobility including- crutches, walking stick, walking frame and white stick- 68 applications (25%)
- None (mobile)- 106 applications (40%)

5.3 Care homes

5.3.1 Residential and nursing care admissions

Figure 11: Permenant admissions to care homes of people aged 65 and over, crude rate per 100,000 in Torbay



Source: Devon County Council- Torbay Better Care Fund Outcomes Report, figures as published on 19 May 2016

The rate of permanent admissions to care homes in older age groups in Torbay has fallen since 2014/15.

Table 36: Number of Torbay local authority supported adults whose long term support needs were met by admission to residential and nursing care homes, and age

Year of admission	18-64 years	65-74 years	75-84 years	85+ years	Total
2014/15	5-10	11- 20	67	121	**210**

Source: Torbay and Southern Devon Health and Care NHS Trust (TSDHCT), low numbers suppressed for data confidentiality

5.4 Intermediate care

Intermediate care is a service for people over the age of 18, who need a short period of rehabilitation, treatment or care. This may be due to a recent illness, a hospital stay or a reduction in their ability to remain independent at home.

Table 37: Number of referrals- (people aged 18+) both urgent and non-urgent- to intermediate care service in the Torbay locality

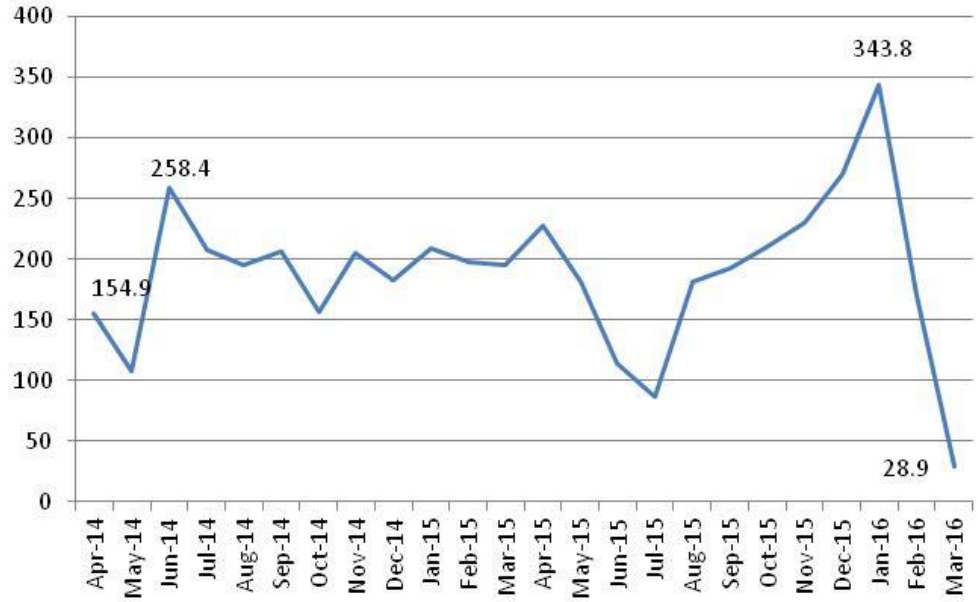
Year	Number of placements (care home)		Number treated at home		Total number of referrals
	Number	%	Number	%	
2011/12	656	26%	1,830	74%	**2,486**
2012/13	796	35%	1,498	65%	**2,294**
2013/14	718	36%	1,304	64%	**2,022**
2014/15	619	34%	1,210	66%	**1,829**

Source: TSDHCT

In the last three years on average 35% of intermediate care referrals were delivered within a care home. The number of referrals has fallen over the past four years from 2,486 in 2011/12 to 1,829 in 2014/15.

5.5 Delayed transfers of care

Figure 12: Delayed transfers of care from hospital, crude rate per 100,000 population, Torbay



Source: Devon County Council- Torbay Better Care Found Outcomes Report, figures as published on 19 May 2016

A delayed transfer of care occurs when a patient is ready for transfer from a hospital bed, but is still occupying such a bed.

Data is collected on the reasons for the delay. There is a category- 'Housing- patients not covered by Care Act'. This category, is only used when it relates to people who are not eligible for care and support. All other patients with long-term housing delays should be found an interim placement, and any delays in arranging this should be recorded in the category of the delayed interim package (e.g. residential care, care package in own home). Therefore, the specific category of housing delays would not be useful in identifying housing need.

6 Supply and predicted demand

6.1 Social housing

Table 38. Low cost housing in Torbay owned/managed by private registered providers (PRPs) of social housing, as on 31 March of the year

Please note- most accommodation units will be both owned and managed by the PRP so will appear in both columns of the particular housing and unit type. For example- the first two general needs columns in this table are mostly duplicates between the two columns

Year	General needs- Self contained- Owned low cost rental accommodation	General needs- Self contained- managed low cost rental accommodation	General needs- Bed space (non self contained)- Owned low cost rental accommodation	General needs - Bedspace (non-self-contained) - Managed low cost rental accommodation	Housing for older people- owned low cost rental accommodation (units/ bed spaces)	Housing for older people- managed low cost rental accommodation (units/ bed spaces)	Supported housing - Owned low cost rental accommodation (units/ bedspaces)	Supported housing - Managed low cost rental accommodation (units/ bedspaces)
2014	4,018	4,018	73	73	989	840	282	212
2015	4,094	4,102	54	54	977	828	275	224

Source: Home and Communities Agency
Managed stock is from Large PRPs only- those owning at least 1000 units/bedspaces of social housing

General needs- this covers the bulk of housing stock for rent. It includes both self-contained and non-self-contained hostel/shared housing units and bedspaces. General needs housing is stock that is not designated for specific client groups or investment programmes. It includes temporary social housing provided under Part 6 of the Housing Act 1996. However, temporary housing provided under Part 7 of the Housing Act 1996 is regarded as non-social housing, unless it is provided at below market rent.

Housing for older people- although the purpose of this housing is primarily to accommodate older people, the age of tenants is not a defining feature. Properties are described as housing for older people if they are intended for older people and they either incorporate a range of basic facilities and special design features (over and above lifetime homes adaptations to general needs properties) or are specially designated as supported housing for older people. Some stock that was categorised previously as 'sheltered' housing falls into the category of housing for

older people, but where there are no basic facilities and special design features or any designated support, then it is classed as general needs housing.

