HOUSING CHOICES FOR OLDER PEOPLE IN IRELAND

TIME FOR ACTION
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Executive Summary

The goal of this report is to drive discussion and offer solutions which provide choice in housing for older people in Ireland. We believe that there is scope for a greater focus on housing provision for older people in Rebuilding Ireland, Action Plan for Housing and Homelessness and at a local level in local authority housing strategies.

The report explores the various housing options that a ‘spectrum of housing’ for older people should include. It outlines the demand and the supply needed of the options currently available, the future demand for these options, and the investment that should be put in place under the Government’s Housing Plan over the next 10 years.

Why is this needed?

Increasing Ageing Population

As is widely recognised, Ireland has an ageing population. Table 1 below outlines how Ireland’s demographics will change over the coming years.

<table>
<thead>
<tr>
<th>Age</th>
<th>2016</th>
<th>2021</th>
<th>2026</th>
<th>2031</th>
</tr>
</thead>
<tbody>
<tr>
<td>60 +</td>
<td>866,317</td>
<td>1,004,670</td>
<td>1,154,841</td>
<td>1,312,783</td>
</tr>
<tr>
<td>80 +</td>
<td>147,798</td>
<td>176,132</td>
<td>221,131</td>
<td>282,207</td>
</tr>
<tr>
<td>60+ living alone</td>
<td>268,558</td>
<td>311,448</td>
<td>358,001</td>
<td>406,963</td>
</tr>
<tr>
<td>60+ living alone, 5 rooms+</td>
<td>160,269</td>
<td>185,864</td>
<td>213,646</td>
<td>242,865</td>
</tr>
</tbody>
</table>

While this is, and should be seen as, a good thing it will obviously present challenges, as our housing needs and preferences change as we grow older. There will also be a marked increase in the numbers living alone.

ALONE Experience

In our experience, there needs to be choice in housing to allow older people to age in place. This choice should be open to all older people in Ireland, not just those who qualify for social housing or who can afford to avail of more costly private options. This is why we are calling for a ‘spectrum of housing’ that not only takes into consideration the needs of older people from a health, community and social inclusion perspective, but also shows an awareness of the need for different price points.

ALONE’s experience also demonstrates the importance of community based supports. These supports need to be in place on the ground to enable the older person to overcome challenges and difficulties they encounter, as well as to access the benefits and resources that will enable them to remain living at home within their community. ALONE estimate that at any one time 20% of older people require some level of support intervention. We welcome the commitment from the HSE to roll out ALONE’s services nationally over the coming years. These will include befriending, coordination of supports, housing and technology. This will be the beginnings of a network of support across the country. The need for community based supports was validated by Minister for Older People, Jim Daly at the launch of the Consultation Report on Home Care ‘Improving Home Care Services in Ireland: An Overview of the Findings of the Department of Health’s Public Consultation’ in June 2018. This has also been supported in the recommendations from the OPRAH Study in 2017.
We have analysed the limited data available in Ireland in regard to housing need, and compared this with UK experience and research in the area. A detailed exploration of this data is available within the Report.

We welcome the heightened focus on housing for older people today in Ireland, which is demonstrated by the Report from the Joint Oireachtas Committee on Housing, the commitment for a joint statement from the Minister for Housing and Minister for Older People on the housing needs for older people, and the inclusion of the Demonstrator Project within Rebuilding Ireland. Now is the time to take this recognition a step further, and begin the process of building communities for people to live in throughout their life-cycle and to support older people to age in place, preparing for the demographic change and addressing gaps in housing options.

**What's involved?**

An integrated housing approach for older people needs to be included within Rebuilding Ireland in order to:

- Prepare for the impact on housing demand from an ageing population
- Respond to changes in housing tenure among older people
- Address suitability issues with some of the current housing stock occupied by older people
- Enable older people to stay in their homes as their needs change
- Provide a range of housing options (spectrum) that facilitates people to move house as their needs change

To this end, we are calling for an overall investment in a range of housing options for older people, which would include:

- Dispersed housing (general housing)
- Shared housing in the community
- Dedicated sheltered housing for older people (social, affordable and private)
- Nursing home
More detail on the exact breakdown of these requirements is detailed in the later sections of this report. In brief, this would broadly take the form of:

<table>
<thead>
<tr>
<th>Type of Housing</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dispersed Housing</td>
<td>We need a range of additional housing units, funding towards home adaptation grants and national implementation of accessible design standards and community supports to include:</td>
</tr>
<tr>
<td></td>
<td>• €84.5m a year over the next 10 years(^1) in the form of home adaptation grants (via the Housing Aid for Older People Scheme) to assist older people to upgrade existing homes to age-friendly standards. These also need to be timely and easier to access</td>
</tr>
<tr>
<td></td>
<td>• 59,462 purpose-built homes within existing communities(^2)</td>
</tr>
<tr>
<td></td>
<td>• A commitment to ensure that all new homes built in Ireland are built to age-friendly and Universal Design principles. This will reduce long term demand on home adaptation grants when the existing stock is upgraded.</td>
</tr>
<tr>
<td></td>
<td>• A commitment to put community supports in place which enable older people to access any social, health or financial assistance they require to remain living at home</td>
</tr>
<tr>
<td>Shared Housing</td>
<td>• We need 16,307 shared and supported housing schemes accommodation options to include:</td>
</tr>
<tr>
<td></td>
<td>• 13,557 ‘Co-housing’ /Retirement Village homes - housing with no supports</td>
</tr>
<tr>
<td></td>
<td>• 1,000 Home Share</td>
</tr>
<tr>
<td></td>
<td>• 1,000 Split Housing</td>
</tr>
<tr>
<td></td>
<td>• 750 Boarding Out places</td>
</tr>
<tr>
<td>Supported housing schemes</td>
<td>We need 45,905(^3) shared and supported housing schemes accommodation options through social housing where residents have the ability to buy into schemes. These include:</td>
</tr>
<tr>
<td></td>
<td>• 41,564 ‘Supportive Housing’ - housing schemes with access to structured visiting supports</td>
</tr>
<tr>
<td></td>
<td>• 4,341 ‘Housing with Supports’ - housing with onsite staff supports and services</td>
</tr>
<tr>
<td>Nursing Home</td>
<td>Quality nursing homes developed as part of multi-purpose complexes. The current(^4) rate of nursing home occupancy is 3.7%, or c.23,304 units.</td>
</tr>
<tr>
<td></td>
<td>• If occupancy continues at its current rate, demand will be for 36,987 units by 2031 (circa 1000 additional beds per year)</td>
</tr>
</tbody>
</table>

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\(^1\) Based on a reported need (HaPaI, 2018) of 20.7% households occupied by people aged 55+ and assumes an average grant of €3,600 (based on 2016 average data for Housing Adaptations for Older People published by the Department of Housing, Planning and Local Government)

\(^2\) Based on estimation contained in 2016 Report on Housing for Older People that 15% of those 65+ would move to a different home within their community (a concept known in the UK as ‘right-sizing’)  

\(^3\) Reference as above, a further 15% would move to ‘age-friendly’ accommodations

\(^4\) Census 2016
Conclusion

There is scope for further development of models of dedicated housing for older people. Further planning and action needs to take place to ensure that housing for older people is located in areas of high demand and in locations close to people’s current homes. This will ensure that people are not displaced from their communities and forced to move away from their families and social networks.

National planning policy should make sites available for Local Authorities and Approved Housing Bodies to provide more social housing with supports for older people, and for private developers to provide affordable housing. This needs to become an integral part of town planning in the context of age-friendly communities.

An integrated housing approach to housing for older people within Rebuilding Ireland will provide the following benefits:

a. Ensure that the National Positive Ageing Strategy’s aspirations are met.

b. Provide real choice in housing options for older people, with the appropriate supports incorporated nationwide.

c. Enable older people to remain in existing homes through a properly resourced and easy to navigate home adaptation system.

d. Enable minimum savings of €150m for every 10,000 one and two bed homes built for older people. The cost of building smaller homes for older people is estimated to be between €10K and €20K cheaper than building three - and four - bed family homes. The potential saving is based on the understanding that as older people choose to move to smaller homes they will free up larger family homes.

e. Reduce the incidence of older people having to remain in acute hospital settings long after they are ready for discharge, due to lack of housing options available or long delays in housing adaptations being carried out.

f. Reduce the numbers of older people moving to costly nursing home provision due to lack of alternative housing with supports. It is estimated that the cost to the ‘Fair Deal’ scheme will increase by an additional €729m annually by 2031, as a result of demographic changes.

g. Enable older people to ‘rightsize’ through the availability of choice in housing options in their community.

h. Reduce the pressure on the private rented sector and reduce what will be an increasing pressure on HAP Scheme.

We hope that the Report will assist policy makers at both Central and Local Government level in planning for housing and the vital supports that older people require to remain living at home within their communities. We believe that the delivery of these ambitious targets will depend on an innovative and collaborative approach between all stakeholders including the Department of Housing Planning and Local Government, Department of Health, Local Authorities, HSE and the Approved Housing Body sector.

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5 Analysis of figures provided by Department of Housing, Planning, and Local Government, June 29th 2018
6 Analysis based on current percentage of older people in nursing home of 3.7% being maintained and demographic change projections forecasting increasing population of older people.
7 Rightsizing refers to when a person (in this case older person) chooses to move to a home that best suits their needs and aspirations in terms of size. HaPAI data shows that 15.4% of people surveyed had problems with current property being too big or not enough space.
Structure of the Report

This report is set out in three Sections:

Section 1 reviews the current housing situation of the older population in Ireland, looking at tenure, adequacy, nursing homes, social housing and homelessness, and identifies issues for older people in having their accommodation needs met.

Section 2 reviews the requirement for a spectrum of housing for older people, and estimated need.

Section 3 provides greater detail on what this spectrum could look like, from dispersed housing through to residential nursing home care and options for shared and sheltered accommodations.

Section 4 provides a conclusion and recommendations for next steps for Government to implement a comprehensive spectrum of housing for older people over the next 10-12 years.

Methodology

A review of relevant literature, policy briefings and legislation was undertaken, in addition to accessing statistical databases of the CSO, Government Departments and data from other jurisdictions for information and analysis.

Much of the analysis within this report detailing requirement by population and population projection is based on population projections to 2031. These projections are based on a model of the population and labour force projections published by the Central Statistics Office in June 2018. The model used is the M2F2 model. This takes the mid-level net-migration assumption of +20,000 per annum (M2), and the most conservative fertility assumption (F2) which assumes a decrease in fertility rate from 1.8 to 1.6 by 2031.

It is on this basis that the projected needs identified within this Report may be considered conservative.
Section 1 – Population and Housing Provision

An Ageing Population

According to CSO population projections (Central Statistics Office, 2018), the proportion of the population aged 60 and over is set to increase by over 51% between 2016 and 2031, to account for just under one quarter of the total population in 2031. Those aged 70 and over will increase by over 70% between 2016 and 2031, and the number of people aged over 80 will increase by almost 91% during this period (see Chart 1 and Table 1).

Figure 1: Population Projections, People aged 60 and over, by intervals, 2016-2031

<table>
<thead>
<tr>
<th>Age</th>
<th>2016</th>
<th>2026</th>
<th>2031</th>
<th>% change 2016-2031</th>
</tr>
</thead>
<tbody>
<tr>
<td>60+</td>
<td>866,317</td>
<td>1,154,841</td>
<td>1,312,783</td>
<td>51.53</td>
</tr>
<tr>
<td>60+ % total population</td>
<td>18.28</td>
<td>22.18</td>
<td>24.34</td>
<td></td>
</tr>
<tr>
<td>65+</td>
<td>629,847</td>
<td>867,091</td>
<td>999,639</td>
<td>58.71</td>
</tr>
<tr>
<td>65+ % total population</td>
<td>13.29</td>
<td>16.65</td>
<td>18.53</td>
<td></td>
</tr>
<tr>
<td>70+</td>
<td>421,878</td>
<td>613,607</td>
<td>719,982</td>
<td>70.66</td>
</tr>
<tr>
<td>70+ % total population</td>
<td>8.90</td>
<td>11.79</td>
<td>13.35</td>
<td></td>
</tr>
<tr>
<td>80+</td>
<td>147,798</td>
<td>221,131</td>
<td>282,207</td>
<td>90.94</td>
</tr>
<tr>
<td>80+ % total population</td>
<td>3.12</td>
<td>4.25</td>
<td>5.23</td>
<td></td>
</tr>
</tbody>
</table>


Table 1: Population Projections (M2F2), People aged 60 and over, by intervals, 2016 to 2031

As can be seen in Table 1, almost a quarter of the population in 2031 is projected to be aged 60 years and over. While the proportions decrease with age, a 91% increase in the number of people aged 80 years and over between 2016 and 2031 sees the proportion rise from just over 3% of the total population in 2016 to over 5% of the population in 2031.

**Current Housing**

**Tenure**

As can be seen in Figure 1, there is a correlation between age and home ownership, with the percentage of those owning their homes outright increasing with age, while younger age groups tend to be renters or own with a mortgage.

![Figure 2: Tenure Status by age of household, 2016](image-url)
According to Census 2016 (Central Statistics Office, 2017), the largest proportion of people aged 60 and over were owner occupiers (with or without a mortgage) (88%, \( n=456,848 \)), followed by those renting from a local authority or voluntary body (8%, \( n=39,374 \)), those in the private rented sector (3%, \( n=15,883 \)), and those “occupied free of rent” (2%, \( n=9,808 \)).

