

Centre for Policy on Ageing  
Information Service

Selected Readings

**Sheltered Housing**

July 2018

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## Centre for Policy on Ageing

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2018

Active and non-active agents: residents' agency in assisted living; by Jari Pirhonen, Iieka Pietela.: Cambridge University Press, January 2018, pp 19-36.

Ageing and Society, vol 38, no 1, January 2018, pp 19-36.

Culturally, institutional care has been seen to strip older people of their status as full adult members of society and turn them into 'have nots' in terms of agency. The substantial emphasis in gerontology of measuring older people's activity and functional ability has unintentionally fostered these stereotypes, as have traditional definitions of agency that emphasise individuals' choices and capacities. The aim of this paper is to discover what kind of opportunities to feel agentic exist for people who have reduced functional abilities and therefore reside in assisted living. In this paper, agency is approached empirically from the viewpoint of Finnish sheltered housing residents. The data were gathered using participant observation and thematic interviews. This study suggests that even people with substantial declines in their functional abilities may feel more or less agentic depending on their functional and material surroundings and the support they receive from the staff, relatives and other residents. The perception that residents' agency in assisted living cannot be reduced to measurable activity has methodological implications for gerontological research on agency. (RH)

ISSN: 0144686X

From : <http://www.cambridge.org/aso>

Addressing loneliness and isolation in retirement housing; by Anne Gray, George Worlledge.: Cambridge University Press, March 2018, pp 615-644.

Ageing and Society, vol 38, no 3, March 2018, pp 615-644.

Loneliness is a significant health risk for older people, that is linked with bereavement, living alone and declining health. Previous research suggests loneliness is common amongst residents of English retirement housing, who show a relatively high incidence of these factors. This invites the question, what can providers of retirement housing do to help their residents avoid loneliness, thus remaining healthier and less likely to need care services? The authors use a survey of 326 retirement-estate managers to investigate the role of staff and residents' groups in developing organised social activities for residents in retirement housing, and the potential of these activities for generating social contacts which may provide a pathway to avoid loneliness. The survey was informed by a literature review with two objectives. The first was to consider the nature and causes of loneliness amongst older people and how these apply to retirement housing residents. The second was to identify good practice models of previous interventions designed to widen social interactions for older people or provide emotional support. The sample was drawn from the all-England property portfolio of a major provider of retirement housing for people over 55. The sampled estates, mostly social rented but including some with a mixture of leasehold and rented dwellings, represent a sector also described as sheltered or supported housing, which has over 550,000 dwellings in the United Kingdom. It is characterised by having some form of staff support for people who are frail, immobile or isolated, such that they may occasionally need help available on call. In the literature review, the authors consider how different kinds of social contact can help develop friendships and meet social support needs, in retirement housing and elsewhere - in particular, organised group activities (clubs, classes, etc.) and specific interventions designed to address loneliness. The fieldwork suggests that organised activities in retirement housing have considerable potential to meet residents' social support needs, but that this potential is often not fully realised. A wider range of activities is needed, which may require the support of housing management staff, volunteers and community organisations. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X16001239>

Perceived safety in extra-care housing for senior residents; by Lisbeth Lindahl, Morgan Andersson, Jan Paulsson.: Taylor and Francis, January-March 2018, pp 58-72.

Journal of Housing for the Elderly, vol 32, no 1, January-March 2018, pp 58-72.

Extra-care housing (ECH) is a new housing model in Sweden, falling between ordinary homes and sheltered housing. The perception of safety among residents living in ECH was explored using in-depth interviews with 28 older people (mean age 83). A qualitative thematic analysis resulted in a model of perceived safety in the housing environment consisting of four themes: being able to manage on my own; a safe social context; being able to stay; and protection and safety. The model can be used for information, planning and development of ECH in general. (RH)

ISSN: 02763893

From : <http://www.tandfonline.com>

2017

Enjoying the third age!: Discourse, identity and liminality in extra-care communities; by Karen West, Rachel Shaw, Barbara Hagger, Carol Holland.: Cambridge University Press, October 2017, pp 1874-1897.

Ageing and Society, vol 37, no 9, October 2017, pp 1874-1897.

Extra-care housing has been an important and growing element of housing and care for older people in the United Kingdom since the 1990s. Previous studies have examined specific features and programmes within extra-care locations, but few have studied how residents negotiate social life and identity. Those that have, have noted that while extra care brings many health-related and social benefits, extra-care communities can also be difficult affective terrain. Given that many residents are now 'ageing in place' in extra care, it is timely to revisit these questions of identity and affect. The authors draw on the qualitative element of a three-year, mixed-method study of 14 extra-care villages and schemes run by the ExtraCare Charitable Trust. They follow M W Alemàn in regarding residents' ambivalent accounts of life in ExtraCare as important windows on the way in which liminal residents negotiate the dialectics of dependence and independence. However, they suggest that the dialectic of interest here is that of the third and fourth age, as described by Chris Gilleard and Paul Higgs in 2010. The authors set that dialectic within a post-structuralist / Lacanian framework, in order to examine the different modes of enjoyment that liminal residents procure in ExtraCare's third age public spaces and ideals. The authors suggest that residents' complaints can be read in three ways: as statements about altered material conditions; as inter-subjective bolstering of group identity; and as fantasmatic support for liminal identities. Finally, the authors examine the implications that this latter psycho-social reading of residents' complaints has for enhancing and supporting residents' well-being. (RH)

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From : <https://doi.org/10.1017/S0144686X16000556>

An extra care community's perceived priorities for whole system relationships: a Q-methodological study; by Paul Grimshaw, Linda McGowan, Elaine McNichol.: Wiley, May 2017, pp 1169-1180.

Health and Social Care in the Community, vol 25, no 3, May 2017, pp 1169-1180.

Health and social care settings worldwide need to sustainably improve the quality of relationships across communities or 'whole systems'. This study informed the development of a relational framework based on stakeholder perspectives. It was grounded in an action research project with practitioners, and drew on a previous literature review to present the underpinning elements of quality relationships as statements, organised under the headings of integrity, respect, fairness, compassion and trust. Using Q methodology, 27 participants, comprising a range of stakeholders (staff, residents, family and service providers), rank-ordered 48 statements based on perceptions of the importance of differing aspects of relationships. By-person factor analysis was used to create five factors or viewpoints by comparing and contrasting using the composite rankings alongside interview data collected for each participant. The first view 'Altogether now' prioritised compassionate engagement. Second, 'Respect is a two-way street' emphasised the need for reciprocal respect and recognition of history. The factor labelled 'Free spirits' posited the dominant view of freedom. The fourth view 'Families \_ strengths and challenges' focused on the necessary and complex involvement of families and finally, 'Helping hands' emphasised the role of relationships in increasing previously low expectations of social integration for previously isolated residents. The different views that existed on the composition of quality relationships could be used to help extra care communities to understand and utilise relationships as a powerful and effective resource. (JL)

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From : [wileyonlinelibrary.com/journal/hsc](http://wileyonlinelibrary.com/journal/hsc)

A model for aging in place in apartment communities; by Heidi H Ewen, Denise C Lewis, Andrew T Carswell (et al).: Taylor and Francis, January-March 2017, pp 1-13.

Journal of Housing for the Elderly, vol 31, no 1, January-March 2017, pp 1-13.

The authors introduce a theoretical model for ageing-in-place housing specialists for those living in congregate housing facilities in the US. A "needs assessment" tool is outlined to help facilitate the successful implementation of a Health and Aging Residential Service Coordinator (HARSC), both from a research perspective and from implementation of a training curriculum for this particular population. A model that provides both on- and off-site services is hypothesised to be most effective. (RH)

ISSN: 02763893

From : <http://www.tandfonline.com>

Older UK sheltered housing tenants' perspectives of well-being and their usage of hospital services; by Glenda Cook, Cathy Bailey, Philip Hodgson (et al.): Wiley, September 2017, pp 1644-1654.

Health and Social Care in the Community, vol 25, no 5, September 2017, pp 1644-1654.

Sheltered housing in the UK is a form of service-integrated housing for people, predominantly aged 60+. This study aimed to examine sheltered housing tenants' views of health and well-being, the strategies they adopted to support their well-being, and their use of health and social care services through a Health Needs Assessment. The study used a parallel, three-strand mixed method approach to encompass the tenants' perceptions of health and well-being (n = 96 participants), analysis of the service's health and well-being database, and analysis of emergency and elective hospital admissions (n = 978 tenant data sets for the period January to December 2012). Tenants' perceptions of well-being were seen to reinforce much of the previous work on the subject with strategies required to sustain social, community, physical, economic, environmental, leisure, emotional and spiritual dimensions. Of the tenants' self-reported chronic conditions, arthritis, heart conditions and breathing problems were identified as their most common health concerns. Hospital admission data indicated that 43% of the tenant population was admitted to hospital (886 admissions), with 53% emergency and 47% elective admissions. The potential cost of emergency as opposed to elective admissions was substantial. The mean length of stay for emergency admissions was 8.2 days (median 3.0 days), while elective hospital admission had a mean length of stay of 1.0 day (median 0.0 days). These results suggest the need for multi-professional health, social care and housing services interventions to facilitate sheltered housing tenants' aspirations, and to support their strategies to live well and independently in their own homes. Equally, there is a need to increase tenants' awareness of health conditions and their management, the importance of services which offer facilitation, resources and support, and the key role played by prevention and rehabilitation. (RH)

ISSN: 09660410

From : <http://wileyonlinelibrary.com/journal/hsc>

Preventing isolation in sheltered housing: challenges in an era of reduced support funding; by Anne M Gray.: Emerald, 2017, pp 186-194.

Working with Older People, vol 21, no 3, 2017, pp 186-194.

This paper aims to inform the policies of sheltered housing providers with regard to preventing isolation amongst residents and in generating practical support between them, particularly in the current period of reduced funding for housing support. The author reports a postal survey of 120 residents across eight estates, focus groups on these and eight other estates, and survey responses from 326 estate managers. Survey findings indicate that childless residents are especially vulnerable to lack of support: they depend on friends or on paid care. Those estates with a rich array of organised social activities generated more support and friendships amongst neighbours than those with few activities. Managers perform an important service in generating and supporting social activities, but their role is diminishing and restricted by short hours on site. Residents' groups need capacity-building support to organise more by themselves. Cross-generational contacts are particularly valuable, but residents need help to access them outside of their own families. Certain forms of group activity which are the most valuable in terms of promoting mental stimulation and exercise are rarely organised by residents' groups without staff support. How to generate mutual aid between residents is an important objective for housing providers in a period of reduced funding for staff time and of severe constraints on social care budgets. (RH)

ISSN: 13663666

From : <http://www.emeraldinsight.com/loi/wwop>

## 2016

Assessing social isolation: pilot testing different methods; by Harry Owen Taylor, Stephanie Herbers, Samuel Talisman, Nancy Morrow-Howell.: Taylor and Francis, April 2016, pp 228-233.

Journal of Gerontological Social Work, vol 59, no 3, April 2016, pp 228-233.

Social isolation is a significant public health problem among many older adults. However, most of the empirical knowledge about isolation derives from community-based samples; and less attention has been given to isolation in older people's housing communities. This pilot study carried out in St Louis, Missouri tested two methods to identify socially isolated residents in low-income senior housing, and to compare findings about the extent of isolation from these two methods. The first method, self-report by residents, included 47 out of 135 residents who completed in-person interviews. To determine self-report isolation, residents completed the Lubben Social Network Scale 6 (LSNS-6). The second method involved a staff member who reported the extent of isolation on all 135 residents via an online survey. Results indicate that 26% of residents who were interviewed were deemed socially isolated by the LSNS-6. Staff members rated 12% of residents as having some or a lot of isolation. In comparing the two methods, staff members rated 2% of interviewed residents as having a lot of isolation. The combination of self-report and staff report could be more informative than just

self-report alone, particularly when participation rates are low. However, researchers should be aware of the potential discrepancy between these two methods. (RH)

ISSN: 01634372

From : <http://www.tandfonline.com>

Building companionship: how better design can combat loneliness in later life; by Claudia Wood, Jo Salter, Demos; McCarthy & Stone. London: Demos, April 2016, 25 pp.

There is growing concern about isolation and its impact on older people's health and its cost implications for the NHS and social care. This report focuses on how loneliness in later life can be combated by creating more connected communities and better design of retirement housing. It draws on the results of two surveys: the first was an independent survey carried out in December 2015 by Voluntas of 2,422 McCarthy & Stone homeowners exploring life in McCarthy & Stone developments; the second was an omnibus survey of 2,059 members of the British general public by Populus Data Solutions in March 2016, which asked questions about socialising, loneliness and community spirit. The report explores the link between retirement housing and loneliness, and how retirement housing might tackle this by having shared facilities, communal space, activities, and provision of maintenance, as well as design considerations. More than a million older people in Great Britain always or often feeling lonely, with the highest levels of loneliness being reported in London and the North West, and the lowest in Yorkshire. Those aged 80+ are almost twice as likely to report feeling lonely compared to their younger counterparts. Those living in retirement housing tend to report feeling much less lonely than their peers in mainstream housing. (RH)

From : Demos, Unit 1, Lloyds Wharf, 2-3 Mill Street, London SE1 2BD. Download:

<http://www.demos.co.uk/wp-content/uploads/2016/04/Building-Companionship-Report.pdf>

Environmental design that supports healthy aging: evaluating a new supportive living facility; by Steve Friesen, Suzette Bremault-Phillips, Leanne Rudrum, Laura G Rogers.: Taylor and Francis, January-March 2016, pp 17-33.

Journal of Housing for the Elderly, vol 30, no 1, January-March 2016, pp 17-33.

The environments in which people live contribute to their health. This evaluation of a new seniors assisted living facility in Alberta, Canada studied the role of the built environment on healthy ageing. An environmental design survey was used to examine resident satisfaction and place attachment as a way to increase awareness of person-environment fit. Surveyed residents reported high levels of satisfaction with the built environment, and satisfaction scores were positively correlated with measures of place attachment. The results of this evaluation increases our understanding of how the built environment affects older people in residential living facilities, and the value of measures examining person-environment fit. (RH)

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From : [www.tandfonline.com](http://www.tandfonline.com)

Geographic migration among residents in seniors housing and care communities: evidence from the Residents Financial Survey; by Norma B Coe, April Yanyuan Wu.: Taylor and Francis, July-September 2016, pp 312-329.

Journal of Housing for the Elderly, vol 30, no 3, July-September 2016, pp 312-329.

On the whole, older people show relatively little inclination for geographical migration within the U.S. The authors were interested in the geographical migration patterns among a specific subset of older people that they know have moved out of the traditional family home \_ those living in assisted living and independent living communities. They analysed data from the Residents Financial Survey (RFS, conducted in 2011), a survey of 2,617 residents in assisted living and independent living communities that asked about their previous living arrangement, where they lived before moving to their current community, and how their care needs were previously met. The authors find there is substantial migration among respondents. Using self-reported and community-reported location and zip code information, they calculated whether people moved across state lines and computed the distance people moved between their previous location and their current community. While the median distance moved is less than 10 miles, 20% moved across state lines, and 21% of the sample moved more than 100 miles; the average distance moved among the sample was 165 to 190 miles. The evolution of living arrangements shows that there are strong correlations between respondents' current living arrangements, previous living arrangements, and their plan to move in the future. (RH)

ISSN: 02763893

From : <http://www.tandfonline.com>

Live-in care workers in sheltered housing for older adults in Israel: the new sheltered housing law; by Esther Iecovich.: Taylor and Francis, October-December 2016, pp 277-291.

Journal of Aging and Social Policy, vol 28, no 4, October-December 2016, pp 277-291.

Supportive housing schemes were historically aimed to provide group accommodation for older adults. With the ageing of residents, facilities were required to enable them to receive care services to allow them to age in place. Thus, different countries and different facilities developed different models of housing with care, reflecting cultural and policy diversities. Despite all of the different models, there are many commonalities among the supportive housing schemes across countries. These include provision of dwelling units and care services provided either by the facility or by external agencies. This article aims to: describe the historical development of the ever-evolving supportive care housing phenomena; point at variations in models of housing and care within the international context; and present a new Israeli model that enables residents to privately hire live-in care workers to meet their care needs. This is a unique model in the international context that has not been reported before. The article describes the main ideas of the new model and discusses the challenges that it raises, and pinpoints the unresolved issues associated with the presence of live-in care workers employed by residents of sheltered housing that should be addressed. (RH)

ISSN: 08959420

From : <http://www.tandfonline.com>

Mental illness in assisted living: challenges for quality of life and care; by Leslie A Morgan, Rosa Perez, Ann Christine Frankowski (et al).: Taylor and Francis, April-June 2016, pp 185-198.

Journal of Housing for the Elderly, vol 30, no 2, April-June 2016, pp 185-198.

An unknown number of mentally ill older people in the United States receive care in assisted living, along with people facing physical or cognitive challenges. While dementia is familiar in assisted living, the authors' data indicate that neither staff nor residents are prepared to work or live with the mentally ill. Challenges are created for professionals, since these residents bring diverse needs. Daily inter-resident interactions are also disrupted or stressful. Qualitative data describe the impacts on quality of resident life, as well as care and management dilemmas identified within five assisted-living settings with a varying presence of mental illness among residents. (RH)

ISSN: 02763893

From : <http://www.tandfonline.com>

Quality of life for diverse older adults in assisted living: the centrality of control; by Sharon D Koehn, Atiya N Mahmood, Sarah Stott-Eveneshen.: Taylor and Francis, October-December 2016, pp 512-536.

Journal of Gerontological Social Work, vol 59, nos 7-8, October-December 2016, pp 512-536.

This pilot project asked, 'How do ethnically diverse older adult residents of assisted living (AL) facilities in British Columbia (BC) experience quality of life? And, what role, if any, do organisational and physical environmental features play in influencing how quality of life is experienced?' The study was conducted at three AL sites in BC: two ethnoculturally targeted and one non-targeted. Environmental audits at each site captured descriptive data on policies, fees, rules, staffing, meals, activities, and the built environment of the AL building and neighbourhood. Using a framework that understands the quality of life of older adults to be contingent on their capability to pursue 5 conceptual attributes \_ attachment, role, enjoyment, security and control \_ the authors conducted 3 focus groups with residents (1 per site) and 6 interviews with staff (2 per site). Attributes were linked to the environmental features captured in the audits. All dimensions of the environment - especially organisational - influence tenants' capability to attain the attributes of quality of life, most importantly control. Although many tenants accept the trade-off between increased safety and diminished control that accompanies a move into AL, more could be done to minimize that loss. Social workers can advocate for the necessary multi-sectoral changes. (RH)

ISSN: 01634372

From : <http://www.tandfonline.com>

Resident-managed elder intentional neighborhoods: do they promote social resources for older adults?; by Anne P Glass.: Taylor and Francis, October-December 2016, pp 554-571.

Journal of Gerontological Social Work, vol 59, nos 7-8, October-December 2016, pp 554-571.

Social isolation has serious negative public health impacts for older adults. Survey data were collected at three resident-managed elder intentional neighbourhoods in the United States (n = 59), to determine if these neighbourhoods, each based on the co-housing model, promote development of social resources for their residents. Social resources were measured on three dimensions: social networks, neighbourly support, and satisfaction with the neighbourhood community. Respondents were White, mean age 73.3 (range = 63-91), primarily female (76.3%), and generally had high levels of education and self-reported health. Almost half (47%) were never married or divorced, and 37% were childless. Inclusion of neighbourhood ties ameliorated

risk of social isolation. Satisfaction with support and a variety of neighbouring behaviours were reported. These neighbourhoods are meeting the needs of a potentially at-risk population as an avenue to promote social resources and to reduce social isolation. The implications for gerontological social workers include a role in helping to mobilise and support these types of neighbourhoods as a way to encourage mutual support among older adults. With the increase in the ageing population, such models of proactive interdependence and communal coping have the potential to lessen or delay the demands that socially isolated older people place on social workers. (RH)

ISSN: 01634372

From : <http://www.tandfonline.com>

The use of common spaces in assisted living schemes for older persons: a comparison of somatic and dementia units; by Margan Andersson, Jan Paulsson, Inga Malmqvist, Goran Lindahl.: Cambridge University Press, April 2016, pp 837-859.

Ageing and Society, vol 36, no 4, April 2016, pp 837-859.

This study explores how common spaces in assisted living schemes for older people are used by the residents. Common spaces are the major location for in-house social interaction on the units. Observation studies, group interviews with staff and individual interviews with residents, relatives, architects and key stakeholders in the context of Swedish elder-care were conducted. The results show a higher presence on the dementia units, compared to the somatic units. No significant correlation was found between the residents' mobility limitations and their degree of presence in the common spaces. The results also suggest a contradiction between the staff's intentions to provide a social context and the capabilities of the residents. Although common spaces are not used much between meals, the residents stress their importance for social interaction, suggesting that common spaces have important qualitative aspects, rather than quantitative. The results also show that few of the residents used the common spaces together with their relatives. The increasing use of assistive technology creates a shortage of space, suggesting a conflict between the efforts to create a home-like environment and the use of assistive technology. (RH)

ISSN: 0144686X

From : [journals.cambridge.org/aso](http://journals.cambridge.org/aso)

## 2015

Client safety in assisted living: perspectives from clients, personal support workers and administrative staff in Toronto, Canada; by Brittany Speller, Paul Stolee.: Wiley Blackwell, March 2015, pp 131-140.

Health and Social Care in the Community, vol 23, no 2, March 2015, pp 131-140.

Assisted living enables older people to receive care services specific to their needs while maintaining their independence and privacy. This study aimed to determine the gaps and strengths in care related to safety in assisted living facilities (ALFs) for older people. A qualitative descriptive research design was used to provide a comprehensive understanding of client safety from the perspectives of clients, administrative staff and personal support workers. Interviews were conducted with 22 key informants from three ALFs in Toronto, Ontario throughout July 2012. All interviews were semi-structured, audio-recorded and transcribed verbatim. Initial deductive analysis used directed coding based on a prior literature review, followed by inductive analysis to determine themes. Three themes emerged relating to the safety of clients in ALFs: meaning of safety, a multi-faceted approach to providing safe care, and perceived areas of improvement. Sub-themes also emerged, including physical safety, multiple factors, working as a team, respecting clients' independence, communication, and increased education and available resources. The study findings can contribute to the improvement and development of new processes to maintain and continually ensure safe care in ALFs. (rh)

ISSN: 09660410

From : [wileyonlinelibrary.com/journals/hsc](http://wileyonlinelibrary.com/journals/hsc)

Correlates of attitudes toward personal aging in older assisted living residents; by Nan Sook Park, Yuri Jang, Beom S Lee ... (et al).: Taylor and Francis, April 2015, pp 232-252.

Journal of Gerontological Social Work, vol 58, no 3, April 2015, pp 232-252.

This study explored factors contributing to older adults' self-perceptions about their own ageing in assisted living (AL) communities. Data analysis was completed based on interviews with 150 older residents from 17 AL communities in the United States. The study examined the effect of objective factors (health-related variables/negative life events) and subjective factors (satisfaction with facility/social support) on residents' attitudes toward personal ageing and assessed whether health perception mediated the relationship between health-related variables/negative life events and residents' attitudes toward personal ageing. Multiple regression analyses found that functional disability and hearing impairment negatively affected attitudes toward personal ageing among AL residents, and satisfaction with social support positively influenced attitudes. Health



perception mediated attitudes toward personal ageing. Findings suggest the importance of social workers helping older AL residents recognise social support as a means of promoting their positive self-regard. (JL)

ISSN: 01634372

From : <http://www.tandfonline.com>

Interpersonal relationships and subjective well-being among older adults in sheltered housing; by Daniel J Herbers, Louise Meijering.: Hipatia Press, July 2015, pp 14-44.

Research on Ageing and Social Policy, vol 3, no 1, July 2015, pp 14-44.

The authors examine how experiences with interpersonal relationships contribute to older adults' well-being in the residential context of sheltered housing. They draw on data collected from sixteen in-depth interviews with older adults living in sheltered housing in a small town in northern Netherlands. Participants experienced the interaction with their children as of primary importance in their interpersonal relationships, while interactions with other residents were rather superficial. Their children offered emotional support as well as instrumental support and were found to play essential roles in participants' well-being. Moreover, participants expressed that the social and physical activities organised by the residential care facility offered them the opportunity to remain physically and mentally active. The help received from housekeepers and caregivers was found to be another important element of interpersonal relationships, and so too was the reciprocal nature of support exchanged with other sheltered housing residents. The authors conclude that the benefits of interpersonal relationships in sheltered housing should be considered when designing policy for the well-being of older adults ageing in place. (OFFPRINT.) (RH)

ISSN: 2014671X

From : <http://doi.org/10.17583/rasp.2015.1416>

Scandinavian contrasts and Norwegian variations in special housing for older people; by Svein Olav Daatland, Karin Hoyland, Berit Otnes.: Taylor and Francis, January-June 2015, pp 180-196.

Journal of Housing for the Elderly, vol 29, nos 1-2, January-June 2015, pp 180-196.

De-institutionalisation is a general trend for Scandinavian long-term care over the last decades. Denmark and Sweden have taken this trend a step further than Norway has: Denmark suspended institutional care altogether in 1987, and Sweden in 1992. Since then, residential care has been provided to individuals in special housing in various forms. This housing is in principle "independent housing", where residents are tenants and are provided services according to needs and not sites. This article concentrates on the Norwegian variations to this system, as this is the only country of the three that still provides residential care under two "regimes": institutional care and assisted housing. Is assisted housing essentially different from institutional care, or is it better described as old wine in new bottles? The latter may be the case for Sweden, whereas Denmark stands out as having the most housing-oriented care model. Institutional care (i.e. nursing homes) still dominates in Norway, where assisted housing is merely a minor supplement to institutional care in most municipalities. This article explores the reasons for these trends and, in particular, the reasons for the Norwegian resistance to assisted housing as an alternative form of residential care. (RH)

ISSN: 02763893

From : <http://www.tandfonline.com>

## 2014

Feeling in control: comparing older people's experiences in different care settings; by Lisa Callaghan, Ann-Marie Towers.: Cambridge University Press, September 2014, pp 1427-1451.

Ageing and Society, vol 34, no 8, September 2014, pp 1427-1451.

The promotion of choice and control for older people is a policy priority for social care services in the United Kingdom and is at the heart of recent drives to personalise services. Increasingly, we are seeing a move away from institutionalised care (e.g. in care homes) towards enablement, with more services being delivered in community-based settings. Extra care housing has been promoted as a purpose-built, community-based alternative to residential care for older people. However, whilst accounts of users' experiences in particular service types are plentiful, the use of different instrumentation and measures makes comparison between settings difficult. The authors combined data from four studies where participants were older people either living in care homes or extra care housing, or receiving care at home. All of these studies asked participants to rate their control over daily life, using the Adult Social Care Outcomes Toolkit (ASCOT). This paper presents the results of an ordinal logistic regression analysis indicating that, after controlling for differences in age, ability to perform activities of daily living (ADLs) and self-rated health, setting had a significant effect on older people's sense of control. Residents in care homes and extra care housing report similar levels of control over daily life, but consistently report feeling more in control than older people receiving care at home. Implications for policy and practice are discussed. (RH)

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From : [journals.cambridge.org/aso](http://journals.cambridge.org/aso)

Perceived barriers to optimum nutrition among congregate (sheltered) housing residents in the USA; by Meena Mahadevan, Heather Hartwell, Charles Feldman, Emily Raines.: Sage, July 2014, pp 477-490.

