



**ARGYLL & BUTE COUNCIL**

**Housing Need & Demand Assessment 2020 - Technical Supporting Paper 0810**

**Core Output 3: Specialist Provision in Argyll & Bute**

**(Draft 2.0 April 2021)**

Produced by:

HNDA Working Group  
Argyll & Bute Council  
Dolphin Hall  
Manse Avenue  
Dunoon  
Argyll  
PA23 8DQ

[allan.brandie@argyll-bute.gov.uk](mailto:allan.brandie@argyll-bute.gov.uk)

TEL: 01369 70 8679

## 1.0 Introduction

- 1.1 This chapter highlights the contribution that Specialist Provision plays in enabling people to live well, with dignity and independently for as long as possible. It identifies potential gaps/shortfalls in that provision and the future level and type of provision required to address the potential need and demand in Argyll and Bute over the next 5 – 10 years.
- 1.2 The Scottish Government’s HNDA guidance notes that people may have similar needs, despite their individual illness, health condition or equality characteristic; and therefore the focus of the HNDA is on understanding and, as far as possible, quantifying, the implications for accommodation and support provision. In this context Specialist Provision refers to three broad categories of need covering six types of housing or housing-related provision, as outlined in the following table.

**TABLE 1: Specialist Provision Typology**

| Category of Housing Need | Type of Housing Provision   |
|--------------------------|---|
| Property Needs           | 1. Accessible and adapted housing<br>2. Wheelchair housing<br>3. Non-permanent housing e.g. for students, migrant workers, asylum seekers, refugees |
| Care and Support Needs   | 4. Supported provision e.g. care homes; sheltered/ very sheltered housing; hostels and refuges<br>5. Care/ support services for independent living  |
| Locational or Land Needs | 6. Site provision e.g. sites/pitches for Gypsy/Travellers and sites for Travelling Showpeople   |

- 1.3 Local stakeholders, including the Health and Social Care sectors, tend to use a range of individual definitions and categories of specialist provision which can overlap or on occasion appear to conflict. The following table summarises the council’s working assumptions regarding the relation between variant categorisations and the specialist provision typology as set out in Table 1 above by the CHMA for use in HNDA analysis.

**TABLE 2: Matching Local categories to HNDA types of Specialist Provision**

| CHMA/ HNDA            | 1.Accessible & Adapted  | 2.Wheelchair | 4.Supported   |
|-----------------------|---|--------------|---|
| RSLs Stock Categories | Adapted<br>Amenity<br>Ambulant Disabled<br>Medium Dependency<br>Mobility<br>Other Specially Adapted | Wheelchair   | Sheltered<br>Very Sheltered<br>Extra Care<br>Retirement |

NB. Historic terminology including “Progressive Care Centres” are not currently utilised in this authority. HSCP residential care homes would be included in HNDA type 4: Supported Provision.

- 1.4 To evidence need for the above, the following key groups, as a minimum, should be considered:
- older people
  - people with a physical disability
  - people with a mental health condition
  - people with a learning disability
  - homeless people
  - people fleeing/ at risk of domestic abuse
  - people requiring non-permanent accommodation e.g. homeless people, students, migrant workers, asylum seekers, refugees, care leavers, ex-offenders
  - armed forces communities
  - minority ethnic people (including Gypsy/ Travellers)
  - Travelling Showpeople.
- 1.5 The aim of this paper is to: provide a set of detailed Specialist Provision templates; provide appropriate evidence of the scale and type of Specialist Provision in the local area; demonstrate a clear understanding of the current scale and type of unmet need, and provision required in future; identify key issues to inform the LHS and LDP; and to document engagement with external stakeholders
- 1.6 In completing this element of the HNDA council housing practitioners and planners have engaged with a range of partners and stakeholders; in particular health and social care partners to share evidence, identify needs and plan for solutions across health, social care and housing. The Housing Contribution Statement, incorporated in the HSCP's Joint Strategic Commissioning Plan, has been one key focus of these discussions, supplemented with the Health and Care and Housing Needs Assessment produced jointly by Argyll & Bute Public Health Information and the council's Housing Service in 2018; the deliberations of the ad hoc Housing & Health Working Group; and the HSCP's Care Homes & Housing work strand which is ongoing.
- 1.7 Following this introductory section, the paper is structured as follows:

| <b>SECTION</b>  | <b>PAGE</b> |
|---|-------------|
| 2. Contextual Overview  | 54          |
| 3. Template 1: Accessible and Adapted Housing                       |             |
| 4. Template 2: Wheelchair accessible Housing                        |             |
| 5. Template 3: Non-Permanent Housing                                |             |
| 6. Template 4: Supported Provision                                  |             |
| 7. Template 5: Care/Support Services for Independent living at home |             |
| 8. Template 6: Site Provision (Gypsy/Travellers & Show People)      |             |
| 9. Summary Key Issues for the LHS and LDPs                          |             |

1.8 Each of the Specialist Provision templates follows a similar format:

|                          |   |
|--------------------------|---|
| a) Strategic Framework   | National and local policies and strategies  |
| b) Property needs        | The model of accommodation or type of service   |
| c) Client group          | Who provision is suitable for   |
| d) Evidence              | Current type and level of needs and provision;<br>Any gaps or shortfalls in needs & provision;<br>Future type and level of needs & provision required |
| e) External consultation | Stakeholder engagement: who, how & findings   |

## 1.9 NOTE ON THE IMPACT OF COVID-19

It is generally acknowledged that the coronavirus pandemic (Covid-19) has both immediate and long-term implications for all areas of society, resulting in increased pressures on health and social care, employment and an uncertain economic future. The Scottish Government's "Coronavirus (Covid-19): framework for decision making" identifies 4 main categories of harm:

- Direct harm to people's health
- Wider impact on health and social care services
- Harm to our broader way of living and society
- Impact on our economy

While the effects of the pandemic are universal in scope, it is also recognised that particular groups are disproportionately affected. This includes many of the core equalities groups that are the focus of this paper such as: the elderly; those with underlying health conditions and long-term limiting illnesses; certain ethnic minorities; the homeless; care home residents, and others.

The impacts on specific housing and support need and demand at a local level are difficult to quantify and project over time; and much of the data and analysis collated for this paper (and for the revised HNDA overall) does by its nature pre-date the emergence of the pandemic. Wherever possible current information relating to 2020/21 will be used to enhance historic trend-based analysis. However, it will be critical to monitor circumstances going forward and revise HNDA findings once more detailed and robust evidence relating to the impact of the pandemic becomes available.

Key documents which have been considered at this stage, include:

- Covid-19: Implications for the Human Right to Adequate Housing in Scotland, Scottish Human Rights Commission, July 2020;
- Equality and Fairer Scotland Duty Assessment of the Health and Social Impacts of Covid-19, Scottish Government, June 2020.

The current crisis has highlighted the essential nature of adequate housing for all. Good quality, affordable housing aimed at those most in need can be the difference between good and bad physical health, the ability to pay for heating, buy nutritious foods and access education and employment. It is likely that there will be particular impacts on specialist housing provision and

services; and future reviews regular, annual HNDA updates on the HNDA will be required aim to address this.

### **1.10 Quality Assuring the Evidence Base**

This paper relies on primary research and stakeholder engagement as well as detailed analysis of secondary data drawn from a range of local and national reports and studies. The data has been quality assured as far as possible by ensuring that:

- Primary research involved a proportionate, statistically valid sample of households within each HMA and across Argyll & Bute as a whole. The achieved sampling provides an acceptable, statistically robust margin of error for the population of the authority and the individual HMAs.
- Triangulating data sources, across Health & Social Care needs, assessments, Housing waiting lists, stock and lets figures, homeless data and other sources; with the results of the primary HNDA Household Surveys and bespoke in-house stakeholder engagement allowed stronger data quality assurance. The bespoke in-house consultation involved direct contact with identified stakeholders, such as wheelchair users on the HOME Argyll waiting list, Gypsy/Travellers on official sites or in mainstream accommodation, and armed forces personnel. In these cases, numbers were often low and limited, however this reflects the general proportionate presence of these groups within the wider population of Argyll and Bute, and does help to enhance the results of the wider HNDA Household surveys. In general, certain groups such as Older Persons and Families with Children were well-covered through the primary engagement; and other groups such as Gypsy/Travellers or wheelchair users which might have appeared to be subject to limited consideration, were satisfactorily involved and enhanced through the range of triangulated processes and additional direct engagement.
- Joint working with HSCP colleagues and specialists in specific areas, such as Public Health Information analysts, specialist housing providers and support services, senior HSCP managers, representatives and champions for key client groups, and others helped to ensure that data has been quality assured, and the most appropriate evidence has been highlighted in the HNDA.

As noted elsewhere in this paper, the Argyll & Bute HNDA Household Surveys (2018/2019) included specific questions on particular needs issues and involved almost 3,500 interviews, as well as telephone and online consultation with representatives of local and national agencies or service providers; plus dedicated focus groups with professional specialists and particular client groups. Subsequent consultation in 2019/20, involved engagement with smaller but more focused groups including wheelchair users, gypsy/travellers, armed forces/veterans and service providers/ representatives. Full details are set out in the relevant HNDA Technical Papers.

The Argyll and Bute Strategic Housing Forum continues to involve engagement across a range of partners, including Health and Social Care; while the establishment of the dedicated Housing Occupational Therapist has enabled further interrogation, validation and cleansing of waiting list and other datasets in relation to particular housing and support needs. The creation of this post in recent years has facilitated and focused the work of local area Housing & Health Care groups to identify and assess local needs.

A dedicated short-life, joint working group was convened for council, RSL and HSCP staff to review need and demand for a range of specialist housing models, resulting in the production of the joint Housing, Health & Care Needs Assessment in 2018. Thereafter, a cross-sector conference was held to consider the results and agree an action plan to underpin the Housing Contribution Statement and HNDA. Thereafter, a key work strand of the HSCP explored Housing and Care Homes provision across Argyll & Bute.

All of this activity has helped to inform the HNDA evidence base and highlight issues for consideration in the development of the next LHS. The evidence and issues were further reviewed at an online LHS Stakeholder conference in November 2020; a Housing Services staff Review day in December 2020; and at option appraisal sessions in February 2021.

On this basis, the council believes the core evidence base underpinning this HNDA is robust and credible, and that potential data gaps have been addressed in respect of key sectors of the local population. Nevertheless, these particular needs will continue to be a priority consideration throughout the life of the next LHS, and annual reviews and monitoring will seek to ensure consistent and enhanced analysis of high quality data is available to inform regular HNDA updates.

The Council has also undertaken a Health Impact Assessment exercise for the HNDA and LHS in 2021, and a report will be published with the finalised strategy. This was facilitated by specialist HSCP colleagues and further helped to support the results of the HNDA analysis and recommendations.

## 2.0 Contextual Overview

### 2.1 The Strategic Framework

In addition to the Scottish Government's Local Housing Strategy Guidance, 2019, and the CHMA's Housing Need and Demand Assessment guidance published in 2020, there are a wide range of relevant strategic documents and policy agendas, at both national and local level, which provide the contextual framework for strategic planning in relation to housing and support services for those with particular needs; including people with protected characteristics under equalities legislation. The following includes some key policy documents and thematic strands, but is by no means an exhaustive list.

- Scottish Government's national health and wellbeing outcomes and the integrated health and social care agenda.
- Public Health Scotland agenda
- Foundations for well-being: Reconnecting Public Health and Housing
- NHS Scotland, Housing Strategies Briefing Paper
- Equality Act 2010; and the Commission in Scotland Equality and Human Rights
- UN Convention – The Rights of Persons with Disabilities
- Fairer Scotland agenda
- Our Place, Our Space, 2017
- Guidance for setting of LHS target to support the delivery of more wheelchair accessible housing, Scottish Government, 2019
- Age, Home and Community: a strategy for housing for Scotland's older people 2012-2021, Scottish Government, 2011; and Age, Home and Community: Next Phase, Scottish Government, 2018
- Housing and Disabled People, EHRC, 2018
- Argyll & Bute HSCP Strategic Plan 2019/20 – 2021/22 (incorporating the Argyll & Bute Housing Contribution Statement)
- Child Poverty Action Plan, Argyll & Bute Council, 2019
- Technology Enabled Care (TEC) in Housing Charter, 2019
- Make a Stand, CIH/Women's Aid/Domestic Abuse Housing Alliance, 2019

Further relevant national and local policies and strategies are referenced in the subsequent templates of this report.

2.2 For well over a decade now, the primary, national strategic imperative has been to move the balance of care away from care homes to care in the home and community; with various models of care homes providing for the particularly frail and elderly. This has been successful, with both the number of people in care homes and the number of beds provided falling in recent years while the numbers receiving care at home have increased. A key challenge for specialist housing provision will be to provide both purpose built and adapted housing across all tenures to enable people to live in their own homes, or a homely setting, as long as possible; and to provide the care that is required from a labour force that continues to decline as a percentage of the total population.

2.3 The guiding vision developed by the HSCP, Argyll & Bute Council, and the Strategic Housing Partnership and set out in the Argyll & Bute Housing Contribution Statement, 2019, is that:

**“People in Argyll and Bute with health and social care needs have access to housing options that maximise their health, wellbeing and independence.”**

This supports and reinforces the current LHS outcome that:

***“People are enabled to live independently in their own homes.”***

## 2.4 **Housing, Health and Particular Needs data sources and evidence base.**

In addition to a range of local and national datasets and sources, including invaluable secondary sources (i.e. data collected for other purposes such as housing management information, RSL waiting lists, council homeless data, the national census, local community studies, public health information, and nationally produced demographic estimates), there are a number of primary sources of information specifically designed and collated for the purpose of informing the HNDA and LHS. These are available on the council website or on request from Council Housing Services and include the following:-

- Housing and Health and Care Needs (Argyll & Bute HSCP & Argyll & Bute Council, 2018)
- Summary: What is the need for specialist housing provision in Argyll & Bute for those accessing health and social care? (Argyll & Bute HSCP & Argyll & Bute Council, 2018)
- Care homes and housing for older people project (Argyll & Bute HSCP, 2018)
- Helensburgh & Lomond Housing Market Study (North Star/Argyll & Bute Council, 2018)
- Argyll & Bute HNDA Household Survey (Research Resource/Argyll & Bute Council, 2019)
- HNDA Technical Supporting Paper: Wheelchair Users (Argyll & Bute Council, 2021)
- HNDA Technical Supporting Paper: Gypsy/Travellers (Argyll & Bute Council, 2021)
- HNDA Technical Supporting Paper: Veterans & Armed Forces (Argyll & Bute Council, 2021)

Other relevant data sources include:

- Scottish House Condition Survey, Local Authority Tables
- Scottish Household Survey
- Scottish Government Health and Community Care Statistics
- Scottish Government Domestic Abuse Statistics
- Scottish Government Specialist Provision Evidence Finder



## 2.5 Overview of Health and wellbeing in Argyll and Bute

2.5.1 The Scottish House Condition Survey provides statistics on the proportion of households where one or more members are long term sick or disabled. The following table suggests that there are similar percentages in Argyll and Bute and Scotland, at 43% of all households. There is however a difference in terms of the tenure and type of household. The percentage of owner occupying households with a long term sickness or disability is higher in Argyll and Bute (43%) than Scotland (38%), while the reverse is the case for those in social rented housing. Older households in Argyll and Bute are also more likely to have a long term sickness or disability (63%) than Scotland as a whole (60%); however families and “other” households are less likely to have these conditions in Argyll and Bute. (See definitions of household types in the context of the SHCS below table.)

**Table 2.1: Households where one or more members are Long Term Sick or Disabled (LTSD)**

| LTSD Households         | Argyll & Bute                 | Scotland |
|-------------------------|-------------------------------|----------|
| % all Households        | 43%                           | 43%      |
| % Owner Occupied Tenure | 43%                           | 38%      |
| % Social Rented Tenure  | 52%                           | 63%      |
| % PRS Tenure            | • (no data, sample too small) | 32%      |
| % Older households*     | 63%                           | 60%      |
| % Families*             | 23%                           | 28%      |
| % other households*     | 32%                           | 39%      |

Source: SHCS 2016-18, Local Authority Tables (published 2020)

\*Note: SHCS definition of household types:

|          |   |
|----------|---|
| Older    | Small households made up of one or two residents, at least one of which is aged 65 or older.        |
| Families | Households which contain at least one child under the age of 16. Resident adults may be of any age. |
| Other    | These are all other households with adult residents (of any age) and no children.                   |

2.5.2 In addition to the “long term sick or disabled” statistics outlined above, the Scottish Health Survey, and the collated Scottish Survey Core Questions, for 2019 provide figures for those with “*limiting* long term physical and mental health conditions” which would be more severe and restrictive than the former conditions identified in the table above. On this basis Argyll and Bute would appear to be healthier overall than Scotland as a whole.

**Table 2.2: % of Population with limiting health conditions, 2019**

| Area          | Limiting Long Term Health Conditions | Self-assessed general health – bad/very bad |
|---------------|--------------------------------------|---|
| Argyll & Bute | 26.4%                                | 7.4%  |
| Scotland      | 35%                                  | 9%  |

Source: Scottish Core Questions, 2019.

2.5.3 For more detailed, local analysis of housing and health issues across Argyll and Bute, the council carried out two extensive household studies in 2018 and 2019. The results are summarised in the following paragraphs. One quarter of respondents (25%) said someone in their household has a long-term illness, health problem or disability, which limits their daily activities or the work they can do. This included problems relating to old age. More than seven in ten respondents (71%) said there was no one in their household who suffered from any illness or health issue. The most commonly cited health issue was a mobility/ physical health problem (15%) followed by frailty due to old age (5%).

**Table 2.3: Households with long-term health condition**

| <b>Q60 Is there anyone in the household who suffers from any of the following?</b> |                        |
|--|------------------------|
|  | <b>All respondents</b> |
| <i>Unweighted</i>  | 2,642                  |
| <i>Weighted</i>  | 34,477                 |
| None of these  | 71.3%                  |
| Mobility/ Physical health problem  | 14.8%                  |
| Being frail due to old age   | 4.7%                   |
| A chronic disease (such as cancer, HIV, diabetes, heart disease or epilepsy)       | 3.5%                   |
| Difficulties with hearing  | 3.3%                   |
| Don't know/ refused  | 2.8%                   |
| Mental ill health  | 2.5%                   |
| Difficulties with sight  | 1.6%                   |
| Learning difficulties  | 1.1%                   |
| Dementia   | 1.0%                   |
| Development disorder   | 0.5%                   |
| Other  | 0.4%                   |
| Drug/ Alcohol dependency   | 0.0%                   |

Source: Argyll & Bute HNSA Household Survey, Research Resource, 2019

#### 2.5.4 Analysis by age reveals:

- Those aged 25-34 (92%) were the most likely to say there was no one in their household who suffered from any illness or health issue while those aged 75 and over (38%) were the least likely to have no one.
- Respondents aged 75+ (37%) were most likely to suffer from, or live with someone who suffers from, a mobility/ physical health problem.
- Younger respondents aged 18-24 (6%) were most likely to suffer from, or live with someone who suffers from, mental ill health.
- Respondents aged 75+ were most likely to suffer from, or live with someone who suffers from, difficulties with sight (6%) and hearing (9%).
- More than one fifth (21%) of respondents aged 75 and over suffer with, or live with someone who suffers with, being frail due to old age.
- Respondents aged 65-74 (7%) were most likely to suffer from, or live with someone who suffers from, a chronic disease.

**Table 2.4: Households with long-term health condition, by Age**

| <b>Q60 Is there anyone in the household who suffers from any of the following by age of head of household</b> |              |              |              |              |              |            |                |
|---|--------------|--------------|--------------|--------------|--------------|------------|----------------|
|   | <b>18-24</b> | <b>25-34</b> | <b>35-54</b> | <b>55-64</b> | <b>65-74</b> | <b>75+</b> | <b>Refused</b> |
| <i>Unweighted</i>   | 26           | 216          | 674          | 539          | 734          | 431        | 22             |
| <i>Weighted</i>   | 421          | 3,368        | 9,798        | 6,914        | 8,920        | 4,896      | 161            |
| Mental ill health   | 6.3%         | 2.4%         | 4.0%         | 3.3%         | 1.1%         | 0.2%       | -              |
| Mobility/ Physical health problem   | 3.6%         | 1.4%         | 5.9%         | 12.9%        | 19.9%        | 36.9%      | -              |
| Learning difficulties   | -            | 1.4%         | 2.3%         | 0.8%         | 0.3%         | 0.4%       | -              |
| Development disorder  | -            | 0.3%         | 1.1%         | 0.3%         | 0.1%         | 0.5%       | -              |
| Difficulties with sight   | -            | -            | 0.8%         | 0.2%         | 2.4%         | 5.5%       | -              |
| Difficulties with hearing   | -            | -            | 0.8%         | 1.0%         | 6.2%         | 8.9%       | -              |
| Dementia  | -            | -            | 0.7%         | 0.5%         | 1.0%         | 3.0%       | -              |
| Being frail due to old age  | -            | -            | 0.7%         | 1.7%         | 4.5%         | 21.1%      | -              |
| Drug/ Alcohol dependency  | -            | -            | -            | -            | 0.1%         | -          | -              |
| A chronic disease (such as cancer, HIV, diabetes, heart disease or epilepsy)                                  | -            | 0.3%         | 0.9%         | 1.9%         | 7.3%         | 6.9%       | -              |
| None of these   | 88.1%        | 92.4%        | 83.7%        | 78.5%        | 62.0%        | 37.7%      | 66.9%          |
| Don't know/Refused  | 5.6%         | 1.6%         | 2.8%         | 2.0%         | 4.0%         | 1.4%       | 33.1%          |
| Other   | -            | 0.1%         | 0.1%         | 0.3%         | 0.6%         | 1.1%       | -              |

Source: Argyll & Bute HNSA Household Survey, Research Resource, 2019

## 2.5.6 Analysis by tenure reveals:

- PRS tenants (80%) and owner-occupiers (74%) were more likely to say there was no one in their household who suffered from any illness or health issue than RSL tenants (60%).
- RSL tenants were most likely to suffer from, or live with someone who suffers from mental ill health (8%), a mobility/ physical health problem (20%) or a chronic disease (5%).

**Table 2.5: Households with long-term health condition, by Tenure**

| <b>Q60 Is there anyone in the household who suffers from any of the following by tenure</b> |                       |            |            |
|---|-----------------------|------------|------------|
|   | <b>Owner Occupied</b> | <b>PRS</b> | <b>RSL</b> |
| <i>Unweighted</i>   | 1945                  | 223        | 474        |
| <i>Weighted</i>   | 24211                 | 3373       | 6893       |
| Mental ill health   | 0.8%                  | 2.2%       | 8.3%       |
| Mobility/Physical health problems   | 13.9%                 | 10.7%      | 20.0%      |
| Learning difficulties   | 1.0%                  | 0.8%       | 1.4%       |
| Development disorder  | 0.3%                  | 1.8%       | 0.5%       |
| Difficulties with sight   | 1.8%                  | 1.2%       | 1.5%       |
| Difficulties with hearing   | 3.4%                  | 2.6%       | 3.4%       |
| Dementia  | 1.0%                  | 0.3%       | 1.2%       |
| Being frail due to old age  | 4.9%                  | 2.9%       | 4.9%       |
| Drug/Alcohol dependency   | -                     | 0.1%       | -          |
| A chronic disease (such as cancer, HIV, diabetes, heart disease or epilepsy)                | 3.3%                  | 3.1%       | 4.7%       |
| None of these   | 73.3%                 | 79.9%      | 60.3%      |
| Don't know/Refused  | 3.2%                  | 2.1%       | 1.9%       |
| Other   | 0.5%                  | 0.3%       | 0.0%       |

Source: Argyll & Bute HNDA Household Survey, Research Resource, 2019

2.5.7 While any of these conditions may require specialist provision of some form, the conditions most likely to result in a need for adapted housing or additional care services – such as physical disability and blindness or partial sight loss – clearly increase significantly in prevalence in the older age cohorts. According to the last Census for Argyll and Bute, in 2001, overall 6.8% of the population for instance has a physical disability, but by age 85 and over, this rises to 34.6%. Conversely, the proportion of the population with learning disabilities or a learning disability tends to decline among the older age bands, indicating that life expectancy for this group is lower than the population as a whole.

