



**Huntingdonshire District Council**  
**&**  
**NHS Cambridgeshire**

**Ageing Well in Huntingdonshire:**  
**Housing and Healthy Ageing for Older People**

**2009-2014**

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## Foreword

Huntingdonshire is changing. Our population is growing and people are getting older and living for longer. Over recent years we have worked in partnership with our Primary Care Trust (PCT); Cambridgeshire County Council; housing associations and other partners on a number of initiatives to improve the quality of life for older people. More community alarms; the provision of much needed adaptations; and a new project to improve the thermal efficiency of vulnerable people's homes are among our achievements.

There is more to do. Over the lifetime of this Strategy, our biggest ambition is to increase the provision of extra care housing for frail older people. The Council is working with Luminus on a scheme in Huntingdon and we want to build up a development pipeline of more schemes. Helping to develop a Handyperson service; increasing services to help people remain in their own homes; and implementing the Government's 'Lifetime Homes Lifetime Neighbourhoods' strategy are also important objectives.

We have prepared this document because we recognise the important role that housing plays in people's lives. Good quality, affordable and accessible housing is important to people's health and well-being and this becomes critical as people get older. We are committed to playing our part in helping to promote independence and reduce the reliance on more expensive, institutional forms of care.

Many organisations including housing associations; care and support providers; builders; developers and the third sector all play an important role in helping to achieve the direction set out in this Strategy. We are grateful for their valuable input. Staff and Members remain committed to working in partnership to implement this strategy and to maximising the quality of life for older people. We are proud of our achievements so far and look forward to more successes in coming years.



Cllr Ken Churchill  
Executive Councillor for Housing

*signature*

Someone from  
NHS Cambridgeshire

## Glossary and Abbreviations

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Term	Explanation
Assistive technology	Assistive Technology is any product or service designed to enable independence for disabled and older people. It refers to <i>'any device or system that allows an individual to perform a task that they would otherwise be unable to do, or increases the ease and safety with which the task can be performed'</i> (Royal Commission on Long Term Care 1999) for example, community alarm, heat / movement sensors, reminder devices.
BVR	Best value review
Community alarms	People who live alone, and/or are at risk from falls or sudden attacks of illness, can arrange to wear an alarm on their person so that they can summon help in an emergency.
Cambridgeshire LAA	Local Area Agreement (LAA) is a way for local authorities and partner agencies to work together to improve services in the area.
Choice based lettings (CBL)	A method of allocating affordable housing based on people bidding for vacant properties
Decent Homes	A government-set minimum housing standard which all council housing and housing association-owned housing must meet.
Disabled Facilities Grant (DFG)	A grant to help towards the cost of providing adaptations and facilities, so that a disabled person can continue to live at home.
Extra care housing	It is defined as specialist accommodation designed to maximise the independence of older people by providing a safe, secure and stimulating environment. Residents retain the independence of having their own home and at the same time benefit from the availability of around the clock social care and housing support.
Floating support	A support service that is made available to people in their own homes, rather than people needing to move to specific accommodation to receive the service.
Handyperson scheme	A scheme to holistically assess an older person's needs including the need for advice, signposting, minor property repairs and adaptations, for example grab rails and half steps. The scheme aims to promote people's

	independence and prevent falls.
HIA	Home improvement agency. Home improvement agencies are locally based, not-for-profit organisations. They help older, disabled and vulnerable homeowners or private tenants to repair, improve, maintain or adapt their homes.
Intermediate Care	Intermediate Care is a generic term that covers a wide range of services that help prevent unnecessary admission to hospital, or help facilitate early discharge.  Intermediate care is a short period (normally no longer than 6 weeks) of intensive rehabilitation and treatment or intensive care.
JSNA	Joint Strategic Needs Assessment - A document setting out Cambridgeshire's current and future health and wellbeing needs. This means councils and PCTs can pinpoint their commissioning priorities to improve outcomes and reduce health inequalities.
Lifetime homes	A physical standard to which properties are to be built including 16 criteria which aim to enable the property to be adapted as the occupant's needs may change over time e.g. wider doorways, electrical sockets at height etc.
LPSA	Local public service agreement The Local PSA is a voluntary contract negotiated between Cambridgeshire County Council and the Government to deliver improved public services locally with the County Council as the legal contracted party.
PCT	Primary Care Trust consists of NHS Cambridgeshire – Commissioners ; and Cambridgeshire Community Services – Providers of Health & Social Care Services.
Re-ablement	Re-ablement is the active process of helping an individual to regain skills, confidence and independence, often following a specific period of illness or injury. Re-ablement services are usually provided as a short-term, intensive alternative to home care.
Repairs Assistance	Is a way that HDC can offer home-owners financial assistance for essential work to keep their home weather-proof and water-tight.
Residential Care/Care homes	Provide living accommodation, meals, help with personal care such as dressing, supervision of medication, companionship and someone on call at

	night.
RSL	Registered Social Landlord also known as a housing association
Supporting People (S.P)	Government funded housing related support
Warm Front	This is a grant to assist with paying for improvements to the heating system or the insulation of a home.

## Summary

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Older people make a significant contribution to society. For many older people, later life is a time to enjoy the rewards of years spent contributing to the growth and well-being of their families, their communities and their workplaces. Older people remain partners, parents, friends, daughters and sons, often caring for grandchildren or parents, and sometimes both. They are volunteers, employees, chief executives and board members. A recent study has estimated that the total economic value of the contributions of older people aged 50 and over to the economy is £200 billion per annum<sup>1</sup>.

This Strategy identifies the housing and related services that Huntingdonshire District Council and partners can deliver to work with NHS Cambridgeshire in promoting healthy ageing and improving the quality of life for older people. Healthy ageing is defined by the World Health Organisation as ‘the process of optimising opportunities for physical, social and mental health to enable older people to take an active part in society without discrimination and to enjoy an independent and good quality of life’.<sup>2</sup>

Since the previous document in 2005, we have achieved a range of things that improve the quality of life for older people. A few highlights include an increase in the number of community alarms; a new scheme to improve thermal efficiency and achieve Decent Homes for vulnerable people housed in the private sector; and development of plans for a new extra care scheme in Huntingdon which will be built over the next few years.

Our partners play an important role in helping to achieving the strategic direction that is set out in this document. Our strategic objectives are to:

- Meet the needs of people in their own home
- Make better use of sheltered housing, rationalise provision and enable a strategic shift from residential to extra care housing
- Work in Partnership and Involve Users
- Provide information, empowerment and choice
- Promote healthy ageing
- Be effective at resourcing and commissioning

There are a number of challenges for the Council and partners to work together on. The 65+ age group in Huntingdonshire is due to increase by 59% (13,700) between 2007 and 2021 – higher than the county average (58%) and higher than the national average (33%)<sup>3</sup>. People are living for longer and are getting frailer. Rates of dementia are on the increase. Half of people aged over 65 live alone and this increases in later age groups. The ratio of people aged 65+ to those aged 0-64 is due to increase. This presents challenges for future workforce

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<sup>1</sup> Cambridgeshire Older Persons’ Joint Strategic Needs Assessment, 2008

<sup>2</sup> World Health Organisation. (2007) *Healthy Ageing: a challenge for Europe*. 5.2007:01. Sweden. The Swedish National Institute for Public Health

<sup>3</sup> Cambridgeshire County Council Research Group website

<http://www.cambridgeshire.gov.uk/community/population/population/Researchgrouppopulationestimates.htm>



planning as there will be less people of employment age available to care for, and pay the taxes to support the ageing population. This is a sector that already struggles to recruit and retain staff.

The majority of older people are owner occupiers (72.9%)<sup>4</sup>. Given that the built environment is a long-term resource, the planning system has a vital role to play in ensuring that new homes are suitable for people as they get older and frailer. The Government's recent Strategy 'Lifetime Homes, Lifetime Neighbourhoods: A National Strategy for Housing in an Ageing Society'<sup>5</sup> sets some challenging targets, among other things to ensure that all public housing is built to Lifetime Homes standards by 2011 with all private housing being built to the standard by 2013.

This is not the only area in which the private sector has an important role to play. The Best Value Review (BVR) of sheltered housing sets out plans to enable a strategic shift from residential care towards extra care with a levelling up of provision within Cambridgeshire. There are targets to achieve an increase in extra care units of accommodation in this district, and RSL partners are planning to develop schemes which will make a valuable contribution to this target. It is important that new schemes acknowledge the tenure balance in the district and that opportunities for home ownership within extra care are enabled. Likewise the increase in dementia needs to be considered in the design of housing and services and the role of Assistive Technology in supporting people needs to be facilitated. Some of the sheltered housing schemes in the district do not meet modern day standards and will need to be remodelled. The Council is keen to work with providers on their plans to improve existing stock. Encouraging the private sector to make provision on new sites and to remodel outdated residential care are also opportunities that we need to explore. The current economic downturn challenges these ambitions and we will work with partners to appraise options as opportunities arise.

People's expectations are increasing. The population as a whole is more IT-literate and remote access to services and incorporating IT access into new homes are all issues to consider in the future design of services.

This Strategy sets out the future challenges which include: developing extra care; increasing services to help people remain in their own home; improving housing conditions and energy efficiency; in partnership, commissioning a Handyperson scheme; and supporting the development of self directed support; and a countywide re-ablement service as they relate to housing.

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<sup>4</sup> ONS Census, 2001

<sup>5</sup> <http://www.communities.gov.uk/publications/housing/lifetimehomesneighbourhoods>

## **Introduction**

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Older people make a significant contribution to society. Huntingdonshire has a growing and ageing population. The 65+ age group in Huntingdonshire is due to increase by 59% between 2007 and 2021 – higher than the county average (58%), and higher than the national average (33%).

This significant demographic shift places pressure on local services and requires a joined up approach to help people to remain independent for as long as possible thereby maintaining or improving their quality of life and reducing the reliance on more intensive, more expensive and sometimes more institutional forms of care.

In partnership, we developed a joint Housing, Health and Social Care Strategy for Older People in September 2005. Since then, Huntingdonshire District Council and Cambridgeshire NHS, the local PCT, have worked closely together with other partners to improve the quality of life for older people and increase the range of services that are available.

There have been significant changes since the previous document was written. The five PCTs in Cambridgeshire have been merged to form one countywide organisation. The new organisation has now split into ‘commissioner’ or ‘provider’ roles.

This Strategy sets out what we have achieved since 2005 and identifies the housing and related services that Huntingdonshire District Council and partners can deliver to support NHS Cambridgeshire in improving the quality of life for older people. It sets the direction for the next 5 years.

