



# Evaluation of Phase 1 of the Dublin City Age Friendly Housing with Support Model in Inchicore

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The views expressed in this report are those of the author and do not necessarily represent those of Dublin City Council or the Housing Agency.

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# Preface

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I am delighted to present to you the first of three evaluative processes concerning the Inchicore Housing with Support Demonstration prototype, as stated in 'Rebuilding Ireland, Action Plan for Housing and Homelessness 2016'. The overall aim of this project is to develop a new model of housing for older people where the key components of physical environment and supports (care and social) are provided onsite, integrated into the community and are designed with older people at the centre. The project also seeks to explore how schemes such as the Inchicore demonstrator site can provide efficiencies in the delivery of home care supports within a defined location, thus providing economies of scale. This demonstration project is a collaborative, cross-sectoral and cross-departmental project, recognising the need for an integrated approach to address the issue of housing choice for the changing demographic. It requires housing, social and care supports to come together within a single scheme.

Dr. Kathy Walsh, in her first evaluation phase, tracks the history of the project back to the Dublin City Age Friendly Strategy. From that Strategy direction, followed by a Summit on Housing and Care, the path was set to create alternatives for older people to live within their community. This is a continuous evaluation that gives us an opportunity to reflect on the report, the plan and the process of working together. This process has been an opportunity for action learning and a guide for future housing with support. This first phase of the evaluation has captured the development of the concept and the background influences within the social and political environment. It recognises the importance of making a case for this programme based on the understanding of the demographic dynamic. This, along with the lack of alternatives for older people who need support to remain in their own homes for longer, has made this evaluation process a significant contribution to the future framing of "Housing with Supports".

I would like to thank Dr. Kathy Walsh, the Housing Agency and the members of the Steering Group for their shared experience, collaborative spirit and their willingness to create this road map for others.

The challenge remains to create socially engaged communities by designing a place where home is about the personal. A space where the person is at one with their surroundings and with others. Where a sense of belonging is the core to quality of life for the older person, and a space that can provide a continuum of responses to the changing needs of the person.

## **Maurice O'Connell**

Independent Chair,  
Housing with Supports Steering Group





“

**Currently, many older people who need support services of various kinds have little option but to move into residential care, due to the under-development of community-based services and the inconsistency of provision across the country. This situation persists despite the overwhelming preference of older people for ‘ageing in place’ and despite statutory policy that commits Ireland to supporting older people to remain in their homes for as long as possible.’**

OPRAH National Working Group

”



# Foreword

The Housing Agency was set up in 2010 to work with and support local authorities, approved housing bodies and the Department of Housing, Planning and Local Government in the delivery of housing and housing services. The vision of the Housing Agency is to enable everyone to live in good quality, affordable homes in sustainable communities, and it is driven by the understanding of the central role that housing plays in people's quality of life and life chances.

In Ireland, more people are living longer. The percentage of the population aged 65 and over increased from 11.7% in 2011 to 13.3% in 2016 (Census). The Central Statistics Office (CSO) has predicted that this segment of the population will increase to 22% of the total population by 2046. Therefore, being able to meet the needs of an ageing population is crucial in terms of our national housing policy over the coming years: understanding what older people want and how best to support these needs, both with appropriate housing typologies and care models. This is why the Housing Agency was delighted to be involved in this project; helping support Dublin City Council and the Housing with Support Working Group with the evaluation research report and toolkit for Phase 1 of this project. The inclusion of an evaluation process and development of a toolkit at the early stages was an important element of this project and will help with the development of this project, whilst also ensuring that the accumulated learning from this project can be shared.

Research undertaken by the Housing Agency in 2016 into older people's housing showed that older people report a high level of satisfaction with

their homes (88%); however, what was also found was that some of this contentment had less to do with the dwelling and much more to do with an attachment to location, community, friends and family.

Some of the key principles that the Housing Agency believes are crucial to ensure the quality of life for our older population are:

- Homes should be designed to be **readily adapted** as people grow older or experience disability.
- Health and well-being are not only determined by our genes and personal characteristics but also by the environments we are born and live in. Homes should be located in **environments that are Age Friendly**.<sup>2</sup>
- Whereas most older people will live independently, a **variety of housing typologies** are required to suit personal choice and to ensure that varying levels of support, both social and physical, are available.
- Available options should enable people to remain **living with independence**, in the most appropriate housing for the stage they are at in their life cycle within their communities.

The Housing Agency looks forward to the development of this project.

## David Silke

Director of Research & Corporate, Housing Agency

1 | Housing Agency/ISAX (2016) 'Housing for Older People – Thinking Ahead'

2 | Age-friendly environments foster health and well-being and the participation of people as they age. They are accessible, equitable, inclusive, safe and secure, and supportive. They promote health and prevent or delay the onset of disease and functional decline. They provide people-centred services.



# Executive Summary

## Introduction

The population of Ireland is ageing. An ageing population brings implications for policy, service delivery, and long-term planning in diverse areas such as health and housing. Two key areas of concern when considering Ireland's ageing population are the provision of suitable housing and the cost of healthcare, with health costs relating to older people expected to rise from a GDP figure of 6% currently, to a GDP figure of 11% by 2050, as demand for health services grow. Research<sup>3</sup> has found that while older people's preference is clearly to stay in their own home and community for as long as possible, over time they may need more care and support and their houses can become unsuitable. Alternative housing options for older people are generally limited, and this lack of options can result in early and unnecessary admissions to long-term residential care settings (e.g. nursing homes). More recently, there has been an increased interest in alternative options, or in some cases interim options. Interim options include Sheltered Housing and Extra Care Housing (Housing with Support). As part of the delivery of the 'Rebuilding Ireland Action Plan for Housing and Homelessness 2016', a series of 'Pathfinder Projects' were identified. The Dublin Age Friendly Housing with Support project is one of just two Pathfinder projects focused on meeting older people's housing with support needs.

## What is Housing with Support? (also referred to as 'Extra Care Housing')<sup>4</sup>

Housing with Support provides alternative options for older people, and falls somewhere between living independently in the community at one end of the spectrum and living in a nursing home or other form of long-term care at the other end. It is

a housing option that is primarily for older people (defined as 55+), whereby:

- (i) Occupants have specific tenure rights to occupy self-contained dwellings;
- (ii) Occupants also have specific agreements that cover the provision of care, support, domestic, social, community or other services;
- (iii) The wider community also benefits by way of access to clearly defined communal areas.

The model thus provides an alternative housing option for older people that falls somewhere between living independently in the community and nursing home/residential care. It is perhaps useful to think of it as "sheltered housing plus", in that it also incorporates care, support and community dimensions (in addition to wardens and alarms systems).

The core ingredients of Housing with Support are:

- Purpose-built, accessible building design that promotes independent living;
- Fully self-contained properties where occupants have their own front doors;
- An office for use by staff serving the scheme and sometimes the wider community;
- Communal spaces and facilities;
- Access to care and support services on site with a facility for emergency services;
- Community alarms and other assistive technologies;
- Safety and security built into the design, with fob or person-controlled entry.

Safety and security are often built into the design, with fob or person-controlled entry. Some housing with support developments also have additional facilities, some of which may be open to the local

3 | Age Friendly Ireland (2014) *Housing for Older People: Future Perspectives*. (p10)

4 | Riseborough, M. Fletcher, P & Gillie, D. (2015) *Extra care housing what is it?* Housing Learning & Improvement Network.

community at reasonable charges: for example, restaurant and gym facilities, meeting rooms and public areas.

## Background to this Housing with Support Pathfinder Project

The overall aim of this project is to develop a new model of housing for older people where the key components of physical environment and care supports are provided onsite, integrated into the community and are designed with older people at the centre. The project also seeks to explore how the critical issue of home care can be more effectively provided. This new model of housing will provide greater choice for older people and it is hoped enable people to live independently for longer.

The project has been divided up into a number of phases, as follows:

### Phase 1

Development of the concept and overall design of the project

### Phase 2

The detailed design and build process

### Phase 3

Tenants move in and occupy the housing

## The evaluation purpose and objectives

This formative evaluation of Phase 1 of the Dublin Age Friendly Housing with Support project was commissioned by the Housing Agency at the request of Dublin City Council in the Summer of 2017. Phase 1 of the project officially began in October 2015 (with a Housing Summit) and ended with acceptance by Circle Voluntary Housing Association/ALONE of the letter of offer on the 17th May 2017.

The overall objectives set for this Phase 1 evaluation were to:

- Measure the effective working of the stakeholders in this partnership process during various phases of the project
- Make suggestions regarding the evaluation of Phases 2 and 3 of the project (e.g. themes, measures, timetable and milestones) (These are included as an Appendix in the evaluation report)
- Develop a toolkit (in association with the Steering Committee) which will assist in developing flexible models to meet the housing, health and wellbeing needs of older people in the community nationwide.
- Influence housing and health policy.

## Evaluation approach and methodology

This evaluation was undertaken using a formative approach. A range of different methodologies were employed, including:

- Reviews of secondary documentation
- Interviews with twelve members of the Steering Committee
- Interviews with six other key stakeholders (including representatives from the Working Group, the successful AHB, as well as a locally elected representative).



# Findings

## Project evolution

The origins of this Pathfinder project can be traced back to the formation of the Dublin City Age Friendly Alliance and the launch of the Dublin City Age Friendly Strategy (2014-2019). This Strategy identified a number of relevant actions, including the design and delivery of a range of homes for older people. The project was also supported and informed by a number of national policies and publications which espoused the need for a range of different housing models and supports for older people.

## Project implementation insights

### The partnership approach

Central to the implementation of this project has been the adoption of a partnership/interagency approach. A memorandum of understanding (MOU) was developed, which details the key elements of the agreement between the partners to work together on the project. Two key partnership-type structures were also established at different stages in this phase of project development. The first structure to be established was the Working Group; its purpose being to develop the project vision. The second group to be established which took over from the Working Group was the Steering Group; its purpose being to oversee the development of the detailed project proposal and invitation to tender.

The two partnership structures established (a project Working Group and a project Steering Group respectively) benefited from the engagement of an informed and respected Independent Chairperson, familiar with the subject area, who ensured that meetings ran smoothly. The Working Group also benefited from the support of a dynamic facilitator at the initial stages, who had a clear picture of what was required and who regularly met with individual group members in order to get the project established.