**TABLE 2.6: Long term health conditions by age group as % of total population**

| Condition                              | ARGYLL & BUTE: AGE RANGE |         |             |             |             |             |             |             |                |
|--|--------------------------|---------|-------------|-------------|-------------|-------------|-------------|-------------|----------------|
|  | Total/<br>All Ages       | 0 to 15 | 16 to<br>24 | 25 to<br>34 | 35 to<br>49 | 50 to<br>64 | 65 to<br>74 | 75 to<br>84 | 85 and<br>over |
| All people                             | 88,166                   | 14,435  | 8,439       | 8,021       | 17,886      | 20,049      | 10,761      | 6,243       | 2,332          |
| No condition                           | 68.4%                    | 89.7%   | 85.4%       | 82.8%       | 77.4%       | 61.9%       | 46.6%       | 30.2%       | 14.4%          |
| 1(+) conditions                        | 31.6%                    | 10.3%   | 14.6%       | 17.2%       | 22.6%       | 38.1%       | 53.4%       | 69.8%       | 85.6%          |
| Deafness or<br>partial hearing<br>loss | 7.9%                     | 0.6%    | 0.8%        | 1.4%        | 2.8%        | 7.1%        | 16.0%       | 30.2%       | 48.6%          |
| Blindness or<br>partial sight<br>loss  | 2.8%                     | 0.4%    | 0.6%        | 0.8%        | 0.9%        | 2.1%        | 4.0%        | 10.8%       | 24.5%          |
| Learning<br>disability                 | 0.4%                     | 0.4%    | 0.7%        | 0.6%        | 0.5%        | 0.4%        | 0.2%        | 0.1%        | 0.1%           |
| Learning<br>difficulty                 | 2.1%                     | 3.1%    | 5.3%        | 3.3%        | 1.9%        | 1.2%        | 0.6%        | 0.5%        | 0.3%           |
| Developmental<br>disorder              | 0.5%                     | 1.8%    | 1.4%        | 0.4%        | 0.2%        | 0.1%        | 0.1%        | 0.0%        | 0.0%           |
| Physical<br>disability                 | 6.8%                     | 0.7%    | 1.2%        | 1.7%        | 3.3%        | 8.0%        | 12.5%       | 21.2%       | 34.6%          |
| Mental health<br>condition             | 3.5%                     | 0.4%    | 2.1%        | 4.3%        | 5.0%        | 4.4%        | 2.7%        | 4.1%        | 9.6%           |
| Other condition                        | 19.9%                    | 5.4%    | 6.4%        | 8.6%        | 14.4%       | 27.2%       | 36.9%       | 40.8%       | 40.3%          |

Source: 2011 Census

## 2.68 The Impact of the Ageing Population

2.86.1 Specialist housing and support can be required by people of all ages, however, needs tend to become more acute in later life and the ageing population of Argyll and Bute has been identified as a priority issue. This section therefore starts by highlighting how the ageing population of Argyll and Bute will increase during the planning period, and how this is likely to result in increased need for both care at home (with a potential increase in the need for specialist and adapted housing) and residential care. The majority of the elderly, according to the local HNDA research as well as various national studies, are likely to live alone and in the private sector, which will present its own particular challenges in terms of housing and care in the future.

According to NRS, Argyll and Bute has the highest proportion of people aged 65+ of all Scottish councils (along with Dumfries & Galloway, both 25.5% compared to 18.9% for Scotland). The following table illustrates this, with comparisons to selected neighbouring authorities and the national figures.

**TABLE 2.7: Percentage of Older People in selected council areas**

| Area                | % of people: |          |          |
|---------------------|--------------|----------|----------|
|                     | Aged 65+     | Aged 75+ | Aged 85+ |
| Scotland            | 18.9%        | 8.4%     | 2.3%     |
| Argyll & Bute       | 25.5%        | 11.2%    | 2.9%     |
| West Dunbartonshire | 18.4%        | 7.9%     | 2.1%     |
| Glasgow City        | 13.5%        | 6.1%     | 1.8%     |
| Highland            | 22.1%        | 9.6%     | 2.6%     |
| Inverclyde          | 21.0%        | 9.5%     | 2.7%     |

Source: National Records of Scotland, Mid-Year Estimates, 2018

2.86.2 Across the sub-authority Housing Market Areas there are some notable variations, with Bute and Cowal for example having higher than average proportions of older households aged 65-84; and Coll & Tiree having particularly high proportion of residents aged 85+.

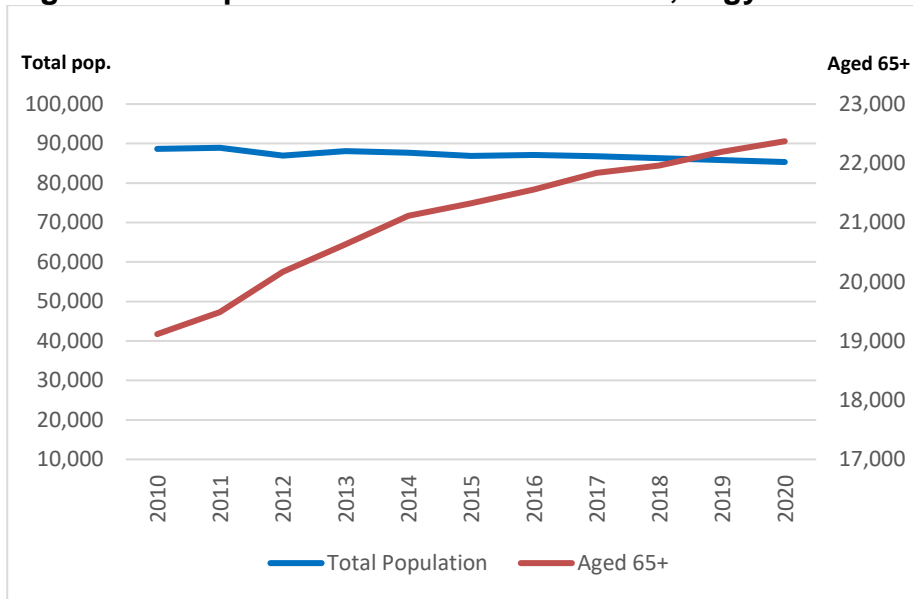
**Table 2.8: % of Older Population Cohorts by HMA, 2020**

| Area                     | All ages      | 65-84         | % of HMA Total | 85+          | % of HMA Total |
|--------------------------|---------------|---------------|----------------|--------------|----------------|
| Bute                     | 6,114         | 1,688         | 27.61%         | 218          | 3.57%          |
| Coll & Tiree             | 782           | 184           | 23.53%         | 30           | 3.84%          |
| Cowal                    | 14,222        | 3,867         | 27.19%         | 511          | 3.59%          |
| H&L                      | 25,866        | 5,118         | 19.79%         | 672          | 2.60%          |
| I, J & C                 | 3,377         | 845           | 25.02%         | 89           | 2.64%          |
| Kintyre                  | 7,475         | 1,781         | 23.83%         | 261          | 3.49%          |
| Lorn                     | 16,168        | 3,193         | 19.75%         | 411          | 2.54%          |
| Mid Argyll               | 9,201         | 2,077         | 22.57%         | 236          | 2.56%          |
| Mull & Iona              | 3,055         | 713           | 23.34%         | 66           | 2.16%          |
| <b>Argyll &amp; Bute</b> | <b>86,260</b> | <b>19,466</b> | <b>22.57%</b>  | <b>2,494</b> | <b>2.89%</b>   |
| Scotland                 | 8,834,472     | 902,738       | 10.22%         | 123,376      | 1.40%          |

Source: IS small area population projections, July 2020

22.86.3 While the total population in Argyll and Bute continues to decline (down by 4% between 2010 and 2020), the number of people aged 65 or over has been increasing (up 17% over the same period).

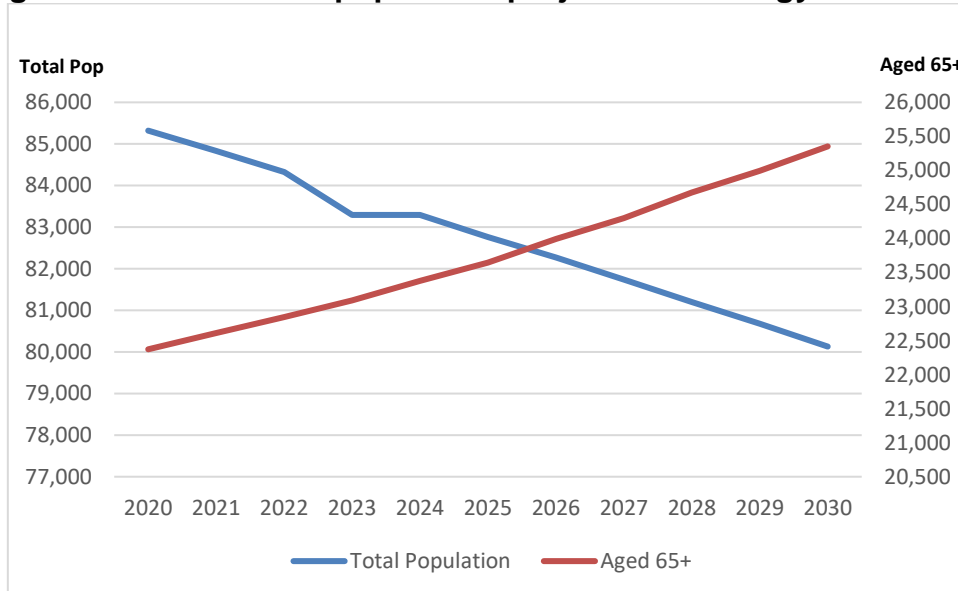
**Figure 2.1: Population Estimates 2010-2020, Argyll & Bute**



Source: National Records of Scotland Population Projections (2018-based), 2020

2.68.4 Projecting forward, while the principle NRS projection (2018-based) is for a decline of 6% in the total population between 2020 and 2030, the number of older people aged 65+ will continue to increase over the same period by 13%.

**Figure 2.2: 2018-based population projections for Argyll and Bute**



Source: National Records of Scotland Population Projections (2018-based), 2020

Further analysis of demographic trends by age is presented in HNDA Technical Supporting Paper 02, available on the council website.

2.68.5 In 2020, older households (aged 65+) made up approximately 15% of the HOME Argyll waiting list (367 applicants in total) and on average there have been around 335 older person households on the list per annum in recent years. In addition Bield, and other specialist RSLs, have around 200 further elderly applicants for specialist properties in Argyll and Bute.

Analysis of the 2020 HOME Argyll list indicates that the majority of these older applicants (70%) were single persons and 28% were two person households, while only 2% comprised 3 or more persons. Overall 83% of these older applicants required one bedroom properties. Around one quarter of the applicants received 0 points according to the common allocation policy and would be deemed not to be in housing need; while 7% had the maximum 200 points and would be considered to be in urgent housing need. In terms of accommodation types, the main requirement was for either amenity or sheltered housing for the elderly (around half the applicants); while 11% sought housing with support or wheelchair accommodation. The majority of older applicants would accept general needs accommodation as an option, with only 22% (82 in total) stating that general needs housing was NOT an option for them. Note: applicants can select multiple options

**Table 2.910: Older HOME Argyll Applicants by Type of Housing, 2020**

| All Older Applicants (65+) | Housing with Support | Wheelchair Housing | Amenity for Elderly | Sheltered for Elderly | General Needs |
|----------------------------|----------------------|--------------------|---------------------|-----------------------|---------------|
| 367                        | 42                   | 42                 | 165                 | 140                   | 285           |

Source: HOME Argyll Waiting List, April 2020 (Abritas report)

2.68.6 In terms of extreme housing need, i.e. homelessness, the number of homeless presentations to the Council per annum from persons aged 60+ has roughly doubled over the last five years from 17 to over 30. As a proportion of all homeless cases, older homeless presentations in 2020 were also significantly higher than in 2015. While numerically these figures may appear low, nevertheless this reflects a worrying trend in terms of increased homelessness among older persons.

**TABLE 2.101: Homeless Applicants aged 60+ & as a % of total applicants**

|                | 2015/2016 | 2016/2017 | 2017/2018 | 2018/2019 | 2019/2020 |
|----------------|-----------|-----------|-----------|-----------|-----------|
| All Applicants | 401       | 478       | 516       | 460       | 432       |
| Aged 60+       | 17        | 36        | 26        | 34        | 31        |
| % of total     | 4.2%      | 7.5%      | 5.0%      | 7.4%      | 7.2%      |

Source: Argyll & Bute Council, HL1 Records



2.68.7 The Scottish House Condition Survey (SHCS): 2016-2018 local authority report, published in 2020, includes analysis of dwelling characteristics in council areas by three household categories:

|          |   |
|----------|---|
| Older    | Small households made up of one or two residents, at least one of which is aged 65 or older.        |
| Families | Households which contain at least one child under the age of 16. Resident adults may be of any age. |
| Other    | These are all other households with adult residents (of any age) and no children.                   |

In summary, regarding the “Older” households in Argyll and Bute, the SHCS provides the following estimates:

**Table 2.112: Dwelling characteristics by Older Households**

| SHCS Key Indicators  | Argyll & Bute Total | Argyll & Bute Older Households | Scotland Older Households |
|--|---------------------|--------------------------------|---------------------------|
| % Dwellings which were built before 1945:  | 29%                 | 32%                            | 29%                       |
| % of Dwelling which are Flats:   | 29%                 | 32%                            | 32%                       |
| % of Dwellings with 3+ Bedrooms:   | 52%                 | 46%                            | 44%                       |
| % of Households where one or more of the members are Long Term Sick or Disabled (LTSD):                          | 43%                 | 63%                            | 60%                       |
| % of Households where one or more of the members are receiving care services:                                    | 5%                  | 9%                             | 12%                       |
| % of Dwellings with Adaptations:   | 16%                 | 24%                            | 30%                       |
| % Dwellings containing a LTSD individual who is restricted by the dwelling:                                      | 1%                  | 3%                             | 10%                       |
| % of Dwellings which are off the Gas Grid:   | 51%                 | 51%                            | 17%                       |
| Households in fuel poverty (000s)  | 12,000              | 6,000                          | 208,000                   |
| % of Households Fuel Poor  | 29%                 | 32%                            | 27%                       |
| % of Households Extreme Fuel Poor  | 17%                 | 17%                            | 14%                       |
| Households in Extreme Fuel Poverty (000s)  | 7,000               | 3,000                          | 110,000                   |
| Under-occupation<br>% of Dwellings which exceed the minimum Bedroom Standard requirements by 2 or more Bedrooms: | 38%                 | 45%                            | 42%                       |
| % of Dwellings with Urgent Disrepair:  | 25%                 | 20%                            | 25%                       |

**Source: SHCS: 2016-2018 local authority report, 2020**

2.68.8 The council carried out extensive primary research across Argyll and Bute in 2018 and 2019 into housing and support needs of the local population, which included detailed surveys with 1,490 older households (aged 65+). The following results were highlighted:

- The vast majority of these households, around 97%, were satisfied or very satisfied with their current home.
- Of the very small proportion who expressed dissatisfaction with their current home, the main reasons were poor condition or size (too big or too small); and heating costs.
- Almost 23% stated that they spend more than 10% of their income on heating and consequently would be deemed to be fuel poor.
- Only 3% said it was very or fairly difficult to afford their current home; the majority had no issue with affordability.
- Around 4% said they would *like* to move in the next couple of years, while less than 2% said they *needed* to move.
- Almost half of those wanting or needing to move, would prefer owner occupation; around 38% would seek a social rented property; and the rest would move in with family or friends. None of this cohort expressed interest in the private rented sector.
- The main reason for moving, by far, was to find a smaller home; with health issues/to be near specialist accommodation a relatively low consideration.
- Of those who were interested in moving, the majority preferred to move within Argyll and Bute (65%).
- Around 40% of the older households include someone with a long-term illness, health problem or disability.
- The main issues relate to mobility/physical health (26% of all older households). Less than 1% of older households included a person with mental health issues or dementia.
- Only around 3% of those with health issues/conditions stated that their current home did not meet their needs.
- There was a small unmet need for properties without stairs (less than 1%), and negligible unmet need for specialist or wheelchair accommodation
- In terms of unmet need for adaptations, less than 3% overall required some form of adaptation, with the main requirements being level access showers and handrails.
- Around 14% identified an unmet need for home care.
- Very few of the older households identified specialist housing for the elderly as a priority requirement in Argyll and Bute: their main concerns regarded more housing for sale at low cost (49%), and housing for young people/families (9%); however a proportion (12%) also stated that there was no need/already enough housing in the area.
- In terms of wider housing issues/concerns, recurring comments from older households related to the excess of second/holiday homes or vacant properties in the area; a need for more affordable housing in general; and infrastructure issues or access to services and amenities. Again, very few general comments referred to need for specialist accommodation for the elderly per se.

## 2.79 Dementia and Housing Need

2.79.1 Dementia is a term used to refer to a variety of illnesses and conditions which result in an impairment of brain function and a decline in intellectual functioning, personality changes and behaviour problems which disrupt independent living skills and social relationships. There are a number of types of dementia including Alzheimer's disease, vascular dementia, alcohol related brain damage (ARBD), and Creutzfeld-Jacob disease (CJD). Studies on the prevalence of dementia can present a confusing picture, partly because of different definitions, assessment strategies and population samples employed.

Nevertheless, it is widely recognized in many recent studies, at both UK-wide and Scottish levels, that the number of people with dementia is steadily increasing; and it is generally acknowledged that careful planning for the future is needed now to ensure that the right care and support is available for people. Housing will have a crucial contribution to make in this strategic planning process.

2.79.2 The report, **Projections of older people with dementia and costs of dementia care in the United Kingdom, 2019-2040** (Alzheimer's Society, CPEC/LSE, November 2019), provides the most up-to-date evaluation of the numbers of people with dementia in the UK; projections on numbers of people in the future; and the prevalence of dementia. In 2019, there were over 850,000 people with dementia in the UK, of which an estimated 66,000 were in Scotland. This represents a prevalence rate of 1 in every 14 of the population aged 65 years and over. If current trends continue and no action is taken, the number of people with dementia in the UK is forecast to increase to 1,000,000 by 2025 and 1,590,000 by 2040.

2.79.3 An alternative estimate produced in 2015 was reported by the Scottish Public Health Observatory (ScotPHO) highlighting the following key facts on dementia in Scotland:

- Around 64% of people affected receive a diagnosis.
- Around 3.5% of people affected are under the age of 65.
- As of 2015, up to 90,000 people in Scotland were affected by dementia.
- As the population ages, the number of people with dementia is steadily increasing as the risk of development increases with age.

Additional data by population characteristic, suggests:

- Gender - 67% of people with dementia are women, most likely because women live longer than men
- Age - dementia risk increases with age. Estimated prevalence rates increase from 0.1% of people under the age of 64 years to 15.9% of people aged over 80 years
- Learning disability - dementia rates are higher amongst people with a learning disability and onset is often younger. Up to 75% of people with Down's syndrome over 50 years of age develop dementia. For people with other causes of learning disability the prevalence of dementia is estimated

to be greater than 18% in those aged 65 years or over, approximately three times higher than in the general population.

- Ethnicity - the estimated prevalence rates for dementia in the black and ethnic minority community are similar to the rest of the population with the exception of early on-set (presenting before 65 years) and vascular dementia which have been found to be more prevalent.

2.79.4 Local estimates of dementia in Argyll and Bute were produced in the Health and Care and Housing Needs Assessment report, published by Argyll & Bute Public Health Information and Council Housing Services in 2018. This report stated that GP practices in Argyll and Bute had 801 registered patients with a diagnosis of dementia in 2015/16. This figure rose slightly to 817 in 2017/18 then fell to 794 in 2018/19. Using prevalence estimates for early and late onset dementia from Alzheimer's Society, it was estimated that 1,458 people were living in Argyll and Bute with dementia, of which 1,442 would be late onset dementia in people aged 60+. Alzheimer's Society estimates that 55.4% of people with late onset dementia have 'mild dementia', 32.1% have 'moderate dementia' and 12.5% have 'severe dementia', which would equate to around 643 people with severe or moderate dementia. It is likely that many people with mild dementia are undiagnosed and are therefore unlikely to be receiving support or planning for future housing needs. Estimated number of people with dementia and the number registered at GP practices are shown below.

**Table 2.123: Estimated Dementia prevalence, Argyll & Bute (2016)**

| Local Area<br>(NB. These are not contiguous with HMAs in all cases) | Estimated Dementia prevalence (2016) |                  |            |            |            | GP registered (2015-16) | Estimate of % diagnosed |
|---|--------------------------------------|------------------|------------|------------|------------|-------------------------|-------------------------|
|   | Total                                | Total late onset | Mild       | Moderate   | Severe     |                         |                         |
| Bute  | 130                                  | 129              | 72         | 41         | 16         | 84                      | 64%                     |
| Cowal   | 289                                  | 286              | 158        | 92         | 36         | 148                     | 51%                     |
| H&L   | 385                                  | 380              | 211        | 122        | 48         | 215                     | 56%                     |
| Islay, Jura   | 59                                   | 59               | 32         | 19         | 7          | 25                      | 42%                     |
| Kintyre   | 143                                  | 141              | 78         | 45         | 18         | 91                      | 64%                     |
| Oban, Lorn & Isles  | 242                                  | 239              | 132        | 77         | 30         | 163                     | 67%                     |
| Mid Argyll  | 147                                  | 145              | 80         | 46         | 18         | 49                      | 33%                     |
| Mull, Iona, Coll, Tiree   | 64                                   | 63               | 35         | 20         | 8          | 26                      | 41%                     |
| <b>Total</b>  | <b>1,458</b>                         | <b>1,442</b>     | <b>799</b> | <b>463</b> | <b>180</b> | <b>801</b>              | <b>55%</b>              |

Source: Argyll & Bute Health and Care Housing Needs Assessment, 2018

2.79.5 The number of people diagnosed with dementia seems low in Mid-Argyll, Mull, Iona, Coll and Tiree, Islay and Jura. Note that there are many reasons why this may be the case, including people with severe dementia leaving these small areas for appropriate care elsewhere.

2.79.6 Using the previous population projections, this report estimated that the number of people with dementia would increase, as shown in the table below. There may be 463 more people with dementia living in Argyll and

Bute in 2027 compared to 2017. However, if diagnosis rates remain around 55%, this may be 250 extra people diagnosed with dementia. It is likely that additional people with severe and moderate dementia will be diagnosed. This could be an additional 200 people with dementia living in Argyll and Bute. These people are likely to need specialist care and specialist housing provision, although this may be in their own homes.

**Table 2.134: Projected number of people with dementia, Argyll & Bute**

|                   |                 | Estimated number | Increase from 2017 |      |
|-------------------|-----------------|------------------|--------------------|------|
|                   |                 | 2017             | 2022               | 2027 |
| <b>All types</b>  | <b>Total</b>    | 1,538            | 210                | 461  |
|                   | <b>Total</b>    | 1,522            | 210                | 463  |
| <b>Late onset</b> | <b>Mild</b>     | 843              | 117                | 257  |
|                   | <b>Moderate</b> | 489              | 68                 | 149  |
|                   | <b>Severe</b>   | 190              | 26                 | 58   |

Source: Argyll & Bute Health and Care Housing Needs Assessment, 2018

2.79.7 Dementia has been a national priority in Scotland since 2007, and the most recent national dementia strategy (2017-2020) included 21 commitments. Building on progress made in the previous strategy, this strategy focuses on three key priorities which include

- continuing timely, person-centred and consistent treatment and care for people living with dementia and their carers, in all settings;
- more progress on the provision of support after diagnosis and throughout the disease, taking account of individual needs and circumstances;
- responding to the increasing proportion of older people developing dementia later in life, often alongside other chronic conditions.