Supported housing- housing that is purpose designed or designated to provide support for a particular client group. In the absence of either of these two conditions, housing should be classified as general needs. The fact that a tenant receives support services in their unit does not automatically make it supported housing.

Table 39 below shows 2015 figures in the form of the rate per 1,000 of the population aged 18+ and 50+ comparing Torbay with the CIPFA (Chartered Institute of Public Finance and Accounting) nearest neighbours for English local authorities. Nearest neighbours are grouped and based upon a wide range of socio-economic indicators.

Table 39 shows that out of the 16 local authorities Torbay has the eighth highest rate of general needs self contained accommodation and the joint seventh rate of supported housing that is owned by the Private Registered Provider (PRP) per 1,000 aged 18+. There is a varied rate per 1,000 amongst the 16 local authorities from 5.6 for general needs to 107.1.

Torbay has the joint second highest percentage of the population aged 50+ at 46% but only the sixth highest rate of housing for older people owned by the PRP per 1,000 aged 50+.

Table 39. Low cost housing in Torbay and nearest neighbours owned/managed by PRPs of social housing, as on 31 March 2015

Please note- most accommodation units will be both owned and managed by the PRP so will appear in both columns of the particular housing and unit type. For example- the first two general needs columns in this table are mostly duplicates between the two columns

Local Authority	Population estimates aged 18+	% of total population who are 18+	Rate per 1,000 aged 18+				Population estimate aged 50+	% of total population who are 50+	Rate per 1,000 aged 50+	
			General needs- Self contained- low cost rental accommodation		Supported housing- low cost rental accommodation (units/bedspaces)				Housing for older People- low cost rental accommodation (units/ bedspaces)	
			Owned	Managed	Owned	Managed			Owned	Managed
Blackpool	111,691	79%	14.8	13.9	2.9	1.9	56,037	40%	3.7	3.7
Bournemouth	157,194	82%	14.2	14.5	4	2.7	65,811	34%	10.6	6.2
Cornwall	440,463	81%	37.2	36.3	1.7	1.3	242,542	44%	12.9	12.8
Darlington	82,667	78%	20.9	15.8	3.9	2	40,593	39%	11.8	10.7
East Riding of Yorkshire	273,974	81%	6.1	5.6	0.6	0.2	153,447	46%	4.5	4.3
Isle of Wight	113,563	82%	54.6	51.1	2.6	2.2	65,582	47%	9.5	9.4
North East Lincolnshire	125,495	79%	57.7	57.8	1.9	1	61,459	38%	42.2	42.1
North Somerset	165,679	80%	42.7	42	1.9	1.6	88,787	43%	19	18.2
North Tyneside	162,280	80%	23.3	22.8	3.2	2.3	79,660	39%	16.1	16.1
Northumberland	256,193	81%	54.3	53.4	1.4	0.9	141,871	45%	22.8	22.6
Poole	120,399	80%	17.3	15	2.5	1.4	61,414	41%	6.3	5.9
Redcar and Cleveland	107,718	80%	106	107.1	1.7	1.1	56,240	42%	9.9	9.4
Sefton	220,051	80%	72.3	70.7	6.9	5.4	118,787	43%	13.4	13.2
Southend-on-Sea	139,715	79%	19	18.9	2.5	1.5	65,447	37%	5	4.1
Torbay	107,913	81%	37.9	38	2.5	2.1	61,171	46%	16	13.5
Wirral	253,315	79%	70.3	60.1	4.3	1.3	130,860	41%	28.7	23.7

Source: Homes and Communities Agency. Managed stock is from Large PRPs only- those owning at least 1000 units/bedspaces of social housing.
ONS mid-2014 population estimates, CIPFA nearest neighbours for English Local Authorities.

6.2 Extra care housing, sheltered housing, care homes

6.2.1 Elderly Accommodation Council data

Below is data from a database of housing with care provision. 'Developed by the Elderly Accommodation Counsel (EAC), this comprehensive database covers over 1,300 housing developments across the UK that offer care services. It is an essential tool for both commissioners wanting to pinpoint the supply of accommodation based care in their area and those providers looking at potential market opportunities.'[50] The EAC work to keep the database up to date and reliable but Providers are responsible for uploading new schemes to the database and updating information on current schemes so there is no guarantee that every scheme is included.

Table 40: Number of units of extra care housing- rented only

Local Authority	Number of units	Population estimates aged 50+	% of total population who are 50+	Units per 1,000 aged 50+
Blackpool	94	56,037	40%	1.68
Bournemouth	162	65,811	34%	2.46
Isle of Wight	10	65,582	47%	0.15
North East Lincolnshire	60	61,459	38%	0.98
Torbay	84	61,171	46%	1.37

Source: EAC, www.housinglin.org.uk, ONS mid-2014 population estimates, CIPFA nearest neighbours for English Local Authorities

The database does not separate numbers for rent, shared ownership and leasehold properties within a scheme so Table 40 above only compares the local authorities where they have schemes that are rented only. Within this sample of five, Torbay has the third most extra care units per 1,000 population aged 50+. The table shows that the local authorities with the highest proportion of people aged 50+ do not necessarily have the highest rate of extra care housing units.

[50] Housing Learning and Improvement Network (LIN)- www.housinglin.org.uk

Table 41: Supply of specialist housing in Torbay, with estimated future needs

		Demand per 1,000 aged 75+	Torbay demand in 2014 (Using rate in column to the left)	Torbay-estimated current supply	Variance	% variance	Estimated future needs in Torbay				
							2015 (1% increase on 2014 demand)	**2020** (16% increase on 2014 demand)	**2025** (41% increase on 2014 demand)	**2030** (56% increase on 2014 demand)	**2035** (70% increase on 2014 demand)
Sheltered housing	Rent	125	860	866	6	1%	871	1,000	1,209	1,338	1,462
	Leasehold		1,140	1,127	-13	-1%	1,154	1,325	1,603	1,774	1,938
Enhanced sheltered housing	Rent	20	0	0	0	0%	0	0	0	0	0
	Leasehold		320	48	-272	-85%	324	372	450	498	544
Extra care housing	Rent	25	200	107	-93	-46%	203	233	281	311	340
	Leasehold		200	100	-100	-50%	203	233	281	311	340
Residential care		65	1,040	1,698	658	63%	1,053	1,209	1,463	1,619	1,768
Nursing care		45	720	689	-31	-4%	729	837	1,013	1,121	1,224

