

Response ID ANON-KZHS-ZCN6-1

Submitted to **Housing to 2040: consultation on outline policy options**

Submitted on **2020-02-28 16:03:14**

Questions

1 Do you have any comments on the draft vision and principles?

Please be specific and identify what you would change and why.:

The Royal College of Occupational Therapists (RCOT) is the professional body for occupational therapists and represents over 33,000 occupational therapists, support workers and students from across the United Kingdom. Occupational therapists have a unique skill-set offering support to people with physical and mental illnesses, long term conditions, and / or those experiencing the effects of ageing.

RCOT welcome the person-centred focus of the draft vision, and the acknowledgement that health, social care and housing must work collaboratively in order to improve the accessibility and adaptability of homes and communities, to enable more people to live independently at home for longer.

Occupational therapists are ideally placed to lead and support this collaborative approach, being the only health professionals who routinely work across health, social care and housing settings. Occupational therapists have expertise in the design of accessible buildings and adaptations that remove barriers to independence, facilitate inclusion and reduce risks to health and wellbeing.

Occupational therapists are trained to practice across physical health, mental health and learning disabilities, they work with people of all ages and consider how individuals' needs change and progress across their life-course. As such, occupational therapists are skilled in identifying environmental solutions that meet the needs of a wide range of people over a sustained period of time.

The occupational therapy workforce will be invaluable in delivering the ambitions of the Housing to 2040 vision.

2 Do you have any comments on the scenarios and resilience of the route map or constraints?

Do you have any comments on the scenarios and resilience of the route map or constraints?:

The aspirational approach of the vision is welcomed, especially with regard to increasing the supply of adapted and accessible homes across all tenures and locations. The emphasis upon the accessibility of the wider community, including transport, services and green space is also crucial in order to facilitate independence and integration for everyone. The Royal College is pleased that the Scottish Government is introducing legislation that gives disabled people the right to remove barriers to make communal areas around their home more accessible.

In order to achieve the aspirations of this consultation for all it will be necessary to do the following:

- Understand the current supply of, and demand for wheelchair accessible housing across Scotland in order to ensure that the right homes are built in the right locations (for example developing the work of the Glasgow Centre for Inclusive Living)(1)
- Set mandatory requirements for the provision of wheelchair accessible housing within new-build developments (e.g. 10% of all new housing)
- Implement compulsory, up to date design standards that clearly stipulate the expectations for accessible and adaptable homes, as well as guidance for the adaptation of existing properties (e.g. Part M4(2) and M4(3) of the English Building Regulations).
- Ensure that all new-build homes are designed to be easily adapted if needed in the future (e.g. built to Lifetime Homes standards / Part M4(2) of the English Building Standards).
- Incorporate the above design standards into the building regulations so that they are not perceived as optional, and that accessibility is held in the same esteem as other building requirements
- Put in place mechanisms to ensure that the above targets and design standards are enforced in practice, by placing accountability on local planning teams for the delivery of the Housing and Planning Delivery Framework
- Increase the funding for housing adaptations across all tenures, to enable people to remain in their existing homes if their needs change as a result of age, illness or disability
- Enable people to quickly and accurately identify available properties that meet their access needs, in the location(s) of their choice, for example through further development of the Home2Fit accessible housing register (2) , and increased access to Disabled Person's Housing Services. (3)

Without this it will be impossible to ensure a consistent approach to the equitable provision of homes that are fit for purpose, and of a high standard. Occupational therapists have expertise in the design and inspection of accessible buildings and work with people who require accessible and adapted accommodation. Their work increases independence and reduces costs, through avoidance of the need for care packages and keeping people out of residential care placements. (4) They are well placed to support the delivery of all the above recommendations.

Integrated Joint Boards (IJBs) present a significant opportunity to identify housing solutions to local population health and care needs, but currently there is significant local variation in the extent to which housing is valued and integrated as part of the health and social care system. The role of occupational therapy in service commissioning, delivery and training staff would support services to deliver a person centred approach, as well as supporting more occupational therapists into inspectorate and commissioning roles.

At present, most people only consider their long-term housing needs when they reach a point of crisis – i.e. when their current housing has already stopped being suitable for them. Occupational therapists and other health and care staff should be proactively supporting people to think much earlier about their future housing needs, so that decisions can be made in a timely manner to prevent the distress and increased dependency of living in an unsuitable home. (5)

(1) <http://www.gcil.org.uk/housing.aspx>

(2) <http://www.home2fit.org.uk/>

(3) <http://www.disabilityscot.org.uk/info-guides/accessible-housing/accessible-housing-for-disabled-people-housing-information-and-advice/>

(4) 'Living not Existing – Putting prevention at the heart of care for older people in Wales'

<https://www.rcot.co.uk/promoting-occupational-therapy/occupational-therapy-improving-lives-saving-money>

(5) <https://ihub.scot/improvement-programmes/place-home-and-housing/housing-solutions-change-programme/>

For questions 3 to 7 below, when making proposals, please be as specific as you can about:

3 Do you have any proposals that would increase the affordability of housing in the future?

Do you have any proposals that would increase the affordability of housing in the future?:

If all new homes are designed to be adaptable, and access to funding for home adaptations is made more equitable, more people will be able to remain in their existing homes if their needs change as a result of ageing, illness or disability. This will reduce the number of people needing to endure the cost and stress of moving home. People with existing access needs will also have greater choice in potential homes that already meet their requirements, or can be easily and cost-effectively adapted to increase their accessibility.