2.79.8 In respect of housing and dementia, the following key documents provide practical and strategic recommendations:

- Housing and Dementia Framework: a practice framework to support Scotland's housing sector (Healthcare Improvement Scotland, October 2019)
- Dementia Pathways (CIH/Arneil Johnston, 2016)
- Being at Home: Housing and dementia in Scotland (Life Changes Trust/University of the West of Scotland, 2016)
- Dementia: Finding Housing Solutions (NHF et al, 2013)

The latter report, Dementia: Finding Housing Solutions, states that overall a third of people with dementia live in care homes. Many people with dementia will live in their own homes, some alone, and many will wish to stay in their own home. Statistics for care home residents in Argyll and Bute with dementia are summarised in Section 66, Template 45, of this paper. Early diagnosis and adaptations can support people with dementia to live in their own homes.

2.79.9 The report recommends three ways in which the HSCP and Housing colleagues can improve the experiences of those living with dementia:

- Recognise the role of housing in improving the lives of people with Dementia
- Create partnerships to integrate housing, care and support
- Work with housing providers to drive up the diagnosis rates of dementia

The report also lists top ten suggested housing adaptations to support people living with dementia:

- Double the usual levels of lighting in the home.
- Pay attention to acoustics and reduce noise pollution.
- Ensure there is good signage mounted low enough for poor eyesight.
- Use contrast of colour or tone to make switches and objects easily visible.
- Use objects or pictures rather than colours to differentiate different parts of the building.
- Ensure that people can see important rooms such as the toilet, that furniture and fittings give strong clues to the purpose of the room and that there are clear signs.
- Ensure that kitchens and bathrooms are easy to understand.
- Avoid new designs for things such as taps or kettles.
- Place illuminated clocks in each room indicating whether it is a.m. or p.m.
- All doors should be visible on entering the dwelling.
- Cupboards should be glass fronted or open.

2.79.10 The 2019 “Housing and Dementia Framework” report published by Healthcare Improvement Scotland, the CIH and Alzheimer Scotland, highlights 5 key requirements for dementia sufferers and their carers:

- Appropriate and timely housing advice
- Homes that are adapted or designed to suit individual needs and support independent living at home
- Engagement and direct involvement in decisions that matter to the individual
- Awareness of housing options and support to plan for the future
- Support to live safely and independently at home and to participate in the life of the local community.

Essentially, this requires the right advice, the right home, and the right support for all those living with dementia.

The particular models of accommodation, care and support required to meet the needs of persons with dementia will include bespoke, supported housing and care homes; accessible and adapted properties; and/or support provision within their existing home. These requirements are incorporated in the relevant specialist provision templates that follow in this paper.

## 2.85 Children and Families – Housing and Support Needs

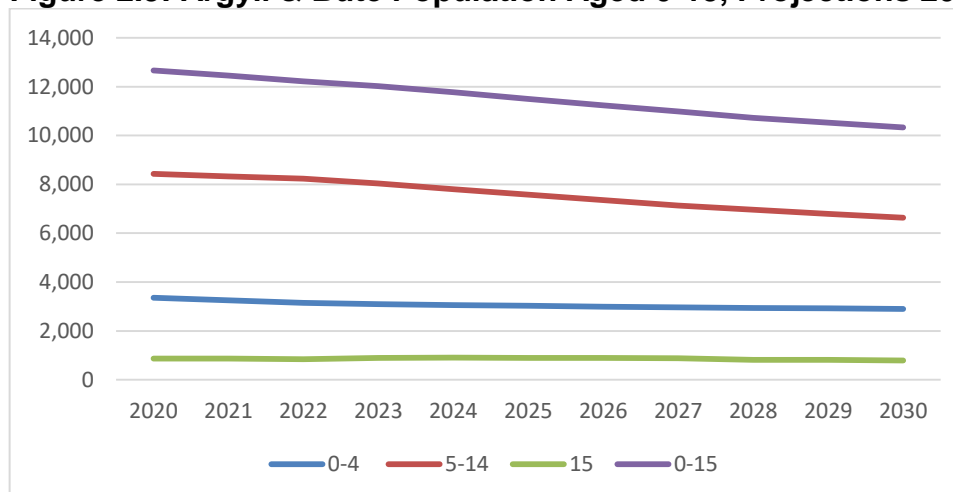
2.85.1 The housing sector has an important role to play in tackling child poverty, which is a primary objective for the Scottish Government and the local authority and its partners in Argyll & Bute. The strategic framework for this issue is set out in the following key documents (among others):-

- Child Poverty (Scotland) Act 2017
- Fairer Scotland Action Plan, Scottish Government, 2019
- Child Poverty Action Plan, NHS Highland/Argyll & Bute Council, 2019
- Every child, every chance: the tackling child poverty delivery plan 2018-2022, Scottish Government, 2018
- Children’s & young people’s service plan 2017-2020, Argyll & Bute Council / NHS Highland
- Young people’s future health and the private rented sector, The Health Foundation/CIH, 2019

Dependent children and young people are a priority concern in terms of strategic planning for the future; and their housing and support needs are a significant element of the HNDA process. According to the definition set out in Scotland’s Census, a “dependent child” is any person aged 0 to 15 in a household (whether or not in a family) or a person aged 16 to 18 who is in full-time education and living in a family with his or her parent(s) or grandparent(s). ... Children in couple families need not belong to both members of the couple.

2.85.2 Argyll and Bute (along with the cities of Aberdeen and Edinburgh) has the lowest proportion of children aged under 16 in Scotland (15% of the total population in the area). In 2020 this group was estimated at 12,665 and over the next decade this number is projected to decline by 19% to 10,326. The biggest decline will be in children aged 5-14 (-21%), while those under 5 will decline by 14%, and those aged 15 will decline by around 10%.

**Figure 2.3: Argyll & Bute Population Aged 0-15, Projections 2020-2030**



Source: NRS 2018-based Population Projections, 2020

2.85.3 The population of children aged under 16 varies across local HMAs in Argyll & Bute, and future projections are also varied, with Coll & Tiree set to see a decline of 52% while Mull & Iona appears to see only 3% decline in this age band between 2020 and 2030.

**Table 2.145: Population Projections, 0-15 cohort, by HMA, 2020-2030**

| HMA                    | 2001   | 2020   | 2026   | 2030   | % Change 2020-2030 |
|------------------------|--------|--------|--------|--------|--------------------|
| Argyll & Bute          | 17,052 | 12,665 | 11,240 | 10,326 | -18.5%             |
| Bute                   | 1,271  | 814    | 682    | 587    | -27.9%             |
| Coll & Tiree           | 174    | 132    | 93     | 63     | -52.3%             |
| Cowal                  | 2,718  | 1,934  | 1,686  | 1,493  | -22.8%             |
| Helensburgh & Lomond   | 5,139  | 3,778  | 3,259  | 2,983  | -21.0%             |
| Islay, Jura & Colonsay | 746    | 465    | 422    | 406    | -12.7%             |
| Kintyre                | 1,641  | 1,151  | 1,026  | 897    | -22.1%             |
| Lorn                   | 3,021  | 2,517  | 2,300  | 2,198  | -12.7%             |
| Mid Argyll             | 1,839  | 1,418  | 1,315  | 1,239  | -12.6%             |
| Mull & Iona            | 503    | 474    | 457    | 459    | -3.2%              |

Source: IS small area pop projections, July 2020

2.85.4 The cohort of children aged 0-15 as a proportion of the total population of the relevant HMA is also, unsurprisingly, projected to decline over the next decade. In Argyll and Bute in 2020, this cohort made up less than 15% of the total population and by 2030 it is estimated to constitute less than 13%. Currently Coll & Tiree has the largest proportion of children, almost 18% of the total population in that HMA, but by 2030 it will have the lowest proportion (10%) if nothing changes in the interim.

**Table 2.156: The 0-15 cohort as a % of total HMA population, 2001-2030**

| HMA                    | 2001  | 2020  | 2026  | 2030  |
|------------------------|-------|-------|-------|-------|
| Argyll & Bute          | 18.7% | 14.8% | 13.7% | 12.9% |
| Bute                   | 17.6% | 13.6% | 12.3% | 11.1% |
| Coll & Tiree           | 18.7% | 17.5% | 14.0% | 10.4% |
| Cowal                  | 17.8% | 13.8% | 12.7% | 11.7% |
| Helensburgh & Lomond   | 18.5% | 14.7% | 13.0% | 12.2% |
| Islay, Jura & Colonsay | 19.8% | 13.9% | 13.0% | 12.8% |
| Kintyre                | 19.8% | 15.7% | 14.8% | 13.5% |
| Lorn                   | 19.6% | 15.7% | 14.7% | 14.3% |
| Mid Argyll             | 18.9% | 15.5% | 15.8% | 14.3% |
| Mull & Iona            | 17.8% | 15.5% | 15.0% | 15.0% |

Source: IS small area pop projections, July 2020



2.85.56 In terms of housing need, the HOMEArgyll waiting list in 2020 recorded over 800 households with children under the age of 16. This equates to around one third of all active applicants; and amounts to over 1,500 persons aged 0-15. The main concentration of households with children on the RSL waiting list are in Lorn (254), Helensburgh & Lomond (160), and Cowal (137); however there are a number of these households across all HMAs, including the islands. The most common cause of housing need amongst this household category is “housing related health problem”, which makes up around 17% of this group; and “unstable and insecure housing circumstances”, at 10%; however there were also at least 8% of households with children under 16 on the waiting list that were subject to domestic abuse.

2.85.67 During 2019/20, out of 814 applicants rehoused by the RSLs in Argyll and Bute, 289 included children under the age of 16 which amounts to 36% of all allocations that year. This is proportionately in line with the percentage of waiting list applicants that include children aged under 16 (32% of all active applicants).

2.85.78 Looking specifically at homelessness in Argyll and Bute, in relation to children, in 2019/20 there were 76 single parent households (17% of the total homeless cases that year), and 21 couples with children (4.8% of the total). 16 applicants were in the category of “looked after children”, leaving care. At the year end, in March 2020, there were 117 registered homeless households in temporary accommodation, and of these 24 (20%) included children or pregnant women, totalling 55 children in all.

2.85.89 Property condition and the housing environment can have a significant impact on the life experiences, health and well-being of children, young people and their families; and the Scottish House Condition Survey provides evidence of key indicators by certain household types, including families. The 2020 Report reveals that:

- 43% of families in Argyll & Bute occupy dwellings that are off the gas grid;
- 25% of families in Argyll & Bute are in Fuel Poverty and 15% are in extreme fuel poverty;
- 47% of families in Argyll & Bute occupy dwellings that fail the Scottish Housing Quality Standard (SHQS) compared to only 38% in Scotland;
- 50% of families occupy properties with critical elements of disrepair and 28% of families are in homes with urgent disrepair.

### **3.0 Template 1: Accessible and Adapted Housing**

#### **3.1 National Policies**

There are a range of relevant legislative and policy strands that will influence and direct specialist housing provision for particular needs groups over the next planning period. In addition to the key, overarching documents on equalities and human rights legislation and guidance; the integrated health and social care framework, and the Public Health Scotland agenda as listed at section 2.1 of this paper, these include:

- Planning ahead: living at home. A short paper from the Adaptations Working Group, 2013.
- Adapting for Change: Evaluation, Scottish Government, 2017.
- Our Place, Our Space, Independent Living in Scotland, Annual Reports.
- Age, Home & Community: Next Phase, Scottish Government, 2018
- Technology Enabled Care in Housing Charter, Scottish Government, 2019

3.1.1 The main thrust of national policy in this area remains to eliminate unlawful discrimination, advance equality of opportunity and foster good relations; to deliver high quality services; and to ensure that everyone is able to live longer healthier lives at home or in a homely setting, with a focus on prevention, anticipation and supported self-management. Specifically, in relation to adaptations, the aim is to move towards a tenure-blind approach that is co-ordinated and consistent across social rented and private housing sectors.

#### **3.2 Local Policy**

Argyll and Bute Council, the local registered social landlords, and the local Health & Social Care Partnership, along with other key partners have developed a range of local policies, plans and strategies to deliver equalities and services for particular needs groups. In addition to the existing Local Housing Strategy and private sector Scheme of Assistance, these include the revised Housing Contribution Statement embedded in the Health & Social Care Partnership's Joint Strategy 2019/20-2021/22 (published in 2019).

#### **3.3 Property Needs**

In Argyll and Bute there are a range of property types that are commonly defined as accessible housing. These include amenity disabled and amenity elderly accommodation; ambulant disabled; medium dependency; and other specially adapted properties. Some ground floor accessible mainstream housing may also be considered within this category; and generally most new build in the social rented sector will be designed to lifetime/varying needs standards. Wheelchair housing, extra-care housing, sheltered and very sheltered accommodation, and other forms of supported housing are dealt with separately in the following templates.

3.3.1 Adaptations to properties can include both large and small-scale provision; ranging from minor modifications such as grab rails, up to major property extensions or remodelling work. Common adaptations can include: low level appliances, stair lifts, wet rooms, adapted doorbells, smoke alarms and so on. Ensuring the right provision can reduce the need for personal care services, as well as the need for admission to a hospital/care home, or the move to a purpose-designed property. Currently, the funding streams for adaptations remain tenure-specific and there are variations in the processes for delivering adaptations to RSL or private sector properties. The Council provides mandatory and discretionary grant assistance for adaptations in the private sector, primarily delivered via the Care and Repair service; whereas individual RSL adaptations are funded via a separate, central, Scottish Government budget, although individual RSLs will also fund smaller adaptations from their own budgets. Historically, potential constraints on the national budget for RSL adaptations have been highlighted in Argyll and Bute however more recently local Occupational Therapists have also reported potential funding shortfalls leading to delays in adapting private sector properties.

### **3.4 Key Client Groups**

Accessible and adapted housing will be suitable for

- People across all age groups whose current accommodation does not meet their physical/ health needs but who do not have high dependency/ complex needs requiring significant levels of care or support.
- People with limited mobility/dexterity and low to medium dependency health conditions, but who are otherwise able to remain in their mainstream housing, with or without care or support.

### **3.5 Evidence**

3.5.1 The RSL sector in Argyll and Bute currently provides a range of accessible and/or adapted accommodation suitable for those with low to medium needs. The following categories/definitions are used by local RSLs however there are some overlaps and inconsistencies across categories and landlords: Amenity, Ambulant Disabled, Medium Dependency, Adapted and Other Specially Adapted. Although, in general, “extra care” housing in Argyll and Bute does not equate to the definition used by the Scottish Government (i.e. similar in attribute to “very sheltered” housing for higher dependency, complex needs) the majority of this stock is included in Template 4 in line with the terminology.

3.5.2 There has been a general increase in the number of accessible and adapted properties in recent years, and this is set to continue over the next five to ten years. Around 725 (8.4%) of the total RSL stock in this authority can be defined as accessible and around 3% (237) received some form of adaptation in 2019/20. RSLs provide details of properties receiving Scottish Government

assistance for adaptations (stage 1 & 2 grant funding for new builds, and stage 3 grant funding for adaptations to existing stock), however further work is required to collate and validate the total RSL adapted stock figures, and also to take account of properties where adaptations have been removed, often at significant cost. The following tables set out the distribution of the “accessible” stock, primarily, across the housing market areas within Argyll and Bute (with some but by no means all adapted units).

**TABLE 3.1: Accessible RSL Stock by (RSL) category and HMA, 2020**

| HMA                    | Amenity | Ambulant disabled | Medium Dependency | Other specially adapted | Totals |
|------------------------|---------|-------------------|-------------------|-------------------------|--------|
| Bute                   | 78      | 8                 | 13                | 36                      | 135    |
| Coll & Tiree           | 10      | -                 | 0                 | 0                       | 10     |
| Cowal                  | 59      | 15                | 0                 | 35                      | 109    |
| Helensburgh & Lomond   | 190     | 14                | 0                 | 4                       | 208    |
| Islay, Jura & Colonsay | 4       | 6                 | 0                 | 0                       | 10     |
| Kintyre                | 73      | 2                 | 33                | 30                      | 138    |
| Lorn                   | 28      | 11                | 0                 | 1                       | 40     |
| Mid Argyll             | 30      | 9                 | 8                 | 20                      | 67     |
| Mull & Iona            | 4       | 3                 | 1                 | 0                       | 8      |
| A&B Totals             | 476     | 68                | 55                | 126                     | 725    |

Source: RSL Annual Returns, 2020

3.5.3 Around 29% of the accessible stock is located in Helensburgh & Lomond while Bute and Kintyre both have 19% of this type of provision. The proportion in Lorn appears relatively low at only 6%. The provision of adaptations, however, shows a different pattern of distribution across the authority area, with Lorn receiving the highest number of installations that year.

**TABLE 3.2: RSL Properties Adapted 2019/20 by HMA**

| HMA          | ACHA | Bield | Blackwood | DHA | FYNE | Key | Link | WHHA | Totals |
|--------------|------|-------|-----------|-----|------|-----|------|------|--------|
| Bute         | 11   | 0     | 0         | 0   | 9    | 0   | 0    | 0    | 20     |
| Coll & Tiree | 0    | 0     | 0         | 0   | 0    | 0   | 0    | 0    | 0      |
| Cowal        | 22   | 5     | 0         | 0   | 12   | 0   | 0    | 0    | 39     |
| H&L          | 20   | 3     | 0         | 9   | 0    | 1   | 2    | 0    | 35     |
| I, J & C     | 23   | 0     | 0         | 0   | 0    | 0   | 0    | 5    | 28     |
| Kintyre      | 30   | 0     | 0         | 0   | 9    | 0   | 0    | 0    | 39     |
| Lorn         | 34   | 0     | 3         | 0   | 0    | 0   | 0    | 11   | 48     |
| Mid Argyll   | 26   | 0     | 0         | 0   | 9    | 0   | 0    | 0    | 35     |
| Mull & Iona  | 0    | 0     | 0         | 0   | 0    | 0   | 0    | 0    | 0      |
| A&B Total    | 166  | 8     | 3         | 9   | 39   | 1   | 2    | 16   | 244    |

Source: RSL Annual returns/ Scottish Government Annual Statistics 2020

NB. Trust housing association also adapted 5 properties in Argyll and Bute in 2019/20, location not specified.

Adaptations data has been collated from annual RSL returns to council and merged with a statistical report supplied by the Scottish Government. There are minor variations in data sources as some RSLs will provide minor adaptations themselves, without Scottish Government funding.

In 2019/20, Scottish Government funding assisted the installation of 311 individual adaptations, of which total internal safety rails (36%) and showers/baths (32%) made up over two thirds.

**Table 3.3: Type of RSL (Stage 3) Adaptations, Argyll & Bute, 2019/20**

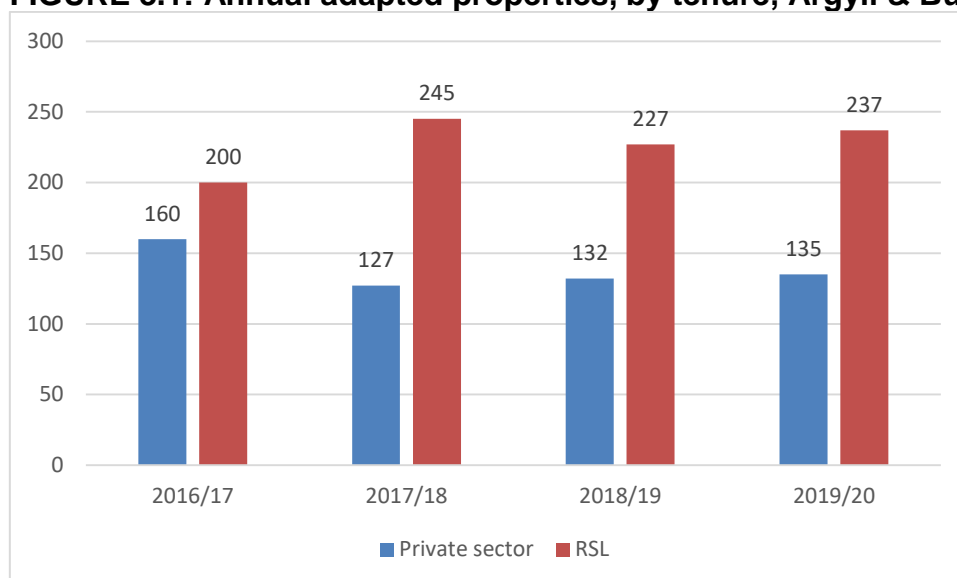
| Adaptation Type   | No. of Adaptations |
|---|--------------------|
| Alterations – Doors (Internal)  | 19                 |
| Alterations – Electrics / Plumbing (Internal)                         | 3                  |
| Creation of hard standings/other extensive external alterations (Maj) | 1                  |
| Extension/Alterations: Bedroom/Bathroom (Major)                       | 3                  |
| Installations – Door Access (Internal)                                | 4                  |
| Installations – Safety Rails (Internal)                               | 112                |
| Installations – Showers / Baths (Internal)                            | 99                 |
| Installations – Stair lifts / Hoists (Internal)                       | 9                  |
| Installations – Surfaces – Non Slip/ Tactile (Internal)               | 4                  |
| Paths / Steps / Paving (External)                                     | 16                 |
| Safety Rails (External)   | 41                 |
| <b>TOTAL</b>  | <b>311</b>         |

Source: Scottish Government Statistical Report, 2020

3.5.4 The HOME Argyll waiting list in 2020 included 237 applicants for amenity housing of which 119 defined themselves as disabled. In total, there were 667 disabled applicants on the list (almost 28% of the total). Over the year 2019/20, there were around 54 lets to some form of amenity/accessible housing in the RSL sector (including Bield and Trust housing associations). Overall, therefore the ratio of applicants to available lets for this type of provision is approximately 4:1. Only 9% of the disabled waiting list applicants would NOT accept mainstream housing as an option. Around 190 applicants were actively seeking an adapted property to improve their situation.

3.5.5 The following table summarises the provision of grant assisted adaptations by tenure over the last 4 years. On average, there have been around 366 individual properties adapted per annum, and the four-year total is over 1,460. Many of these properties will have received funding from the Private Sector Housing Grant (around £2.9m in total); and the Scottish Government has invested around £2.3m in RSL sector adaptations over the same period. The figure overleaf summarises the number of properties in receipt of grant assistance annually, by tenure, between 2016/17 and 2019/20.

**FIGURE 3.1: Annual adapted properties, by tenure, Argyll & Bute**



Source: RSL Annual Returns & Council PSHG Records

3.5.6 Overall national estimates of adapted properties by local authority area are provided in the Scottish House Condition Survey (SHCS). The latest data was published in 2020 and covers the three year period to 2018. This suggests that 16% of the housing stock in Argyll and Bute is adapted, compared to 21% for Scotland as a whole. The largest proportions of adapted properties tend to be in flats (21%) while the prevalence by property size is fairly evenly split between smaller (1 or 2 bedrooms) and larger (3+ bedroom) properties.

**TABLE 3.4: Dwellings with Adaptations by dwelling characteristics, 2018**

| Local Authority | % of LA | Age of Dwelling |           | House or Flat |      | Number of Bedrooms |     |
|-----------------|---------|-----------------|-----------|---------------|------|--------------------|-----|
|                 |         | Pre-1945        | Post 1945 | House         | Flat | 2 or fewer         | 3+  |
| Argyll and Bute | 16%     | 18%             | 15%       | 14%           | 21%  | 16%                | 15% |
| Scotland        | 21%     | 18%             | 22%       | 19%           | 24%  | 25%                | 16% |

Source: SHCS, Local Authority Analysis 2020

**TABLE 3.5: Dwellings with Adaptations by Household Attribute, 2018**

| Local Authority | Tenure         |                |                | Household Type |          |       |
|-----------------|----------------|----------------|----------------|----------------|----------|-------|
|                 | Owner-occupied | Social Housing | Private Rented | Older          | Families | Other |
| Argyll and Bute | 11%            | 32%            | *              | 24%            | 8%       | 11%   |
| Scotland        | 17%            | 32%            | 16%            | 30%            | 12%      | 19%   |

Source: SHCS, Local Authority Analysis 2020

3.5.7 According to these figures, the RSL sector has by far the largest proportion of adapted stock in Argyll and Bute but it should be noted that the SHCS sampling did not allow for robust disaggregation by private rented tenure. While the proportion of RSL adapted properties equates to the national picture (both 32%), the owner occupied sector compares less favourably with the national figures (only 11% in Argyll & Bute compared to 17% in Scotland). Across all household types, Argyll & Bute is lower than the national average.