Source: SHOP tool, Elderly Accommodation Council, www.housinglin.org.uk, SHOP estimates supply as 101 extra care units which has been changed in the table above to reflect the reality. Extra care- rent includes shared ownership

The SHOP (Strategic Housing for Older People) analysis tool helps local authorities and Providers identify potential demand for different types of specialist housing in England and Wales. It uses the data from the database of housing with care used in Table 40 and is shown in Table 41 above. Demand is the number of units estimated to be required per 1,000 of the population aged 75+, taken from 'More Choice, Greater Voice'[51]. 'Using the More Choice, Greater Voice figures will produce extremely challenging targets for 2035. A review of these figures based on national average benchmarks and local provision is therefore suggested to achieve a more realistic target for future provision.'[52] The growth in need is based solely on the increase in the number of older people.

[51] More Choice, Greater Voice- a toolkit for producing a strategy for accommodation with care for older people', February 2008,Housing LIN at the Care Services Improvement Partnership at the Department of Health and the Department of Communities and Local Governement

[52] Housing LIN, www.housinglin.org.uk

The SHOP tool estimates that in 2014 in Torbay:

- The supply of sheltered housing units was similar to the demand.
- There was a large under supply of enhanced sheltered housing.
- There was an under supply of extra care housing of -46% and -50% of rented/shared ownership and leasehold tenure respectively
- Residential care had an oversupply of 63% and nursing care was undersupplied by 4%

6.2.2 Residential and nursing care homes

There is a difference on the Care Quality Commission (CQC) register between the balance of residential and nursing homes nationally and those in Torbay. CQC reported that in February 2016[53] there was an overall national average split of 72% residential homes to 28% nursing homes. In Torbay at this time the split of residential and nursing homes was 80% to 20% indicating there may be an over-supply of residential care homes in Torbay or an undersupply of nursing homes. Torbay's local register (shown in Tables 42 - 43 below) produced by the Torbay and South Devon NHS Foundation Trust (TSDFT) includes more accurate information about circumstances in local care homes: if a home is registered with the CQC as nursing but has no nursing staff, then the home and the beds are categorised in the local register as residential care, to reflect the actual type of beds and homes available.

Table 42: CQC registered care homes in Torbay contracted with TSDFT, as on 31 March of the year

Date	2012		2013		2014		2015		21 June 16	
Care home type	**Number**	**% split**	**Number**	**% split**	**Number**	**% split**	**Number**	**% split**	**Number**	**% split**
Residential care homes	92	84%	88	83%	86	83%	86	84%	79	84%
Nursing homes	18	16%	18	17%	18	17%	16	16%	15	16%
Total	**110**		**106**		**104**		**102**		**94**	

Source: TSDFT

Table 42 above shows that the number of residential homes has reduced while the number of nursing homes has remained similar.

[53] CQC care directory, February 2016, http://www.cqc.org.uk/, Where homes have a dual registration with CQC of both nursing and residential then they are counted in these figures as nursing only

Table 43: CQC registered care beds in Torbay of homes contracted with TSDFT, as on 31 March of the year

It is important to note:

*If a care home is registered with the CQC as nursing but has no nursing staff then the home and the beds are categorised in the table below as residential care, to reflect the actual type of homes and beds available

*In some cases the number of CQC registered beds will be higher than the physical number of beds available at any given time. This is because many homes have rooms which are registered for double occupancy (should the need or choice arise) and these double rooms contribute to the homes overall registration. Therefore the total number of registered beds across a number of homes will not provide a true picture of Capacity in the market) due to the variability of double rooms being used singly but also some homes intentionally chose to operate at a lower than Registered number of beds or close beds temporarily for refurbishment.

Year	2012		2013		2014		2015		21 June 16	
Care bed type	**Number**	**% split**	**Number**	**% split**	**Number**	**% split**	**Number**	**% split**	**Number**	**% split**
Residential care beds	1,915	76%	1,835	74%	1,848	74%	1,839	75%	1,751	74%
Nursing care beds	608	24%	652	26%	658	26%	614	25%	600	26%
Total	**2,523**		**2,487**		**2,506**		**2,453**		**2,351**	

Source: TSDFT

Table 43 above shows that the overall number of residential beds has reduced while the number of nursing beds has remained similar.

7. Views of professionals relating to housing need

The following views of housing need for clients in Torbay were given by professionals in May - July 2016. The name of the professional(s') department is displayed rather than their job title to provide anonymity. The views of individuals are expressed rather than those of the whole department.

Community Health and Social Care Service Delivery Unit, TSDFT:

- We don't need many double rooms in any new capacity, single rooms are more flexible and better meet the demographic needs
- Areas for capacity development could be around learning disability, younger mental health and physical disability. The contract with the SPACE/SPOT service will be focusing

more upon moving people into more independent living once our work related to Baytree House is completed

- The location of the Hatchcombe site is one side of the Bay, thus may be seen more as a Torquay choice

Torquay Occupational Therapy (OT):

Hospital discharge is delayed mostly by the need for care packages where care is not available. When there is a housing need, it could take months to resolve, so a temporary solution has to be found: building housing is not the answer to this particular issue.

All information below relates to Torquay

Housing need in Torquay

- Wheelchair accessible level access housing with level access shower, with some who need accessible kitchens
- Warden controlled sheltered housing
- Supported living

The above are mainly single people so need is for one bedroom properties.