Both of the two-key partnership-type structures; the Working Group and the Steering Group, benefited from having a clear purpose and vision, with engagement and commitment from their respective memberships. Discussions generally appeared to be outcome and solution focused. At an individual level it is clear that, for the professionals involved in the various partnership structures, their knowledge of the issues associated with Housing with Support has expanded. Individuals involved have also had an opportunity to develop connections and relationships across the different areas of health and housing.

## Consultations

Significant consultations took place in the early stages of Phase 1. These consultations can be seen to have clearly influenced the development of the project, as follows:

- The DCC Housing Summit which brought together individuals to agree an outline of what an innovative housing scheme for older people should be, was important in terms of getting the buy-in of senior personnel from the various government departments, the HSE, Age Friendly Ireland and DCC.
- The site visits informed the thinking of the Working Group members.
- The findings, arising from the workshops with older people and with service providers working with older people respectively, were also useful in terms of informing the thinking of the Working Group

## Mapping

The process of site identification was supported by the mapping work undertaken and by an assessment of the demand for housing among older people. This mapping process involved the HSE (Health Atlas), DCC (Housing) and the Irish Council for Social Housing working in partnership.

This mapping work has since been replicated in the three other Dublin local authorities.

## Development of the project vision

The development of the project vision and the finalisation of the vision document was important in that it represented the Steering Group's shared understanding of Housing with Support in general and the specifics of the Dublin City Housing with Support project.

## The development of the Expression of Interest (EOI)

An EOI document is generally prepared by a project commissioner and describes the specifics related to the development of a project. Its purpose, is to seek the information necessary from potential providers, in order to demonstrate their ability to meet those requirements. In the case of this project, the vision document was an important part of the development of the EOI. Another important element was the internal scoping study undertaken by Dublin City Council's Architects' Office.

## Funding

The capital part of the project will be funded in the main by the Department of Planning, Housing and Local Government through CAS, with a contribution to the construction of the community facilities being made by the HSE. This agreement is on a once off basis only and further work needs to be carried out to further develop the funding model going forward.

There are currently two possible routes for AHBs to access funding: the Capital Assistance Scheme (CAS) and the Payment and Availability Agreements (with or without a Capital Advance Leasing Facility Loan (CALF)). The EOI identified the CAS as the 'preferred' source of funding. Neither funding route is exactly suited to funding Housing with Support, given the additional costs associated

with the provision of larger than usual communal facilities and the provision of ongoing care.

## The awarding of the project to the AHB

Seven completed EOIs were received by Dublin City Council. An assessment panel was established to evaluate the submissions. The three highest ranking Approved Housing Bodies were invited to present their proposals to the tender assessment panel. The winning proposal was the joint proposal made by Circle Voluntary Housing Association and ALONE Housing. The Circle/ALONE submission won the competition because *'it was the submission that most effectively and comprehensively addressed the three key elements of the project (design, support and community)'*.

The table on the next page provides an overview of the strengths, successes, gaps and challenges for the project to date.



**Table E.1:** Overview of the strengths, successes, gaps and challenges for the project to date

	Strengths and successes	Gaps and challenges
<b>The vision</b>	<ul style="list-style-type: none"> <li>■ Provided an ambitious forward-looking narrative for the project</li> </ul>	<ul style="list-style-type: none"> <li>■ Keeping age friendly on the agenda</li> </ul>
<b>Profile of the project</b>	<ul style="list-style-type: none"> <li>■ Successful in getting early senior level support and buy-in</li> <li>■ Elected members gave approval for the site to be used for Housing with Support</li> <li>■ Identification as a Pathfinder Project in Rebuilding Ireland Action Plan for Housing and Homelessness</li> </ul>	
<b>Partnership approach</b>	<ul style="list-style-type: none"> <li>■ Development of a shared understanding and inclusive language relative to the project</li> <li>■ Increased knowledge of the issues associated with housing for older people</li> <li>■ Key senior staff with particular knowledge and skills around the table</li> <li>■ There is an agreed formal way of working together</li> <li>■ Important decisions and compromises have been made using this approach</li> </ul>	<ul style="list-style-type: none"> <li>■ Challenges remain in relation to the need for the project to meet both housing needs and health needs</li> <li>■ Further clarity is needed regarding roles and responsibilities once the project is up and running</li> <li>■ Flexibility is also needed in relation to both the capital and revenue funding of the project</li> <li>■ Issues around funding the communal areas are currently under discussion</li> <li>■ More detail and certainty are required in relation to the need for multi-annual funding to enable the future operation of the project</li> <li>■ The final decision in relation to the funding model for this project is agreed, but not for future projects.</li> </ul>
<b>Consultation phase</b>	<ul style="list-style-type: none"> <li>■ Made good use of existing knowledge and generated new local knowledge through consultations with older people and with service providers working with older people</li> <li>■ Identified suitable sites and locations for Housing with Support projects</li> </ul>	<ul style="list-style-type: none"> <li>■ This process involved limited European and international input</li> <li>■ A meaningful mechanism needs to be found to support the ongoing and future involvement of older people (i.e. as potential tenants) in the development process, in order to ensure that their needs remain central to the project</li> </ul>
<b>The EOI</b>	<ul style="list-style-type: none"> <li>■ The first time DCC had used the communication development protocol</li> <li>■ The application and use of a composite answer format for queries could provide a useful prototype for future EOIs</li> </ul>	

# Recommendations

The recommendations are grouped under three distinct headings, covering the future development of the project, the recommendations for policy and recommendations for the wider roll-out of similar type projects.

**Table E.2:** Overview of the evaluation recommendations

Recommendations for future development of the project	
<b>Funding</b>	<p><b>Rec 1:</b> The agreement reached for cross-departmental funding for this project should be formalised by the two departments going forward.</p> <p><b>Rec 2:</b> Identify the extent and detailed nature of the multi-annual revenue funding (including a staffing plan) that will be required for the project, and ideally engineer a new and dedicated revenue line to ensure the ongoing financing of the project and the wider model. This will require a joint approach from the Departments of Housing and Health and the HSE.</p>
<b>Sustaining a socially mixed community</b>	<p><b>Rec 3:</b> Explore the options in relation to the possibility of a mix of social and private tenants (e.g. via the financial contribution scheme).</p>
<b>The involvement of older people</b>	<p><b>Rec 4:</b> There is a need to involve older people in Phase 2 (for example, the Local Area Age Friendly Alliance could be asked to nominate a representative to liaise and engage on an ongoing basis with the successful AHB).</p>
<b>Learning from other jurisdictions</b>	<p><b>Rec 5:</b> The Steering Committee needs to continue the learning process by researching and engaging with similar types of housing projects in other countries to learn about what works.</p>
<b>Timing</b>	<p><b>Rec 6:</b> There is a need to revisit and clarify the projected completion date for the build part of the project. There have been some delays due to the innovative nature of the project and the completion date may be affected which is an issue as building costs continue to rise.</p>
<b>Future evaluation</b>	<p><b>Rec 7:</b> The evaluative framework developed as part of the Phase 1 evaluation to be used for the evaluation of Phases 2 and 3 of the project.</p>



**Table E.2:** Overview of the evaluation recommendations

Recommendations for policy	
Recognition of the Housing with Support model	<b>Rec 8:</b> Share the learning to date from Phase 1 of the DCC Housing with Support Pathfinder Project with the DHPLG in the context of the proposed policy statement on Housing for Older People (Actions 2.18 and 5.9 respectively in Rebuilding Ireland Action Plan for Housing and Homelessness).
A financial support scheme	<b>Rec 9:</b> There is a need to make the case for the creation of a new financial support scheme (funding follows the individual) to enable individuals to live within a Housing with Support model.
Recommendations for wider roll-out	
Recommendations for wider roll-out	<p><b>Rec 10:</b> Consider the development and use of a cross-departmental capital funding model and/or the creation of a new dedicated capital funding stream designed to facilitate and promote the development of additional Housing with Support projects.</p> <p><b>Rec 11:</b> Wider roll-out requires a clear budget heading for funding the annual operation of these types of project.</p> <p><b>Rec 12:</b> As this project develops, wider roll-out will be supported by the development of a clear business case for the model.</p>



“

**It was great, people turned up for meetings with intensity and commitment, it made my job as Chair so much easier.**

Steering Committee Chair

**The site visits inspired us in relation to what is possible.**

Steering Committee Chair

”



## CHAPTER 01

# The Evaluation Approach

### 1.1 Context

#### 1.1.1 Ageing in Ireland

Although still relatively young by EU standards, the population of Ireland is ageing. The proportion of people aged 65 and over is growing rapidly, and many people are now living longer and healthier lives. This demographic transformation provides both opportunities and challenges, particularly as the number of older people totally reliant on state supports is relatively high, and expected to increase. More than one-quarter of all people (26%) aged 50-and-over have no income other than what they get from the state (TILDA, 2014).

An ageing population brings implications for policy, service delivery, and long-term planning in diverse areas such as health and housing.

Two key areas of concern when considering Ireland's ageing population are the provision of suitable housing and the cost of healthcare (associated with the provision of support and, where required, long-term care); with health costs relating to older people expected to rise as the population of older people rises.

#### 1.1.2 Housing and ageing

Since the economic collapse in 2008, very low levels of housing have been constructed, especially in the main cities and urban areas where they continue to be needed. Under-provision of housing, whether by insufficient construction of new housing or existing housing not being used to its full potential, is one of the last significant legacies of the economic downturn to be tackled.

According to the 2016 Rebuilding Ireland Action Plan for Housing and Homelessness *'accelerating delivery of housing for the private, social and rented sectors is a key priority for the Government'*. The overarching aims of this plan are therefore 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 their homes or be provided with appropriate options of alternative accommodation, especially those families in emergency accommodation'* (p8). The most relevant actions in the plan are as follows:

- 'Action 2.18: DHPLG, in conjunction with DOH, is developing policy options for supported housing/ housing with care so that older people have a wider range of residential care choices available to them' (p 94).
- 'Action 5.8: We will explore ways to promote the availability of stepdown, specialist housing, for older people and incentivise down-sizing, where appropriate' (p 103).