The Strategy draws on information set out in the countywide Best Value Review (BVR) of Sheltered Housing; the Strategic Housing Market Assessment; stock condition survey; the Joint Strategic Needs Assessment of Older People; and the census and related statistics.

## **Consultation: What older people, our partners and customers think....**

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### **Consultation on this document**

A copy of this strategy was sent out to all partners including housing associations, support providers, registered care homes, voluntary sector organisations, social services, PCT, Parish Councils and District Councillors.

A copy was placed on the front of the Council's web site and press releases were issued to alert the public to the opportunity to contribute to the strategy. A double-page article featured in the Hunts Post on 12 August 2009.

The consultation was open for 12 weeks in line with the Compact Agreement for working with Voluntary Organisations in Cambridgeshire. A questionnaire asking for people's feedback and views on specific areas of the strategy was sent out with a pre-paid reply envelope to encourage feedback.

37 questionnaires were received by post. A further 5 responses were received via the web site; 1 phone call; and a further 3 written responses were received (no questionnaire).

- 98% of respondents agreed that the priorities set out in this document are the correct ones.
- 92% agreed that extra care should take priority over the development of sheltered housing.
- 94% of respondents think that extra care should be focussed on the larger settlements.
- 89% of respondents agreed that extra care should include a % of leasehold to enable home ownership.
- 95% of respondents thought that this document is either acceptable, good or excellent.

A number of helpful comments have been made and this document has been amended in line with some of the suggestions.

### **Cambridgeshire Together's Consultation with Older People (Oct 2008)**

Cambridgeshire County Council commissioned mruk research, an independent market research organisation, to consult with residents and organisations in Cambridgeshire about their Older People Strategy.

Out of seven options, irrespective of age, gender and disability, 'home and housing' was the most important aspect for all respondents and 'information' and 'neighbourhood' were the least important aspects. 'Income' is the second most important aspect for those aged 60-69 years which may indicate changes after retirement. 'Social activities and getting out' and about are considered more important for respondents aged 80 years and over.

In July 2007 a Quality of Life survey was posted out to older people registered with a sample of GP surgeries in the Cambridgeshire PCT. Four questions were asked:

1) Do you feel secure?

- 2) Do you feel in control?
- 3) Do you feel isolated?
- 4) Is there anything else you would like to tell us about your quality of life?

The survey achieved 1,034 valid responses.

- Their responses indicated that:
- 96.7% felt secure (always and usually) in their home
- 96.2% did not feel isolated (never or rarely)
- 98.3% felt in control of their daily life (always and usually)
- 79.7% had a good quality of life

### **Age Concern Best Value research 2007**

In 2007 Age Concern published a report entitled *Achieving quality of life when "No-one trains us to be old"* which was based on the output of discussions with two focus groups.

The findings included the following:

- Some people felt strongly that being independent was about doing everything for oneself. Others felt that making full use of available services and support helped to maintain independence.
- More attention should be given to what older people believe will make a difference in their lives. Such as 'I don't want someone to come and put my sock on for me – although I might need it – I want someone to come and do my cleaning'.
- It is crucial that services are consistent, for example 'kneeling buses' need to operate on both out and return journeys.
- Local services are very important and include Post Offices, clubs and groups and affordable, accessible transport.
- Suitable accommodation could make a significant difference to quality of life.
- There was huge reliance on the GP as the 'first point of contact'. There was a general feeling that older people benefited from winter fuel allowance, free TV licence and bus passes.
- There is not just one way of getting your voice heard.
- Above everything else, social contact and being able to get out and about are felt to be crucial to health and well-being.

### **Best Value Review (BVR) Sheltered Housing Consultation 2004**

As part of the Best Value Review of sheltered housing in Cambridgeshire<sup>6</sup>, focus groups were held with residents living in nine sheltered schemes and older people living in non sheltered accommodation. The residents living in sheltered housing lived in both rural and urban locations and two groups were held with participants living in non-sheltered accommodation.

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<sup>6</sup> BVR Sheltered Housing in Cambridgeshire was concluded in 2004. It was carried out by consultants, Peter Fletcher Associates.

### **Age Concern Consultation**

Leading up to the integration of older people's services in Cambridgeshire, Age Concern completed a consultation exercise with older people in Huntingdonshire. The results show the following issues are important to older people:

- Social contact / getting out and about;
- Transport;
- Feeling safe at home;
- Help at home – especially with household chores;
- Information – and help with form filling;
- Simple assessment processes;
- Adequate income; and
- Dignity and respect.

The findings set out in this chapter have shaped the vision for this Strategy and have informed both strategic objectives and the action plan. More detail is available about each of these consultations on request.

## **Our Vision, principles and objectives**

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We will work with Older People to improve their Quality of Life by:

- Listening to what older people have to say and involving them in the development of services as far as is practicable
- Challenging and addressing ageism whilst promoting positive views of older people
- Working with others to promote well-being for older people
- Promoting independent living
- Designing and delivering services around individual needs with a view to enabling older people to live in a safe home and environment
  - Tailored to meet their needs
  - In an active community
  - In a secure environment

Our objectives (in no order of priority) are:

### **1. Meet the needs of people in their own home**

- Maximise people's independence through flexible support including Assistive Technology as needs change
- Deliver appropriate housing, support and repair solutions in partnership with others to enable people to remain safe, warm and secure in their own home.
- Work in partnership with the private sector and housing associations to provide additional affordable and private sector housing that is suitable for people as they get older.
- Recognise that the majority of people (76%) are owner occupiers and therefore, the Council's intervention in the private sector is equally as important as the provision of new affordable homes.
- Acknowledge that the built environment is a very long-term resource and the planning system plays an essential role in influencing the sustainability of new developments for older people
- Recognise the impact that poor quality housing can have on people's health and general quality of life and that some of the poorest conditions can be found in the private rented sector.
- Respond quickly and flexibly to provide housing solutions to frail older people following hospital admission

### **2. Make better use of sheltered housing and rationalise provision and enable a Strategic shift from residential to extra care**

- Work with partners to implement the findings of the Best Value Review of Sheltered Housing.
- Work in partnership to:
  - enable a shift from residential care homes to extra care housing
  - enable the increase in the provision of care for older people with mental disorder and / or dementia

- enable the provision of intermediate care to enable timely hospital discharge and avoid unnecessary or inappropriate hospital admission promoting enablement
- Facilitate the use of Assistive Technology in helping to keep people safe and secure in their homes.

### **3. Work in Partnership and Involve Users**

- Continue to involve customers in the design, monitoring and review of services
- Support and encourage the statutory and voluntary sectors in their preventative work and to adopt a whole systems approach to the provision of services
- Develop joint commissioning where appropriate and achieve a greater sharing of ideas and initiatives across local strategists and service providers to encourage new service models and provision
- Work in partnership to achieve the aims of this strategy and to ensure that other strategies take due account of the needs of older people.
- Implement this Strategy and develop new services in collaboration with the Huntingdonshire Strategic Partnership
- Recognise the important role that housing plays on the health and well being of the occupant

### **4. Empowerment Information Assessment and Choice**

- Enable older people to make informed choices by ensuring that they can access the information they need to understand their housing and care options
- Support practitioners and professionals from all agencies in their work
- Support the identification of older people at risk
- Maximise people's income

### **5. Promote healthy ageing**

The Huntingdonshire Health & Well-Being Group has strategic responsibility for identifying priorities for promoting health and well-being in Huntingdonshire. Priorities relate to both children and adults; aims include to enable people to prepare for a healthier later life. The following strategic health and well-being priorities are outlined in the Huntingdonshire Sustainable Community Strategy (2008-2028):

- Provision of culture and leisure opportunities
- A reduction in health inequalities
- Support to individuals who wish to adopt a healthier lifestyle
- A reduction in accidents
- Increased opportunities for vulnerable people to live independently

Examples of specific programmes for 2009-10 outlined in the Huntingdonshire Health & Well-Being Delivery Plan are to:

- Increase adult participation in sport
- Deliver an 'Active at 50' project to encourage older people to be more active

- Support vulnerable people to be more active through the targeted cardiac rehabilitation programme
- Introduce 'easy' green walks into the existing Health Walks scheme
- Provide Stop Smoking Services to people in Huntingdonshire who wish to quit
- Deliver a Community Health Improvement Programme in the community, and a Fit for the Future programme in Primary Care to people who are obese
- Reduce the death rate from suicide and undetermined injury
- Develop a comprehensive Falls Prevention Service
- Establish a Handyperson scheme
- Promote mental well-being and the inclusion of older people by implementing programmes such as Cambridgeshire Celebrates Age
- Increase the provision of extra sheltered frail elderly housing

The Huntingdonshire Health & Well-Being Delivery Plan will continue to be informed by the:

- Joint Strategic Needs Assessment – Older People
- Cambridgeshire Long Term Conditions Strategy
- Cambridgeshire Older People Strategy

#### **6. Effective Resourcing and Commissioning**

- Work in partnership to implement this Strategy
- Jointly commission services where appropriate
- Strategically plan to meet the needs of a growing population of older people
- Draw in external resources where possible and make best use of existing resources to implement this Strategy



## **Main Achievements since the Previous Strategy (2005):**

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- ✓ Developed a Choice Based Lettings project in partnership which enables greater choice and mobility in housing across the Cambridge sub-region and a full housing advice and options service
- ✓ Worked with Age Concern to start up a community warden scheme in Ramsey currently supporting 13 older people
- ✓ Increased the provision of community alarms by using the Local Public Service Agreement pump priming money to purchase the alarms and targeted these at vulnerable older people on low incomes, increasing availability from 615 in April 2006 to 703 in April 2008
- ✓ Established the baseline for the numbers of vulnerable people living in non-decent homes in the private sector; and brought 129 homes of people who are older or otherwise vulnerable, up to the Decent Homes standard
- ✓ Commenced a project to improve the thermal efficiency of vulnerable people's homes using specific grant awarded by Government
- ✓ Implemented the core specification for HIA services in Cambridgeshire and undertaken a strategic review of the service
- ✓ Maximised new affordable housing development opportunities and worked with housing associations to develop 45 bungalows in 8 locations since Sept 2005
- ✓ Supported 930 people to remain independent in their own homes through Disabled Facilities works between 2005/6-2008/9 via the multi agency funded Home Improvement Agency
- ✓ Improved the homes of 123 older people through Repairs Assistance between 2005/6-2008/9
- ✓ Over 4000 households have been referred to Warm Front for energy efficiency improvements to their homes since April 05. This helps reduce running costs of the home; and promote health and well being, preventing excess winter deaths from cold homes. A large proportion of the Households assisted were pensioner households.
- ✓ Contributed to the development of the Supporting People programme including a 'white paper' setting out minimum standards for sheltered housing
- ✓ Supported Luminus in their plans to develop extra care in Huntingdon (yet to be built but will provide circa 35 units of accommodation)

- ✓ Raised awareness of the implications of the ageing population through the Strategic Partnership; public and private sector providers; and locality practitioner and voluntary / faith based organisations
- ✓ Developed the information available to older people on their housing options including a directory and web-site development and the Healthy Homes Healthy Ageing project aiming to improve the information available to support housing / health / social care practitioners in their work
- ✓ Bid for resources to help achieve the aims of this Strategy, drawing in funds from LPSA; Housing Corporation; Supporting People; HDC; PCT and County Council
- ✓ Awarded greater priority in housing allocations to people who are under occupying existing accommodation but want to downsize to housing that is more appropriate for their needs (via the Choice Based Lettings policy)
- ✓ Together with NHS Cambridgeshire, we have enabled more people to be supported to live at home resulting in a reduction in the number of people entering residential care.