- Younger adults with severe physical disabilities- aged 25–50 have very limited options for housing. There is only Douglas House. Need alternatives to residential/nursing care and specialist schools as many of these clients reside in nursing homes that are not appropriate for their cognitive and cultural needs. They need supported living in the same way young adults with Learning Disabilities need but are often not accommodated for
- Older People: The older a client the less likely they are to want to move or be able to cope with moving , upheaval, too overwhelming etc, so OTs adapt what they can in their accommodation to lower the risk for the client of falls and try to keep them as independent as possible with equipment
- Devon Home Choice (DHC): If people are not bidding for wheelchair accessible properties then it could be because they are not able to bid- this could be because they are not IT literate or don't have facilities to bid online. DHC is not accessible enough; there is perception by people in the community that it is not accessible. The clients we see are not of an age where online bidding is a possibility. Or they are banded so low that they are not eligible to bid
- There is a need for an OT based within Council Housing offices. This post could match people with a disability with suitable housing, help them with bidding, and match to suitable properties. Devon has this post which is paid for by the Council

Torbay Drug and Alcohol Service:

- The real gap is for floating support rather than housing as this client group can struggle to maintain tenancies. Drug and alcohol workers get drawn into the concerns of landlords who want workers to sort out housing issues. Workers however are not expert around maintaining tenancies or commissioned to carry out housing support. Clients need specialist support to access housing and move on to independent living

- Clients who have been physically damaged due to alcohol- such as an organic brain disease- and/or with complex needs- cognitive difficulties- need practical support to prevent further deterioration which can lead to residential or nursing care. Practical support includes enabling support around budgeting, activities for daily living, social isolation and sometimes the provision of packages of social care

- 3% of clients reported they had a housing need (Treatment Outcome Profile information at successful completion of treatment, January – March 2016). This is self reported by the client. Based on this, it is estimated this is about 50 clients a year

- The Jatis service is the first port of call for rehab and supported housing. Sometimes there are capacity issues or clients don't fit the criteria. An issue is that clients need to give up their tenancy to use rehab. This can put clients off using the service. Some may decide to use the service as a day patient rather than as residential but the treatment outcomes are less favourable

- Finding tenancies in Torbay at the end of rehab can be a problem due to the client group. It is difficult to engage landlords around care and safety of vulnerable individuals, to ensure that their housing is safe. Landlords are also concerned about anti social behaviour, drug taking and alcohol usage

- The majority of clients need 1 bedroom single tenancies

Intermediate Care Services:

- The care home market has changed significantly over the last few years. Homes have closed and there is a risk that we could get to a point where we do not have the nursing home capacity we need. This is the case across the Bay. There have been instances where there have not been enough nursing beds, particularly for people coming out of hospital, and last Winter was worse than before, due to the changes in the market. This was also the case where people in the community went into crisis and required a nursing bed- where a bed was not available they were sent to A&E, there were rare occasions when this happened over the last Winter. Nursing and care homes need support on how to develop, in the way that the local health and social care community requires.
- Extra Care- if the remit of Extra Care could include Intermediate Care, then this could be used for a small number of patients at the less acute end. Extra Care housing needs to have the right type of environment with the right level of availability and responsiveness of 24 hour care for Intermediate Care patients.

Housing Options Service:

- There are not enough properties for people with physical disability in the private rented sector or in the social housing sector. Two bed properties would be the most useful for this client group- they are more flexible and could be used for a carer or for children.
- There are quite a lot of households on the Devon Home Choice social housing register who need suitably adapted properties for physical disability. They mainly need 2 bed properties. They are not managing to find a property in private rented or social housing sector so Housing Options Team is struggling to prevent homelessness. For example- a disabled client who is a wheelchair user has been in temporary accommodation since February due to lack of suitable accommodation.
- Short term accommodation for people with a physical disability is needed, to include assessment and step down beds where physical and/or mental health needs can be assessed and where people can stay until they get permanent accommodation.
- Housing Options clients with a physical disability often don't have care needs so are not eligible for extra care housing and/or are younger so are not eligible for sheltered housing.
- There is a need for wheelchair or step free accommodation for younger people with a physical disability.
- There is only one property that can be used as temporary accommodation for people with a physical disability. This is a B&B.
- Data collected includes the priority need of those accommodated in temporary accommodation. In 2015/16, 499 households were accommodated- 60 had a priority need of physical disability and 98 had a priority need of mental health. However, if a household includes a pregnant woman or dependent children then pregnancy/dependent children will always be given as the priority need.

Brixham Occupational Therapy:

Housing Need in Brixham:

- It is difficult to make housing fully accessible in Brixham due to the geography of the town. Even if accessible inside, people may struggle to get around the area.
- There is a need for housing that is 'halfway' between warden controlled sheltered housing and extra care. Clients often don't meet the criteria for extra care and often don't need help with washing and dressing, but may have a need for lifestyle support such as prompting/encouragement to look after themselves, money management, and support to prevent self neglect. They may need a bit of support but not meet extra care needs. These are predominantly people aged over 65 with a need for one bedroom properties.

- There appears to be a pocket of more complex needs in Brixham, where people have needs that are similar to the deprived areas of Torquay.
- There are problems with access for wheelchair users within properties- such as a need for wider internal doors. These clients are mostly aged under 65 as they have the wish to get around the property by themselves and be more mobile. However, it has not been required to search for new properties for wheelchair users for a long time as it has been possible to make the necessary alterations to properties. There are not many new wheelchair users appearing on case loads in Brixham. There are current wheelchair users who the team have already worked with to adapt their properties.

Paignton and Brixham Zone:

- Dunboyne Court and Whitley Court are adequate in terms of the number of Extra Care units. There are usually vacancies and not a big waiting list. Not aware of a large number of Brixham residents who would use Extra Care. There is quite a high turnover in Whitley Court and about one extra care vacancy a month.
- Not aware of anyone who declined Extra Care on the basis that it is not located in Brixham. There are Brixham residents who do not want to move out of Brixham but this relates to residential/nursing care, not to supported housing. There are less people who are socially isolated in Brixham. This is different to Paignton where people often do not have a network of support so Extra Care works well there.
- Wheelchair adapted housing- there is not a lot of choice across the Bay
- Hears that there is a struggle across Torbay to identify adequate supported living for people with a learning disability. The difficulty relates to the level of need required for the clients rather than the availability of housing.
- Brixham is fairly well provided in supported housing- there is Combe Bank sheltered housing and others

Other comments:

- Temporary accommodation needed for people at the end of life to enable families to stay together and prevent separation resulting from placement, e.g. older man living in static caravan with majority of care delivered by his wife, temporary extra care accommodation would enable the continuation of this relationship
- Potential for intermediate care rehab as an alternative to residential care, enables the informal carer to be included in an enabling approach
- Resource allocation meetings: Addition to panel paperwork requesting residential care placement to include whether extra care/ specialist accommodation has been considered and reasons why it is not considered appropriate
- More wheelchair accessible properties needed

8. Future identification of housing need

Appendix 1 details where and what housing need information is held within public sector organisations, and where known it is recorded if there are any issues with this data- such as when this is unreportable. Information is often recorded at person level but the granular detail of the causes of each client's housing need is generally held in free text fields or on paper forms that are scanned onto their IT system. This information is therefore not in a reportable format so cannot be used to analyse needs of clients as a group, in order to identify unmet needs, make decisions on future direction and housing related commissioning opportunities.