Health Education Journal, vol 73, no 6, July 2014, pp 477-490.

Malnutrition, secondary to decreased food intake, is a public health problem of epidemic proportions among older adults in the United States of America (USA). Compared to community-dwelling senior citizens, congregate (sheltered) housing residents are found to be frailer, with documented deficiencies in several major and minor nutrients, and associated health complications. While studies have quantified these problems, translational research examining the perceived factors influencing their daily food habits is lacking. Using a qualitative approach, this study was undertaken to further and enhance understanding of this complex, under-researched area, and to form the basis for better nutritional management of this group. Participants (n = 46) were convenience sampled from four sheltered housing settings located in the suburbs of northern New Jersey, USA. Data were collected using a brief demographic questionnaire, and a focus group guide designed utilising constructs derived from socio-ecological theory. Content analysis of the transcripts identified several themes suggesting that a repertoire of individual, interpersonal, and organisational factors may serve as barriers to optimum nutritional health among residents. With an emphasis on utilising their perspectives to explain and interpret behaviour, the qualitative approach adopted offered a perfect vehicle for shifting the focus from measuring dietary outcomes to clarifying how participants arrive at the decisions they made. This study is a step forward in providing the empirical foundations necessary to design a comprehensive intervention with effective strategies to motivate and encourage sheltered housing residents to make healthier food choices and improve their overall health. (RH)

ISSN: 00178969

From : [hej.sagepub.com](http://hej.sagepub.com)

The rhythm of ageing amongst Chinese elders in sheltered housing; by Siew-Peng Lee.: Cambridge University Press, October 2014, pp 1505-1524.

Ageing and Society, vol 34, no 9, October 2014, pp 1505-1524.

This paper examines how some older Chinese tenants in a cluster of housing schemes in the north of England differed in their perception, consciousness and management of time. It examines how there was too much or too little time for some of these tenants, and how time played a part in their personal and social identification arising from their experiences of migration. Lefebvre's concept of rhythm analysis is intended to be a transdisciplinary theory that could be used to theorise 'everyday life'. The writer superimposes this concept on the activity and disengagement theories of ageing to add meaning to the ethnographic data gathered, and argues that ageing is not a simple matter of activity or disengagement. These Chinese elders coped with change through a flexible and ongoing process of adapting to different rhythms of life. This paper aims to contribute to the empirical understanding of ageing for a minority in Britain, and to present a novel theoretical perspective on research approaches to ageing. (RH)

ISSN: 0144686X

From : [journals.cambridge.org/aso](http://journals.cambridge.org/aso)

## 2013

12-month incidence, prevalence, persistence, and treatment of mental disorders among individuals recently admitted to assisted living facilities in Maryland; by Quincy M Samus, Chiadi U Onyike, Deirdre Johnston ... (et al).: Cambridge University Press, May 2013, pp 721-731.

International Psychogeriatrics, vol 25, no 5, May 2013, pp 721-731.

The present study aimed to estimate the 12-month incidence, prevalence and persistence of mental disorders among recently admitted assisted living (AL) residents and to describe the recognition and treatment of these disorders. 200 recently admitted AL residents in 21 randomly selected AL facilities in Maryland received comprehensive physician-based cognitive and neuropsychiatric evaluations at baseline and 12 months later. An expert consensus panel adjudicated psychiatric diagnoses (using DSM-IV-TR criteria) and completeness of workup and treatment. Incidence, prevalence and persistence were derived from the panel's assessment. Family and direct care staff recognition of mental disorders was also assessed. Results showed that at baseline three-quarters suffered from a cognitive disorder (56% dementia, 19% Cognitive Disorders Not Otherwise Specified) and 15% from an active non-cognitive mental disorder. Twelve-month incidence rates for dementia and non-cognitive psychiatric disorders were 17% and 3% respectively, and persistence rates were 89% and 41% respectively. Staff recognition rates for persistent dementias increased over the 12-month period but 25% of cases were still unrecognised at 12 months. Treatment was complete at 12 months for 71% of persistent

dementia cases and 43% of persistent non-cognitive psychiatric disorder cases. The study concludes that individuals recently admitted to AL are at high risk for having or developing mental disorders and a high proportion of cases, both persistent and incident, go unrecognised or untreated. Routine dementia and psychiatric screening and reassessment should be considered a standard care practice. Further study is needed to determine the longitudinal impact of psychiatric care on resident outcomes and use of facility resources. (JL)

ISSN: 10416102

From : [journals.cambridge.org/ipg](http://journals.cambridge.org/ipg)

Influence of late life stressors on the decisions of older women to relocate into congregate senior housing; by Heidi H Ewen, Jasleen Chahal.: Taylor and Francis, October-December 2013, pp 392-408.

Journal of Housing for the Elderly, vol 27, no 4, October-December 2013, pp 392-408.

Late-life stressors often require individuals to make substantial alterations in behaviour and lifestyle, and can affect their overall health and well-being. Relocation is a significant life stress, regardless of age. The primary aim of this study is to elucidate the push-pull factors associated with moving into congregate senior housing. The secondary aim is to investigate the decision-making processes and stresses associated with moving into a congregate living environment. Interviews were conducted with 26 women who were new residents in congregate senior housing. As expected, relocation was considered to be stressful, although individual differences were found among perceptions of relocation stresses. Women who had made the decision to relocate on their own, showed evidence of better psychosocial well-being at the time of the move. One-quarter of the sample chose to move, to provide care to another person. As the options for senior housing continue to evolve and the number of adults reaching advanced age continues to increase, it is important to understand the factors that contribute to successful adaptation. This knowledge will enable facility administrators to implement programmes and procedures to assist incoming residents with getting used to their new homes. (RH)

ISSN: 02763893

From : <http://www.tandf.co.uk/journals>

Integrated housing with care for older people; by Imogen Blood.: Emerald, 2013, pp 178-187.

Journal of Integrated Care, vol 21, no 4, 2013, pp 178-187.

The research explored the way in which different services, providers and other key players work together in housing with care (HWC) schemes and the impact of this on the quality of life of the older people living in them, especially those with high support needs. This was a qualitative study which included interviews with 47 residents and five relatives at 19 private and not-for-profit schemes across the UK and 52 professionals from provider, statutory and other relevant organisations. Most participants were very satisfied with the services in HWC but a third described problems linked to 'boundary' issues, where gaps, delays or confusion had arisen at the interface between teams, organisations or professional groups. Gaps often occurred where tasks were relatively small: they affected the quality of life of older people with high support needs but did not necessarily outweigh the benefits of living in HWC. This study identifies ways of improving integrated working in HWC and beyond. The paper is relevant to those commissioning and providing services to older people and to all those with an interest in integrating care and housing. It is the first UK-wide, cross-sector study to focus specifically on the boundaries between roles and responsibilities and their impact on residents in HWC. (JL)

ISSN: 14769018

From : [www.emeraldinsight.com/jica.htm](http://www.emeraldinsight.com/jica.htm)

Predictors of nursing home placement from assisted living settings in Canada; by Colleen J Maxwell, Andrea Soo, David B Hogan (et al.): Cambridge University Press, December 2013, pp 333-348.

Canadian Journal on Aging, vol 32, no 4, December 2013, pp 333-348.

The authors sought to estimate the incidence of long-term care (LTC) placement, and to identify resident- and facility-level predictors of placement among older residents of designated assisted living (AL) facilities in Alberta, Canada. Included were 1,086 AL residents from 59 facilities. Research nurses completed interRAI-AL resident assessments and interviewed family caregivers and administrators. Predictors of placement were identified with multivariable Cox proportional hazards models. The cumulative incidence of LTC admission was 18.3% by 12 months. Significantly increased risk for placement was evident for older residents and those with poor social relationships, little involvement in activities, cognitive and/or functional impairment, health instability, recent falls and hospitalizations/emergency department visits, and severe bladder incontinence. Residents from larger facilities, with a Licensed Practice Nurse (LPN) and/or Registered Nurse (RN) on-site 24/7 and with an affiliated primary care physician, showed lower risk of placement. These findings highlight clinical and policy areas where targeted interventions may delay LTC admissions. (RH)

ISSN: 07149808

From : [journals.cambridge.org/cjg](http://journals.cambridge.org/cjg)

Social relationships of African American and Hispanic older assisted living residents: exploring the role of race and ethnicity; by Nan Sook Park, Debra Dobbs, Iraidia V Carrion (et al).: Taylor and Francis, October-December 2013, pp 369-391.

Journal of Housing for the Elderly, vol 27, no 4, October-December 2013, pp 369-391.

African American and Hispanic older adults are under-represented in assisted living communities, so little is known about how they experience social relationships in these settings. This study explored resident-to-resident and resident-to-staff relationships experienced and perceived by African American and Hispanic older residents in assisted living settings. In-depth interviews with 15 African American and 15 Hispanic older adults were conducted in seven assisted living communities in Central Florida. Three salient themes emerged using a grounded theory approach: formation of relationships: emotional vs instrumental support; language as a facilitator or barrier; and avoidance of inter-racial relationships. Implications for providing culturally competent services in assisted living communities with diverse populations are discussed. (RH)

ISSN: 02763893

From : <http://www.tandf.co.uk/journals>

What's in a name?: similarities and differences in international terms and meanings for older peoples' housing with services; by Anna L Howe, Andrew E Jones, Cheryl Tilse. Cambridge: Cambridge University Press, May 2013, pp 547-578.

Ageing and Society, vol 33, no 4, May 2013, pp 547-578.

The diversity of terms and meanings relating to housing with services for older people confounds systematic analysis, especially in international comparative research. This paper presents an analysis of over 90 terms identified in literature from the United Kingdom, the United States of America, Canada, Australia and New Zealand reporting types of housing with services under the umbrella of "service integrated housing" (SIH), defined as all forms of accommodation built specifically for older people in which the housing provider takes responsibility for delivery of one or more types of support and care services. A small number of generic terms covering housing for people in later life, home and community care, and institutional care are reviewed first to define the scope of SIH. Review of the remainder identifies different terms applied to similar types of SIH, similar terms applied to different types, and different terms that distinguish different types. Terms are grouped into those covering SIH focused on lifestyle and recreation, those offering only support services, and those offering care as well as support. Considerable commonality is found in underlying forms of SIH, and common themes emerge in discussion of drivers of growth and diversification, formal policies and programmes, and symbolic meanings. In establishing more commonality than difference, clarification of terminology advances policy debate, programme development, research and knowledge transfer within and between countries. (RH)

ISSN: 0144686X

From : [journals.cambridge.org/aso](http://journals.cambridge.org/aso)

## **2012**

Annual Extra Care Housing Conference 2012: Thursday 23 February; by Laing and Buisson. London: Laing and Buisson, 2012, various paginations.

Biographies of speakers and their PowerPoint texts from the Conference which was held in London. Themes covered were: funding and investing; dementia in extra care; extra care and the housing slump; development and construction perspective of extra care; rolled up charges and other revenue funds; making the case for extra care; the viability of extra care accommodation under the Health and Social Care Act (Regulated Activities) Regulations 2010; telecare and extra care housing; and fire risks and older people. (RH)

From : Laing and Buisson, 29 Angel Gate, City Road, London EC1V 2PT. <http://www.laingbuisson.co.uk>

The characteristics of residents in extra care housing and care homes in England; by Robin Darton, Theresia Baumker, Lisa Callaghan ... (et al).

Health and Social Care in the Community, vol 20, no 1, January 2012, pp 87-96.

Extra care housing has been viewed as a possible alternative or replacement for residential care. In 2003, the Department of Health announced capital funding to support the development of extra care housing, making funding conditional on participating in an evaluative study. This paper forms part of this evaluation. It presents findings on the characteristics of the residents, drawing on information collected on demographic characteristics and care needs for the residents at the time of moving into 19 schemes within six months of opening. The findings are compared to a 2005 survey of residents moving into care homes providing personal care. The findings show that overall the people who moved into extra care were younger and much less physically and cognitively impaired than those who moved into care homes, although a minority had similar levels of physical impairment. Overall levels of severe cognitive impairment were much lower in all schemes than the overall figure for residents of care homes, even among schemes designed specifically to provide for residents with

dementia. The results suggest that, although extra care housing may be operating as an alternative to care homes for some individuals, it is mainly providing for a population who may be making a planned move rather than reacting to a crisis. (JL)

ISSN: 09660410

From : <http://www.ingentaconnect.com/content/bsc/hsc>

Choosing among residential options: results of a vignette experiment; by Francis G Caro, Christine Yee, Samantha Levien ... (et al).

Research on Aging, vol 34, no 1, January 2012, pp 3-33.

Older people who experience declining health are often faced with difficult decisions about possible residential relocation. The present study aimed to determine how five distinct dimensions - functional status, features of current housing, social networks, features of retirement communities and financial considerations - affect decisions to relocate to a retirement community. A vignette experiment with a factorial design was conducted involving both older people and adult children who were concerned with an ageing parent. Research participants were influenced by each of the dimensions. However functional status of the vignette participants had the greatest impact and financial considerations the least. Adult children were more likely to recommend moves than were older people themselves. The research is suggestive of the potential for use of vignette experiments for a fuller understanding of relocation decisions. (JL)

ISSN: 01640275

From : <http://roa.sagepub.com/>

Deciding to move into extra care housing: residents' views; by Theresia Baumker, Lisa Callaghan, Robin Darton ... (et al).

Ageing and Society, vol 32, part 7, October 2012, pp 1215-1245.

Extra care housing aims to meet the housing, care and support needs of older people, while helping them to maintain their independence and privacy. This paper presents findings on factors motivating older people to move to extra care housing, their expectations of living in this new environment, and whether these differ for residents moving to the smaller schemes or larger retirement villages. In total, 949 people responded, 456 who had moved into the smaller schemes and 493 into the villages. Of the residents who moved into the villages most (75%) had not received a care assessment prior to moving in, and had no identified care need. There was evidence that residents with care needs were influenced as much by some of the attractions of their new living environment as those without care needs who moved to the retirement villages. The most important attractions of extra care housing for the vast majority of residents were: tenancy rights, flexible onsite care and support, security offered by the scheme and accessible living arrangements. The results suggest that, overall, residents with care needs seemed to move proactively when independent living was proving difficult rather than when staying put was no longer an option. A resident's level of dependency did not necessarily influence the importance attached to various push and/or pull factors. This is a more positive portrayal of residents' reasons for moving to smaller schemes than in previous UK literature, although moves did also relate to residents' increasing health and mobility problems. As in other literature, the moves of village residents without care needs seemed to be planned ones mostly towards facilities and in anticipation of the need for care services in the future. (JL)

ISSN: 0144686X

From : <http://www.journals.cambridge.org/aso>

Design for aging: international case studies of building and program; by Jeffrey Anderzhon, David Hughes, Stephen Judd (et al). Hoboken, NJ: John Wiley, 2012, 300 pp.

A book which brings together 26 case studies of aged care environments from Australia, Japan, Sweden, Denmark, the Netherlands, the UK and the United States. The intention is to illustrate that the physical environment and the idea of belonging are integral to care that is offered, as much as the design of the buildings. The UK schemes are: Belong Atherton, Wigan, Greater Manchester; Heald Farm Court, Newton-le-Willows, Merseyside; Sandford Station, Winscombe, North Somerset; and The Brook, Coleraine, Northern Ireland. (RH)

From : [wiley.com](http://wiley.com)

Does the design of extra-care housing meet the needs of the residents?: a focus group study; by Sarah Barnes, Judith Torrington, Robin Darton ... (et al).

Ageing and Society, vol 32, part 7, October 2012, pp 1193-1214.

The study objective was to explore the views of residents and relatives concerning the physical design of extra-care housing. Five focus groups were conducted with residents in four extra-care schemes in England. One focus group was carried out with relatives of residents from a fifth scheme. Schemes were purposively sampled to represent size, type, and resident tenure. Two over-arching themes emerged from the data: how the building

supports the lifestyle and how the building design affects usability. Provision of activities and access to amenities were more restrictive for residents with disabilities. Independent living was compromised by building elements that did not take account of reduced physical ability. Other barriers to independence included poor kitchen design and problems doing laundry. Movement around the schemes was difficult and standards of space and storage provision were inadequate. The buildings were too hot, too brightly lit and poorly ventilated. Accessible external areas enabled residents to connect with the outside world. The study concludes that while the design of extra-care housing meets the needs of residents who are relatively fit and healthy, those with physical frailties and/or cognitive impairment can find the building restrictive resulting in marginalisation. (JL)  
ISSN: 0144686X

From : <http://www.journals.cambridge.org/aso>

Extra care housing for people with sight loss: lighting and design; by Judith Torrington, Alan Lewis, Thomas Pocklington Trust; School of Architecture, University of Sheffield. London: Thomas Pocklington Trust, 2012, 6 pp (Research findings, no 36).

This publication presents findings from research about the design of extra care housing from the perspective of people with sight loss undertaken by Judith Torrington and Alan Lewis the School of Architecture, University of Sheffield. The study asked 44 people living in 11 extra care housing schemes about their experiences of the buildings they lived in, evaluated their homes, and reviewed data from a previous evaluation of 23 extra care housing schemes. The study produced a new tool for evaluating buildings, EVOLVE (Evaluation of Older People's Living Environments), itself the outcome of research funded by the Engineering and Physical Sciences Research Council (EPSRC). The tool comprises electronic checklists that, when completed, create a new profile of how well a building can support residents. The checklists are designed to be used in a walk-through of a housing scheme. The EVOLVE toolkit is available on the Housing LIN website (at <http://www.housinglin.org.uk> and search for EVOLVE). (RH)

From : Thomas Pocklington Trust, Pier House, 90 Strand on the Green, London W4 3NN. [www.pocklington-trust.org.uk](http://www.pocklington-trust.org.uk)

Supported housing for older people in the UK: an evidence review; by Jenny Pannell, Imogen Blood, Imogen Blood and Associates; Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, December 2012, 4 pp (Inspiring social change; Ref: 2846).

Around 5% of the older population live in specialist housing with support. Across the UK there are almost 18,000 developments and around 550,000 units (480,000 in England) of such housing, built and managed by not-for-profit and private providers, and providing a wide range of accommodation and levels of support. This summary reports on a study which is part of JRF's Better Life programme. The study included a literature search examining more than 100 publications (mainly since 2000). Analysis of official statistics in two English datasets was commissioned from the New Policy Institute for CORE (Continuous Recording of Lettings and Sales in Social Housing in England), and from the Centre for Housing Research, University of St Andrews, for Supporting People monitoring. The study examines the evidence and gaps in it, to consider what sheltered and retirement housing offers in terms of quality of life for those with high support needs. It notes that researchers have paid more attention to "housing with care" which comprises only 10% of the total supported housing stock, while sheltered housing has been largely ignored. Recent and forthcoming changes to funding and benefits for older people's housing and support services need underpinning by robust evidence, particularly on owner-occupied retirement housing, and on the growing private rented market. (RH)

From : Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP.

## 2011

Architectural space as a moulding factor of care practices and resident privacy in assisted living; by Catharina Nord.

*Ageing and Society*, vol 31, part 6, August 2011, pp 934-952.

This article presents an analysis of privacy, care practices and architectural space in assisted living in Sweden. Observations and personal interviews with staff as well as residents were the major data collection methods. The analysis revealed the evasiveness of a private-public dichotomy; that is, how privacy appears in public spaces and how private spaces became public under certain conditions. During the course of a day, the residents' privacy was qualified and structured by caring activities that took place in various spaces and that associated with variable distance or closeness to the staff. The study shows that individualised care practices improved privacy for the resident. Furthermore staff used a number of spatial strategies to promote the residents' privacy where possible, eg. in the dining room at meal times or when residents were subject to intimate care in their private rooms. The residents had more control of access to their private rooms than control of their personal space in public areas. Staff supported the residents to lead a private life in the assisted living facility. (JL)

ISSN: 0144686X

From : <http://www.journals.cambridge.org/aso>

Boundaries of roles and responsibilities in housing with care schemes; by Jenny Pannell, Imogen Blood, Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, October 2011, 20 pp.

Viewpoint, 2691, October 2011, 20 pp.

In this report the authors show how there is no single model of housing with care (HWC). Schemes vary enormously in size and scale, location, services and cost. They are run by private companies and not-for-profit housing associations and charities. Also there are significant variations in provision and policy context across the UK. Since residents' quality of life can be affected by the way in which these organisations work together, clarity over boundaries, roles and responsibilities is crucial. Among the main research questions the authors address are: What are the boundaries or fault lines of roles and responsibilities in HWC? What are the impacts on quality of life for older residents with or without high support needs? Can a rights-based approach to services empower residents? How is quality of life affected by different expectations between residents, family, staff, providers, commissioners and other stakeholders? (RH)

From : Download report:<http://www.jrf.org.uk/sites/files/jrf/housing-care-responsibilities-summary.pdf>

The Enriched Opportunities Programme for people with dementia: a cluster-randomised controlled trial in 10 extra care housing schemes; by Dawn J Brooker, Elaine Argyle, Andrew J Scally, David Clancy.

*Aging & Mental Health*, vol 15, no 8, November 2011, pp 1008-1017.

The Enriched Opportunities Programme (EOP) was a multi-level intervention focusing on improved quality of life for people with dementia. This study compared the experience of people living with dementia and other mental health problems in extra care housing schemes that utilised EOP with schemes that employed an active control intervention. Ten extra care housing schemes were cluster randomised to receive either the EOP intervention or an active control intervention for an 18-month period. Residents with dementia or other significant mental health problems were assessed on a number of outcome measures at baseline, six months, one year and 18 months. The primary outcome measure was quality of life. Self-reported depression was an important secondary outcome. The EOP-participating residents rated their quality of life more positively over time than the active control. There was also a significant group-time interaction for depressive symptoms. The EOP-participating residents reported a reduction of 25% at both six and 12 months and a 37% reduction at 18 months. EOP residents were less likely than residents in the active control sites to move to a care home or be admitted to a hospital inpatient bed. They were more likely to be seen by a range of community health professionals. Overall the EOP had a positive impact on the quality of life of people with dementia in well-staffed extra care housing schemes. (JL)

ISSN: 13607863

From : <http://www.tandfonline.com>

Housing markets and independence in old age: expanding the opportunities; by Michael Ball, Robert Blanchette, Anupani Nanda, Peter Wyatt, Henley Business School, University of Reading. Reading: Henley Business School, 2011, 45 pp.

This report outlines findings from research on housing for older people who live in specialist private retirement accommodation, called owner occupied retirement housing (OORH). This type of housing is purchased, on a leasehold basis, and found in specially designed blocks of apartments which have communal facilities, house managers and other networks of support integrated within them. There are currently around 105,000 OORH houses in the UK, about 2% of the total number of homes for those aged 65 and over. The report examines the potential demand for OORH, and providers and supply side constraints. Findings reveal a higher quality of life for residents and their families: 92% of OORH residents are very happy or contented; and most have family and friends in the locality, and the great majority would recommend the accommodation to others. OORH was environmentally better than traditional housing, with reduced energy use, including less travel; 51% of OORH residents said that their energy bills were noticeably less. The report concludes that policy on this type of requirement needs to be reassessed, since older people could benefit from this type of accommodation. However, due to restrictive planning and housing policies, many older people are not being provided with the opportunity to purchase OORH. (RH)

From : Henley Business School, University of Reading, Whiteknights, Reading RG6 6UD. Web: [www.henley.ac.uk](http://www.henley.ac.uk)

Housing or care workers?: who is supporting older people with high support needs?; by Jill Manthorpe, Jo Moriarty.

Journal of Integrated Care, vol 19, issue 1, February 2011, pp 16-25.

This article looks at the potential and cost effectiveness of extra care housing in England with a particular focus on older people with high support needs. The authors first detail what is meant by extra care housing, summarised as developments specially designed for older people offering self-contained accommodation alongside 24-hour care, and provided with a range of leisure activities and other shared facilities. The article then outlines what evidence is necessary to prove the benefits of such a housing model. Finally, the authors present a discussion on commissioning technology and telecare in these provisions, noting that such technology requires its own supporting workforce. (JL)

ISSN: 14769018

From : <http://www.pierprofessional.com/jicflyer/index.html>

In search of a future for large-scale care homes in Flanders; by Koen Coomans, Henk de Smet, Ann Heylighen.

Journal of Housing for the Elderly, vol 25, no 4, October-December 2011, pp 329-351.

Housing for older people in Flanders is evolving toward small-scale facilities and better quality of life. Ageing population strains the means to achieve this to the limit. The authors investigate whether and how Flemish large-scale facilities can adapt to meet contemporary and future requirements of housing for older people. By analysing current tendencies, they depict what this housing should look like, both now and in the future. They then investigate how an existing large-scale care home could fit this picture by using design as a mode of knowledge production. They propose to redesign the site such that its actual evolution would be thoroughly redirected. Beyond the facility at issue, the study shows how Flemish large-scale facilities could develop to keep playing a role in the future. They should timely adapt their size with qualities of small-scale housing schemes, and integrate in the neighbourhood. (JL)

ISSN: 02763893

From : <http://www.tandfonline.com>

## 2010

An assessment of sheltered housing design in Belfast, Northern Ireland; by Karim Hadjri.: Routledge, 2010, pp 171-192.

Journal of Housing for the Elderly, vol 24, no 2, 2010, pp 171-192.

This article presents UK-based research that has studied the existing sheltered or assisted living housing population and its future housing options and preferences. This meets an identified need to know and understand users' needs and requirements in much more detail, that outlines what is liked and disliked by older people about sheltered housing, so that those who plan and design such housing can be aware of their views. The study also sought to understand the architects' challenges in designing and adapting this type of housing. The sheltered housing managed by housing associations in Belfast, Northern Ireland, was assessed through a series of site visits, structured interviews, and a focus group with stakeholders. Findings revealed older users' keen interest in participating in their housing needs assessment; identified building design concerns; and provided recommendations for potential design guidelines. (KJ/RH)

ISSN: 02763893

From : <http://www.tandfonline.com>

Costs and outcomes of an extra care housing scheme in England; by Theresia Bäumker, Ann Netten, Robin Darton.: Routledge, 2010, pp 151-170.

Journal of Housing for the Elderly, vol 24, no 2, 2010, pp 151-170.

Extra care housing, which provides support and care for people in specially designed accommodations, has now been part of the range of housing and care services available to older people in England for several years. Currently, the United Kingdom evidence base tells us little about the financing, estimation of the costs, or burden to the public purse of housing with care. The United Kingdom has significant state welfare provision in the areas of health and social care. The objective of this in-depth case study was to investigate the cost and outcome consequences for a sample of people who moved into an extra care housing scheme in Bradford, England, and to reflect on the methodological implications for future research in this developing area. The main finding of the study was that the overall cost per person increased after a move to extra care housing, but that this increase was associated with improved social care outcomes and improvements in quality of life. (KJ/RH)

ISSN: 02763893

From : <http://www.tandfonline.com>



EAC Housing for Older People Awards 2010: report: the development, implementation, consultation process and findings of the first retirement housing awards nominated by the residents; by Elderly Accommodation Counsel (EAC). London: Elderly Accommodation Counsel (EAC), 2010, 35 pp (+ DVD).