4 Do you have any proposals that would increase the accessibility and/or functionality of existing and new housing (for example, for older and disabled people)?

Do you have any proposals that would increase the affordability of housing in the future?:

As above, all new homes should be designed to achieve a mandatory level of future adaptability. This will enable more people to stay in their existing homes as they age, and will reduce demands upon social, residential and nursing care. If people wish to move home, they will have greater choice over the types of property that will meet their current and future needs. The World Health Organisation (WHO) has estimated that it is 22 times more cost effective to build housing with key accessibility features from the start than to add features later. (6) 19% of the British public would most favour moving to a property specifically designed or adapted to facilitate independence. (7)

There is a significant need for more wheelchair accessible housing across all tenures, with unacceptable numbers of people living in unsuitable accommodation due to a lack of homes that meet their needs. (8) The negative effects of living in unsuitable housing are well documented, with the associated costs to health and social care being significant. (9) Disabled people with unmet housing needs are four times more likely to be unemployed than those in satisfactory housing. (10) There should be a minimum requirement for a percentage of all new homes to be built to achieve compulsory accessibility standards based on local need, for example using Part M4(3) of the English Building Standards as a template.

Councils currently have a poor understanding of disabled people's housing requirements and are making planning decisions based on poor data. (11) Councils should employ occupational therapists to work with planning departments to map their existing accessible housing supply and understand local demand for accessible properties (e.g. size, type and preferred locations). There is also currently very little accountability to ensure that housing providers and developers create homes that achieve the needs identified within Local Housing Strategies. Planning departments must be held to account for ensuring that the homes that are built are the homes that are needed, and that compulsory design standards are achieved in practice. Housing teams must ensure that people waiting for accessible housing are offered properties that meet their long-term needs.

It should be easy for people wishing to purchase or rent accessible and adaptable homes to identify properties that meet their needs. The Home2Fit programme, operated by Glasgow Centre for Inclusive Living (GCIL), has demonstrated success in helping disabled people to identify their housing options and move to homes that are suitable for them. They prioritise people who are at risk of delayed hospital discharge, homeless disabled people, those over the age of 65 and people in care/nursing homes who wish to return to the community. As such their work has benefits not just for the individuals they support, but for the health and care system as a whole. (12) Use of accessible housing registers helps to make best use of current adapted and accessible properties, reducing the need to install adaptations in non-adapted homes. Continued investment in this scheme will ensure that more people are empowered to identify housing solutions that are best for them and their families.

The majority of homes that people live in have already been built. Therefore, access to funding for adaptations that are required to enable a person to be safe and independent at home should be increased, and should be equitable across location and tenure. Currently, there is significant local variation in the allocation of funding for adaptations, leaving people vulnerable to poor health outcomes, increased care needs, and higher demand upon health and care services. Steps should be taken to increase the efficiency of the adaptations process, by implementing the guidance within the RCOT report 'Adaptations without delay' (13). There are current examples of good practice in this area, for example in East Lothian, where occupational therapists are training and working alongside community care workers to specify and oversee the provision of adaptations for residents of all tenures in a timely and equitable manner. IJBs should be held to account for the delivery of adaptation services and supported to improve equity and consistency across tenure and post code. Occupational therapists have been able to demonstrate significant cost savings through provision of adaptations that avoid the need for care packages, and keep people out of residential care. (14)

Consideration should be given to technology which facilitates independence, safety and connection within the home, with an ever-growing market of affordable digital solutions that support people's health and wellbeing. Using electronic assistance devices can make a major difference to supporting people in their daily lives and to stay at home. This can be a mix of off the shelf technologies (such as digital personal assistants) or more complex medical devices. Technology options such as Attend Anywhere/Skype can help with remote access to rehabilitation and staff should be empowered to use these, with fast reliable broadband across the country being essential to this. As experts in personalised support, occupational therapists are key to promoting this approach to care both in assessing needs and through upskilling other staff to be more aware of what is available and how it can be used. The uptake of technology is essential – indeed the Health and Social Care Integrated Work force Plan attributes a 1% reduction in staffing needs as a result of effectively using new technologies. (15)

Where specialist housing is being built, for example for older people, people with learning disabilities, and people with sensory and cognitive impairments, appropriate specialist design guidance should be consulted to ensure that their needs are fully met. A range of relevant guidance can be found via the Housing Learning and Information Network. (16) Occupational therapists should be consulted to support planners, architects and developers to ensure that design guidance is incorporated effectively.