It is recognised that there is a gap in reportable data collected about the housing need of adult social care clients. An audit of fields within the PARIS system that could show housing need has been carried out. Suitable fields have been found in the Risk Enablement Tool which are tick boxes and therefore reportable, unlike the Care Act assessment where housing information is shown in free text requiring manual analysis. Using the Risk Enablement Tool as a means to identify need should be considered- there would be a need to ensure consistency of completion. This Tool contains housing related risks as tick boxes, examples of which are:

- Is home environment suitable?
- Mobility inside the home
- Mobility outside the home
- Need for support with tasks associated with tenancy or mortgage
- Accommodation is substandard or hazardous

Further consultation with Adult Social Care staff and Occupational Therapists should be considered to look at additional drop down boxes in the Tool that woud identify need in more detail. The viability and timescales for adding extra boxes onto PARIS will be investigated. It would need to be a simple and easy solution if staff are to be expected to complete this.

9. Summary of main points

Main points from this report are summarised below, under each section heading:

2. National Research- recommendations

- National research recommends adapting existing housing where possible and providing suitable new homes that are adaptable to changing needs and aspirations of an ageing population.

3. Torbay population

- Torbay is identified as the most deprived district local authority in the South West. Levels of relative deprivation have increased in Torbay, since 2010.

- Higher proportion of private rented tenure in Torbay compared with England, particularly in Torquay, and a lower proportion of social rented accommodation.

- There is a higher proportion of flats, maisonettes, apartments, and bedsits in Torquay than in Paignton, Brixham or England, whereas Torquay has a much lower proportion of detached or semi-detached houses than these areas.

4. Risk factors leading to the need for specialist housing

- Torbay has a higher proportion of people aged 60+ compared with England and a much lower proportion in the younger age groups. Overall there is expected to be an increase in Torbay's resident population, most noticeably those aged 65+ and those aged 85+.

- One person households make up over half (57%) of households accepted as owed the full housing duty for homeless assistance by Torbay Council in 2015/16.

- Future predictions for Torbay, using POPPI and PANSI systems, generally show decrease in numbers in the 18-64 age range and increase in numbers for the 65+ age range, in relation to health conditions and disability.

- Torbay has a higher proportion of people self reporting in the census that their day to day activities were limited by a disability/health issue (24%) compared to England (18%).

- The census shows that across Torbay as a whole there are higher proportions of people of all ages self reporting that they provide unpaid care compared with England.

- There is a higher prevalence of diagnosed long term conditions in the Torbay population compared with England, based on GP practice data.

- The percentage of the GP registered population on the mental health register (2014/15) is higher in Torbay at 1.11% compared with 0.88% in England.

- The rate of alcohol admission episodes for alcohol-related conditions (2014/15) in Torbay is worse than the rate for England.

5. Need and usage

- Torbay social housing register- As on 9 June 2016, over half of applicant households required accommodation with one bedroom, 28% of households had a mobility need, 34% of applicant households stated they contained one or more members with a physical disability and 22% with a mental illness. The most common reason for being placed in a particular band of need was 'lacking 1 bedroom'. 13% of applicant households said they needed additional support to access Devon Home Choice.

- The highest number and proportion of general needs lettings made in the last three years is of properties with two bedrooms.

- CORE data for new social lettings in 2014/15: 2% of general needs lettings and 6% of affordable rent general needs lettings were wheelchair standard, 17-18% of households entering general needs properties and affordable rent general needs properties are known to have some kind of disability requirement. The most common reason for moving into general needs/ affordable rent general needs properties was that the property was unsuitable due to overcrowding.

- Extra care applications- 93 (35%) of the 267 where mobility needs were recorded were wheelchair users and 25% had impaired mobility.

- The rate of permanent admissions to care homes in older age groups has fallen over time, as has the number of care homes.

- In the last three years on average 35% of intermediate care referrals were delivered within a care home. The number of referrals has fallen over the past four years from 2,486 in 2011/12 to 1,829 in 2014/15.

6. Supply and predicted demand

- Compared with 15 'nearest neighbours' Torbay had the eighth highest rate of general needs self contained accommodation and the joint seventh rate of supported housing that was owned by the PRP per 1,000 of the population aged 18+, and the sixth highest rate of housing for older people, per 1,000 of the population aged 50+.

- The SHOP analysis tool estimates supply and demand of sheltered housing, enhanced sheltered housing, extra care housing, and care homes and estimates future need until 2035. This shows a mixture of estimated over and under supply based on projected increases in the number of older people.

- Out of homes contracted with the TSDFT, the overall number of residential care homes and beds has reduced whereas the number of nursing homes and beds has remained similar. NB: If a care home is registered with the CQC as nursing but has no nursing staff then the home and the beds are categorised as residential care, to reflect the actual type of homes and beds available.

7. Views of professionals relating to housing need

- A selection of views of professionals on housing need in Torbay are:
    - Need for more wheelchair accessible housing
    - Need for properties adapted for physical disability in private rented or social housing sector. Two bedroom properties most useful for this client group
    - Need for supported living for younger adults with severe physical disabilities (aged 25-50, in Torquay)
    - Need for floating support for drug and alcohol clients
    - If the remit of Extra Care could include Intermediate Care, then this could be used for a small number of patients at the less acute end
    - Need in Brixham for housing halfway between warden controlled sheltered housing and extra care
    - Dunboyne Court and Whitley Court are adequate in terms of number of extra care units
    - Areas for capacity development could be around learning disability, younger mental health and physical disability
    - Single rooms are more flexible and better meet the demographic needs
    - Temporary accommodation needed for people at the end of life to enable families to stay together and prevent separation resulting from placement

8. Future identification of housing need

- Information about housing need in public sector organisations is often recorded at person level but the granular detail is generally held in free text fields or on paper forms that are scanned onto the IT system. This information is therefore not in a reportable format to enable analysis of client needs as a group. Suitable reportable fields have been found in the Risk Enablement Tool for adult social care clients on the PARIS system. Further consultation is recommended to look at adding additional drop down boxes that would identify and enable reporting of need in more detail.