The EAC Housing for Older People Awards has come about as a result of initiatives such as the Lifetime Homes, Lifetime Neighbourhoods strategy. A second Awards event for 2011 is due to be held. This report describes an original method of collecting the views of a large number of residents on their well-being in all forms of retirement housing. It presents facts, figures and findings relating to the 260 schemes nominated, of which 203 were retirement housing and 57 housing with care, and with photographs of the various winning schemes. The DVD is a presentation of the awards event, also the EAC Art Awards. The report was sponsored by the Nationwide Building Society, other funders being the Department for Communities and Local Government (DCLG), Housing Learning and Improvement Network (Housing LIN), and Legal & General. (RH)

From : Elderly Accommodation Counsel (EAC), 3rd Floor, 89 Albert Embankment, London SE1 7TP.  
[www.housingcare.org](http://www.housingcare.org)

EAC National Housing for Older People Awards 2011; by Elderly Accommodation Counsel (EAC). London: Elderly Accommodation Counsel (EAC), 2010, various (+ DVD).

The EAC Housing for Older People Awards has come about as a result of initiatives such as the Lifetime Homes, Lifetime Neighbourhoods strategy, with the aim of celebrating the best examples of housing schemes for older people. It is hoped the Awards will help shape the future of housing in later life. The first Awards event was held in 2010 and was successful in capturing over 2100 nominations. There is promotional material that is being distributed to encourage nominations for the 2011 Awards. Nominations will close on 31 October 2010 and presentations will take place in February 2011. These awards are supported by Nationwide Building Society, Legal & General, the Department for Communities and Local Government (DCLG), Housing Learning and Improvement Network (Housing LIN). The DVD is a presentation of the 2010 awards event, also the EAC Art Awards and contains further advice on submission of an entry for nomination. (KJ/RH)

From : Elderly Accommodation Counsel (EAC), 3rd Floor, 89 Albert Embankment, London SE1 7TP.  
<http://www.housingcare.org>

Elder abuse in long-term care: types, patterns and risk factors; by Lori Post, Connie Page, Thomas Conner (et al).

Research on Aging, vol 32, no 3, May 2010, pp 323-348.

The authors investigated types and patterns of elder abuse by paid caregivers in long-term care and assessed the role of several risk factors for different abuses and for multiple abuse types. The results are based on a 2005 random-digit-dial survey of relatives of persons in long-term care (the Michigan Survey of Households with Family Members Receiving Long Term Care Services, MILTC survey). The authors computed occurrence rates and conditional occurrence rates for each of six abuse types: physical, caretaking, verbal, emotional, neglect, and material. Among older adults who have experienced at least one type of abuse, more than half (51.4%) have experienced another type of abuse. Physical functioning problems, activities of daily living limitations, and behavioural problems are significant risk factors for at least three types of abuse and are significant for multiple abuse types. The findings have implications for those monitoring the well-being of older adults in long-term care as well as those responsible for developing public health interventions. (KJ/RH)

ISSN: 01640275

From : <http://roa.sagepub.com/doi:10.1177/0164027509357705>

People with dementia living in extra care housing: learning from the evidence; by Rachael Dutton.

Working with Older People, vol 14, issue 1, March 2010, pp 8-11.

Extra care housing has now been around for a long time. People are referred as tenants because they can no longer cope at home and many already have dementia or have developed it while living in extra care. While extra care does promote independence, can it really provide support for people with dementia? Here, the author presents the conclusions of a study that asked this question and looks at the practicalities behind the answer. Her study, 'Extra Care housing and people with dementia: what do we know about what works regarding the built and social environment, and the provision of care and support?', is a summary of findings from a scoping review of the literature 1998-2008 on behalf of the Housing and Dementia Research Consortium (HDRC). (KJ/RH)

ISSN: 13663666

From : <http://www.pierprofessional.com/doi:10.5042/wwop.2010.0071>

Wardens' survey 2010: an examination of the effects of removing the residential wardens from Bristol City Council's sheltered housing schemes for older people; by Bristol Older People's Forum. Bristol: Bristol Older People's Forum, September 2010, 36 pp (BOPF Opinion research survey, no 10).

During 2008 and 2009, Bristol City Council removed the residential wardens from its sheltered housing schemes for older people. This had followed a Government decision that costs of providing wardens could no longer be met from Supporting People money, unless residents in a scheme were in demonstrable need of a live-in warden. This report is based on a postal survey sent to 510 residents of former council sheltered housing schemes in all parts of Bristol; 198 responded. In all cases, only a tiny minority thought that things were better in respect of: quality of service; individual quality of life; security and safety; cleanliness; social activities; coping with cold weather; and loneliness and isolation. Much of the report is given over to individual responses. Appendices include the questionnaire, the preliminary report, and a list of the sheltered housing dwellings. (RH)

Price: £5.00

From : Bristol Older People's Forum, c/o Age Concern Bristol, Canningford House, 38 Victoria Street, Bristol BS1 6BY. E-mail: bopf@ageukbristol.org.uk

## 2009

Balancing safety and privacy: the case of room locks in assisted living; by Leslie A Morgan.: Routledge, 2009, pp 185-203.

Journal of Housing for the Elderly, vol 23, no 3, 2009, pp 185-203.

Assisted living settings are charged with protecting privacy and choice of residents while guaranteeing safety and providing services. This article uses qualitative data from seven distinct assisted living settings to illuminate the challenge of balancing these expectations to maximize quality of life for residents. The simple object of door locks serves as the focal point for narrative from residents, family, staff, and administrators regarding the daily dilemmas of balancing these goals. Results show that there is a lack of consensus on the relative importance of locks and security within and across groups and settings. As residents age in place, sustaining the balance is likely to become even more challenging. (KJ/RH)

ISSN: 02763893

From : <http://www.tandfonline.com>

Building Choices part 2: 'Getting Personal' - the impact of personalisation on older people's housing: overall project summary; by Jill Manthorpe, Sarah Vallely, Housing 21; Tenant Services Authority (TSA). London: Housing 21, May 2009, 32 pp.

Personalisation is now the basis for social care policy: the focus is on what people want from public services. This project aimed to explore the implications of personal (individual budgets and the broader theme of personalisation for specialist housing for older people. This report starts with an overview of the key literature (specifically the Individual Budgets Pilot Programme Evaluation, IBSEN) along with changing policy. It reviews issues identified at the outset of the Building Choices project, and looks at how the views of older people in specialist housing settings can influence what happens, for example in terms of challenging ageism, and promoting inclusivity and age equality. (RH)

From : Download (16/6/09): <http://www.housing21.org.uk/downloads/building-choices-part2.pdf>

Cambridgeshire community study: a summary of the report: 'Unsung heroes in a changing climate'; by Cambridgeshire Older People's Reference Group (COPRG). Reprint [Cambridge]: Cambridgeshire Older People's Reference Group, October 2009, 11 pp.

In 2006, Cambridgeshire Older People's Reference Group (COPRG) held meetings in sheltered housing and residential care settings in the county and learned of residents' relative isolation from the mainstream of neighbourhood life. This is a summary of the Reference Group's findings on the range of community groups in the county and the extent of older people's involvement in self help groups, faith and church supported groups, and groups run by specialist organisations. (RH)

Choice and control in specialist housing: starting conversations between commissioners and providers; by Sarah Vallely, Jill Manthorpe.

Housing, Care and Support, vol 12, no 2, September 2009, pp 9-15.

In July 2007, Housing 21 began an exploration of how changes to the system of social care called personalisation might impact on specialist housing provision in England. Personalisation now forms the basis of English social care policy focusing the delivery of public services on what people might want or choose, in the context of eligibility criteria and means testing. It is designed to promote greater choice and control of the support that people receive. However, there have been concerns that the views of older people living in extra care housing settings have not been heard in the implementation of personalisation. In 2008-09, Housing 21

engaged older people and other groups with an interest in sheltered and extra care housing to debate the implications of personalisation for current and future housing, care and support services. This article discusses what arose from this consultation and its relevance to housing providers and commissioners. (KJ/RH)

ISSN: 14608790

From : Website: <http://www.pierprofessional.com>

Creature comforts: [importance of pet ownership in care homes]; by Natalie Valios.

Community Care, issue 1754, 22 January 2009, pp 26-27.

The importance of pet ownership in care homes to older people is often underestimated, but there is evidence that it can help their well-being. This article reports on 'Pets and older people in residential care', a study of 234 care homes and sheltered housing units, which comments on progress since a similar study in 1995 by the Joseph Rowntree Foundation (JRF). The present study, by June McNicholas, is available on the Society for Companion Animals website ([www.scas.org.uk/petsforlife](http://www.scas.org.uk/petsforlife)) along with other information. (RH)

ISSN: 03075508

From : <http://www.communitycare.co.uk>

Developing social well-being in new extra care housing; by Lisa Callaghan, Ann Netten, Robin Darton, Personal Social Services Research Unit - PSSRU, University of Kent; Joseph Rowntree Foundation - JRF.: Joseph Rowntree Foundation - JRF, November 2009, 4 pp (Ref: 2419).

Findings, November 2009, 4 pp (Ref: 2419).

Extra care schemes provide care and support so that older people can live independently. They also aim to prevent residents feeling isolated by providing opportunities for social interaction. These findings summarise research which examined how social well-being developed in 15 new-build housing schemes supported by the Department of Health (DH) Extra Care Housing Funding Initiative. While the study by researchers at the Personal Social Services Research Unit (PSSRU) suggests that extra care housing can provide an environment that supports social well-being, the findings indicate that the relationship between different aspects of such schemes is more complicated. The full report, 'The development of social well-being in new extra care housing schemes' is also published by the Joseph Rowntree Foundation (JRF) and is available as a free download (at [www.jrf.org.uk](http://www.jrf.org.uk)). (RH)

ISSN: 09583084

From : <http://www.jrf.org.uk/sites/files/jrf/care-and-well-being-summary.pdf>

The effect of care setting on elder abuse: results from a Michigan Survey; by Connie Page, Tom Conner, Artem Prokhorov (et al).

Journal of Elder Abuse & Neglect, vol 21, no 3, 2009, pp 239-252.

This US study compares abuse rates for elders aged 60 and older in three care settings: nursing home, paid home care, and assisted living. The results are based on a 2005 random-digit dial survey of relatives of, or those responsible for, a person in long-term care (the Michigan Survey of Households with Family Members Receiving Long Term Care Services, MILTC survey). Nursing homes have the highest rates of all types of abuse, although paid home care has a relatively high rate of verbal abuse and assisted living has an unexpected high rate of neglect. Even when adjusting for health conditions, care setting is a significant factor in both caretaking and neglect abuses. Moving from paid home care to nursing homes is shown to more than triple the odds of neglect. Furthermore, when computing abuse rates by care setting for persons with specified health conditions, nursing homes no longer have the highest abuse rates. (KJ/RH)

ISSN: 08946566

From : <http://www.tandfonline.com>

'Extra Care' housing and people with dementia: what do we know about what works regarding the built and social environment, and the provision of care and support?: summary of findings from a scoping review of the literature 1998-2008 on behalf of the Housing and Dementia Research Consortium; by Rachael Dutton, Housing 21 - Dementia Voice; Housing and Dementia Research Consortium (HDRC).: Care Services Improvement Partnership (electronic), May 2009, 30 pp.

Most of the research evidence relating to people with dementia in extra care settings originates in the US (commonly known there as apartment-style assisted living); and findings have highlighted the importance of person-centred care, developing staff knowledge and expertise, and partnership or joint working. The present scoping review of the literature was commissioned by the Housing and Dementia Research Consortium (HDRC) with funding from the Joseph Rowntree Foundation (JRF). The aim was to identify published and grey literature from 1999 to March 2009 relating to these elements: design and use of the built environment; facilities, furnishings and equipment; care, support and therapeutic services; organisation and management; and outcomes in relating to health, well-being, policy and cost. This summary presents key findings regarding the prevalence

of dementia in extra care settings and the suitability of extra care for people with dementia. It notes messages from current evidence and identifies evidence gaps for these, also themes including: activities; assistive technology; comparisons with other types of settings and care; cost-effectiveness; end of life in extra care; Home for Life and length of tenancy; integration versus dementia specialist models; impact of care, services and facilities; and prevalence of management of psychosocial and behavioural symptoms. A full report (116 pp) is also available (see <http://www.housing21.co.uk/corporate-information/housing-21-dementia-voice/research/>). (RH)

From : Web link: <http://www.housing21.co.uk/corporate-information/housing-21-dementia-voice/research/>)

Housing for people with dementia; by Melanie Henwood.

Community Care, issue 1789, 1 October 2009, pp 30-31.

How viable is it for people with dementia to live semi-independently in extra care housing? The author reports on a literature review by Rachael Dutton for Housing 21, funded by the Joseph Rowntree Foundation (JRF). The report "Extra Care" housing and people with dementia: a scoping review of the literature 1998-2008' highlights evidence that people with dementia living in ECH can have a good quality of life. (RH)

ISSN: 03075508

From : [www.communitycare.co.uk](http://www.communitycare.co.uk)

My home, my say: resident involvement in decision making; by Hanover. Staines: Hanover, 2009, A4 folded pamphlet (Hanover insights 2).

Until 2006, Hanover's main method of engaging with residents was through regional forums. Hanover insights 2 describes the range of methods that has been established by Hanover to involve residents: local service agreements; the Hanover quality standard; the Greenshoots initiative; an Intouch panel; Stronger Together events; resident forums and the Resident Council; and resident Board members. (RH)

From : Hanover, 1 Bridge Close, Staines TW18 4TB.<http://www.hanover.org.uk>

Nobody's listening: the impact of floating support on older people living in sheltered housing; by Nigel King, Jenny Pannell, Ian Copeman, Housing and Support Partnership; Help the Aged. London: Help the Aged, 2009, 91 pp.

The withdrawal of resident wardens from some sheltered housing and their replacement with "floating" support from visiting staff not necessarily employed by the landlord led to complaints about such changes to Help the Aged. The charity commissioned the Housing and Support Partnership to undertake research to: ascertain more clearly how support in sheltered housing is changing across England; help formulate a response; and ensure older people's views are considered in the wider debate. This report includes findings based on older people's experiences of changes to support services; national policy in relation to Supporting People (SP) in five local authorities; and the views of sheltered housing providers. Two different approaches to re-modelling warden services are described: provision of area-based teams by Mendip Housing, while Cambridge City Council now uses Independent Living Facilitators (ILFs) whose role is to promote independence. Recommendations are made on good practice in consulting residents on changes in support provision. (RH)

From : Help the Aged, 207-221 Pentonville Road, London N1 9UZ. [www.helptheaged.org.uk](http://www.helptheaged.org.uk) Email: [info@helptheaged.org.uk](mailto:info@helptheaged.org.uk) The Housing and Support Partnership, Stanelaw House, Sutton Lane, Sutton, Witney, Oxford OX29 5RY. [www.housingandsupport.co.uk](http://www.housingandsupport.co.uk)

Older people's vision for long-term care; by Helen Bowers, Angela Clark, Gilly Crosby (et al), Independent Living Committee, Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, November 2009, 58 pp.

Older people with significant support needs constitute a large and growing sector of our population. Recent developments in independent living have been slow to respond to the needs and aspirations of older people, whose voices are rarely heard. There is a strong case for fundamental change in long-term care, based on older people's vision for a good life. This report presents important messages from a research project exploring older people's experiences of living with high support needs, commissioned by the Joseph Rowntree Foundation (JRF) and undertaken by the Older People's Programme (OPP) and the Centre for Policy on Ageing (CPA). The research involved a scoping study; a series of discussions with older people, their families and professionals; synthesis of key messages with a diverse advisory group; local feedback; and a national 'sounding board' event to identify the key messages to be shared. The report recommends a multifaceted change programme to enable this vision to be achieved for individuals and their families, for local populations, and at a national policy and societal level. (KJ/RH)

Price: foc (download)

From : Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP.

<http://www.jrf.org.uk/sites/files/jrf/older-people-vision-for-care-full.pdf>

Pathways to assisted living: the influence of race and class; by Mary M Ball, Molly M Perkins, Carole Hollingsworth (et al).

Journal of Applied Gerontology, vol 28, no 1, February 2009, pp 81-108.

The influence of race and class on decisions to move to assisted living facilities in the US is examined. Qualitative methods were used to study moving decisions of residents in 10 assisted living facilities, varying in size and location, as well as residents' ethnicity and the influence of race and class. Data were derived from in-depth interviews with 60 residents, 40 family members and friends, and 12 administrators. Grounded theory analysis identified three types of resident based on their decision-making control: proactive, compliant, and passive or resistant. Only proactive residents (less than a quarter of residents) had primary control. Findings show that control of decision-making for older people who are moving to assisted living are influenced by class, though not directly by race. The impact of class primarily related to assisted living placement options and strategies available to forestall moves. Factors influencing the decision-making process were similar for Black and White elders of comparable socioeconomic status. (RH)

ISSN: 07334648

From : <http://jag.sagepub.com>

Personalisation and housing: connections, challenges and opportunities; by Jon Head.

Housing, Care and Support, vol 12, no 3, October 2009, pp 37-44.

This article refers to common values and principles underlying personalisation and housing, and the importance of personalisation for providers like Hanover (a leading provider of housing and support services for older people). It also refers to challenges that personalisation presents for supported housing services, such as extra care. Possible responses to these challenges include a re-emphasis on listening to what residents - as well as commissioners - want, an honest appraisal of the concept of choice and its implications, especially in services such as extra care, and asking whether people might still be asked to choose a 'package' of core services, in order to retain sustainable models that will support other people now and in the future. The article then describes the Housing Associations' Charitable Trust's (hact) Up2Us project, a key initiative to put supported housing service users centre stage in commissioning and purchasing care and support, in which Hanover and the London Borough of Barking and Dagenham are among the partners. (KJ/RH)

ISSN: 14608790

From : Website: <http://www.pierprofessional.com>

Retirement (sheltered) housing; by Age Concern England - ACE. London: Age Concern England - ACE, July 2009, (Age Concern Fact Sheet 64).

One of Age Concern England's comprehensive factsheets which are revised and regularly updated throughout the year. The printed factsheets subscription service ceased from April 2007 but current factsheets can be freely downloaded from the Age Concern website. To request individual printed factsheets, please call the Age Concern Information Line on 0800 00 99 66 (free call), 8 am - 7 pm daily. (KJ)

From : Information Unit, Age Concern England, Astral House, 1268 London Road, London SW16

4ER.<http://www.ageconcern.org.uk/AgeConcern/fs50.asp>

Shelter homes for the elderly in Malaysia; by A Zaiton, S G Sazlina, V Renuka.: International Institute on Ageing (United Nations - Malta), November 2009, pp 12-18.

BOLD, vol 20, no 1, November 2009, pp 12-18.

A cross-sectional study of 1681 residents for all nine shelter homes were interviewed from March to September 2003 for this study, which for the first time describes the residents of publicly-funded shelter homes in Peninsular Malaysia. The mean age of residents was 71.8. The majority were male (58.6%), had no formal education (64.1%), were from rural areas (81.1%), had no family members (61.7%), and received no visits at all (85.5%) from either friends or relatives. 295 (27.3%) had mild to severe disability, 226 (20.9%) had poor vision and 47 (4.3%) had reduced hearing. Only 447 (41.4%) of these older people were well-nourished, 707 (78.9%) were at risk of depression and 817 (75.6%) had probable cognitive impairment. 143 (14.1%) and 88 (8.1%) self-reported to have hypertension and coronary heart disease (CHD) respectively. It is clear that these residents have multiple co-morbidities. Effective management strategies are required to ensure maintenance if not improved quality of life. (The same article appeared in BOLD, vol 18, no 3, May 2008.) (RH)

ISSN: 10165177

From : <http://www.inia.org.mt>

Sheltered housing and care for older people: perspectives of tenants and scheme managers; by Brian J Taylor, Andrea Neill.

Quality in Ageing, vol 10, issue 4, December 2009, pp 18-28.

Sheltered housing schemes for older people took a new turn in the UK with the community care policy of the early 1990s giving care provision for people living in such schemes. There is relatively little research on what sheltered housing schemes provide and what makes them work well. The authors gathered data in relation to sheltered housing provision for older people in the north Antrim area of Northern Ireland through 10 focus groups with tenants and 16 questionnaires administered with managers of schemes. Tenants valued the independence and choice of sheltered housing in comparison with institutional care. They also highly valued the social interaction with other tenants, fostered by activities such as coffee mornings, regular lunches and social events. Tenants often helped each other with transport and when sick. Tenants of schemes in small towns were generally satisfied, because of access to shops, churches and other services. Transport was an issue for many, particularly in more rural areas and in relation to attending hospital appointments. Scheme managers were often available to tenants for long and anti-social hours. The home care arrangements were generally regarded as satisfactory, although there were criticisms of the limited hours for tasks and the skills of some care workers. Some scheme managers thought that the publicly-funded home-care service would be more efficient if the staff were managed from the housing scheme. Appropriate social activities and effective care arrangements are an important aspect of supported housing, as well as the independence it offers. Consideration needs to be given to access to services in locating new schemes. (KJ/RH)

ISSN: 14717794

From : Website: <http://www.pierprofessional.com>

Some social consequences of remodelling English sheltered housing and care homes to 'extra care'; by Fay Wright, Anthea Tinker, Julianne Hanson (et al).

Ageing and Society, vol 29, part 1, January 2009, pp 135-154.

Across the United Kingdom, new build and remodelled 'extra care' schemes are being developed in many areas on the assumption that they offer older people with care needs an alternative to residential care. This paper reports an evaluation by a multi-disciplinary team of 10 extra-care schemes remodelled from sheltered housing or residential care units. The evaluation audited buildings and identified social and architectural problems. No two schemes in the sample were alike; some aimed for a dependency balance and others set a dependency threshold for admission. The three criteria used for assessing eligibility were the number of paid care hours the older person had at home, their property status and the type of disability. This article focuses on the wide variation in assessing eligibility for an extra-care place and on some social consequences of remodelling. A number of tenants remained in situ during the remodelling process in six of the schemes. Building professionals were unanimous that retaining some tenants on site caused significant development delays and increased the remodelling costs. There was also a social price to pay. 'Old' tenants resented their scheme changing into extra care and were hostile towards 'new' tenants who had obvious needs for support. In some extra-care schemes, 'old' tenants were refusing to participate in meals and all social activities. (KJ/RH)

ISSN: 0144686X

From : <http://www.journals.cambridge.org/aso>

## **2008**

Affordable clustered housing-care: a category of long-term care options for the elderly poor; by Stephen M Golant.: The Haworth Press, Inc., 2008, pp 3-44.

Journal of Housing for the Elderly, vol 22, nos 1/2, 2008, pp 3-44.

What we label as affordable clustered housing care options are making it increasingly possible for poor and frail older Americans to age in place comfortably and securely in residential-like settings combining both affordable shelter and long-term care. The hallmark of these housing arrangements is their sizeable population clusters of low-income frail people in need of supportive services. Despite their greater availability and the competing factors underlying their growth, the diversity of their supportive services and operations cloud their identity, resulting in uncertainty as to whether they have a common mission. In response to the need for a more careful delineation of this ageing in place option, this paper describes the distinguishing features of these hybrid settings and constructs a typology of their representative exemplars or prototypes. (RH)

ISSN: 02763893

From : <http://www.tandfonline.com>

Anchor 2020: meeting the challenges of older people's housing and care: a discussion paper; by Anchor Trust; International Longevity Centre UK - ILC-UK. London: Anchor Trust, 2008, 30 pp.

By 2020, there will be 3 million more people aged 65+ than in 2008, and many will be increasingly frail. This discussion document summarises the related political, social, economic, technological and environmental trends, such as an increasingly "consumerist" older population that is "asset rich but income poor". It also notes the Caring Choices initiative (January 2008) and the forthcoming Green Paper on adult social care, and the implications for sheltered housing. Given the demands of the next generation of older people, it suggests that it is time to expand on the traditional model of housing and care provision and funding. The social care sector will have to offer a system that is fairer financially, meets needs more effectively, and offers people dignity and choice. (RH)

From : Anchor Trust, 2nd Floor, 25 Bedford Street, London WC2E 9ES. <http://www.anchor.org.uk> Also available in large print, braille, audio, electronic formats or other languages on request to Joanna Nurse on 020 7759 9100.

Belonging in Britain: black older people's experiences of a sheltered housing scheme in London; by Audrey Allwood.

Housing, Care and Support, vol 11, no 2, August 2008, pp 32-40.

The author's research entitled "The negotiation of belonging among long-term West Indian migrants residing in a sheltered housing scheme in Brixton, London", examined the intricacies of identity and placement. The Supporting People Framework governs this BME supported housing scheme within the Council's equalities ethos. Allwood's research sample of 26 women and men aged between 60 and 86 were working-class migrants who had moved to England in the 1950s and 1960s. Influenced by Gramsci's (1990) ideas about the involvement of ordinary people in social change, and Bhabha's (1994) idea of placement, Allwood investigated how the elders, assisted by others who acted on their behalf, negotiated their place in British society as recipients of support services, and engaged in consultation and user involvement processes. Both conflicting and supportive service provision arose. This created shifting boundaries in relation to belonging that emerged between the elders, their place of birth, their formative culture and their on-going engagement with new experiences, other groups and the state. (KJ/RH)

ISSN: 14608790

From : Website: <http://www.pavpub.com>

Costs and outcomes of an extra-care housing scheme in Bradford; by Theresia Bäumker, Ann Netten, Robin Darton, Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation, November 2008, 4 pp.

Findings, 2277, November 2008, 4 pp.

There is a systematic lack of evidence about the potential, the costs and the benefits, and consequently the cost-effectiveness of extra-care housing. These findings report on a study which aimed to assess as accurately as possible the comparative costs before and after residents moved into a new extra-care housing scheme, Rowanberries in Bradford, a 46-unit joint project between Methodist Homes Housing Association (part of MHA Care Group) and Bradford Adult Services. The study was conducted as an extension to an ongoing Department of health (DH) funded evaluation of the Extra Care Housing Funding Initiative by the PSSRU. Overall, the findings suggest that moving into the extra care housing scheme was associated with both higher costs and improved outcomes, compared with when people were living in their previous homes. The full report (same title) by Theresia Bäumker, Ann Netten and Robin Darton of the Personal Social Services Research Unit (PSSRU) at the University of Kent, is published by the Joseph Rowntree Foundation (JRF) and may be downloaded from its website ([www.jrf.org.uk](http://www.jrf.org.uk)). (RH)

ISSN: 09583084

From : Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP.

<http://www.jrf.org.uk/publications/costs-and-outcomes-extra-care-housing-scheme-bradford>

Dying with dignity: [end of life project]; by Melanie Henwood.

Community Care, issue 1746, 6 November 2008, pp 34-35.

In a society where experiences of dying are often a taboo subject, an end-of-life project focuses on allowing people to die at home with good care. This article outlines findings of the project conducted by Housing 21 and the Department of Health (DH) End of Life Care Programme. The report, "'Is it that time already?' extra care housing at the end of life: a policy-into-practice evaluation", focused on enabling terminally ill extra-care tenants to die at home where that was their wish. Among the implications for practice identified is providing dignity and choice. (RH)

ISSN: 03075508

From : <http://www.communitycare.co.uk>

Elders' decisions to enter assisted living facilities: a grounded theory study; by Shu-li Chen, Janet W Brown, Linda C Melford (et al).: The Haworth Press, Inc., 2008, pp 86-103.

Journal of Housing for the Elderly, vol 22, nos 1/2, 2008, pp 86-103.