In the context of a housing strategy for the next 10-12 years, however, it is worth noting the difference in tenure from the ages of 50 and upwards at the time of the 2016 Census. Only 2% of those people aged 65 and older were renting from a private landlord, compared to almost 10% of those aged 50-54 (see Table 2). This will have implications for the sustainability of the home for an ageing population of private tenants. While local authority tenancy is also a feature, the proportion remains relatively consistent throughout the age groups, suggesting that good quality social housing has a role to play in allowing older people to age in place and in communities.

### Table 2: Tenure by age bracket, Census 2016

<table>
<thead>
<tr>
<th>Age</th>
<th>Owner occ. with loan/mortgage</th>
<th>Owner occ. without loan / mortgage</th>
<th>Rented from private landlord</th>
<th>Rented from Local Authority</th>
<th>Rented from a Vol. Body</th>
<th>Rent free</th>
<th>Households (N)</th>
</tr>
</thead>
<tbody>
<tr>
<td>50-54</td>
<td>74,829 (45.7%)</td>
<td>54,452 (33%)</td>
<td>16,043 (9.8%)</td>
<td>14,802 (9%)</td>
<td>1,383 (0.8%)</td>
<td>1,961 (1%)</td>
<td>163,470</td>
</tr>
<tr>
<td>55-59</td>
<td>50,183 (33.3%)</td>
<td>73,155 (48.6%)</td>
<td>10,934 (7.27%)</td>
<td>13,004 (8.6%)</td>
<td>1,219 (0.8%)</td>
<td>1,849 (1.22%)</td>
<td>150,344</td>
</tr>
<tr>
<td>60-64</td>
<td>27,757 (20.5%)</td>
<td>86,766 (64%)</td>
<td>6,582 (4.85%)</td>
<td>11,570 (8.53%)</td>
<td>1,131 (0.8%)</td>
<td>1,728 (1.27%)</td>
<td>135,534</td>
</tr>
<tr>
<td>65+</td>
<td>22,674 (5.86%)</td>
<td>319,651 (82.7%)</td>
<td>9,301 (2.4%)</td>
<td>23,186 (6%)</td>
<td>3,487 (0.9%)</td>
<td>8,080 (2%)</td>
<td>386,379</td>
</tr>
<tr>
<td>Total 50+</td>
<td>175,443 (21%)</td>
<td>534,024 (63.9%)</td>
<td>42,860 (5.13%)</td>
<td>62,562 (7.48%)</td>
<td>7,220 (0.86%)</td>
<td>13,618 (1.62%)</td>
<td>835,727</td>
</tr>
</tbody>
</table>


The cost of private rented accommodation is a topic for debate within the context of the current housing crisis generally. It is a particular issue for older people, especially those reliant on a State pension which, while designed to provide living costs for older people, was not designed to cover increasing market rents.

**Older People Living Alone**

According to Census 2016 (Central Statistics Office, 2017), there were 399,815 people living alone on Census night. The number of people living alone increases with age, with 49% aged 60 and over (\( n=195,852 \)). The majority of all people living alone were found to be living in their own home, with 68.1% being homeowners. Given that trends in tenure move towards owner occupancy with increasing age, it is likely that the majority of the 195,852 people aged 60 and over are owner occupiers.

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8 This figure records numbers residing in social housing. This includes a mix of dedicated housing schemes for older people and in the general social housing stock (local authority and AHB).
Of those aged 60 and over and living alone, the majority (58.7%, \(n=114,848\)) were living in a house with five rooms or more. Over 17% (\(n=33,762\)) were living in a house with 7 rooms or more. As rooms for occupancy are defined by the Census as including kitchens, living rooms, conservatories and studies\(^9\), we are assuming for the purpose of this document that a house enumerated by the Census as having five rooms is a 3-bed house, and so on.

A breakdown of households of those aged 60 and over living alone by number of rooms is set out in Table 3.

<table>
<thead>
<tr>
<th>Living Alone</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Households</td>
<td>195,852</td>
</tr>
<tr>
<td>1 room</td>
<td>3,753</td>
</tr>
<tr>
<td>2 rooms</td>
<td>13,185</td>
</tr>
<tr>
<td>3 rooms</td>
<td>21,049</td>
</tr>
<tr>
<td>4 rooms</td>
<td>27,965</td>
</tr>
<tr>
<td>5 rooms</td>
<td>45,258</td>
</tr>
<tr>
<td>6 rooms</td>
<td>35,828</td>
</tr>
<tr>
<td>7 rooms</td>
<td>19,457</td>
</tr>
<tr>
<td>8 rooms</td>
<td>9,113</td>
</tr>
<tr>
<td>9 rooms</td>
<td>3,033</td>
</tr>
<tr>
<td>10 rooms or more</td>
<td>2,159</td>
</tr>
<tr>
<td>Not Stated</td>
<td>15,052</td>
</tr>
</tbody>
</table>

Source: CSO, Census 2016, author’s own calculations

**Nursing Home Occupancy**

The data in Table 2 does not take into account those living in nursing homes or other ‘communal establishments’, such as hotels, hostels and so on. Census 2016 counted 22,762 persons residing in nursing homes, 3.7% of the population of people aged 65 and over enumerated on Census night. While the proportion of this age group living in nursing home accommodation decreased (from 4.1% in Census 2011), the actual number of people increased by 9.4%. Using the population projections published recently by the CSO, and referred to earlier, but maintaining the proportion of nursing home use at the 2016 level of 3.7%, the absolute number of people aged 65 and over in nursing homes will increase from 23,307 in 2016 (population projections figure), to 36,987 in 2031 – an increase of 58.6% (see Figure 3).

\(^{9}\) According to the Census 2016 Background Notes: The number of rooms occupied by a private household is the total number used by the household. This includes kitchens, living rooms, bedrooms, conservatories you can sit in and studies, but excluding bathrooms, toilets, kitchenettes, utility rooms consulting rooms, offices, shops, halls, landings and rooms that can only be used for storage such as cupboards.
A report commissioned by Nursing Homes Ireland and undertaken by Ulster University (Moore & Ryan, 2017) conducted on the basis of interviews with nursing home residents, found that the reasons for admission were generally associated with ill-health, both mental and physical, commonly a hospital admission after a fall. However, some respondents reported their reason for admission to a nursing home facility was that they were alone and could not, or did not want to, manage their own home any longer (Moore & Ryan, 2017:58). Clearly community-based housing, with or without supports, would be a preferable alternative to those people who are living in residential healthcare facilities as a response to loneliness.

According to the HSE, the cost of providing care in ‘approved facilities’ ranges from €740 to €1,310 per week, for either a single or shared room as at June 2018 (Health Service Executive, 2018). At an average of €1,025 per week, the cost of providing nursing home care is set to rise from €1.2bn per year in 2016 to €1.97bn in 2031 on the basis of demographic changes alone, and assuming no rise in costs and so on.

Figure 3: Estimated Nursing Home Occupancy, 2016-2031

The decrease in owner occupancy among an ageing population also presents difficulties in accessing nursing home care for those who need it. The Nursing Homes Support Scheme (‘Fair Deal’), a scheme of financial support for older people accessing nursing homes, is based on the assumption that there is an asset that can be charged. This can be a charge over a person’s pension or, more usually, a charge over property that is discharged having been paid out of the estate on the death of the resident. Lack of a property asset may inhibit older people who need nursing home care from accessing it due to financial difficulty.

Supporting people to age in place, with appropriate community care, will reduce nursing home admittance, ensure that only those who have a medical need to use nursing home care are admitted, and prove more cost-effective overall to the State.

Source: CSO Population Projections, 2017-2031; Census 2016 – Profile 3 An Age Profile of Ireland; author’s own calculations
Dedicated (sheltered) housing for older people

Social housing is one of the main pillars under the Government’s Rebuilding Ireland (Action Plan for Housing and Homelessness 2016) which aims to “ramp up delivery of housing from its current under supply across all tenures to help individuals and families meet their housing needs, and to help those who are currently housed to remain in the homes or be provided with appropriate options of alternative accommodation”.

Housing with supports has long been promoted as having the potential to bridge the gap between living independently at home and residential care. Indeed, The Years Ahead (the 1988 inter-departmental seminal report on policy for older people) envisaged that sheltered housing would form a central part of the continuum of care and recommended that where it is not feasible to maintain a person in his/her own house or in ordinary local authority housing, sheltered housing should be considered as a first choice.

Sheltered housing schemes in Ireland are mostly social and are developed, managed and operated by either a Local Authority or by an Approved Housing Body (AHB) under the Capital Assistance Scheme Grant.

The 2016 Census showed that there were 39,374 social housing units for older people in Ireland. Currently, there are 7,370 housing units in Ireland provided by voluntary groups. The supply of housing for older people varies significantly across the country (see Appendix 2). It can be reasonably stated that there is a relatively limited supply of fully developed sheltered housing as defined by the Irish Council for Social Housing (ICSH). A 2011 survey carried out by the Irish Council for Social Housing highlighted an almost constant (though varying) level of support to tenants either through the availability of staff and volunteers or through services accessible to tenants.

However, the survey also found that the majority of respondent housing associations provided units for older people capable of independent living. Specific high level care services, which are indicative of tenants with higher needs, were the least provided services. The main services provided to tenants were “passive supports” which did not necessarily provide or demand direct interaction with tenants and were available to, but not mandatory or even necessary for, tenants to engage with, e.g., alarm/security systems, laundry, communal areas and activities, day centres. The least provided services were the more care intense services (nursing, personal care) where the tenants required one-on-one interaction or engagement in response to an increase in their needs and a decrease in their ability to live independently.

The need to take account of the potential of new residential models, including housing with care is referenced in the National Dementia Strategy and in the Report on the Review of the Nursing Home Support Scheme (NHSS). The 2016 Action Plan for Housing and Homelessness, Rebuilding Ireland, notes that older persons have specific housing requirements such as being in proximity to their family and social networks and the need for access to public and other essential services, recreation and amenities and refers to a new cross-Departmental/inter-agency approach including the development of appropriate pilot projects by Local Authorities.

Housing Conditions and Adaptations

According to a survey report published in June 2018 under the Healthy and Positive Ageing Initiative (HaPAI), a survey of people aged 55 and over (Gibney, et al., 2018), a quarter reported having difficulties associated with housing maintenance. A further 10% reported having ‘housing condition’ problems, which included rot in windows, doors or floors, and damp or leaks in walls. Over one-fifth (20 %) reported having housing facility problems, which included shortage of space, home too big for current needs, lack of indoor flushing toilet, lack of a bath or shower, lack of downstairs toilet/bathroom facilities, and lack of place to sit outside (2018:90). Applying this information to the population projections issued by the CSO and used throughout this document, in 2016, 234,848 people aged 55 and over are experiencing housing facility problems, 283,633 are experiencing problems with housing maintenance and 113,453 are experiencing problems with housing conditions.

Figures from CSO 2016 Census. Census figures showed 4,618 people over 60 renting from a voluntary body, however ICSH calculate that the figure of older people houses in AHBs is 7,370.
While it is noted that there are many influences associated with each of these issues, a key factor in each as reported by the respondents is material deprivation. People aged 55 and over are unable to address problems of housing maintenance, condition and facility due to financial cost. The Department of Housing, Planning and Local Government offer three grants which may be of benefit to older people experiencing housing issues with housing conditions: the Housing Adaption Grant for People with a Disability, the Housing Aid for Older People, and the Mobility Aids Grant. In 2014 adjustments were made to these grants to include all household incomes, proof of compliance with local property tax, and, in respect of Housing Aid for Older People, an increase in the applicable age from 60 to 66 and a reduction in the maximum grant from €10,500 to €8,000. Anecdotally, older people applying for a grant cite difficulties or delays in accessing occupational therapists to confirm the need for the grant, as part of the application process, which further compounds the lack of access.

Example of process undertaken by ALONE with an older person to apply for a housing grant:

1. Obtain Occupational Therapist’s report which states need and specifications required for adaptation
2. Obtain GP’s input onto application form with the reason for adaptation and official stamp
3. Obtain consultant’s letter (desirable)
4. Obtain architect’s drawings and potentially the planning permission required if construction is necessary
5. Show proof of payment of property tax or deferral through online system
6. Show proof of social welfare payment (involves visiting the office or sending a letter of request)
7. Get 2-3 quotes from builders (number of quotes required depends on the Local Authority)
8. Submit application form
9. Clarifications sought from Local Authority
10. Local Authority inspector visits the property
11. Decision made on awarding of grant (grants are awarded to up to 95% of the gross cost minus VAT)
12. Older person pays deposit to builder
13. Builder carries out work
14. Local authority inspector inspect the work carried out
15. Local authority sends the grant awarded to the Older Person to pay the builder
16. Older person applies to Revenue to claim back VAT

The process of applying for a housing grant can take up to 18 months to complete from beginning to end. It also requires the older person to have access to considerable funds for costs not covered by grants, such as architect’s costs and builder’s deposit. For many older people this prevents them from undertaking the necessary changes. This process needs to be simplified.