10. Recommendations

Recommendations for further actions relating to identifying specialist housing need:

- Continue mapping current provision of enhanced supported living and accommodation based support used by Torbay. Initial approach has been made to Devon County Council to consider co-ordinated approach to supported living reviews. A list of common providers has been produced

- Ensure this report informs the accommodation based care and support commissioning plan

- Consider using the Risk Enablement Tool on the PARIS system to identify housing need of adult social care clients as a group, to enable discussions on future direction and housing related commissioning activities. Consistency of completion would need to be ensured. Consider further consultation with social care staff and OTs to look at additional drop down boxes that could identify need in more detail. Investigate the viability and timescales for adding extra boxes onto PARIS

- Distribute questionnaire to ask Carers about housing issues and need on behalf of themselves and those they care for, to be distributed by Carers Leads. A phased approach is required due to other consultation also taking place

- A new post for a Homeless Hospital Discharge Worker will be asked if they could investigate how frontline staff could best identfy and record housing need/issues at hospital admission

- Provide support with bidding on Devon Home Choice- it is felt that Devon Home Choice is not accessible enough and there is perception by people in the community that it is not accessible

- Provide support to help clients who are identified as needing to move to new housing but do not want to do so or feel unable to cope with moving

- Provide Occupational Therapist post based in the Council Housing office- this post could match people with a disability with suitable housing, help them with bidding, and match to suitable properties

- Produce an observation check list for care and support workers to use to identify and record housing issues for their clients (such as hazards within the home, hoarding, mobility issues etc)

- Add to the Troubled Families/ Early Help screening tool- more risk factors that could lead to housing need could be added, with strategic agencies to recommend the outcome measures for each category

- Consider the approach of using an exernal organisation to carry out a household survey in Torbay- A review of a small sample of Housing Needs Assessments produced by other areas, shows usage of an external organisation to carry out a survey of households

Appendix1: Housing and housing need/demand information held by public sector organisations

- **Purpose:** to understand housing data, and data that shows need for housing- sources/systems/what is held
- **Aim**: to understand individual housing need/demand

Local Torbay data	
Agency/ Source	**Summary of housing data held, including where known, any issues with data**
TSDFT- Adult Social Care (PARIS system)	• **Client demographics**- date of birth, gender, addresses and postcode, (Address not updated unless person re-presents when details will be checked) • **Current accommodation status**- within this defined as settled or unsettled (not always completed) • **Care Act assessments/reviews**- Question on Maintaining habitable home environment, and Being able to make use of the home safely and Personalised Support Plan- Question on running and maintaining my home. (Graded A-E but rest of information is free text) • **Living status**- Living alone/ with spouse or partner (not always completed) • **House type**- Physical abode of the client including No Fixed Abode (NFA) (not always completed) • **Primary support reasons and reported health condition** (most health conditions not mandatory to complete) • **Residential/nursing care**- Admissions with access route/route of transition, moving from short to long term support • **Discharge from hospital to rehabilitation** where the intention is for the patient to go back home, where person was still at home 91 days later • **Unplanned reviews**- Clients in long term support/long term support for more than 12 months who received an unplanned review and the significant event that caused it- and result including move to nursing/residential care • **Planned reviews**- Clients in long term support for more than 12 months who received a planned review and result including admission to residential and nursing care • **Risk enablement tool- accommodation risks/issues identified** such as inadequate accommodation, lacking basic amenities, suitable home environment, mobility in and out of home, risk of accidental injury, risk of wandering, risk of falls, current accommodation unsuitable, problems managing rent or mortgage, behaviour that might put tenancy at risk, dispute with neighbours or landlord, isolation, problems with access, accommodation needs adaptation, accommodation substandard or hazardous, health risk (damp, cold, etc)

Adult Social Care survey	• Question: How well do you think your home is designed to meet your needs?
TSDFT- Extra care	• **Waiting list-** date of birth (DOB)**,** age, Address and postcode, tenure, number of beds (current), mobility (e.g. wheelchair, walking frame etc), Panel score and outcome, Number of beds requested • **Packages of care**- cost and hours per client, cost pre and post move in • **Reason for moving out**
TSDFT- hospital	• **Patient demographics**- name, date of birth, addresses and postcode (Not updated unless person re-presents when details will be checked) • **Housing questions** will be held on paper notes and then scanned so not reportable
CCG	• **Client demographics-** age, gender, postcode
Public Health and Adult Social Care outcomes framework	• **Indicator**- Adults with learning disability/ Mental health in contact with secondary mental health services in stable/appropriate accommodation
Devon Partnership Trust	• **Client demographics-** Age/ gender/ ethnicity • **Settled or non settled** accommodation • **Accommodation status**- including various accommodation types

Torbay Council- Children's Services (PARIS system- at person level)	• **Client addresses**, postcodes
	• **Single Assessment Form** (free text field 'Family and Environmental Factors')
	• **Client groups**- Looked After Children, Children in Need, Troubled Families, Children with disabilities, Young Carers, Integrated Youth Support Service (Children leaving care), Early Help
	• **Early Help** (non statutory**):**
	  ○ Demographic- Gender/DOB/ethnicity etc
	  ○ Assessment form- Keeping your family safe, Home and Money, Graded 1-10 Unmanageable through to Everything Fine (Free text field for further description)

Torbay Council- Troubled Families	• **Screening tool to track against outcomes** at person level. Used at assessment and every 3 months (multi agency information so gives overarching picture of need/issues). Includes: ○ **Demographic**- Age/gender etc, Address/postcode