## Future Workplan

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To further achieve our objectives, over the next five years we want to:

- Enable, where appropriate, the development of a range of housing provision including forms of home ownership which offers choice and independence
- Work with providers to remodel existing schemes to meet the new standards where possible and investigate other solutions where remodelling is not possible / viable
- Encourage providers to develop the use of sheltered housing as a community hub from which a range of flexible services can be provided
- Plan for an increase in extra care housing schemes, taking the increase in dementia into account in the design of the building and planning of services
- Increase the services available to help people remain in their own home e.g. Assistive Technology; community alarms; floating support; income maximisation; Disabled adaptations
- Commission a new house condition survey to produce a comprehensive review of current housing conditions and improve housing to the Decent Homes standard for vulnerable people living in the private sector
- Raise awareness of affordable warmth grant opportunities to reduce fuel poverty and prevent winter deaths.
- Implement the findings of the Home Improvement Agency Review
- Following the successful bid for funds to start a Handyperson scheme, establish the project with partners
- Implement the recommendations in the Government's paper 'Lifetime Homes Lifetime Neighbourhoods' including the target to achieve Lifetime Home standard in all new affordable housing from 2011 and in all housing from 2013
- Encourage the development of new neighbourhoods which are appropriate for people as they age e.g. including safe walking routes to shops etc
- Implement the Supporting People strategy for Cambridgeshire including commissioning floating support, and new extra care schemes
- Ensure older and vulnerable people get assistance with bidding for housing in the Choice Based Lettings programme, where appropriate

- Raise the profile of the needs data and the strategic shift away from residential care and towards extra care housing, as set out in this document, with private sector providers
- Support the development of self directed support as it may impact on housing and related services in the future (increasing choice and control)
- Support the introduction of a countywide re-enablement service as it relates to housing (e.g. adaptations, support, Assistive Technology; intermediate care)

## A Few Facts about Older People in Huntingdonshire....

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The following key conclusions can be drawn from the statistical appendix at Appendix 1. The information sources for these conclusions include the Joint Strategic Needs Assessment; the BVR sheltered housing; the Strategic Housing Market Assessment and the Census and related projections.

- Older people make a significant contribution to society. For many older people, later life is a time to enjoy the rewards of years contributing to the growth and well-being of their families, their communities and their workplaces. Older people remain partners, parents, friends, daughters and sons, often caring for grandchildren or parents, and sometimes both. They are volunteers, employees, chief executives and board members. A recent study has estimated that the total economic value of the contributions of older people aged 50 and over to the economy is £200 billion per annum<sup>7</sup>
- Huntingdonshire has a growing and ageing population. The 65+ age group in Huntingdonshire is due to increase by 59% (13,700) between 2007 and 2021 – higher than the county average (58%) and than the national average (33%)<sup>8</sup>.
- The wards with the highest 65+ population are Huntingdon East, Ramsey, The Hemingfords, and St Ives South, all with over 1,300 65+ residents<sup>9</sup>. Projecting forward to 2021, Yaxley & Farcet, St Ives South, Ramsey, The Hemingfords and Huntingdon East contain the most people over 65<sup>10</sup>, all with over 65 populations of 2,000 or over.
- People are living for longer and are getting frailer. Rates of dementia are on the increase. Half of people aged over 65 live alone and this increases in later age groups. Women outnumber men from 65 onwards and the 50+ population is considerably less diverse than that under 50, with only 0.5% non-White UK. Whilst services need to be flexible, it should be recognised that the majority of service users will be women who live alone. This is particularly true in the 85+ age group.

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<sup>7</sup> Cambridgeshire Older Persons' Joint Strategic Needs Assessment, 2008

<sup>8</sup> Cambridgeshire County Council Research Group website

<http://www.cambridgeshire.gov.uk/community/population/population/Researchgrouppopulationestimates.htm>

<sup>9</sup> ONS Census, 2001

<sup>10</sup> Cambridgeshire County Council Population Projections,

<http://www.cambridgeshire.gov.uk/NR/rdonlyres/BC5713AD-FD97-4E14-81DB-77B3218A6036/0/LApopbyward1008nopet.xls>

- The ratio of people aged 65+ to those aged 0-64 is due to increase bringing challenges for future workforce planning given that there will be less people of employment age available to care for and pay the taxes to support the ageing population, a sector that already struggles to recruit and retain staff.
- The majority of pensioners are owner occupiers (72.9%)<sup>11</sup>. Given that the built environment is a long-term resource, the planning system has a vital role to play in ensuring that new homes are suitable for people, as they get older and frailer. A significant percentage of older people (28.1%)<sup>12</sup> currently rent their home from housing associations or private landlords. Older people are also more likely to live in park homes than the general population.
- There will be a growing need for decent affordable homes that are suitable for older people in addition to other publicly funded housing related services like the provision of Disabled Facilities Grants.
- When compared to the national average, Huntingdonshire residents claim one third less Attendance Allowance. This could reflect better health than the national population or mask problems with benefit take up. Likewise, take up of Pension Credit varies throughout the district which is more likely to reflect pockets of wealth / poverty. The demand for some public services depends upon an individual's ability to pay, for example, housing benefit or disabled facilities grants. Therefore future demand for some public services will depend upon trends in projected income. There is no data readily available which projects the future income levels of the over 65 population. We do not know if future generations of over 65s will be richer or poorer than they are today, but we know that final salary schemes are ending, and there remain a significant number of older people on very limited incomes. If income levels of tomorrows' over 65s are the same as they are today, and the over 65 population increases by 59% (over the next 10 years) then you might broadly predict the demand for public services to increase by 59%.
- People's expectations are increasing. The population as a whole is more IT-literate and remote access to services along with incorporating IT access into new homes are all issues to consider in the future design of services.

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<sup>11</sup> ONS Census, 2001

<sup>12</sup> Ibid

## **Best Value Review (BVR) of Sheltered Housing in Cambridgeshire**

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Although completed in 2005, the county-wide BVR of sheltered housing remains an important policy document that sets the direction for the future of sheltered and extra care housing in Cambridgeshire.

All providers of sheltered and extra sheltered housing were invited to join in this cross boundary review. The providers of approximately 50% of schemes in Huntingdonshire took part. The remainder were subject to the usual Quality Assessment Framework (QAF) for Supporting People purposes.

The BVR aimed to:

- evaluate the effectiveness of existing services for current and future residents of the sheltered housing service across Cambridgeshire
- assess fitness for purpose under the Best Value and the Supporting People Quality Assessment Framework
- draw conclusions on the way forward for sheltered housing in Cambridgeshire.

The BVR considered the provision of sheltered housing and extra sheltered housing across the County. It concluded that, when compared to other districts in Cambridgeshire, there was a shortfall of both types of provision in Huntingdonshire. The BVR concluded that a 'levelling up' of provision in Cambridgeshire is required to deliver equity of service.

Cambridgeshire County Council and the PCT, in line with national objectives, aim to decrease dependence on residential care and increase the provision of extra sheltered housing. This strategic shift will enable people to maximise their independence. It is also a more cost effective model of provision.

The BVR was agreed by the Commissioning Body following consultation with providers. This set out management and scheme standards that schemes in receipt of Supporting People revenue should meet to continue to be eligible for funding.

In Huntingdonshire, the aim is to achieve an increase in extra care. This increase is reliant upon a commensurate shift in Supporting People and adult social care revenue resources into extra care. Therefore the pace of change is not entirely within the Council's control, it does depend on effective partnership working. The task for the Council is to plan where future services might be needed and how these might be delivered in partnership. The timescale within which these can be achieved will have to be considered separately, in conjunction with the BVR Project Group.

### **Prioritising Models of Provision**

Given the resource requirements of the targets, it is necessary to prioritise whether sheltered or extra sheltered forms the highest local priority.

Given that there are only 49 bedspaces of extra sheltered housing, the growing and ageing population, increasing rates of frailty and dementia, the development of additional extra sheltered housing schemes should take priority over sheltered housing schemes.

Other drivers for this decision include the fact that people want to remain in their own home for longer and other peripatetic services like floating support and community alarms along side physical adaptations to the property can be made available to support people in their homes. Extending provision of sheltered housing could be achieved through increasing the capacity of existing scheme managers to provide wider neighbourhood services and extending floating support.

That said, we should recognise that sheltered and extra sheltered provision is closely linked and flexible models of service provision can enable the 'step up' from sheltered to extra sheltered housing.

### **Location of New Extra Care Schemes**

The decision on the location of new extra sheltered housing needs to take account of two variables:

1. Area where it is most needed
  - where older people currently live;
  - where existing services are located; and
  - where the PCT, as commissioner of care, perceives the highest level of need.
  
2. Where it can realistically be provided
  - new development sites;
  - location of sheltered housing that could be remodelled (but acknowledging that this will result in a further shortfall of sheltered housing);
  - location of residential care that could be remodelled i.e. response from private sector residential care providers that may wish to remodel accommodation into extra care.

It should be noted that extra care schemes will house older people living at home, who meet the adult social care eligibility criteria (Fair Access to Care).

In considering proposals for either new build or remodelled services for extra care, the following criteria needs to be considered:

1. The population of likely residents for such a scheme
2. The population likely to provide the staff resources for the scheme
3. The services in the surrounding area available to support continued independence

It is therefore likely that provision will be in the main towns and larger villages.