7,205 grants totalling €30.7m were issued under the scheme of Housing Aid for Older People in 2010. Since then, grants have declined (with the exception of a small increase in 2014), by over half in 2016 with just 3,425 grants issued totalling €12.6m (see Figure 4). This is an average grant of €3,600 per applicant. Taking the estimated 234,848 people aged 55 and over experiencing housing facility problems, if each received the average grant for 2016, this would amount to a total spend of €845.5m. This figure could be significantly reduced if a sufficient number of age-friendly units for older people incorporating Universal Design are built.
Additionally, some older people worry about finding reliable contractors to execute the work, which can further impede home adaptations. These factors point clearly to the need for a State home adaptation grants system that is accessible to all who need it, funded to an adequate level and delivered in a timely manner.

While the HaPAI survey report (Gibney, et al., 2018) does not differentiate between rented and owned housing, as it is the local authorities who determine the application for grant assistance, it may be useful to compare the number and amount of grants issued per local authority with the need of those people aged 55 and over reported in the HaPAI survey report as having housing facility issues (Table 4). The local authority area that issued the largest number of grants was Cork County, with 11.9% (n=407) of the total number issued. According to the HaPAI survey report, 22.2% of respondents from this area had a housing facility issue. Two local authorities, Dun Laoghaire-Rathdown and South Dublin, issued 0.4% of grants (14 and 15 respectively). While the HaPAI survey report indicated the lowest instance of persons with housing facility issues, at just 7.1%, Dun Laoghaire-Rathdown are higher than average with 23%.

The largest proportion of respondents who reported having a housing facility issue to the HaPAI survey were based in Galway City (39.7%), the local authority for which issued 2% of the total Housing Aid for Older People grants.
Table 4: Housing Aid for Older People, by local authority, 2016; Housing Facility Issues by Local Authority Area

<table>
<thead>
<tr>
<th>Local Authority</th>
<th>No. of Grants Issued</th>
<th>Value of Grants €,000</th>
<th>% of Total No. of Grants Issued</th>
<th>% Persons with Housing Facility Issues</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carlow</td>
<td>111</td>
<td>384,378</td>
<td>3.2</td>
<td></td>
</tr>
<tr>
<td>Cavan</td>
<td>84</td>
<td>387,581</td>
<td>2.5</td>
<td>20.8</td>
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<tr>
<td>Clare</td>
<td>125</td>
<td>561,004</td>
<td>3.6</td>
<td>21.8</td>
</tr>
<tr>
<td>Cork</td>
<td>407</td>
<td>1,541,850</td>
<td>11.9</td>
<td>22.2</td>
</tr>
<tr>
<td>Donegal</td>
<td>99</td>
<td>329,845</td>
<td>2.9</td>
<td></td>
</tr>
<tr>
<td>Dun L.-Rathdown</td>
<td>13</td>
<td>52,315</td>
<td>0.4</td>
<td>23</td>
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<tr>
<td>Fingal</td>
<td>51</td>
<td>273,498</td>
<td>1.5</td>
<td>16.6</td>
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<tr>
<td>Galway</td>
<td>171</td>
<td>701,217</td>
<td>5.0</td>
<td>24.4</td>
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<tr>
<td>Kerry</td>
<td>144</td>
<td>341,430</td>
<td>4.2</td>
<td></td>
</tr>
<tr>
<td>Kildare</td>
<td>97</td>
<td>394,237</td>
<td>2.8</td>
<td>28.7</td>
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<tr>
<td>Kilkenny</td>
<td>197</td>
<td>799,266</td>
<td>5.8</td>
<td>12.1</td>
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<tr>
<td>Laois</td>
<td>40</td>
<td>111,760</td>
<td>1.2</td>
<td>33.9</td>
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<tr>
<td>Leitrim</td>
<td>40</td>
<td>140,484</td>
<td>1.2</td>
<td></td>
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<tr>
<td>Limerick City and County</td>
<td>248</td>
<td>732,512</td>
<td>7.2</td>
<td>23.4</td>
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<tr>
<td>Longford</td>
<td>69</td>
<td>221,620</td>
<td>2.0</td>
<td></td>
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<tr>
<td>Louth</td>
<td>38</td>
<td>141,873</td>
<td>1.1</td>
<td>11.7</td>
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<tr>
<td>Mayo</td>
<td>274</td>
<td>937,857</td>
<td>8.0</td>
<td>9.7</td>
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<tr>
<td>Meath</td>
<td>133</td>
<td>598,317</td>
<td>3.9</td>
<td>16.8</td>
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<tr>
<td>Monaghan</td>
<td>64</td>
<td>225,842</td>
<td>1.9</td>
<td></td>
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<tr>
<td>Offaly</td>
<td>64</td>
<td>285,002</td>
<td>1.9</td>
<td></td>
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<tr>
<td>Roscommon</td>
<td>42</td>
<td>206,319</td>
<td>1.2</td>
<td></td>
</tr>
<tr>
<td>Sligo</td>
<td>141</td>
<td>551,139</td>
<td>4.1</td>
<td></td>
</tr>
<tr>
<td>South Dublin</td>
<td>15</td>
<td>57,625</td>
<td>0.4</td>
<td>7.1</td>
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<td>Tipperary</td>
<td>84</td>
<td>364,069</td>
<td>2.5</td>
<td>19.4</td>
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<tr>
<td>Waterford City and County</td>
<td>96</td>
<td>435,099</td>
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<tr>
<td>Westmeath</td>
<td>77</td>
<td>261,956</td>
<td>2.2</td>
<td></td>
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<tr>
<td>Wexford</td>
<td>206</td>
<td>670,663</td>
<td>6.0</td>
<td>21.9</td>
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<tr>
<td>Wicklow</td>
<td>43</td>
<td>150,901</td>
<td>1.3</td>
<td>15</td>
</tr>
<tr>
<td>City Councils</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cork</td>
<td>120</td>
<td>417,534</td>
<td>3.5</td>
<td>39.4</td>
</tr>
<tr>
<td>Dublin</td>
<td>62</td>
<td>156,229</td>
<td>1.8</td>
<td>22.6</td>
</tr>
<tr>
<td>Galway</td>
<td>70</td>
<td>213,547</td>
<td>2.0</td>
<td>39.7</td>
</tr>
<tr>
<td><strong>TOTALS</strong></td>
<td><strong>3425</strong></td>
<td><strong>12,646,968</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: Other Local Authority Housing Scheme Statistics, Housing Statistics, Department of Housing, Planning and Local Government; www.housing.gov.ie; Gibney et al 2018, p.92; author’s own calculations.

As previously indicated, an increasing number of older people are living in private rented accommodation. This creates a number of issues. First is that of sustainability, particularly in cases where ageing necessitates housing adaptations. It is questionable if landlords would be willing to make these adaptations, and incur the costs, in a buoyant rental market experiencing rent inflation for the last 23 consecutive quarters (Lyons, 2018). Second is the current condition of rental properties without adaptations and the lack of quality inspections. According to the Performance...
Indicators in Local Authorities (National Oversight and Audit Commission, 2018), of the 311,295 registered tenancies in 2016, only 13,603 (4.36%) were inspected. Of these, an average of 75% (n=10,202) were found to be non-compliant with Standards Regulations.

It is imperative that a housing solution that allows an older person to age with dignity and security is implemented to support our ageing population.

Fuel Poverty among Older People

There is evidence of significant fuel poverty among older person households which needs to be addressed, both through energy efficiency measures and through the social welfare system. Further evidence suggests that some older people experience great difficulty in keeping warm and keeping their house adequately heated. HaPAI data shows that one in five people aged 60+ reported having to go without heating during the previous 12 months because of lack of money.

A quarter of adults aged 50 and over living in rural areas do not have central heating, compared to 4% in Dublin city or county. Those in rented accommodation are less likely to heat their homes with central heating.

Social Housing Need

On the night of Census 2016, 39,374 people aged 60 and over were renting from either a local authority or a voluntary body. According to the Summary of Social Housing Assessments (Housing Agency, 2018), 85,799 households were assessed as being in need of social housing in July 2017. Of these, 7.7% (n=6,663) were aged 60 and over. This represents an increase of 1.1% on the previous year. This increase was considerably higher in the intervening period of the previous Social Housing Assessments, at 38%.

While this may appear at a glance to be a good indication that older people are having their housing needs met, there are two factors which may influence this data, particularly with regard to older people:

1. Since the 2013 Social Housing Need Assessment was conducted, the Department of Housing, Planning and Local Government introduced the Housing Assistance Payment (HAP) as a long-term subsidy for people on low incomes in private rented accommodation. Those households in receipt of HAP are deemed to have had their social housing needs met and are not counted within the statistics for the Social Housing Needs Assessment, unlike Rent Supplement, which is deemed to be a short-term subsidy. At the end of 2017, over 31,200 tenancies were being supported by the HAP scheme, according to the Homelessness Inter-Agency Group’s Report to the Minister for Housing, Planning and Local Government, June 2018. According to statistics published by the Department of Housing, Planning and Local Government11, 7,128 households were transferred from Rent Supplement to HAP in 2016 and 2017. No data is available in respect of how many of these transfers involved older people. However it would be reasonable to assume that an older person in receipt of Rent Supplement is unlikely to have such a change in circumstances into the longer term that would prohibit them being transferred to HAP.

2. The methodology for updating the Social Housing Needs data involves the local

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authority writing to households currently on the social housing waiting lists with a request that their details be updated, that they confirm they are still seeking social housing support, and that they furnish updated verification documentation. If a household does not return this information, they are no longer deemed to be in need. The local authority does have discretion to make further contacts by alternate means. However, this method of retention on the list disproportionately affects older people and those with literacy difficulties. The move to updating the Social Housing Needs Assessments annually is likely to see increasing numbers of older and vulnerable people slip out of the system.

The 6,663 people aged 60 and over currently on the Social Housing waiting list represents just under 0.8% of all people aged 60 and over as at 2016. Were this rate to remain stable, and it seems unlikely given the proportion of people aged 45 and upwards living in private rented accommodation, or mortgaged, the number of people aged 60 and over in need of social housing will increase to over 10,000 by 2031.

**Homelessness among Older People**

According to Census 2016, almost 6% (n=413) of homeless people were aged 60 and over.

The latest statistics on homelessness published by the Department of Housing, Planning and Local Government indicated that 127 adults aged 65 and over accessed emergency homeless accommodation in April 2018.

The Spring Rough Sleeper Count, published by the Dublin Regional Homeless Executive in March 2018 indicated that 4% of rough sleepers counted on the night of the 27th March 2018 were aged 61 and over. The largest proportion of rough sleepers (37%) did not have an identified age profile and so it is possible that this percentage is higher.

### Key Findings from Section 1

- The majority of older people are owner occupiers. However, there appears to be a shift towards renting in those aged 55 and over which suggests a more precarious housing situation for future older generations
- 20.7% of people aged 55 and over are experiencing housing facility issues
- The complex process of applying for a Home Adaptation Grant can prevent people from completing and applying for the grant
- Costs present a significant barrier to home modifications and improvements
- The number and value of grants issued through the Housing Aid for Older People scheme more than halved between 2010 and 2016
- An increasingly ageing population will put pressure on the nursing home sector. Nursing home occupancy is expected to increase by nearly 59% between 2016 and 2031. There must be measures in place to ensure that only those who need residential care are housed in residential nursing homes
- A significant number of people aged 55 and over experience issues with their housing. 234,848 people aged 55 and over are experiencing housing facility problems, 283,633 are experiencing problems with housing maintenance, and 113,453 are experiencing problems with housing conditions.
- 4% of rough sleepers, where age was identified, were aged 65 and over
Section 2

The Need to Allow Ageing in Place and Projected Demand

The Need to Age in Place

Enabling people to age at home is widely acknowledged as a desirable social goal. Older persons in need of care and support who wish to remain at home clearly require a range of accommodation, care, nursing and medical responses, and a continuum of delivery and intensity. As people age and their abilities change, many find that shortcomings in their homes and communities can limit where they are able to live. As seen in Section 1, over 20% of people aged 55 and over experience a housing facility difficulty, and material deprivation is a key factor to these issues not being addressed. This will only impede their quality of life further as they age, particularly for those reliant on a State pension as a sole source of income.

A liveable community has been defined as one with affordable and appropriate housing and transportation options, offers supportive community features and services, and adequate mobility options. Accessible housing and public transport, as well as nearby services and amenities, provide the ingredients for successful ageing in place. The availability of a variety of housing types at different price points within liveable communities may mean that older people can choose to move to a more appropriate home nearby without having to leave behind their neighbours, doctors, or place of worship. Also important in this regard is the need for appropriate size development that allows for adaptations and overnight stay for family and carers, if and when needed.

Many older people’s homes lack accessibility features and may need to be adapted to enable ageing in place. Home modifications consistent with universal design principles can range from the simple (adding lever door handles) to the complex (widening doorways).

Infrastructure, Technology and Social Inclusion

Universal design and lifetime adaptable housing

The UN Convention on the Rights of Persons with Disabilities refers to the importance of personal mobility in ensuring that people have the greatest possible independence (Article 20). Meeting the personal mobility needs of people should thus be a central factor in housing provision.