	○ **Housing outcome measures**- Aged 16/17 and homeless/at risk of homelessness, Family receive eviction notice/ NOSP, Housing condition not adequate (currently not collected- but in progress to be collected). Other risk factors for housing need to potentially be added such as OT referral/assessment relating to disability, hoarding, overcrowding, falls, Assessed personal care and/or support needs
Torbay Council- Schools (Capital 1 system)	• **School pupils**- address of child and carers (not always accurate), Date of birth/ Gender, Those with a SEN (Statement of educational need)
Torbay Council- Housing Options service (W2 system)	• **Enquiries** that are telephone, web, email, letter. • **Client demographics**- Age, gender, ethnicity • **Homelessness**- homeless decisions- acceptances and non acceptances of a housing duty, Reason for loss of home, Immediate outcome for household accepted as homeless, Homeless at home, Discharge of duty, • **Temporary accommodation**- Households placed in temporary accommodation, Length of stay in temporary accommodation, • **Leonard Stocks Centre** placement • **Priority need**- believed (at presentation) and the decision • **Household type** (updated if client re presents and it has changed so can be used as a snapshot only), Household members • **Local connection** • **Prevention** advice/actions/outcomes- cases rather than clients • **Bond i**nformation for private landlord • **Devon Home Choice** clients • **MEAM (Making Every Adult Matter) clients**- number of cases (Separate spreadsheet of outcomes) • **Homemaker clients**- number of cases (Hold their own data)
Torbay Council- Connections (W2 system)	• **Enquiries**- Housing help line. Face to face contact routed to this telephone line. Number completing web form ○ Age range ○ Type of enquiry: Chasing progress, Court representation, Devon Home Choice, Eviction, Homeless, Landlord harassment, Mortgage arrears/Repossession, Request for supported living, Tenancy advice, Tenancy deposit, Threat of Violence, Other ○ Address details

	• No face to face footfall count of housing enquiries, actual face to face enquiries are by pre-booked appointment only with Housing Officers

Torbay Council- Community safety	• **Disabled Facilities Grants**
	  o Age of applicant, Address, Tenure, Works required
	• **Housing standards**
	  o **Complaint type**, i.e. housing disrepair etc, address
	  o **Hazards**- scored on an external website (RIAMS) using national scoring. Some of the hazards include: Damp and mould growth; Crowding and space; Lighting; Domestic hygiene, Pests and Refuse; Excess cold; Falling on stairs etc; Electrical hazards; Fire; Structural collapse and falling elements
	• **Rogue Landlord scheme**- Data such as: Prohibition; investigate breaches of management regulation and disrepair; referrals to Housing Benefit- fraudulent claims; criminal activity etc; hazards. (FLARE system)
	• **Anti Social Behaviour**- Incident based- neighbourhood disputes, noise, nuisance etc. Information about complainant

Devon Home Choice (Home Connections Devon Home Choice system)	• **Current address** of applicants, postcode • **Demographics**- Date Of Birth, Ethnicity, Religion, Sexuality, Gender, Nationality • **Band of housing need**, Reasons for banding: Urgent/high/medium/low health and wellbeing need, under occupying tenant, severe overcrowding, lacking 1 bedroom, no permanent home, Ready for move on from supported accommodation within Devon, Prevention of homelessness applicants within Devon, Statutorily homeless households, members of Armed forces in housing need, Emergency/high disrepair, Fleeing violence, Social need or support delivery of another service, Effective management of social housing within Devon, Children under 8 above 3rd floor, Moves for work, Shared facilities, Notice to quit • **Number of bedrooms** required, including need for more/fewer bedrooms • **Disability/health needs** (including if in contact with services) • **Need support** to live independently, Need additional support to take part in DHC • **Moving from supported accommodation**, • **Mobility** requirements • **Current housing**- Homelessness/ risk of homelessness, Current accommodation type, Number in household, Number of children, Sharing kitchen, toilet, bathroom with other people not going to be rehoused with applicant, Live on or above 4th floor with children under 8 years old, Floor level if living in flat, bedsit or maisonette, Home in poor condition, Current landlord

	• **Violence/harassment** • **Criminal convictions/anti social behaviour** • **Moving for work/to be near family** • **Armed forces** • **Finances**- Struggling to afford current home, Rent arrears and eviction, Financial details and benefits • **Local connection** details • **Wish to move to sheltered housing** • **Pregnant** • **Details of others to be rehoused** with main applicant • **Pets** to live with them Much of the above (except band of housing need, number of bedrooms required, mobility requirements) is self certified by the applicant • **Allocations of homes**- Number of bedrooms/property type, Number of bids, Band of need of successful bidder, Mobility need
Torbay Council- Revenue and Benefits	• **Housing Benefit/ Council tax support/ Crisis support applications and payments** o Age o Family type o Tenure (Private or social rented) o Disability o Personal financial data (such as income, savings, rent charges, HB/CTS expenditure, overpayments and recovered overpayments)
Torbay Council- Youth Offending Team	• **Client demographics-** Gender, Age, Address (Youth Justice database- CHILDVIEW) • **Assessments**- clients assessed at least every 3 months- Living Arrangements, Family and Personal Relationships, Neighbourhood (scored according to whether this increases risk of re-offending)- use Reportable Youth Justice Board assessment tool called ASSET • **Youth Homelessness Prevention Panel** attended to predict future needs for YOT clients
Probation (nDelius system	• **Offender housing, education and employment**- Mandatory to collect this new data and associated evidence at start and end of orders and custody/licences

	○ **Circumstance Subtype**- Permanent Independent Housing (Owner - freehold or leasehold), Permanent Independent Housing (social rental from LA/private rental), Bail/Probation Hostel, Transient/short term accommodation, Supported housing, No fixed abode, Friends/Family transient, Friends/Family settled ○ **Demographic**- Standard demographic data
Community Rehabilitation Companies (n-delius and OASys systems)	• **Client demographics-** Address, postcode, gender, age of offenders (but may not be reportable) • **Accommodation situation-** at commencement of community order/license and at the end- settled accommodation on release • **Accommodation status**- bail/probation hostel, friends/family settled, friends/family transient, No fixed abode, permanent independent housing (LA or private rent), permanent independent housing (free hold or lease hold), squat, supported housing, transient/short term accommodation • **Assessment section-** Currently of no fixed abode or in transient accommodation, Suitability of accommodation, Permanence of accommodation, Suitability of location of accommodation. Identify accommodation issues contributing to risks of offending and harm (free text), Accommodation issues linked to risk of serious harm, risks to individual and other risks- Yes/No. Accommodation issues linked to offending behaviour- Yes/No
Drug and Alcohol Service, Shrublands and Walnut Lodge (HALO system)	• NDTMS monthly submission ○ **Client demographics**- Date of birth, Gender, Truncated postcode (may change) ○ **Accommodation need** in the 28 days prior to assessment- No Housing Problem, Housing Problem, NFA – Urgent Housing Problem) ○ **Current Accommodation** (Hostel, Supported Housing, Rented, Temporary, NFA, Traveller, Owned Property) ○ **At risk of eviction**? ○ Above is asked at assessment- this could include people who started treatment many years ago so not accurate position at same point in time • **Local accommodation assessment** (triggered if someone answers Housing Problem, NFA- Urgent Housing Problem within the 'Accommodation need in the 28 days prior to assessment' question. Or completed at any stage of treatment process if required) Not set up to report fully and is not undertaken on every person so will be reduced numbers ○ Current accommodation, Time spent in current accommodation. Number of different addresses in the last 12 months, Has the client ever slept rough, At risk of eviction, Living with anyone with a drug/alcohol problem, Accommodation need in the 28 days prior to assessment. Type and suitability of/ satisfaction with current accommodation (free text), Referral to Housing Support Services