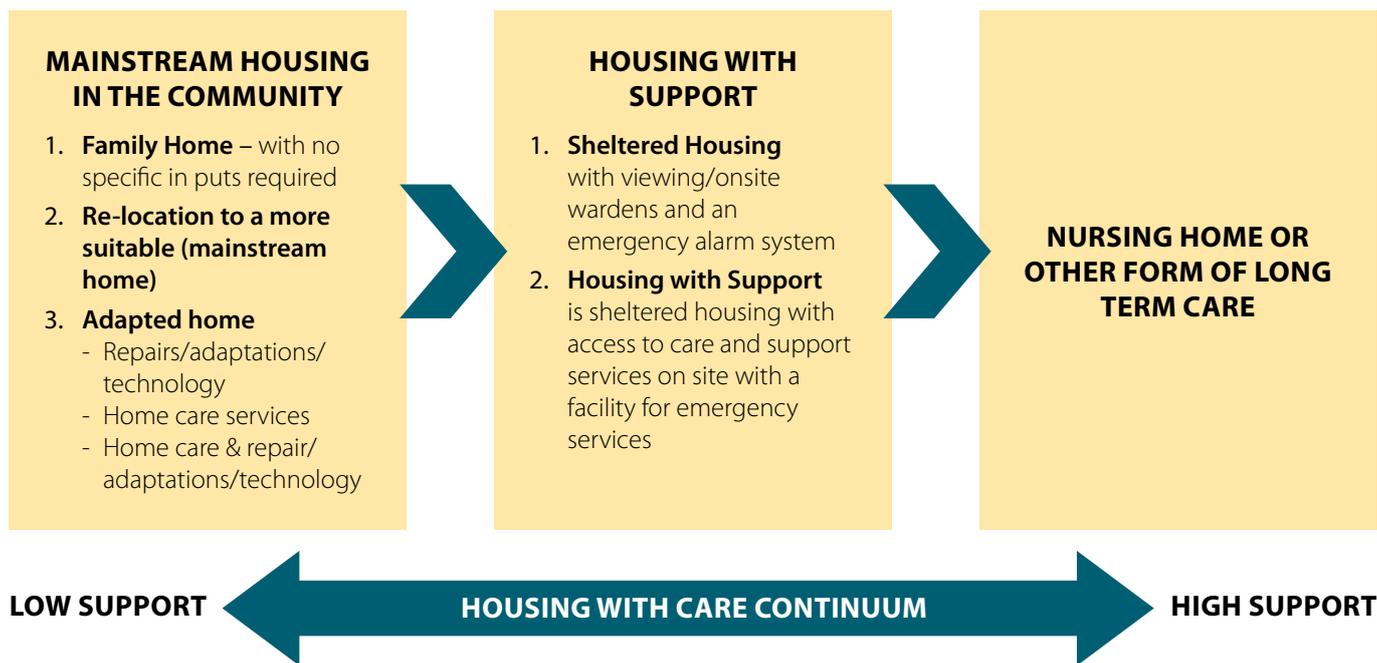
Approved Housing Bodies (AHBs) (also called housing associations or voluntary housing associations, and can also include housing co-operatives) are independent, not-for-profit organisations. AHBs provide and manage social rented housing on behalf of local authorities offering affordable rented housing for people who cannot afford their own homes, or for particular groups, such as older people, people with disabilities or homeless people.

### 1.1.3 Ageing, care and support

The National Positive Ageing Strategy's (2013) vision is of an Ireland as 'a society for all ages that celebrates and prepares properly for individual and population ageing. It will enable and support all ages and older people to enjoy physical and mental health and wellbeing to their full potential. It will promote and respect older people's engagement in economic, social, cultural, community and family life, and foster better solidarity between generations. It will be a society in which the equality, independence, participation, care, self-fulfilment and dignity of older people are pursued at all times'<sup>5</sup>. The strategy has four goals, the most relevant of which is the third goal: 'To enable people to age with confidence, security and dignity in their own homes and communities for as long as possible.'

Research has found that while older people's clear preference is 'to stay in their own home and community for as long as possible', over time 'they may need more care and support and their houses may become unsuitable'. Alternative housing options for older people are however limited, and this lack of options can result in early and unnecessary admissions to long-term residential care settings (e.g. nursing homes). See Figure 1.1 for an overview of some of the possible housing options for older people.<sup>6</sup>

**Figure 1.1:** Overview of the continuum of housing and care models for older people.



Source: Age Friendly Ireland (2014, p10) and Ireland Smart Ageing Exchange and the Housing Agency (2015, p15).

5 | Department of Health (Ireland). (2013) National Positive Ageing Strategy [Online]. Available from: <http://www.thehealthwell.info/node/773884> [Accessed: 15th June 2017] (p3).

6 | Age Friendly Ireland (2014) Housing for Older People: Future Perspectives. (p10)



Older people have a number of options to remain in their own home, relating to making various adaptations and repairs and through the use of technology. Older people can also avail of home care services to assist them with remaining in their own home. Older people may also have the option to relocate to a more suitable home where they can, in turn, begin the process of adaptations being made and/or home care packages being availed of as necessary. Typically, when older people become unable to remain in their own home they move to nursing homes or other long-term care locations. More recently there has, however, been a rise in the number of interim options.

These interim options can include Sheltered Housing and Housing with Support (Extra Care Housing). Sheltered Housing offers affordable housing with support from wardens (or similar), who either cover a number of schemes or who are based on-site (depending on the scale of the development). Sheltered homes typically provide an emergency alarm system in the form of a pull cord or a wearable pendant and many employ further assistive technology. See the next section for details of what Housing with Support is.

#### **1.1.4 What is Housing with Support? (also referred to as 'Extra Care Housing')**

Housing with Support is housing with care and support, primarily for older people. It can enable people to live independently for longer and thus avoid, or delay, moving into long term residential care, i.e. nursing homes. Occupants have specific tenure rights to occupy self-contained dwellings and have agreements that cover the provision of care, support, domestic, social, community or other services.<sup>7</sup> This is different to registered residential care provision, where occupants do not have any tenure rights.

Unlike people living in residential care homes, Housing with Support tenants are not obliged, as a rule, to obtain their care services from a specific provider, though other services (such as some domestic services, costs for communal areas including a catering kitchen, and in some cases some meals) may or may not be built into the charges the tenant pays. The key differences between Housing with Support and Residential Care

is that Housing with Support is a housing model, the housing is a separate entity from the care – otherwise, schemes would be liable to registration as care homes. Housing with Support tenants have security of tenure and housing rights afforded by their agreement.

The core ingredients of Housing with Support include:

- Purpose-built, accessible building design that promotes independent living;
- Fully self-contained properties where occupants have their own front doors;
- An office for use by staff serving the scheme and sometimes the wider community;
- Communal spaces and facilities;
- Access to care and support services on site with a facility for emergency services;
- Community alarms and other assistive technologies;
- Safety and security built into the design, with fob or person-controlled entry.

Some Housing with Support developments also have additional facilities, some of which may be open to the local community at reasonable charges: for example, restaurant and gym facilities, meeting rooms and public areas. It is also the case that some developments make use of telecare devices; for example, fall detectors for individuals who are prone to falling. Housing LIN<sup>8</sup> have identified at least three common design features in relation to Housing with Support, as follows:

- Accessible design, into and within schemes, and the dwelling units themselves;
- Flexible use of communal areas for the benefit of residents and the wider community, where 'community benefit' is part of the concept; and
- 'Progressive privacy', which separates the private area from the communal parts.

7 | Riseborough, M. Fletcher, P & Gillie, D. (2015) Extra care housing what is it? Housing Learning & Improvement Network.

8 | Riseborough, M. Fletcher, P & Gillie, D. (2015) Extra care housing what is it? Housing Learning & Improvement Network. (p5)

**Table 1.1:** Differences between housing and housing and care models

	<b>Sheltered Housing</b>	<b>Housing with Support</b>	<b>Residential Care</b>
<b>Focus</b>	Is a housing model	Is a housing model that provides significant on-site support.	Is a care model (where the accommodation is part of the care).
<b>Rights</b>	Occupants have specific tenure rights to occupy self-contained dwellings (in some instances they may be able to buy their property).	Occupants have specific tenure rights to occupy self-contained dwellings and have agreements that cover the provision of care, support, domestic, social, community or other services.	Occupants do not have tenure rights.
<b>Care</b>	Sheltered Housing tenants can obtain their care services from whomever they chose. A warden is available, either on site or on a visiting basis.	Extra care tenants are not obliged, as a rule, to obtain their care services from a specific provider.	Residential care occupants are obliged to obtain their care services from a specific provider.
<b>Additional costs</b>	<p><b>From a housing perspective</b> All units must be self-contained and should be capable of being adapted to tenants changing needs.</p> <p>Some communal facilities are provided, but generally not to the same scale as Housing with Support.</p> <p><b>From a care perspective</b> Access to support services is available through generic HSE services in the area. An alarm may be provided to alert the next of kin in case of emergency.</p>	<p><b>From a housing perspective</b> All units must be self-contained and must be capable of being adapted to tenants' changing needs, as well as planned care in order to be able to provide an emergency response Communal spaces must be capable of adapting to meet tenants' changing needs.</p> <p><b>From a care perspective</b> Access to care and support services 24 hours a day (a higher level than would generally be provided in sheltered housing).</p>	Access to nursing care 24 hours a day.



**Table 1.1:** Differences between housing and housing and care models

	Sheltered Housing	Housing with Support	Residential Care
<b>Ethos</b>	Individual tenants can make their own decisions in relation to level of privacy and involvement with community life.	Supports individual tenants to make choices to be private or take part in, and contribute to community life	Delivery of care to residents in safe and comfortable surroundings.

Source: Various sources compiled by researcher.

Housing with Support also has a number of advantages for potential tenants, for health service providers and housing providers respectively over residential care. For tenants or potential tenants, it increases their tenure and care and support options. For health service providers, it can reduce expenditure on long-term residential care and it can also prevent/reduce unplanned hospital admissions while supporting timely discharge. Finally, for housing providers it provides an option to encourage and enable older people to downsize and free up family housing.