### **Tenure of Extra Care**



An appropriate tenure balance needs to be achieved. This should be considered on a scheme by scheme basis bearing in mind the following:

- in responding to private sector provision, s106 policies should be applied to achieve a mix of tenure
- 72% of older people are currently owner occupiers and this % is due to increase so enabling owner occupation in extra sheltered housing is important
- owner occupiers' assets may be insufficient to enable full purchase and therefore models of low cost home ownership should be included in addition to social rent
- when remodelling existing, or building new schemes, owner occupier's capital will help to make the overall scheme more affordable to the provider and therefore more attractive to the Homes and Communities Agency
- in all cases the level of charge for care / support / housing / other charges should be considered and benchmarked against others.

The Council is mindful that the current economic downturn (in 2009) may impact on this strategic direction and opportunities will need to be appraised on their merits.

### **Remodelling outdated sheltered housing**

A number of sheltered housing schemes in the district do not meet modern day scheme standards. Providers of schemes have been consulted and asked for their response on how improvements can be made. The Council is keen to work with providers on developing robust plans where schemes have to be remodelled or improved.

## **Resources to Deliver this Strategy**

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### **Home Improvement Agency (HIA)**

The HIA is a joint project funded by Huntingdonshire District Council; Cambridgeshire County Council; PCT; Supporting People and the HIA also generate fee income based on the grant work they complete.

### **Disabled Facilities Grant**

The Council receives £300-400k from Government towards the cost of DFGs. The budget is set at £1.2m per year. The Council is supportive of the provision of DFGs and where increases in demand are experienced, Cabinet have given a commitment to fund DFG applications as expeditiously as possible.

### **Repairs Assistance**

The Council funds £200k per year for Repairs Assistance to help people on low incomes to repair or maintain their homes. Owner occupiers generally receive a loan for this work.

### **Energy efficiency projects to help eradicate fuel poverty, reduce winter deaths and keep homes warm and healthy**

The Council support and promote Warm Front, a Government funded scheme that helps vulnerable people on low incomes to improve the thermal efficiency / heating system of their home. This reduces running costs and improves health and well being, reducing the occurrence of winter deaths as a result of living in a cold home. Where there is a shortfall in the cost of work compared to the available grant, the Council has a top-up grant system.

The Carbon Emission Reduction Target (CERT) funding provides insulation to people over 65 who do not qualify for welfare benefits.

The Pensioner Home Insulation Scheme (PHIS) has just started in Huntingdonshire, funded by a one-off regional grant of £100k. Funding is available for people in receipt of state pension to pay for loft or cavity wall insulation.

### **Decent Homes for Vulnerable People in the Private Sector**

The Government has given an allocation for the Council to improve the numbers of vulnerable people that occupy decent homes in the private sector. This money funds the Warmer Homes for Life scheme and can be used to tackle category 1 hazards in the homes of vulnerable people where these are detected in the post-work inspection.

### **Floating support**

The Council makes a contribution to the Ramsey Warden scheme supporting vulnerable people in their own homes. The scheme currently supports 13 older people.

### **Community Alarms**

In 2006/7 the Council bid for money (from the LPSA) to purchase community alarms to support older and vulnerable people in their own homes.

### **New Extra Care Housing**

There are significant resource requirements to achieve the targets set out in the BVR. These include the availability of

- land to build new schemes;
- revenue for the support and care elements of the service; and
- capital to fund any new build or remodelling works.

The Council will continue to maximise land for new affordable housing by using its planning powers effectively.

### **Supporting People**

Revenue to pay for the support and care service would come from Supporting People and the PCT and is subject to strategic commissioning. A countywide approach to commissioning extra care recognising the commensurate shift from residential care is due to be developed and we will play an active role in developing and implementing this approach over the coming years.

### **Handyperson**

A successful bid has been made for resources to kick-start a Handyperson scheme in Huntingdonshire. £50k has been allocated to start the scheme in 2009/10 and the future funding of this service needs to be considered.

### **Homes and Communities Agency Capital**

The Council has a good track record of supporting RSL partners to secure Homes and Communities Agency (HCA) capital for new affordable housing. The Council will continue to support RSL partners in securing HCA to fund new opportunities in the district.

### **Council Capital**

The Council has a budget of £500k for new affordable homes each year.

### **NHS Cambridgeshire Resources**

Cambridgeshire County Council and NHS Cambridgeshire commit £90m per year to a pooled service budget for older people across Cambridgeshire. Approximately £27m is currently spent on services in Huntingdonshire

## National Policy Drivers

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Since the previous document, Government has launched more policy papers that inform the direction to be taken locally. These include:

**Putting people first, transforming social care, making a strategic shift towards prevention and early intervention, key messages for decision makers (DoH, October 2008).** At its heart are four main themes:

1. Facilitating access to universal services
2. Building social capital within local communities
3. Making a strategic shift to prevention and early intervention
4. Ensuring people have greater choice and control over meeting needs

**Living well with dementia: a national dementia strategy (DoH, Feb 2009)** The national dementia strategy is backed by £150 million over the first two years. It will increase awareness of dementia, ensure early diagnosis and intervention and radically improve the quality of care that people with the condition receive. Proposals include the introduction of a dementia specialist into every general hospital and care home and for mental health teams to assess people with dementia.

**High quality care for all: NHS next stage review final report (Darzi review of NHS, DoH, 2008)** The final report of Lord Darzi's NHS Next Stage Review. It sets out a vision for an NHS with quality at its heart.

**The White Paper, Our health, our care, our say, (DoH, Jan 2006)** sets out a vision for the future of health and social care and is driving improvements in services for older people across four areas:

1. better prevention and early intervention;
2. choice and involvement in services;
3. tackling inequality and improved access to community services;  
and
4. providing more support to people with long term needs.

**Homes for the future: more affordable, more sustainable (DCLG, July 2007)** This green paper announces the Government's ambitions for more homes, more affordable homes and greener homes. It recognises that older people make up 48% of all new growth in households up to 2024 and that new housing design needs to be appropriate for people as they age. Lifetime Home standards and the Code for Sustainable Homes will all encourage more sensitive housing design in the future.

**Lifetime homes, lifetime neighbourhoods: a national strategy for housing in an ageing society (joint publication from DCLG; DoH; and DWP 25 Feb 2008).** This document sets out plans to:

- build more housing;
- strengthen local information services;
- launch a new rapid repairs and adaptations service to support handyperson schemes;
- increase funding for Disabled Facilities Grants (DFGs) and simplify the process;
- continued support for extra care;
- ensure that all public housing is built to Lifetime Homes standards by 2011 with all private housing being built to the standard by 2013;
- launch a new Beacon Council theme on inclusive planning recognising the role of the built environment in helping people to age healthily and to remain independent;
- joined up assessment, services and commissioning across the housing / health / social care spectrum;
- greater emphasis on prevention, choice and personal budgets; and
- embed priorities in Local Public Agreements.

**Towards lifetime neighbourhoods – designing sustainable communities for all - a discussion paper (DCLG, 19 Nov 2007).** Whilst lifetime neighbourhoods is not a new concept, it is yet to feature meaningfully in the design of new housing. This paper promotes consideration of the elements that would make up a lifetime neighbourhood. One where a high quality home environment promotes people to stay at home, independently for as long as possible with the best chances of health, well being and social inclusion.

#### **Rugg review of private rented sector**

In January 2008 the Minister of Housing commissioned an independent review of the private rented sector (PRS). In October 2008 the final report was published, known as the 'Rugg Review'. The report acknowledges the general decline in the number of older people housed within the PRS but that those who live in this sector are likely to be among the most vulnerable and on low incomes. Given that privately rented homes have a higher incidence of fuel poverty than in other sectors, it is appropriate for the Council to continue to support measures that help improve conditions.

#### **Other relevant documents include:**

- Opportunity age, (DWP March 2005)
- Independent living strategy (cross-dept, 2006)
- All party parliamentary local Government group inquiry into services for older people
- Getting on well together – new good practice publication, LGA, 6 May 2009).

## Local Policy Context

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### **Cambridgeshire Local Area Agreement (LAA) 2008-11**

The multi agency group responsible for the LAA, Cambridgeshire Together, has set five key goals, each with priorities to achieve for Cambridgeshire. These are:

- Growth
- Economic Prosperity
- Environmental Sustainability
- Equality and Inclusion
- Safer and Stronger Communities

The Cambridgeshire LAA has a delivery plan lasting three years and a number of targets relate to services for older people:

- NI 125 – Achieving independence for older people through rehabilitation / intermediate care
- NI 131 – Delayed transfers of care from hospital
- (per 100,000
- NI 135 – Carers receiving needs assessment or review & a specific carers service, or advice and information
- NI 136 – People supported to live independently through social services
- NI 141 – Number of vulnerable people achieving independent living
- NI155 – Affordable homes delivered.

With the exception of NI 155, none of the Council's services directly report on these indicators but we influence and support them through the provision of preventative services. For example, sheltered housing and the provision of intermediate care in sheltered housing can facilitate early hospital discharge or prevent emergency admission; and DFGs, energy efficiency measures, Decent Homes etc can help to enable people to remain living in their own homes.

### **Cambridgeshire Together's older people strategy 2008-11**

The Cambridgeshire Together partnership (LAA) have produced a joint strategy which aims to address opportunities, services and support for people over 55 years in the county. The strategy has an overall vision:

*To enable older people to remain healthy, happy and active and to continue to make a positive contribution to society for as long as possible.*

The document is structured around seven themes:

- Housing and the home
- Neighbourhood
- Social activities, social networks, and keeping busy
- Getting out and about
- Income
- Information
- Health and healthy living

The document sets out the strategic shift needed within the county to enable the move from residential care towards extra care and the geographic redistribution of resources.

### **The Joint Commissioning Strategy (NHS Cambridgeshire and Cambridgeshire County Council 2008)**

This sets out the vision for Older People:

“Our vision is to develop communities in which older people are truly engaged, exercising choice and control over their lives”

“Our focus is on independence, empowerment, respect, dignity, the promotion of wellbeing through the prevention of illness and social breakdown”

The priorities are:

- Support more people to live at home to maximise independence
- Reduce the number of older people living in residential care
- Ensure that older people and their families / carers have as much choice as possible in their care, support and treatment options as part of a person-centred approach
- Develop alternatives to residential living e.g. extra care schemes
- Develop community based services which respond to older people's needs and prevent unnecessary admissions to hospital
- Provide more responsive and integrated services for older people
- Encourage older people to directly buy services to suit their needs through self-directed support

### **Huntingdonshire sustainable community strategy**

The Council is responsible for promoting the economic, social and environmental wellbeing of our communities, so that we can all enjoy a good quality of life. To do this we must work with and bring together a variety of partners from the public, private and voluntary sectors.