	• **Treatment Outcome Profile** (reviewed every 3 months)- Acute housing problem (yes, no, not answered), Housing risk (yes, no, not answered). Complex to report on due to number of TOPs on the system Not all of the questions above are asked at the same stage, some are not updated, others are updated regularly
NRS- Community Equipment Service	• **Client details-** Gender, Date of birth, Address/postcode, NHS number • **Equipment-** Equipment required, Reason for needing equipment (i.e. hospital discharge etc), Quantity, Prescriber details
Fire Service	• **Home safety visits and incidents-** Address/ post code, Number of occupants, age ranges
Devon and Cornwall Police	• Available online • **Street level crime data-** Crime type by street it was on or near and the outcome • **Victims of violence-** adults- data for England on household and area characteristics, domestic abuse statistics
Schools/ colleges	• Send annual reviews to Torbay Council but don't go on a system. Not easy to collate or use • Download pupil information onto a system (BtoB) every so often- not 100% accurate- doesn't always update addresses
Housing Providers/ Support Providers	• **Registered Providers**- hold their own information • **Supported accommodation**- age/gender, some other demographic information, client needs and outcomes (held by Torbay Council Partnership Commissioning Team)
Homes and Communities Agency	• **Registered Providers returns** aggregated at local authority level: o Numbers of units for general needs/older people/supported housing o Number of bedrooms o Rent/ service charge information o Vacants and sales
CORE data (Continuous Recording of lettings to Social Housing)	• Aggregated at local authority level • **New lettings- Social rent, Affordable rent, General needs, Supported housing**- reason for moving, wheelchair/ level access/ disability requirements, previous tenure, tenant details, property details, reason for vacancy
Job Centre	• Aggregated data for each local authority • Job Seekers Allowance claimant details- rate, age, sex, ethnicity, claim duration
www.gov.uk and	• Aggregated data for each local authority and, in some cases, smaller areas

Office of National Statistics	• **Supply**- Affordable housing supply, Dwelling stock (including vacants), House building, • **Obtaining a home**- Help to Buy figures, Housing Market- ratio of house price to earnings, Council Tax base, Social housing waiting lists • **Land**- Land use change, Green belt statistics, • **Quality of housing**- Condition of dwelling stock, Energy Performance of Buildings certificates • **Homelessness and rough sleeper count, traveller count** • **Household projections** • **Indices of Multiple Deprivation 2015-** domains include 'Barriers to housing and services' and 'Living environment deprivation'. Measures rank of deprivation
Census 2011	• Aggregated data for each local authority, ward level and smaller areas • Tenure, Household make up, House type, Over crowding/ under occupation
Local strategies	• Local Plan • Neighbourhood plans • Strategic Housing Land Availability Assessment- for building • Strategic Housing Market assessment- need • Self build register (online)
Health Equalities Framework	• Learning Disability- Number of people who live in their own home
England level data	
Agency/ Source	**Summary of housing data held, including where known, any issues with data**
Homes and Communities Agency- Elements of the Private Registered Providers statistical returns	
English Housing Survey 2014/15	
www.gov.uk- Repossession activity	
National organisations- • Homeless Link www.homeless.org.uk ,	

- Shelter england.shelter.org.uk
- SITRA www.sitra.org
- Inside Housing www.insidehousing.co.uk
- Crisis www.crisis.org.uk
- Housing Learning Improvement Network www.housinglin.org.uk

Appendix 2: Explanation of statistical significance

Many of the tables in section 4 note whether figures for Torbay are significantly different when compared to other areas (such as England). Below is an explanation of what this means.

When analysing data, confidence intervals are calculated in order to illustrate the range in which the estimated value falls. The wider the confidence intervals, the more variation in terms of the value calculated. Equally, the narrower the confidence intervals, the more precise the estimate.

When comparing different areas, confidence intervals allow us to identify if areas are statistically different compared to other areas. The terms used are significantly different (higher or lower) and not significantly different.

As illustrated in figure 13 below:

- Where confidence intervals overlap with a comparator, this indicates that there is not a significant difference
- Where confidence intervals do not overlap, either higher or lower, then there is a significant difference in the value calculated

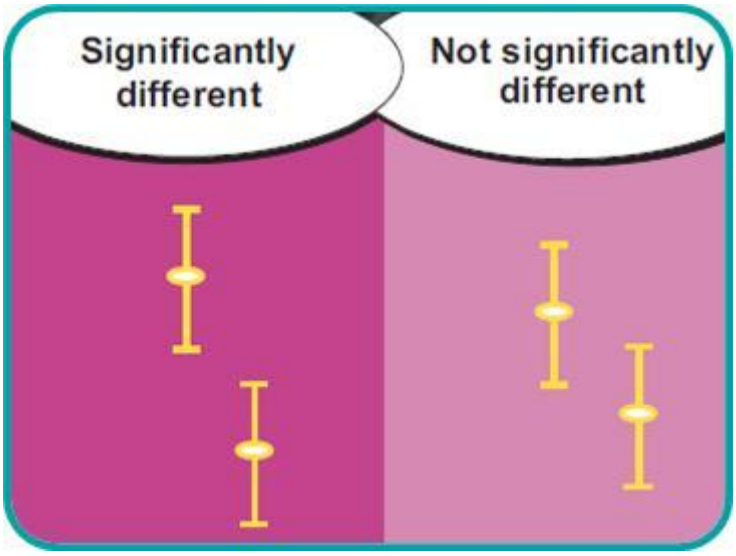



Figure 13: Statistical significance