### 3.5.8 Need/Demand for adaptations

The SHCS 2016-18 sample did not provide sufficient numbers for analysis of dwellings that require adaptations in Argyll and Bute. Dedicated research carried out by the Council over recent years does suggest that there are likely to be levels of unmet need for adaptations across the authority area, however, in general figures remain low which is reflected in the RSL waiting list data. The vast majority of households do not require any form of adaptation to live independently in their current home. This might appear to be contrary to anecdotal assumptions and common perceptions based on the increasing older population in Argyll and Bute. In total, the HNDA Household Survey carried out in 2019 found only 44 out of 2, 650 households required any form of adaptation, less than 2%. If extrapolated across the population as a whole, this would equate to around 710 households in total. The main unmet need is for level access showers and handrails.

**Table 3.6: Type of Adaptation Required, Argyll & Bute 2019**

| Type of Adaptation<br>(survey numbers unweighted) | a) Have | b) Need but don't have | c) Do not need |
|---|---------|------------------------|----------------|
| Door widening                                     | 27      | 4                      | 679            |
| Ramps   | 58      | 5                      | 647            |
| Stair lift  | 21      | 7                      | 682            |
| Through Floor Lift                                | 5       | 0                      | 705            |
| Accommodation with emergency/alarm call system    | 78      | 2                      | 630            |
| Door entry system                                 | 34      | 2                      | 674            |
| Relocated light switches & power points           | 12      | 2                      | 696            |
| Equipment to help get in & out of bed             | 30      | 5                      | 675            |
| Handrails   | 266     | 15                     | 429            |
| Hoists  | 15      | 0                      | 695            |
| Bath/shower seat                                  | 175     | 10                     | 525            |
| Level access shower                               | 185     | 25                     | 500            |
| Adapted toilet seat                               | 97      | 5                      | 608            |
| Adapted kitchen                                   | 4       | 2                      | 704            |
| Special furniture                                 | 10      | 1                      | 699            |

Source: Argyll & Bute HNDA Household Survey, Research Resource, 2019

- 3.5.9 When asked if they had taken any action to access the aids/ adaptations currently needed, over a third (34%) reported they have taken no action: 12 because they require information and advice, and 3 because it is not possible to adapt their current home. However, over half (52%) of those requiring adaptations have taken action to secure them, most commonly:
- Plan to install them myself (14%)
  - Contacted Occupational Therapist (13%)
  - Contacted Social Services (11%)
  - Contacted G.P. (11%)
  - Contacted local Housing office (5%)

3.5.10 It is difficult to match the current supply of aids and adaptations with those who are seeking housing and require them. In the private sector there is little way to control the purchase of properties where adaptations have been made but will not be required; the purchaser will bear the costs of removal of these items or will leave them in situ. In the RSL sector there is more scope to allocate properties which currently have adaptations to those who need them. This is however still a difficult task as the likelihood of matching an applicant with a home which contains the exact adaptations they require will be limited. A key recommendation from the HNDA research and joint work undertaken by the council, RSLs and the local HSCP, was the creation of an Adaptations Database to record all aids and adaptations installed in an RSL property. This data should then be used to inform future relets.

### **3.6 External stakeholder consultation and engagement**

- 3.6.1 The Argyll & Bute HNDA Household Surveys (2018/2019) included particular needs issues and involved almost 3,500 interviews, as well as telephone and online consultation with representatives of local and national agencies or service providers; plus dedicated focus groups with professional specialists and particular client groups. Subsequent consultation in 2019/20, involved engagement with wheelchair users, gypsy/travellers, armed forces/veterans and service providers/ representatives. Full details are set out in the relevant HNDA Technical Papers.
- 3.6.2 The Argyll and Bute Strategic Housing Forum continues to involve engagement across a range of partners, including Health and Social Care; while Occupational Therapists have specifically raised the issue of adaptations in the RSL sector on that agenda as well as at the SHIP Operational Group. The creation of a dedicated Housing OT post in recent years has facilitated and focused the work of local area Housing & Health Care groups to identify and assess local needs.
- 3.6.3 A dedicated short-life, joint working group was convened for council, RSL and HSCP staff to review need and demand for a range of specialist housing models, resulting in the production of the joint Housing, Health & Care Needs Assessment in 2018. Thereafter, a cross-sector conference was held to consider the results and agree an action plan to underpin the Housing Contribution Statement and HNDA. Thereafter, a key work strand of the HSCP explored Housing and care homes provision across Argyll & Bute.
- 3.6.4 All of this activity has helped to inform the HNDA evidence base and highlight issues for consideration in the development of the next LHS. The evidence and issues were further reviewed at an online LHS Stakeholder conference in November 2020; a Housing Services staff Review day in December 2020; and at option appraisal sessions in February 2021.



## 4.0 Template 2: Wheelchair Accessible Housing

For detailed analysis of the evidence regarding the housing and support needs of wheelchair users, and the extensive primary engagement and consultation carried out with this group, see HNSA Technical Supporting Paper 0811: Disabled people and wheelchair users housing needs (Housing Services, 2021), which is available on the council website. The following section provides a brief summary of the key findings of that paper.

### 4.1 National policies

In addition to the overarching policies outlined previously in this paper, the following are of specific relevance for the provision of wheelchair housing:-

- **Mind the Step**: an estimation of housing need among wheelchair users in Scotland, CIH/Horizon Housing, 2013
- **Still Minding the Step?**, Horizon Housing, 2018
- **Scottish Building Standards and Housing for Varying Needs**, Scottish Government, 1998
- **Our place, our space** - report published following the Disabled People's Housing Summit in 2017
- **Guidance for setting of Local Housing Strategy target to support the Delivery of more wheelchair accessible housing**, Scottish Government, 2019
- **Adjustments to Common Parts Regulations**, Scottish Government, 2019 - this legislation came into force in February 2020
- **Making the connection: Guide to assessing the housing related needs of older and disabled people**, Gillian Young/Newhaven, 2015
- **Housing for Disabled People**, EHRC, 2018

### 4.2 Local policies

- **Argyll & Bute Strategic Housing Investment Plan 2021/22 – 2025/26**, Argyll & Bute Council, 2020
- **Argyll & Bute Local Housing Strategy, 2016-2021**, Argyll & Bute Council, 2016

### 4.3 Property needs

There is a potential degree of overlap or crossover between wheelchair housing and the type of provision set out in Template 1 (accessible and adapted) and also with some forms of supported accommodation as defined in Template 4. In this section, wheelchair housing provision refers specifically to the definition of homes suitable for wheelchair users to live in, as set out in Section 3 of the guidance on the "Housing for Varying Needs Standard". This will include, among others, features such as: accessible, low level appliances, doorbell/entry system, and primary heating controls; wider door openings;

barrier-free bathroom/ shower access and general barrier-free internal circulation; outside space with wider entrance and suitable surfaces.

#### 4.4 Key client groups

The focus here is on provision for all wheelchair users within Argyll and Bute, including families with disabled children; young adults; disabled parents with dependent children; adults who acquire a disability, either suddenly or over time, and use a wheelchair as a result of an accident, incident or illness; and older persons. Purpose-designed, fully habitable wheelchair accommodation is suitable for individuals who use a wheelchair all the time or occasionally, both in the home and externally. Some wheelchair users, or other persons reliant on equipment such as wheeled walking frames indoors, or mobility scooters externally, may also benefit from this form of accommodation, however other models of housing may be more appropriate to their specific needs, and this is addressed in the separate templates in this paper.

#### 4.5 Evidence

4.5.1 The HNDA Technical Supporting Paper 1108: Disabled People and Wheelchair Users' Housing Needs, sets out a range of estimates and possible prevalence rates for wheelchair use in Argyll and Bute based on various national and local studies and data sources; however, as a simple, indicative, baseline estimate the Health and Care and Housing Needs Assessment (Argyll & Bute PHI and the council Housing Services, 2018) suggests that there were around 1,325 residents with wheelchairs in the local authority area in 2017, and there are around 280 new wheelchair users each year. (The report also notes that a proportion of these persons have more than one wheelchair, so the number of wheelchairs will exceed the number of individual users.) Despite the official projected population decline for Argyll and Bute, given that use of wheelchairs is linked to age and that the elderly age cohorts will increase over time, it is estimated that wheelchair use will also increase in the future, potentially by around 240 between 2017 and 2027.

4.5.2 The following table provides an estimated age profile of wheelchair users in Argyll and Bute. Fifty-five percent are aged 75+ and a further 17% are aged 65-74. Only 28% are aged under 65.

**Table 4.1: Number of people with wheelchairs by age band, Argyll & Bute**

|               | AGE BAND OF WHEELCHAIR USERS |       |       |       |       |       |     | Total |
|---------------|------------------------------|-------|-------|-------|-------|-------|-----|-------|
|               | 0-15                         | 16-24 | 25-44 | 45-64 | 65-74 | 75-84 | 85+ |       |
| Nos of People | 46                           | 20    | 60    | 243   | 228   | 334   | 393 | 1,324 |
| % of Total    | 3%                           | 2%    | 5%    | 18%   | 17%   | 25%   | 30% | 100%  |

Source: Health and Care and Housing Needs Assessment, Argyll & Bute PHI, 2018

4.5.3 Assessing the provision of wheelchair accommodation in the RSL sector is problematic, given the range of definitions and terminology employed across

individual landlords, and the overlap between the categories outlined in these HNDA templates. In addition, there is a distinction between purpose-built housing and existing stock that has been adapted for wheelchair access or use. There is even greater difficulty in providing accurate estimates for the private sector. More detailed analysis and monitoring of this type of accommodation, therefore, will continue to be a priority over the life of the next LHS. For current purposes, only those properties specifically designated as “wheelchair housing” by RSLs in their annual statistical returns to the council will be considered in this particular template.

- 4.5.3 RSL annual returns for 2020 indicate that only around 60 properties are designated as wheelchair housing, excluding those that have been adapted for wheelchair access. This would amount to less than 1% of total stock, which is below recommended national targets of 5% of all stock. Mid Argyll, Lorn and Mull appear to have the highest number of RSL wheelchair units, but there is a degree of provision across all HMAs with the exception of Coll & Tiree. However, more or less 100% of all RSL new builds do meet the Housing for Varying Need standards and should therefore be flexible enough and suitable to meet the needs of wheelchair users if required. Over the last five years this amounts to around 460 new homes. In addition, many wheelchair users are occupying suitably adapted and/or accessible properties that meet their needs satisfactorily. On average, RSLs have re-let 5 wheelchair properties per annum in recent years.
- 4.5.4 The HOME Argyll waiting list in 2020 contained 94 active applicants who use wheelchairs; with 29 stating they use their wheelchair all the time and 57 stating only sometimes. In addition, 36 applicants said they use their wheelchair both inside and outside while 42 said they use it outside only. (Sixteen applicants did not complete this section of their application.) However only 58 of these were seeking wheelchair accommodation, and only 24 would not also accept mainstream housing. Seven of these applicants could remain in their current property if it was suitably adapted; therefore the majority require to be rehoused. Seventy-seven state that their medical condition is affected by their current housing circumstances.
- 4.5.5 In terms of household age, 61 of the primary applicants are aged under 60; and 33 are aged 65+ but this may not directly reflect the profile of the wheelchair users themselves in households comprising more than one person. Five of the wheelchair applicants were on the homeless list, 27 were on the transfer list, and the majority, 62, were on the general waiting list.
- 4.5.6 Just under a third of these applicants would prefer Lorn; while 21% would prefer Helensburgh & Lomond; and 19% prefer Cowal. However, there is a degree of expressed need across all HMAs, albeit actual numbers are often low.

- 4.5.7 The primary HNDA research carried out in 2018/19 across the wider population of Argyll & Bute did not find significant levels of unmet need for wheelchair accommodation either. Less than 1% of respondents required purpose designed wheelchair properties or access/ramp adaptations to their current homes (0.3% of those with a limiting long term illness or health condition). The additional bespoke research on wheelchair users and disabled persons in Argyll & Bute, outlined in HNDA Technical Supporting Paper 0811, focused on households with expressed needs, and this provided valuable qualitative data on local need and demand, but again the overall numbers were low and findings cannot be extrapolated across the population as a whole. In general the conclusion is that unmet need for wheelchair housing is not excessive, and that national targets for 10% of all new build, across all tenures, to meet the full wheelchair standards appears disproportionate. A significant proportion of wheelchair users are satisfactorily housed or can have their particular needs met in situ, although a proportion of older properties are not suitable for adaptation. Many households in the private sector can also afford to fund their own housing or support solution without recourse to subsidised new build solutions.
- 4.5.8 Nevertheless, while a significant proportion of need can be addressed by the provision of various adaptations and turnover in existing stock, there is likely to be a requirement for some new, purpose-built provision in the future. A provisional estimate, triangulating available data on wheelchair use, current need and potential demand minus supply and alternative in situ solutions, suggests that between 30-80 households with a wheelchair user could have an unmet housing need that would require a new build solution over the next 5 years.

#### **4.6 Stakeholder consultation and engagement**

The HNDA Household Surveys in 2018/19 included individual interviews with a small number of current wheelchair users across Argyll and Bute within the wider sample of households that were consulted. Council Housing Services and the Housing OT carried out targeted consultation and stakeholder engagement with this client group and their representatives in 2019/20 throughout Argyll & Bute. In addition, service providers, including RSLs, Care & Repair, HSCP and Occupational Therapists, have also been consulted. For full details of the extensive consultation and findings see HNDA Technical Supporting Paper 1108.

## 5.0 Template 3: Non-permanent housing

### 5.1 National policies

- **The Homelessness: Code of Guidance, Scottish Government, 2019** included for the first time advisory temporary accommodation standards providing councils with a clear steer on provision across property types and tenures. A legally enforceable standards framework is being developed.
- **The Homeless Persons (Unsuitable Accommodation) (Scotland) Order 2004** required that no children or pregnant women should be housed in B&B-type accommodation for more than a fortnight. Following consultation in 2019 on improving standards in temporary accommodation, this Order has been extended to all homeless households from May 2021. Argyll and Bute Council has successfully avoided breaching this order for several years now.
- **The Homeless Persons (Provision of Non-permanent Accommodation) (Scotland) Regulations 2010** relates to Housing Support and replaced previous “Interim” accommodation legislation – i.e. when a person is unable to sustain a permanent tenancy because of high support needs then they can be accommodated under these rules.
- **Guidance on section 5 of the 2001 Housing Act** sets out the reasonable time period for RSLs to satisfy a council's request to provide temporary accommodation, and what constitutes good reason for not doing so.

### 5.2 Local policies

Local policy continues to be to secure non-B&B accommodation which is cost-effective (for both client and for the Council) for use as temporary accommodation. A review of rent charges and procurement of temporary accommodation was carried out in 2013/14 by the Council Housing Services and will be reviewed over the life of the next LHS.

### 5.3 Property needs

This section considers the requirement for transitional accommodation, mainly single-person or single-parent family flats, but including houses in multiple occupation, refuges and hostels. This will usually be delivered via the acquisition or reconfiguration of existing stock, however, the development of new build units can also be an option on occasion. The provision includes self-contained, dispersed temporary accommodation flats and houses in both the private and social sectors, supported accommodation units and serviced accommodation units across the local authority area. Leasing private sector tenancies is encouraged, to avoid over reliance on mainstream RSL tenancies which are seen as more effective for providing permanent solutions. Previous reviews of the rent charging policy promoted greater equality by removing variations in charges according to tenure, which had been identified as a barrier to, and disadvantage for, those in employment seeking private sector accommodation.

## 5.4 Key client groups

The main client groups are likely to be young, single persons who are experiencing homelessness or women and lone parents fleeing domestic abuse; but older persons can also fall into this category; and other groups such as students, economic migrants and asylum seekers or refugees can also be included. Historically, these latter groups have not had a significant presence within Argyll and Bute however there is potential for this situation to change in the future, for example with proposals to develop areas such as Oban and Lorn as a university campus. In addition, the needs of armed service personnel, particularly around the naval base at Faslane, could impact on requirements for an element of barrack-style accommodation. The experience of the Covid-19 pandemic in 2020 identified an interim need for securing increased provision of temporary accommodation for homeless cases required to self-isolate or shield.

## 5.5 Evidence

### 5.5.1 Temporary Accommodation for homeless households

In 2020 the number of homeless households in temporary accommodation was 7% higher than the figure for 2016 (up from 109 to 117); however the trend over the last three years has been declining. The main difference over the last five years has been an increase in the use of “other” accommodation, and, for the first time, 2020 saw the use of unsuitable B&B due to the unprecedented impact of coronavirus.

**TABLE 5.1: Households in Temporary Accommodation Annually (as of end of quarter one)**

| Type of Accommodation                             | 2016 Q1 | 2017 Q1 | 2018 Q1 | 2019 Q1 | 2020 Q1 |
|---|---------|---------|---------|---------|---------|
| Local authority furnished temporary accommodation | 6       | 6       | 6       | 6       | 6       |
| Housing Association dwelling                      | 46      | 48      | 46      | 41      | 42      |
| Bed and breakfast                                 | 0       | 0       | 0       | 0       | 3       |
| Women's Refuge                                    | 0       | 0       | 0       | 0       | 0       |
| Other   | 57      | 62      | 73      | 71      | 66      |
| Total   | 109     | 116     | 125     | 118     | 117     |

Source: Scottish Government Annual Homeless Report, 2020

5.5.2 Key vulnerable groups within this category of need are families with dependent children and pregnant women. Over the last five years, the total of such households in temporary accommodation has decreased overall by 20% (from 30 to 24), confirming a welcome downward trend; albeit 2018 did see a proportionately significant spike. Overall, the use of B&B for these particular vulnerable groups remains nil.

**Table 5.2: Households with dependent children and pregnant women in temporary accommodation annually at end of quarter one**

| Type of Accommodation                             | 2016 Q1 | 2017 Q1 | 2018 Q1 | 2019 Q1 | 2020 Q1 |
|---|---------|---------|---------|---------|---------|
| Local authority furnished temporary accommodation | 0       | <5      | <5      | <5      | <5      |
| Housing Association dwelling                      | 8       | <5      | 9       | 5       | 8       |
| Bed and breakfast                                 | 0       | 0       | 0       | 0       | 0       |
| Women's Refuge                                    | 0       | 0       | 0       | 0       | 0       |
| Other   | 22      | 20      | 26      | 24      | 15      |
| Total   | 30      | 25      | 37      | 30      | 24      |

Source: Scottish Government Annual Homeless Report, 2020

5.5.3 Overall, the use of temporary accommodation in Argyll and Bute on an annual basis has risen by 2% over the last five years (from 416 during 2015/16 to 424 in 2019/20). The following table illustrates the trends in arranging temporary accommodation; the council was involved in around 50% of cases in 2015/16 compared to only 39% in 2019/20.

**Table 5.3: Use of Temporary Accommodation**

| Temporary Accommodation arranged | 2015 /16 | 2016 /17 | 2017 /18 | 2018 /19 | 2019 /20 | % change |
|----------------------------------|----------|----------|----------|----------|----------|----------|
| by applicant only                | 173      | 185      | 234      | 209      | 199      | 15%      |
| by LA only                       | 182      | 194      | 167      | 168      | 153      | -16%     |
| by both applicant and LA         | 26       | 32       | 23       | 15       | 12       | -54%     |
| No information supplied          | 35       | 67       | 62       | 51       | 60       | 71%      |
| Total                            | 416      | 478      | 486      | 443      | 424      | 2%       |

Source: HL1 Dataset

5.5.4 The temporary accommodation utilised for homeless persons includes a range of provision in social rented and private sector housing. The majority of cases have either remained temporarily in their original accommodation or have been otherwise placed by the council. A smaller proportion stayed with family and friends as illustrated in the following table.

**TABLE 5.4: Temporary Accommodation Provided\***

| Type of Accommodation   | 2015/16 | 2016/17 | 2017/18 | 2018/19 | 2019/20 |
|---|---------|---------|---------|---------|---------|
| Remained in original accommodation                            | 112     | 116     | 162     | 142     | 139     |
| Stayed with friends or relatives                              | 65      | 64      | 66      | 43      | 50      |
| Other arranged by applicant                                   | 30      | 43      | 33      | 44      | 28      |
| LA ordinary dwelling  | 0       | 0       | <5      | 0       | 0       |
| Housing association / RSL dwelling                            | 22      | 27      | 25      | 15      | 13      |
| Hostel - local authority owned                                | 0       | 0       | 0       | 0       | 0       |
| Hostel - RSL  | 3       | 10      | 7       | 5       | 9       |
| Hostel - other  | 8       | 10      | 9       | 12      | 13      |
| Bed and breakfast   | 0       | 0       | 0       | 0       | 0       |
| Womens refuge   | <5      | 0       | <5      | 0       | 0       |
| Private sector lease  | 36      | 44      | 30      | 36      | 23      |
| Other placed by authority                                     | 144     | 142     | 121     | 123     | 119     |
| <b>Source: HL1 dataset 2020</b> (*Multiple responses allowed) |         |         |         |         |         |

5.5.5 The above analysis suggests that while the pressure on temporary accommodation has reduced significantly, there is still a requirement to maintain an adequate supply of suitable properties particularly in the main towns within the local authority. The provision should continue to include RSL properties but private rental leases and other private sector accommodation will be preferred. In 2019/20, there were 131 units of temporary accommodation across 6 HMAs (a slight reduction of 3 units on the previous year). The bulk were in the private rented sector (43%); and located mainly in Lorn and Helensburgh & Lomond. The breakdown of locations and types of provision is summarised below:

**TABLE 5.5: Temporary Accommodation by Area & Type, 2020**

| HMA              | Serviced Accomm. | Council Retained Accomm. | RSL       | Private sector | BTHA*     | Total      |
|------------------|------------------|--------------------------|-----------|----------------|-----------|------------|
| BUTE             | 0                | 0                        | 5         | 0              | 0         | 5          |
| COWAL            | 10               | 0                        | 6         | 7              | 0         | 23         |
| H'BURGH & LOMOND | 8                | 6                        | 4         | 21             | 0         | 39         |
| KINTYRE          | 0                | 0                        |           | 5              | 0         | 5          |
| LORN             | 0                | 0                        | 2         | 8              | 32        | 42         |
| MID ARGYLL       | 0                | 1                        | 1         | 15             | 0         | 17         |
| <b>TOTAL</b>     | <b>18</b>        | <b>7</b>                 | <b>18</b> | <b>56</b>      | <b>32</b> | <b>131</b> |

(\*BTHA = Blue Triangle Housing Association which provides individual rooms for clients)

**Source: Council Records, 2020**

5.5.6 In 2019/20 there were 224 placements in temporary accommodation (compared to 239 in 2018/19) and the average length of stay was 165 days



(compared to 159 & 134 in the previous two years). This is just above the current LHS target of 160 days or less, but does indicate an increasing trend towards lengthier placements. 36% of homeless applicants required temporary accommodation during the year; compared to 39% in 2018/19, 43% in 2017/18, and 49% in 2016/17. As in previous years, there were no breaches of the Unsuitable Accommodation Order. Customer satisfaction with accommodation provided declined slightly from previous years to 80% which remains below the LHS target to achieve at least 90% satisfaction.

## 5.6 Domestic Abuse

5.6.1 In 2019/20 around 11% of the total homeless presentations to Argyll and Bute council were from applicants suffering violence or abuse, amounting to 46 individuals in total. 33 of these cases were due to domestic abuse and 13 were fleeing non-domestic abuse. The figure for domestic abuse increased significantly after 2015/16, but has subsequently declined, and over the last year it fell by 20%. Although the figure for non-domestic abuse has increased, and all such cases are of course distressing and intolerable, numerically the incidence of this type of violence remains relatively low.