Assisted living for older people has acquired increased importance in American society. This qualitative study aimed to develop a substantive theory of older people's decision-making process to relocate to an assisted living facility. The researchers interviewed a purposive sample of 28 older people who resided in assisted living facilities. The theory of their decisions to relocate is a story about older people weighing and balancing gains and losses to go where the help is. Decision makers weigh and balance gains and losses before, during and after relocating to the assisted living facility. Older people stay at their current residence if gains outweigh losses, and they relocate if losses outweigh gains. Understanding the decision-making process in this segment of the population may lead to the development of interventions that can promote positive relocation experiences among older people and increase the effectiveness of their decision-making behaviours. (RH)

ISSN: 02763893

From : <http://www.tandfonline.com>

An ethnographic study of stigma and ageism in residential care or assisted living; by Debra Dobbs, J Kevin Eckert, Bob Rubinstein (et al).

The Gerontologist, vol 48, no 4, August 2008, pp 517-526.

Ethnography and other qualitative data-gathering and analytical techniques were used to gather data from 309 participants (residents, family and staff) from 6 residential care or assisted living (RC-AL) settings in Maryland. Data were analysed using grounded theory techniques for emergent themes. Four themes emerged that related to stigma in RC-AL: ageism in long-term care; stigma as related to disease and illness; sociocultural aspects of stigma; and RC-AL as a stigmatising setting. Some strategies used in RC-AL settings to combat stigma include family member advocacy on behalf of stigmatised residents, assertion of resident autonomy, and administrator awareness of potential stigmatisation. Findings suggest that changes could be made to the structure as well as the process of care delivery to minimise the occurrence of stigma in RC-AL settings. Structural changes include an examination of how best, given the resident case mix, to accommodate care for people with dementia (e.g. separate units or integrated care). Processes of care include staff recognition of resident preferences and strengths, rather than their limitations. (RH)

ISSN: 00169013

From : <http://www.geron.org>

Floating support for older people; by Tony Cousins, Phil Saunders.

Working with Older People, vol 12, issue 1, March 2008, pp 31-33.

The introduction of 'floating support' - a tenure neutral service - in many local authorities is causing much consternation among tenants because the scheme manager they thought would always be there is leaving. Yet with an ageing population combined with increasingly finite resources, how can services provide support to those who need it most, and to what degree should sheltered housing remain untouched? The authors outline the reasons why the new service model, while it may not be popular, is necessary. (KJ/RH)

ISSN: 13663666

From : <http://www.pavpub.com>

Funding for assisted living; by Paul Moran. London

Journal of Care Services Management, vol 2, no 3, April-June 2008, pp 270-276.

The benefits of the assisted living model are described. This paper discusses the compelling case for the continued growth of assisted living schemes in the UK. It also illustrates methods of funding that can be used to finance developments; looks at future opportunities as the market matures; and outlines key factors for developers in this field. (RH)

ISSN: 17501679

From : <http://www.henrystewart.com>

The future of sheltered/retirement housing: a workshop: University of Sussex, Brighton, Wednesday 9th April 2008; by School of Social Sciences and Cultural Studies, University of Sussex; Sussex Gerontology Network; ERoSH. Brighton: School of Social Sciences and Cultural Studies, University of Sussex, 2008, 10 pp.

The changing nature of sheltered housing is discussed. This workshop considered what residents most value in sheltered housing, and what aspects they would like to see improved or that they liked least. Two case studies were presented: Mendip Housing; and Testway Housing in NE Hampshire. Themes emerging from participants' discussions included: becoming a hub; support provision; and how changes are dealt with. (RH)



Price: £3.00

From : Professor Peter Lloyd, School of Social Sciences and Cultural Studies, University of Sussex, Brighton BN1 9SN. Make cheques payable to Sussex Gerontology Network.

"Is it that time already?": extra care housing at the end of life: a policy-into-practice evaluation; by Lorna Easterbrook, Sarah Vallyly, Housing 21; End of Life Care Programme, NHS, Department of Health - DH.: Housing 21, 14 October 2008, 56 pp.

During 2008, Housing 21 and the NHS End of Life Care team conducted a 6-month service improvement pilot project designed to enhance dignity and choice in end-of-life care (EoLC) in three extra care housing settings in north-east England and East Anglia. This report is an evaluation of the project, exploring what changed over the 6 months and assessing the extent to which the approaches used in this particular project might be translated to other extra care settings nationally. Four key issues are identified: promoting dignity and choice for older people and family carers; support and training for staff; extra care and its links to wider health and specialist resources; and commissioning and funding. (RH)

From : Download report from: <http://www.housing21.co.uk/downloads/EvaluationreportFINAL.pdf>

Meeting the sheltered and extra care housing needs of black and minority ethnic older people: a Race Equality Foundation briefing paper; by Adrian Jones, Race Equality Foundation.

Housing, Care and Support, vol 11, no 2, August 2008, pp 41-48.

The author notes the main reports on housing for black and minority ethnic older people that have been published since 1984. A recurrent theme has been the lack of awareness of BME older people's housing needs, and that the requirement for specialist sheltered housing fulfils only part of such need. One possible solution is the provision of extra care housing, and this article cites a few examples of good practice in meeting minority ethnic housing needs. Further information sources are suggested. (RH)

ISSN: 14608790

From : Website: <http://www.pavpub.com>

More choice, greater voice: a toolkit for producing a strategy for accommodation with care for older people; by Nigel Appleton, Department for Communities and Local Government - DCLG; Housing Learning and Improvement Network - Housing LIN, Care Services Improvement Partnership - CSIP, Department of Health - DH. London: Housing LIN, February 2008, 51 pp.

This document provides a toolkit for undertaking work that will support a whole system approach to planning and developing accommodation and care. It is good practice rather than mandatory and has been prepared specifically to accompany 'Lifetime homes, lifetime neighbourhoods', the government's national housing strategy for an ageing society, to offer guidance for commissioners and providers (local authorities, registered social landlords (RSLs), and the private sector) to enable them to produce accommodation and care strategies for older people. The document includes material that would be helpful to preparation of a local study: guidance, briefing notes, tools for completing particular elements of the study, good practice examples, and draft material that can be incorporated in a local study. It includes techniques such as finding indicators of potential need, and mapping existing local provision. The document's basic assumption is that accommodation - whether in general housing or in some form of specialist accommodation - is crucial in providing a context to maintaining or restoring independence and ensuring quality of life. (RH)

From : <http://www.icn.csip.org.uk/housing/index.cfm?pid=520&catalogueContentID=2545>

Older people's vision for long term care; by Centre for Policy on Ageing - CPA. London: Centre for Policy on Ageing, August 2008, 4 pp (CPA briefings 2008).

This briefing summarises work undertaken by the Centre for Policy on Ageing (CPA) in partnership with The Older People's Programme (OPP) to explore older people's experiences of living with high support needs. It is a project commissioned by the Independent Living Committee of the Joseph Rowntree Foundation (JRF). The aim of the project is to identify the critical elements of independent living for older people with high support needs. A final report will be available in November 2008. This briefing can be downloaded from the CPA website. (KJ/RH)

From : CPA, 25-31 Ironmonger Row, London EC1V 3QP. <http://www.cpa.org.uk/policy>

Personal choice in sheltered / retirement housing: a workshop: University of Sussex, Brighton, Friday 26th September 2008; by Peter Lloyd, School of Social Sciences and Cultural Studies, University of Sussex; Sussex Gerontology Network.: School of Social Sciences and Cultural Studies, University of Sussex, 2008, 3 pp.

Two ways in which personal choice might be exercised were explored in this workshop. First personal budgets (or individual budgets, or self directed support), for which West Sussex was one of thirteen pilot sites. The complexity, innovativeness and risks of the system are commented on. The second, a service menu, involved

residents in one locality (North Somerset) selecting a "menu" of different levels of support (low, medium or high). More than two-thirds chose the low level, and only 5% the high level. While sheltered housing schemes retain their managers, there remains a question mark as to whether this choice could be denied to residents who may only be able to choose items on "the menu". (RH)

Price: £3.00

From : Professor Peter Lloyd, School of Social Sciences and Cultural Studies, University of Sussex, Brighton BN1 9SN. Make cheques payable to Sussex Gerontology Network.

Remodelling to extra care housing: some implications for policy and practice; by Anthea Tinker, Fay Wright, Julienne Hanson (et al).

Quality in Ageing, vol 9, issue 1, March 2008, pp 4-12.

Extra care housing is seen as a popular option for older people by families, some older people, policy makers and practitioners. Some new build is being provided, but another option, for which grants are available, is to remodel existing outmoded buildings. This research reports on recent attempts from 10 case study areas in England to remodel sheltered housing and residential care homes to extra care housing. The results are mixed, with satisfaction reported by many new tenants, anger by some existing ones, challenges at every stage of the project for design and construction teams, and issues over the provision of assistive technology and care. Nearly all the schemes experienced unexpected problems during the course of construction. Remodelling is not necessarily faster or cheaper than commissioning a purpose-designed new building. Nevertheless, remodelling may be the only viable option for some unpopular or outdate schemes. The research showed that remodelling is not a quick fix, but that it did have considerable advantages for many of the older people and support staff who were living and working in the remodelled buildings. The research concluded that remodelling should only be undertaken when other options have been carefully examined. Drawing on the research findings, advice to policy makers and practitioners who are considering this course of action is outlined in the discussion. (KJ/RH)

ISSN: 14717794

From : <http://www.pavpub.com>

Sheltered housing's contribution to health and social care; by ERoSH - the Essential Role of Sheltered Housing; Housing Learning and Improvement Network - Housing LIN, Care Services Improvement Partnership - CSIP, Department of Health - DH. Chippenham, Wilts: ERoSH, 2008, 1 DVD.

More people live in sheltered housing than in care homes. ERoSH was formerly known as the Emerging Role of Sheltered Housing project, and believes that there is a huge unmet potential for sheltered housing that can benefit the whole community. That potential is in the buildings, the staff, and the residents. This DVD emphasises the benefits of partnership working. It demonstrates a range of health and social care-related activities that do or should take place in sheltered housing including: exercise; falls prevention; keeping active; helping access to other services; healthy eating; screening; and social activities. ERoSH produces checklists for health and social care professionals, and the good practice examples in the DVD pick out just a few themes. The DVD is in two parts, one aimed primarily at health care professionals, and the other primarily at social care professionals. The aim is that it should be shown at team meetings and training courses. It is also viewable on the ERoSH website. Attention is also drawn to further good practice examples on the Housing LIN website (<http://icn.csip.org.uk/housing/>). (RH)

From : ERoSH, PO Box 2616, Chippenham, Wiltshire SN15 1WZ. Email: [info@shelteredhousing.org](mailto:info@shelteredhousing.org)

Website: <http://www.shelteredhousing.org>

Winners and losers: sheltered housing and floating support; by Joe Oldman.

Housing, Care and Support, vol 11, no 4, December 2008, pp 6-9.

One of the cornerstones of social housing is tenant participation. Changes in service delivery are subject to genuine consultation with the people it affects. The author argues that this has been forgotten in the rush to introduce floating support. He refers to the research that Help the Age is undertaking based on tenants' concerns, to argue that greater understanding of the consequences of floating support in people's lives is needed before this new model becomes irreversibly widespread. An earlier version of this article was published in Working with Older People (vol 12, issue 2, June 2008). (RH)

ISSN: 14608790

From : Website: <http://www.pavpub.com>

2007

Best practice in promoting social well-being in extra care housing: a literature review; by Simon Evans, Sarah Vally, Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, August 2007, 35 pp.

Since the 2005 general election, there has been a renewed emphasis on older people's housing issues, largely because an increasing proportion of the electorate is aged over 50. This document accompanies a research project, which is part of the Joseph Rowntree Foundation's (JRF) research and development programme, by authors at the University of West of England and Housing 21. The research was conducted between April 2006 and March 2007. The overall aim of the study was to explore the social well-being of 'frail' people living in extra care housing. This review explores the literature on best practice in promoting well-being in a range of housing and care settings. The Findings (no 2115) and the full report are available as a free download on the JRF website. (KJ/RH)

From : Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP. Findings and full report available as free downloads from <http://www.jrf.org.uk>

Characteristics of residents and providers in the Assisted Living Pilot Program; by Susan Hedrick, Marylou Guihan, Michael Chapko (et al).

The Gerontologist, vol 47, no 3, June 2007, pp 365-377.

The number of residents in assisted living in the US has rapidly increased, although these facilities still primarily serve people who can pay out of their own pockets. The US Department of Veteran Affairs (DVA) was authorised to provide this level of care for the first time in the Assisted Living Pilot Program (ALPP). The authors describe the residents and providers, comparing them across three facility types and other populations to assess the characteristics and feasibility of this new approach. They report on 743 residents placed from 2002 to 2004. The DVA contracted with 58 adult family homes, 56 assisted living facilities and 46 residential care facilities. The average ALPP resident was a 70-year old unmarried White man referred from hospital and living in a private residence prior to placement. Adult family homes enrolled residents requiring greater levels of assistance with activities of daily living (ADLs) from other facility types. Assisted living facilities were less likely than adult family homes to admit residents with functional disabilities and less likely than either adult family homes or adult residential care facilities to admit residents with certain care needs. ALPP place residents with a wide range of characteristics in community facilities that varied widely in size and services. This information can help determine the role of this type of care in and outside the DVA. (RH)

ISSN: 00169013

From : <http://www.geron.org>

Comparative evaluation of models of housing with care for later life; by Karen Croucher, Leslie Hicks, Mark Bevan (et al), Centre for Housing Policy - CHP, University of York; Social Work and Development Unit, University of York; Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, 2007, 81 pp.

Housing with care schemes are intended to: promote independence; reduce social isolation; provide an alternative to residential or institutional models of care; provide residents with a home for life; and improve the quality of life for residents. The authors present the findings of a longitudinal, comparative study of seven different housing with care schemes for later life. The study aimed to identify, describe and examine different models of housing with care in terms of funding, the type of care and support provided, the characteristics of the residents, engagement with the wider community, and issues around choice and control. The report considers: the 'different way of life' and what motivates residents to move; what makes schemes distinctive; the services and resources provided; meeting and balancing different kinds of need; and lessons for practitioners, commissioners and policy-makers. (RH)

From : York Publishing Services Ltd., 64 Hallifield Road, Layerthorpe, York YO31 7ZQ. [www.jrf.org.uk/bookshoop](http://www.jrf.org.uk/bookshoop)

Dignity through design: how the architecture can make a difference; by Judy Sarre.

Working with Older People, vol 11, issue 2, June 2007, pp 28-31.

The Open University's Research on Age Discrimination Project (RoAD) calls for better design of public spaces to empower older people. This article explains the background and thinking behind Archadia's award-winning design for New Larchwood, an extra care housing scheme developed by Hanover Housing Association in partnership with Brighton and Hove City Council. The aim is to bring dignity through design to its residents. (RH)

ISSN: 13663666

Extra care housing: a concept without a consensus; by Anthea Tinker, Hannah Zeilig, Fay Wright (et al).  
Quality in Ageing, vol 8, no 4, December 2007, pp 33-44.

Extra care housing has developed from sheltered housing and has increasingly been seen as a popular option by policy-makers for a number of reasons. These include the inability of conventional sheltered housing to be an adequate solution for a growing population of very old people, the decline in popularity and high costs of residential care, and perceived problems with older people staying in mainstream housing. There is, however, no agreed definition of extra care housing, even though a growing number of government grants are become available for this type of housing. This is causing confusion for providers and for older people and their families who are not sure exactly what is provided. This lack of clarity means that this form of housing has become an erratic and piecemeal form of provision. (KJ/RH)

ISSN: 14717794

From : <http://www.pavpub.com>

I'll do it my way: [person-centred planning]; by Lynn Vickery.

Housing, Care and Support, vol 10, no 1, August 2007, pp 12-17.

Providers and service users associated with supported housing are increasingly using tools to measure outcomes against targets with indicators that equate change with progress. This article reports and reflects on a small research project undertaken by London South Bank University for Carr Gomm, using the World Health Organization's (WHO) Quality of Life Application Model to assess outcomes of support in relation to person-centred planning, the chosen principled support approach adopted by Carr Gomm. The evaluation is based on a small number of case studies which serve to prompt providers and commissioners of supported housing to ask what constitutes quality of life from the client's perspective, and how in turn this challenges the priorities inherent in the supported housing service. (KJ/RH)

ISSN: 14608790

From : Website: <http://www.pavpub.com>

Independent living units: managing and renewing an ageing stock; by Sean McNelis.: Blackwell Publishing, September 2007, pp 109-114.

Australasian Journal on Ageing, vol 26, no 3, September 2007, pp 109-114.

This research was to report on a key challenge (and its implications) that Australian not-for-profit organisations face as they manage and renew an ageing stock of independent living units (ILUs) for older people. A national survey of ILU organisations complemented by 28 interviews with ILU managers, peak aged care organisations and government officers, and five workshops with ILU managers was undertaken. The results showed that ILUs are a policy response to the housing needs of older people with low income and limited assets. However, ILU organisations face significant challenges as the overall condition of ILUs deteriorates, as they seek to meet higher expectations and as they move into a phase of renewal. It is concluded that the future of ILU organisations is at a watershed, with many reconsidering their role as providers of ILUs. Any extensive reduction in ILUs will have implications for older people, for public housing providers and for delivery of community care to older renters. (KJ/RH)

ISSN: 14406381

From : <http://www.cota.org.au> / <http://www.blackwellpublishingasia.com>

Life round the atrium: [independent living and an award-winning housing scheme]; by David Callaghan.

Community Care, issue 1679, 28 June 2007, pp 34-35.

An award-winning housing scheme providing independent living for older people makes bold use of architecture to create a strong neighbourhood identity. This article describes some features of the Cefn Glas extra-care housing project which is managed by the Charter Housing Association in partnership with Caerphilly Council. (RH)

ISSN: 03075508

From : <http://www.communitycare.co.uk>

The mediating role of health perceptions in the relation between physical and mental health: a study of older residents in assisted living facilities; by Yuri Jang, Elizabeth Bergman, Lawrence Schonfeld (et al).

Journal of Aging and Health, vol 19, no 3, June 2007, pp 439-452.

Responding to the increased need for research on older residents in assisted living facilities (ALFs), this study assessed the connections between physical and mental health for 150 residents in ALF settings in Hillsborough County, Florida. The study's major focus was to explore whether individuals' subjective perceptions of their own health mediate the associations between health-related variables (chronic conditions and functional disability) and depressive symptoms. The analyses showed that the adverse effects of chronic conditions and functional disability on depressive symptoms were not only direct but also indirect through negative health perceptions.

The findings that health perceptions serve as an intervening step between physical and mental health provide important implications for promotion of mental well-being in older residents of ALFs. In addition to disease or disability prevention and health promotion efforts, attention should be paid to ways to enhance older people's positive beliefs and attitudes toward their own health and to promote healthful behaviours. (RH)

ISSN: 08982643

From : <http://www.sagepublications.com>

Never a dull moment?: promoting social well-being in extra care housing; by Simon Evans, Sarah Vallyelly. Housing, Care and Support, vol 10, no 4, December 2007, pp 14-19.

Extra care housing is an increasingly popular form of housing with care for older people, largely because of its potential for maximising independence by providing flexible care and support. However, far less attention has been paid to another important aspect of quality of life, social well-being. This article reports on a research project conducted by the University of the West of England (UWE) and Housing 21 that explored good practice in promoting social well-being in extra care housing. The authors identify several key factors in supporting the social lives of residents, and present recommendations for good practice. (KJ/RH)

ISSN: 14608790

From : Website: <http://www.pavpub.com>

Predicting older Australians' leisure-time physical activity: impact of residence, retirement village versus community, on walking, swimming, dancing and lawn bowling; by Evonne Miller, Laurie Buys.

Activities, Adaptation & Aging, vol 31, no 3, 2007, pp 13-30.

Despite well-publicised health and social benefits of physical activity, like their younger counterparts, most older people tend to lead relatively sedentary lives. This cross-sectional Australian study investigates the impact of residential locality, specifically whether older people live in their own home in the community (n=374) or in independent living units in retirement villages (n=323) on participation in the leisure-time physical activities (LTPA) of walking, swimming, dancing and lawn bowls. The research illustrates that, despite being older and in poorer health, retirement village residents report greater frequency of participation in the LTPA of walking, dancing and lawn bowls than older Australians living in the community. As encouraging physical activity is a global public health priority, these findings suggest that a priority for future research is to investigate how and why the social and physical environment of retirement communities might foster LTPA in older people. (RH)

ISSN: 01924788

From : <http://www.tandfonline.com>

Promoting social well-being in extra care housing; by Simon Evans, Sarah Vallyelly, Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, August 2007, 2 pp.

Findings, 2115, August 2007, 2 pp.

Since the 2005 general election, there has been a renewed emphasis on older people's housing issues, largely because an increasing proportion of the electorate is aged over 50. These findings outline a project, part of the Joseph Rowntree Foundation's (JRF) research and development programme, by authors at the University of West of England and Housing 21. Data was collected through 36 in-depth interviews with extra care residents and managers from six extra care schemes in England. Themes emerging as important to social well-being were: friendship and social interaction; the provision of facilities; design, location and layout; the philosophy of care; engagement with the local community; and the role of family caregivers. The full report, 'Social well-being in extra care housing' is available as a free download on the JRF website. (RH)

ISSN: 09583084

From : Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP. Findings and full report available as free downloads from <http://www.jrf.org.uk>

Remodelling sheltered housing and residential care homes to extra care housing: advice to housing and care providers; by Anthea Tinker, Julianne Hanson, Fay Wright (et al), King's College London; University College London - UCL. London: King's College London; University College London, October 2007, 19 pp (summary 4 pp).

A multi-disciplinary team of 2 social gerontologists, 2 architects, a rehabilitation engineer, an occupational therapist and an economist carried out this research, which was funded by the Engineering and Physical Sciences Research Council (EPSRC grant no EP/C532945/1). The aims were to: examine how a sample of 10 local authority and housing association sheltered housing and residential care homes had been remodelled to become extra care; audit buildings to see how the remodelling schemes have been adapted; identify social and architectural problems resulting from the remodelling; explore tenants' experiences of living in a remodelled extra care scheme; and elicit the view of care and support staff of how well a remodelled extra care scheme works in practice. Most of the 19-page document comprise advice to policy makers, housing and service

providers, built environment professionals, occupational therapists, rehabilitation engineers, funders and commissioners. There is also advice on accessibility issues. The 4-page summary gives an outline of the study and its aims, and findings on these key points: architecture, assistive technology (AT), social issues, and costings. (RH)

Resident involvement in sheltered housing: a workshop: University of Sussex, Brighton, Wednesday 26 September 2007; by School of Social Sciences and Cultural Studies, University of Sussex; Sussex Gerontology Network; Sheltered Housing Group. Brighton: School of Social Sciences and Cultural Studies, University of Sussex, 2007, 7 pp.

Resident involvement (or tenant participation as it used to be called) has been an issue for a long time. This workshop included consideration of the Supporting People programme in providing housing-related support to enable people to live independently. Participants (including residents in sheltered housing) explored the dynamic processes involved in resident involvement and discussed ways in which involvement might be promoted. (RH)

Price: £3.00

From : Professor Peter Lloyd, School of Social Sciences and Cultural Studies, University of Sussex, Brighton BN1 9SN. Make cheques payable to Sussex Gerontology Network.

The salience of social relationships for resident well-being in assisted living; by Debra Street, Stephanie Burge, Jill Quadagno (et al).

Journals of Gerontology: Series B, Psychological Sciences and Social Sciences, vol 62B, no 2, March 2007, pp S129-S134.

Data from 384 assisted living residents interviewed for the Florida Study of Assisted Living conducted in 2004-05 were used to estimate associations between resident well-being and organisational characteristics, transition experiences, and social relationships, controlling for gender, age, education and physical functioning. To varying degrees, depending on the measures used, higher resident well-being was associated with facility size, facility acceptance of payment from Florida's low income programme, and resident perceptions of adequate privacy. Non-kin room sharing reduced life satisfaction, whereas food quality positively affected all measures of well-being. The most consistent findings concerned internal social relationships, for which residents with high scores reported more positive well-being across all measures than those with low scores on the same measures. Individuals have the capacity to form new support networks following a move to assisted living, and relationships formed become more salient to their well-being than the continuation of past relationships or the physical characteristics of the immediate surroundings. (RH)

ISSN: 10795014

From : <http://www.geron.org>

Shared living in supported housing: client responses and business decisions; by Lynn Vickery, Veronica Mole. Housing, Care and Support, vol 10, no 4, December 2007, pp 20-26.

The shared housing model has been used widely for many years in association with supported housing. It is the subject of debate among providers and commissioners, who may regard it as old-fashioned and not conducive to independent living, but for some clients and organisations it continues to offer a positive option in helping alleviate loneliness and isolation. Current growth in the work of social landlords and their agents includes a wider range of client groups with a variety of aspirations and support needs. Shared housing may offer new opportunities to these groups. With the new emphasis on neighbourhoods and inclusion, does the shared housing model possess attributes that commend it to communities in new ways, or is it a model of the past? The article offers suggestions to enable shared housing to be evaluated as part of housing associations' business plans while keeping a focus on residents' views, as reflected in 25 case study locations. (KJ/RH)

ISSN: 14608790

From : Website: <http://www.pavpub.com>

Social well-being in extra care housing; by Simon Evans, Sarah Vallyelly, Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, August 2007, 81 pp.

Since the 2005 general election, there has been a renewed emphasis on older people's housing issues, largely because an increasing proportion of the electorate is aged over 50. This document reports on a research project, which is part of the Joseph Rowntree Foundation's (JRF) research and development programme, by authors at the University of West of England and Housing 21. The research was conducted between April 2006 and March 2007. A literature review was carried out as part of this work and is available as a separate document. The overall aim of this study was to explore the social well-being of 'frail' people living in extra care housing. Data was collected through 36 in-depth interviews with extra care residents and managers from six extra care schemes in England. Themes emerging as important to social well-being were: friendship and social interaction;

the provision of facilities; design, location and layout; the philosophy of care; engagement with the local community; and the role of family caregivers. The Findings (no 2115) and the literature review are available as a free download on the JRF website. (KJ/RH)

From : Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP. Findings and full report available as free downloads from <http://www.jrf.org.uk>

Supporting independence for people with dementia in extra care housing; by Simon Evans, Tina Fear, Robin Means (et al).

*Dementia: the international journal of social research and practice*, vol 6, no 1, February 2007, pp 144-149.

This paper uses findings from a 3-year longitudinal study to examine the opportunities and challenges provided by extra care housing to support independence for people with dementia. The study by Sarah Vallely of Housing 21 and Simon Evans, Tina Fear and Robin Means of the Faculty of Health and Social Care, University of the West of England (UWE) has the title 'Opening doors to independence: a longitudinal study exploring the contribution of extra care housing to the care and support of older people with dementia'. The views of the tenants themselves were central to this research, along with those of relatives, care staff and other professionals from housing, health and social care. The authors discuss three features of the extra care environment seen as particularly important in supporting independence: the freedom to come and go within and beyond the housing scheme; maximising opportunities to "do things for themselves"; and having choices about how to spend their time. (RH)

ISSN: 14713012

From : <http://www.dem.sagepub.com>

## 2006

Abuse in sheltered housing: prevention, safeguards and good practice; by Imogen Parry.

*Working with Older People*, vol 10, issue 2, June 2006, pp 24-28.