## 1.2 Background to the Housing with Support project

The overall aim of this project is to develop a new model of housing for older people where the key components; physical environment and care supports, are provided onsite, integrated into the community and are designed with older people at the centre. Central to the project are the core concepts of:

**Lifetime adaptable housing;** which is universally designed to require the minimum amount of later adaptation, and easily adaptable to meet changing needs if necessary, thus delaying or removing the need to move to residential care.

**Ageing in place,** which underpins contemporary thinking on ageing, relates to enabling people to stay in their own homes and communities using smart liveable design. This project aims to ensure that this is achieved.

**Autonomy of housing and supports;** older people who move into the Housing with Support project will be given a Tenancy Agreement and will have ultimate autonomy of what supports are provided to them. Tenants will have exclusive possession of their home (their own front door and power over access to their homes). The tenancies will be subject to conditions as laid out in the Residential Tenancies (Amendment)

Act 2015. To this extent, this scheme and any future schemes that are developed using an agreed framework will not be considered as a designated centre, as per the Health Act 2007.

The project also seeks to explore how the critical issue of home care can be more effectively provided<sup>15</sup>. This is particularly pertinent given the estimation in a 2008 report (Working Group on Long Term Care, 2008) that in Ireland in 2012, a total of 99,000 older people would need care support (41,700 people would need moderate care supports (10.5 hours of support per week), 18,000 would need high care support (21 hours per week), and 40,200 would need continuous care (42 hours per week)), with this figure estimated to grow to 129,000 by 2022 due to the increase in the proportion of older people in the Irish population, and the increase in their life expectancy (Department of Health, 2011: 7).

The project has been divided up into a number of phases, as follows:

**Phase 1** Development of the concept and overall design of the project

**Phase 2** The detailed design and build process

**Phase 3** Tenants move in and occupy the housing

15 | The Department of Health have recently completed a public consultation on Home Care Services in order to help inform the development of a new statutory scheme and system of regulation for home care services <http://health.gov.ie/blog/noticeboard/consultation-on-home-care-services/> accessed 26 October 2017)

## 1.3 The evaluation purpose and objectives

This formative evaluation of Phase 1 of the Dublin City Age Friendly Housing with Support project has been commissioned by the Housing Agency at the request of DCC. It is envisaged that there will be three phases to the evaluation process.

Phase 1 of the project officially began in October 2015, with a DCC Housing Summit, and ended with acceptance by Circle Voluntary Housing Association/ ALONE of the letter of offer on the 17th May 2017. The overall objectives of this Phase 1 evaluation are to<sup>16</sup>:

- Measure the effective working of the stakeholders in this partnership process during various phases of the project
- Make suggestions regarding the evaluation of Phases 2 and 3 of the project (e.g. themes, measures, timetable and milestones) (This is included as Appendix 11)
- Develop a toolkit (in association with the Steering Committee) which will assist in developing flexible models to meet the housing, health and wellbeing needs of older people in the community nationwide.
- Influence housing and health policy.

Specifically, this Phase 1 evaluation is expected to:

1. Examine what was successful in the development of Phase 1 of the Project
2. Examine the gaps, blockages and barriers, and understand the reasons for them
3. Explore how well the Steering Group and partnership approach Department of Health (DOH), Dublin City Council (DCC), Department of Housing, Planning, and Local Government (DHPLG), the Irish Council for Social Housing (ICSH), the Health Services Executive (HSE), and Independent Chairperson) has worked, what the risks involved for the individual parties were, and how they could be improved
4. Evaluate the consultation phase of the project – how consultation was carried out, site identified etc. Research reports are available on workshops with older people, stakeholders, etc.

5. Evaluate how the brief for the Expression of Interest (EOI) for AHBs was developed
6. Evaluate the awarding of the project to the AHB
7. Gain an understanding of Phase 2 and Phase 3 of the project and develop a preliminary evaluation framework, setting out key evaluation questions and suggested methods for evaluation for the following two phases of the project

## 1.4 Evaluation approach and methodology

### 1.4.1 The approach

This evaluation was undertaken using a formative approach. Formative evaluation is a useful approach in terms of understanding why and how a project works (or doesn't) and what contextual and other factors (internal and external) are at work during a projects' lifespan. It is designed to facilitate a better understanding of the process of change; finding out what works, what doesn't, and why. This allows the necessary knowledge to be gathered in order to facilitate learning.

This form of learning is useful in that it challenges and facilitates learning and understanding of how problems and solutions might be related, even when separated by time and space. It also challenges the understanding of how previous actions created the conditions that led to the current situation. Through this process, relationships between organisational structures and behaviour are fundamentally changed as those involved in the project comprehend more, change and evolve purpose.

### 1.4.2 Methodologies

A range of different methodologies were employed, including:

- Reviews of secondary documentation
- Interviews with twelve members of the Steering Committee
- Interviews with six other key stakeholders (including representatives from the Working Group, the successful AHB, as well as a locally elected representative).

16 | Dublin Age Friendly Housing with Support Model Request for Tenders for Evaluation of Phase 1 of the Pilot Project. Issued 2nd June 2017.



Appendix 1 contains details of all the interviews conducted.

As part of the review of secondary documentation, the projects reviewed and analysed were:

- The vision document
- Minutes of key partner meetings
- Notes and attendance sheets arising from the October 2015 Housing Summit
- The Dublin City Age Friendly Programme Housing Working Group final report
- The research reports on workshops with older people and stakeholders
- The paperwork associated with the awarding of the project to the AHB, etc.

Interviews with representatives of the Steering Committee and other key stakeholders were conducted, either in person or by telephone. The issues that were explored with the representatives included:

- The role and value of the Steering Group and partnership approach to date, and room for improvement
- Exploration of the risks of getting involved (for example, if the project did not progress/did not progress as planned)
- The value and purpose of the consultation phase of the project
- The gaps and blockages experienced by the project and how these were/will be resolved
- Key project challenges and project learning
- The potential of the approach for wider roll-out

The Phase 1 evaluation report was prepared based on an analysis of the findings emerging from the field work and secondary data analysis. A draft Phase 1 evaluation report was submitted to the Steering Committee for their comments and feedback. This evaluation report was finalised following the incorporation of their feedback.



**Putting the Expression of interest together we had to revisit the proposal in its entirety in order for us all to be able to agree and get it down on paper in a coherent and structured way.**

Steering Committee Member

**Getting the support of the Lord Mayor and the local elected representatives were important milestones.**

Steering Committee Member

## CHAPTER 02

# Main Findings

### 2.1 Project evolution

The origins of the Dublin City Age Friendly Housing with Support Pathfinder project can be traced back to the formation of the Dublin City Age Friendly Alliance, in early 2013. This, in turn, led to the establishment of the Dublin City Age Friendly Programme and, ultimately, in September 2014, to the launch of the Dublin City Age Friendly Strategy (2014-2019).

One of the actions included in the Strategy was that 'DCC's Housing Department would work with the public, private and voluntary sectors to facilitate, design and deliver a range of homes for older people that enable them to remain in their homes for longer (p23). Another relevant action in the Strategy was that 'The

Alliance will champion improved physical and mental health and wellbeing for older people by actively promoting the actions contained in Healthy Ireland (2013) and the priorities named in the National Positive Ageing Strategy (2013), and any subsequent initiatives' (p33).

The establishment of the project was also supported and informed by a growing number of national policies and publications which espoused the need for a range of different housing models and supports for older people. See Table 2.1 for details of some of the national level developments that supported/informed the project.

**Table 2.1:** National policy and publications that supported/informed the project

Year	Description
2013	The Department of Health (DOH) publishes the National Positive Ageing Strategy. This Strategy sets out a vision for an age-friendly society through the achievement of four national goals (participation, health, security and research)
	Healthy Ireland - A framework for improved Health and Wellbeing 2013-2015 is published by the DOH. This included a goal around improving the proportion of people who are healthy at all stages of life
2014	Age Friendly Ireland is established as an intermediary organisation to co-ordinate the National Age Friendly Cities and Counties Programme (January)
	Age Friendly Ireland publishes 'Housing for Older People: Future Perspectives' report, with recommendations for policy makers and housing providers on developing housing options and choices for older people. This research examines and compares the housing design, assistive living technologies and social interventions used in the Great Northern Haven development in Dundalk with national and international case studies. (April, 22nd)

Year	Description
2014	Report of Forum on Long-Term Care for Older People 'Responding to the Support and Care Needs of our Older Population-Shaping an Agenda for Future Action' is published. It states that <i>'The potential of appropriately designed housing has not been developed to date in Ireland – there are appropriate models of 'housing with care' that have been developed in other jurisdictions and some in Ireland that can and should be replicated nationwide'</i> (p9). It also states that 'Providing people with a seamless service often requires much higher levels of co-operation between agencies and between disciplines than is currently the case – a greater integration of resource allocation and policy-making at both national and local levels is required' (p10). July.
	Age-Friendly Cities and County Survey by HaPAI Dublin City (Sample n=502)  Launch of Older People Remaining at Home (OPRAH). Promoting systems change towards independent living for older people. A paper produced by the OPRAH National Working Group
2016	Housing for Older People - Thinking Ahead Research report is published, commissioned by the Ireland Smart Ageing Exchange and the Housing Agency (October)
	Publication of 'Rebuilding Ireland Action Plan for Housing and Homelessness'. The Housing with Support project is identified as a Pathfinder demonstration project within this action plan. (July)

Source: Data sources compiled by Researcher

## 2.2 Project implementation

### 2.2.1 An overview

The following table provides an overview of Phase 1 activities and timelines.

**Table 2.2:** Overview of Phase 1 activities and timelines

Year	Date	Activity
2015	Oct 7th Dec 18th	The Dublin City Housing Summit 'Supporting Successful Ageing -Continued Independent Living Housing Options and Supports' is hosted by the Lord Mayor.
		Dublin City Age Friendly Programme's Housing Working Group is established and meets for the first time. It meets formally a further five times to progress its work.
2015	Jan- June	Mapping of existing social housing schemes for older people in Dublin against essential services Site visits to eight housing schemes for older people HSE write their intention to provide financial support for the Dublin City Housing Working Group Housing with Support project within their 2016 Operational Plan.