Most of the older population are able to live independently or semi-independently if they live in appropriate housing. This needs to be facilitated through lifetime adaptable housing, assistance with house adaptations, high quality community-based social and health care and the easy availability of suitable housing to facilitate downsizing or better accessibility. To this end, Government needs to legislate for the building of lifetime adaptable housing generally.

The Centre for Excellence in Universal Design has outlined key principles for the design of housing for dementia that may facilitate ageing in place. Homes built with universal design elements such as lever taps, grab bars, and a barrier-free shower are capable of meeting their residents’ changing needs. Clearly, it is less expensive to include universal design features during initial home construction than to modify a home after the fact. Initial investment in Universal Design is, therefore, likely to be much more cost-effective in the long-term.

12 https://www.aarp.org/livable-communities/about/info-2014/what-is-a-livable-community.html
Access to Public Transport and Ageing in Place

The availability of accessible transport is a key factor in relation to ageing in place. Lack of public transport, particularly in rural areas, means that people have to drive just to access basic services. According to the CSO, 74% of all journeys made in 2016 were by private car and only 5.5% were by public transport (Central Statistics Office, 2017). However, figures from the HaPAI report show that 30% of over-55s surveyed found their public transport to be poor or very poor. This increased to 41% in villages and 67% in the countryside. Meanwhile, poor transport has led to 22% of those surveyed finding it difficult to socialise, and 18% reported difficulty in doing essential tasks or difficulty in getting to appointments.\(^\text{13}\)

Because some older people cannot or choose not to drive, communities need to ensure that important services and amenities are integrated with residential developments and are accessible via a comprehensive public transport system. Shortfalls in the public transport infrastructure in Ireland have been well documented and not all communities are served by affordable, reliable public transport. It is also the case that people who live in close proximity to public transport may have mobility limitations that prevent them from taking full advantage of ‘Free Travel’.

Technology and older people

As is widely acknowledged, technology has the potential to make life significantly better for older people by enabling them to retain their independence and to live full lives for longer. Equally important, it can help those who care for them and provide them with peace of mind. Technology should also be attractive to health and care funders because it may help to prevent expensive spells in hospitals or people having to move to nursing homes or high support sheltered housing.

Much of the technology that can enhance independent living already exists, and it has been suggested that the greatest potential for improving the lives of older people lies in technology built for the young. While there may be a technology ‘knowledge gap’ between older and younger people, there may also be a tendency to exaggerate this. As a result of this belief, developers may not see the benefits of proactively developing and applying the undoubted potential of technology to support ageing in place. There are, of course, important ethical considerations in terms of surveillance which have not, perhaps, been fully addressed to date.

A further issue in respect of the need to use technology in everyday life is the lack of reliable internet access across the country, particularly in remote areas. Ireland’s use of the internet is broadly in line with the European average. We do, however differ in how we use it. We are more likely than our European peers to engage in online banking, shopping, social networking and video calls and less likely to use the internet for news or music, videos or games. Our use of the internet points to a society that is moving away from personal social interaction, towards virtual engagement with others. This can contribute to social isolation and so, while the number of people who have never used the internet is decreasing, it is older people, who could benefit most, who are being left behind. According to the CSO, those who have not used the internet are more likely to be aged 60-74 (46 per cent in 2017, a 5 per cent increase on 2016), retired (44 per cent in 2017, an 11 per cent increase on 2016), or living alone (32 per cent in 2017, an increase of 5 per cent on 2016) (Central Statistics Office, 2017).

Social Inclusion and Community

Older people’s social inclusion, and thus their health and quality of life, can depend on the appropriateness of their home environment and the conditions in which they live. An important finding of TILDA (The Irish Longitudinal Study on Ageing) (Briggs, et al., 2016) is the significance of social connectedness as a key to well-being for older people.

The principles underpinning the social inclusion agenda and the positive ageing strategy reflect an approach to older people which seeks to integrate them into society and addresses, as far as possible, the problems arising from failing health, reduced mobility and a related lessening of autonomy. However, it is not at all clear that these social inclusion policies are working, and additional and sustained effort is required in that regard. Clearly, inappropriate housing coupled with restrictions in

any areas of support (financial, social or support services) and increased demands on already low household income impacts negatively on social inclusion.

The Nursing Homes Ireland research referred to previously further indicated an ‘intrinsic link with respect to an increasing older population and the need for effective models of community and long-term care provision, particularly for older people with multiple and complex needs’. It further highlighted the increased dependency of older people in advance of entering full-time care, particularly among the 85+ age group (Moore & Ryan, 2017:38).

Projecting Demand for Dedicated Older Persons’ Housing

A report commissioned by the Ireland Smart Ageing Exchange and the Housing Agency in 2016 (Amárach, et al., 2016) identified the need for a greater number of housing options for older people, between living in the ‘family home’ and nursing home care. The authors cite countries with ‘more mature housing sectors’ as currently housing 15% of their population aged over-65 in bespoke, age-friendly accommodation (2016:67), and allow the same proportion for ‘general market’ housing as a move from the current home, with no more than 5% of those aged over 65 in hospitals and nursing homes.

If we apply these ratios to the population figures for Ireland previously used within this report, retaining the nursing home proportion at the current rate of 3.7%, the breakdown of numbers of people housed would be as follows:

Table 5: Projected Demand for Dedicated Older Persons’ Housing, persons aged 65+, 2016-2031

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2021</th>
<th>2026</th>
<th>2031</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing Home (3.7%)</td>
<td>23,304</td>
<td>27,494</td>
<td>32,082</td>
<td>36,987</td>
</tr>
<tr>
<td>Bespoke, age-friendly (15%)</td>
<td>94,477</td>
<td>111,462</td>
<td>130,064</td>
<td>149,946</td>
</tr>
<tr>
<td>Right-sized (15%)</td>
<td>94,477</td>
<td>111,462</td>
<td>130,064</td>
<td>149,946</td>
</tr>
<tr>
<td>Current Home (66.3%)</td>
<td>417,589</td>
<td>492,661</td>
<td>574,881</td>
<td>662,761</td>
</tr>
</tbody>
</table>

In terms of numbers of units required, the 629,847 people aged 65 and over account for 396,412 households. Accordingly, there is an existing demand for 59,462 bespoke and age-friendly units, and a further 59,462 right-sized units within communities, available within the general market for the purpose of down-sizing, or ‘right-sizing’ the older person’s home to suit their needs. Based on the UK model of housing for older people, which includes co-housing and a wide range of housing options for older people, and applying the proportions to our figures, the 59,462 bespoke units would consist of:

- 41,564 supportive housing units
- 4,341 Housing with Supports units (i.e. similar to housing demonstrator project in Dublin under Rebuilding Ireland)
- 13,557 co-housing units
- There will also be demand for 36,987 nursing home units by 2031.

This is on top of changes in the tenure of already existing units, including 1,000 Home Share spaces, 1,000 Split Housing units, and 750 Boarding Out places.

Right-sizing the Home for Older People

A 2016 ESRI Report investigated whether the housing shortage in Ireland could be alleviated by incentivising residential mobility among older people who remain in houses that exceed their current requirements. In order to ascertain this, the study used data from the Irish Longitudinal Study on Ageing (TILDA), drawing on information from more than 8,000 individuals aged 50 and above.

The ESRI research found very little evidence of housing mobility among older people in the period covered. In addition, the authors of this report found that a high proportion of older people living alone occupy small houses with four rooms or less, and so incentivising this group to move may have little impact on the availability of housing suitable for larger households. However, it should be noted that the HaPAI 2016 research found that 29% of respondents would be willing to consider moving to adapted housing, which supports the estimates of the Housing Agency report referred to earlier that approximately 30% of people aged over-65 would opt to downsize.
Many of our older population face housing challenges rooted in residential development patterns that have favoured large, inaccessible, single-family units in auto-dependent communities. For some, the size and maintenance of these homes make them less than ideal, while others would like to age in place but do not have the resources to modify their homes or to access essential services. Because no two situations are identical, an array of approaches for meeting the diverse housing needs and preferences of the older population need to be developed by Government and by Local Authorities.

- At a basic level, we need to address current blockages to ageing in place, in particular:
  - A fragmented approach at both national and local levels to identifying and meeting the housing needs (current and projected) of older people
  - Inadequate provision of dedicated housing for older people across all tenures, and uneven development across the country
  - Nursing home frequently acting as the only alternative to one’s own home when the latter is no longer suitable
  - The lack of timely house adaptations
  - A growing reliance on the private rented housing sector by people in older age-groups
  - Underdevelopment of technology and insufficient internet access which would assist ageing in place
  - In the longer-term, the concept of ‘sustainable communities’ outlined in a 2007 Government Statement on Housing Policy, Delivering Homes, Sustaining Communities, should be developed and promoted as an underlying approach to meeting the diverse needs of current and future citizens. Sustainable communities are seen as communities that are well planned, built and run, offer equality of opportunity and good services for all across the life-cycle and support ageing in place.

- In order to develop the housing element of sustainable communities which are fully inclusive of older people requiring care and support, the following three macro-level questions will need to be addressed by Government and across Departments:
  - How can more lifetime adaptable and accessible housing be provided and how might this be progressed through the private sector, by Local Authorities and by Approved Housing Bodies?
  - How can the separate components (design/building and social supports) of dedicated older persons’ housing be better conceptualised as an integrated package and with appropriate integrated funding?
  - How can the complementary concepts of sustainable communities, lifetime adaptable housing and ageing in place be integrated into the planning system?
Section 3 – Creating a Spectrum of Housing Provision

This section of the report outlines the spectrum of housing provision for older people required across four different housing types – dispersed housing in the community, shared housing in the community, dedicated older person’s housing and residential nursing care facilities.

The various aspects of each strand are identified – the target group, advantages/benefits, relevant data, demand/potential and the challenges arising. A number of broad policy options/interventions are outlined relating to each strand.

It should be noted at the outset that the strands outlined here are not necessarily stand-alone. For example, housing with support schemes may include provision for low, medium and high support needs and nursing care residential facilities may be part of wider housing complexes, including retirement villages.

The potential of each of the strands identified will obviously vary. For example, policies targeted at building more dedicated housing for older people and those targeted at making people’s existing homes more age-friendly would clearly have greater potential than policies targeted at home sharing. Shared housing in the community will almost certainly have less potential than dedicated older persons’ housing. Also, while more high support sheltered housing has the potential to reduce the need for nursing home care, this may not always be possible in the case of those who require 24/7 nursing care and do not have a family care infrastructure in place.
Table 6: Spectrum of Housing Provision

<table>
<thead>
<tr>
<th>Housing Type</th>
<th>Response</th>
<th>Features</th>
<th>Targeted at</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dispersed</td>
<td>Making existing homes more age-friendly</td>
<td>Enabling people to age in their existing homes</td>
<td>People who wish to and are able to remain in their homes</td>
</tr>
<tr>
<td>Shared housing in the community</td>
<td>Home sharing</td>
<td>Enabling people to benefit from having someone else living with them</td>
<td>Older people who would be willing to share their homes; Younger people with a housing need</td>
</tr>
<tr>
<td>Split housing</td>
<td>Supporting people to live adjacent to relatives</td>
<td>People who could and wish to live in self-contained units with relatives</td>
<td>People who are no longer able to live independently</td>
</tr>
<tr>
<td>Boarding Out</td>
<td>People who require support move into other people’s homes on a paid basis.</td>
<td></td>
<td>People who are no longer able to live independently</td>
</tr>
<tr>
<td>Dedicated housing for older people</td>
<td>Supportive Housing</td>
<td>Catering for the needs of people who require easy access to basic supports for independent living</td>
<td>People with low and medium support needs</td>
</tr>
<tr>
<td>Retirement villages</td>
<td>Age-friendly communities which promote independence and social interaction</td>
<td>People who wish to live independently and have opportunities to pursue common interests and shared activities</td>
<td>People who wish to live independently and have opportunities to pursue common interests and shared activities</td>
</tr>
<tr>
<td>Older persons’ co-housing communities</td>
<td>People living independently as part of a communal facility</td>
<td>People who wish to live as part of a newly-created community</td>
<td>People who wish to live as part of a newly-created community</td>
</tr>
<tr>
<td>Housing with Supports</td>
<td>Housing with 24/7 on-site support and care</td>
<td>People who require access to 24/7 support but who do not require 24/7 nursing care</td>
<td>People who require access to 24/7 support but who do not require 24/7 nursing care</td>
</tr>
<tr>
<td>Nursing homes</td>
<td>Residential nursing care units</td>
<td>24/7 nursing care for those who need it</td>
<td>People who require 24/7 nursing care</td>
</tr>
</tbody>
</table>
Housing Type A: Dispersed Housing (General housing)

Strand 1: Dispersed Housing

<table>
<thead>
<tr>
<th>DESIRED OUTCOME</th>
<th>Making existing homes more age-friendly through adaptions, technology, repairs and maintenance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Target group</strong></td>
<td>Strong preference People able to remain in familiar surroundings Maintains social connectedness</td>
</tr>
<tr>
<td><strong>Advantages / benefits</strong></td>
<td>Very high Target: €84.5 million investment a year required over the next 10 years in adaptation grants Target: 59,462 homes 'on market' required to allow right-sizing</td>
</tr>
<tr>
<td><strong>Demand/potential</strong></td>
<td>Enhancing the central role of housing in the provision of care and support</td>
</tr>
<tr>
<td><strong>Challenges</strong></td>
<td>How to optimise the use of 'smart' technology</td>
</tr>
</tbody>
</table>

Dispersed housing refers to housing which is typically a person’s family or historic home and includes housing in all tenures – privately owned, social rented or private rented. Since most people prefer to remain in their own home for as long as possible and since this likely to be cost-effective, at a basic level, there is a crucial need to ensure that people are assisted with any house adaptions, maintenance and repairs required in a timely and appropriate manner.