Sheltered and retirement housing now accommodates frailer and more vulnerable people than originally intended. People move in later life and remain much longer than was the case 20 years ago. In this article, the author focuses on measures relevant to the abuse of vulnerable adults within sheltered (rented) and retirement (owner occupied) housing. These include the Department of Health (DH) "No secrets" document (2002), the Supporting People programme (introduced in 2003), the CHSC (formerly Centre for Sheltered Housing Studies), and a Sanctuary/Hanover policy document in 2000 on protection of vulnerable adults from abuse in sheltered housing. However, the issue of abuse of staff working in these sectors is not discussed. (RH)

ISSN: 13663666

Beyond sheltered accommodation: a review of extra care housing and care home provision for BME elders; by Adrian Jones, Research and Development Unit, Age Concern England - ACE; Chinese Housing Consultative Group (CHCG). London: Age Concern England, December 2006, 37 pp.

Findings are presented of the "desk research" stage of a proposed "Review of service provision for a changing, diverse older population: extra care housing and care homes". This phase reviewed research by the 1990 Trust and the Policy Research Institute on Ageing and Ethnicity (PRIAE); examined current provision of extra care and care homes for black and minority ethnic (BME) older people; and looked at other strategies for provision. Since there is neither much research on or provision for BME older people, it is suggested that part of an otherwise non ethnic-specific extra care development be used to meet this group's needs, as is the case in Bristol. (RH)

From : Lullyn Tavares, Research & Development Unit, Age Concern England, Astral House, 1268 London Road, London SW16 4ER. E-mail: [lullyn.tavares@ace.org.uk](mailto:lullyn.tavares@ace.org.uk)<http://www.ageconcern.org.uk>

Bringing assisted living services into congregate housing: housing directors' perspectives; by Nancy W Sheehan, Claudia E Oakes.

*Journal of Aging & Social Policy*, vol 18, no 1, 2006, pp 65-86.

The impact of an assisted living services (ALS) programme on directors of state-funded congregate housing is explored. The authors interviewed congregate housing directors about how adding the ALS programme to their facilities affected their management experiences. Four themes emerged from the focus group data: importance of assisted living services for promoting ageing in place; "cost" of offering ALS; differences in how the ALS programme was implemented; and organisational issues emerging from the merger of housing and healthcare models. (RH)

ISSN: 08959420

From : <http://www.tandfonline.com>

The effects of organizational policies on resident perceptions of autonomy in assisted living; by Elzbieta Sikorska-Simmons.

Journal of Housing for the Elderly, vol 20, no 4, 2006, pp 61-78.

Organisational policies were measured in terms of policies that foster resident choice and control in the facility, using a sample of 412 residents in 59 assisted living (AL) facilities. Resident autonomy was assessed according to resident perceptions of influence and independence. Hierarchical linear modelling was used to examine the effects of organisational policies on resident autonomy, controlling for facility size, ownership and level of care. Higher levels of choice-enhancing policies were related to more favourable resident perceptions of autonomy. These findings suggest that allowing residents more choice in their daily routines may contribute to greater resident autonomy. (RH)

ISSN: 02763893

From : <http://www.tandfonline.com>

An empirical typology of residential care/assisted living based on a four-state study; by Nan Sook Park, Sheryl Zimmerman, Philip D Sloane (et al).

The Gerontologist, vol 46, no 2, April 2006, pp 238-248.

Residential care or assisted living describes diverse facilities providing non-nursing home care primarily to older residents. This article derives typologies of assisted living based on theoretically and practically grounded evidence. The authors obtained data from the Collaborative Studies of Long-Term care, which examined 193 assisted living facilities in four states: Florida, Maryland, New Jersey and North Carolina. By using mixture modelling, typologies were derived in five different ways, based on: structure; process; resident case-mix; structure and process; and structure, process and resident case-mix. Although configurations of typologies varied as a function of criterion variables used, common themes emerged from different cluster solutions. A typology based on resident case-mix yielded a five-cluster solution, whereas a typology based on structure, process and resident case-mix resulted in six distinct clusters. Medical case-mix or psychiatric illness and high resident impairment were two clusters identified by both strategies. Typologies such as those described in this article may be useful in clinical practice, research and policy. To the extent that public payment defines its own cluster, the potential for inequities in care merits careful attention. (RH)

ISSN: 00169013

From : <http://www.geron.org>

Extra care housing: is it really an option for older people?; by Laura Dawson, Jacquetta Williams, Ann Netten.

Housing, Care and Support, vol 9, no 2, October 2006, pp 23-29.

Extra care housing enables older people to remain in their "own home", while providing appropriate housing and access to health and social care services that are responsive to their needs. This type of provision is very much in line with the government policy of fostering people's sense of control and independence, and is a priority area for expansion. The authors explore current levels of development and expansion of extra care housing in terms of the numbers of schemes and places and factors that contributed to and were problematic in its development. (RH)

ISSN: 14608790

From : Website: <http://www.pavpub.com>

Extra care housing for people with dementia; by John Dow.

Journal of Integrated Care, vol 14, issue 3, June 2006, pp 19-23.

The author considers some of the legal complexities involved in developing extra care housing for people with dementia. He discusses, first, whether extra care schemes will be registrable under the Care Standards Act 2000 as a care home. Second, will dementia sufferers have the mental capacity to enter into tenancies? Lastly, the Disability Discrimination Act 1995 should be considered with regard to landlords' actions in accepting or ending tenancies. (RH)

ISSN: 14769018

From : <http://www.pavpub.com>

Housing with capacity: the Mental Capacity Act explained; by Toby Williamson.

Housing, Care and Support, vol 9, no 4, December 2006, pp 13-19.

The Mental Capacity Act 2005 comes into effect in England and Wales in 2007. The Act contains principles, procedures and safeguards to empower people to make decisions for themselves wherever possible, but also to ensure that decisions made on their behalf if they lack the mental capacity to make the decision themselves are done in their best interests. The Act will apply to anyone working in the supported housing field or residential care where residents may lack the capacity to make decisions as a result of illness, injury or disability. This article gives an overview of the Act and its relevance to the field of supported housing. (RH)



ISSN: 14608790

From : Website: <http://www.pavpub.com>

Ideal versus actual levels of decision-making in South Australian aged care resident committees; by Leah Wilson, Neil Kirby.: Blackwell Publishing, June 2006, pp 69-73.

Australasian Journal on Ageing, vol 25 no 2, June 2006, pp 69-73.

177 resident committee members in 15 South Australian low-level residential aged care facilities (RACFs) participated in this study, the aim of which was to investigate the level and types of decision-making that residents have. Residents wanted to participate significantly more in decision-making than they were currently did, particularly in the areas of deciding on new activities, planning menus and making policies on safety hazards. The existence of resident committees did not ensure that residents participated in decision-making to the extent that they wished. Resident committees would benefit from regular evaluation to determine whether residents are provided with opportunities to participate in decision-making in areas that are important to them and to the levels they desire. (RH)

ISSN: 14406381

From : <http://www.cota.org.au> / <http://www.blackwellpublishingasia.com>

"It's fantastic!": [Extra care housing for disabled people]; by Jim Ledwidge.

Community Care, no 1608, 2 February 2006, pp 36-37.

Extra care housing has been used to give older people independence, but it can also dramatically improve the lives of disabled people. This article supports this assertion, by describing an innovative large supported housing scheme in Bradford, which demonstrates the use of extra care housing for severely disabled people under pension age as an alternative to residential care. The author illustrates how the right environment and support reduces levels of dependency and reduces the need for intensive packages of care. (RH)

ISSN: 03075508

Job satisfaction and intention to quit among frontline assisted living employees; by Janice K Purk, Scott Lindsay.

Journal of Housing for the Elderly, vol 20, no 1/2, 2006, pp 117-132.

Assisted living facilities in the US face high rates of employee turnover; and nursing homes with high employee turnover report reduced quality of care for residents, lower employee morale, and financial burden for the facility owners. Five communities in Georgia, US were examined to determine the effects of employee turnover. The Job Descriptive Index and Job-in-General surveys measured job satisfaction. 36 respondents' attitudes and intention to quit were measured. Results indicated age and tenure did not correlate significantly with intention to quit. However, dissatisfaction with pay rates, opportunities for promotion, and the perceived amount of emotional exhaustion and physical strain are not more likely to have greater quitting intentions. Pay and promotion satisfaction were significantly correlated with job satisfaction but not with quitting intentions. Frontline employees were satisfied with their work, supervision and co-workers, but were dissatisfied with the pay levels and opportunities for promotion. Communities with lower staff turnover had more satisfied employees. (RH)

ISSN: 02763893

From : <http://www.tandfonline.com>

Linking resident satisfaction to staff perceptions of the work environment in assisted living: a multilevel analysis; by Elzbieta Sikorska-Simmons.

The Gerontologist, vol 46, no 5, October 2006, pp 590-598.

Research indicates that the quality of the work environment for care home staff influences resident satisfaction indirectly, through its impact on staff attitudes and relationships with residents. 235 residents and 298 staff members in 43 assisted living facilities were included in this analysis. Data were collected by self-administered questionnaires. Staff perceptions were assessed at the facility level, using aggregate measures of job satisfaction, organisational commitment, and views of organisational culture. Greater resident satisfaction in the facility was associated with higher staff job satisfaction and more positive staff views of organisational culture (e.g. greater teamwork and participation in decision-making). From residents characteristics, only education was significantly related to satisfaction, with the more educated being less satisfied with assisted living. While these findings suggest that a good quality of work environment for the staff contributes to a better quality of care for residents, more research is needed to examine the causal nature of this relationship. (RH)

ISSN: 00169013

From : <http://www.geron.org>

A little extra: [replacing residential care homes with extra care units]; by Nancy Nelson.  
Community Care, no 1627, 15 June 2006, pp 34-35.

In 2002, the London Borough of Tower Hamlets formed a partnership with the housing charity, Epic Trust, to replace a residential care home for older people with 40 self-contained extra-care flats with on-site care and support. This article outlines challenges faced by its service manager, Nancy Nelson: first, regarding the decision to demolish the care home; and second, her decision to recruit local people from many backgrounds. (RH)

ISSN: 03075508

From : <http://www.communitycare.co.uk>

The meaning of stigma: identity construction in two old-age institutions; by Tova Gamliel, Haim Hazan.

Ageing and Society, vol 26, part 3, May 2006, pp 355-371.

People in advanced old age with frailties and those who are resident in old-age institutions manage their identities within the constraints of stigmatised settings. This paper compares the processes of identity construction in an old-age home and in a sheltered housing project for older people in Israel. Applying a symbolic-interactionist perspective that sees old-age institutions as social arenas for the reconstruction of identity, the paper first distinguishes the residents' constructions of stigma and deviance. While the old-age home residents collectively turned their stigma into a source of positive labelling, the sheltered housing residents drew advantages from their previous roles and statuses. Gossip is shown to play a critical role in reproducing stigma, particularly in the old-age home. These findings are used to demonstrate the variability and potential for adaptation among the residents - who are often stereotyped as homogeneous and passive. The paper concludes with a discussion of the literal and metaphorical languages used by older people, and of stigma as a positive instrument that can introduce content into the definition of the self. (KJ/RH)

ISSN: 0144686X

From : [http://www.journals.cambridge.org/jid\\_ASO](http://www.journals.cambridge.org/jid_ASO)

Measuring resident and family member determinants of satisfaction with assisted living; by Perry Edelman, Marylou Guihan, Fred B Bryant (et al).

The Gerontologist, vol 46, no 5, October 2006, pp 599-608.

Measures of satisfaction with assisted living from residents' and family members' perspectives were developed in this study. Data were collected from 204 residents and 232 family members associated with 11 assisted living facilities. Confirmatory factor analysis was used to evaluate the goodness of fit of a priori measurement models. Iterative analysis to improve measurement models resulted in a multifaceted unidimensional model of resident satisfaction and a 5-factor model of family member satisfaction. These measures should help administrators attempting to meet the needs of their residents, and be useful to potential clients in judging the appropriateness of specific assisted living facilities. (RH)

ISSN: 00169013

From : <http://www.geron.org>

Opening doors to independence: a longitudinal study exploring the contribution of extra care housing to the care and support of older people with dementia; by Sarah Vallyelly, Simon Evans, Tina Fear (et al), Housing 21; Housing Corporation; Dementia Voice; Faculty of Health and Social Care, University of the West of England (UWE). London: Housing 21, 2006, 137 pp.

More than 750,000 people in the UK have dementia, and by 2050 this is will rise to 1.8 million. This is a report of 3-year tracking study carried out by Dementia Voice and the University of West of England (UWE), funded by Housing 21 and the Housing Corporation. The aim was to evaluate the contribution that extra care housing can make to the long term care and support of people with dementia; to make recommendations for good practice and assess the limitations of extra care housing; and to capture the views of older people with dementia. The study tracked people with dementia in Housing 21's extra care housing courts. Data was collected on 103 people; and 36 people with dementia were interviewed up to five times from July 2003 to October 2005. This report presents findings on the extra care environment; the health and social care of residents with dementia; and the perspectives of residents and their relatives. Overall, extra care housing is providing a good quality of life for the majority of residents who have dementia, many of whom also have complex health needs. Many older people recognise that, of the housing options available to them, extra care is more suitable in helping them to maintain their independence. A 14-page summary is also available on Housing 21's website. (RH)

Price: £25.00

From : Housing 21, Clifton House, 93-101 Euston Road, London, NW1 2RA. Summary report:  
[http://www.housing21.co.uk/pdf/report\\_summary.pdf](http://www.housing21.co.uk/pdf/report_summary.pdf)

Preventative care and sheltered/retirement housing: a workshop, University of Sussex, 6 April 2006; by Centre for Social Policy and Social Work, University of Sussex; Sussex Gerontology Network, Sheltered Housing Group. Brighton: School of Social Sciences, University of Sussex, 2006, 14 pp.

Increasingly, government policy on health and social care stresses the value of preventative care. This concept can be ambiguous, ranging from "that little bit of help" enabling a person to continue to live independently, to the support needed to prevent hospital admission or re-admission. Sheltered housing must therefore clearly state that its prime task is to provide preventative care. This report comprises commentaries of contributors' papers, variously representing the perspectives of the Supporting People programme, the ERoSH Outcomes Tool, and of residents themselves. A paper by the Convenor, Peter Lloyd, "Preventative care and the role of sheltered/retirement housing" is also available on the Reports section of the Housing LIN website, (<http://www.changeagentteam.org.uk/housing>). (RH)

Price: £3.00

From : Professor Peter Lloyd, School of Social Sciences, University of Sussex, Brighton BN1 9SN.

The role of the outdoors in residential environments for aging; by Susan D Rodiek, Benjamin Schwarz (eds). New York: Haworth Press, Inc, 2006, 265 pp.

This book presents insight into the positive role nature and the outdoors can play in the lives of older adults, whether they live in the community, in an assisted-living environment, or in a nursing home. Current research suggests that increased contact and activity levels with the outdoors can be an important therapeutic resource with significant mental and physical health benefits. This book examines how to make the most of outdoor spaces in residential settings. It explores attitudes and patterns of use; and the effect of plants, the physical environment, and health-related outcomes from contact with nature and enhanced physical activity. The book has been published simultaneously as the Journal of Housing for the Elderly, vol 19, nos 3/4, 2005. (KJ/RH)

Price: US\$24.95 pbk; US\$39.95 hdbk

From : The Haworth Press, Inc. 10 Alice Street, Binghamton, New York 13904-1580  
USA.<http://www.HaworthPress.com>

Sheltered housing: who is it meant for? The allocation process: a workshop, University of Sussex, 27 September 2006; by Centre for Social Policy and Social Work, University of Sussex; Sussex Gerontology Network, Sheltered Housing Group. Brighton: School of Social Sciences, University of Sussex, 2006, 14 pp.

This workshop develops themes from the previous workshop, "Preventative care and sheltered/retirement housing" held on 6 April 2006. Sheltered housing is not meant to provide support for all categories of older people, and there are some for whom sheltered housing is not appropriate. Commentaries on contributors' papers expand on the reasons, first that sheltered housing cannot provide the support needed (for example to those with high mental or physical care needs). More importantly, such allocations may actually threaten to negate the provision of preventative care to existing residents. (RH)

Price: £3.00

From : Professor Peter Lloyd, School of Social Sciences and Cultural Studies, University of Sussex, Brighton BN1 9SN.

Sure Start services for older people; by Michele Hollywood.

Working with Older People, vol 10, issue 3, September 2006, pp 31-33.

The government's announcement earlier in 2006 to adopt and develop the Sure Start for children and families model to cater for socially excluded older people has been well-received. The author of this article examines sheltered housing's contribution towards this new service development - published as "A Sure Start to later life" - and how it may benefit older people, not just the vulnerable. (RH)

ISSN: 13663666

Utility of the Maryland Assisted Living Functional Assessment Tool; by Barbara Resnick, Dak Yoo Jung. Journal of Housing for the Elderly, vol 20, no 3, 2006, pp 109-121.

The utility of the Maryland Assisted Living Functional Assessment Tool (MALFA) was considered in terms of predicting successful living in an assisted living facility (ALF). Consideration of this tool's utility was based on the predictive ability of the measure at baseline to explain length of stay and level of care needed for residents (nursing home versus assisted living) over a 5-year period. 76 residents from one ALF in the Baltimore area were tested annually over five years. Those who moved to a nursing home at some point during the five years (47%) had higher mean scores on admission with regard to need for nursing interventions because of cognitive and psychiatric problems or to perform medical treatments. Illness influenced the number of years in assisted living and accounted for 7% of the variance. The assessment tool provides a wealth of information about the resident and can be used to alert providers to consider those with high scores in sub-scales such as need for monitoring of cognitive and psychiatric problems or need for medical treatment in terms of being a risk for

nursing home placement. Future work should consider how to optimally use the MALFA in implementing interventions in assistive living that will prevent decline in areas that seem likely to result in a need for a higher level of care. (RH)

ISSN: 02763893

From : <http://www.tandfonline.com>

The whole of me ... : meeting the needs of older lesbians, gay men and bisexuals living in care homes and extra care housing: a resource pack for professionals; by Sally Knocker, Age Concern England - ACE. London: Age Concern England - ACE, 2006, 42 pp.

The majority of care home and housing managers are committed to treating older residents with respect as individuals. However, the reality for many lesbian, gay and bisexual residents is that they feel uneasy about being open. This resource pack is intended principally for registered care home managers and managers of extra care housing and their staff teams, as well as operational and policy managers. The aim is to explore some of the most pressing issues for older lesbians, gay men and bisexuals in care settings. It offers practical and achievable ideas, also examples of good practice. (RH)

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. [www.ageconcern.org.uk](http://www.ageconcern.org.uk)

## 2005

A 20/20 vision for housing and care: research report; by Jane Allardice, 20/20 Project (ERoSH; Association of Social Alarm Providers - ASAP; Centre for Sheltered Housing Studies; National Housing Federation); Jane Allardice Communications Ltd.: Electronic format only, 2005, 42 pp (+ executive summary).

The 2020 vision is "a society where people will be able to access and benefit from the housing support, telecare and health services they aspire to, with full knowledge of the options available". Partner organisations indicate the breadth of interest for the 20/20 Project: the Telecare Services Association (formerly ASAP), the Centre for Sheltered Housing Studies (CSHS), ERoSH (the national consortium for sheltered and retirement housing), the National Housing Federation, the Association of Retirement Housing Managers, the Chartered Institute of Housing (CIH), Counsel and Care, Elderly Accommodation Counsel (EAC) and the Federation of Black Housing Organisations. This report comments on only brief coverage of extra care housing and telecare in the Green Paper, "Independence, well-being and choice: a vision for adult social care in Britain" (TSO, 2005); nor did it suggest a statutory duty on agencies to work together on housing strategy. It reports results of a large consultative exercise with stakeholders, covering: responding to changing needs and aspirations; housing choices and extending the options; "future proofing" (designing housing built for people irrespective of age); diversity of communities; dignity and independence; and empowering the housing workforce. Recommendations are made on what these stakeholders - providers, government and local authorities - need to consider in future provision. (RH)

From : 20/20 Project, 11a Westminster Palace Gardens, 1-7 Artillery Row, London SW1P 1RL. Website: [www.shelteredhousing.org.uk](http://www.shelteredhousing.org.uk) E-mail: [info@shelteredhousing.org.uk](mailto:info@shelteredhousing.org.uk) Another web link: [www.cih.org/policy/papers12a.htm](http://www.cih.org/policy/papers12a.htm)

Approaches to 24-hour cover in Abbeyfield supported sheltered houses; by Abbeyfield Society. St Albans: Abbeyfield Society, 2005, 11 pp.

The term "24-hour cover", in the context of this booklet, refers to a method by which residents can be confident that without fail, they can get help at any time of the day or night, by using in-house alarm systems, either to reach staff or to a separate control system that can summon assistance. This booklet gives reasons why Abbeyfield supported sheltered houses (SSH) are seeking to provide 24-hour cover, but noting issues such as the Working Time Regulations, the financial implications of doing so, and a check-list of on-call arrangements. (RH)

From : Abbeyfield, Abbeyfield House, 53 Victoria Street, St Albans, Herts AL1 3UW. [www.abbeyfield.com](http://www.abbeyfield.com)

Assessing quality of life in specialist housing and residential care: a workbook for housing providers; by Moyra Riseborough, Adrian Jones, Centre for Urban and Regional Studies, University of Birmingham; Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, 2005, 56 pp.

Quality of life and quality of outcome are central to policy and practice. This workbook is organised to take specialist housing and care providers through the process of assessing quality of life in particular settings. The workbook contains a set of research instruments to assess the quality of life people have in specialist housing and care settings and instructions on how to use them. There are five steps in the process, which are covered as follows: preparing and planning; applying the research instruments; the research instruments; analysing the responses; and reflecting, reporting and preparing an action plan for improvement. (RH)

ISBN: 185935307X

Price: £13.95

From : York Publishing Services, 64 Hallfield Road, Layerthorpe, York YO31 7NZ. PDF download available - <http://www.jrf.org.uk> Alternative formats such as large print, Braille, audio tape or disk available from Communications Department, Joseph Rowntree Foundation, 40 Water End, York YO30 6WP.

A better future for supported housing; by Peter Molyneux.

Housing, Care and Support, vol 8, no 1, February 2005, pp 17-20.

The National Housing Federation's initiative, In Business for Neighbourhoods, urges all housing associations to ensure that they focus on users, to diversify funding and manage costs, while working in partnerships with others to serve the whole population of a community or neighbourhood. General-needs housing providers cannot be "in business for neighbourhoods" without meeting the needs of frail older people, care leavers, people recently released from prison, or women fleeing domestic violence. Supported housing is the only part of the housing association sector with a clear and untainted focus on users, the only part with a rigorous focus on costs and efficiency, and the only part developed through partnership, owing everything to partnership. In their report, "In business to support people: the future of supported housing", Julia Unwin and Peter Molyneux argue that supported housing agencies must be allowed to find ways to grow as organisations and to cope with a highly unstable market, if they are to respond effectively to the challenges posed by increasing demand for citizenship and choice. (RH)

ISSN: 14608790

From : Website: <http://www.pavpub.com>

Care homes in the heart of the community: final report of the NAPA Growing with Age project; by Sally Knocker, Barbara Avila, Growing with Age, National Association for Providers of Activities for Older People (NAPA). London: NAPA, 2005, 42 pp.

This report shares the work of the 3-year action research project, Growing with Age, run by the National Association for Providers of Activities for Older People (NAPA). The project was funded by the Big Lottery Fund, and focused on exploring possibilities for greater links between residents of care homes and the communities in which they live. Other aims were: to combat negative images of life in care homes and sheltered housing by encouraging positive exchanges between older residents and members of the local community; and to share and spread ideas for good practice. (RH)

From : NAPA, Bondway Commercial Centre, 5th Floor Unit 5.12, 71 Bondway, London SW8 1SQ.

[www.napa-activities.co.uk](http://www.napa-activities.co.uk)

Care provision in housing with supportive services: the importance of care type, individual characteristics, and care site; by Charles D Phillips, Catherine Hawes.

Journal of Applied Gerontology, vol 24, no 1, February 2005, pp 55-67.

Housing with supportive services is an important long-term service, but information about care provision to residents in these settings is largely unavailable. The role of individual characteristics versus facility identity in determining how care is provided is completely unexplored. Data from 60 facilities in one US state were used to investigate the degree to which individual characteristics and facility identity determined how much care was provided to residents. Individual characteristics had the predicted impact on the amount of direct care time received by individuals. Care that was dementia oriented, however, was more strongly affected by the identity of the facility than by individual characteristics. These results have important implications for how consumers should think about seeking, policy makers should think about supporting care for those with impaired cognitive status who use housing and cognitive services. (RH)

ISSN: 07334648

From : <http://www.sagepub.com>

City memories: reminiscence as creative therapy; by Chris Joyce.

Quality in Ageing, vol 6, no 4, December 2005, pp 34-41.

This paper describes and evaluates a recent innovative project in Liverpool that brought together the skills and creative vision of a major national museums group in partnership with the housing action trust (HAT). "City Memories" created opportunities for older people to take part in reminiscence activities at the museums and in a large extra care housing setting in the community. Training was provided for community leaders, care home managers and care workers, in order to help them to apply some of the ideas in their own work. The project looked at outcomes for older people who participated in terms of increased stimulus and sense of well-being. There was a special focus on those with conditions such as stroke and dementia. It is hoped that such work will inspire others to put therapeutic reminiscence into practice in their own settings and circumstances, and that it

may be possible at some stage to conduct a more systematic study to test the benefits of this approach in relation to measurable health gains. (RH)

ISSN: 14717794

From : <http://www.pavpub.com>

Depression and older people : the role of sheltered/retirement housing: a workshop, University of Sussex, 21 September 2005; by Centre for Social Policy and Social Work, University of Sussex; Sussex Gerontology Network, Sheltered Housing Group. Brighton: School of Social Sciences, University of Sussex, 2005, 14 pp.

The purpose of the workshop was to help scheme managers and residents to: recognise the symptoms of depression; know what help is available; and explore the ways in which sheltered housing can reduce older people's vulnerability to depression, especially through mitigating stress factors and promoting social activity. Workshop sessions and presentations focused on the medical and social models of depression. The workshop was co-hosted by Mary Godfrey, a co-author of "Depression and older people" (Help the Aged, 2004); she provided two vignettes for participants to discuss and to identify obstacles and offer solutions. (RH)

Price: £3.00

From : Professor Peter Lloyd, School of Social Sciences, University of Sussex, Brighton BN1 9SN.

Digital Unite: making IT part of everyday life; by Gill Adams.

Working with Older People, vol 9, no 2, June 2005, pp 22-25.

As Digital Unite programmes become available to housing providers throughout the UK, the author explains why it is important to ensure that sheltered housing residents are included in information technology (IT) literacy programmes. The principle of empowering and engaging older people through the use of digital technology is emphasised. (RH)

ISSN: 13663666

From : <http://www.pavpub.com>

Explaining about ... sheltered housing and the Single Assessment Process; by Peter Huntbach, Jilly Alexander.

Working with Older People, vol 9, issue 4, December 2005, pp 8-11.

For many professionals within the sheltered housing sector, this is a time of real change and opportunity. The authors explain the benefits to be reaped for residents and staff by connecting health, housing and social care professionals through the Single Assessment Process (SAP). This article outlines how SAP works in practice within the sheltered housing service and where it sits with the assessments and support plans already undertaken. It concludes that sheltered housing providers will have to adapt their working practises to incorporate needs assessments and support plans, as required by Supporting People. To do so will help both residents to be at the centre of the process and establish the role of staff within the whole system of care management. (KJ/RH)

ISSN: 13663666

Future need and demand for supported accommodation for people with learning disabilities in England; by Eric Emerson.