Year	Date	Activity
2016	June 13th	Housing with Support workshop for older people held.
	June 17th	Housing with Support workshop for housing and healthcare staff held.
	July 19th	'Rebuilding Ireland Action Plan for Housing and Homelessness' is published. The Housing with Support project is identified as a Pathfinder demonstration project within the action plan.
	Sep	The Housing with Support report of the Dublin City Age Friendly Programme's Housing Working Group is published.
	Oct 3rd	The Dublin Age Friendly Housing Steering Group (the Steering Group) is established and meets for the first time
	Nov 8th	Second meeting of the Steering Group held
	Dec 12th	Third meeting of the Steering Group held 'Inchicore Housing with Support Demonstration Project - A partnership between Housing, Health and Community Vision document' is issued. Feasibility study and Stage 1 Capital Appraisal Submission made to the Department of Housing, Planning and Local Government in relation to the project
2017	Jan	Approval in principal from Department of Housing re: Feasibility Study Stage 1 Capital appraisal (see below for further details of the Capital Appraisal Process).
	March	The Expression of Interest (EOI) is issued to AHBs registered under the Communications Development Protocol (who have expressed an interest in developing schemes ≥21 units.) (6th) The closing date is set as the 30th March 2017. 38 queries received from AHB's (66% in relation to funding issues)
	April	Closing date is extended to 21st April. Seven completed EOI's received by the closing date EOI Assessment Panel meet (25th April)
	May	Interviews held for the three highest-ranking AHBs (5th May) Letter of offer issued to successful AHB Circle/ALONE (10th May) Circle/ALONE accepted offer on 17th May 2017

## What is the Approval Process?

Local authorities and approved housing bodies looking for public funding for social housing under certain capital schemes participate in a four-stage approval process, as follows:

**Stage 1** – Capital Appraisal - a high-level project appraisal. The local authority makes sure that the business case for the project is in order to gain approval in principle of funding.

**Stage 2** – Pre-Planning – This is a pre-planning check on procurement, the consistency of the design with design guidelines, cost and value for money.

**Stage 3** – Pre-Tender Design and **Stage 4** – Tender Report – These stages involve two final assessments on cost pre-tender, and cost and procurement prior to award of tender.

### 2.2.2 The DCC Housing Summit 2015

The first discrete project action that can be clearly identified was on October 7th 2015, with the organisation of the Dublin City Housing Summit 'Supporting Successful Ageing - Continued Independent Living Housing Options and Supports'. This summit brought together key staff from across Dublin City, with responsibility for housing and care

of older people. Its purpose was to agree an outline of what an innovative housing scheme for older people should be. The content of the Summit was informed by a number of recent publications/reviews. The overall idea of the Summit was to examine and discuss a number of broad emerging principles. Table 2.3 provides the emerging principles for Housing with Support models.

**Table 2.3:** Emerging Housing with Support principles (from DCC Housing Summit, 2015)

Principles	Description
Site identification	Identify sites suitable for a 'housing with care' development within the city boundary that meet the needs of older people, and ensure the housing design and supports meet peoples evolving social, care and physical needs.
Older Person centred design	Agree on the process to identify the design requirements of the housing development. This will include a consultation with older people, through Dublin City's Older Peoples Councils, as well as specialist agencies.
Support Models	Identify the range of appropriate care and supports that need to form part of the development.
Assisted Technology	Agree the role of assisted technology in the development and ongoing support of residents that will be included in the development.



Principles	Description
<b>Access and Tenure</b>	Explore how the development can be developed and made attractive, for both social housing and to older people seeking to downsize from their 'owned homes'.
<b>Funding</b>	Develop an effective funding mechanism for the capital and ongoing revenue costs. Examine schemes such as the 'Financial Contribution Scheme' as models to utilise.
<b>Social and care partnership</b>	Identify the key partners (public, private, voluntary and community based).

Source: Housing with Care for Older People Briefing Document for Dublin Summit (updated)

### 2.2.3 Dublin City Age Friendly Programme's Housing Working Group

Arising from this Summit, the Dublin City Age Friendly Programme's Housing Working Group was established. Its purpose was to develop a prototype of Housing with Support for older people. Its membership included senior personnel from DCC, the HSE, the DOH, DHPLG, Age Friendly Ireland, OPRAH, the ICSH and ALONE. See Appendix 2 for membership details for this group. The

group held its first meeting on the 18th December 2015. It subsequently met six times over a six-month period in 2016. These meetings were facilitated by Regional and Dublin City Age Friendly representatives. The group was chaired by an Independent Chairperson, Mr. Maurice O'Connell, who was appointed by DCC Deputy Chief Executive Brendan Kenny. The details of the programme of work undertaken by/on behalf of this group are provided in the following table.

**Table 2.4:** Dublin City Age Friendly Housing Working Group work programme

Actions	Description
<b>Mapping of housing for older people and services</b>	Existing social (local authority and AHB) housing schemes for older people in Dublin were mapped against essential services with the support of the HSE Health Atlas. These maps were then refined to show the concentration of people aged 1) over 65 and 2) aged 55-65 by electoral district. These so-called 'heat maps' were useful in terms of looking at existing and potential demand for housing for older people across the city. The mapping work was undertaken by the HSE Health Atlas, with data on social housing provision provided by DCC and the ICSH. This was the first time that this information had been collected and collated in this way. This mapping process was subsequently replicated across the three other Dublin local authorities, as it was clear it could offer service providers useful information for the future planning of services
<b>Visits to see different housing schemes for older people</b>	Working Group members were given the opportunity to visit eight different housing schemes. See Table 2.6 for details of the schemes visited. The purpose of these visits was to enable Working Group members to see these different housing models in operation and to identify the strengths and weaknesses of these different approaches, with a view to informing the 'prototype' model in development. Working Group members also got a chance to speak to residents living in these developments about their experiences of living there.

Principles	Description
<b>Review of key reports</b>	<p>Some key national and UK (Housing LIN) reports and publications were reviewed to identify learning relevant to the development of the prototype.</p>
<b>Workshops</b> <b>1. With older people</b> <b>2. With service providers who support older people</b>	<p>A workshop with older people in the Mansion House.  A workshop with service providers working with older people in the Mansion House.</p>
<b>Identification of the potential site for the prototype project</b>	<p>The group used the four strands identified in the 2014 Age Friendly Ireland Report ‘Housing for Older People – Future Perspectives’ to assist them identify the 0.8-hectare site in Inchicore. The strands are:</p> <ol style="list-style-type: none"> <li>1. Physical considerations</li> <li>2. Technological considerations</li> <li>3. Social considerations</li> <li>4. Cost considerations</li> </ol> <p>The site selected is located next to a HSE Health Centre. Within easy reach of the village and close to a range of essential services, the site met all the necessary criteria and was owned by DCC.</p>
<b>Publication by the Working Group of their ‘Housing with Support (A housing model for older people)’ report</b>	<p>The final version of this report, produced in September 2016, not only identified the potential site (subject to DCC approval), but also included 15 recommendations related to the development and ultimate operation of the site.</p>
<b>Establishment of the Dublin Age Friendly Housing Steering Group</b>	<p>Dublin Age Friendly Ireland, in partnership with DCC, were keen to progress the development of the project and decided to set up the Dublin Age Friendly Housing Steering Group (out of the Dublin City Housing Working Group) to begin the work of operationalising the project.</p>



### 2.2.4 Dublin Age Friendly Housing Steering Committee

Following the finalisation of the Working Group report, DCC decided to establish a Steering Group to progress the report recommendations. DCC invited various organisations and government departments to sit on the new Housing Steering Committee.

Membership of this Committee included representatives from DCC, the DOH, the DHPLG, HSE (nationally and at a local area level) and the ICSH. See Appendix 3 for details of this membership. The organisational membership of the Steering Committee was broadly similar to that of the Working Group, with the exception of the AHBs Working Group members who did not participate in the Steering Group, thus avoiding any potential conflict of interest should they decide to participate in the Housing with Support EOI.

#### What is an Expression of Interest (EOI)?

An expression of interest is a method for providers of goods and/or services to register their interest in supplying them. It is also the document describing requirements or specifications and seeking information from potential providers to demonstrate their ability to meet those requirements.

#### What is the Housing with Support EOI?

Dublin City Council developed and issued a Housing with Support EOI to all registered AHB's, inviting them to make a submission in relation to how they would construct, develop and operate the project in Inchicore.

The Independent Chairperson of the Working Group took over responsibility for chairing this new Committee, with secretariat support provided by DCC. The first meeting of this Committee took place on the 3rd October 2016, with later meetings in November and December 2016.

Over the period October to December 2017, the Committee worked together to develop the overall vision of the project. Its vision document, 'Inchicore Housing with Support Demonstration Project - A partnership between Housing, Health and Community' was issued in December 2016<sup>17</sup>. At the same time, DCC with the support of the Committee and specific Committee Members successfully submitted its Stage 1 Capital Appraisal Submission to the DHPLG, seeking first stage outline approval for the financing of the project. A Pre-Stage 1 Capital Appraisal approval was received in March 2017.

The Steering Committee continued to meet in 2017. The focus of the meetings in 2017 related largely to the development, and subsequent management of the EOI process.

In order to support the development of the specifications to be included in the EOI and the Stage 1 of the Capital Appraisal Submission, DCC Architects developed an internal scoping study. The study, which outlined possible unit sizes and possible proportions of private to communal spaces was discussed at the Steering Committee meetings and at bilateral meetings between DCC and the DHPLG. The presence of architects from the DHPLG on the Steering Committee provided a very useful support and input into these discussions. Appendix 9 provides details of the schedule of accommodation agreed as an outcome of this scoping study.

Table 2.5 provides details of Steering Committee meetings held as part of the Phase 1 process (i.e. between October 2016 - June 2017).