The Huntingdonshire Strategic Partnership is responsible for the Huntingdonshire sustainable community strategy. This sets out how, by working together, we can meet local and national priorities.

The community strategy's long term vision is based on what local people have told us is important for them now and in the future, which is:

Huntingdonshire is a place where current and future generations have a good quality of life and can –

- Make the most of opportunities that come from living in a growing and developing district;
- Enjoy the benefits of continued economic success;
- Access suitable homes, jobs, services, shops, culture and leisure opportunities;
- Realise their full potential;
- Maintain the special character of our market towns, villages and countryside; and

- Live in an environment that is safe and protected from the effects of climate change and where valuable natural resources are used wisely.

The **Health and Well-Being Thematic Group** has an action plan that is a driver for this strategy. Reducing health inequalities; promoting mental health and well being; preventing falls in older people through development of a Handyperson service and prompt delivery of disabled adaptations are all priority objectives. Increasing the opportunities for vulnerable people to live independently by increasing the provision of extra care housing are objectives in the action plan and are also reflected in this strategy.

**Growing Success**, the Council's Corporate Plan sets out how we will achieve our part of the sustainable community strategy. It is based on detailed research and importantly what our communities have told us. The Council needs to balance and reconcile many competing demands and this plan will be used to help us prioritise and allocate resources.

The community aims that this strategy relates to are:

- Housing that meets individual needs
- Safe, active and inclusive communities
- Developing communities sustainably
- Healthy living

### **Cambridgeshire Supporting People Strategy 2008-2010**

The vision for Cambridgeshire is:

*'To improve quality of life and well-being by ensuring housing and housing support is available that reduces risk and enables vulnerable people to live as full a life as possible'*

Underlying the vision is the following commitment and principle:

*'The vision will require all partners to work together, and with communities, to develop preventative services, anticipate and avert crises, and support people to maintain or regain their independence in those ways that best meet needs'*

The Supporting People programme in Cambridgeshire is committed to the following priorities:

1. Prevention
2. Community Development
3. Social inclusion
4. Promoting independence
5. User control

These priorities are closely aligned to wider priorities for the health, housing and social care partners. The Supporting People programme is seen as a mechanism for ensuring these priorities are delivered. Expansion of floating support and extra care and the need to achieve equity in sheltered housing are priorities in the strategy.

### **Supporting People Review of Home Improvement Agencies (HIA)**



The Supporting People review of HIAs, undertaken in 2008 found that HIAs play a key role in promoting independence and contribute to targets on prevention and the LAA. However, they are vulnerable to fluctuations in workload arising from variable OT referrals. Whilst similarly staffed, they offer slightly different approaches to the service and have very different funding arrangements in place. Workload and value for money varies throughout the HIAs and the report has a presumption that *'unless an exemption is granted from the County Council's procurement Contract Regulations, the service will be re-commissioned (put out to tender) when steady state contracts are renewed. Contracts are due for renewal on 1 April 2010.'* Market testing of the Cambridgeshire HIAs is under consideration and may form a work stream over the next few years.

## **Needs Analysis: the Statistical Appendix**

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This section sets out the intelligence driving this Strategy. The four main sources of this information are:

### **1. Joint Strategic Needs Assessment**

In Jan 2008, Cambs County Council and PCT produced a JSNA for older people. The document includes a wealth of information about older people in Cambridgeshire including population projections, frailty, income and deprivation, health inequalities and illness, demand for services, user views and service developments.

### **2. Strategic Housing Market Assessment**

Published in 2008, the SHMA provides a great deal of information about housing and related issues in the Cambridge sub-region. The SHMA details population, health, frailty, the need for sheltered, extra care and nursing care for older people alongside community based services like community alarms. Much of the information is taken from the strategic direction first set out in the BVR sheltered housing.

### **3. Demographic Information**

Mostly taken from the 2001 census and the Cambridgeshire County Council Research Group; the latter have been updated with new population projections since the last Older Persons' Housing Strategy was written, which have altered the statistics. Similarly, updated statistics from the Department of Work & Pensions (DWP) have been interpolated in the report.

### **4. Best Value Review of sheltered housing in Cambridgeshire**

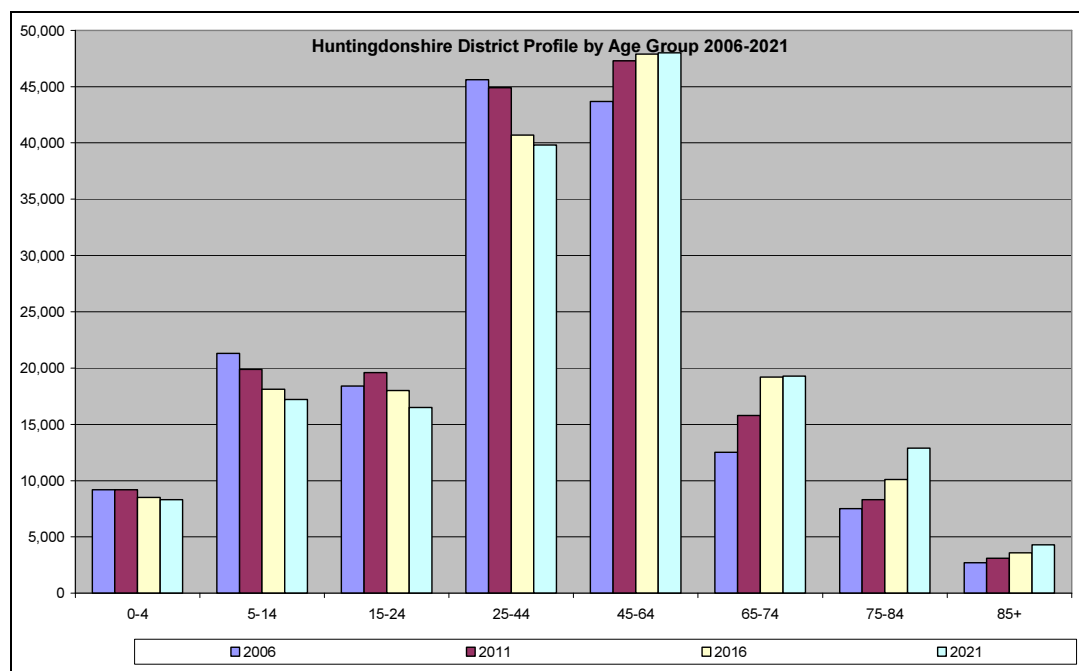
The BVR Sheltered Housing was carried out in 2005 and is the master document suggesting the way forward for housing and related services for older people in Cambridgeshire. The JSNA; Cambs County Council and PCT Older People Strategy; and SHMA all reiterate this direction of travel.

## **Population Projections**

Population projections for Huntingdonshire from the time of the 2001 Census to the year 2021 are given below.

Of particular note is the fact that the 65+ age group in Huntingdonshire is due to increase by 59% (13,700) between 2007 and 2021 – this is higher than the county average (+58%) and than the national average (+33%)<sup>13</sup>.

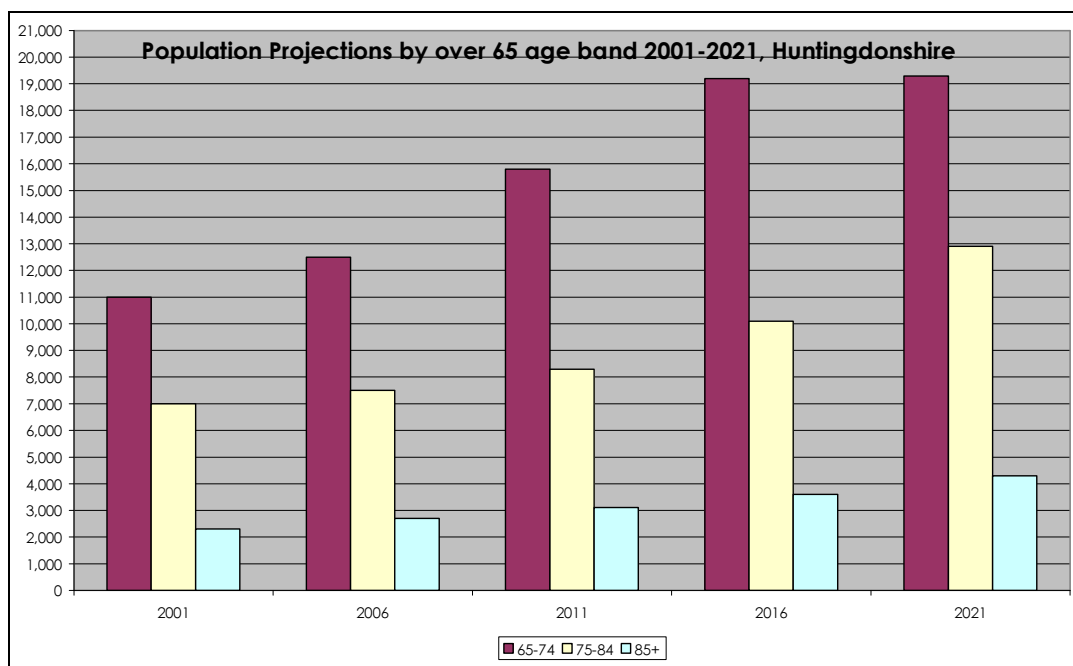
There is a projected 51.5% increase in the 65-74 years age group age groups during this period (2007-2021); 72% increase in the 75-84 age range and 60% projected increase in the 85+ age groups<sup>14</sup>. This means that people are getting older and frailer and there are likely to be more higher end service users in the future.



The over 65 age groups are shown overleaf in greater detail.