**Characteristics of Target Group**

- People who live in dispersed housing across all tenures.
- People who are unable on their own to carry out necessary repairs and maintenance to their homes.
- People with an acquired disability or with increased frailty whose homes have become inaccessible or otherwise unsuitable.
- People whose homes require modifications to enable them to return home after a hospital stay, thus avoiding an inappropriate and unnecessary move to a nursing home.
- People living in substandard accommodation across all tenures.

**Advantages / Benefits**

Enabling older people to stay in their homes and to age in place as their needs change clearly has much merit. It enables people to remain in familiar surroundings and maintain social connectedness. Most people prefer to stay in their own homes and it is almost certain that this results in better health and quality of life outcomes.
Demand and Potential

According to Census 2016, those aged 60 and over accounted for 534,061 private households, and 88% of those in this age group with an identified tenure type were owner occupiers. 33,762 people aged 60 and over were living alone in houses with 7 or more rooms (roughly equating to a five-bedroomed house).

Older people living in dispersed housing face a range of housing facilities difficulties, as seen in Section 1. For example, in the HaPAI survey (Gibney, et al., 2018), difficulties in carrying out maintenance were reported by almost 3 in 10 of those aged 70+.

TILDA research shows that older adults are more likely to live in homes built before 1970 than younger age groups – 69% of those aged 75 and over compared to 53% of 65-74 year olds and 36% of 50-64 year olds – while 13% were built before 1919. The implications of this are that these homes are less likely to be properly insulated, and will be in greater need of repair and modernisation.

Repairs and Maintenance an Essential Housing Support

The following problems were reported by older people in the HaPAI study:

- More than one in eight (12%) people aged 50+ have housing facility problems.
- Almost half (48%) of people aged 50+ have a housing condition problem.
- Almost one in 10 (8.8%) households containing an adult aged 65+ is unable to keep their home adequately warm.

TILDA research findings show that Local Authority renters are more likely to state that they have a housing problem (68%) compared to adults who own their homes outright (58%).

Adaptations

People’s current houses may need relatively inexpensive adaptations such as a ramp, bathroom aids (e.g., walk-in shower, grab rails), assistive technologies (e.g., monitored alarms), front door spyhole and keychain, intercom, non-slip floor surfaces, outside lights.

Large-scale adaptations may be needed to enable a person with an acquired disability or mobility problems to remain living in their own home – a downstairs bathroom and/or bedroom with wheelchair access.

Optimising Technology

Modern technology has huge potential in enabling people to live independently or semi-independently. However, with a small number of exceptions, this has not been developed in Ireland. The smart home has particularly high potential for older people – at both a basic level (sensors and monitors) and in the domains of health and activity monitoring.

Challenges

- There is a growing over-reliance by older people on the private rented sector – normally private rented accommodation is not available to tenants for modification (see Section 1).
- The population share of those aged 65 and over is projected to increase from just over 13% in 2016 to almost 19% in 2031, and the population aged 85 and over is expected to almost double.
- There are significant shortfalls in for the provision of House Adaptation Grants in a timely manner.
- Difficulties arise for some Local Authority tenants because of the limited funds available for repairs and maintenance.
- Older people frequently encounter difficulty in navigating complex application systems – it is almost certain that not all older people are aware of the supports available in this regard.
- Some of the current housing occupied by older people is not amenable to large-scale adaptation.
Action Required

Enabling older people to stay in their homes and to age in place as their needs change is a crucial and first-line housing support intervention. This requires intervention at multiple levels.

- The Housing Aid for Older People grant (currently in the order of €12.6 million) needs to be increased. An analysis of HaPAI data to the current population suggests a required investment of €84.5 million a year over the next 10 years.
- Additional Occupational Therapists are required to carry out house adaptation assessments in a timely manner.
- Application processes for adaptations, repairs/maintenance and energy conservation measures should be simplified and more help available to people in navigating these systems.
- There needs to be a simpler and easily accessible mechanism for the reporting of inadequate living standards by older people to the local authority or Residential Tenancies Board, in the case of private rented accommodation, and more information on how and to whom they could make such a report.
- Universal design and lifetime adaptable building should inform all new home construction.
- An overall assessment of the quality and appropriateness of housing occupied by older persons (owner, social or private rented) should be included in annual assessments of housing need carried out by Local Authorities.
- More incentives should be provided for the introduction of smart technology in older persons’ homes, including tax incentives for people to install assistive technologies.
- Local social enterprises geared towards home improvements and modifications should be encouraged by the development, resourcing and implementation of a programme of support to allow social enterprises to carry out this work.
- New funding mechanisms need to be developed to allow for a national financial contribution scheme that enables older people to buy social and affordable housing. The proceeds from this could contribute to funding further capital development of social and affordable housing.
Housing Type B: Shared Housing Across All Tenures

Strand 2: Home Share

<table>
<thead>
<tr>
<th>DESIRED OUTCOME</th>
<th>Older people having someone else living with them for low rent and some support in return</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Target group</strong></td>
<td>People who would be willing to share their homes</td>
</tr>
<tr>
<td><strong>Advantages / benefits</strong></td>
<td>Meets housing needs of old and young</td>
</tr>
<tr>
<td><strong>Demand/potential</strong></td>
<td>Limited\nCurrently confined to private arrangements\nTarget: 1,000</td>
</tr>
<tr>
<td><strong>Challenges</strong></td>
<td>Not well known about or understood in Ireland</td>
</tr>
</tbody>
</table>

**POLICY RESPONSES REQUIRED**
- Regulation
- Safeguarding
- Promotion of Home Share

Home Share is an agreement between an older householder with a room to spare and a younger person, wherein the younger person will provide low level supports in exchange for low-cost accommodation. The support provided by the house sharer might include help with daily tasks such as cleaning, cooking or simply providing companionship for the householder.\(^{14}\)

**Characteristics of Target Group**
- Householders who have a home that they are willing to share but are in need of some help, support and companionship.
- People willing to provide such support and companionship in exchange for low-cost accommodation.
- Home Share may be particularly suitable for people who are unable to get sheltered housing or who do not meet the criteria for home help. However it must be noted that in any models used in this or other countries, Home Share is not intended to be a substitute for sheltered housing or care.

**Advantages / Benefits**
Home sharing allows people to remain in their own homes with safety, dignity and peace of mind while maintaining their friendships, relationships and community links. It is a relatively simple concept and has potential to be an effective and sustainable response to several key policy challenges, including:

- Tackling loneliness
- Supporting ageing in place
- Providing affordable accommodation for young people, students and low paid workers.
- Making effective use of under occupied housing stock.
- Supporting a more sociable and sustainable living model.
- Giving family members and carers peace of mind and respite.
- Fostering social solidarity by creating links between people of different generations, cultures, and social backgrounds

 Demand and potential

• Home sharing in Ireland is very much in its infancy and there are no regulatory or development policies in place. There has been a steady increase in the number of people using Home Share in the UK and a growth in the number of operating schemes. Home sharing is reported as being a successful model in the USA, France, Belgium, Australia.

• While home sharing has some potential in Ireland, based on the UK experience, even with optimum take-up, it would only offer a very limited response.

• A target of 1,000 Home Share places should be put in place.

 Challenges

• There is no legal framework for home share in Ireland. Essentially home share is a private agreement which does not have to be registered with the Residential Tenancies Board (RTB) and neither party is bound by the rights and obligations that this entails. Home-sharers do not have to be provided with a rent book or register the home share agreement, and the agreement can be terminated at any time by either party.

• There is a risk that the householder may become increasingly dependent on the home-sharer which may be problematic for both parties for the duration of the arrangement, but particularly for the older person when the home-sharer leaves.

• There is an obvious risk both for those people bringing a stranger into their home and relying on them for a certain amount of care, and for the home-sharer in moving in with someone they do not know – this highlights the need for this form of accommodation to be regulated.

• For home share to have significant impact on housing with support in Ireland, potential users would need to understand both the benefits and risks of home sharing.

 Actions required

There are a number of actions required to make home sharing a realistic housing option in Ireland, including:

• Pilot funding by Government should be made available to incentivise and support groups (e.g. existing housing bodies or newly established organisations) to develop home sharing schemes.

• A targeted promotion of Home Share to key organisations, funders and policy makers as a real alternative housing and social care option.

• Regulation, quality assurance and safeguarding matters need to be addressed.

• Social welfare regulations will need to be amended so that people home sharing do not lose benefits related to ‘living alone’.
Housing Type B: Shared Housing Across All Tenures

Strand 2: Split Housing

<table>
<thead>
<tr>
<th>DESIRED OUTCOME</th>
<th>Older people living (independently with or adjacent to) relatives</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target group</td>
<td>Advantages / benefits</td>
</tr>
<tr>
<td>People who could and wish to live in self-contained units with relatives</td>
<td>Optimises support by families</td>
</tr>
</tbody>
</table>

POLICY RESPONSES REQUIRED | Incentivisation of inter-generational split housing

Split Housing refers to homes specifically designed or adapted for multiple generations of the same family to live adjacently -- typically this includes an adaptation or build-on that divides a house into two areas for independent living.

Characteristics of Target Group

People who can live independently or semi-independently and for whom there is a mutual agreement with relatives or friends to split accommodation.

Advantages / Benefits

- There are a number of reasons why this kind of home might be an attractive option:
- Split (multi-generational) housing can provide a real sense of safety combined with a degree of independence for older people.
- Since people are living longer and many struggle to live on their own, there are obvious advantages for parents to move in with their children for support, while retaining a sense of independence.

As younger people struggle with buying their first home, the option to move home to live with parents is becoming more viable.

Demand and Potential

- Almost 34,000 people aged 60 years and over living alone occupied houses with 7 or more rooms with 8,179 such households in Dublin.
- In the age group 70 and over, 117,123 people live alone.
- The HaPAI study (Gibney, et al., 2018) found that 71% of people aged 50+ often feel lonely and that women have a higher loneliness score than men at all ages.
- Rates of owner occupancy with loans or mortgages are higher among younger generations. Sharing arrangements with family could facilitate intergenerational mortgages to spread the cost of credit and reduce the mortgage instalment amount.
- The concept of intergenerational homes has been developed elsewhere. According to research conducted in the UK, two-thirds of people believe the solution to an ageing population would be to move towards a multi-generational household, although only 16% said their current house would be suitable.
- There should be a target of 1,000 split housing units in the medium-term.

15 This is what is commonly referred to as providing a ‘Granny Flat’
Challenges

While adapting one’s home to accommodate intergenerational living needs to be carefully planned to ensure the house works for everyone, the reality is that many homes do not allow for this. This is the case whether it is adult children needing to share accommodation with their parent, or parents needing to move in with adult children for security, support or health reasons.

Actions required

While living in intergenerational split housing is mainly a private matter relating to individual family choice (frequently associated with external pressures), there may be scope for some policy interventions that would make this housing option more attractive.

• More attention could be paid to the concept of intergenerational housing in new-build policies and programmes, especially in the private sector.
• More leeway might be afforded by planning authorities in situations where the planning application refers to extending an existing house to accommodate multiple generations.
• In the longer term, the shift towards building lifetime adaptable housing could include an intergenerational component.
• Consider tax incentives to support the cost of making physical adjustments to homes.
Housing Type B: Shared Housing across All Tenures

Strand 4: Boarding Out

**DESIRED OUTCOME**  People who require support moving into other people’s homes on a paid basis

<table>
<thead>
<tr>
<th>Target group</th>
<th>Advantages / benefits</th>
<th>Demand/potential</th>
<th>Challenges</th>
</tr>
</thead>
<tbody>
<tr>
<td>People who are no longer able to live independently</td>
<td>Suitable for some; Cost effective ‘Home from Home’</td>
<td>Limited potential 51 people ‘boarded out’ currently target: 750⁴⁶</td>
<td>Limited to date to specific HSE LHO areas Insufficient regulation Income tax implications for those providing ‘Boarding out’</td>
</tr>
</tbody>
</table>

**POLICY RESPONSES REQUIRED**  Proactive development as an integral part of Irish housing and social care provision Updated regulation Changes to tax system

Boarding Out offers a choice to older people to live with a family in the community which is matched to their needs. Under the existing ‘Boarding Out’ scheme in Ireland, the HSE pays the homeowner an amount of not more than half the weekly rate of the State pension. In addition, the older person pays an additional sum agreed with the HSE and householder.¹⁷

**Characteristics of Target Group**

Boarding Out may be suitable for an older person who is not able to live independently or with a family member and/or does not wish to live alone. Boarding Out is not a substitute for care and is not generally suitable for people who need high levels of medical support.

**Advantages / Benefits**

- Boarding Out can reduce social isolation and reduce social and health care budgets. It makes use of family homes rather than expensive residential facilities, which would result in exchequer savings while at the same time fostering independence and wellbeing. Extending the Boarding Out scheme would provide another support option for older people provided appropriate safeguarding measures are in place.