17 | Dublin Age Friendly Housing Steering Committee (2017) 'Inchicore Housing with Support Demonstration Project – A partnership between Housing, Health and Community' Vision Document

**Table 2.5:** Schedule of Housing Steering Committee meetings

Date	Focus of meetings	Other related meetings
<p>3rd October 2016 8th November 2016 12th December 2016 23rd January 2017 6th March 2017 9th May 2017 20th June 2017</p>	<p>Discussions regarding:</p> <ul style="list-style-type: none"> <li>■ The vision</li> <li>■ The MOU for the Steering Committee and the project</li> <li>■ Evaluation of the project</li> <li>■ The Capital Appraisal submission</li> <li>■ The procurement process and the details to be included in the EOI</li> <li>■ The capital funding mechanism/s</li> <li>■ The appointment of the successful AHB and the next steps</li> <li>■ A small number of other issues</li> </ul>	<p>DHPLG and DCC staff met on various occasions to examine brief requirements and potential costings</p> <p>EOI Assessment Panel established to review EOI submissions. Meeting 10th and 11th April to review submissions. The panel included representatives from DCC, the DHPLG, the HSE, as well as the Independent Chairperson</p> <p>1b Site Specific Working Group established and met regularly (with representation from DCC and the Appointed AHBs). Meetings held 25th May, 4th July, 2nd August and 5th September</p>

Sources: Minutes of meetings held between October 2016-June 2017



## 2.3 Project implementation insights

### 2.3.1 The partnership approach

#### The process

Central to the implementation of this project has been the adoption of a partnership/interagency approach, with the establishment of two key partnership type structures; the Working Group and then subsequently the Steering Group.

Interestingly because of staff changes, only four individuals involved in the original Working Group remain involved in the Steering Group. Notwithstanding this significant turnover of individuals, the Steering Group has managed to stay focused and true to the broad principles agreed at the Housing Summit in 2015. This was helped by the presence of a consistent and Independent Chairperson, who has been involved with the project since the establishment of Phase 1.

The partnership/interagency approach also filtered down to the composition of the Assessment Panel for the EOI, with all key organisations involved invited to nominate a representative to sit on the Panel. These various structures were useful because they brought together senior representatives from the critical Departments (Housing and Health respectively) and core organisations, including DCC and the HSE.

The regular and scheduled meetings of these groups can be seen to have ensured that momentum was not lost. The value of having these senior people around the table was that they were able to feed into the process in an ongoing way. What is clear is that all those involved are committed to the project and prepared to give it the time it requires, with bilateral meetings scheduled between group meetings in order to move the process forward between meetings.

One key delay has been the signing of a formal Memorandum of Understanding (MOU). An MOU is a formal agreement between two or more parties. Companies and organisations can use MOU's to establish official partnerships. MOU's are not legally binding but they carry a degree of seriousness and mutual respect.

The purpose of this MOU between DCC, HSE, DHPLG, DOH and ICSH is to 'support the development of a Housing with Support model for older people in Dublin City as one of five demonstration projects under the Government's Action Plan for Housing and Homelessness 2016 Rebuilding Ireland'<sup>18</sup>. The MOU details the key elements of the agreement between the partners to work together on the project. Appendix 10 contains a copy of the MOU.

#### Purpose and vision

Both the Working Group and the Steering Committee appeared to have a clear purpose and vision, with engagement and commitment from their respective memberships. Discussions generally appeared to be outcome and solution focused. The development and the finalisation of the vision document at the end of December 2016 can be seen as the articulation of the shared understanding of the Steering Group:

*"Everyone around the table is bought into and convinced of the need and the vision, the challenge is now to make it happen".*

Interestingly, this shared understanding had to be revisited in order to enable the finalisation of the EOI. This sense of purpose has clearly contributed to the sense from across the Steering Group membership that:

*"The Steering Group is working well, we are all committed to making it work and have come a long way".*

#### Leadership and commitment

The two partnership structures clearly benefited from the engagement of an informed and respected Independent Chairperson, familiar with the subject area, who has ensured that 'meetings are efficient', 'run to the defined agenda', 'with no time wasting'. The Chairperson has also met with individuals on the two structures and other key stakeholders between meetings in order to keep the momentum of the project. As one consultee described it:

*"The Chair has been able to manage personalities and a process... Where there were different interpretations he has been able to speak to and manage these differences in a respectful way."*

18 | Unpublished Memorandum of Understanding between Dublin City Council (DCC), Health Services Executive (HSE), Department of Housing Planning and Local Government (DHPLG), Department of Health (DOH), Irish Council for Social Housing (ICSH). (dated 1st January 2017)

The Working Group also benefited from the support of a dynamic facilitator (the then Age Friendly Regional Co-ordinator) at the initial stages, who had a clear picture of what was required and who regularly met with individual group members in order to get the project established. Currently, the Steering Group is benefiting from the strong secretariat support provided by DCC officials.

### Outcomes for the individuals involved

At an individual level it is clear that, for the professionals involved, their knowledge of the issues associated with Housing with Support has expanded.

*"I know now Housing with Support will require us to move beyond the building regulations to enable the project accommodate, turning circles for wheelchairs, hoists, etc."*

Another outcome was the chance for individuals to develop connections and relationships across the different areas of health and housing. Interestingly, a lot of the work to date appears to have been personality driven, with a lot of enabling work done in informal meetings between project partners. Despite this, the group has managed to deal with significant changes in key representatives and continue to move forward, which is positive.

### Supported by a favourable political and policy environment

The partnership approach has also benefited from a favourable political and policy environment, which recognised the need for cross-sectoral approaches in general and which has specifically identified Housing with Support as a specific and urgent need.

#### 2.3.2 Consultations

Significant consultations took place in the early stages of Phase 1. These included the Housing Summit, the workshops and the site visits. In the later stages of the project, the consultations were largely facilitated through the Steering Committee meetings and bilateral meetings between Steering Committee member organisations, as necessary.

#### The Housing Summit

The Housing Summit in October 2015 was critically important in terms of getting the buy in of senior personnel from the various government departments,

the HSE, Age Friendly Ireland and DCC to develop the project within Dublin City. Attendance at the event was by invitation only.

The invitations were issued by the Deputy Chief Executive, Housing and Community at DCC, and the event was hosted by the Lord Mayor with invitations sent to targeted individuals. Invitees included:

- The Lord Mayor, the Chair of the DCC Housing Strategic Policy Committee and senior staff from Dublin City Council
- National Directors, Chief Officers (for various areas) and relevant national leads from the HSE
- Assistants secretaries and principal officers from relevant departments
- Senior staff from Age Friendly Ireland
- The Chair of Dublin Age Friendly Alliance
- Representatives from ICSH, Irish Smart Exchange Network and ALONE

The invitation letter also included a useful briefing document which detailed the purpose of the event. In the invitation letter, the Summit was described as *'a gathering, of a small group of senior people from key organisations and sectors within Dublin City to further the development of a prototype housing scheme'*. The invite letter noted that *'Each person invited to this summit has a critical role to play in ensuring that such a development is successful and appropriate'*. The event itself was highly organised, with key speakers chosen carefully and nothing left to chance, including the table seating plans. A copy of the invitation letter is included as Appendix 4 and a copy of the briefing document is included as Appendix 5. The key outcome from the Summit was the commitment to the establishment of the cross-departmental Working Group that would develop the ideas emerging from the Summit.

#### Visits to Housing Schemes

Working Group members also gathered valuable information by visiting eight different housing schemes for older people. While at the different housing schemes, the Working Group members met the housing scheme managers, who provided a briefing on the developments. Some Working Group members also took the opportunity to chat informally with residents.



The findings of these visits informed the thinking of the Working Group members. In hindsight, it might have been useful to prepare a formal report of the learning arising from the site visits in order to be able to ensure that those that were not able to attend were able to fully benefit from the learning, and that that the EOI was fully informed by this consultation process. Table 2.6 contains information on the different schemes visited.

**Table 2.6:** Housing schemes visited by Working Group Members

Name of Scheme	Type of Housing/Accommodation
<p><b>ALONE - Support Coordination (Dublin)</b></p>	<p>Support Coordinators work with the older person to address their immediate situation and then link them in with the relevant services in the community. Staff maintain contact with the older person as required, to ensure long term solutions have been achieved. Support Coordination can be contacted by concerned health professionals, social workers, Gardaí, community members, family members, as well as older people themselves. The Support Coordination team offers assessment, direct support and case management to older people within the greater Dublin areas. Cases outside of Dublin are supported through providing information, advocacy and referrals to similar services based near the older person in need.</p>
<p><b>St. Benedict's St. Vincent de Paul (Fingal)</b></p>	<p>St. Benedict's is a secure housing complex of 37 homes, designed for older people capable of independent living, built and managed by the Benedict's Conference of the Society of St. Vincent de Paul (SVDP). The Society of St. Vincent de Paul in association with Fingal County Council commissioned Paul Keogh Architects (PKA) to design this sheltered housing scheme and communal building at Estuary Road, Malahide. PKA's design consists of a curved terrace of houses winding along the western boundary of the site, faced by a series of pavilion blocks, each containing three units. This creates a sheltered open space and provides a secure communal ambience for the elderly residents. St. Benedict's was the winner of the ICSH Community Housing Award category for Housing for Older People in 2009.</p>
<p><b>Great Northern Haven The Netwell Centre and Clúid Housing Association (Louth)</b></p>	<p>This housing scheme for older people has been fitted with sophisticated technology, which is designed to meet the changing needs of its residents over time. The housing scheme hosts an Ageing-in-Place research project, which provides valuable research in relation to housing for older persons. The project also provides a number of sustainable design features, from high levels of insulation, a central wood pellet boiler, mechanical ventilation heat recovery and a green roof for water attenuation.</p>
<p><b>McAuley Place (Nas na Riogh Housing Association Scheme for older people (Kildare))</b></p>	<p>This housing development, which opened in Spring 2011, consists of 53 self-contained apartments in the centre of Naas town. It is a managed service providing centrally located housing for older people capable of independent living. Each apartment comprises one bedroom with a fully equipped kitchen/sitting room and a bathroom with level-access shower. Wireless internet is available in all units.</p>
<p><b>Greendale Court Kilbarrack, Dublin 5.</b></p>	<p>Greendale Court is located adjacent to the Greendale Shopping Centre. It was built for Dublin City Council circa 1978, It consists of two 2-storey blocks with an area of green space between them. The two blocks originally housed a community facility and 60 bedsits. The bedsits were later amalgamated into 32 one-bed senior citizen apartments.</p>

Name of Scheme	Type of Housing/Accommodation
<b>Clareville Court, Glasnevin, Dublin 11.</b> (DCC Housing for older people)	This senior citizen complex was opened in 1986 The complex comprises of 73 units, which include a mixture of one and two-bedroom apartments and bungalows. Is has a communal room which is in use for various activities, which include canteen facilities and a communal wash room.
<b>Merville Court, Finglas, Dublin 11.</b> (DCC Housing for older people)	This senior citizen complex was opened in 2008. It includes of 45 units (made up of 39 one bed units, 6 two bed units) and is a two to three storey building with lifts. There is a communal room which is used for various activities. It also includes canteen facilities and a communal wash room. The complex is surrounded by landscaped garden areas, alarmed and gated with CCTV throughout.
<b>McKee Court near McKee Barracks, Cabra, Dublin 7</b> (DCC Housing for older people)	This senior citizen complex was opened in 2011 and is located off Blackhorse Avenue near McKee Barracks, Cabra, Dublin 7. It comprises of 37 units, (35 one beds, 2 two beds) and it is a two-storey build. The complex is alarmed and gated with landscaped areas surrounding it and CCTV throughout. There is a small communal room which is in use for various activities.