<sup>13</sup> Cambridgeshire County Council Research Group website  
<http://www.cambridgeshire.gov.uk/community/population/population/Researchgrouppopulationestimates.htm>

<sup>14</sup> Cambridgeshire County Council Research Group Population Projections 2007  
<http://www.cambridgeshire.gov.uk/NR/rdonlyres/302EDC28-D859-475D-83FD-394531319A61/0/HunpopLA1008.xls>



### Over 65 Population Projections by District - Cambridgeshire

Over 65 population by District and year						
Authority	2001	2007	2011	2016	2021	Increase 2001-2021
Cambridge City	14,400	13,700	15,100	17,600	20,100	<b>5,800</b>
East Cambs	11,500	13,000	14,600	17,500	19,700	<b>7,900</b>
Fenland	16,100	17,600	19,200	22,200	24,900	<b>8,500</b>
Huntingdonshire	20,300	23,200	27,200	32,800	36,900	<b>16,200</b>
South Cambs	19,200	22,100	26,700	34,400	40,500	<b>20,900</b>
<b>Cambridgeshire</b>	<b>81,500</b>	<b>89,600</b>	<b>102,800</b>	<b>124,500</b>	<b>142,100</b>	<b>59,300</b>

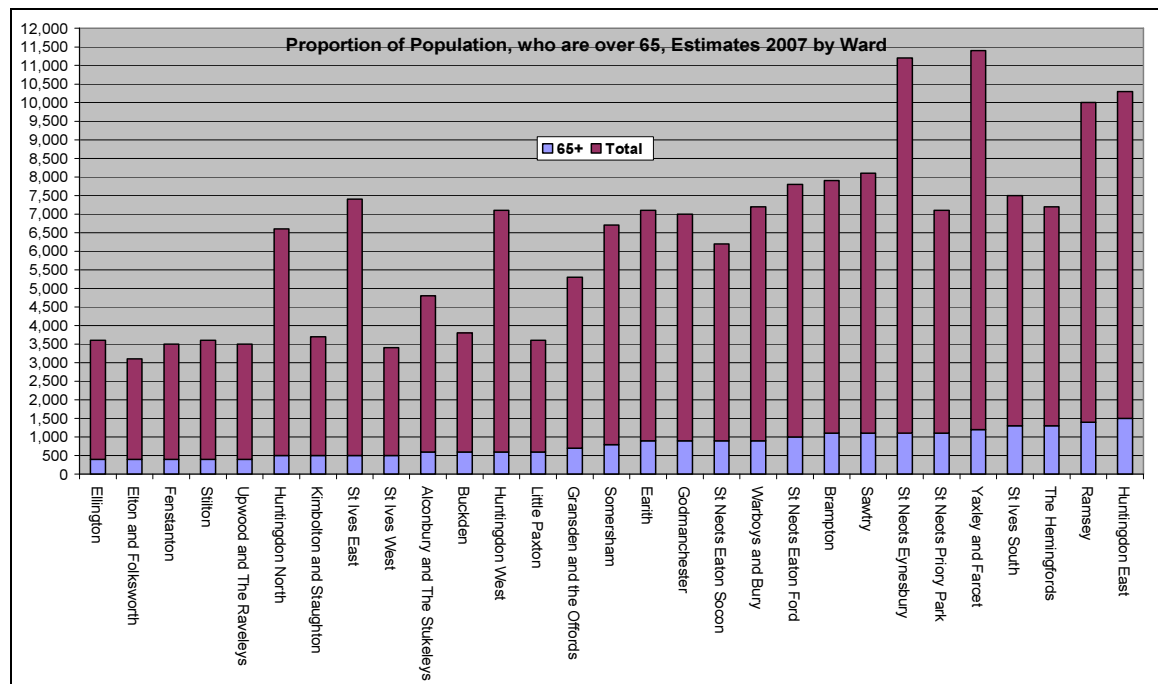
Source: Cambridge County Council Research Group Projections<sup>15</sup>

After South Cambridgeshire, Huntingdonshire expects the largest increase in older people between 2001 and 2021.

According to the JSNA, 'between 2001 and 2007, the registered population of Cambridgeshire has grown by around 8,100 people aged over 65 (an increase of 9.9%). This represents 12% of the overall population growth in Cambridgeshire since 2001. For Huntingdonshire, this figure is an increase of 2,900 (an increase of 14.3%). Huntingdonshire is experiencing the highest growth in the older population – 60% of all the overall population growth from 2001-2007 was generated by people aged 65 and over.

<sup>15</sup> <http://www.cambridgeshire.gov.uk/NR/rdonlyres/302EDC28-D859-475D-83FD-394531319A61/0/HunpopLA1008.xls>

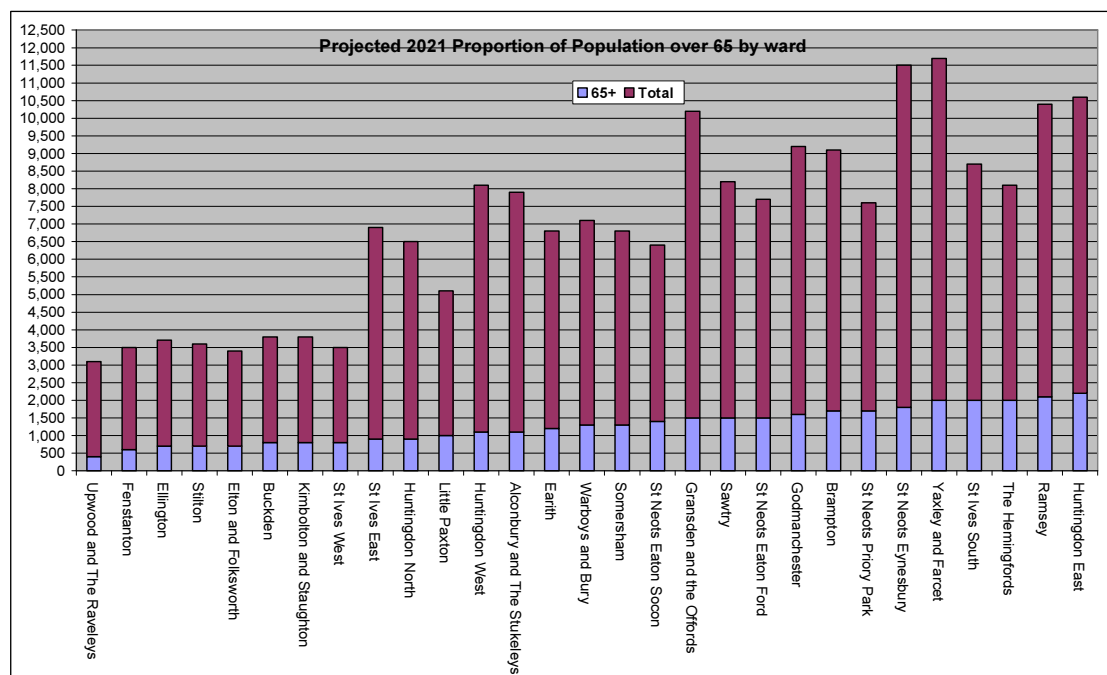
## Population Estimates by Ward 2006



Source: Cambridge County Council Research Group Projections 2007

The wards with the highest 65+ population are Huntingdon East (1,500), Ramsey (1,400), The Hemingfords and St Ives South (both 1,300). As a proportion of population, the highest percentage of 65+ residents live in the Hemingfords (22% of the population are over 65), St Ives South (21%), and Little Paxton (20.0%)

Projecting forward to 2021, St Ives South, The Hemingfords, Yaxley & Farcet, Ramsey, and Huntingdon East will all have 65+ ward populations of over 2,000 residents. Proportionally, in 2021 St Neots Priory Park, St Ives West, St Ives South, and the Hemingfords wards will all have in excess of 29% of their population over 65 years of age, with the Hemingfords at 33%.



Source: Cambridge County Council Research Group Projections, 2007

### **Household composition**

Figures for household composition have not been revised by County or the Office for National Statistics (ONS) since 2001.

Based on the 2001 figures, almost a fifth of all Huntingdonshire households are aged 65+<sup>16</sup>. About half of these households consist of over 65s living alone, which is significantly lower than the national average.

### **Ethnicity**

ONS have now provided statistics for ethnicity by broad age groups at Census time. This shows that the 50+ population is considerably less diverse than that under 50<sup>17</sup>.

All Ages	Non- White	<b>1.7%</b>
Aged 50+	UK	<b>0.5%</b>

### **Life Expectancy**

<b>Life Expectancy at Birth</b>	<b>Males</b>	<b>Females</b>
Huntingdonshire	79.3	82.6
Cambridge City	78.7	82.6
East Cambridgeshire	80.8	84.0
South Cambridgeshire	80.9	84.4
Fenland	78.1	80.9
Cambridgeshire	79.0	83.0
<b>East of England</b>	<b>78.3</b>	<b>82.6</b>
<b>United Kingdom</b>	<b>77.2</b>	<b>81.5</b>

Source: ONS Statistics website, November 2008<sup>18</sup>

Life expectancy in the District Council area is above the regional and national average for males, and around the same or slightly below or above for females.

See overleaf for a graphical representation of the above

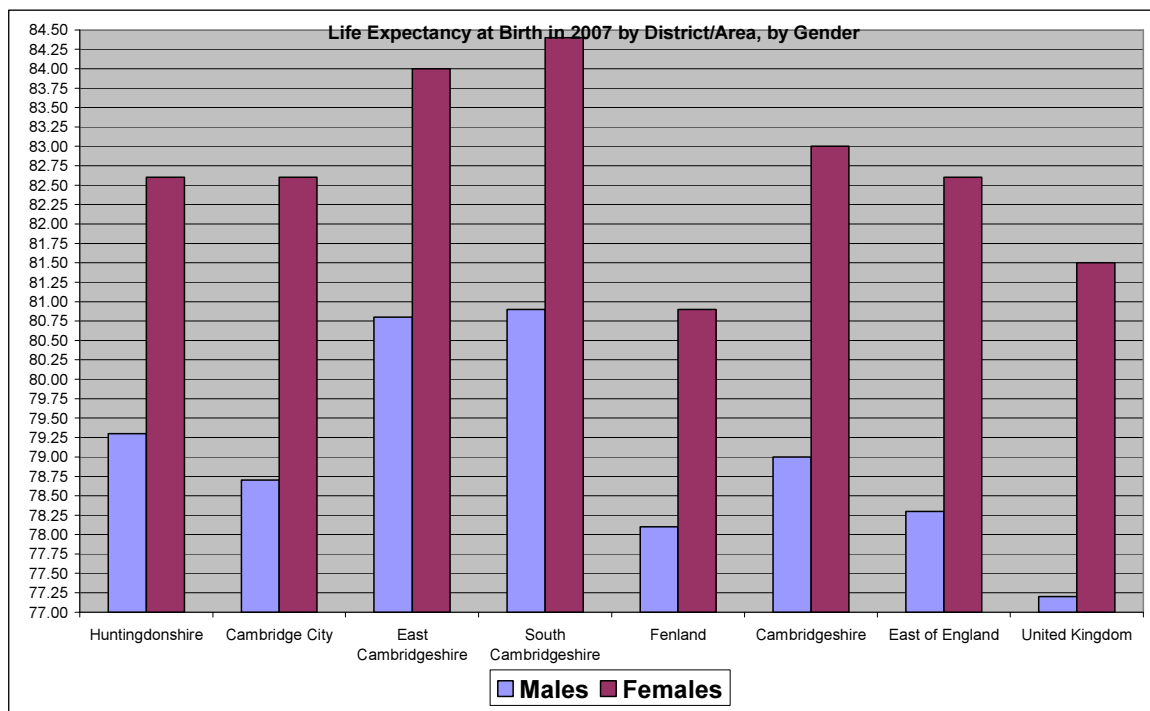
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<sup>16</sup> ONS Census, 2001

<sup>17</sup> Ibid

<sup>18</sup> ONS Life Expectancy Tables

[http://www.statistics.gov.uk/downloads/theme\\_population/LE\\_EW\\_2008.xls](http://www.statistics.gov.uk/downloads/theme_population/LE_EW_2008.xls)



Source: ONS Statistics website, November 2008<sup>19</sup>

### **Frailty Estimates**

Across Cambridgeshire, the number of physically frail older people is projected to rise by 53% by 2021. The number of cognitively impaired older people is projected to increase by 59% and the number of people who are both physically and cognitively frail is projected to increase by 54%.