**Older Person**

Boarding Out makes use of family homes to provide long-term or respite care resulting in tangible savings when compared with the cost of residential care. Sometimes referred to as a ‘home from home’, Boarding Out offers choice and flexibility and has very many positives for older people. It enables older people who do not have a high level of care needs to remain living in in the community.

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¹⁶ Figures for Boarding Out provided by Samantha Rayner, HSE National Office for Older Persons Services

Householder

A householder who participates in scheme currently receives a payment from both the HSE and the person being boarded out.

HSE

The cost of the Boarding Out Scheme to the HSE is on average €5,694 per annum per client, compared with residential care, the cost of which is in the region of €1,025 per week (€53,300 per annum per client).

Demand and Potential

The numbers availing of Boarding Out are likely to remain low despite the fact that the scheme provides a cost effective option to other models of care including residential care. There are 51 people currently ‘boarded out’ across a limited number of CHO areas. If the service was replicated across all CHO areas and promoted, we believe that the demand for this type of accommodation with support could reach 750 by the end of 2022.

Challenges

- While the ‘Boarding Out’ approach offers choice and flexibility and has very many positives for older people and for families, its potential in Ireland has been limited to date due to a number of factors, in particular:
  - Boarding Out has to date been limited to specific HSE LHO areas.
  - There is insufficient regulatory provision and inadequate quality monitoring and auditing.
  - There is no specific provision for tax exemptions for payments made under the Boarding Out Scheme – this may limit the attractiveness of the scheme for householders.

Actions Required

- Boarding Out should be proactively developed as a housing option suitable for some older people.
- Tighter governance structures will need to be put in place to ensure that a quality service and standard of care is delivered. A robust set of standards for Boarding Out should be devised and implemented so that best safeguarding practice is observed.
- Training of householders should be provided as part of sign up to scheme. Training can be provided directly by the HSE or through a Voluntary Sector provider, to include First Aid, Manual Handling, hygiene standards and medication management (if applicable).
- A review of the 1993 Boarding Out Regulations should be carried out to enhance the functions of review and inspection to ensure a robust regulatory framework. These would need to include points such as the maximum number of clients per household recommended, insurance requirements, and administration of medication.
- The taxation system needs to be amended to enable host families to avail of tax exemptions similar to those available under the Rent-a-Room Scheme and foster care legislation and similar schemes in UK such as ‘Shared Lives’. In the interim, a submission should be made to the Revenue Commissioners to enable host families to avail of the tax exemptions under the Rent-a-Room Scheme.
- Legislation should also be drafted to extend the exemption afforded to foster care payments under Section 192B, TCA 1997, to include payments received by individuals under the Boarding Out Schemes.
**Housing Type C: Dedicated Older Persons’ Housing**

**Housing Type: Clustered across all tenures**

**Strands 5, 6, 7 and 8**

There are some good models of dedicated housing schemes for older people already in place in Ireland which include a range of supports and on-site communal facilities for assisted independent living -- warden, meals and assistance with personal hygiene, recreation areas, alarm systems, and a laundry. However, there is no standard model in place which means that there is a lack of consistency in the size of these schemes and the levels of support offered.

In the main this type of housing is financed via the Department of Housing, Planning and Local Government through the funding mechanisms of Capital Assistance Scheme (CAS), Capital Advance Leasing Facility (CALF), Payment and Availability (P&A). Funding for social housing also comes via the Housing Finance Agency (HFA), a company under the auspices of the Minister for Housing, Planning and Local Government. A limited number of AHBs are awarded Certified Body Status with the HFA. In 2016 the HFA provided €260m in AHB loan approvals for the acquisition or development of new homes, including dedicated older persons’ homes.

Rebuilding Ireland notes that older persons have specific housing requirements such as being in proximity to their family and social networks and the need for access to public and other essential services, recreation and amenities and refers to a new cross-Departmental/inter-agency approach including the development of appropriate pilot projects by Local Authorities.

The National Dementia Strategy (published in 2014) stated that in planning future long-term residential care, the “Health Service Executive will take appropriate account of the potential of new residential models, including housing with care, for people with dementia” (Department of Health, 2014, p. 30).

A collaborative pilot Demonstrator Project is currently being developed in Dublin that will develop a Housing with Supports scheme with supports on site. This project is involving Dublin City Council, Circle VHA, ALONE, the HSE and the Departments of Health and Housing under the Rebuilding Ireland Programme. The key components of this development are:

- Lifetime adaptable homes that are of a size that supports ageing at home and promotes quality of life.
- Assisted technology incorporated into the scheme design with all homes having broadband and a basic ‘telecare’ package installed, for use when and if required.
- Communal space where tenants can mix with others, meet and make new friends, eat and socialise, access specialist activities.
- The inclusion of multifunctional room(s) that allow for a range of activities, visiting hairdresser, chiropodist, doctor or nurse, for both tenants and older people in the community.
Housing Type C: Dedicated Older Persons’ Housing

Strand 5: Supportive Housing

<table>
<thead>
<tr>
<th>DESIRED OUTCOME</th>
<th>Dedicated housing for people which provides supports for independent living</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target group</td>
<td>Advantages / benefits</td>
</tr>
<tr>
<td>People with low and medium support needs</td>
<td>Age-friendly accommodation Supports independent/semi-independent living. Facilitates downsizing</td>
</tr>
</tbody>
</table>

POLICY RESPONSES REQUIRED

Targeted nationwide development of clusters of this type of housing across all tenures Collaboration between housing and health authorities

Supportive housing (sometimes referred to in the international literature as ‘assisted housing’ or ‘sheltered housing’) refers to housing that is purpose designed and designated for older people to live independently. It is further characterised as housing that includes all or a number of special design features (universal design principles, lifetime adaptable housing etc.) and with structured visiting support services which enables individuals to age at home. It typically provides independent housing which is self-contained with its own front door. Supportive housing schemes in Ireland are mostly social and are developed, managed and operated by either a Local Authority or by an Approved Housing Body (AHB)

Characteristics of Target Group

This response is applicable to people who would like to and who would benefit from living in an environment where they have easy access to supports.

Advantages / Benefits

Rebuilding Ireland notes that older persons have specific housing requirements such as being in proximity to their family and social networks and the need for access to public and other essential services, recreation and amenities and refers to a new cross-Departmental/inter-agency approach including the development of appropriate pilot projects by Local Authorities.
Demand and Potential

- Census 2016 recorded that there were 39,374 people aged 60 and over renting from local authorities or voluntary housing bodies.\(^{18}\). ICSH figures show that 7,370 older people are accommodated in AHB sheltered housing schemes (see Appendix 2).
- Currently, many older people who need support services of various kinds have little choice but to move into residential care, due to the under-development of community-based services, appropriate housing and inconsistency of provision across the country.
- The following findings of the HaPAI study relating to people aged 60 and over are relevant in determining the need for sheltered housing:
  - One in three (28.6%) would be willing to consider moving to adapted type housing.
  - Over a quarter have difficulty with the upkeep of their home.
  - One in five have problems with their housing facilities and one in ten have problems with their housing conditions.
- Based on a consideration of the above population data and an extrapolation of data from the UK on housing for older people there, a target of an additional 41,564 supportive housing units over the next five to ten years seems necessary and achievable.

Challenges

- The main challenge facing the development and expansion of supportive housing for older people arises from the acute shortage of social housing generally at this juncture and the related reliance on the private rented sector for social housing.
- Supportive housing is not central to housing planning in Ireland. While Approved Housing Bodies currently provide 7,370 units of housing, there is currently no standard model for supportive housing in Ireland. These schemes are not fully integrated into local housing planning and, as a result, both the provision and the supports provided vary significantly across the country. For example, some counties have no or only minimal provision. Some existing stock of housing for older people is of a size and condition not conducive to ageing in place.

Actions Required

- There needs to be more integrated planning at Local Authority level to identify the range of housing needs of older people and which of these needs could be most effectively addressed by supportive housing (irrespective of whether this is to be proved directly by the Local Authority or by an AHB).
- There is a need to develop a standard model for supportive housing which achieves consistency in the size, accessibility and support available for residents in schemes across the country.
- Collaboration between housing and health authorities is required to identify how supportive housing contributes to meeting the social and health care needs of vulnerable older people.
- There is a need to develop a variety of supportive housing complexes to cater for the different needs of older people in urban and rural settings.
- Current housing stock for older people needs to be reviewed and upgraded in line with age-friendly and Universal Design principles.
- New funding mechanisms need to be developed to allow for a national financial contribution scheme that enables older people to buy social and affordable housing. The proceeds from this could contribute to funding further capital development of social and affordable housing.
- Consideration should be given to the possibility of providing supports from external providers such as ALONE in current Local Authority housing stock.

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\(^{18}\) The ICSH have recorded that there may be up to 42,000 people aged 60 and over renting from local authorities or voluntary housing bodies.
Housing Type C: Dedicated Older Persons’ Housing

Strand 6: Retirement Villages

<table>
<thead>
<tr>
<th>DESIRED OUTCOME</th>
<th>Clustered age-friendly housing with provision for social interaction</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Target group</strong></td>
<td>People with assets who wish to live in an environment where there is provision for communal activities</td>
</tr>
<tr>
<td><strong>Advantages / benefits</strong></td>
<td>Clustered age-friendly accommodation for purchase/lease. Opportunities for social and leisure activities</td>
</tr>
<tr>
<td><strong>Demand/potential</strong></td>
<td>Suitable for some. Target: 13,557 (jointly with co-housing communities)</td>
</tr>
<tr>
<td><strong>Challenges</strong></td>
<td>How to cater for additional care and support needs as these emerge. How to avoid ‘age ghettoization’.</td>
</tr>
</tbody>
</table>

POLICY RESPONSES REQUIRED

- Some tax incentivisation may be useful
- Planning for retirement villages at local level required

Retirement villages (sometimes referred to as retirement communities) are usually private developments which consist of individual units where residents can live independently and engage in various communal and social activities. While retirement villages are sometimes built around or on the same grounds as a nursing home, the majority of new residents in retirement villages do not require care services.

Characteristics of Target Group

These developments are usually geared towards those with private means and/or those who wish to downsize. Retirement villages are common in the USA and Australia and there also some in the UK. For example, across Australia, around 5.7% adults aged 65+ live in a retirement village.19

Retirement villages to date in Ireland appear to have been developed primarily in conjunction with private nursing homes.

Advantages / Benefits

- Retirement villages typically provide age-friendly accommodation for purchase or lease - these villages include provision for a wide range of social and leisure activities and pursuit of shared interests.

- Quality retirement housing that provides independent living, amenities, company, meals and transport is likely to be a suitable option for some people who currently own their homes.

The vast majority of retirement village residents in Australia are reported as enjoying village life and are glad they made the decision to move.20

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19 2015 PwC/Property Council Retirement Census, 2015
Demand / Potential

Retirement villages present opportunities for private developers and may be a partial solution to our housing crisis as older owner occupiers move to more manageable community-based housing. However, such housing has had a slow start in Ireland.

Based on a consideration of the above population data and an extrapolation of data from the UK on housing for older people there, a target of 13,557 (jointly with co-housing communities) over the next five to ten years would seem necessary and achievable.

Challenges

- A key challenge is how to plan for the inevitable situation where some people will need more support and care as they age.
- How to avoid age ghettoization is an important consideration in this type of development.
- Planning for this type of ‘village’ within a local area development would be difficult, given that it is primarily a private sector initiative.
- There is a need to ensure that all such houses are built to age-friendly and universal design principles.

Actions Required

- There is obviously some scope for retirement villages in the context of an ageing population of house-owners which should be factored into the planning process at both national and local levels.
- Like other housing for older people, age-friendly and Universal Design principles must be a cornerstone of development.
- There is potential for tax incentivisation to be linked with developing more housing downsizing options for people who own their homes or and/or have other assets.
Housing Type C: Dedicated Older Persons’ Housing

Strand 7: Older Persons’ Co-housing Communities

<table>
<thead>
<tr>
<th>DESIRED OUTCOME</th>
<th>Group living which clusters houses around shared space and amenities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Target group</strong></td>
<td><strong>Advantages / benefits</strong></td>
</tr>
<tr>
<td>People who own their houses and wish to move to a communal environment</td>
<td>Provision for social networking and mutual support</td>
</tr>
</tbody>
</table>

| POLICY RESPONSES REQUIRED | Needs more development and promotion as part of a response to older people’s housing needs |

Co-housing is where residents live in their own apartments but have access to community life through communal areas and facilities. Run and controlled entirely by members of the group, it is based on mutual support, self-governance and active participation. Physically, it is designed to promote easy social interaction among its members.

Co-housing differs from the retirement village concept in Strand 6 above in that the schemes are fully controlled and managed by the residents.

Characteristics of Target Group

People who own their houses and would like to live in a community setting with potential for sharing and exploring joint interests.