Housing, Care and Support, vol 8, no 4, December 2005, pp 17-22.

Despite changes in the nature of supported accommodation services for people with learning disabilities, little progress was made during the 1970s, 1980s and 1990s in tackling unmet need. While the advent of Supporting People has more recently led to an increase in the volume of provision, unmet need continues to be a major concern to people with learning disabilities and their families. There is good reason to believe that, as a result of changes in the demographic profile of people with learning disabilities, changes in expectations and changes in the pattern of informal care, this issue will become substantially more pressing over the next two decades. This paper attempts to estimate the nature and extent of increased need. (RH)

ISSN: 14608790

From : Website: <http://www.pavpub.com>

General practice - special practice: GP healthcare for older people in care and sheltered accommodation managed by charitable organisations: report of a project funded by the Department of Health and conducted by Association of Charity Officers; by Association of Charity Officers - ACO. Potters Bar, Herts: Association of Charity Officers, 2005, 71 pp.

"Fees paid to GPs for services provided to residents of care accommodation for older people - 2000-2001" - an earlier report by ACO (with VOICES and OBFA) - showed that older people in residential care and sheltered housing were being treated differently in different geographic areas. This report describes a programme of work carried out to establish exactly what older people in residential care and sheltered settings want from their general practitioners (GPs). Its findings are presented in the context of the overall policy environment in which

care homes operate and in which GPs conduct their business. The report suggests some "hallmarks" for good practice in the provision of healthcare for older people in residential care and sheltered housing. (RH)

ISBN: 1952872439

Price: £3.00 per copy to cover p&p

From : Association of Charity Officers, Unicorn House, Station Close, Potters Bar, Herts EN6 3JW. Email: info@aco.uk.net Website: www.aco.uk.net

How good is assisted living?: findings and implications from an outcomes study; by Sheryl Zimmerman, Philip D Sloane, J Kevin Eckert (et al).

Journals of Gerontology: Series B, Psychological Sciences and Social Sciences, vol 60B, no 4, July 2005, pp S195-S205.

Assisted living (AL) is a term applied a wide range of residential facilities for older people in the US, but usually excludes nursing homes providing personal care. The researchers used interviews and observations regarding the state and care of 2,078 residents in 193 AL facilities across four US states, with follow-up telephone interviews with care providers. Annual mortality and transfer rates were 14.4 and 21.3 per 100 residents respectively. The probability of hospital admission and new or worsening illnesses over a standardised quarter per 100 residents were 12.7 and 22.7. Standardised change in function was notable among those who were transferred or died, but was small for others. Facility characteristics did not generally relate to medical outcomes and transfer, and those that related to functional change were small and occurred across multiple functions. Facilities that were affiliated with another level of care were more likely to transfer; nurse staffing was favourable for hospital admissions but not transfer; and care assistant turnover was protective for mortality. Procedures and outcomes are inconsistent, and effect sizes are small. Thus, practice and policy should not focus narrowly on any one area or restrict the type of care. (RH)

ISSN: 10795014

From : <http://www.geron.org>

Intermediate care - connecting housing and health; by Claire Wilmot.

Working with Older People, vol 9, issue 4, December 2005, pp 16-19.

Intermediate care is a set of services which cross existing boundaries, providing care for people who no longer require accommodation and support in hospital, yet are still in need of temporary care to get back to normal living. The author describes facilities provided by Hanover Housing Association's Up & About intermediate care service at two locations. Poppyfields at St Neots in Cambridgeshire, an extracare scheme, works in partnership with Huntingdonshire Primary Care Trust (PCT). Cotswold and the Vale Primary Care Trust has developed 16 sheltered housing units providing intermediate care at St Peter's Court in Cirencester, Gloucestershire, Hanover's first Up & About facility. (RH)

ISSN: 13663666

Intermediate care service in extra care sheltered housing: case study for the Housing Learning and Improvement Network; by Housing Learning and Improvement Network - HOusing LIN, Change Agent Team.

Housing, Care and Support, vol 8, no 4, December 2005, pp 9-12.

This case study gives an example of an integrated intermediate care service that provides short-term, intensive support and assistance combined with the facilities and services offered by extra care sheltered housing. The service is a partnership between the local authority social services department (SSD) in the Royal Borough of Windsor and Maidenhead, the primary care trust (PCT), and Maidenhead and District Housing Association. (RH)

ISSN: 14608790

From : Website: <http://www.pavpub.com>

The intersection of aging, disability, and supportive environments: issues and policy implications; by Debra Sheets, Phoebe Liebig.

Hallym International Journal of Aging, vol 7, no 2, 2005, pp 143-164.

As old age becomes an established part of life, disability is an increasingly common experience. Although the overall health profile of older people is improving, the high prevalence of chronic disabling conditions means the numbers of older adults ageing into disability is growing rather dramatically, due to the fact that more disabled people survive into old age and more aged people become disabled. The ageing of the disabled population and the potential their situation portends for ageing advocates and disability activists to address common issues affecting the intersection between formerly disparate populations is highlighted. It is suggested that supportive living environments provide an opportunity for coordinated political action. It is important to understand the changing demographics of disability and the need for supportive living environments. Identifying issues that hinder or buttress efforts to build coalitions between the ageing network and disability community is

also imperative. Public policies in the United States serving both populations are reviewed to extend understanding of the benefits and challenges of such approaches. The authors conclude by identifying how efforts to develop cooperative approaches can provide models for other governments to address the needs of their older and disabled populations within their own countries. (KJ/RH)

ISSN: 15356523

From : <http://baywood.com>

The needs of older people in sheltered housing: a comparison of inner city and new town areas; by Elizabeth Field, Mike Walker, Geraldine Hancock (et al).

*Journal of Housing for the Elderly*, vol 19, no 2, 2005, pp 107-117.

Sheltered accommodation in the UK is commonly seen as a half-way house between independent community living and long-term care, but little is known about the health and needs of its residents. This study compared the needs of older people living in sheltered housing in two contrasting areas. 51 residents from three inner-city sheltered housing schemes and 87 from three new town schemes were interviewed using the Camberwell Assessment of Need for the Elderly (CANE). They were also asked about their social networks, health, service use, and reasons for moving into sheltered housing. Each unit's facilities, policies and physical layout were evaluated using the Multiphasic Environmental Assessment Procedure (MEAP) and warden interview. 75 out of 138 residents (54%) had one or more unmet need, but the number of unmet needs did not differ between the two areas. Unmet needs were more common in people with activity limitation, mental health problems, or limited social networks. Inner city residents had poorer mental and physical health, but used local resources more and viewed their placement as more successful than those in the new towns. Sheltered housing units should be flexible to meet the variety of needs, and also use residents' strengths and resources. In the new town area, those with restricted social networks may have had higher unmet needs, because they had better access to community resources, such as transport. Sheltered accommodation needs to have better access to local community resources to help prevent residents feeling isolated. (RH)

ISSN: 02763893

From : <http://www.tandfonline.com>

Predictors of organizational commitment among staff in assisted living; by Elzbieta Sikorska-Simmons.

*The Gerontologist*, vol 45, no 2, April 2005, pp 196-205.

Organisational commitment is important because of its close links to staff turnover. This study examines the role of organisational culture, job satisfaction and sociodemographic characteristics as predictors of the organisational commitment of staff in assisted living. Data were collected from 317 staff members in 61 facilities in Maryland, using self-administered questionnaires distributed by a researcher during 1-day visits to each facility. Organisational commitment was measured by the extent of staff identification, involvement and loyalty to the organisation. Organisational culture, job satisfaction and education were strong predictors of commitment, together explaining 58% of the total variance in the dependent variable. Higher levels of organisational commitment were associated with more favourable staff perceptions of organisational culture and greater job satisfaction. In addition, more educated staff members tended to report higher levels of organisational commitment. Other than education, sociodemographic characteristics failed to account for a significant amount of variance in organisational commitment. Because job satisfaction and organisational culture were strong predictors of commitment, interventions aimed at increasing job satisfaction and creating an organisational culture that values and respects staff members could be most effective in producing higher levels of organisational commitment. (RH)

ISSN: 00169013

From : <http://www.geron.org>

Religiosity and work-related attitudes among paraprofessional and professional staff in assisted living; by Elzbieta Sikorska-Simmons. Binghamton, NY: The Haworth Pastoral Press, Inc, 2005, pp 65-82.

*Journal of Religion, Spirituality and Aging*, vol 18, no 1, 2005, pp 65-82.

Relationships between religiosity and work-related attitudes were assessed for 182 paraprofessional and 125 professional staff in 61 assisted living facilities in Maryland. Data were collected from staff using self-administered questionnaires. The attitudes examined included job satisfaction, co-worker satisfaction, and organisational commitment. Greater religiosity was found to be associated with higher job satisfaction and greater organisational commitment among paraprofessional staff. When considered together with age, sex and education, religiosity emerged as a significant predictor of organisational commitment for paraprofessional staff. Since lack of commitment predicts staff turnover, these findings have practical implications for administrators who want to increase staff retention. (RH)



ISSN: 15528030

From : <http://www.tandfonline.com>

Researching older people with dementia in supported housing; by Simon Evans.

Generations Review, vol 15, no 4, October 2005, pp 3-7.

Despite calls for greater user involvement in service evaluation and development, the views and experiences of people with dementia are excluded from much research. Reasons include assumptions about levels of awareness, doubts about the validity of accounts, the challenge of informed consent and over-reliance on obtaining views by proxy from formal and informal carers. This paper explores the benefits of directly including the voices of people with dementia in research, and identifies a range of strategies for overcoming the methodological challenges of a more inclusive approach. Examples from a study that aimed to explore the characteristics and suitability of extra care housing from a user perspective illustrate ethical dilemmas and practical challenges, including the role of gatekeeper, gaining informal consent and meeting the specific needs of people with dementia as research participants. (RH)

ISSN: 09652000

From : (Editorial e-mail address) [gr@ageing.ox.ac.uk](mailto:gr@ageing.ox.ac.uk)

Satisfaction with care among community residential care residents; by Michael P Curtis, Anne E B Sales, Jean H Sullivan (et al).

Journal of Aging and Health, vol 17, no 1, February 2005, pp 3-27.

The authors conducted interviews with 176 community residential care (CRC) residents and their providers in Washington State. Logistic regression was used to identify resident and physical characteristics, policies and services, and aggregate resident characteristics associated with satisfaction. Residents had high levels of satisfaction, demonstrating most concern with the facility being able to meet their future needs and food quality. Resident demographics and health status were associated with satisfaction. Contrary to hypotheses, facility type (adult family home and assisted living) was the only facility characteristic strongly associated with satisfaction. Possible explanations include that the relationship between satisfaction and facility characteristics is more complex than expected, as well as significant challenges in measuring satisfaction and facility characteristics. The inconsistent results of previous satisfaction studies do not provide direction for imposition of uniform standards for facility characteristics, if the goal is improved satisfaction. (RH)

ISSN: 08982643

From : <http://www.sagepub.com>

Sheltered housing as a community resource: a workshop, University of Sussex, 14 April 2005; by Centre for Social Policy and Social Work, University of Sussex; Sussex Gerontology Network, Sheltered Housing Group. Brighton: School of Social Sciences, University of Sussex, 2005, 11 pp.

Sheltered housing is usually perceived as an amenity only for its older residents. Presentations at this workshop offered an alternative image of sheltered housing schemes as neighbourhood resource centres, places which can be visited for social events, personal services (e.g.hairdressing or chiropody). Contributors to the workshop presented case studies on innovative local schemes, including a community restaurant, a social activities programme, outreach services, and recuperative care. Recommendations on good practice are offered. (RH)

Price: £3.00

From : Professor Peter Lloyd, School of Social Sciences, University of Sussex, Brighton BN1 9SN.

## **2004**

20-20 vision: [retirement villages]; by Chris Smith.

Care and Health Magazine, issue 90, 9 November 2004, pp 20-21.

Retirement villages have become a key part of social care provision in other countries including the US, Japan and Germany. This article looks at the attraction of retirement villages, noting the research being conducted at the University of York's Housing Unit, the advantages of ExtraCare housing, and Hartrigg Oaks near York which is often cited as the model for such housing. (RH)

ISSN: 14779994

From : <http://www.careandhealth.com>

The adjustment to a new home; by Debra Dobbs.

Journal of Housing for the Elderly, vol 18, no 1, 2004, 51-72.

This ethnographic study uses grounded theory to explore the meanings of "home" and "care" for residents in an assisted living facility. The narratives of residents and staff in the setting are analysed using the theoretical concepts of the abstract and concrete meanings of home as outlined by Groger (1995). This study finds that

unlike a nursing home, an assisted living setting provides the continuity of concrete meanings of home (the physical features and aesthetic appearance), but does not provide the abstract meanings of home. The findings also reveal that residents have definitions of care contrary to those typically given by staff. (KJ/RH)

ISSN: 02763893

From : <http://www.tandfonline.com>

Assisted living in BC: a gradually developing 'new era' regulatory process; by Charmaine Spencer, Gerontology Research Centre, Simon Fraser University, Vancouver.

Seniors' Housing Update, vol 13, no 2, 2004, pp 3-8.

On May 14 2004, new legislation came into force in British Columbia (BC) governing assisted living residents and establishing a regulatory scheme for them. The province has experienced major growth in the development of such facilities over recent years; and a self-regulatory environment alone has been unable to maintain high standards in assisted living and assure the well-being of residents, Such is illustrated by examples in the the United States, where there is no standardized regulation of the industry. The article explains BC's regulatory framework, which aims to achieve basic standards and guidelines for assisted living facilities. The application and registration process, including the role of the Register, is described, as well as the cost, health and safety issues. Service delivery is also addressed: there will be a need to be vigilant against creating a gap between what is promoted to the public and what services are actually offered. The issues involved here are: emergencies and how they are dealt with by the service; the devolution of responsibilities by the authorities involved; coverage of the scheme; and finally, tenancy protection for those in assisted living. (KJ/RH)

ISSN: 11881828

From : <http://www.harbour.sfu.ca/gero/shup.html>

Assistive technology in extra care housing; by Nigel King, Housing Learning and Improvement Network, Health and Social Care Change Agent Team, Department of Health - DH.: Department of Health - DH (Electronic format only), 20 February 2004, 20 pp (Factsheet no 5).

Assistive technology (AT) can play a part in supporting people in extra care housing. In this factsheet, Nigel King of the Housing and Support Partnership summarises the commonest applications of AT, gives examples, and provides details on where to find out more. (RH)

From : Downloaded document (7.6.04): [www.dh.gov.uk/assetRott/04/07/60/61/04076061.pdf](http://www.dh.gov.uk/assetRott/04/07/60/61/04076061.pdf)

Consumer discourse in assisted living; by Paula C Carder, Mauro Hernandez.

Journals of Gerontology: Series B, Psychological Sciences and Social Sciences, vol 59B, no 2, March 2004, pp S58-S67.

The cultural construction of the assisted living consumer is discussed. Based on theories of consumer studies, this article focuses on organisational strategies employed by assisted living practitioners to promote consumer choice and independence while mediating potential risks. Data include field notes, participation in manager training programmes, and interviews with residents and family members during a 22-month study of three assisted living facilities in Oregon. Consumer discourse is evident in the state rules, manager training programmes, organisational practices, and institutional belief in specific consumer demands such as independence and choice. Personal care is a complex consumer "good", further complicated by residents with cognitive impairments, family demands, payments sources and the very novelty of the assisted living philosophy. Benefits and pitfalls are discussed, based on the use of consumer discourse that represents older people as active consumers, rather than recipients, of long-term care services. (RH)

ISSN: 10795014

From : <http://www.geron.org>

Correlates of resident psychosocial status on long-term care; by Joseph E Gaugler, Corinne R Leach, Keith A Anderson.

International Journal of Geriatric Psychiatry, vol 19, no 8, August 2004, pp 773-780.

This pilot study randomly selected 4 nursing homes, five assisted living facilities, and 16 family care homes from a South Central state in the US. In-person and telephone interviews were conducted with administrators and resident-family-staff triads (n=79) to gather information on setting, resident functional status, family involvement, sociodemographic context and resident psychosocial status. Results indicated that type of facility, resident health conditions, resident race, and family orientation were significantly correlated with dimensions of resident psychosocial status. The findings suggest that multiple informants are necessary to determine the processes that lead to residents' quality of life, and that consideration of diverse settings offer greater insight into how positive resident adaptation is achieved in long-term care. (RH)

ISSN: 08856230

From : <http://www.interscience.wiley.com>

Cruise ship care: a proposed alternative to assisted living facilities; by Lee A Lindquist, Robert M Golub.  
Journal of the American Geriatrics Society, vol 52, no 11, November 2004, pp 1951-1954.

Options for older patients who can no longer remain independent are limited. Most choices involve assisted living, 24-hour caregivers, or nursing homes. For those who have the means to afford assisted living or nursing homes, "cruise ship care" is proposed. Travelling alongside traditional tourists, groups of older people could live on cruise ships for extended periods of time. Cruise ships are similar to assisted living facilities in the amenities provided and costs per month, for example. This article examines the needs of older people in assisted living facilities, and explores the feasibility of cruise ship care in answering those needs. Similarities in care and in the monetary costs of both options are defined. A decision tree with selections for non-independent care was created using cruise ship care as an alternative. Using a Markov model over 20 years, a representative cost-effectiveness analysis was performed that showed that cruises were priced similarly to assisted living centres and were more efficacious. Proposed ways in which cruise companies could further accommodate the needs of older people interested in this option are also suggested. Implementation of cruise ship care on the individual basis is also presented. If this option succeeds, older people could have a much more enjoyable experience, and look forward to the time when they become less independent. (RH)

ISSN: 00028614

From : <http://www.americangeriatrics.org><http://www.blackwellpublishing.com>

Do impaired older persons with health care needs occupy US assisted living facilities?: an analysis of six national studies; by Stephen M Golant.

Journals of Gerontology: Series B, Psychological Sciences and Social Sciences, vol 59B, no 2, March 2004, pp S68-S79.

The assisted living facility (ALF) is the fastest growing institutional long-term care alternative for frail older people in the US. This analysis assesses the extent to which older people with physical and cognitive disabilities and health care needs occupy ALFs in the US. The six studies reviewed had several methodological weaknesses, resulting in different statistical populations of ALFs, samples with very different numerical and attribute properties, and findings based on disparate indicators. The older residents of ALFs were less physically and cognitively impaired than those in nursing homes. ALF facilities were more likely to admit or retain frail older people when they had relatively minor or less serious physical or cognitive impairment or health care needs. ALFs are found to be an extraordinarily diverse shelter and care alternative: their residents can include very frail older people with serious chronic health problems. Average duration of stays may be as long as 3 years. It is suggested that researchers need to conduct more carefully executed studies with replicable methodologies that produce unbiased and generalisable findings. (RH)

ISSN: 10795014

From : <http://www.geron.org>

Extra care sheltered housing: report [of a conference held], University of Sussex, 25 March 2004; by Centre for Social Policy and Social Work, University of Sussex; Sussex Gerontology Network, Sheltered Housing Group. Brighton: School of Social Sciences, University of Sussex, 2004, various.

Extra care sheltered housing is being strongly promoted by central government and the Housing Corporation as a preferred model for meeting older people's housing needs. This conference examined extra care sheltered housing at an operational level, how it works, and how we might learn from the experiences of others: case studies were given on six schemes in East and West Sussex. (RH)

Price: £3.00

From : Professor Peter Lloyd, School of Social Sciences, University of Sussex, Brighton BN1 9SN.

How 'community aware' is your care setting?: [checklists]; by Sally Knocker, Barbara Avila, M Pilar Roman-Rojo, Growing with Age, National Association for Providers of Activities for Older People (NAPA). London: NAPA, 2004, 7 pp.

As part of the NAPA Growing with Age project, three checklists have been compiled as ways of helping discuss possible activities with residents and their relatives and as an aid to the care planning and review process. The checklists could also be used to provide evidence for care inspectors about how the home is meeting Standard 13 of "Care homes for older people: national minimum standards". The checklists are: Getting out and about; Bringing the outside in; and Involving local colleges and community groups. (RH)

From : NAPA, Bondway Commercial Centre, 5th Floor Unit 5.12, 71 Bondway, London SW8 1SQ.

Internet access and online services for older people in sheltered housing; by Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, February 2004, 4 pp.

Findings, 214, February 2004, 4 pp.

Government policy initiatives aim to encourage online delivery of government information and social services, and to promote take-up of internet access by all residents. Online delivery of aspects of social care and health services will make it possible to access these services via the Internet. These findings outline the results of a small scale study by Maria Sourbati, conducted with the support of the Joseph Rowntree Foundation (JRF), in which she explored how older people living in sheltered housing use the Internet, and how they and their carers feel about online service access. The full report of her study, "Internet use in sheltered housing: older people's access to new media and online service delivery", is published by JRF as part of its series, "The digital age: opportunity or exclusion?" (available from York Publishing Services). (RH)

ISSN: 09583084

Price: FOC

From : Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP. [www.jrf.org.uk](http://www.jrf.org.uk)

Internet use in sheltered housing: older people's access to new media and online service delivery; by Maria Sourbati, Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, 2004, 33 pp (The digital age: opportunity or exclusion?).

The likely impact of e-government on community care and housing-related support is considered in this small-scale study conducted with the support of the Joseph Rowntree Foundation (JRF). Based on a study of media use in two sheltered accommodation sites in north London - one with internet provision and digital television, and one without - this report explores the use of e-services such as tele-shopping and banking, and highlights the potential of digital television and the Internet for delivering social care to older people in their homes. The report presents the perspectives of older people, care support staff and management, including their attitudes to 'old' media (television and telephone). Issues such as the gap between older people's current skill level and the level needed for internet access, and online delivery of services as a substitute for human contact, are highlighted. (RH)

ISBN: 1859351689

Price: £11.95 + £2.00 p&p

From : York Publishing Services, 64 Hallfield Road, Layerthorpe, York YO31 7ZQ. Free pdf version (1859351697) available: [www.jrf.org.uk/bookshop](http://www.jrf.org.uk/bookshop)

Managing decline in assisted living: the key to aging in place; by Mary M Ball, Molly M Perkins, Frank J Whittington (et al).

Journals of Gerontology: Series B, Psychological Sciences and Social Sciences, vol 59B, no 4, July 2004, pp S202-S212.

Five assisted living facilities (ALFs) in Georgia, US (where they are termed "personal care homes") were studied for 1 year using qualitative methods including: participant observation; informal and in-depth interviewing of providers, residents and residents' families; and review of resident and facility records. Analysis was conducted by grounded theory approach. The ability of residents to remain in assisted living was principally a function of the "fit" between the capacity of both residents and facilities to manage decline. Multiple community facility and resident factors influenced the capacity to manage decline, and resident-facility fit was both an outcome and an influence on the decline management process. Residents and facility risk was also an intervening factor and a consequence of decline management. Findings point to the complexity of ageing in place in ALFs and the need for a co-ordinated effort by facilities, residents and families in managing decline. Residents also need to be well-informed about their own needs and the capacity of the facility to meet them. (RH)

ISSN: 10795014

From : <http://www.geron.org>

"Not everything that can be counted counts and not everything that counts can be counted": towards a critical exploration of modes of satisfaction measurement in sheltered housing; by Mark Foord, Julie Savory, Dianne Sodhi.

Health & Social Care in the Community, vol 12, no 2, March 2004, pp 126-133.

This paper reflects on a research project funded by a consortium of leading sheltered housing (SH) providers and their regulatory body, the Housing Corporation. The project aimed to ascertain which aspects of SH older people perceived to be central to their satisfaction and the methods they judged most appropriate to measuring this. The authors outline the key policy developments (specifically the development of performance measurement regimes), and changes in the nature of SH, which are driving providers to re-evaluate how they measure user satisfaction. They discuss the aims of the project, its methodology and findings, and conclude by

raising critical questions about the process of measuring satisfaction within an increasingly managerialised housing system. They argue that this favours standardised methods of information gathering (such as questionnaires) rather than engaging with clients, in order to develop methods and systems capable of eliciting qualitative issues of concern to them. The authors believe that their conclusions are applicable to health and social care provision, where there are similar tensions around performance measurement and user satisfaction. (RH)

ISSN: 09660410

From : [www.blackwellpublishing.com/hsc](http://www.blackwellpublishing.com/hsc)

Policy and research issues for small assisted living facilities; by Leslie A Morgan, J Kevin Eckert, Ann L Gruber-Baldini (et al).

Journal of Aging & Social Policy, vol 16, no 4, 2004, pp 1-16.

This analysis compares smaller and larger Assisted Living (AL) facilities in four US states to determine whether extant measures of four key concepts, used to distinguish the AL sector, give advantage to larger facilities. Quantitative comparisons predominantly show differences favourable to larger facilities. Qualitative information, on the other hand, raises the prospect that current measures overlook beneficial aspects of smaller facilities. If small facilities are included under the AL banner, both policy provisions and quality assessment must be carefully crafted to avoid placing small homes in funding and oversight jeopardy as AL develops. (KJ/RH)

ISSN: 08959420

From : <http://www.tandfonline.com>

Private retirement housing and the Title Conditions (Scotland) Act 2003; by Malcolm Fisk, Sandra Prida, Insight Social Research Ltd; Scottish Executive Social Research. Edinburgh: Scottish Executive Social Research, 2004, 4 pp.

Development Department Research Findings, no 193/2004, 2004, 4 pp.

The extent to which dwellings intended for owner occupation within private retirement housing developments were being privately rented is examined in the context of the Title Conditions (Scotland) Act 2003. The research therefore established the extent to which provisions of this new legislation, aimed at safeguarding the position of owner occupiers in such developments, could be undermined. The research responded to concerns raised by SHROC (the Sheltered Housing and Retirement Housing Owners Confederation) about the poor practices of some managers and developers of private retirement housing. (RH)

ISBN: 0755938291

From : Blackwell's Bookshop, 53 South Bridge, Edinburgh EH1 1YS. email:

[business.edinburgh@blackwell.co.uk](mailto:business.edinburgh@blackwell.co.uk) Scottish Executive Social Research website:

<http://www.scotland.gov.uk/socialresearch>

Reaching black and minority ethnic elders in sheltered and retirement housing: a project case study; by Baldwin Davis, Age Concern England - ACE.

Black Housing, issue 136, October 2004, pp 10-12.

In October 2002, Age Concern England's Advice, Information and Mediation Service for Retirement Housing (AIMS) launched a multi-lingual information and advice line for black and minority ethnic (BME) older people living in sheltered or retirement housing. The project's manager outlines ways in which potential clients could be helped, given the initial low take-up of the service. AIMS has a website (<http://www.ageconcern.org.uk/aims>). (RH)

ISSN: 09592857

Supported housing and the law: the fractures in the housing and support partnership; by Belinda Schwehr.

Housing, Care and Support, vol 7, no 2, June 2004, pp 26-31.

Government policy for vulnerable people has long been to encourage as many people as possible out of care homes and into supported accommodation. This article seeks to explore some of the unforeseen legal difficulties arising out of this trend. Two have already become very apparent: one, where the question of ordinary residence arises, with regard to which authority is liable for the purchase of additional domiciliary care; and the other, for residents who may be thought to lack capacity to make a contract for the tenancy which underpins the whole arrangement. The article begins by describing two quite different arrangements for providing accommodation and support. (RH)

ISSN: 14608790

From : Website: <http://www.pavpub.com>

Supporting people - essential pack: Notes 1-10; by Office of the Deputy Prime Minister - ODPM. London: Office of the Deputy Prime Minister, 2004, various pagings (Supporting People).