Frailty is broken down into three elements: physical, cognitive and combined. The projected increases for Huntingdonshire are given below:

#### **(d) Huntingdonshire**

	Age	2006	2011	2016	2021	% change
Physical	65-74	550	700	850	860	56%
	75-84	870	960	1,170	1,440	66%
	85+	740	850	970	1,160	57%
	Total	2,170	2,510	3,000	3,460	59%
Cognitive	65-74	180	230	280	280	56%
	75-84	260	290	360	460	77%
	85+	230	260	300	360	57%
	Total	670	780	940	1,100	64%
Combined	65-74	80	100	120	120	50%
	75-84	210	240	290	360	71%
	85+	340	390	450	540	59%
	Total	630	730	860	1,030	63%
All disabled	Total	3,470	4,020	4,800	5,590	61%

<sup>19</sup> ONS Life Expectancy Tables

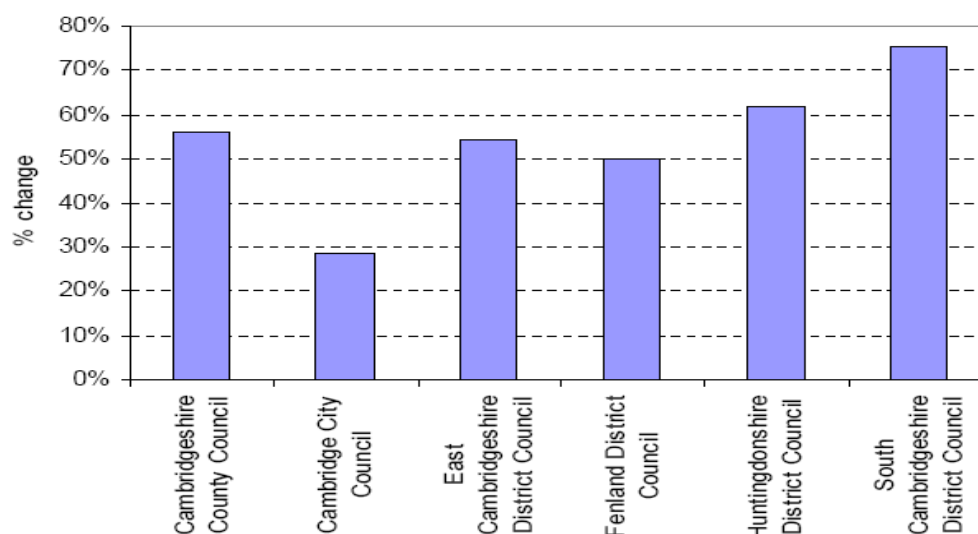
[http://www.statistics.gov.uk/downloads/theme\\_population/LE\\_EW\\_2008.xls](http://www.statistics.gov.uk/downloads/theme_population/LE_EW_2008.xls)

Source: Cambridgeshire Older Persons' Joint Strategic Needs Assessment<sup>20</sup>

## Dementia

Prevalence estimates suggest that, in 2006, there are around 6,600 older people with dementia in Cambridgeshire. By 2021 this is forecast to rise by 56% to 10,200. The figure below shows how the population with dementia is forecast to change by age between 2006 and 2021. This means that services need to be appropriately resourced to support people with dementia and needs to be considered in housing design and service configuration. (Source: JSNA)

**Figure 18:** Proportional change in new dementia cases, by PCT, 2003-2021



## Aged Dependency Ratio

The ratio of people aged 65+ to those aged 0-64 is due to increase. This decreases the proportion of people likely to be economically active and available to care for and pay the taxes to support older people. The number of people aged 15 to 64 per person aged over 65 is forecast to drop by between 16% in Cambridge City to 41% in Huntingdonshire and in South Cambridgeshire<sup>21</sup>.

District	Ratio of working age population to those between 0-14 and over 65					2001-2021	2007-2021
	2001	2007	2011	2016	2021	Change	Change
Cambridge	2.73	2.91	2.91	2.69	2.34	14.3%	19.5%
East Cambridgeshire	1.84	1.85	1.79	1.58	1.47	20.1%	20.9%
Fenland	1.65	1.70	1.69	1.59	1.47	11.1%	13.8%
Huntingdonshire	2.01	2.05	1.98	1.78	1.66	17.4%	19.0%

<sup>20</sup> [http://www.cambridgeshirepct.nhs.uk/documents/About%20Us/Public%20Health/Older\\_Peoples\\_JSNA - January 2008.pdf?preventCache=20%2F06%2F2008+09%3A49](http://www.cambridgeshirepct.nhs.uk/documents/About%20Us/Public%20Health/Older_Peoples_JSNA_-_January_2008.pdf?preventCache=20%2F06%2F2008+09%3A49)

<sup>21</sup> Cambridgeshire County Council Research Group Estimates for 2007, November 2008



South Cambridgeshire	1.97	1.93	1.75	1.53	1.44	26.7%	25.1%
Cambridgeshire	2.03	1.76	2.00	1.83	1.69	16.8%	4.0%

Ratio of people aged 15-64 to those aged 65 or over						2001- 2021	2007- 2021
District	2001	2007	2011	2016	2021	Change	Change
Cambridge	5.59	6.26	6.48	6.12	5.27	5.8%	15.8%
East Cambridgeshire	3.99	3.89	3.53	2.85	2.41	39.6%	38.1%
Fenland	3.24	3.27	3.09	2.72	2.37	26.7%	27.4%
Huntingdonshire	5.17	4.69	4.11	3.20	2.78	46.2%	40.7%
South Cambridgeshire	4.51	4.19	3.49	2.76	2.48	45.1%	40.8%
Cambridgeshire	4.54	4.41	4.04	3.38	2.97	34.7%	32.8%

### Fuel Poverty

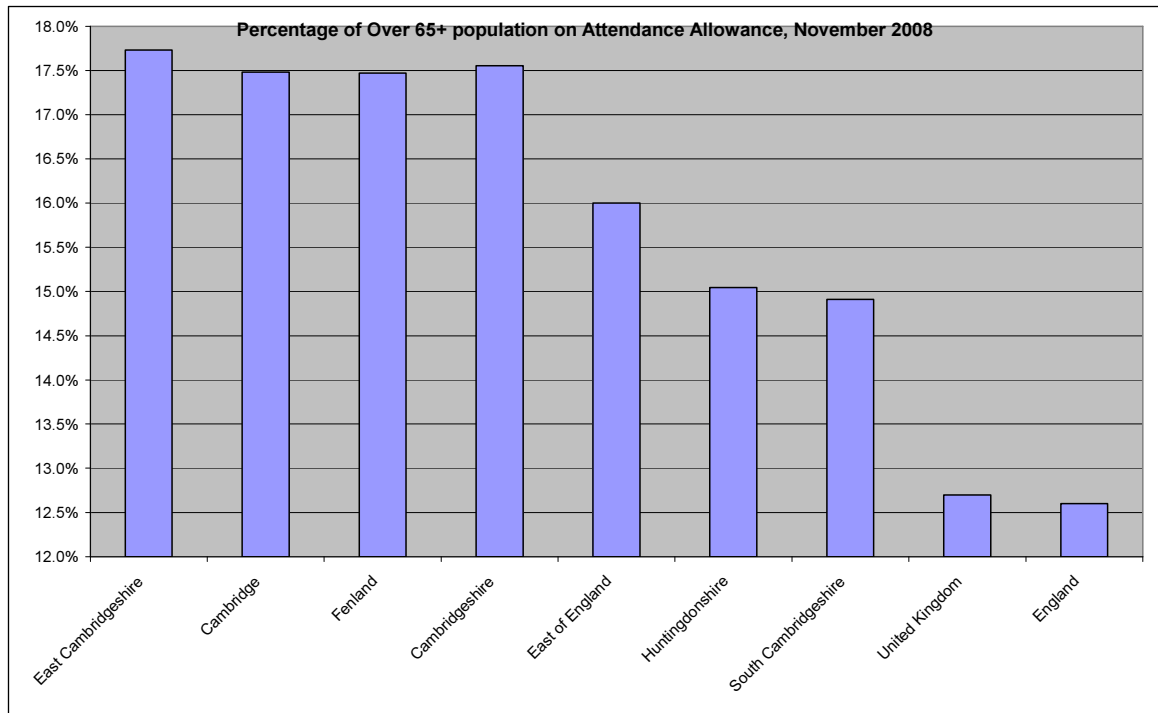
There are over 13,000 households in Cambridgeshire in fuel poverty. Five areas in Cambridge City, two in Huntingdonshire and one in Fenland are in the worst 10% in England. Older people are more likely to be in fuel poverty as they are on lower incomes.

### Attendance Allowance

Attendance allowance is a payment made in the UK to people who are over 65 who have long term health problems, mental or physical, that present a care or supervisory need. It is not means tested and therefore is an indicator of the health and well being of the over 65 population.