Advantages / Benefits

- Co-housing is a way of living both ‘apart and together’ with a collaborative group of neighbours who know each other and sign up to certain values. They work to develop a living environment that creates and maintains a sense of community.
- While there are shared facilities, essentially people’s accommodation is their own with a choice to avail of and use community facilities.
- Most co-housing projects include large communal spaces such as vegetable patches, workshops, shared office space, libraries and roof gardens.
**Demand and Potential**

- Successful development of senior co-housing from the early 1970s in Germany, Denmark, the Netherlands and elsewhere and the growing movement in the USA since the mid-1990s has been reported.\(^{21}\)
- A recent development in senior co-housing in the Netherlands is ‘retrofit’ cohousing, where housing associations assist the older tenants of existing apartment blocks to form a mutually supportive and sociable living group without moving – with a flat in their block kept untenanted to act as their ‘common house’.
- Based on a consideration of the above population data and an extrapolation of data from the UK on housing for older people there, a target of 13,557 (jointly with retirement villages) over the next five to ten years would seem necessary and achievable.

**Challenges**

- Barriers identified to senior co-housing’s progress in the UK are likely to be relevant to Ireland (it should be noted that these barriers exist to a greater or lesser extent in respect of all housing options for older people):
- Unfamiliarity of the co-housing model both to older people and the housing sector.
- The cost of land, the difficulty of locating sites and the dominance of large-scale developers.
- The dominance of a narrow range of housing options for older people.
- The absence of a support infrastructure providing the specialist financial and other skills that groups of older people need in order to organise a cohousing project.
- There is also a need to take into account the additional costs of providing the communal spaces and the cost implications of this for individuals participating in the co-housing community.

**Actions Required**

- Based on the experience of other jurisdictions, there would appear to be some scope for older people’s co-housing in Ireland as part of an overall response to housing need. This could be developed through targeted private sector, social and affordable initiatives. This can be noted by the success of new cohousing organisations such as Ó Cualann Cohousing Alliance.
- The concept of older persons’ co-housing communities needs to be supported to grow in Ireland by central government and involvement by Local Authorities, AHBs and older people’s representative bodies.
- There is a need to ensure that all such houses are built to age-friendly and universal design principles.

\(^{21}\) Maria Brenton (2013). Senior cohousing communities – an alternative approach for the UK?
Housing Type C: Dedicated Older Persons’ Housing

Strand 8: Housing with Supports

<table>
<thead>
<tr>
<th>DESIRED OUTCOME</th>
<th>Housing with 24/7 on-site support and care</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Target group</th>
<th>Advantages / benefits</th>
<th>Demand/potential</th>
<th>Challenges</th>
</tr>
</thead>
<tbody>
<tr>
<td>People who require access to 24/7 support but who do not require 24/7 nursing care.</td>
<td>An alternative to nursing homes for some. Potential for better quality of life.</td>
<td>Likely high demand. Target: 4,341</td>
<td>Providing individually-tailored supports. Avoiding age ghettoization.</td>
</tr>
</tbody>
</table>

POLICY RESPONSES REQUIRED Integrated planning between housing and health authorities to maximise the role of high support sheltered housing

Housing with supports (sometimes referred to in international literature as ‘housing with care’ or ‘extra care housing’) refers to housing that is purpose designed with embedded on-site 24/7 support. Such housing typically includes self-contained accommodation with its own front door, an ethos of supporting independence, flexible care packages, access to activities and social events and various communal facilities. It is further characterised by a number of special design features such as universal design, lifetime adaptable principles, and assisted technology incorporated into the scheme design. Communal space may include a shop, a restaurant, gardens for tenants to mix, and multifunctional rooms that allow for a range of activities such as a visiting hairdresser, chiropodist, doctor or nurse. This type of housing is based on the premise that some people with high support needs can live independently or semi-independently with more intensive social and health care supports, including personal care and some nursing care.

Characteristics of Target Group

- Housing with supports is suitable for people whose needs range from medium to high levels of support and care, but who do not require 24/7 nursing care.22

Advantages / Benefits

- UK research demonstrates that, for some older people, a move to high support sheltered housing is associated with a better quality of life when compared with living in mainstream housing.
- Housing with supports clearly offers a dignified response to many people who can no longer live in their own homes but who do not require nursing home care.
- As this is not a medical model (ie no nursing staff onsite) a tenant population with a range of support needs from low, to medium, to high, the model of housing will be more cost-effective.

22 http://assetproject.wordpress.com/dissemination
Demand and Potential

- There has already been a commitment made under Rebuilding Ireland to develop a Housing with Supports model for Ireland. The partnership between the Department of Housing, Planning and Local Government, the Department of Health, the HSE, Dublin City Council and the Irish Council for Social Housing will provide a framework to develop Housing with Supports schemes throughout the country. The Demonstrator Project is being developed by ALONE in partnership with Circle VHA.

- Housing with supports offers a realistic alternative to nursing homes for some people. For example, an OPRAH 2016 report stated that of those availing of ‘Fair Deal’, some 12.8% are classified as ‘low maintenance’, with a further 22.3%, in the ‘medium maintenance’ bracket. This suggests that up to one-third of Fair Deal users could be provided with the support needed in their own homes. 23.

- It is widely understood that a significant proportion of nursing home residents do not wish or need to be there. The availability of high support sheltered housing clearly has enormous potential in Ireland for such older people.

- Based on a consideration of the above population data and an extrapolation of data from the UK on housing for older people there, a target of 4,341 would seem necessary and achievable.

Challenges

- Since the provision of care and support is frequently based on economies of scale, it may be difficult to deliver this in small housing schemes.

- Similarly, the principle of developing schemes as ‘balanced’ communities of residents with a range of care and support needs is difficult to maintain in the context of a situation whereby those who are assessed as having ‘substantial’ or ‘critical’ needs may have to be prioritised for such schemes in terms of funding eligibility.

- Location is paramount to the success of any development and must be carefully considered when taking into consideration the needs of older people in order to avoid ghettoization or segregation.

- Questions about the extent to which housing with supports can serve as a replacement for residential nursing home care and how both models fit into a spectrum of provision require further discussion.

Actions Required

- Housing with supports needs substantial investment and promotion as an alternative to nursing homes.

- Targets (short, medium and longer-term) need to be set for the provision of housing with supports across the country.

- Building housing with supports should be provided for in social housing action plans nationally and locally.

- New joint funding mechanisms need to be developed at national level to better support joint planning between the HSE and Local Authorities at local level in providing housing with supports to meet need.

- Findings from the evaluation of Dublin City Council’s Housing with Support project under the Demonstrator project should be considered by all local authorities and HSE CHOs for establishment elsewhere. The recommendations and proposed tool kit should be made available and followed.

- New funding mechanisms need to be developed to allow for a national financial contribution scheme that enables older people to buy social and affordable housing. The proceeds from this could contribute to funding further capital development of social and affordable housing.

23 http://agefriendlyireland.ie/database/oprah/
Housing Type D:
Residential Units for People Requiring Full-Time Nursing Care

Housing type - Residential and clustered – public and private

While home is, of course, best, the reality is that some people require 24/7 nursing care which, for many, can only be provided in a residential nursing facility. Some people develop multiple chronic conditions, frailty and disability which require gerontological expertise in care, including dementia care and palliative care.

The current practice of building nursing homes on green field sites outside villages and towns cuts residents off from community life and social interaction, and isolates those residing in them, thereby lessening their quality of life.

More emphasis needs to be placed on the fact that a nursing home is a person’s home – not a hospital and not a prison.

There is a scarcity of imaginative, diversified, dependency-graded nursing home care – this is a matter that needs to be addressed particularly in the context of the growing number of people with complex dementia.

Multi-purpose community-based units providing a continuum of support and care (day facilities, sheltered accommodation, nursing units) can contribute enormously to enabling people to live independently or semi-independently and should be made an integral part of social and health care development.
## Strand 9: 24/7 Nursing Care Residential Units

### DESIRED OUTCOME
High quality residential nursing care facilities

<table>
<thead>
<tr>
<th>Target group</th>
<th>Advantages / benefits</th>
<th>Demand/potential</th>
<th>Challenges</th>
</tr>
</thead>
<tbody>
<tr>
<td>People who have multiple chronic conditions which require full-time care and attention</td>
<td>Quality nursing and social care provided for the minority of people who require this on a 24/7 basis</td>
<td>36,987 by 2031 Demand could be lessened by more high-support sheltered housing</td>
<td>How to provide smaller, domestic style environments Fostering social connectedness Maximising independence</td>
</tr>
</tbody>
</table>

### POLICY RESPONSES REQUIRED
- Nursing homes developed as part of multi-purpose complexes and close to other age-friendly initiatives
- Assessment of need for nursing home care in the context of the greater availability of high support sheltered housing

Nursing care residential facilities (typically referred to as nursing homes) are geared to meeting the needs of people who require 24/7 nursing care. In the context of the housing spectrum outlined, this strand would be a last resort.

### Characteristics of Target Group
- People who are medically assessed as requiring 24/7 nursing care and for whom it is not practical or possible, financially or otherwise, to provide this level of care in their own homes (ordinary, adapted or sheltered). Typically, they are people with multiple chronic medical conditions who require specialist medical and nursing care (as distinct from social care).

### Advantages / Benefits
- People with multiple complex medical and nursing care needs who can be best cared for in a residential facility where medical staff and facilities are present.
Demand and Potential

- According to Census 2016, 3.7% of people aged 65 and over were in nursing homes. Some 80% of these are in the private sector.

- Using the population projections data issued by the CSO and referred to in Section 1, the proportion of nursing home use equates to 23,304 people for 2016, increasing to 36,987 in 2031, maintaining this rate as a conservative estimate.

- In the absence of realistic alternative community-based options, in particular, housing with supports, this figure is likely to increase as a result of population ageing, more people with disability living longer and increasing numbers with dementia.

- Demand for nursing home care is almost certainly increased by the following factors:
  - Nursing home care prioritised over community-based care by Government in terms of funding and legislation.
  - Acute shortage of high support sheltered housing in either the public or private sector.
  - Difficulties in getting access to timely home adaptation grants or home care packages.
  - Inadequate supports for family carers.

Challenges

- The main challenges to developing high quality residential nursing care for those who need it arise because of:
  - Ad hoc development of nursing homes and a very heavy reliance on the private sector.
  - A failure to integrate residential nursing care facilities into a continuum of support measures, including appropriate housing.
  - The number of nursing home spaces required to meet changing demographics would require 13,000 additional spaces to be built, with a knock-on cost to the Exchequer of an additional €729 million. This figure will be higher if no alternative choices are provided for older people.

Actions Required

- Nursing homes should be part of multi-purpose complexes and close to other age-friendly initiatives.

- Housing with supports should be proactively developed nationwide as a realistic alternative to nursing home care for some.

- There should be equality of access in terms of both legislation and funding to community-based supports (including housing) as to residential supports.
Section 4 – Overview and Conclusions

This report has identified the main housing challenges facing older people today and explores strategies that, if pursued, would better enable older people to age in place or in their community. There is a clear need to ensure that older persons’ housing stock is affordable, accessible, and connected to essential services. We need to be forward-looking and we need to build and preserve a range of housing options—subsidised, supportive, and market-rate—sufficient to meet future demand and located in mixed-use areas that promote independence and mobility.

A related and equally important consideration is that there is no overall integrated national strategic framework for meeting a range of different care and support needs of older people, (such as the higher costs associated with housing with supports), because of separate functional responsibilities and budgetary processes on the part of the HSE, the Department of Housing and local authorities. It is clear that stronger cross departmental links between the housing and health sectors at national and local levels are necessary to implement Government policy as outlined in the Positive Ageing Strategy, viz., enable people to age with confidence, security and dignity in their own homes and communities for as long as possible.

Developing the required complement of high quality dedicated housing for older people will need engagement and collaboration between many actors – planners, local authorities, developers, builders, architects, gerontologists, the HSE, and, crucially, older people themselves, to enable developments to happen in the right locations and with the appropriate supports infrastructure.

A spectrum of housing options that need to be explored and developed has been outlined in Section 3 and is summarised below in Table 7.
Dedicated Housing for Older People

There is scope for much further development of high support housing models. Development on the scale required would be likely to require:

- Regulation requiring all developments above a prescribed size to include a specified proportion of dedicated housing for older persons.
- A system of tax incentives to developers and builders who meet specified criteria in relation to dedicated older persons’ housing.
- Funding lines which allow for more integrated planning between local authorities and the HSE.
- The HSE routinely financing or directly providing the health care and social services needed to enable dedicated housing operate.
- Additional state funding to stimulate innovative developments.
- Approved Housing Bodies further incentivised to develop housing with supports and supportive housing.
- Support for older people who would not normally qualify for social housing to be able to access housing with supports scheme, using models such as Financial Contribution schemes (present but not widely used by some Local Authorities).