The Supporting People programme offers vulnerable people the opportunity to improve their quality of life by enabling them to live in the community. These Notes are essentially shorter versions of the information to be found in "Supporting people: policy into practice", originally issued by the Department of the Environment, Transport and the Regions (DETR) in 2001, and to which the reader is referred for more information. Note 1 is an overview of the Supporting People programme. Note 2 outlines the key stages in drawing up the strategy, while Note 3 covers the team, and Note 4 the strategy. Note 5 deals with cross-authority arrangements; Note 6, Reviews and managing the changeover; Note 7, Purchasing support services; Note 8 Quality and monitoring; Note 9, Services for older people; and Note 10, Meeting black and minority ethnic needs. Services for older people form a major part of the Supporting People programme, in terms of numbers of people receiving services, and this documentation outlines how services will be delivered. (RH)

Price: FOC

From : ODPM free literature, PO Box 236, Wetherby, West Yorkshire LS23 7NB. Tel 0870 1226 237. E-mail: odpm@twoten.press.net Website: www.spkweb.org.uk

Use of resident satisfaction surveys in New Jersey nursing homes and assisted living facilities; by Nicholas G Castle, Timothy J Lowe, Judith A Lucas (et al).

Journal of Applied Gerontology, vol 23, no 2, June 2004, pp 156-171.

The authors present results of a questionnaire inquiring into the use and usefulness of resident satisfaction surveys, which was sent to all 363 nursing homes and 152 assisted living facilities in New Jersey (NJ) in autumn 2000. Resident satisfaction surveys were found to be used in 86% of nursing homes and 85% of assisted living facilities. However, the satisfaction instruments used vary greatly, and appear to have been developed largely on an ad hoc basis with little attention to testing of validity or psychometric properties. Standardisation is needed. Moreover, the uses of satisfaction information were limited and primarily aimed at administrative goals rather than at improving quality of care. These factors may restrict the potential benefits of such information. (RH)

ISSN: 07334648

From : <http://www.sagepub.com>

User involvement in supported housing: more than just ticking the box; by Marc Mordey, Jonathan Crutchfield. Housing, Care and Support, vol 7, no 1, February 2004, pp 7-10.

Service users' involvement was one of the supplementary objectives in the Supporting People monitoring framework. This article looks at what it might mean in practice. In common with other providers of support services, Southern Focus Trust (SFT) has seized the opportunity presented by the framework to review its policies and practices. A report for SFT, "Sharing the driving", describes the progress made by a major regional provider, with some lessons that may be of wider value. (RH)

ISSN: 14608790

From : Website: <http://www.pavpub.com>

## 2003

Anatomy of a choice: deciding on assisted living or nursing home care in Oregon; by James R Reinardy, Rosalie A Kane.

Journal of Applied Gerontology, vol 22, no 1, March 2003, pp 152-174.

Interviews with 1,215 assisted living and nursing home residents and family members in Oregon compared assisted living residents and their family proxies with their nursing home counterparts regarding preferences for long-term care settings and circumstances and decisions surrounding their move. Analyses showed some differences between reported preferences by assisted living and nursing home groups, with the former placing more emphasis on control over private spaces and the latter on rehabilitation. There were also similarities, however, especially in the views of residents themselves rather than those of their family proxies. For example, high value given by both groups to help with care from staff, decisions on how much care, and private rooms indicate policy planners and providers should take into account such preferences and develop a hybrid of positively valued features in both assisted living and nursing homes. (RH)

ISSN: 07334648

Assisted living and nursing homes: apples and oranges?; by Sheryl Zimmerman, Ann L Gruber-Baldini, Philip D Sloane (et al).

The Gerontologist, vol 43, special issue II, April 2003, pp 107-117.

Multivariate analyses of data derived from the US Collaborative Study of Long-Term Care (CS-LTC), a four-state study of 193 residential care / assisted living (RC/AL) and 40 nursing homes (NHs), examined differences

in 10 processes of care measures based on facility size. Differences found in process of care and resident characteristics by facility type highlight the importance of considering: the adequacy of existing process measures for evaluating smaller facilities; resident case-mix when comparing facility types and outcomes; and complexity of understanding the implication of the process of care, given the importance of person-environment fit. (RH)

ISSN: 00169013

Assisted-living for older people in Israel: market control or government regulation?; by Israel Doron, Ernie Lightman.

Ageing and Society, vol 23, part 6, November 2003, pp 779-796.

This paper examines whether formal legal regulation is the optimal policy to protect the needs and rights of frail residents, while respecting the legitimate interests of others, such as operators and owners. It presents the case for and against direct legal regulation (as in institutions), and suggests that no overall a priori assessment is possible. The analysis is based on the case of Israel, where proposed regulations for assisted living have been introduced but not implemented. After a brief history of assisted living in Israel - its recent dramatic growth and why this occurred - the paper concludes that formal direct regulation is not the best route to follow, but that the better course would be to develop totally new "combined" regulatory legislation. This would define the rights of residents and encourage self-regulation alongside minimal and measured mechanisms of deterrence. Such an approach could promote the continued development of the assisted living industry in Israel and elsewhere, while guaranteeing that the rights, needs and dignity of older residents are protected. (KJ/RH)

ISSN: 0144686X

Becoming "at home" in assisted living residences: exploring place integration processes; by Malcolm P Cutchin, Steven V Owen, Pei-Fen J Chang.

Journals of Gerontology: Series B, Psychological Sciences and Social Sciences, vol 58B, no 4, July 2003, pp S234-S243.

The roles are explored of place attachment, social involvement, place valuation and individual characteristics in the process of becoming at home in assisted living residences. A sample of 297 current assisted living residents in four states (Minnesota, New Jersey, Oregon and Texas) completed questionnaires, data from which were used to estimate a structural equation model to explain becoming at home. Place attachment to town and community is a necessary but not significant explainer of older people's process of becoming at home. Non-family social involvement plays a pivotal role through which place attachment works to explain becoming at home. Both place valuation and non-family social involvement exhibit direct positive effects on the outcome. The findings support a transactional interpretation of assisted living as home. The relationship between place attachment to one's community and full integration into assisted living is more complex than currently acknowledged. (RH)

ISSN: 10795014

From : <http://www.geron.org>

A better life: private sheltered housing and independent living for older people; by Justin McLaren, Michelle Hakim, McCarthy & Stone plc.: McCarthy & Stone plc, 2003, 48 pp.

Private sheltered housing helps older people to engage with the local community and promotes independent living. However, there is a shortage of such housing in the UK. This report sets out the findings of a study of the opinions of some 1,500 current and prospective residents of private sheltered housing - their priorities, levels of independence, health, happiness and contribution to their local community and the wider economy. It presents the personal, economic and social cases for private sheltered housing, that ensure appropriate housing choice and a good quality of life. (RH)

From : McCarthy & Stone plc, Homelife House, 26-32 Oxford Road, Bournemouth BH8 8EZ.

Coping with change: religious activities and beliefs of residents in assisted living facilities; by Vickie L Patterson, Sharon V King, Mary M Ball (et al).

Journal of Religious Gerontology, vol 14, no 4, 2003, pp 79-94.

Assisted living facilities (ALFs) offer a level of care between independent living and nursing homes. Researchers have begun to explore quality of life issues concerning residents of ALFs. Considerable research suggest that religion is positively associated with both emotional and physical health. This study examines how residents use religious practices to cope with the challenges of life in ALFs. Qualitative analysis of interview data from 55 residents of ALFs revealed a variety of religious practices, such as prayer, church attendance, and Bible reading. Most residents deemed religion important and reported that religious practices provided a framework for coping with problems. Six ways emerged whereby residents used religion as a coping mechanism: to maintain continuity with their previous lives; to obtain relief from physical or emotional pain; to provide a framework for socialization; to develop courage; to maintain a purpose for their lives; and to prepare

for death. Suggestions for enhancing the quality and variety of religious activities within ALFs are offered. (KJ/RH)

ISSN: 10502289

From : Haworth Document Delivery Center, The Haworth Press Inc., 10 Alice Street, Binghamton, NY 13904-1580, USA.

Increased physiotherapy in sheltered housing in Sweden: a study of structure and process in elderly care; by Gunilla Fahlström, Kitty Kamwendo.

Health & Social Care in the Community, vol 11, no 6, November 2003, pp 470-476.

The effect of increasing the level of physiotherapy services in two units of sheltered housing in Sweden was studied. The intervention unit received 20 hours and the control 2 hours of physiotherapy services per week. Physiotherapy and occupational therapy records were reviewed before and during the project. Physiotherapists also kept extended documentation over an 11 month period. There was a significant increase in the number of patients receiving physiotherapy and occupational therapy within both units. No significant differences between the units were found for the number of patients receiving physiotherapy. The number of patients receiving occupational therapy differed significantly between units before as well as during the intervention. Primarily care assistants and auxiliary nurses initiate contact with the physiotherapists mainly for patient-orientated errands. 50% of the instructions given by the physiotherapists at the 20-hour unit related to movement-orientated activities of daily living (ADLs). At the 2-hour unit, 52% of instructions were programme-orientated. (RH)

ISSN: 09660410

Managing bereavement within sheltered/retirement housing: a workshop : 23 September 2003; by Centre for Social Policy and Social Work, University of Sussex; Sussex Gerontology Network, Sheltered Housing Group. Brighton: School of Social Sciences, University of Sussex, 2003, 11 pp.

Within medium-sized sheltered housing schemes, there are likely to be five or six deaths in the course of a year. This workshop considered how grief can be managed within a small community. Speakers used their academic research and/or practice to describe approaches to death and its effect on staff and on the peer group; the ethnic dimension of death; and the behaviour of people affected by a death. Workshops sessions discussed problems that participants had personally faced and tried to resolve, leading to suggestions for good practice. (RH)

Price: £2.00

From : Professor Peter Lloyd, School of Social Sciences, University of Sussex, Brighton BN1 9SN.

Managing dementia within sheltered/retirement housing: a workshop : 1 April 2004; by Centre for Social Policy and Social Work, University of Sussex; Sussex Gerontology Network, Sheltered Housing Group. Brighton: School of Social Sciences, University of Sussex, 2003, 12 pp.

The main concern of this conference was those residents who develop dementia during their residence in sheltered housing: how can they be helped to maintain independent living for as long as possible? Papers summarised cover themes including the scheme manager's perspective, strategies for maintaining independence, the communication challenges of dementia, and technological solutions. (RH)

Price: £3.00

From : Professor Peter Lloyd, School of Social Sciences, University of Sussex, Brighton BN1 9SN.

A matter of preference: [summary of survey findings on supported living environments]; by Vanessa Burholt, Gill Windle.

Professional Social Work, December 2003, pp 18-19.

A survey of older people's preferences for supported living environments (sheltered housing, extra care sheltered housing, and residential care) reveals that we make too many assumptions about what older people value in their lives. The authors summarise the findings of their research conducted at the Centre for Social Policy Research and Development (CSPRD) at the University of Wales Bangor, and published as "Retaining independence and autonomy: older people's preferences for specialised housing". Their article focuses on the negative depiction of residential care; the importance of control and privacy; and the value placed on domestic services. They conclude on the need for more focus to be placed on the way services are packaged, that one package of care for supported housing will not suit all, and that older people need to be taken seriously as consumers. (RH)

ISSN: 13523112

From : <http://www.basw.co.uk>



Monitoring residents in sheltered/retirement housing: a workshop : 2 April 2003; by Centre for Social Policy and Social Work, University of Sussex; Sussex Gerontology Network, Sheltered Housing Group. Brighton: School of Social Sciences, University of Sussex, 2003, 14 pp.

Monitoring the wellbeing of residents has always been one of the prime roles of the sheltered housing scheme manager. However, now that many scheme managers are becoming non-resident and off-site more often, these roles are changing. With the availability of electronic modes of surveillance, there would seem to be less time available for the more personal modes of monitoring. Given that "supervision and monitoring of health" is an important element of the Supporting People policy, how might sheltered housing fulfil the task of monitoring well-being? To answer this, the Workshop heard presentations on Supporting People, the "ring-round" (or morning call to residents); assistive technology; record keeping; and residents' views. Good practice points emerging from workshop groups are summarised. (RH)

Price: £2.00

From : Professor Peter Lloyd, School of Social Sciences, University of Sussex, Brighton BN1 9SN.

A national survey of assisted living facilities; by Catherine Hawes, Charles D Phillips, Miriam Rose (et al). The Gerontologist, vol 43, no 6, December 2003, pp 875-882.

During the 1990s, assisted living was the most rapidly growing form of housing for older people in the US. This study uses a multistage sample design to produce nationally representative estimates for the ALF industry. In 1998, there were an estimated 11,459 ALFs in the US, with 611,300 beds and 521,500 residents. Nearly 60% offered a combination of low services and low or minimal privacy, whereas only 11% offered relatively high services and high privacy. 73% of the resident rooms or apartments were private. Ageing in place was limited by discharge policies in most ALFs for residents who needed help with transfers, had moderate to severe cognitive impairment, had any behavioural symptoms, or needed nursing care. The industry is largely private pay and unaffordable for those aged 75+ on low or moderate income, unless they use assets as well as income to pay. ALFs differ widely in ownership, size, policies, and the degree to which they manifest the philosophy of assisted living. This diversity represents a challenge for consumers in terms of selecting an appropriate facility and for policy makers in terms of deciding what role they want assisted living to play in long-term care. (RH)

ISSN: 00169013

From : <http://www.geron.org>

Now for something different: the ExtraCare Charitable Trust's approach to retirement living; by Nigel Appleton, Martin Shreeve, ExtraCare Charitable Trust; Contact Consulting. Witney, Oxon: Contact Consulting, 2003, 44 pp.

The ExtraCare Charitable Trust commissioned this review to identify distinctive features of the Trust's work, and to share these ideas with others who are developing accommodation and care solutions for older people. The review outlines the development of the Trust and its sheltered housing schemes from its roots in the Coventry Churches Housing Association (CCHA). The model of provision developed by the Trust aims to enable a lifestyle in which well-being, learning, activity and growth all have a part. The Trust also aims to respond to rising levels of home ownership in its provision; and to create schemes as part of "balanced communities". (RH)

ISBN: 0953993345

Price: £11.95

From : Old Chapel Publishing, Bell Lane, Cassington, Witney, Oxon OX29 4DS.

Planning for retirement housing: a good practice guide by [a joint working party of] the Planning Officers Society and the Retirement Housing Group; by Planning Officers Society; Retirement Housing Group, House Builders Federation.: House Builders Federation, 2003, 55 pp.

This good practice guide aims to examine the role of the forward planning and development control system in offering an appropriate range of housing choice to an ageing population, to offer advice on good practice, and to consider how this can be done in a way that also satisfies wider housing and planning objectives. For the purposes of this guide, "retirement housing" is used to describe types of accommodation including: housing designed for the "early" retired; sheltered housing; and extra care and assisted living, designed for those with higher dependency and support needs. However, retirement villages are outside the scope of this guide. (RH)

ISBN: 0951482165

Price: £50.00

From : House Builders Federation, 56-64 Leonard Street, London EC2A 4JX. [www.hbf.co.uk](http://www.hbf.co.uk)

Predictors of family involvement in residential long-term care; by Joseph E Gaugler, Keith A Anderson, Corinne R Leach.

Journal of Gerontological Social Work, vol 42, no 1, 2003, pp 3-26.

While much of the gerontological literature emphasises the institutionalisation of an older person as an endpoint of family care, research has emerged illustrating the continued involvement of family members. The purpose of the present study was to determine how resident setting, family context, resident and staff background, and resident function influence the provision of family involvement in three long-term care environments: nursing homes, assisted living facilities, and family care homes. 5 nursing homes, 5 assisted living facilities and 16 family care homes and 112 residents were randomly selected in the state of Kentucky. Results showed that type of facility was less important in accounting for different dimensions of family involvement than family context, family orientation of facilities, or resident need. The findings demonstrate the complex process of family involvement across the long-term care landscape, and have several research and practice implications for the facilitation of family integration in residential long-term care. (KJ/RH)

ISSN: 01634372

From : <http://www.tandfonline.com>

The role of telecare; by John Hennock, Michéle Hollywood.

Working with Older People, vol 7, no 3, September 2003, pp 35-38.

One of the key roles of telecare is to provide support, security and peace of mind for residents in sheltered housing. The authors explain the importance of standards and quality control in providing telecare as part of housing support services. (RH)

ISSN: 13663666

Supporting older people with dementia in sheltered housing: practical strategies for promoting independence: a training resource; by Annette McDonald, Centre for Sheltered Housing Studies (CSHS). Brighton: Pavilion, 2003, 168 pp (loose-leaf).

The Centre for Sheltered Housing Studies (CSHS) commissioned this training pack with Pavilion, having identified a need for information and training for managers of sheltered housing schemes on how to support older people with dementia. The pack is divided into seven sessions: understanding dementia; ageism and the impact of dementia; individuality, diversity and personhood; managing behaviour and risk; working in partnership with other agencies; working with carers and families; and the role of the sheltered housing manager. The material comprises structured guidance notes for the trainer, background information for staff and trainers, and a range of photocopyable resource material. (RH)

ISBN: 1841961132

From : Pavilion Publishing (Brighton) Ltd., The Ironworks, Cheapside, Brighton BN1 4GD. Website: <http://www.pavpub.com>

## 2002

Age Concern England's response to the Department of Health's consultation on Residential Care and Support Schemes and Supporting People; by Age Concern England - ACE. London: Age Concern England, June 2002, 5 pp (Policy Papers, ref: 1202).

The guidance to which Age Concern England (ACE) is responding broadly explains where registration as a care home is required, and how to distinguish care homes from supported housing of various kinds. It specifically discusses whether very sheltered housing or extra care should be registered as care homes under the Care Standards Act 2000, based on the requirement that registration is required where the provision of personal care is made within an establishment. While ACE welcomes the intention to promote safety in care service provision, there is concern that the proposals could limit the future provision and sustainability of models of housing care that aim to enhance older people's independence. (RH)

Price: FOC

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER.

Combining reminiscence with journal writing to promote greater life satisfaction in an assisted-living community; by Lynda M Kelly, Pearl M Mosher-Ashley.

Activities, Adaptation & Aging, vol 26, no 4, 2002, pp 35-46.

The Leave-A-Legacy Program at Alterra Wynwood in Leominster, Massachusetts is an example of a successfully emergent, multi-faceted reminiscence and writing programme within an assisted-living community. A group of residents meets voluntarily once a month, along with a facilitator, to read aloud from their diaries, to write and to reminisce. The enthusiastic facilitator contributes greatly to the programme's success, by encouraging members to translate their newly recalled memories into a diary where they can be clearly

organised. Thus, these stories and memories will be available to read by later generations. These therapeutic reminiscence sessions enhance participants' social relations and improve their memory by sharing personal stories from their youth. Other benefits from the writing programme include reduced anxiety and a capability to boost one's immune system. (RH)

ISSN: 01924788

From : <http://www.tandfonline.com>

Critical incidents in the lives of elders with a disability: factors leading to institutional placement; by John B Doherty, Kevin L DeWeaver.

Journal of Gerontological Social Work, vol 38, no 4, 2002, pp 39-52.

The process by which older people with disabilities are forced to relocate from their homes to congregate living facilities - in this instance sheltered housing or nursing homes - is of critical societal importance. This article is a descriptive exploration of the lived experiences of 41 Americans aged 60+ who made such a transition. The social work profession serves the most vulnerable members of society. This research should help social workers to better understand this vulnerable population, and the personal, professional and policy implications that stem from such research. (RH)

ISSN: 01634372

From : <http://www.tandfonline.com>

Domestic spaces: uses and meanings in the daily lives of older people; by John Percival.

Ageing and Society, vol 22, part 6, November 2002, pp 729-750.

The everyday routines of older people are examined, and their implications for older people's uses and perceptions of domestic spaces in both mainstream and sheltered housing settings. The paper draws from qualitative data collected during a large scale survey of the housing and support needs of older people, and specifically the responses of 60 informants to personal interviews. The findings are that domestic spaces have a significant influence on the scope that older people have to retain a sense of self-determination. It is shown that environmental defects - such as poorly configured domestic spaces - have consequences for older people's sense of continuity and choice. Thus, domestic spaces are living spaces that embody personal and family-oriented priorities. It is suggested that older people require adequate, accessible and personalised domestic spaces in order to facilitate three important objectives: routines, responsibilities and reflection. (KJ/RH)

ISSN: 0144686X

Interactions of behavior and environment as contributing factors in the discharge of residents with dementia from assisted living facilities; by Myra A Aud.

Journal of Housing for the Elderly, vol 16, no 1/2, 2002, pp 61-84.

In this exploratory study, administrators of 14 assisted living facilities in Missouri were asked to describe resident behaviours and other issues that contributed to their decisions to discharge residents with dementia from their assisted living facilities to skilled nursing facilities. Whilst resident behaviours themselves were factors influencing discharge, the interaction of those behaviours with the assisted living facility's environment also influenced the decision to consider discharge to a skilled nursing facility. (KJ/RH)

ISSN: 02763893

From : <http://www.tandfonline.com>

Lessons from very sheltered housing; by Jef Smith, Croner Group. Kingston upon Thames: Croner Group Ltd, 10 April 2002, 8 pp.

Croner Care Home Manager special report, issue 38, 10 April 2002, 8 pp.

There remain significant differences between sheltered housing and care homes, but the gap is narrowing. The best sheltered housing schemes appear to have taken steps to preserve the autonomy of their residents. In this special report, the author discusses some lessons that care home managers can learn from sheltered housing schemes. (RH)

ISSN: 14765934

Patterns in functioning among residents of an affordable assisted living housing facility; by Stephanie J Fonda, Elizabeth C Clipp, George L Maddox (et al).

The Gerontologist, vol 42, no 2, April 2002, pp 178-187.

The context for this research was new, affordable assisted living housing (ALH, i.e. sheltered housing) for low-income people in North Carolina. ALH residents' functional patterns were compared to those with similarly low-incomes living in the community. Functioning was defined as the ability to perform activities of daily living (ADLs) and instrumental activities of daily living (IADLs), and respondents' competing risks such as death and institutionalisation. Comparison samples were selected from the Health and Retirement Study (HRS) and the

Asset and Dynamics Among the Oldest Old (AHEAD) study. The results indicate that ALH residents' patterns were generally similar and in some ways better than those of community-dwelling respondents. For example, they were no different (statistically) in terms of improvement, decline and death, but they were more likely to have stable high functioning. (RH)

ISSN: 00169013

Promoting independence: an analysis of assisted living facility marketing materials; by Paula C Carder.

Research on Aging, vol 24, no 1, January 2002, pp 106-123.

The content of marketing materials published by assisted living facilities (ALFs) in Oregon was examined. The aims included comparing what is required by the state rules governing ALFs to what is described in the materials. The focus was on the organisational principles of assisted living, services and fees, and residency criteria; identifying content on the negative consequences of ageing; and reviewing changes in marketing materials over a 4-year period. Marketing materials for 63 ALFs in Oregon as of August 1996 were collected in 1997 and again in 2000. The dominant organisational principle at both times was supporting residence "independence". Most of the ALFs tackle issues such as incontinence and cognitive impairment in their marketing materials. Although most ALFs revised these materials between 1997 and 2000, most of the changes were cosmetic rather than content oriented. One issue notably lacking from these materials was descriptions of residency criteria. (RH)

ISSN: 01640275

Quality standards for staff working in the sheltered housing service: Code of Practice information pack; by Centre for Sheltered Housing Studies - CSHS. Worcester: Centre for Sheltered Housing Studies, 2002, 15 pp.

The Code of Practice promotes and ensures good practice through setting standards and values for the sheltered housing service within the context of the Government's strategic framework for services for older people. Other aspects covered are: developing a common framework for delivering quality, consistency and a professional service; promoting accountability, professional standards and attitudes in service delivery; and acting as a foundation on which organisations can evaluate, build and continuously improve good practice. (RH)

From : Centre for Sheltered Housing Studies, First floor, Elgar House, Shrub Hill Road, Worcester WR4 9EE.

The RESA (Review of Ex-Service Accommodation) Report: final report - June 2002; by Confederation of British Service and Ex-Service Organisations (COBSEO). London: Confederation of British Service and Ex-Service Organisations (COBSEO), 2002, 50 pp.

During 1998, many ex-service charities reported that they were facing increasing management and financial strains in the provision of their wide range of accommodation with care. In recognition of urgent action needed, COBSEO appointed a Steering Committee and two project managers to carry out a full Review of Ex-Service Accommodation (RESA). The Committee undertook the review in five phases which are outlined in this report: care homes; short welfare break homes; specialist homes; dementia; and general housing. While the RESA studies were being carried out, other events occurred that have had a significant effect on this final report, e.g the Care Standards Act 2000. The reader is also alerted to COBSEO's 'Way ahead study: final report'. (KJ/RH)

From : COBSEO, c/o The Royal British Legion, 48 Pall Mall, London SW1Y 5JY.

Resident participation in health and social care provision: a workshop : 19 April 2002; by Centre for Social Policy and Social Work, University of Sussex; Sussex Gerontology Network, Sheltered Housing Group. Brighton: School of Social Sciences, University of Sussex, 2002, 12 pp.

Although previous Sussex Gerontology Network workshops have discussed sheltered housing residents' participation in social activities and housing management issues, residents continue to be viewed as passive recipients of care. However, residents have a collective interest in ensuring that their housing scheme provides a "home for life". The three presentations at this workshop are outlined. The first, Berryhill Village in Stoke-on-Trent, is a large scheme run by the ExtraCare Charitable Trust, and offers a wide range of care and support services, with substantial resident participation. The second described Eastleigh Housing Association's approach to Best Value (BV) in partnership with Fernhill Care Ltd. The third outlined resident participation in the move towards extra-care provision at Abyssinia Court, a multi-cultural scheme run by Hornsey Housing Trust. Discussion groups suggested how residents might actively influence or promote the provision of care and support. (RH)

Price: £2.00

From : Professor Peter Lloyd, School of Social Sciences, University of Sussex, Brighton BN1 9SN.

Sheltered housing and the resettlement of older homeless people: briefing paper on a report for Help the Aged/hact; by Imogen Blood, Help the Aged; Housing Associations Charitable Trust - hact. London: Help the Aged, 2002, 6 pp.

Traditional demand for sheltered housing is declining, and new lettings are being made, typically to younger male tenants with histories of homelessness and/or other needs arising from alcohol use, mental health problems, learning disability and past offending. This briefing outlines the findings of 'Sheltered housing and the resettlement of older homeless people', based on research and development work conducted in 2001-2002 by the Manchester-based Older Homelessness Development Project with funding from the Help the Aged/ hact Older Homelessness Programme. The research comprises: a review of the literature, research, policy and initiatives; a survey of English Churches Housing Group's (ECHG) 21 sheltered housing schemes in north-west England; interviews and focus groups with resettlement workers and staff from registered social landlords (RSLs); and a review of mainstream and specialist models of sheltered accommodation in England, Wales and the US that provide temporary and permanent accommodation to older homeless people. The report makes recommendations on how the sheltered housing sector might meet the needs of this group more effectively. (RH)

ISBN: 0905852826

From : Jenny Havis, Publications, Help the Aged, 207-221 Pentonville Road, London N1 9UZ.