District	65+ Population	AA Claimants	% over 65 on AA
Cambridge	13,700	2,395	17.5%
East Cambridgeshire	13,000	2,305	17.7%
Fenland	17,600	3,075	17.5%
Huntingdonshire	23,200	3,490	15.0%
South Cambridgeshire	22,100	3,295	14.9%
<b>Cambridgeshire</b>	<b>89,600</b>	<b>14,560</b>	<b>16.3%</b>
United Kingdom			12.7%
England			12.6%
East of England			16.0%

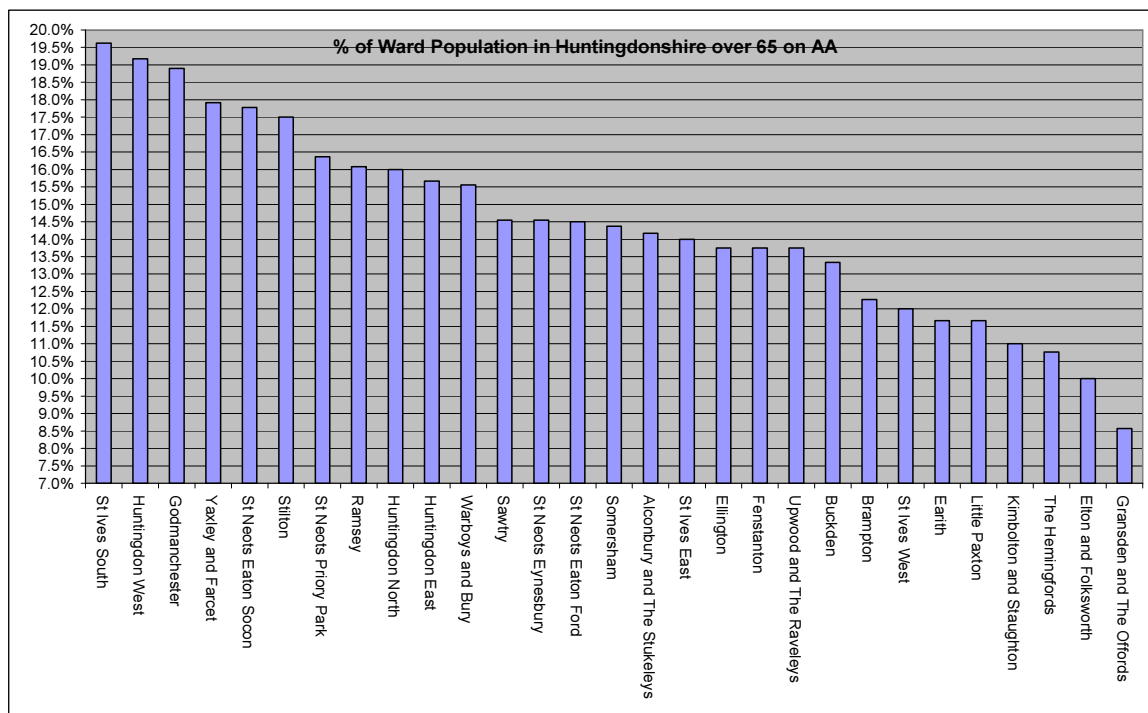
DWP & GAD Data, November 2008



Source: DWP Website, November 2008

In Huntingdonshire 15% of older people claim Attendance Allowance. This is 1.3% less than the Cambridgeshire average but a third more than the UK average (12.7%).

This does mask some considerable variations within the district:



Source: DWP Website, November 2008

For instance, St Ives South has 19.6% of the over 65 population claiming Attendance Allowance, Huntingdon West (19.2%), Godmanchester (18.9%), Yaxley & Farcet (17.9%), and St Neots Eaton Socon (17.8%) are all above the national, regional, county and district averages.

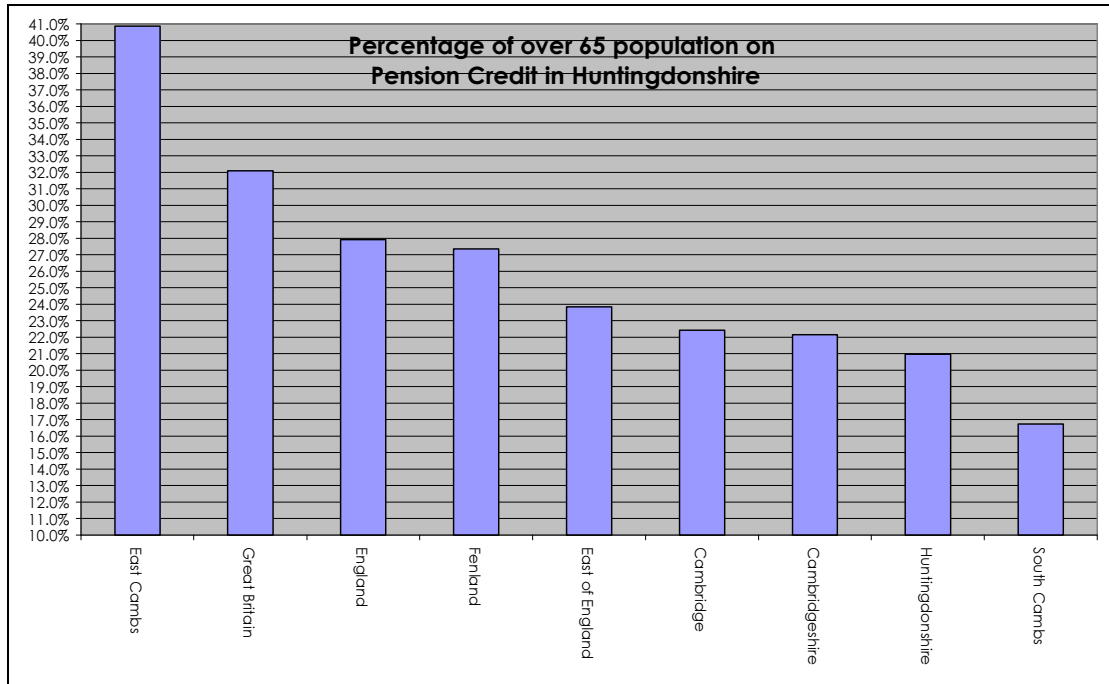
At the other end of the spectrum, Gransden & the Offords (8.6%), and Elton & Folksworth (10.0%) wards have between half and a third less than the average district percentage of Attendance Allowance claimants aged over 65.

Of course people in some areas will enjoy better health than others but benefit take up and awareness raising remains an issue for this Council.

### **Pension Credit**

Reforms were introduced in 2003 to lift a large number of the poorest retired people out of poverty - the 'Pension Credit'. Pension Credit has two elements: 'Guarantee Credit' is a "means tested" benefit which is paid if the income of the claimant and partner is below a certain level (£124.05 for a single person in 2008/9). It is payable from age 60. In effect, this is Income Support for the over 60's.

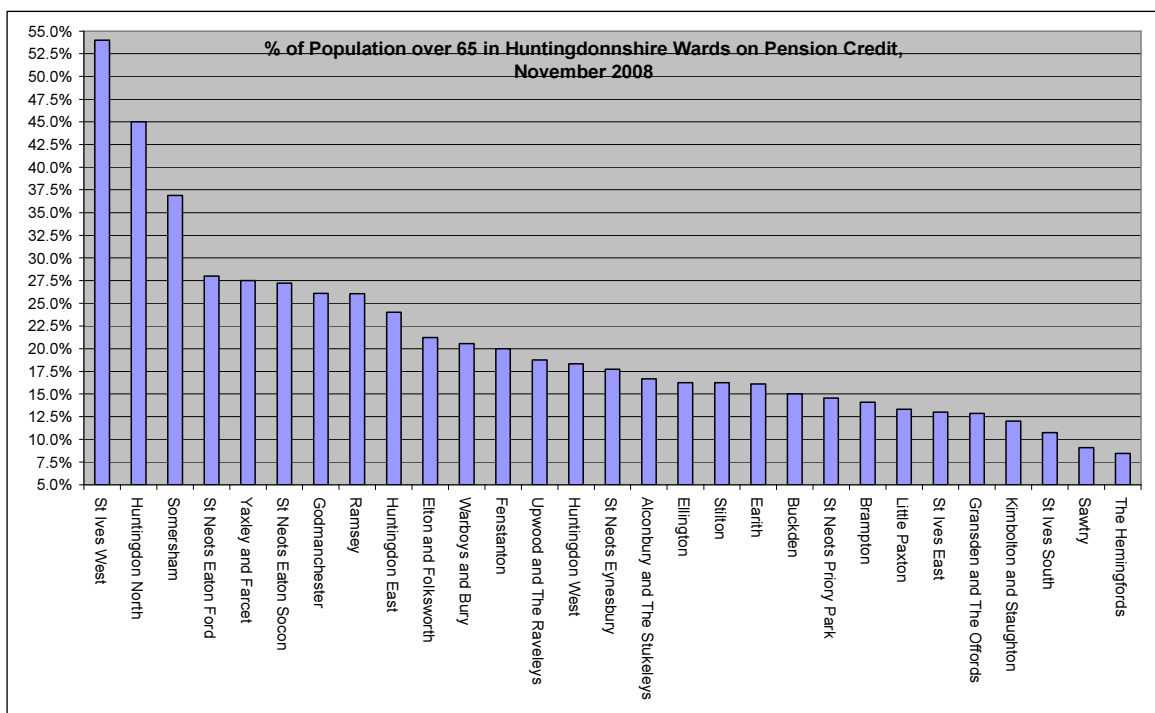
When the claimant or partner reaches 65 then the second element, Savings Credit, is also payable. Savings Credit is designed to "reward" people who saved for their pension during their working life. It therefore provides additional benefit to retired people who are not well off, but do have savings or a personal pension.



Source: DWP Website, November 2008

The District Council area has a relatively low number (4,760) and percentage of over 65s on Pension Credit compared to other districts in Cambridgeshire, and regional/national averages – the district figure is 20.8% of the over 65 population, around 5% less than the County average, and around 8% less than the national average.

As with Attendance Allowance, this masks a *considerable* variation within the district at ward level



Source: DWP Website, November 2008

As can be seen, 54% of the residents of St Ives West ward over 65 claim Pension Credit, around double the national average, and nearly two and a half times the district council and county average. Huntingdon North has a similarly high percentage (45.0%) of over 65s on Pension Credit. At the other end of the scale, in the Hemingfords ward, only 8.5% of over 65s claim Pension Credit.

As this is a means tested benefit, it could indicate ineligibility because people have higher incomes than the Pension Credit threshold. Alternatively there could be issues with a lack of take up.

### Housing Tenure

These figures have not been extensively revised since 2001. Overall figures for tenure (regardless of age) were produced in 2006, and showed the percentage of RSL rented properties had decreased from Census time (13.0%) to 2006 (12.4%). It is however not possible to comment or impute figures for the over 65s.

Based on the 2001 figures, slightly less older people than the district average are owner-occupiers at 72.9% whilst 28.1% of older people rent their homes. Of those renting (4,096 households), a very high proportion – over 90% - receive an amount of Housing Benefit.

There are, however, great variations within these figures; 48.0% of over 65s in Huntingdon North rent, compared to 11.1% of over 65s in Little Paxton.

See below for a ward-by-ward analysis of the tenures of the residents of the wards in Huntingdonshire.