(6)https://www.housinglin.org.uk/_assets/Resources/Housing/OtherOrganisation/190611_GIA_InnovationHome_Funding_Guide_FINAL.pdf

- (7) <https://www.habinteg.org.uk/download.cfm?doc=docm93jjjm4n1527>
(8) <https://www.horizonhousing.org/media/1522/still-minding-the-step-full-report.pdf>
(9) https://www.gcph.co.uk/assets/0000/0799/Housing_HIA_Final_Word_Version10082010.pdf
(10) <https://www.habinteg.org.uk/download.cfm?doc=docm93jjjm4n1527>
(11) <https://www.equalityhumanrights.com/sites/default/files/housing-and-disabled-people-scotland-hidden-crisis-long-summary.pdf>
(12) <http://www.home2fit.org.uk/>
(13) <https://www.rcot.co.uk/adaptations-without-delay>
(14) 'Living not Existing – Putting prevention at the heart of care for older people in Wales'
<https://www.rcot.co.uk/promoting-occupational-therapy/occupational-therapy-improving-lives-saving-money>
(15) <https://www.gov.scot/publications/national-health-social-care-integrated-workforce-plan/>
(16) <https://www.housinglin.org.uk/Topics/type/?s=188>

5 Do you have any proposals that would help us respond to the global climate emergency by increasing the energy efficiency and warmth and lowering the carbon emissions of existing and new housing?

Do you have any proposals that would help us respond to the global climate emergency by increasing the energy efficiency and warmth and lowering the carbon emissions of existing and new housing?:

6 Do you have any proposals that would improve the quality, standards and state of repair of existing and new housing?

Do you have any proposals that would improve the quality, standards and state of repair of existing and new housing?:

As above, mandatory standards should be introduced for the design and construction of accessible and adaptable homes, comparable with Part M4(2) and M4(3) of the English Building Regulations. The Government has already acknowledged that 'Housing for Varying Needs' is out of date and in need of review, and new up to date guidance is urgently needed. The RCOT Specialist Section for Housing contributed to the 2015 review of Part M in England, co-wrote the 3rd edition of the 'Wheelchair Housing Design Guide' (17) and has been consulted regarding updates to British Standards including BS 8300. As such, occupational therapists have great expertise to offer in this area.

Building all new homes with inherent accessibility and adaptability features will have universal benefit, and has the potential to reduce the risk of injury, reduce demand on health and social care and reduce costs associated with major adaptations. (18)

Where existing housing stock is being refurbished, occupational therapists can provide expertise and generate cost savings by ensuring that works maintain or enhance the existing level of accessibility, thereby ensuring that the availability of accessible homes does not decrease and, in some cases, increases. This will reduce the need for additional adaptations in the future, and can remove risk factors that may result in injury and cost to the health system. (19) Many housing associations and councils are already building in this approach to their asset management and cyclical maintenance programmes – good practice should be highlighted and shared and built in to the Regulation Framework going forward.

- (17) <https://www.habinteg.org.uk/whdg3>
(18) https://www.housinglin.org.uk/_assets/Resources/Housing/HAA/HAAIallianceTopic_Statements_Economic.pdf
(19) <https://www.bre.co.uk/filelibrary/pdf/87741-Cost-of-Poor-Housing-Briefing-Paper-v3.pdf>

7 Do you have any proposals that would improve the space around our homes and promote connected places and vibrant communities?

Do you have any proposals that would improve the space around our homes and promote connected places and vibrant communities?:

The principles of accessibility extend to the communities in which homes exist, and it is essential that transport, local services and public spaces are all designed to be universally accessible in order to prevent exclusion and isolation and reduce inequalities. There is an increasing body of evidence linking access to green space with good health, with studies suggesting that access to green space is vital to children's cognitive development. (20) Planners should work with occupational therapists and public health colleagues to design environments that support good physical and mental health for all, and enable access to work and leisure destinations. The Scottish Federation of Housing Associations is currently developing best practice guidance in this area. (21)

- (20) <https://ph.ucla.edu/news/press-release/2018/feb/being-raised-greener-neighborhoods-may-have-beneficial-effects-brain>
(21) <https://www.sfha.co.uk/our-work/policy-category/innovation--future-thinking>

8 Any other comments?

Any other comments?:

About you

What is your name?

Name:
Lauren Walker

What is your email address?

Email:

lauren.walker@rcot.co.uk

Are you responding as an individual or an organisation?

Organisation

What is your organisation?

Organisation:

Royal College of Occupational Therapists

The Scottish Government would like your permission to publish your consultation response. Please indicate your publishing preference:

Publish response with name

We will share your response internally with other Scottish Government policy teams who may be addressing the issues you discuss. They may wish to contact you again in the future, but we require your permission to do so. Are you content for Scottish Government to contact you again in relation to this consultation exercise?

Yes

Evaluation

Please help us improve our consultations by answering the questions below. (Responses to the evaluation will not be published.)

Matrix 1 - How satisfied were you with this consultation?:

Slightly satisfied

Please enter comments here.:

Matrix 1 - How would you rate your satisfaction with using this platform (Citizen Space) to respond to this consultation?:

Slightly dissatisfied

Please enter comments here.:

Awkward to cut and paste from Word document. Lots of formatting lost.