Sheltered housing and the resettlement of older homeless people: a report for Help the Aged/hact; by Imogen Blood, Help the Aged; Housing Associations Charitable Trust - hact. London: Help the Aged, 2002, 48 pp.

Traditional demand for sheltered housing is declining, and new lettings are being made, typically to younger male tenants with histories of homelessness and/or other needs arising from alcohol use, mental health problems, learning disability and past offending. This report is based on research and development work conducted in 2001-2002 by the Manchester-based Older Homelessness Development Project with funding from the Help the Aged/ hact Older Homelessness Programme. It presents key findings from: a review of the literature, research, policy and initiatives on older homelessness and sheltered housing; a survey of English Churches Housing Group's (ECHG) 21 sheltered housing schemes in north-west England; an assessment of sheltered housing as a resettlement option as seen by resettlement workers and staff from registered social landlords (RSLs); and a review of mainstream and specialist models of sheltered accommodation in England, Wales and the US that provide temporary and permanent accommodation to older homeless people. The report makes recommendations on how the sheltered housing sector might meet the needs of this group more effectively. (RH)

ISBN: 0905852834

Price: £10.00

From : Jenny Havis, Publications, Help the Aged, 207-221 Pentonville Road, London N1 9UZ. E-mail: info@helptheaged.org.uk Website: www.helptheaged.org.uk

Social networks and health of older people living in sheltered housing; by E M Field, M H Walker, M W Orrell (et al).

*Aging & Mental Health*, vol 6, no 4, November 2002, pp 372-386.

87 residents from three sheltered accommodation schemes for people aged 60+ in Harlow, Essex, were interviewed about their physical and mental health, social networks, social support, decisions to move in, and how they found living in sheltered housing. 24% had a diagnosis of depression, and 8% dementia, but few had ever seen a mental health professional. More than half (55%) had clinically significant levels of activity limitation; 37% had significant somatic symptoms. Despite provision of glasses, 37% could not see satisfactorily, and 23% could not hear adequately. Locally integrated social networks were most common (41%). Residents with a private network (16%) were more likely than those with a locally integrated network to have significant activity limitation, and often reported being lonely. There were no differences between network types in levels of depression or dementia. Poor health of a person or spouse was the most common reason for moving to sheltered housing, followed by problems with their old home no longer being suitable. Most were happy living in sheltered accommodation. Many made use of the "sheltered" features such as the common room, the communal laundry, the warden and the alarm. A minority of residents were lonely and a few were unhappy with sheltered accommodation. (RH)

ISSN: 13607863

From : <http://www.tandfonline.com>

Supporting people: its impact on sheltered/retirement housing: a workshop : 25 September 2002; by Centre for Social Policy and Social Work, University of Sussex; Sussex Gerontology Network, Sheltered Housing Group. Brighton: School of Social Sciences, University of Sussex, 2002, 12 pp.

There is much uncertainty concerning the Supporting People Programme being introduced in April 2003, particularly in relation to details of the charging policy and contracts for services. Speakers at the workshop considered the intended and unintended consequences for sheltered housing policy under the Programme. (RH)

Price: £2.00

From : Professor Peter Lloyd, School of Social Sciences, University of Sussex, Brighton BN1 9SN.

Time use by frail older people in different care settings; by Rachel A Pruchno, Miriam S Rose.

Journal of Applied Gerontology, vol 21, no 1, March 2002, pp 5-23.

The way in which time is used is an important aspect of the quality of life in long-term care settings. Time budget data for a 24-hour period were contrasted for 123 people living in a nursing home, in an assisted living facility, or in the community with home health services. Results indicate that frail older people largely spend their days alone and at home. Obligatory activities account for 38.6% of the day, whereas discretionary activities account for 59.7%. Time spent in activities varies as a function of personal characteristics, environmental context and social context. Although there are differences across these settings, there are also striking similarities, particularly with respect to social context and satisfaction with the day. These data suggest that there is no one optimal living environment for frail older people, and that traditional long-term care environments may be preferable for some. (KJ/RH)

ISSN: 07334648

Visiting in care homes: the experiences of older volunteers; by Jan Reed, Martin Jewitt.

Education and Ageing, vol 17, nos 2/3, 2002, pp 257-272.

A study was conducted to investigate the effect of volunteer visiting schemes on both volunteers and residents in residential and sheltered accommodation. Volunteers - themselves older people - visited people in residential care as part of a befriending scheme on a relatively informal basis. Individuals volunteering were already part of an existing volunteer network recruited and managed by North Tyneside Age Concern. Volunteers were invited to participate either as a result of their experience of volunteering, or by expressing a desire to join the programme. It was anticipated that this volunteering activity could be difficult and complex, and so the study explored the experiences of volunteers through interviews. Developing a relationship with residents was not always easy, and often required a high level of interpersonal skills and commitment which necessitated some support from scheme co-ordinators. (RH)

ISSN: 13528580

Way Ahead Study - final report; by Patrick Brown, Confederation of British Service and Ex-Service Organisations (COBSEO). London: Confederation of British Service and Ex-Service Organisations (COBSEO), 2002, various.

In April 2001, Sir Patrick Brown KCB was commissioned by the Confederation of British Service and Ex-Service Organisations (COBSEO) to look ahead for the next twenty years to assess how the world in which the ex-Service charities work would have changed. This study considers what changes might be needed to the structure, policies and practices of the charities, in order that the future beneficiaries might be best served. (KJ/RH)

From : COBSEO, c/o The Royal British Legion, 48 Pall Mall, London SW1Y 5JY.

## 2001

Age Concern England's response to the Government's consultation on charging and means-testing for Supporting People services; by Age Concern England - ACE. London: Age Concern England, April 2001, 7 pp (Policy Papers, ref: 0701).

This is a response to the Department of the Environment, Transport and the Regions' Supporting People supplementary consultation document, "Charging and means-testing" (DETR 2001). Age Concern is opposed to charging for personal care services and low level support services; but if charges are to remain, these need to be fair, affordable and to take account of users' circumstances. ACE believes that older people should be entitled to free Supporting People services, as the support element of service charges in sheltered housing is not generally high. (RH)

Price: FOC

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER.

Aging in place in assisted living: philosophy versus policy; by Rosemary Chapin, Debra Dobbs-Kepper. *The Gerontologist*, vol 41, no 1, February 2001, pp 43-50.

Support of older adults' capacity to age in place is a core concept of the assisted living (sheltered housing) philosophy. This research examined implementation of the ageing-in-place philosophy in one midwestern state (Kansas). This study was part of a larger state agency and university collaborative project to examine admission and discharge policies in these settings. Data analysis was conducted with descriptive statistics; Kansas findings were compared to national findings. The results showed that residents' capacity to age in place was limited by facility admission and discharge policies that were more restrictive than state regulations in the areas of behavioural problems, incontinence and cognition. In general, assisted living facility policies in Kansas were more restrictive than admission and discharge policies found nationally. More inclusive assisted living admission and discharge criteria, and concomitant staffing and funding, are necessary if the ageing-in-place philosophy is to be more fully implemented. (KJ/RH)  
ISSN: 00169013

Assisted living: sobering realities; by Benjamin Schwarz (ed).

*Journal of Housing for the Elderly*, vol 15, no 1/2, 2001, 130 pp (whole issue).

Assisted living is "a long-term care alternative that involves the delivery of professionally managed personal and health care services in a group setting that is residential in character and appearance; it has the capacity to meet unscheduled needs for assistance, while optimizing residents' physical and psychological independence" (Regnier, 1999). This type of housing for older people provides shelter and care services for an estimated one million individuals in the US. As more assisted-living facilities are maturing, some sobering realities are emerging. Two symposia sponsored by the International Assisted Living Foundation of America (IALF) were presented in November 2000 during the annual meeting of the Gerontological Society of America (GSA) in Washington DC. From this, the Assisted Living Interest Group arose, to expand the quantity and improve the quality of research related to assisted living. Articles in this issue of the *Journal of Housing for the Elderly* reflect recent research and thinking on topics relating to assisted living that have come out of this broadly-based Interest Group. They focus on accommodation for those on lower incomes and who are frail, whose needs often go unmet. (KJ/RH)

ISSN: 02763893

From : <http://www.tandfonline.com>

Assisted living residents' perspectives of their occupational performance concerns; by Wendy Crenshaw, Mai Lee Gillian, Niki Kidd (et al).

*Activities, Adaptation & Aging*, vol 26, no 1, 2001, pp 41-56.

Researchers interviewed 22 residents from 4 different assisted living facilities in Georgia, US using the Canadian Occupational Performance Measure (COPM), a tool assessing concerns with valued life activities. Most common concerns were lack of desired active recreation, mobility and passive recreation. Residents attributed identified concerns to physical health conditions and vision, along with facility features. Differing styles of life acceptance, degree to which residents felt like the facility was home, and which activity options were meaningful versus just "keeping busy" were themes that emerged. (KJ/RH)

ISSN: 01924788

From : <http://www.tandfonline.com>

Charging and means-testing: supplementary consultation document [from the Supporting People programme]; by Department of the Environment, Transport and the Regions - DETR; Home Office; Department of Health - DH. London: DETR, 2001, 38 pp (Supporting People).

This consultation paper accompanies the Department of Health (DH) consultation paper and draft guidance, "Fairer charging practices for home care and non-residential social services". It sets out the detail behind the proposed incorporation of Supporting People charges into a unified charging system. The aim is to identify practical policies for fostering independent living, helping people to stay in their own homes with the support they need for as long as possible; and organising help in a way that does not undermine efforts to live independently. (RH)

Price: FOC

From : DETR free literature, PO Box 236, Wetherby, West Yorkshire LS23 7NB.

Community attributes for developing group housing for the elderly in the United States; by Peter S K Chi, Joseph Laquatra.

*Hallym International Journal of Aging*, vol 3, no 2, 2001, pp 237-252.

Older Americans' spatial patterns of residence in nursing homes, group housing and ordinary housing units are analysed using County data for 1996 from the US Bureau of Census. The community attributes (correlates) for

older people in group housing are further identified with Canonical correlation analysis. The results indicate that counties with a higher percentage of people aged 85+, counties having a higher level of social service industry, and counties in the Midwest tend to have a higher proportion of older people living in nursing homes. On the other hand, counties in the Northeast, counties with a higher level of active doctors, higher median gross rent, higher levels of educational attainment, higher per capita earnings in government, and higher capita earnings in all industries tend to have more older people living in group housing. Some community strategies for developing group housing programmes are discussed on the basis of these findings. (RH)  
ISSN: 15356523

Decision-making processes and working arrangements: responses to Consultation paper 3 [of the Supporting People programme]; by Department of the Environment, Transport and the Regions - DETR; Home Office; Department of Health - DH. London: DETR, 2001, 50 pp (Supporting People).

Consultation paper 3 of the Supporting People programme discussed the five key stages of the process of providing quality support services for vulnerable people. This document outlines responses on: strategic planning (including cross-authority arrangements); mapping existing supply; needs mapping; reviewing services; and purchasing services. Organisations providing sheltered or other "home for life" accommodation, while welcoming recognition of tenants' rights to permanent residency, voiced other concerns and required more information. (RH)

Price: FOC

From : DETR free literature, PO Box 236, Wetherby, West Yorkshire LS23 7NB.

Development of an instrument to measure resident satisfaction with assisted living; by Elzbieta Sikorska-Simmons.

Journal of Applied Gerontology, vol 20, no 1, March 2001, pp 57-73.

Assisted living (sheltered housing in the UK) represents a social model of care for frail older people that combines housing and services to support their independence. 156 residents in 13 assisted living facilities participated in the development of the Resident Satisfaction Index (RSI). Exploratory factor analysis confirmed five hypothesised RSI subscales representing perceptions of health care, housekeeping services, physical environment, relationships with staff, and social life/activities. The RSI instrument could be used by policymakers and professionals interested in improving the quality of life for the frail older people in assisted living. (KJ/RH)

ISSN: 07334648

Draft national care standards [for adult placement services, day care (support) services, housing support services, nurse agencies, short breaks and respite care services]: third tranche: services for adults: [a consultation paper]; by Angus Skinner (chairman), National Care Standards Committee, Social Work Services Inspectorate, Scottish Executive. Edinburgh: Scottish Executive, July 2001, 172 pp.

The White Paper, "Aiming for excellence: modernising social work services in Scotland" (March 1999) set out proposals to develop National Care Standards for a wide range of care services in Scotland. The Scottish Commission for the Regulation of Care (SCRC) takes over responsibilities for registration and inspection of care services on 1 April 2002. The standards outlined include services which have not previously been subject to regulation: adult placement, and day care services. As with previous Scottish draft national care standards, each is based on six principles of dignity, safety, choice, privacy, diversity, and potential. The standards cover various stages of service use: before using the service; settling in; enjoying life; choosing to move; and expressing views. (RH)

ISBN: 0755901851

From : Jane McEwan, Regulation of Care Project, Scottish Executive, Room 24, James Craig Walk, Edinburgh EH1 3BA. e-mail: jane.mcewan@scotland.gsi.gov.uk Website: www.scotland.gov.uk/government/rcp

Ego-integrity versus ego-despair: the effect of "accepting the past" on depression in older women; by Kylie J Rylands, Debra J Rickwood.

International Journal of Aging and Human Development, vol 53, no 1, 2001, pp 75-89.

The relative strength of the late-life personality process of ego-integrity, as operationalised by "accepting the past", was tested as a predictor of depression in a multivariate model containing other well-established predictors: age, social support, physical dependency, and positive and negative affectivity. 73 older Australian women living in supported accommodation completed an anonymous, self-report questionnaire. Results showed that "accepting the past" was a significant predictor in the multivariate model, along with social support, physical dependency, and positive affectivity. Results are discussed in terms of the utility of investigating later-life personality processes as potential interventions for alleviating depression in older people. (RH)



ISSN: 00914150

The evolution of "Close Care" as user-led care of the elderly in the UK; by M Habell.  
Journal of the Royal Society for the Promotion of Health, September 2001, pp 165-173.

"Close Care" has become a generic term for a particular concept of "assisted living", generally consisting of single storey dwellings arranged in a "campus style" or as a single block, and linked to a central resource centre offering a range of support services. "Close Care" also offers a solution to the crises of carer shortages and ever-increasing nursing costs. It also responds to the growing consumerist power of older people who seek more choice, more control and higher standards. This paper recounts the development of the "Close Care" concept, and examines the latest example mainly from an architectural perspective. (RH)

ISSN: 14664240

Fees paid to GPs for services provided to residents of care accommodation for older people - 2000-2001: the results of a survey carried out by the Association of Charity Officers (ACO), the Occupational Benevolent Funds Alliance (OBFA), and Voluntary Organisations Involved in Caring in the Elderly Sector (VOICES), into the payment of fees to GPs for services provided to older people in sheltered accommodation, residential care and nursing homes; by Association of Charity Officers - ACO; VOICES - Voluntary Organisations Involved in Caring in the Elderly Sector; Occupational Benevolent Funds Alliance - OBFA. London: Association of Charity Officers - ACO, 2001, 43 pp (ACO/2001/12).

Since a previous report by OBFA in 1997, there has been increasing evidence of more GPs introducing charges or retainer fees for their services to residents in care establishments and sheltered housing. The present survey aimed to find out how many GPs were charging retainer payments, why and how much they were charging, what additional healthcare services - if any - were being provided over and above core medical services, and whether there was any indication of that they might be charging older people for core medical services that were free to everyone else. Results presented are based on 119 questionnaire responses representing 183 care establishments and 8987 residents. Charitable bodies running residential establishments for older people are paying variable amounts for GP healthcare for their residents on top of what is being paid under public funding arrangements. Many are not being asked to pay extra. The study finds little evidence of association between the extent and quality of healthcare provided and fees charged. There was also limited evidence of the impact of the introduction of Primary Care Groups (PCGs). (RH)

ISBN: 0952872412

Price: p+p only

From : ACO, Beechwood House, Wyllotts Close, Potters Bar, Herts EN6 2HN. Email: info@aco.uk.net

Good neighbour or professional: the grey areas in the scheme manager's role: a workshop: University of Sussex, Friday 28th September 2001; by Centre for Social Policy and Social Work, University of Sussex; Sussex Gerontology Network, Sheltered Housing Group. Brighton: School of Social Sciences, University of Sussex, 2001, 14 pp.

Is it possible for sheltered housing scheme managers to be both neighbours and professionals, and where are the boundaries or "grey areas" between the two? Presentations were made, each considering the legal, management, insurance and trade union perspectives. Workshop participants - mainly scheme managers and residents - listed the "grey areas" they most often encountered: personal care; domestic tasks; scheme events; and rights to information about residents. The themes identified are presented as a guide for good practice, for discussion among sheltered housing providers, staff and residents. (RH)

Price: £1.00

From : Professor Peter Lloyd, School of Social Sciences, University of Sussex, Brighton BN1 9SN.

How to detect and manage depression in older people; by Sue Tucker, John Darley, Sarah Cullum.

Nursing Times, vol 97, no 45, 8 November 2001, pp 36-37.

Undiagnosed depression can have a serious negative effect on quality of life. The authors describe a pilot study by the Bury St Edmunds Primary Care Group (PCG), with the aim of supporting people with depression in sheltered accommodation and residential and nursing homes. The project suggests that it is possible for care staff to screen residents for depression, and that there is good potential for screening and intervention to improve care home residents' mood. (RH)

ISSN: 09547762

How to help depressed older people living in residential care: a multifaceted shared-care intervention for late-life depression; by Robert H Llewellyn-Jones, Karen A Baikie, Sally Castell (et al).

International Psychogeriatrics, vol 13, no 4, 2001, pp 477-492.

The intervention was implemented for the entire non-nursing home population (1,466 residents in independent and assisted living) of a large continuing care retirement community in Sydney, Australia providing three levels of care. Of the 1,036 who were eligible and agreed to be interviewed, 281 (27.1%) were classified as depressed according to the Geriatric Depression Scale (GDS). The intervention included: multidisciplinary collaboration between primary care physicians, facility health care providers, and the local psychogeriatric service; training for primary care physicians and other facility healthcare providers about detecting and managing depression; and depression-related health education/promotion programmes for residents. The intervention was widely accepted by residents and their healthcare providers, and was sustained and advanced by the facility after the completion of the study. It is possible to implement and sustain a multifaceted shared-care intervention for late-life depression in a residential care facility, where local psychogeriatric services are scarce, staff-to-resident ratios are low, and the needs of depressed residents are substantial. (RH)

ISSN: 10416102

Is there space for ethnography?: reflections on evaluating a medical student befriending scheme with elderly people; by Ruth Pinder, Sheila Hillier.

Education and Ageing, vol 16, no 2, 2001, pp 203-228.

Using a detailed case study of a sheltered housing project in the East End of London where medical and dental students from St Bartholomew's and the Royal London Hospital were initiating a befriending scheme with older residents, this article reflects on the struggle over "how to see". The assumptions behind traditional experimental research are considered, such as issues of process: "does an intervention work" and "how does a project work"? The second part explores how the hard outcome measures and demands for immediate policy relevance anticipated by research sponsors jarred with the tentative and subtle learning process taking place in the housing complex. The article reflects on the problems and possibilities of doing ethnography in health policy research, and asks how might evaluation be in a better position to create quality rather than simply to monitor it - to act as a critical friend rather than judge? (RH)

ISSN: 13528580

Living arrangements and older people; by Centre for Policy on Ageing - CPA. London: Centre for Policy on Ageing, 2001, 3 pp (CPA briefings 2001).

This briefing summarises work undertaken by the Centre for Policy on Ageing (CPA) on living arrangements and older people. More specifically, it outlines a seminar series on the theme, Choice in later life living arrangements, from which a national conference is planned for Autumn 2002. The briefing also summarises the main points of the report, "Owning independence: the role and benefits of private sheltered housing" (CPA, 2001), which considers the extent to which this housing sector provides for older people's needs. (RH)

From : CPA, 19-23 Ironmonger Row, London EC1V 3QP.

Long-term care and a good quality of life: bringing them closer together; by Rosalie A Kane.

The Gerontologist, vol 41, no 3, June 2001, pp 293-304.

Long-term care policies and programmes in the US suffer from a major flaw: they are balanced toward a model of nursing home care that, regardless of its technical quality, tends to be associated with a poor quality of life for consumers. This article proposes high quality of life domains: security, comfort, meaningful activity, relationships, enjoyment, dignity, autonomy, privacy, individuality, spiritual well-being, and functional competence. These kinds of quality of life are being minimised in current quality assessment, and are given credence only after health and safety outcomes are considered. Five trends are reviewed that might lead to a more consumer-centred emphasis on quality of life: the disability rights movement; the emphasis on consumer direction; the growth of assisted living (e.g. sheltered housing); greater attention to physical environments; and efforts to bring about a change in culture in nursing homes. Building on these trends, strategies are suggested that move beyond polarised arguments towards forms of long-term care that are more compatible with a good quality of life. (RH)

ISSN: 00169013

Owning independence in retirement: the role and benefits of private sheltered housing for older people; by Gillian Dalley, Centre for Policy on Ageing - CPA. London: Centre for Policy on Ageing, 2001, 61 pp (CPA reports, 30).

A review undertaken for McCarthy and Stone provides an overview of current policy and practice relating to private sheltered housing for older people. The review considers present and future characteristics of an ageing

population, and older people's income, with regards to changing preferences in living arrangements. Public policy relating to housing, health and social care for older people is also examined. (RH)

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Price: £15.00 + p+p

From : Central Books, 50 Freshwater Road, Chadwell Heath, Dagenham, RM8 1RX.

Resident v non-resident scheme managers: managing a change: a workshop: University of Sussex, Thursday 29 March 2001; by Centre for Social Policy and Social Work, University of Sussex; Sussex Gerontology Network, Sheltered Housing Group. Brighton: School of Social Sciences, University of Sussex, 2001, 10 pp.

Sheltered housing exists to provide support for its residents, and must be of good quality and efficiently delivered. This workshop examined changes in personnel running sheltered housing, from the untrained "good neighbour" resident scheme manager or warden, to the professional trained in both care delivery and housing management. The aim was to find out the concerns of both residents and managers, and to establish models for change which identified and tackled both positive and negative aspects of change. (RH)

Price: £1.00

From : Professor Peter Lloyd, School of Social Sciences, University of Sussex, Brighton BN1 9SN.

Residential care supply and cognitive and physical problem case mix in nursing homes; by Robert Newcomer, James Swan, Sara Karon (et al).

Journal of Aging and Health, vol 13, no 2, May 2001, pp 217-247.

A rapid evolution has occurred in US state policy and industry practices with regard to assisted living and expanded use of residential care facilities for people with physical and cognitive frailty, yet relatively little is known about the interrelationship between this housing supply and nursing home case mix. The association between residential care supply and the proportion of cognitively and physically impaired nursing home residents was examined in more than 1,500 homes in 5 states. The proportion of residents with only physical and cognitive impairment likely to be affected by emerging long-term care policy appears to be well under 10%. This effect is more persistent for admissions than continuing cases. The findings raise caution about the optimistic assumptions of the interplay between residential care or assisted living policy and nursing home use. (RH)

ISSN: 08982643

Safety and security: importance for elderly living in sheltered housing; by Britt Maj Wikström, Marianne Hjortsjö-Norberg, Gunilla Sviden. Stockholm: AB Svensk Byggtjänst, 2001, pp 195-200.

IN: Design and Health: the therapeutic benefits of design; edited by A Dilani, 2001, pp 195-200.

Older people have the most difficulties in mastering changes to their living environment, and their feeling of security can also feel threatened. This paper reports on a project describing older people's opinions of their living conditions in sheltered housing. The focus is on planning and decoration of indoor design and outdoor environment (aesthetic domains), and on the caring domain, security. (OFFPRINT). (RH)

Seniors' experiences of client-centred residential care; by Jacquie Eales, Norah Keating, Annita Damsma.

Ageing and Society, vol 21, pt 3, May 2001, pp 279-296.

The philosophy concerning long-term care for frail older people has shifted from a provider-driven, medical model toward a more client-centred, social model. While this philosophy emphasises the decision-making abilities of clients and respect for their values and preferences, evidence suggests that there are difficulties in understanding and implementing the philosophy. Qualitative in-depth interviews were conducted with residents of adult family living and assisted living programmes in western Canada. Three main themes emerge from the data analysis. First, the physical setting, people within the setting, and the community were important areas of expression of residents' values and preferences. Second, the decision about where to live influenced whether the residential care environment was congruent with residents' values and preferences. Third, contentment resulted when there was a good fit between preferences and experience, reflecting the essence of residents' perspective of client-centred care. Choices among models of care, appropriate staffing levels and training, and recognition of family contributions may improve the practice of client-centred care. (RH)

ISSN: 0144686X

Services provided by informal and formal caregivers to seniors in residential continuing care; by Norah Keating, Janet Fast, Donna Dosman (et al).

Canadian Journal on Aging, vol 20, no 1, Spring 2001, pp 23-46.

New approaches to residential continuing care for frail older people in Canada include a shift toward more social care models that involve hiring multi-skilled workers, and expectations of family involvement as partners in care. Recall and stylised time-use methods were used to assess the types of tasks and amounts of service

provided by family members and staff caregivers in three models of residential care: adult family living, assisted living, and dementia care. Family members provide about 30% of on-site services to residents. Family members spend most time in enhancing well-being, while staff spend most time in housework. Patterns of care differ across adult family living, assisted living, and dementia care settings. Sustainability of these patterns of care depends on the adequacy of staffing and reasonable expectations about family resources. (RH)  
ISSN: 07149808

The shape of care to come; by Natalie Valios.

Community Care, no 1361, 22 February 2001, pp 18-19.

The debate about long-term care for older people has raised the question of how it will be provided in future. Some analysts believe the next 20 years will see sheltered housing replacing residential care. That prediction is the result of a 3-year research project about people's lives by 2020 carried out by the Tomorrow Project, an independent think tank. Research by Laing and Buisson, and the Emerging Role of Sheltered Housing (EROSH) is also cited in support. (RH)

ISSN: 03075508

Supporting people: policy into practice; by Department of the Environment, Transport and the Regions - DETR; Home Office; Department of Health - DH. London: DETR, 2001, 136 pp (Supporting People).

The Supporting People programme offers vulnerable people the opportunity to improve their quality of life through greater independence. It promotes housing-related services which are reliable and efficient, and which complement existing care services. This document takes forward the policy and describes how local authorities and their partners will turn the "Policy into Practice" at a local level. Services for older people form a major part of the Supporting People programme, in terms of numbers of people receiving services, and the document sets out how services will be delivered, including: the needs of black and minority ethnic elders; access to sheltered housing; and the role of home improvement agencies (HIAs). (RH)

Price: FOC

From : ODPM free literature, PO Box 236, Wetherby, West Yorkshire LS23 7NB.

Vertical axes on the long-term care continuum: a comparison of board and care and assisted living; by Pamela Herd.

Journal of Aging & Social Policy, vol 13, no 1, 2001, pp 37-56.

As the continuum of long-term care has expanded, public funding has not accompanied new care options. Detailed in this article are access, provider profits and resources and care quality in two types of residential care that fall in the centre of the continuum, assisted living and board and care. These two options provide examples of how limited public funding leads to vertical axes, which represent access to services, the resources providers draw on to give care, and the quality of long-term care services at each service point on the long-term care continuum. (KJ/RH)

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