Not all Working Group members were able to attend all the site visits. 25% managed to attend all eight sites and another 50% visited five sites, while the remaining 25% did not visit any of the sites. Table 2.7 provides details of the visits by the various group representatives.



**Table 2.7:** Sites visited by the Working Group members

Organisation	Role	Sites Visited								Total visited
		ALONE support Co-ordination	St. Benedict's	Great Northern Haven	McAuley Place	Greendale	Clareville Court	Merville Court	McKee Court	
DCC	Age Friendly Programme Office/ Social Inclusion	✓	✓	✓	✓	✓				5
	Housing and Community	✓	✓	✓	✓	✓	✓	✓	✓	8
DOH	Principal Officer									0
DHPLG	Housing Policy	✓	✓	✓	✓	✓				5
HSE	HSE Area 7									0
	HSE Area 9									0
	HSE Social Care	✓	✓	✓	✓	✓				5
Irish Council for Social Housing	Policy Officer	✓	✓	✓	✓	✓				5
Age Friendly Ireland	Regional Co-Ordinator	✓	✓	✓	✓	✓	✓	✓	✓	8
	OPRAH	✓	✓	✓	✓	✓				5
ALONE	CEO	✓	✓	✓	✓	✓				5
Independent Chairperson		✓	✓	✓	✓	✓	✓	✓	✓	8

### Consultations with Older People

The workshop with older people was held in June 2017, and 30 older people attended. Attendees were identified by the local Age Friendly Alliances and through contacts provided by Working Group members. Where necessary, transport was provided to enable individuals to access the workshop. No record was made available as part of the evaluation in relation

to the gender, age, general health of these attendees, or indeed what part of the city these individuals were living. The majority of older people attending the consultation (83%) were tenants of either an approved housing body or DCC tenants, while just 17% (Sample n = 5) were owner occupiers.

This workshop with older people focused on four questions, as follows:

1. What three to four things would help you remain staying in your community for longer?
  - The role of technology
  - The external environment
  - A mix of ages
2. What's good about where you live that helps you stay independent – what's important to you in terms of:
  - Location
  - Community integration
  - The design and layout of your home
  - Community facilities
  - A sense of community
  - Safety and security
3. What supports are important? What extra supports would help as you get older?
4. What are your biggest concerns about how suitable your home is at the moment in relation to meeting your needs as you get older?

An outline of the key findings arising from this workshop are included in Appendix 6. Table 2.8 provides an overview of these key findings.

**Table 2.8:** What older people identified as important in the housing consultations.

Theme	Description
<b>Housing</b>	<ul style="list-style-type: none"> <li>■ Homes and rooms within them need to be adaptable and accessible to allow for a wheelchair / a second bedroom</li> <li>■ Need to have access to a lift if on multiple floors</li> <li>■ There should be storage space</li> <li>■ Pleasant views from living quarters</li> <li>■ Should have choice about whether they are furnished or not</li> <li>■ Safety and security are important</li> <li>■ Technology where it is used needs to be extremely user-friendly</li> <li>■ Being able to enjoy a garden without having to look after it</li> <li>■ Able to have family/friends to stay</li> </ul>
<b>Support</b>	<ul style="list-style-type: none"> <li>■ Support and information when needed</li> <li>■ Health supports, when and if needed</li> <li>■ Access to transport</li> <li>■ Ability to access other supports (hairdresser, post office, library, etc.)</li> <li>■ Knowing there is someone there to call for if you need help, 24/7</li> </ul>
<b>Community</b>	<ul style="list-style-type: none"> <li>■ Camaraderie with peers and neighbours</li> <li>■ Need to be able to access the local area</li> <li>■ Access to a community area</li> <li>■ Need a sense of community</li> <li>■ Safe outdoor space</li> <li>■ Need opportunities to mix with other age groups</li> </ul>



### Consultations with Housing and Health Care Staff

The workshop, with housing and health care staff working with older people, was held in June 2016. The purpose of this workshop was to “gather the views and experiences from staff (DCC, HSE and NGOs (non-governmental organisations)) as to what they feel would enable older people to remain living in their own homes and communities for as long as possible”<sup>19</sup>.

The June 2016 workshop was attended by staff from five organisations (See Table 2.9 for details of the organisations represented). Attendance at the workshop was clearly focused on the membership of the Working Group at the time, but it does raise the question as to whether it might have been useful to open the workshop up to other organisations, particularly Approved Housing Bodies providing Housing with Support in order to learn from their experiences.

**Table 2.9:** Breakdown of attendees at the service provider workshop.

Organisation	No. Attending
DCC staff (from across the following sections: housing, welfare and community)	16
HSE (older people services, community primary care team staff, occupational therapists, etc)	14
ALONE	5
Royal Hospital Donnybrook	3
Age Friendly Ireland	4
<b>Total</b>	<b>42</b>

The workshop agenda was focused on a number of broad areas:

- Location requirements
- Physical layout requirements
- Support requirements
- Technology requirements
- Tenancy management issues

The findings of this workshop were clearly written up and a summary of these key findings is included as Appendix 7. Table 2.10 provides an overview of these key findings.

19 | Dublin City Age Friendly Programme’s Housing Working Group (2016) Housing with Supports A housing model for older people report (p7).

**Table 2.10:** What service providers identified as important housing issues.

Theme	Description
<b>Housing</b>	<ul style="list-style-type: none"> <li>■ Safety is a big concern</li> <li>■ Need to use universal design guidelines as a minimum standard</li> <li>■ Homes should be fully accessible and should be built with the capacity to upgrade or make changes as needs increase</li> <li>■ Bathroom should be of a wet room construction</li> <li>■ Living and sitting room space is essential. Where possible, the living room space should be separate to the kitchen/dining area</li> <li>■ Common areas are important; these should be within internal building communal spaces, as well as external garden/courtyard spaces</li> <li>■ There needs to be adequate internal circulation space throughout</li> <li>■ Attractive external spaces are important for aesthetics and for encouraging people to get outside and active</li> <li>■ Assistive technology was seen by most as a positive addition but need to make sure it is relevant and that people are able to use it</li> </ul>
<b>Support</b>	<ul style="list-style-type: none"> <li>■ Supports need to be consistent and clear</li> <li>■ Care needs to be taken so that people don't become dependent on the supports before they are needed</li> <li>■ Choice should always be paramount</li> <li>■ Need a mix of people with different support needs</li> </ul>
<b>Community</b>	<ul style="list-style-type: none"> <li>■ Need to be near spiritual services and social activities</li> <li>■ Need to be near community, family and friends</li> <li>■ Need to be near services that are used on a weekly basis (including shops, chemists, post office, etc.)</li> <li>■ Need to be near primary health care services etc.</li> <li>■ Should be located within easy access to main transport routes</li> </ul>

### 2.3.3 Site identification

The process of site identification was supported by an assessment of the demand for housing for older people and by a series of mapping exercises undertaken by the HSE Health Atlas Team and involving different organisations on the Working Group.

The assessment of demand included an analysis of the relevant Census data, as well as analysis of the demand for social housing among older people (using the combined Housing Waiting and Transfer Waiting Lists for over 55's). This analysis found that there were at least 2,100 individuals in need of this type of social housing for older people. The Working Group also noted that

the HaPAI (2015) survey found that 30% of older people indicated that they would be prepared to downsize if they could find suitable alternative accommodation (Age-Friendly Cities and County Survey).

Data for the mapping exercises was supplied by Dublin City Council and by the Irish Council for Social Housing. There were seven key mapping exercises undertaken by the HSE Health Atlas, which were:

1. Mapping all local authority housing for older people in Dublin City
2. Mapping all AHB housing for older people in Dublin City



3. Mapping of social housing (local authority and AHB) for older people in Dublin City
4. Mapping of social housing for older people in Dublin City against essential services, to assess how well served they are
5. Mapping of people in the city 1) aged over 65 and 2) aged over 65 with disabilities by electoral district, to identify current areas of need relative to the current provision of social housing for older people
6. Mapping of people in the city 1) aged 55- 65 and 2) aged 55- 65 with disabilities by electoral district, to identify current and emerging areas of need
7. Mapping of existing vacant DCC land against current social housing for older people/essential services/ areas with high populations of people aged 55 and over.

The desire of the Working Group and DCC to bring the project to fruition relatively quickly (as a prototype project) saw DCC volunteer to provide the site. This meant that there was clear title and it speeded up the process of site identification, with DCC using the mapping processes to identify a number of site options.