**TABLE 5.6: Homeless Applications due to abuse or violence**

| Reason for Homelessness                      | 2015 /16 | 2016 /17 | 2017 /18 | 2018 /19 | 2019 /20 | 2018/19-2019/20 % change |
|--|----------|----------|----------|----------|----------|--------------------------|
| Dispute within household: violent or abusive | 35       | 50       | 52       | 41       | 33       | -20%                     |
| Fleeing non-domestic violence                | 5        | 12       | 12       | 9        | 13       | +45%                     |
| Total  | 40       | 62       | 64       | 50       | 46       | -8%                      |

**Source: Annual Scottish Government report, 2019/20**

- 5.6.2 The HOME Argyll waiting list in 2020 recorded 134 households within Argyll and Bute experiencing abuse, of which 34 were being abused by someone within the household. The incidence of abuse and violence is roughly proportionate to the general geographical distribution of the wider population, with 20% of cases in the Helensburgh & Lomond HMA, 13% in Cowal and 11% in Lorn for instance.
- 5.6.3 Domestic abuse and violence will not always result in the break-up of a relationship and therefore require alternative accommodation; and other factors may be recorded as reasons for homelessness where an application is made; however the Council does have a duty to provide appropriate emergency and temporary accommodation in such cases. A key agency in this area, working closely with, and funded by, the Council, is Argyll & Bute Women's Aid who provide accommodation in a refuge facility as well as floating support across the authority area. Figures for 2019/20 are set out in the following table. In total, 229 women received some form of support in that year, and 11 women and 14 children were accommodated in a refuge over the same period. Cowal and Helensburgh & Lomond experienced the highest

incidence of clients seeking support, but cases were recorded throughout the authority area.

**TABLE 5.7: Women’s Aid Client support by area, 2019/20**

| MONTH          | COWAL     | HELENSBURGH & LOMOND | BUTE      | MID ARGYLL, KINTYRE & ISLAY | LORN & THE ISLES | TOTALS     |
|----------------|-----------|----------------------|-----------|-----------------------------|------------------|------------|
| APRIL/MAY 2019 | 6         | 14                   | <5        | 7                           | 5                | <b>36</b>  |
| JUNE 2019      | <5        | <5                   | <5        | <5                          | <5               | <b>9</b>   |
| JULY 2019      | 9         | 5                    | <5        | 4                           | <5               | <b>23</b>  |
| AUGUST 2019    | 7         | 6                    | 0         | <5                          | <5               | <b>18</b>  |
| SEPTEMBER 2019 | 6         | 7                    | <5        | <5                          | <5               | <b>20</b>  |
| OCTOBER 2019   | <5        | 9                    | 0         | 5                           | <5               | <b>18</b>  |
| NOVEMBER 2019  | <5        | <5                   | 0         | 6                           | <5               | <b>16</b>  |
| DECEMBER 2019  | 5         | <5                   | <5        | 8                           | 8                | <b>25</b>  |
| JANUARY 2020   | 6         | 5                    | <5        | 5                           | 9                | <b>26</b>  |
| FEBRUARY 2020  | 7         | <5                   | 0         | <5                          | <5               | <b>18</b>  |
| MARCH 2020     | 10        | 5                    | 0         | 0                           | 5                | <b>20</b>  |
| <b>TOTALS</b>  | <b>64</b> | <b>62</b>            | <b>10</b> | <b>43</b>                   | <b>50</b>        | <b>229</b> |

Source: Annual Returns, Argyll & Bute Women’s Aid, 2021

5.6.4 Having signed up to the Domestic Abuse Housing Alliance/ Chartered Institute of Housing’s “**Make a Stand**” campaign in 2018/19, the council and its partners have made positive progress against the 4 key pledges in 2019/20. Housing Services are developing a policy for residents which will be implemented in 2020/21. Information and contacts for advice have been disseminated across a range of platforms and formats, including council website, social media, posters and tenancy packs for temporary accommodation. The council’s HR service are finalising a policy to support employees who may be suffering domestic abuse themselves. The council’s Chief Executive Officer has been appointed as the champion for this issue. In addition, Housing Services funded training for a range of partners, which was provided by Women’s Aid; and the HOMEArgyll Allocations Policy has been updated to take account of Domestic Abuse.

5.6.5 In 2020/21 there was a general assumption that domestic abuse could be exacerbated under the conditions of the lockdown and pandemic constraints, however this was not evident to any degree in Argyll and Bute. Nevertheless, the development of the Rapid Rehousing Transition Plan, and the implementation of a Housing First policy for vulnerable homeless cases in urgent need has enhanced the positive partnership working between council services and key organisations such as Women’s Aid.

## 5.7 Asylum seekers and refugees

5.7.1 Historically, asylum seekers and refugees in Scotland have been channelled via Glasgow City and there has not been a notable impact on Argyll and Bute. However, in 2015 Argyll and Bute Council was one of the first local authorities in Scotland to respond to the humanitarian crisis developing in Syria by agreeing to resettle Syrian refugee families through the Home Office's Syrian Vulnerable Persons Resettlement Scheme(VPRS). The Home Office provided funding for each individual resettled by the local authority which decreased over a five year period in line with their funding terms and conditions

5.7.2 The funding was used to:-

- Arrange accommodation that meets local authority standards which is available on arrival and is affordable and sustainable to the family – arranged via council partners ACHA and Fyne Homes on Bute
- Decorate, carpet and furnish the property
- Arrange 8hrs of ESOL(English) lessons for all adults
- Provide educational support for children in primary and secondary schools
- Help to integrate refugees into the local community and become self sufficient
- Support refugees to find employment via training scheme and other avenues

5.7.3 The first Syrians families were resettled in Rothesay on the Isle of Bute on 3<sup>rd</sup> December 2015. As part of the VPR scheme all local authorities agree to find suitable accommodation to help resettle Syrian families based on their age and family composition. The families are also supported to register with local GPs and dentists, claim benefits and are also referred to partner agencies such as Bute Advice Centre for ongoing benefit and utility information and advice.

5.7.4 By 2019 Argyll and Bute Council had resettled 30 Syrian families on Bute and one family had relocated from Coventry to Bute. Since 2015, 13 families have moved away from Bute stating various reasons:-

- To be closer to family or friends
- To be closer to a Mosque
- To be able to access halal food (move to a city)
- For work
- For better accommodation (house)

Since the first Syrian families arrived on Bute in 2015 there have been 14 Syrian babies born and several families have had to move property due to overcrowding. Because of the benefit cap this can then have an impact on the family's benefits and has resulted in several families having to apply for DHP to help with the shortfall in their rent. To date nobody has been refused

DHP and it continues to be paid, although they have to re-apply every 3 months.

- 5.7.5 During the yearly Evaluations most families indicated that they would like to move into a house with its own garden as this is what they previously owned prior to leaving Syria. Some families have indicated that they would consider moving away if this could not be achieved. ACHA and Fyne Homes have advised that there is an abundance of bedsits, one bed and two bed properties on Bute but a severe shortage of 3 and 4 bed properties. They also advised that there are large waiting lists for 2 and 3 bed houses on Bute and that the maximum 200 points would be required in order to be considered, should one become available.
- 5.7.6 Argyll and Bute Council have had a maximum of 24 families on Bute at any one time but due to some families recently leaving for various reasons, they now only have 18 families. Prior to these families leaving, Argyll and Bute Council was considering another Resettlement site in Oban or Dunoon but due to the recent departures there is now availability on Bute again.
- 5.7.7 The Home Office have recently announced that post 2020 they plan to consolidate three Resettlement Scheme's (VPR Scheme, VCR Scheme and Gateway) into one scheme (Global Resettlement Scheme) whereby they will resettle the most vulnerable people from around the world rather than just resettling vulnerable people from the MENA region(Middle East and North Africa). The Home Office have confirmed the first year's funding will remain the same as the current VPR Scheme. Argyll and Bute Council will monitor the funding after year one and decided if they will continue to participate in the new scheme.
- 5.7.8 The successful programme of resettlement involved positive joint working by the Council, its partner agencies and the community of Bute. Numbers seeking refuge have not been excessive and there has been sufficient capacity within the mainstream stock, particularly in areas such as Bute and Kintyre, to accommodate the refugees without a requirement for any additional new build temporary provision to date. As of 2020, this situation is not anticipated to change.

## **5.8 Student accommodation**

Argyll and Bute does not currently have a significant student population and there has been no historical requirement for temporary accommodation to cater for this group within the authority area. Given the geography of the area, a number of secondary school pupils from rural and island communities have been accommodated in hostels provided by the Education department in Oban and Dunoon for instance, but otherwise this has not been an issue.

However, there are proposals being developed to establish a university campus in the Oban and Lorn area, which could entail the provision of suitable student and staff accommodation in the area. Facilities such as the Scottish Association for Marine Science (SAMS), based outside Oban and catering for students as well as employing around 150 staff, also generate requirements for local accommodation. This need has fluctuated in recent years and partnership arrangements with local RSLs, such as West Highland Housing Association, have been successfully developed to address the particular requirement. The situation will be monitored closely and future HNDA updates will be required to take account of any firm plans in this area.

## **5.9 Partnership Working, external stakeholder consultation and engagement**

- Homeless interviews, exit surveys, and ad hoc engagement with clients
- HNDA Household Surveys 2018/2019
- MoD service personnel focus groups and survey, 2018
- Local Area Council/RSL Operational Groups
- Quarterly Strategic Housing Forum
- Monthly Housing Management Team meetings
- Support Services meetings

## **6.0 Template 4: Supported Provision**

### **6.1 National policies**

In addition to the key policies, plans and strategies outlined in previous templates, particularly at 2.1, the following are relevant in this context:

- Scotland's National Dementia Strategy 2017-2020, Scottish Government
- Keys To Life – improving quality of life for people with learning disabilities: Implementation Framework 2019–2021, SCLD, 2019
- The Carers' Strategic Policy Statement , Scottish Government 2019
- Mental Health Strategy for Scotland 2017-2027, Scottish Government, 2017
- Regulation of Care (Scotland) Act 2001 and Community Care and Health (Scotland) Act 2002
- Health and Social Care Delivery Plan, Scottish Government's 2020 Vision.

### **6.2 Local policies**

- Argyll & Bute Strategic Housing Investment Plan 2020
- Argyll & Bute HSCP Strategic Plan 2019/20 – 2021/22
- Argyll & Bute HSCP Care Homes & Housing for Older People Project
- HOME Argyll Common Allocation Policy

### **6.3 Property needs**

6.3.1 The main focus in this section is on the need for sheltered and extra care accommodation; and housing designated as “retirement” by certain RSLs: i.e. in general, those schemes which still provide some form of warden or support service on site. The HNDA guidance also requires local authorities to consider the provision of care homes and residential homes. Hostels and refuges have been considered in the previous template. In general, medium dependency and extra care or progressive care stock without onsite warden/support service has been considered under Template 1.

6.3.2 Nevertheless, as throughout this whole paper, there are often variations and overlaps across the range of definitions and terminology used by different landlords and providers; as well as across the local housing, health and social care sectors in this authority. The Scottish Government definitions of sheltered and extra care housing will apply in this context, however, within Argyll and But the designation of extra or progressive care housing and retirement homes tend to be rather flexible and less clear cut. A key action for the initial years of the next LHS will be to rationalise and formalise the terminology around Specialist Provision.

### **6.4 Care and support Needs**

This relates to those households and individuals who require some form of support which is associated with the property or scheme and may be met partly on-site from, for example, a key worker or warden, with additional

support from a community psychiatric nurse, or general nurse, social worker, physiotherapist, care assistant, or housing support officer among others. (NB. Other forms of care and support for independent living at home, associated with an individual or household rather than a particular property or scheme, are covered in the following template.)

## 6.5 Key client groups

The supported provision in this section would be suitable mainly for older people requiring assistance in their daily life; people with a physical disability, learning disabilities, autism, or mental health issues; and persons with other long-term limiting health conditions which might be affected or exacerbated by their living conditions.

## 6.6 Evidence

### 6.6.1 Current Provision

The social rented sector in Argyll and Bute includes the following specialist provision (NB. Some provision that might be termed “supported accommodation” appears under template 1 as accessible and adapted properties; and specialist schemes for people with learning disabilities are also further outlined in Template 5). Over 27% of this provision is in Cowal, 24% is in Lorn and 17% on Bute. Less than 7% is in Helensburgh & Lomond, however, recent developments in this HMA have increased the provision of other forms of medium dependency units that are outlined in the accessible housing category under Template 1, and there are plans for further development in the area. Based on the RSL stock definitions, there are 201 sheltered homes, 33 supported, 325 “retirement” homes and 24 extra care units in this sector.

**Table 6.1: RSL Supported housing stock, by HMA & Type, 2020**

| HMA            | Extra care | Sheltered housing | Supported | Retirement | HMA Totals | % of A&B Total |
|----------------|------------|-------------------|-----------|------------|------------|----------------|
| Bute           | -          | 34                | -         | 66         | 100        | 17.2%          |
| Coll & Tiree   | -          | -                 | -         | -          | -          | 0.0%           |
| Cowal          | -          | 43                | 22        | 95         | 160        | 27.4%          |
| H & L          | -          | -                 | 11        | 28         | 39         | 6.7%           |
| I, J & C       | -          | 10                | -         | -          | 10         | 1.7%           |
| Kintyre        | -          | -                 | -         | -          | -          | 0.0%           |
| Lorn           | -          | 51                | -         | 88         | 139        | 23.8%          |
| Mid Argyll     | 24         | 57                | -         | -          | 81         | 13.9%          |
| Mull & Iona    | -          | 6                 | -         | 25         | 31         | 5.3%           |
| A & B Total    | 24         | 201               | 33        | 325        | 583        | 100.0%         |
| % of A&B Total | 4.1%       | 34.5%             | 5.7%      | 55.7%      | 100%       |                |

Source: Annual RSL Returns, 2020

6.6.2 In line with national trends, there has been a continuing move away from the traditional “sheltered” accommodation per se in recent years, and a shift toward other models of supported provision. The recent focus has been on increasing accessible, extra/progressive care, amenity and/or medium dependency schemes. The “retirement” housing outlined in Table 6.1 primarily comprises reconfigured sheltered housing provided by Bield; and other local RSLs, such as Fyne Homes, have also remodelled their sheltered accommodation in recent years. Bield’s Retirement Housing still has staff on-site, mainly providing a 5 day service, however, where tenants have requested a 7 day service and are willing to pay the extra service charges incurred this has been put in place. Housing Support is no longer provided at these developments but a landlord service only. Tenants still have a 24 hour warden call system and also have the option to receive an automated reassurance call each day, provided via the RSL’s BR24 service.

### 6.6.3 Turnover in the social stock

There were 110 lets within this stock in 2019/20, a turnover rate of 19% which is relatively high. Retirement housing accounted for over half the available lets in the supported accommodation sector during that year. Lorn, Bute and Cowal saw the highest number of households rehoused in this type of housing (31, 25 and 23 respectively) while Helensburgh & Lomond, for instance, had apparently only 7 available lets. There was no turnover in the properties designated as extra care this year.

**TABLE 6.2: RSL sector supported provision lets, 2019/20**

| HMA                    | Extra care | Sheltered housing | Supported | Retirement | Total Lets in HMA | % of Total lets in A&B |
|------------------------|------------|-------------------|-----------|------------|-------------------|------------------------|
| Bute                   | -          | 8                 | 8         | 9          | 25                | 22.7%                  |
| Coll & Tiree           | -          | -                 | -         | -          | -                 | 0.0%                   |
| Cowal                  | -          | 3                 | 4         | 16         | 23                | 20.9%                  |
| H&L                    | -          | -                 | -         | 7          | 7                 | 6.4%                   |
| I, J & C               | -          | 1                 | 1         | 2          | 4                 | 3.6%                   |
| Kintyre                | -          | -                 | -         | -          | -                 | 0.0%                   |
| Lorn                   | -          | 7                 | 7         | 17         | 31                | 28.2%                  |
| Mid Argyll             | -          | 6                 | 6         | -          | 12                | 10.9%                  |
| Mull & Iona            | -          | -                 | -         | 8          | 8                 | 7.3%                   |
| A & B Total            | -          | 25                | 26        | 59         | 110               | 100.0%                 |
| % of Total Lets in A&B | 0%         | 22.7%             | 23.6%     | 53.6%      | 100.0%            |                        |

Source: Annual RSL Returns, 2020



### 6.6.43 Estimated need and demand in the social stock

The HOME Argyll waiting list as of April 2020 recorded a total of more than 250 applicants for either sheltered or supported housing, which is generally in line with registered demand in recent years, at 10% of the total waiting list. Of these, 139 requested sheltered housing only, 67 required housing with support only, and 47 sought either sheltered or supported accommodation

**TABLE 6.3: HOME Argyll Applicants for Supported/Sheltered Housing, 2020**

| AREA         | Sheltered Housing | Supported Accommodation | Sheltered or Supported | % of A&B Supported Total |
|--------------|-------------------|-------------------------|------------------------|--------------------------|
| Bute         | 11                | 4                       | 1                      | 6.3%                     |
| Cowal        | 20                | 12                      | 7                      | 15.4%                    |
| Coll & Tiree | 6                 | 0                       | 0                      | 2.4%                     |
| H&L          | 19                | 11                      | 9                      | 15.4%                    |
| I, J & C     | 9                 | 1                       | 4                      | 5.5%                     |
| Kintyre      | 8                 | 4                       | 3                      | 5.9%                     |
| Lorn         | 37                | 23                      | 9                      | 27.3%                    |
| Mid Argyll   | 22                | 5                       | 3                      | 11.9%                    |
| Mull & Iona  | 7                 | 7                       | 11                     | 9.9%                     |
| A&B Total    | 139               | 67                      | 47                     | 100.0%                   |

Source: HOME Argyll CHR Report, 2020

On this basis, the main need for this type of accommodation is located in Lorn (27%), and then Cowal and Helensburgh & Lomond (both 15.4% of total RSL waiting list need).

6.6.54 In addition, other national, specialist RSLs such as Bield, for instance, operate a separate waiting list for specialist supported (retirement) provision and it is anticipated that the majority of their applicants will not be duplicated on the HOME Argyll list. In recent years the Bield list has fluctuated, but in 2020 there were 180 applicants in total for both retirement and amenity properties; with the majority being for retirement/ supported accommodation (122, or 68%). The main demand for Bield's supported housing is in Helensburgh & Lomond; however both Lorn and Cowal also have a relative degree of need, while demand on Bute is slightly lower. A reasonably conservative assumption would be to increase the HOME Argyll estimate of need for this type of housing by around 120 units to avoid under-counting.

**Table 6.4: Bield waiting list applicants by HMA and type of housing, 2020**

| HMA   | Retirement | Retirement with Meals | Amenity | Totals |
|-------|------------|-----------------------|---------|--------|
| Bute  | 15         | -                     | -       | 15     |
| Cowal | 31         | -                     | -       | 31     |
| H&L   | 42         | -                     | 40      | 82     |
| Lorn  | 24         | 10                    | 18      | 52     |
| Total | 112        | 10                    | 58      | 180    |

Source: Annual RSL Return, 2020

6.6.65 It is likely therefore, based on the foregoing data and assumptions, that there is a residual requirement for additional units of supported housing across Argyll and Bute and that, given, the ageing population, this could increase in the future. However, as indicated in the HNDA surveys carried out in 2018 and 2019, and in line with previous research, the level of need will not be directly equivalent to the increase in older persons as the majority of this cohort will seek to remain in private sector, independent homes for as long as possible. The difficulty of quantifying need for new build housing in the specialist sector has been highlighted in previous research carried out by the council (see the North Star study of 2014, into the housing needs and aspirations of Older Persons in Argyll and Bute for example), but based on precedents and good practice, as well as the results of the bespoke surveys carried out for this HNDA, the following estimates are tentatively suggested.

6.6.76 Modelling from population data, and assuming a requirement for around 60 units of sheltered housing for rent per 1,000 of the 75+ aged population (based on historic prevalence rates, which require a degree of caution, as these are now dated and are used purely for indicative purposes) would project a need for approximately 464 units in 2021, rising to 486 by 2026 and 723 by 2030.

6.6.87 The HNDA Household Survey analysis on the other hand shows that only 0.6% of households (equivalent to around 250 households across Argyll and Bute) would like or need to move within the next five years to some form of supported, sheltered or specialist accommodation. In addition, approximately 2.3% of households that include someone with a limiting long-term health condition or illness (approximately 205 households across the authority area) indicated that they will wish to move to some form of supported specialist housing provision, including:

- 80 for sheltered housing (with warden),
- 27 for very sheltered or extra care housing,
- 62 for retirement/older person accommodation,
- 36 for residential care homes.

6.6.98 Triangulating these survey results, current waiting list figures, and indicative prevalence rates, would suggest a potential demand for something in the order of 375 supported housing units as of 2021. Assuming an annual supply (RSL turnover) of around 110 lets, the net need would equate to **265 supported homes**.

6.6.109 Projecting need at the lower level of individual HMAs is problematic and less robust, however the survey results are reasonably similar to the proportionate waiting list distribution of need for sheltered or supported housing. This suggests that the greatest percentage of those who would like or need to move for this type of accommodation by far are found in Lorn; followed by both Cowal and Helensburgh & Lomond. In reducing order, the percentages of households requiring to move to supported accommodation by HMA are:

- Lorn (27%)
- Cowal (15%)
- Helensburgh & Lomond (15%)
- Mid Argyll (12%)
- Mull & Iona (10%)
- Bute (6%)
- Kintyre (6%)
- Islay, Jura & Colonsay (5%)
- Coll & Tiree (2%)

These estimates provide only an indication of potential future demand and an ongoing review and monitoring will be required.

## 6.7 Care Homes and Support Needs

6.7.1 The latest Scottish Government guidance clearly indicates that the requirement for care homes should be a consideration for both the HNDA and LHS. Therefore, a basic appraisal of the issue is presented here however this remains primarily a function for the Health & Social Care strategic planning framework and their joint strategic assessment of need. The housing sector will continue to liaise closely with health and social care partners as required to address this issue. A dedicated short-life joint working group was established in 2017 under the auspices of the Strategic Housing Forum to review the situation; and subsequently the HSCP implemented a comprehensive work stream focused on Care Homes and Housing in Argyll and Bute to assess need, review existing provision and consider alternative options with stakeholders. Following initial outputs in 2018/19, this project has been revived in 2021, and provides detailed evidence for this section of the HNDA.

6.7.2 According to the Scottish Care Home Census Information Services, there were 462 adults in a total of 20 registered care homes in Argyll and Bute in 2019 (an occupancy rate of 86%). The vast majority of these were older persons and long stay residents. There has been an overall decrease in the number of homes and registered places, as well as residents, in recent years, despite the increasingly ageing population trends.

**TABLE 6.5: Care home provision, all adults and older people, 2006-2019**

|                   | Older People |      |      |                  | All adults |      |      |                  |
|-------------------|--------------|------|------|------------------|------------|------|------|------------------|
|                   | 2006         | 2015 | 2019 | % Change 2006-19 | 2006       | 2015 | 2019 | % Change 2006-19 |
| Care Homes        | 28           | 21   | 18   | -36%             | 35         | 24   | 20   | -43%             |
| Registered Places | 734          | 594  | 531  | -28%             | 803        | 608  | 538  | -33%             |
| Residents         | 628          | 505  | 456  | -25%             | 671        | 518  | 462  | -31%             |
| Occupancy (%)     | 86           | 85   | 86   | -                | 84         | 85   | 86   | 2%               |

Source: Scottish Care Homes Census and Care Inspectorate Registration List 2020

The bulk of this provision is in the private sector (around 79% of registered places and residents in 2019).