There is a need for Local Authorities to take a much more proactive approach to the development of integrated multi-purpose options that would include provision of dedicated housing for older people as part of such developments.
### Table 7: Spectrum of Housing for Older People

<table>
<thead>
<tr>
<th>Housing Type</th>
<th>Response</th>
<th>Potential</th>
<th>10-year Indicative requirements</th>
<th>Relevant considerations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dedicated social housing for older people</td>
<td>Supportive Housing</td>
<td>Large</td>
<td>41,564 units</td>
<td>Limited examples in Ireland. Needs investment and the development of a Supportive Housing model to ensure consistency across schemes</td>
</tr>
<tr>
<td>Housing with Supports</td>
<td></td>
<td>Large</td>
<td>4,341 units</td>
<td>Model needs to be further developed and implemented in Ireland, needs investment and promotion as an alternative to nursing homes</td>
</tr>
<tr>
<td>Dispersed housing</td>
<td>Making existing homes more age-friendly</td>
<td>Large</td>
<td>€84.5 million per annum</td>
<td>Cost effective and supportive of ageing in place</td>
</tr>
<tr>
<td>Shared housing in the community</td>
<td>Retirement villages</td>
<td>Medium</td>
<td>6,778 units</td>
<td>Potential for more private sector development</td>
</tr>
<tr>
<td></td>
<td>Older persons’ co-housing communities</td>
<td>Medium</td>
<td>6,778 units</td>
<td>Potential for private and social enterprise sectors</td>
</tr>
<tr>
<td></td>
<td>Home sharing</td>
<td>Small</td>
<td>1,000 units</td>
<td>Needs promotion and regulation</td>
</tr>
<tr>
<td></td>
<td>Split housing</td>
<td>Small</td>
<td>1,000 units</td>
<td>Can help in dealing with current general housing crisis</td>
</tr>
<tr>
<td></td>
<td>Boarding Out</td>
<td>Small</td>
<td>750 people</td>
<td>Requires promotion and regulation</td>
</tr>
<tr>
<td>Residential nursing care units</td>
<td>Quality nursing homes developed as part of multi-purpose complexes</td>
<td>Medium</td>
<td>36,987 places</td>
<td>Necessary for some; Demand can be reduced through more high support housing and Home Care Packages.</td>
</tr>
</tbody>
</table>

### Adaptable Housing

Clearly, more homes need to be ‘lifetime adaptable’, and designed to meet the changing needs of residents over time. Most older people are able to live independently or semi-independently if they live in appropriate housing. In the short to medium-term, there will need to be a focus on house adaptations to enable ageing in place.

The following policy options could help people modify their homes to meet their physical needs:

- Enhancement of Home Adaptation Grants
- Tax relief policies
- Deferred loan programs
- Local social enterprises geared towards home improvements and modifications
- More assistance for people in organising and carrying out adaptations and in applying for the Housing Adaptation Grant

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24 This number would be reduced by the greater availability of high support housing.
Multi-purpose and Integrated Community-based Developments

All of the research evidence and reflected practice suggests that multi-purpose community-based developments providing a continuum of housing, support and care (social activities, day facilities, sheltered accommodation, nursing units) can contribute enormously to enabling people to live independently or semi-independently.

While we already have some good models in place in Ireland and some in the process of being developed, this approach requires additional momentum and more integration with local development. Housing for older people should be an integral part of town planning and the social and economic infrastructure rather than an add-on.

Such models could be developed initially in locations where existing public long-term residential care facilities have been deemed to be no longer fit for purpose and could include space for ‘normal’ activities associated with daily living, e.g., coffee shop, newsagent, pub, clothes boutique, hairdresser, betting shop.

We need a seamless and appropriate continuum of housing options for older people complemented by an integrated approach to community care. As mentioned in OPRAH, “Without this development, older people will be condemned to losing their agency, independence and health, to the detriment of society and the loss of social solidarity” 25.

Among the policy solutions that could expand the range of affordable and accessible housing options for renters and owners of all incomes are the following:

- Improved coordination of housing, land-use, and transportation policy to ensure that older adults have the option of living in housing they can afford that is located within walking distance of public transport as well as other essential services.

- Revisions to zoning policies to allow for a variety of housing types to meet the needs of older people (e.g., high density rental and owner-occupied housing, accessible dwelling units).

- Building affordable housing close to public transport and social amenities.

- Longer-term integrated town planning which includes a housing component built on the principle of sustainable communities.

- Local development plans making provision for an ageing population and providing for housing and infrastructural development accordingly.

- We need to shift the balance from long-term care in nursing homes to long-term support in a range of community-based settings (including people’s own homes) and within the normal social and economic infrastructure. This would not only support older people to be happier at home for longer, but would result in significant savings to the Exchequer as the cost to the Fair Deal Scheme is brought down. As a country we need to focus much more on housing policies that expand opportunities for older people to remain in their home and delay or prevent the disruption of an unwanted move. Local authorities, therefore, have a critical role in supporting the continued independence of older people and enabling them to age in place.

- The perceptions of older people themselves will also need to change. For example, currently a significant barrier to rightsizing or moving house may be the perception that nursing home care is the only alternative to one’s own home. Although, regrettably, this perception is often accurate, it does not always have to be the case. Where one- and two-bedroom homes are built in the appropriate locations, with the right supports, there could even be a potential saving as larger homes become available for families, saving on those building costs.

25 http://agefriendlyireland.ie/database/oprah/ page 4
• Research findings from across the world are pointing to small clusters of housing with varying degrees of support as the way forward. This has a long history in many countries and is where Ireland needs to go. We already have some good models in Ireland, North and South. In the context of age-friendly programmes, Local Authorities need to work hard towards providing a spectrum of housing choices.

• The value of housing, dedicated housing in particular, is not acknowledged sufficiently in the social support infrastructure in Ireland where the tendency has been to focus on health and social care. For a truly integrated social support system, the contribution of housing needs to be more acknowledged than has been the case to date in Ireland.

• We need to plan for the development of a range of housing choices/options at local level based on population projections at national and local levels and on an approach to housing needs assessment which takes into account needs across all tenures.

Need for Innovation

There is a clear need for some innovative thinking and initiatives to promote the housing spectrum outlined in this report and to offer meaningful housing choices to people as they age – this is integral to creating a more age-friendly society.

The development of a spectrum of age-friendly housing responses would also serve to free up some larger houses for use by younger families and help to address the issue of the growing number of older people reliant on the private rented sector.

Though there is a place for residential nursing homes today and into the future, they should not and cannot be the primary answer to the emergent needs of the growing demographic.

Finally, one of the overall benefits of a focus on a wider spectrum of housing for older people is that it broadens the discourse, puts a stronger and necessary emphasis on the particular housing needs of older people and how these might be addressed. Ageing in place either in one’s existing family home, in alternative community-based accommodation or in purpose-built dedicated housing for older people will only happen properly if all options are explored and optimised. Some of the strands in this spectrum clearly are more central than others but, as suggested, all can play their part.

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Boarding Out

Boarding Out offers a choice to older people to live with a family in the community which is matched to their needs. Under the existing ‘Boarding Out’ scheme in Ireland, the HSE pays the homeowner an amount of not more than half the weekly rate of the State pension. In addition, the older person pays an additional sum agreed with the HSE and the house owner.

Co-housing

Co-housing is where residents live in their own apartments but have access to community life through communal areas and facilities. Run and controlled entirely by members of the group, it is based on mutual support, self-governance and active participation. Physically, it is designed to promote easy social interaction among its members and generally has a ‘common house’ or equivalent for shared meals and events. Co-housing differs from the retirement village concept (below) in that the schemes are fully controlled and managed by the residents.

Dispersed housing

This refers to housing which is typically a person’s family or historic home and includes housing in all tenures – privately owned, social rented or private rented.

Housing with supports

Housing with supports (sometimes referred to in international literature as ‘housing with care’ or ‘extra care housing’) refers to housing that is purpose designed with embedded on-site 24/7 support. Such housing typically includes self-contained accommodation with its own front door, an ethos of supporting independence, flexible care packages, access to activities and social events and various communal facilities. It is further characterised by a number of special design features such as universal design, lifetime adaptable principles, and assisted technology incorporated into the scheme design. Communal space may include a shop, a restaurant, gardens for tenants to mix, and multifunctional rooms that allow for a range of activities such as a visiting hairdresser, chiropodist, doctor or nurse. This type of housing is based on the premise that some people with high support needs can live independently or semi-independently with more intensive social and health care supports, including personal care and some nursing care.

Home sharing

An agreement between an older householder with a room to spare and a younger person, wherein the younger person will provide low level supports in exchange for low-cost accommodation. The support provided by the house sharer might include help with daily tasks such as cleaning, cooking or simply providing companionship for the householder.

Typically, there is an annual fee for the home owner with home share companions paying a placement fee and making a monthly contribution.
**Housing Spectrum: Glossary**

**Nursing care residential units**

Nursing care residential facilities (typically referred to as nursing homes) cater for people who require 24/7 nursing care.

**Retirement villages**

Retirement villages (sometimes referred to as retirement communities) are usually private developments which consist of individual units where residents can live independently and engage in various communal and social activities.

While retirement villages are sometimes built around or on the same grounds as a nursing home, the majority of new residents in retirement villages do not require care services.

**Right-sizing**

Rightsizing refers to when a person (in this case older person) chooses to move to a home that best suits their needs and aspirations in terms of size. HaPAI data shows that 15.4% of people surveyed had problems with current property being too big or not enough space.

**Supportive Housing**

Supportive housing (sometimes referred to in the international literature as ‘assisted housing’ or ‘sheltered housing’) refers to housing that is purpose designed and designated for older people to live independently. It is further characterised as housing that includes all or a number of special design features (universal design principles, lifetime adaptable housing etc.) and with structured visiting support services which enables individuals to age at home. It typically provides independent housing which is self-contained with its own front door.

Supportive housing schemes in Ireland are mostly social and are developed, managed and operated by either a Local Authority or by an Approved Housing Body (AHB).

**Split housing**

Homes specifically designed or adapted for multiple generations of the same family to live adjacently – typically this includes an adaptation or build-on that divides a house into two areas for independent living.
Appendix 1

Current Schemes to Support Ageing in Place

The Housing Aid for Older Persons Scheme aims to improve the living conditions of older people by carrying out minor repairs to the main areas of their homes.

The type of work that is grant-aided varies from one local authority to another. In general, it can include structural repairs or improvements, rewiring, repair or replacement of windows and doors, the provision of water, sanitary services or heating, cleaning and painting, radon remediation, and any other repair or improvement work considered necessary.

The Housing Adaptation Grant for People with a Disability can help people to make changes and adaptations to their home, for example, making it wheelchair-accessible, extending it to create more space, adding a ground-floor bathroom or toilet or a stair-lift.

The Mobility Aids Grant Scheme provides grants for works designed to address mobility problems in the home. For example, the grant can be used for the purchase and installation of handrails.

The Better Energy Warmer Homes Scheme aims to improve the energy efficiency and warmth of homes owned by people on low incomes. It covers attic insulation, draught-proofing, lagging jackets, energy-efficient bulbs, cavity wall insulation and energy advice.

Security measures for older people

The Seniors Alert Scheme provides funds to local community and voluntary organisations to install personal monitored alarms and items of home security. Grants can be made to provide security measures for people aged 65 or over who are living alone, or only with other older people, and who are unable themselves to install or buy such equipment.
### Appendix 2

**Numbers in AHB Sheltered Housing for Older People**

<table>
<thead>
<tr>
<th>Housing for Elderly; ICSH Membership</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Carlow</td>
<td>88</td>
</tr>
<tr>
<td>Cavan</td>
<td>59</td>
</tr>
<tr>
<td>Clare</td>
<td>115</td>
</tr>
<tr>
<td>Cork</td>
<td>717</td>
</tr>
<tr>
<td>Donegal</td>
<td>124</td>
</tr>
<tr>
<td>Dublin</td>
<td>3917</td>
</tr>
<tr>
<td>Galway</td>
<td>138</td>
</tr>
<tr>
<td>Kerry</td>
<td>109</td>
</tr>
<tr>
<td>Kildare</td>
<td>118</td>
</tr>
<tr>
<td>Kilkenny</td>
<td>144</td>
</tr>
<tr>
<td>Laois</td>
<td>153</td>
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<td>Leitrim</td>
<td>22</td>
</tr>
<tr>
<td>Limerick</td>
<td>366</td>
</tr>
<tr>
<td>Longford</td>
<td>0</td>
</tr>
<tr>
<td>Louth</td>
<td>32</td>
</tr>
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<td>Mayo</td>
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<tr>
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<td>Tipperary</td>
<td>260</td>
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<td>Waterford</td>
<td>200</td>
</tr>
<tr>
<td>Westmeath</td>
<td>2</td>
</tr>
<tr>
<td>Wexford</td>
<td>310</td>
</tr>
<tr>
<td>Wicklow</td>
<td>40</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>7370</strong></td>
</tr>
</tbody>
</table>

Source: ICSH Housing Association Figures, May 2018
References


Briggs, R. et al., 2016. Health and Wellbeing: Active Ageing for Older Adults in Ireland, Evidence from the Irish Longitudinal Study on Ageing, Dublin: s.n.


Thank you

A big thank you to the Board of ALONE for all the support and patience, as it took twice as long as we had expected to complete this report.

This report has no single author on the front cover. This is because we have been working on it for 18 months and with the input of so many people.

We began this report with our commitment to define the needs of housing for older people and we have built on the work of many people directly and indirectly in order to achieve this.

This report is ALONE’s input to progressing the debate around the need to provide housing choices for older people in the belief that we can now turn this into actions and homes. We have focused on resolving issues that have prevented this being achieved in the past, and defining the demand for each housing choice was key. If (and, we hope, when) these recommendations are implemented, the benefits, cost savings and the improvement in quality of life for older people expand far beyond a person’s housing needs. We will have responded to and linked the housing, social and medical needs of our aging population.

Thank you to all of those listed below and those who supported in the background. We are so grateful and would not have completed this report without you.

Yours,

Seán Moynihan
CEO
ALONE.

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