**TABLE 6.6: Care Home Provision (All Adults) by Sector.**

| Provider  | ARGYLL & BUTE 2019 |            |           |            |       |            |
|-----------|--------------------|------------|-----------|------------|-------|------------|
|           | Places             | % of Total | residents | % of Total | Homes | % of Total |
| LA/NHS    | 89                 | 17%        | 73        | 16%        | 6     | 30%        |
| Private   | 421                | 78%        | 365       | 79%        | 13    | 65%        |
| Voluntary | 28                 | 5%         | 24        | 5%         | 1     | 5%         |

|       |     |      |     |      |    |      |
|-------|-----|------|-----|------|----|------|
| Total | 538 | 100% | 462 | 100% | 20 | 100% |
|-------|-----|------|-----|------|----|------|

Source: Scottish Care Homes Census 2020

6.7.3 Argyll and Bute has a consistently lower rate of provision of care home places for the elderly than Scotland as a whole, and in recent years this has declined at more than double the national rate.

**Table 6.7: Number of Registered Places (Long-Stay, Short-Stay and Respite) in Care Homes for Older People, per 1,000 Population.**

| Area          | 2006 | 2015 | 2019 | change in rate 2006 - 2019 | change in rate 2018 - 2019 |
|---------------|------|------|------|----------------------------|----------------------------|
| Scotland      | 46   | 39   | 39   | -7                         | -1                         |
| Argyll & Bute | 41   | 28   | 24   | -17                        | -3                         |

Source: Scottish Care Homes Census 2020

6.7.4 The following table also provides a breakdown of the main conditions affecting people in long term care. There is a significant incidence of dementia among this client group (over two thirds), as might be expected, and a significant proportion require nursing care.

**TABLE 6.8: Long Stay Residents (All Adults) of Care Home by characteristic** (NB - clients may have more than one condition and therefore figures sum to more than 100%)

| Health Condition                             | %          |
|--|------------|
| Dementia (Medically Diagnosed)               | 61.7       |
| Requiring Nursing Care                       | 42.2       |
| Other Physical Disability or Chronic Illness | 34.8       |
| Visual Impairment                            | 11.4       |
| Hearing Impairment                           | 9.7        |
| Dementia (Not Medically Diagnosed)           | 7.4        |
| None of these                                | 6.3        |
| Mental Health Problems                       | 5.8        |
| Neurological Conditions                      | 5.6        |
| Learning Disability                          | 2.6        |
| Acquired Brain Injury                        | 1.9        |
| Alcohol Related Problems                     | 1.9        |
| Drugs Related Problems                       | 0          |
| <b>Total Number of Long Stay Residents</b>   | <b>431</b> |

Source: Scottish Care Homes Census, 2020

### 6.7.5 Care Homes and Housing for Older People Project

This Argyll & Bute HSCP project commenced in 2018 and has subsequently been revived in 2021. Central to this project was the development of a care home modelling tool which was designed to calculate the future demand for

24 hour care, and the generation of options to meet that demand. The initial outputs of this process found that:-

- Demand for care homes is projected to increase by 85% over the next 20 years; with the number of funded places expected to increase from 483 in 2019 to 894 by 2038, if no other changes occur to care delivery models;
- This increased demand can be constrained if service delivery models are varied and other strategic interventions are implemented. The most optimistic scenario would reduce year on year demand by 2% over 20 years and result in a projection of 671 care home places required by 2038;
- The current care home provision is heavily skewed to Helensburgh and Cowal. Potential over supply in these areas balances an under supply in Mid Argyll, and Bute where many potential clients are required to leave their home area to access appropriate levels of care. However, the initial study did not include full analysis of Mull, Islay or less populated islands.
- At the initial project consultation stage, two options were identified for further consideration: new build care homes to replace existing properties no longer fit for purpose; or provision of core and cluster models.

This is a critical area of specialist provision housing need assessment for the council and the RSL sector and ongoing work with the HSCP is required to determine specific requirements to inform, for instance, future SHIP targets.

## 6.8 External stakeholder consultation & engagement

As per previous templates: in particular, the HNDA Household Surveys carried out by Research Resource in 2018 (Helensburgh & Lomond) and 2019 (rest of Argyll & Bute). The Care Homes & Housing Project and other ongoing partnership engagement between the Housing Sector and HSCP colleagues and clients have also been central in informing this element of the HNDA. Dedicated stakeholder conferences and thematic workshops were held between 2018 and 2021. In addition, the early engagement surveys and public consultation for the LHS development process included coverage of this theme; and general community engagement via the Place Standards Tool in 2019, conducted by Community Planning colleagues in the council, also helped to inform this HNDA with valuable qualitative evidence of the demand for supported provision across Argyll & Bute. Mixed views were expressed, but the following select and anonymised comments are fairly representative:

*My partner is disabled and needs considerable care. There is not enough affordable housing, in the area, to attract enough suitable carers.*

*Lack of sheltered / retirement housing for the elderly*

*Lack of special sheltered accommodation to bridge gap between folk living at home and being admitted to Care home*

*Will need more sheltered housing. We're all OLD*

*No elderly or disability provision other than private buying*

*Sadly a lack of supported housing for the elderly et al means that they are hired off to areas distant from family and friends.*

*Need for an old peoples Home so that no one has to leave the Island at the last years of their life.*

*Lots of assisted living - wonderful*

## **7.0 Template 5: Care/Support Services for Independent Living at Home**

### **7.1 Strategic and policy framework**

#### **a) National policies**

In addition to the overarching plans and policies set out under previous templates, the following are also relevant.

- National Telehealth and Telecare Delivery Plan for Scotland to 2016
- Keys To Life – improving quality of life for people with learning disabilities

#### **b) Local policies**

- Housing Support Policy, Argyll & Bute Council Housing Services
- Argyll & Bute Care & Repair Plan

### **7.2 Care and Support Needs**

There are a wide range of relevant care and support services available across Argyll and Bute, to enable residents to live independently in their own, primarily mainstream, home. These are services generally unconnected with the forms of specialist housing outlined in previous templates. These services will include:

- Telecare/Telehealth and community alarms;
- Home helps; Support workers;
- Carers;
- Handyperson/ Care & Repair;
- Social workers;
- Welfare Rights (delivered by the overarching council service and also by separate RSL projects); and
- Housing support services (primarily funded by the Council and delivered by agencies including: Carr Gomm, HELP, and Kintyre Youth Education Service).

### **7.3 Key client groups**

These services are available for anyone living in their own home (across all tenures, albeit often the focus is on the private sector), but needing care and/or support to continue to live independently. This will include older persons including those with dementia; young adults and looked-after children leaving formal care; persons with mental health issues, those on the autistic

spectrum, and people with learning disabilities; and families with other particular needs.

## 7.4 Evidence

### 7.4.1 Care at Home

Latest available statistics from the Scottish Government indicate that there were 980 people aged 65+ receiving Home Care in Argyll and Bute in 2018, an increase of 42% since 2008/9, albeit a drop on the previous five year average. The figures for those receiving free personal care show a similar trend. While this reflects the increasing older population in general, it appears to be counter to the national trends that suggest an overall decrease in the number of care at home clients since 2009, possibly due to the enablement agenda which promotes independence and reduces the demand for care and support services.

**TABLE 7.1 : No. of people aged 65+ receiving care at home & free personal care (FPC)**

| Argyll & Bute         | 2008-09 | 2013-14 | 2014-15 | 2015-16 | 2016-17 | 2017-18 |
|-----------------------|---------|---------|---------|---------|---------|---------|
| receiving Home Care   | 690     | 1,080   | 1,100   | 1,020   | 1,020   | 980     |
| receiving FPC at home | 640     | 1,080   | 1,100   | 1,020   | 1,010   | 980     |

Source: Scottish Government Social Care Statistics, 2018

7.4.2 Supplementary evidence from the Argyll & Bute Health, Care and Housing Needs Assessment, 2018, identified the following key points in respect of Home Care:-

#### Home Care

- 1,100 people aged 65+ received Home Care in Argyll and Bute.
- This could increase to 1,500 people in ten years if in line with population projections.
- This increase in Home Care provision could be higher if the trend towards looking after people at home continues.
- Relatively high rates of Care Home compared to home care use in Cowal suggests that there could be increased use of Home Care in this particular area.

The report also summarises the following key points in respect of delayed discharges from hospital, which relate to home care.

#### Delayed Discharges

- 54% of people delayed in hospital are delayed due to 'Care Arrangements' and 'Awaiting Social Support' in particular.
- 78% of delays are from people aged 75+



- The number of delays, per population aged 75+, is highest in Oban, Lorn and the Inner Isles and in Kintyre and Mid-Argyll.
- This may suggest difficulties with Home Care capacity or arrangements in these areas, possibly due in part to the rural nature of these areas.

7.4.3 The HNDA Household Surveys, carried out in 2018 and 2019 by Research Resource on behalf of the Council, provide further detailed analysis of home care needs in both the private and RSL sectors. The key findings in summary were:

- 19% of households receive care and support services;
- 1% need these services but do not receive them currently;
- 30% of care and support services are provided by the Council; 27% by other relatives; and 19% by private organisations;
- 46% of care and support is for less than 4 hours per week; 16% for 5-10 hours per week; and 9% stated that care is continuous.

7.4.4 While the majority of respondents said no one in their household needs any special forms of support, 1% said they need regular contact with social services, health or other caring organisations but do not receive this support; and 1% said they need further support, but less than 24-hour support, from social services, health or other caring organisation and do not receive this.

| <b>Q63 Do you or any in your household need any of these special forms of support?</b>                  |                         |                               |                   |
|---|-------------------------|-------------------------------|-------------------|
| <b>Base: All with someone who suffers weighted=8915, unweighted=708</b>                                 | <b>Need and receive</b> | <b>Need but don't receive</b> | <b>Don't need</b> |
| Regular contact with social services, health or other caring organisation                               | 35.5%                   | 0.8%                          | 63.6%             |
| Further support but less than 24-hour support from social services, health or other caring organisation | 11.6%                   | 0.5%                          | 87.9%             |
| 24-hour support from other caring organisation  | 1.6%                    | 0.1%                          | 98.3%             |
| Sharing housing with support from other residents and caring organisations                              | 0.5%                    | 0.1%                          | 99.3%             |

**Source: Argyll & Bute HNDA Household Survey, Research Resource, 2019**

7.4.5 When asked if there was anyone in the household who required care and support services the majority of respondents stated these services were not required. In terms of current services already in place, the most common involved home care and home help, with 5% receiving this service and 4% who currently receive help with their shopping.

| <b>Q66 In terms of care/support provision, do you or anyone in your household currently receive or need these services?</b> |                         |                          |                              |
|---|-------------------------|--------------------------|------------------------------|
| <b>Base: All respondents, weighted=34,477 unweighted=2,642</b>  | <b>Current Services</b> | <b>Services Required</b> | <b>Services not required</b> |
| Home care/home help (helping with housework, cooking, cleaning)   | 4.8%                    | 0.3%                     | 94.9%                        |
| Home care (helping with washing/bathing, dressing, toilet)  | 1.7%                    | 0.0%                     | 98.2%                        |
| Meals delivered to home/ meals on wheels  | 0.7%                    | 0.1%                     | 99.1%                        |
| Day care/day centre (in hospital, residential home or other organisation)   | 0.7%                    | 0.0%                     | 99.3%                        |
| Respite/ short term care in residential/ nursing home   | 0.5%                    | 0.0%                     | 99.5%                        |
| Occupational therapy/ physiotherapy   | 2.5%                    | 0.1%                     | 97.4%                        |
| Help with shopping  | 3.9%                    | 0.1%                     | 96.0%                        |
| Night care (someone present at night)   | 0.2%                    | 0.0%                     | 99.8%                        |
| Technology enabled care   | 0.5%                    | 0.0%                     | 99.4%                        |
| Support from local voluntary & community organisations  | 1.7%                    | 0.0%                     | 98.3%                        |
| Carers support  | 1.4%                    | 0.1%                     | 98.5%                        |
| Other   | 0.0%                    | 0.0%                     | 100.0%                       |

Source: Argyll & Bute HNDA Household Survey, Research Resource, 2019

7.4.6 Just under one third (30%) of care and support services already in place are provided by the Council, while 27% are provided by a relative who does not stay in the same household. Just under one fifth (19%) are provided by a private organisation

| Q67a Who is the carer?             |  |
|------------------------------------|--|
|                                    | All respondents who currently receive care or support services |
| <i>Unweighted</i>                  | 460  |
| <i>Weighted</i>                    | 6,405  |
| Provided by Council                | 29.9%  |
| Other Relative                     | 27.1%  |
| Private Organisation               | 19.1%  |
| Provided by voluntary organisation | 8.5%   |
| Other Household Member             | 6.6%   |
| Other                              | 3.2%   |
| Don't know/ not stated             | 3.0%   |
| Friend                             | 1.7%   |
| Neighbour                          | 0.9%   |

Source: Argyll & Bute HNDA Household Survey, Research Resource, 2019

7.4.7 One quarter of carers (25%) are between 1 to 5 miles away from the resident while 20% are 5 to 10 miles away. Only 1 in 10 residents (10%) receive care from someone at the same address or building.

| <b>Q67b Distance?</b>          |  |
|--------------------------------|--|
|                                | <b>All respondents who currently receive carer or support services</b> |
| <i>Unweighted</i>              | 460  |
| <i>Weighted</i>                | 6,405  |
| Same address/ building         | 10.4%  |
| Neighbouring/ in neighbourhood | 13.8%  |
| Up to 1 mile away              | 10.9%  |
| Over 1 up to 5 miles away      | 24.7%  |
| Over 5 up to 10 miles away     | 19.9%  |
| Over 10 up to 20 miles away    | 5.8%   |
| Over 20 miles away             | 2.0%   |
| Don't know/ not stated         | 12.4%  |

Source: Argyll & Bute HNDA Household Survey, Research Resource, 2019

7.4.8 Just under one third of residents (30%) receive care and support services for 2 to 4 hours per week while 17% said it varies: 16% said between 5 to 10 hours per week and 16% for less than two hours per week.

| <b>Q67c How many hours per week?</b> |   |
|--------------------------------------|---|
|                                      | <b>All respondents who currently receive care or support services</b> |
| <i>Unweighted</i>                    | 460   |
| <i>Weighted</i>                      | 6,405   |
| Less than 2 hrs p/wk                 | 15.7%   |
| 2-4 hours p/wk                       | 30.0%   |
| 5-10 hours p/wk                      | 16.3%   |
| 11-19 hours p/wk                     | 4.8%  |
| 20-49 hours p/wk                     | 3.5%  |
| 50 or more hrs p/wk                  | 0.6%  |
| Continuous care                      | 9.2%  |
| It varies                            | 16.6%   |
| Don't know/ Not stated               | 3.3%  |

Source: Argyll & Bute HNDA Household Survey, Research Resource, 2019

7.4.9 Overall, two thirds (69%) of care and support services are not paid, while 31% are paid. Services which are most likely to be paid include technology enabled care (89%), home care that includes helping with housework, cooking and cleaning (51%) and meals that are delivered to the home (51%).

| Q67d Paid care?   |                 |       |        |
|---|-----------------|-------|--------|
|   | Base            | Yes   | No     |
| Home care/ home help (helping with housework, cooking, cleaning)            | Weighted= 1,638 | 51.1% | 48.9%  |
|   | Unweighted= 126 |       |        |
| Home care ( helping with washing/bathing, dressing, toilet)                 | Weighted= 598   | 30.4% | 69.6%  |
|   | Unweighted=57   |       |        |
| Meals delivered to home/ meals on wheels                                    | Weighted= 251   | 51.3% | 48.7%  |
|   | Unweighted= 15  |       |        |
| Day care/ day centre (in hospital, residential home or other organizations) | Weighted= 243   | -     | 100.0% |
|   | Unweighted=14   |       |        |
| Respite/ short term care in residential/ nursing home                       | Weighted=174    | 22.5% | 77.5%  |
|   | Unweighted=11   |       |        |
| Occupational therapy/ physiotherapy   | Weighted=846    | 30.2% | 69.8%  |
|   | Unweighted=57   |       |        |
| Help with shopping  | Weighted=1,338  | 16.6% | 83.4%  |
|   | Unweighted=96   |       |        |
| Night care (someone present at night only)                                  | Weighted=56     | -     | 100.0% |
|   | Unweighted=8    |       |        |
| Technology enabled care   | Weighted=188    | 88.6% | 11.4%  |
|   | Unweighted=11   |       |        |
| Support from local voluntary & community organisations                      | Weighted=585    | 1.4%  | 98.6%  |
|   | Unweighted=35   |       |        |
| Carers support  | Weighted=483    | 32.2% | 67.8%  |
|   | Unweighted=30   |       |        |
| Other   | Weighted=5      | -     | 100.0% |
|   | Unweighted=1    |       |        |

Source: Argyll & Bute HNDA Household Survey, Research Resource, 2019

7.4.10 The two most common forms of care and support services received are home care (e.g. help with housework, cooking and cleaning), and help with shopping. Provision does vary by HMA: Cowal residents were most likely to receive home care while residents on Islay, Jura & Colonsay (5.2%), Bute

(4.9%), and Lorn (4.5%) were the most likely to receive help with shopping. The following two tables summarise:

- a. Support services currently received, by HMA; and
- b. Support services required, by HMA.

**TABLE 7.2: Support services currently received, by HMA**

| HNDA Survey Q66: In terms of care/support services provided, do you or anyone in the household currently receive these services? (% stating current services) |                        |                        |                      |                         |                      |                          |                   |                    |            |      |                                     |                |       |
|---|------------------------|------------------------|----------------------|-------------------------|----------------------|--------------------------|-------------------|--------------------|------------|------|-------------------------------------|----------------|-------|
| HMA   | Weighted survey sample | Type of Support        |                      |                         |                      |                          |                   |                    |            |      |                                     |                |       |
|   |                        | Home care/ (housework) | Home care (personal) | Meals delivered to home | Day care/ day centre | Respite/ short term care | OT/ physiotherapy | Help with shopping | Night care | TEC  | Voluntary & community organisations | Carers Support | Other |
| <b>Bute</b>   | 4,352                  | 5.5%                   | 1.2%                 | 1.2%                    | -                    | -                        | 2.3%              | 4.9%               | 0.3%       | -    | -                                   | 0.6%           | -     |
| <b>Coll &amp; Tiree</b>   | 685                    | 4.7%                   | 2.2%                 | -                       | -                    | -                        | 0.6%              | 3.4%               | 0.6%       | -    | 1.6%                                | 0.6%           | -     |
| <b>Cowal</b>  | 8,102                  | 6.1%                   | 1.5%                 | 1.1%                    | 0.8%                 | 0.5%                     | 2.8%              | 4.2%               | -          | -    | 1.7%                                | 1.6%           | -     |
| <b>H&amp;L</b>  | 10,947                 | 9.5%                   | 1%                   | 0.6%                    | 0.5%                 | 0.2%                     | 0.4%              | 4.2%               | 0.2%       | 0.2% | 0.2%                                | 4.6%           | -     |
| <b>I, J &amp; C</b>   | 1,930                  | 5.1%                   | 3.8%                 | -                       | -                    | -                        | 0.5%              | 5.2%               | 1%         | -    | 1.1%                                | -              | 0.3%  |
| <b>Kintyre</b>  | 4,096                  | 3.8%                   | 1.4%                 | 0.9%                    | 0.6%                 | 0.3%                     | 2.3%              | 2.6%               | -          | 0.9% | 1.1%                                | 1.7%           | -     |
| <b>Lorn</b>   | 8,197                  | 4%                     | 1.1%                 | 0.8%                    | 1.1%                 | 1.1%                     | 2.4%              | 4.5%               | -          | 1.6% | 3.2%                                | 2%             | -     |
| <b>Mid Argyll</b>   | 5,278                  | 3.7%                   | 2%                   | -                       | 1.1%                 | 0.3%                     | 3.1%              | 2.8%               | 0.3%       | 0.3% | 2%                                  | 1.4%           | -     |
| <b>Mull &amp; Iona</b>  | 1,837                  | 5.1%                   | 4.5%                 | 0.3%                    | 0.3%                 | 1%                       | 2.6%              | 1.6%               | 0.3%       | 0.3% | -                                   | 0.9%           | -     |

Source: Argyll & Bute HNDA Household Surveys, Research Resource, 2018 & 2019



**TABLE 7.3: Support Services Required but not received, by HMA**

| HNDA Survey Q66: In terms of care/support services provided, do you or anyone in the household currently need these services? (% stating services required) |                        |                        |                      |                         |                      |                          |                   |                    |            |      |                         |                |       |
|---|------------------------|------------------------|----------------------|-------------------------|----------------------|--------------------------|-------------------|--------------------|------------|------|-------------------------|----------------|-------|
| HMA   | Weighted survey sample | Type of Support        |                      |                         |                      |                          |                   |                    |            |      |                         |                |       |
|   |                        | Home care/ (housework) | Home care (personal) | Meals delivered to home | Day care/ day centre | Respite/ short term care | OT/ physiotherapy | Help with shopping | Night care | TEC  | Voluntary organisations | Carers Support | Other |
| Bute  | 4,352                  | 0.3%                   | -                    | -                       | -                    | -                        | -                 | 0.3%               | -          | -    | -                       | -              | -     |
| Coll & Tiree  | 685                    | -                      | 0.6%                 | -                       | -                    | -                        | -                 | -                  | -          | -    | -                       | 0.6%           | -     |
| Cowal   | 8,102                  | 0.5%                   | -                    | 0.6%                    | -                    | -                        | -                 | -                  | -          | -    | -                       | -              | -     |
| H&L*  |                        |                        |                      |                         |                      |                          |                   |                    |            |      |                         |                |       |
| I, J & C  | 1,930                  | 0.9%                   | 0.3%                 | -                       | -                    | -                        | 0.3%              | -                  | -          | -    | 0.3%                    | 0.5%           | -     |
| Kintyre   | 4,096                  | 0.3%                   | -                    | -                       | -                    | -                        | -                 | 0.3%               | -          | -    | -                       | -              | -     |
| Lorn  | 8,197                  | -                      | -                    | -                       | -                    | -                        | -                 | -                  | -          | -    | -                       | -              | -     |
| Mid Argyll  | 5,278                  | 0.3%                   | -                    | -                       | -                    | -                        | 0.3%              | -                  | 0.3%       | 0.3% | -                       | -              | -     |
| Mull & Iona   | 1,837                  | 0.6%                   | -                    | 0.3%                    | 0.3%                 | -                        | 1.3%              | -                  | -          | -    | 0.3%                    | 0.3%           | -     |

Source: Argyll & Bute HNDA Household Surveys, Research Resource, 2018 & 2019

\*NB. No unmet need for specialist forms of support services were identified in the Helensburgh & Lomond Household Survey. Over 90% of respondents stated they had no unmet need, and the remaining respondents stated that they did not know if they needed any additional support (8.9%). Around 11% of households in this HMA however currently do receive some form of support service, as outlined in the previous table.

Based on the Household Survey results, there is evidence of some degree of unmet need for care and support provision particularly on the islands of Islay, Jura & Colonsay, and Mull & Iona. Home Care services (e.g. housework, cooking and cleaning) are required in most areas of Argyll and Bute; whilst the highest single unmet need is for Occupational Therapist/Physiotherapy support on Mull & Iona. Nevertheless, according to the survey, the level of unmet need for care and support is generally low; on average less than 1% of the population as a whole.

7.5 Analysis of the HOMEArgyll waiting list provides further evidence of support needs in the RSL sector. Note: there may be duplication across care and support categories, with applicant households having multiple needs.

**TABLE 7.4: HOME Argyll Waiting List Care & Support Needs, 2020**

| <b>(Selected) Need/Issue</b>  | <b>Number</b> | <b>% of Total active list</b> |
|---|---------------|-------------------------------|
| Medical condition affected by current circumstances                 | 844           | 34.20%                        |
| Need to move to be nearer family/friends to give or receive support | 565           | 22.90%                        |
| Mental health affecting housing                                     | 540           | 21.90%                        |
| Regular care/ Support/Help  | 422           | 17.10%                        |
| Significant health issue  | 399           | 16.20%                        |
| Needs assistance getting to shops                                   | 336           | 13.60%                        |
| Needs support or assistance living in home                          | 304           | 12.30%                        |
| Severe health issue   | 174           | 7.10%                         |
| Need to be near specialist services                                 | 119           | 4.80%                         |
| Urgent health issue   | 41            | 1.70%                         |

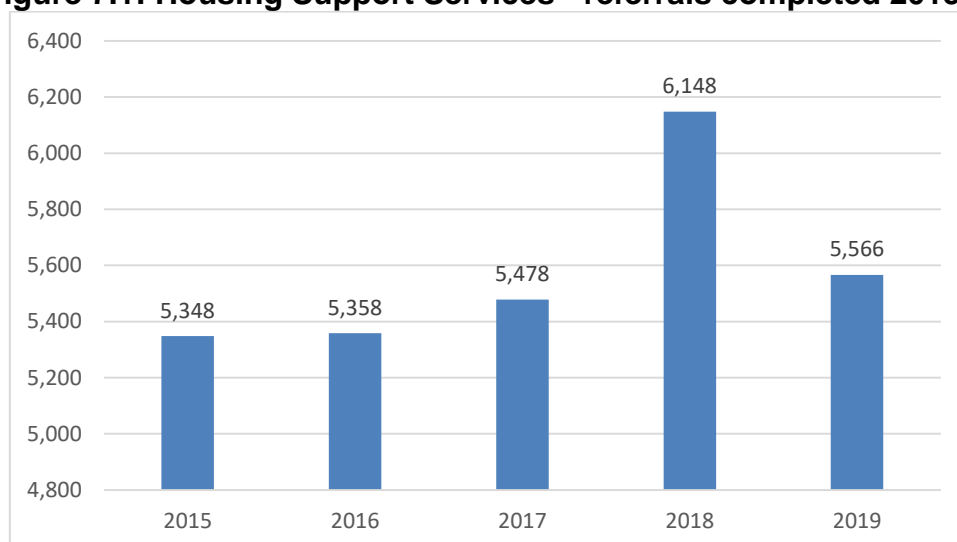
**Source: Abris CHR Report, 2020**

This indicates that there remains a significant level of ongoing need for a range of support and care services in the area. Over a third of applicants have a medical condition that is affected by their current housing circumstances. Almost a quarter of applicants (23%) say they need to relocate to be nearer family or friends either to give or receive support. Over 17% require regular care, support or assistance; and over 12% need support or assistance living in their home. Waiting list analysis from the previous HNDA suggests that the number of applicants with any of these particular needs have increased substantially since 2015: with those who need support or assistance living in home, for instance, increasing by over 10%; while those whose mental health is adversely affected by their current housing circumstances increased by 136%.

## 7.6 Care & Repair (other than disabled adaptations)

7.6.1 In addition to the provision of major adaptations (outlined separately in this paper), the Argyll and Bute Care & Repair Service (ABC&R) carries out a range of other housing support and improvement services, including small private repairs and handyman works. Over the five year period from 2015 to 2019, the Care & Repair Service completed almost 28,000 housing support service referrals; or an average of 5,580 works per financial year.

**Figure 7.1: Housing Support Services - referrals completed 2015-19 (FY)**



Source: Argyll & Bute Care & Repair Service Annual Report, June 2020

7.6.2 This total completed ABC&R referrals included the following works.

**TABLE 7.5: Annual Completed Referrals by support service, 2015-2019 (FY)**

| Housing Support Service                    | 2015  | 2016  | 2017  | 2018  | 2019  | Total  |
|--|-------|-------|-------|-------|-------|--------|
| Telecare Support                           | 2,508 | 2,707 | 2,785 | 3,186 | 3,214 | 14,400 |
| OT Support chargeable works                | 665   | 740   | 728   | 761   | 648   | 3,542  |
| OT Support non-chargeable referrals        | 304   | 260   | 240   | 305   | 225   | 1,334  |
| Free safety, security & small repair works | 1,469 | 1,276 | 1,347 | 1,523 | 1,261 | 6,876  |
| Chargeable Private small repairs           | 421   | 373   | 356   | 364   | 203   | 1,717  |

Source: Argyll & Bute Care & Repair Service Annual Report, June 2020

7.6.3 Apart from telecare support which has seen a steady growth year on year, other activities tended to show a decline in 2019, and this was generally compounded in 2020/21 due to the impact of Covid-19 and the lockdown restrictions and safety measures which affected home visits and installation work. It is likely that demand for these services could increase once more in the future, given the ageing profile of the population. ABC&R has also been administering the Scottish Government's HEEPS: Equity Loan Scheme, which provides loans to homeowners for energy efficiency improvements and associated repairs, with mixed results to date.

## 7.7 Other particular needs: Learning Disabilities

7.7.1 People with learning disabilities are often among those with the poorest health in Scotland, and on average have a life expectancy 20 years lower than that of the general population. A learning disability is defined in the primary strategic document The Keys to Life, as a “significant lifelong condition which is present prior to the age of 18 and which has a significant effect on a person’s development. People with a learning disability will need more support than their peers to understand information; learn skills; and lead independent lives”. The majority tend to live in mainstream housing, many in the private sector, and this is their general preference however there is often a need for additional care and support to enable them to sustain independent living.

7.7.2 The strategic and policy framework for this client group is set out in the following primary national and international documents:

- The Keys to Life, 2013, and subsequent Implementation Framework, 2015;
- A Fairer Scotland for Disabled People, Scottish Government, 2016;
- United Nations Convention on the Rights of Persons with Disabilities

The overarching vision for people with learning disabilities and complex needs within Scotland is that everyone is supported to lead full, healthy, productive and independent lives in their communities, with access to a range of options and life choices. This would include appropriate housing options, with suitable care and support services, in the area of their choice.

“Coming Home – A Report on Out-Of-Area Placements and Delayed Discharge for People with Learning Disabilities and Complex Needs” was published by the Scottish Government in November 2018 and contained 7 recommendations. One of the recommendations is of particular relevance to Housing Services:-

“Identify suitable housing options for this group and link commissioning plans and housing plans locally”.

Argyll & Bute Council Housing Services recognise the importance of working with the Health and Social Care Partnership (HSCP) to ensure that the housing and support needs of people with learning disabilities and complex needs are met.

7.7.3 The following tables summarise the numbers of adults with learning disabilities known to the local authority. The overall number has decreased from 374 in 2014 to 330 in 2019 (-12%). All age groups have also seen a decrease in numbers over that period apart from those aged 18-20 which have more than doubled, from 10 in 2014 to 24 in 2019 (+140%).

**Table 7.6: Adults with learning disabilities known to local authorities by age**

| Argyll & Bute | 16-17 | 18-20 | 21-34 | 35-44 | 45-54 | 55-64 | 65+ | Total |
|---------------|-------|-------|-------|-------|-------|-------|-----|-------|
| MALE          | <5    | 17    | 69    | 31    | 29    | 20    | 21  | 189   |
| FEMALE        | 0     | 7     | 40    | 17    | 27    | 20    | 30  | 141   |
| A&B Total     | <5    | 24    | 109   | 48    | 56    | 40    | 51  | 330   |

Source: Learning Disability Statistics Scotland 2019

Argyll and Bute has a lower rate of adults with learning disabilities per 1,000 of the population compared to Scotland as a whole; and the variation between the two has remained relatively consistent in recent years.

**Table 7.7: Adults with learning disabilities – local and national rates compared**

| Area          | Adults known per 1,000 population |      |      |      |
|---------------|-----------------------------------|------|------|------|
|               | 2019                              | 2014 | 2013 | 2009 |
| Argyll & Bute | 4.5                               | 5.1  | 5.3  | 5.0  |
| Scotland      | 5.2                               | 6.0  | 5.9  | 6.5  |

Source: Learning Disability Statistics Scotland 2019

Around 23% of these known cases (77 persons) are diagnosed as being on the Autism Spectrum. Just over 38% (126 persons) live with a family carer which is above the Scottish figure of 31%. In terms of the type of accommodation occupied, the following table illustrates that the majority (67%) live in mainstream accommodation while 18% live in supported accommodation and 11% occupy registered care homes.

**TABLE 7.8: Accommodation Type, Known Adults with Learning Disabilities**

| ARGYLL & BUTE  | Mainstream accommodation: |                 | Supported Accommodation | Registered Adult Care Homes | Other | Not known |
|----------------|---------------------------|-----------------|-------------------------|-----------------------------|-------|-----------|
|                | with support              | with no support |                         |                             |       |           |
| Adults with LD | 126                       | 94              | 61                      | 35                          | 14    | 0         |
| % of Total     | 38.2%                     | 28.5%           | 18.5%                   | 10.6%                       | 4.2%  | 0%        |

Source: Learning Disability Statistics Scotland 2019

Since 2014 the numbers in supported accommodation dropped by 59%, from 149 to 61. Conversely, the numbers in mainstream housing with support increased from 72 to 126 (+75%).

Current figures are not available for the location of adults with learning disabilities by urban-rural classification, however historically the majority of these have tended to live in remote rural areas or remote small towns (e.g. 65% in 2014, compared to only 20% in “other urban area” at that time).

This presents significant problems in terms of the delivery of co-ordinated care and support services. Consultation with social workers and other HSCP service providers indicates that a key issue continues to be the difficulty in recruiting and retaining suitable staff to support individuals particularly in the more rural and island communities of Argyll and Bute.

7.7.4 The HOMEArgyll waiting for RSL tenancies in 2020, recorded 70 households or individuals who identified as having learning disabilities, amounting to almost 3% of the total applicants. 37 of these applicants were single persons; 9 were families (either couples with children or single parents); and 2 comprised couples with no children; while 22 did not state their household type or were recorded as “other”. The majority of applicants (67%) required one bed properties, and 20% required 2 bedroom properties; while 13% required 3 or more bedrooms.

The majority of applicants with learning disabilities sought Lorn, Cowal or Helensburgh & Lomond as first area of preference.

**Table 7.9: HOMEArgyll Applicants identifying with learning Disabilities, by HMA, 2020**

| HMA              | Lorn | Cowal | H&L | Kintyre | Mid Argyll | Islay, Jura & Colonsay | Mull & Iona | Coll & Tiree |
|------------------|------|-------|-----|---------|------------|------------------------|-------------|--------------|
| Total Applicants | 19   | 16    | 15  | 8       | 5          | 5                      | <5          | <5           |

Source: Abris CHR Report (all active applicants), April 2020

Only 10 of the 70 applicants received the maximum 200 points according to the HOMEArgyll allocation policy. In terms of accommodation types, the vast majority (66) would accept mainstream housing. 15 included housing with support in their choices; 5 included amenity housing for the elderly; and less than 5 sought wheelchair housing or sheltered housing for elderly.

7.7.5 In addition, 46 HOMEArgyll applicants identified as having an autistic spectrum condition, and 13 of these also identified as having learning difficulties. Of the 33 applicants on the autistic spectrum but who did not have learning difficulties, all but 1 would accept mainstream housing; while only 5 also sought housing with support; and less than 5 sought wheelchair, amenity or sheltered accommodation. 10 of these applicants chose Helensburgh & Lomond as their area of preference, and 9 chose Lorn, while 6 selected Cowal. Mid Argyll, Kintyre, and Islay, Jura & Colonsay each had less than 5 applicants. The main need was for 1 bedroom homes (55%).

7.7.6 In this authority there are two specialist RSLs (outwith the HOMEArgyll partnership) whose primary client group includes persons with learning disabilities, while the other RSLs do also accommodate this group in mainstream or specialist housing.

Key Housing Association provides schemes in Dunoon (22 units) and Helensburgh (11 units), comprising mixed forms of supported and/or shared accommodation, including a proportion of wheelchair housing, which range in size from 2 – 5 bedrooms; with key workers providing individual support, as well as some outreach support to mainstream properties.

Enable also manages a unit, leased from Cube housing association, which provides 6 bedrooms for a maximum of 11 persons in Dunoon; plus 4 properties leased from Dunbritton Housing Association in Helensburgh with capacity for 11 individuals, mainly catering to this client group. These specialist associations operate on the basis of referrals and do not maintain waiting lists for their properties.

7.7.7 However, service providers have identified a level of unmet need from persons currently placed out with Argyll and Bute, usually at considerable costs, due to the lack of suitable local accommodation within the authority area. Location is crucial in this context, as the support infrastructure must be in place to support these tenants, sometimes with complex needs. For instance, Trust Housing Association has historically identified a number of long term voids and a lack of demand for certain of their schemes, particularly on the islands, and they are keen to explore the potential of utilising these as homes for this particular client group. Unfortunately, however, council services believe that the location of these schemes may not be best suited given the difficulty of attracting staff in those communities to provide necessary support, as well as issues around limited transport links and access to amenities and other services.

7.7.8 This issue was highlighted in the aforementioned Scottish Government's "Coming Home: A report on out-of-area placements and delayed discharge for people with learning disabilities and complex needs" (November 2018). This found that 30 HSCP authorities in Scotland had over 700 persons placed out of their home area; and of these, Argyll and Bute had the highest individual number, with 53 placements. The main reason for out of area placements for this client group was that the required specialist services were not available locally, however family choice was also a significant factor. For a proportion of persons who had not been placed out of area through choice, repatriation was not actually required. Argyll and Bute had around 10 individuals who did require repatriation at the time although in a similar number of cases the need for repatriation had not yet been agreed. While numerical cases are relatively few, resolving this specific need remains a high priority for Housing Services.

### 7.7.9 Stakeholder consultation and engagement

Engagement with service providers and client groups for care and support services has included the detailed HNDA consultation with local households referred to in previous templates (0.8% of respondents identified as having learning difficulties); as well as direct engagement with Learning Disabilities service providers, representatives and clients as part of the ongoing strategic and operational processes established in recent years across Housing, Health and Social Care sectors. The Council Housing Service is a key partner with HSCP and are represented at the Strategic Planning Group within the HSCP. Housing Services staff also attend specific working groups within the HSCP, and the Learning Disability Steering Group is one such group. This Group was set up in September 2020 and meets on a monthly basis. It is attended by health, social care, telehealth and housing staff with a view to planning and reviewing appropriate placements within the community. The standing agenda contains an item – ‘Core & Cluster/Housing Update’ which has a focus on housing and the progress made in delivering suitable housing to meet the needs of people with learning disabilities and complex needs. This provides an opportunity to have a strategic overview of needs identified in each locality and the progress being made to deliver accommodation which meets these needs. The Learning Disabilities Steering Group aims to align the LHS with the national Keys to Life strategy, and the local HSCP Strategic Plan.

The various consultation exercises for the HNDA and LHS have allowed a range of individuals and agencies to express their views and raise particular issues. Some of the main areas of comment included:

- Not enough care/ nursing homes for elderly
- Provide more sheltered accommodation
- Better facilities needed for the elderly
- Employ more carers/ staff/ trained better
- Housing costs too expensive e.g. heating/ electricity
- Give more help/ support to elderly/ listen to our needs
- Better/ more housing needing built e.g. for elderly/ youngsters/ families
- Improved transport services
- More support for home care/ people wanting to staying in own home

All HNDA Household survey respondents with learning difficulties (20 in total) stated that they were happy with their home/area/neighbourhood, and were positive about their community. Nevertheless two respondents also indicated that the current property did not suit their particular needs very well; possibly indicating that these residents prioritised the familiar and acceptable over absolute ideal matching of home with health need. The Council will continue to monitor these particular needs and engage with HSCP as well as clients and their families as early as possible to plan for future provision within both existing stock and any new build projects included in the SHIP; with a particular focus on suitable “core & cluster” models.



## **8.0 Template 6: Site Provision (Gypsy/Travellers and Travelling Show People)**

See HNDA Technical Supporting Paper 1009: Gypsy/Traveller Housing Needs (Council Housing Services, October 2020) for full details of the strategic framework, current provision, analysis of unmet need, and results of the extensive primary engagement and consultation carried out with this client group. The following section presents a summary of the key findings from that report which is available on the council website.

### **8.1 National policies**

#### **8.1.1 Key documents/policies in relation to Gypsies/Travellers and Travelling Show People include:**

- Scottish Government Equality Outcome (Equality Act 2010)
- Race Equality Action Plan, Scottish Government, 2017
- Social Housing Regulator/ Scottish Social Housing Charter & ARC
- Equal Opportunities Committee inquiries
- Scottish Planning Policy
- Improving Gypsy/Traveller Sites: Guidance on minimum site standards and site tenants' core rights and responsibilities, Scottish Government, May 2015
- Improving the lives of Gypsy/Travellers: 2019-2021 -- joint action plan Scottish Government & COSLA, October 2019.
- The COVID-19 Framework to support Gypsy/Traveller communities, Scottish Government, December 2020
- Housing to 2040, Scottish Government, 2020/21
- Evidence Review: Accommodation Needs of Gypsy/Travellers, Scottish Government, October 2020

8.1.2 The Equality Act 2010 identified Gypsy/Travelers as an ethnic minority group and this status is open to the same rights and protection as other ethnic groups included in the Act. Furthermore, the Scottish Parliament's Equal Opportunities Committee inquiries led to specific recommendations including a required standard for Gypsy/Traveller site facilities; and since 2014 the Scottish Housing Regulator is responsible for social landlords who manage Gypsy/Traveller sites. They are also a source of information on satisfaction with site quality, the number of pitches; and average weekly rent for permanent sites.

8.1.3 Scottish Planning Policy also considers Gypsy/Travellers within their statement on national land use planning matters, and highlights that this minority group have specific housing needs, often requiring sites for caravans and mobile homes. It makes reference to the accommodation needs of Gypsy/Travellers and how they should be considered as part of the housing need and demand assessment and local housing strategies; and subsequent guidance on the preparation of HNDAs and the LHS make this an explicit requirement.

8.1.4 The joint Action Plan published by COSLA and the Scottish Government in 2019 aims to: provide more and better accommodation for Gypsy/Travellers; improve their access to public services; secure better incomes in and out of work; tackle racism and discrimination; and improve Gypsy/Traveller representation.

## **8.2 Local policies/strategies**

8.2.1 The primary local documents within Argyll and Bute include:

- Local Housing Strategy 2016-2021, Argyll & Bute Council, 2016
- ACHA's Gypsy/Traveller Strategy 2019-2022, ACHA, 2019
- Policy on the management of unauthorised camping by Gypsy/Travellers, Argyll & Bute Council, 2006

8.2.2 ACHA remains the only RSL in Scotland which owns and manages travelling persons' sites (following transfer of ownership from the Council in 2006) and in 2019 they published their latest Gypsy Travellers' Strategy with an aim to 'promote equality and better understand the many issues around the provision of services for the Gypsy Traveller community'. To achieve this ACHA will work in partnership with Gypsy/Travellers and local and national bodies to see continual improvement in the services they provide for Gypsy/Travellers. The strategy places a strong emphasis on the landlord carrying out regular and meaningful consultation with Gypsy/Travellers, who live in both the sites and also in mainstream housing. This will be partly achieved through the Gypsy/Traveller Annual Survey, which will help inform the Gypsy Traveller Action Plan that ACHA work towards, in line with the national action plan and strategic framework for this client group. The local strategy also underlines the importance of ACHA working in partnership with other organisations to help serve the Gypsy/Traveller community. ACHA also report regularly on the Gypsy/Traveller Twice-Yearly Count on behalf of the council.

8.2.3 In addition to its duties in respect of the HNDA and LHS, the Council has a statutory duty to maintain a policy for the management of unauthorised camping by Gypsy/Travellers. The current policy outlines a number of procedures including unacceptable encampment locations; a code of expected behaviour; a legal context; communications and media relations; and anti-social behaviour measures. This policy sits outwith Council Housing Services.

## **8.3 Land Needs**

This section relates to either permanent or temporary (transit) sites and pitches, for caravans and mobile homes, with communal facilities, which may be required to address the accommodation needs of Gypsy/Travellers and/or

Travelling Show People. This will include sites suited for residential and yard storage/ maintenance areas, as well as ensuring appropriate access to the sites. The primary sites are likely to be “official” public sector provision, but could also include private sites and parks. It should be noted that an increasing proportion of Gypsy/Travellers in Argyll and Bute do seek, or are required by circumstances to consider, permanent housing in mainstream “bricks and mortar” homes which are delivered and accessed through standard channels and allocation procedures. This has included bespoke, specially adapted and purpose-designed homes for families with particular needs which cannot be addressed on existing sites. The Scottish Government has published formal guidance on site and pitch standards, in terms of space, amenities and so on, and all landlords are required to ensure these are met in full.

#### **8.4 Care and support needs**

Gypsy/Travellers require similar access to a range of public services as do the rest of the resident population, including health and education. They may also require additional care and support and in Argyll and Bute this is co-ordinated through the work of dedicated posts of Advanced Nurse Vulnerable Groups with a remit for this client group. Further specialised support services are delivered by the national organisation MECCOP, with a local base in the Oban area.

#### **8.5 Key client group**

8.5.1 This provision is primarily aimed at those defining themselves as Gypsy/Travellers. This is not a homogenous group but it is now recognised as a distinct ethnic sector of the population. As defined in the Scottish Government’s Local Housing Strategy Guidance, the term Gypsy/Traveller refers to a range of distinct groups including Romanies, Scottish, Irish, English and Welsh Travellers, who regard the travelling lifestyle as part of their cultural and ethnic identity. Whilst there is no consensus on a generic description, and the statutory term Gypsy/Traveller is used throughout the document, we acknowledge that some members of the community may take offence to the ethnic term ‘Gypsy’ and some would prefer to self-identify as ‘Scottish Travellers’.

8.5.2 Travelling Show People are not an ethnic minority and do not seek this status, however they do have a distinctive cultural and historic identity and are explicitly identified as a key client group in their own right, distinct from Gypsy/Travellers, in the HNDA and LHS guidance.

## 8.6 Evidence

8.6.1 The 2011 census was the first to include Gypsy/Travellers as an ethnic minority category and remains the main source of information on people identifying themselves as Gypsy/Travellers. The census recorded that there were 4,212 Gypsy/Travellers living in Scotland although this number is still believed to be an underestimate as it is unlikely that the census was able to capture all the Gypsy/Travellers living on unauthorised sites, or those those living in mainstream housing who chose not to disclose their ethnicity. According to the 2011 census there were 96 Gypsy/Travellers living throughout Argyll and Bute, which is just 2% of the Scottish total. The count is split evenly by gender and summarised in the table below.

**TABLE 8.1: Gypsy/Traveller population, 2011**

| Area          | Male  | Female | Total |
|---------------|-------|--------|-------|
| Argyll & Bute | 47    | 49     | 96    |
| Scotland      | 2,082 | 2,130  | 4,212 |

Source: 2011 Census

### 8.6.2 Current provision

There are 2 official sites in Argyll & Bute, located at Duncholgan (Lochgilphead) and Bayview (formerly known as Ledaig, north of Oban, near Benderloch). These sites have been owned and managed by Argyll Community Housing Association (ACHA) since the transfer of all Council housing (including official sites) in November 2006. The two sites provide 22 pitches in total, however this capacity was recently reduced to 9 effective pitches available for let due to changes to site licences and fire regulations relating to the spacing between caravans/trailers. This would now be lower than the Scottish average of 14 pitches per local authority area. However, rent for both sites was charged at £52.17 per week, in 2020, which is substantially below the Scottish average of £73.25 per week (30% lower). The Council continues to conduct a twice yearly count of each site, in liaison with ACHA, and a breakdown of the number of pitches for each site as well as site occupancy is noted in the Table 8.2 below.

**TABLE 8.2: Official Sites – Annual Capacity & Occupancy (as of March 31<sup>st</sup>)**

| Year       | Duncholgan<br>(Lochgilphead) |                  | Bayview<br>(Oban/Lorn) |                  | Argyll & Bute |                  |
|------------|------------------------------|------------------|------------------------|------------------|---------------|------------------|
|            | Total pitches                | Pitches Occupied | Total pitches          | Pitches Occupied | Total pitches | Pitches Occupied |
| March 2016 | 14                           | 10               | 8                      | 7                | 22            | 17               |
| MARCH 2017 | 14                           | 8                | 8                      | 8                | 22            | 16               |
| MARCH 2018 | 14                           | 10               | 8                      | 8                | 22            | 18               |
| MARCH 2019 | 14                           | 7                | 8                      | 4                | 22            | 11               |
| MARCH 2020 | 14                           | 6                | 8                      | 3                | 22            | 9                |
| MARCH 2021 | 5*                           | 5                | 3*                     | 3                | 8             | 8                |

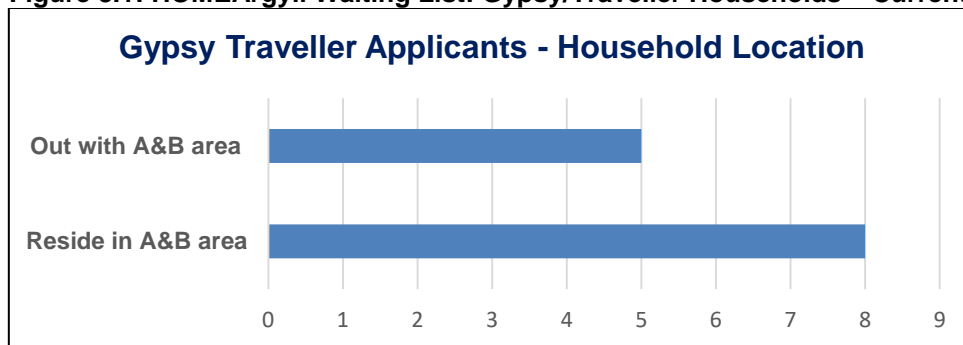
**Source: Council/ACHA Twice-Yearly Count**

(\*NB. There are 9 pitches at Dunchologan and 5 at Bayview no longer available for letting.)

The former site at Torlochon near Dunoon has been unoccupied since 2014 and ACHA finally closed the site, following consultation with the client group themselves, local and national representatives, the council and the Scottish Government; bearing in mind the public sector duty to maximise assets effectively.

- 8.6.3 Occupancy of the sites has declined in recent years both in terms of households and individual persons. In 2017 for instance there were 15 households and 47 individuals on both sites; but in 2020 this had reduced to 9 households and 18 individuals. Discounting pitches that are currently unavailable for letting, both official sites are at full available occupancy. In addition, ACHA recorded two unauthorised caravans on one of these sites, not accounted for in official statistics. There is no effective waiting list for access to the sites generally (3 HOMEArgyll applicants had selected the option of accommodation on a Gypsy/Traveller site but also selected other options, including mainstream, general needs housing, and none identified as gypsy/travellers, therefore it might be inferred that these applicants were not genuinely seeking accommodation on a site) and no one has been turned away from the sites in recent years. There is a practical assumption therefore, that Argyll and Bute has an appropriate supply of permanent sites.
- 8.6.4 The HOMEArgyll common housing register includes “Gypsy/Traveller” as an ethnic designation for applicants to mainstream “bricks and mortar” accommodation as well as to designated sites. As at June 2020 the active housing list had **13** households who have recorded their Primary Ethnic Origin as Gypsy/Traveller. Eight of those households currently reside in Argyll and Bute. Three reside elsewhere in Scotland and two in England.

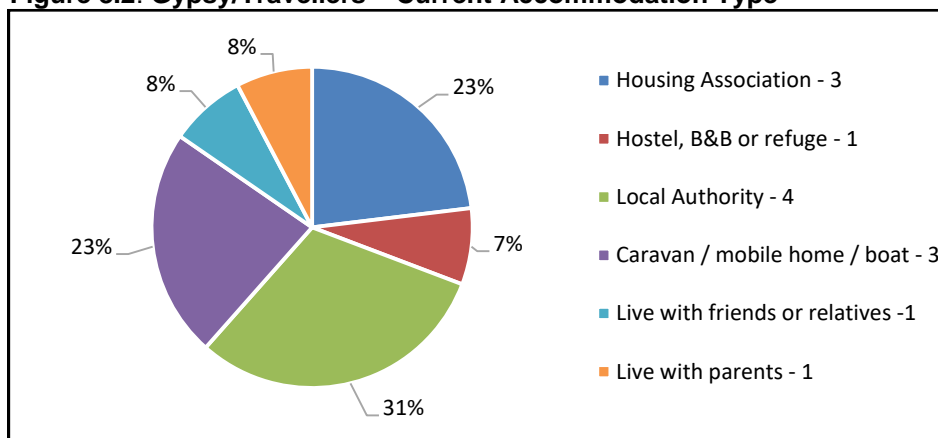
**Figure 8.1: HOMEArgyll Waiting List: Gypsy/Traveller Households – Current location**



Source: HOMEArgyll CHR Report, 2020

- 8.6.5 The following chart shows that the majority of Gypsy/Traveller applicants currently stay in either Local Authority or Housing Association accommodation, or in their own caravan/mobile home/boat.

**Figure 8.2: Gypsy/Travellers – Current Accommodation Type**



Source: HOMEArgyll CHR Report, 2020

8.6.6 From the HOMEArgyll housing list in June 2020, 6 of the 13 Gypsy/Traveller households identified themselves as either homeless or threatened with homelessness. 4 of these were in the Argyll and Bute area and 2 were out with the area. However, only 1 Gypsy/ Traveller household was recorded as statutory homeless in Argyll and Bute during this period of time.

8.6.7 In addition, Bield Housing Association maintains its own waiting list for specialist properties in the area, and on average annually there has been 1 or 2 Gypsy/Traveller households registered on this list in recent years.

8.6.8 In relation to homelessness data, there is again a degree of inconsistency regarding applicants or households identifying as gypsy/travellers, as the following table indicates.

**Table 8.3: Homeless Annual Statistics 2015/16 – 2019/20**

| HL1 Question  | 2015/16 | 2016/17 | 2017/18 | 2018/19 | 2019/20 |
|---|---------|---------|---------|---------|---------|
| Applicant or partner describe themselves as a Gypsy/Traveller | 10      | 19      | 10      | 14      | 10      |
| Ethnic origin – White Gypsy/Traveller                         | 1       | 4       | 0       | 1       | 0       |

Source: Scottish Government Annual HL1 data

Local professional judgement suggests that the lower figures are more credible in terms of Gypsy/Travellers formally presenting as Homeless, but the discrepancy may also suggest that the Scottish Government ethnicity

classification and questionnaire format require further review and clarification in order to improve the quality of data for purposes of analysis.

- 8.6.9 There is no evidence that privately owned sites are used extensively or regularly by Gypsy/Travellers within this authority and there are none exclusively provided for this client group. Unauthorised, temporary encampments are however an occasional occurrence, with the highest concentration, anecdotally, being in laybys around the shores of Loch Lomond; while consultation with Forestry Land Scotland (FLS) officers identified camps have also been noted in recent years in car parks in Mid Argyll, and less frequently on Mull or in Lorn, on an ad hoc, irregular and short-term basis. Robust data is not recorded on this matter by any service or external agency, however anecdotal consultation with council officers, the FLS and local police suggest that this has not been a significant or unmanageable issue for Argyll and Bute; and there is no expressed demand or assessed requirement for additional, interim, transit site provision or “negotiated stopping places” in the area.
- 8.7 In terms of care and support needs, the posts of Advanced Nurse - vulnerable groups, with dedicated remit for Gypsy/Travellers, together with the national agency MECCOP provide an important and valued range of advice and support services to this client group. However, the often transient and unsettled nature of these households and additional needs that can be complex, mean that there are significant challenges in delivering consistent and effective health and care services. Housing Support Service providers recorded only 4 households in receipt of support at the end of 2019 that identified themselves as gypsy/travellers.

## 8.8 **Travelling Show People**

Travelling Show People are a separate and distinct community from Gypsy/Travellers, and may have different needs. Show People require permanent sites for accommodation and storage and maintenance of equipment. Currently there is no authorised site provision exclusively for Travelling Show People in Argyll and Bute and the Council has not identified any households within this category during our research. In response to specific consultation in March and May 2020 the Showmen’s Guild has not provided any evidence to contradict the council’s view that there remains no unmet need in this area at present. While the extreme, and unique circumstances pertaining to restricted travel in 2020/21 as a result of the impact of Covid-19 makes any snapshot data analysis unreliable at this time, historic consultation with the Guild has consistently indicated that it is the case

that there is no unmet need or demand from this group. The situation will continue to be monitored throughout the duration of the next LHS.

## **8.9 External stakeholder consultation & engagement**

**8.9.1** ACHA carries out an annual survey of site residents which records positive levels of satisfaction among these tenants. This has helped inform the HNDA and LHS. In addition, a dedicated in-house study was carried out by the council in 2019/20 which involved surveys, face-to-face interviews and group discussions with residents of the official sites, as well as contact with relevant service providers, agency representatives and the local MSP. A detailed report, HNDA Technical Supporting Paper 09, has been produced as background to this section of the HNDA and will be available on the Council website and on request from Council offices.

**8.9.2** Key site issues raised during consultation, included:

- There is need for further investment/upgrading of both sites overall
- Improvements required to access road at Dunchologan due to poor condition, lack of passing spaces and no lighting
- Lack of public transport / bus stop near to sites – unsafe for residents to access by public transport
- More open space between units and pitches
- Improvements to the environment and amenity of the sites
- The need to sustain and enhance a more positive relationship between landlord (ACHA) and site residents

**8.9.3** While the annual ACHA satisfaction survey for tenants on the official sites suggested consistent and high levels of satisfaction, the findings of the primary stakeholder engagement carried out for the HNDA (both in written survey responses and during focus groups) suggest there are some areas of dissatisfaction and a degree of persistent unmet need. There was a consensus in consultation responses that there is **not** enough site provision in the area; only one respondent felt there was sufficient supply. Focus group discussions also indicated that there was a need for additional site pitches. Given the limited or contrary evidence in terms of waiting lists and secondary datasets, of requirements for substantial additional site provision, it is the view of the council that a moderate response would be appropriate and that expanding capacity at existing sites, where possible back to historic levels, would be sufficient to meet any potential demand.

**8.9.4** In summary, the key recommendations from the local Gypsy/Traveller study are as follows:-

- 1.** Establish an 'Argyll and Bute Gypsy/Traveller Working Group' with internal and external partners and members of the community to take forward work to improve provision and meet the needs of



Gypsy/Travellers in Argyll and Bute and also meet the aspirations of the Scottish Government/COSLA *Improving the Lives of Scotland's Gypsy/Travellers (2019-2021)* Action Plan.

2. Work jointly with ACHA and Gypsy/Travellers to take forward plans to upgrade existing sites.
3. Explore additional accommodation for varying needs.
4. Review the common housing application and allocation processes to take into account the diverse needs of this community.
5. Develop a formal protocol to allow more robust information collection on the needs of transient households. A more co-ordinated approach is also required to engage and provide support to those Gypsy/Traveller households and assess their housing needs.
6. Identify alternative ways to identify and engage with Travelling Showpeople.
7. Ensure that Gypsy/Traveller households are able to access housing advice and support in appropriate formats
8. Raise the awareness of Gypsy/Traveller cultural needs across housing organisations and support agencies through specialist training
9. Consider a review of how Gypsy Travellers record their housing needs on the HOMEArgyll waiting lists to reflect more accurately demand for the sites. This review should consider provision of alternative ways to apply for site, due to literacy issues and reluctance of the community to register their needs.

## 9.0 Key issues for the LHS and LDPs

| LHS                                   | Specialist Provision -<br>Key Issues Identified in the HNDA  |
|---------------------------------------|--|
| <b>Accessible and adapted housing</b> | <p>1. There are roughly 4 applicants per available let in the RSL accessible housing stock, and a clear indication from consultation that persons with low to medium dependencies prefer mainstream accommodation. Current building standards include enhanced accessibility and adaptability standards; and the vast majority of affordable new builds delivered via the SHIP are compliant with barrier-free, lifetime standards, which has delivered significant improvements in the overall accessibility profile of the stock. Needs should continue to be monitored on a site by site basis; and the overall provision of a range of models of specialist housing (including wheelchair and sheltered/supported accommodation) should be increased in line with current targets i.e. 10% of total new builds delivered via the SHIP (that is, over and above the accessible mainstream housing). Within that 10% target, around half i.e. 5% of total new builds should be fully wheelchair accessible and habitable.</p> <p>2. There is evidence of ongoing need and demand for adaptations to existing properties in both the private and social rented sectors. Research suggests less than 2% of households may require some form of adaptation, which equates to over 700 across Argyll &amp; Bute. This is likely to increase as the population ages. Historically, public sector investment in adaptations has managed to address private sector need but more recently there is evidence of delays and lengthening waiting times in this sector and current levels of Private Sector Housing Grant may need to be enhanced to sustain the delivery of adaptations in this sector over the next 5 years. There is also persistent need to secure additional funding to address the level of potential need in the RSL sector.</p> <p>3. A national register of adapted properties (all tenure) has been developed by Glasgow Centre for Independent Living, as a resource to enable disabled people to better match their requirements to the properties available. It was recommended in the previous HNDA that the HOMEArgyll partnership should pursue this approach at a local level, to develop an effective database of adapted properties and monitor use over the life of the next LHS, and that this should inform future relets. Little effective progress has been achieved on this action over the last 5 years, and so this remains a priority recommendation for the next LHS.</p> <p>4. The previous HNDA also recommended that the Council and its RSL partners should work to develop and promote a standard definition of the types of housing for older people and particular needs generally, so that applicants fully understand the options available to them and reporting and monitoring systems can be standardised. It was recommended that these definitions be based on those set out in the Scottish Government 'Age, Home and Community: A Strategy for Scotland's Older People' and should also reflect the categorisation set out in the HNDA guidance (as utilised in these templates). Much</p> |

|   |  |
|---|--|
|   | <p>discussion followed this recommendation during the last 5 years, and some progress has been made however further work is required to confirm and clarify definitions, terminology and understanding across housing, health &amp; care sectors, as well as between providers and client groups.</p> <p>5. Research findings indicated that some RSLs experienced lower demand for amenity housing in certain rural and island communities. This was confirmed by the waiting list demand and re-let figures. Ongoing monitoring should continue to be undertaken to fully understand the future demand for this specialist housing in these settings and whether current supply represents an oversupply. A further review of existing stock is required to ensure it is fit for purpose to address current and emerging needs, either through a programme of refurbishment and reconfiguration, or through a policy of rationalisation.</p>   |
| <p><b>Wheelchair housing</b></p>  | <p>1. Positive progress has been made in collating, monitoring and assessing data on this client group, however there is still a need to continue to evaluate and improve the quality of data in respect of wheelchair provision in Argyll and Bute, early in the life of the next LHS.</p> <p>2. Up to 80 households with a wheelchair user could have an unmet housing need, and while the majority of need could be met via adaptations and turnover in existing stock, there is likely to be a small-scale requirement for new build solutions. A recommended target for new build wheelchair housing has been set at 5% of public subsidised completions, and it is recommended that this is also applied to private sector development in principle, as far as possible. All SHIP schemes should as a matter of course therefore consider any potential requirement for wheelchair units in discussion with the Council and the Health &amp; Social Care Prtnership, and the dedicated Housing OT.</p> |
| <p><b>Non-permanent housing</b><br/>e.g. for students, migrant workers, homeless people, refugees, asylum seekers</p> | <p>1. There has been an overall decrease in the number of homeless households living in temporary accommodation and minimal or nil use of unsuitable B&amp;B accommodation. While pressures on this sector therefore have reduced significantly (excepting the anomalous and potentially short-term impact of the coronavirus pandemic in 2020/21), there remains a requirement to sustain an adequate supply of temporary accommodation, particularly in the key towns. In principle, private sector accommodation and local authority leased properties should continue to be preferred and the focus should be on smaller units, primarily for single persons.</p> <p>2. The incidence of persons fleeing violence and domestic abuse has remained relatively low, contrary to the anticipated spike in cases anticipated during the period of lockdown in 2020/21, but current provision for this group must be retained, and the Council should continue to monitor</p>                                 |

|  |   |
|--|---|
|  | <p>and support agencies such as Women’s Aid, and sustain the improved partnership working that has been achieved, particularly within the context of delivering the Rapid Rehousing Transition Plan and the Housing First policy.</p> <p>3. There is currently no requirement for additional specialist provision specifically for refugees, asylum seekers or migrants. Similarly, there is no evidence of unmet need among the resident student population of this authority, however, future plans with regard to the promotion of a university campus in the Lorn area could generate new demand and therefore this should continue to be closely monitored over the life of the next LHS.</p>  |
| <p><b>Supported Provision</b></p> <p>e.g. care homes, sheltered housing, hostels and refuges</p>                 | <p>1. It is expected that the majority of needs of the ageing population will continue to be met from existing homes and in the private sector. The delivery of adaptations and care &amp; support services will help to alleviate a significant proportion of this need and should minimise the requirement for new build solutions. With up to 4 applicants per available let in this sector of the RSL stock, demand is moderately high. It is however a continuing policy decision to prefer alternative models of supported accommodation, rather than sheltered housing as it has been historically defined.</p> <p>2. Overall, it is suggested that the current target of ensuring that around 10% of all new build should cater for particular needs (i.e. should comprise either, supported, accessible or wheelchair housing) should be retained, but reviewed on an annual basis via the SHIP process. A degree of provision is likely to be required across all HMAs, but Lorn, Cowal and Helensburgh &amp; Lomond are potential priority areas.</p> <p>3. Despite demographic trends, there has been a decline in the need and use of Care Homes in this authority, and it is anticipated that this trend will continue. It is crucial that the Housing sector should continue to liaise with Health &amp; Social Care to monitor and address any potential unmet need in the future; and current emerging need must be confirmed and specified by the HSCP as a matter of urgency. This should include specific locational, design and capacity requirements for “core &amp; cluster” models of provision where RSL involvement is likely to be required.</p> |
| <p><b>Care/ support services for independent living at home</b></p> <p>e.g. home help, Handyperson, Telecare</p> | <p>1. The continuing shift away from institutional models of support and the increasing ageing population suggests that there will be a need for a greater level and range of care and support for people to maintain independence for as long as possible in their home or community.</p> <p>2. Telecare/Telehealth services should be sustained and potentially increased.</p>  |

3. There is a modest unmet need from around 1% of the population in Argyll & Bute for specialist forms of care and support, including regular contact with social services, health or other caring organisations. Cowal has the highest requirement for home care but a small degree of unmet need is apparent in several HMAs.

4. The main services required across Argyll & Bute are home care (primarily with housework but also to lesser extent with personal care); help with shopping; OT and physiotherapy; and support from local voluntary and community organisations or carers. Use of these services should be closely monitored to ensure a good understanding of the demand; what unmet needs persist; and the most sustainable model to meet these needs. In principle, these services should be sustained and, where possible, enhanced to ensure homes remain sustainable for all residents.

5. A potential gap in relation to information and advice on available housing options for older people, and others with particular needs, though less than 1% of those who would like or need to move cited lack of information as the main reason for not moving. The previous HNDA recommended that both the LHS and the H&SCP Strategic Plan should include the development of an enhanced housing options approach for older people, and others with particular needs, and highlight the need for support through informal networks of family and friends, alongside provision of high quality information and advice service at a local level. While some positive progress has been achieved in this area over the last 5 years, further work would be beneficial to improve these services.

7. Recruitment and retention of home care and support staff continues to be challenging across Argyll & Bute, particularly in rural and island localities. All relevant agencies should ensure through procurement procedures that salaries and terms and conditions are not affected to the extent that it prohibits recruitment, or quality of care and retention of staff. Suitable, affordable accommodation, both permanent and also possibly on an interim basis, will also be an important factor in addressing the needs of these key workers.

8. Persons with Learning Disabilities and those on the autism spectrum constitute a small but significant client group presenting a degree of persistent unmet need. This could be delivered via "core & cluster" model housing and enhanced levels of personal support in existing stock. Liaison with RSLs in order to assess the potential for reconfiguration of existing units for this purpose should be carried out and any specific

|   |  |
|---|--|
|   | <p>needs should be identified early in the SHIP process when new builds proposals are being developed. The early involvement of specialist support providers for complex conditions like Autism could also possibly prevent some individuals being placed out of area, and help with repatriation of individuals currently placed outwith the area who need or would like to return.</p>   |
| <p><b>Site provision</b><br/>e.g. sites/ pitches for Gypsy/ Travellers and sites for Travelling Showpeople</p>                            | <ol style="list-style-type: none"> <li>1. While the evidence suggests that the existing official Gypsy/Traveller sites should be sufficient to meet demand, there is a need to increase the number of available pitches on or adjacent to these sites, at least back to recent historic levels, with a minimum of 22 pitches.</li> <li>2. Unauthorised camping is not particularly prevalent or problematic, and there is no demand for transit sites or interim stopping places to be made available on a regular or full-time basis.</li> <li>3. There is however a need to ensure that the existing sites fully meet the standards set out in the national guidance and that adequate communal facilities, infrastructure and access are maintained. In addition, consideration should be given to supporting residents to utilise nationally available resources to develop facilities such as play areas within existing sites.</li> <li>4. Care and support needs should be sustained at least at current levels, in particular as delivered by MECCOP and the Advanced Nurses-Vulnerable Groups.</li> <li>5. A formal, dedicated working group including key partners and stakeholders should be established to oversee and monitor delivery of the above recommendations and to improve provision in general for this client group.</li> <li>6. Requirements for particular needs both on and off site should continue to be monitored and assessed.</li> <li>7. Future reviews of the RSL common allocation policy and application process should ensure that due consideration is given to the diverse needs of the Gypsy/Traveller community.</li> <li>8. Further research should be carried out on the needs of transient households.</li> </ol> |
| <p><b>Development Plan</b></p>  | <p><b>Specialist Provision: Key Issues Identified in the HNDA</b></p>  |
| <p><b>Strategic planning for housing for Specialist Provision housing</b><br/>e.g. any additional locational/ spatial considerations.</p> | <ol style="list-style-type: none"> <li>1. Findings and recommendations from the previous HNDA generally remain valid. The majority of older people in Argyll &amp; Bute will not move or will choose to meet their needs in the private market by moving to smaller/more manageable accommodation or to be closer to family to receive support. This is particularly true of the more affluent owner occupiers who are likely to have sufficient equity in their existing homes to meet their need in the private market. However, we know that suitable, appealing homes for those wishing to</li> </ol>  |

|  |  |
|--|--|
|  | <p>downsize are in limited supply and that new supply in the private market is unlikely to directly address the needs of older people without intervention, rather it will develop mainly to meet the need of family households and first time buyers. Overall there are a limited range of available options within the owner occupied and private rented sectors. Promotion of development in planning terms rests with the local authority (and National Park in designated sub-areas), however delivery does not. Given this and that over time much new housing is likely to be delivered on private developments, it is recommended that the use of planning policy should be considered to encourage the provision of homes suitable for older households and others with particular needs as part of new build developments. Clearly there will be challenges in developing and implementing such a policy as the provision, particularly of bungalows, is an inefficient use of available development land and may reduce the number of homes delivered overall; as will higher development costs required to deliver specialist models of provision to higher specifications, in particular wheelchair housing.</p> <p>2. A significant proportion of new housing delivery and therefore new housing for older people and those with particular needs in the area will likely be in the form of private development and we will need to ensure that new provision is of a good standard and design. Given that the retrofitting and subsequent removal of aids and adaptations in existing homes is often not cost effective, developers of new build schemes should be encouraged/required to consider development to the criteria in the Lifetimes Homes Standard across all tenures, and in all medium to large scale projects consideration must be given to the delivery of the 5% target for fully accessible and habitable wheelchair accommodation. On smaller sites, the requirement should be applied flexibly as appropriate.</p> |
| <p><b>Site provision</b><br/>e.g. sites/ pitches for Gypsy/ Travellers and sites for Travelling Showpeople</p> | <p>1. There are currently no requirements to allocate additional land for new sites however existing site capacity should be increased and planning policy should support the provision of additional pitches on or adjacent to these sites.</p> <p>2. Access roads and infrastructure for existing sites should also be assessed as fit for purpose and upgraded as necessary.</p>  |