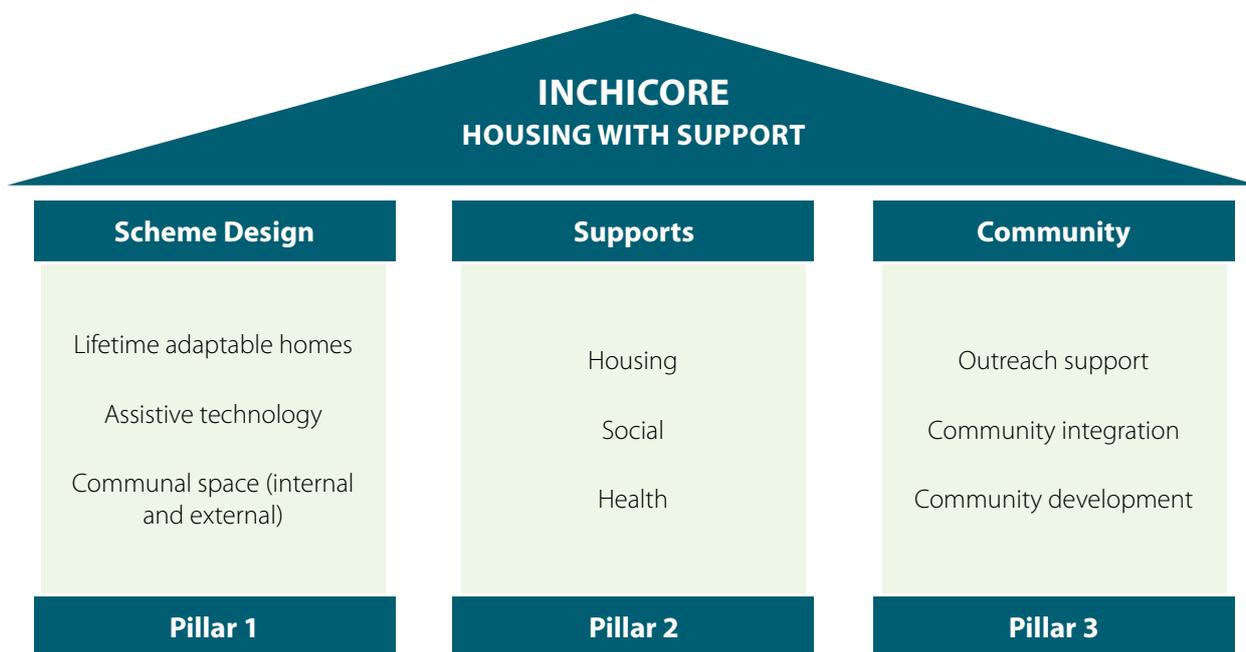
The application of the four development principles from the Age Friendly Ireland (2014) Report on *Housing for Older People - Future Perspectives* facilitated the narrowing down, selection and ratification of the 0.8-hectare 1B site in Inchicore as the prototype site. The four development principles are location, place-making, reuse of land and social and environmental appropriateness. Table 2.11 provides a further explanation of these principles.

**Table 2.11: Age Friendly Ireland development principles**

Development principle	Description
<b>Location</b>	The site should be in walkable proximity to public and other essential services, recreation and amenities so that the tenants can easily access them/use them more readily.
<b>Place-Making</b>	The design must be able to support the creation of an attractive place to live, sensitive to the local context and urban form of the area.
<b>Re-use of Land</b>	A brownfield site is more likely to be used, thus promoting the development of sustainable communities.
<b>Social and environmental appropriateness</b>	The development needs to include a mix of dwelling types and sizes, based on the demographic profile of the area.

Sources: AFI (2014) Report on Housing for Older People – Future Perspectives

**Figure 2.1:** Pillars of the Housing with Support project.



Sources: Dublin Age Friendly Housing Steering Committee (2016) 'Inchicore Housing with Support Demonstration Project – A partnership between Housing, Health and Community' Vision Document.

### 2.3.4 Development of the EOI

At some level, the development of the EOI can be seen to have begun at the October 2015 Housing Summit. The vision document produced in December 2016 was an important part of the development of the EOI, as it outlined the three pillars of the project; scheme design, supports and community. This vision document was included as an appendix in the EOI.

In order to cost the EOI, the City Architects' Division in Dublin City Council did an internal scoping study based on the emerging brief. This, in turn, was the subject of a series of ongoing discussions with the architects in the DHPLG and was modified as a result of these discussions. The challenge was to find a balance between the aspiration for a flagship project and the need to ensure it would be replicable.

The key discussions related to:

- Ensuring a balance between value for money and quality – in order to enable wider roll-out
- The size of the units. In the initial draft scoping two-bedroom units were proposed. However, with a view to replicability and maximising

flexibility, a mix of units was agreed, with 36 one-and-a-half bedroom units and 16 two-bedroom units.

- The balance of private and communal space (linked to the unit sizes)
- What was to be included in the communal spaces, with consideration given to avoiding duplication of existing facilities in the area.

The result of these discussions was that the internal scoping study was modified so that the revised study was *“more pragmatic and financially feasible.”*

The decision was ultimately made not to include this revised and amended brief within the EOI in order to see *“what ideas the AHB's might bring to the table.”* The internal scoping study was, however, clearly useful in terms of identifying what exactly was feasible and what was not, as well as developing a more realistic indicative costing for the project.

The value of the collective input into the EOI was in achieving agreement across Departments and in everyone having a more detailed understanding of the additional requirements needed for a Housing with



Support model. All members of the Steering Group were in agreement that the quality of the design could have significant influences on the well-being of the residents.

Through having to agree what was to be undertaken and capturing this clearly on paper, the group had to revise the boundaries of the project and iron out any ambiguities; this was regarded as a very useful process for those involved. The agreed EOI included a narrative about what was expected (the vision) and a high-level brief.

### 2.3.5 Existing Funding Models/Routes

There are two main routes for AHBs to access funding for social housing. These are the Capital Assistance Scheme (CAS) and Payment and Availability Agreements (with or without a Capital Advance Leasing Facility Loan (CALF)).<sup>20,21</sup>

The EOI developed for this project identified the Capital Assistance Scheme (CAS) as *'the preferred source of funding'*. CAS may provide up to 100% of the capital costs of building housing to meet the accommodation needs of older people, persons with a physical, mental health, intellectual or sensory disability, elderly returning emigrants and persons exiting temporary homeless accommodation etc'. If an AHB receives 100% of the capital costs for the project through CAS, then 100% of the tenants will be nominated by the local authority from the social housing waiting list and AHBs may charge an economic rent to these tenants.<sup>22</sup> An AHB has the option of applying for 95% of the capital costs through CAS and funding the extra 5% from other sources of financing. In this case the AHB may nominate 25% of the tenants themselves for the housing scheme.

Another possible funding option available to AHBs through the Social Housing Current Expenditure (SHCEP) is to use a Payment and Availability (P&A) agreement. This is often used in conjunction (though not necessarily) with a CALF loan.

A P&A agreement is entered into between the local authority and the AHB to provide housing to nominated local authority social housing list applicants. The local authority pays the AHB a rent over a set period of time which is initially set at 92% of market rent. In some instances, the initial payment can be set at up to 95% of market rent where this can be justified by the AHB where the property is an apartment.

100% of housing allocated through a P&A agreement is to nominated applicants from the local authority social housing waiting lists. With this agreement in place, the AHB is enabled to access private or Housing Finance Agency lending. A CALF loan may also be provided to enable AHBs to access private funding more easily. The loan, which is exclusively available to AHBs, is to assist them in accessing private or Housing Finance Agency (HFA) finance for the purchase, construction or refurbishment of units<sup>23</sup> that will then be made available for social housing purposes.

The CALF loan may be up to a maximum of 30% of the capital costs of building the housing, which will be made available through the P&A for social housing.<sup>24</sup> Repayments on the CALF loan (capital advance) are not required during the term of the P&A agreement but the amount will remain outstanding at the end of the agreement. The purpose of this, and indeed the whole facility, is that the capital advance should assist AHBs in securing finance to purchase/construct units and make projects more viable for AHBs from a liquidity or cash flow perspective, particularly in the initial years. The details of the two different funding mechanisms are outlined in more detail in Table 2.12.

20 | Payment and Availability (P&A) Agreement is the agreement entered into with the housing authority directly with the AHB to secure the units for social housing support purposes. The level of payment in the case of P&A is based on local market rent, in the same way as lease payments are made to local authorities under the general leasing terms. Under P&A a payment of 92% of market rent is made to take account of the fact that the AHB has additional responsibilities as the owner of the property.

21 | Housing Agency (2016) Guidance Note on the Capital Advance Leasing Facility (CALF) for Approved Housing Bodies and Housing Authorities.

22 | The term "economic rent" has become a widely used to reflect the statement in the Green Book "Approved Housing Bodies should fix rents at levels which are reasonable having regard to tenants' incomes and the outlay of the Approved Housing Body on the accommodation including the ongoing costs of management."

23 | In the case of financing refurbishments this can apply to housing stock transferred from local authorities to approved housing bodies. It has also been used for other AHB stock.

24 | <http://www.housing.gov.ie/housing/social-housing/funding/new-funding-model-central-increased-supply-social-homes-through-not>

**Table 2.12:** Differences between CAS and CALF

	Capital Assistance Scheme (CAS)	CALF (Payment and Availability with option of a capital advance)
<b>Description</b>	Provides up to 100% capital funding for housing, which will enable the development of housing/sheltered housing for people with specific categories of need.	P&A agreements assist AHBs to access financing from private lending institutions and/or the Housing Finance Agency for the purchase, construction or refurbishment of units, that will then be made available for social housing purposes under the Social Housing Current Expenditure Programme.
<b>Level of funding</b>	<p>Public funding of up to 100% of the approved cost of a project can be provided under the terms of the scheme in cases where:</p> <ul style="list-style-type: none"> <li>■ All prospective tenants are taken from the local authority housing waiting lists.</li> <li>■ Where the approved bodies retain 25% of tenancy nomination rights, funding of up to 95% of the approved cost of a project is available.</li> </ul>	<ul style="list-style-type: none"> <li>■ A CALF loan facility of up to 30% of capital costs may be provided (up front). The remaining 70% funding is secured from private sources (including the Housing Finance Agency).</li> <li>■ The local authority has nomination rights to all units covered by P&amp;A agreements. Tenants are selected from the local authority waiting lists exclusively.</li> <li>■ Rents set at 92% of market rental rates initially, or up to 95% of market rent in the case of apartments with service charges.</li> <li>■ CALF loans cover housing units for social housing provision only.</li> </ul>
<b>Nature of funding</b>	<ul style="list-style-type: none"> <li>■ Funding for projects is provided by way of a grant from the DHPLG to the relevant housing authority.</li> <li>■ This funding is then advanced to the AHB by way of a loan or a 25 to 30-year mortgage.</li> <li>■ This requires the AHB to enter into a legal agreement with the local authority, creating a 'mortgage charge' on the property.</li> <li>■ The loan is not repayable, provided the AHB complies with the terms of the scheme.</li> </ul>	<ul style="list-style-type: none"> <li>■ AHBs enter into an agreement with the local authority to make housing units that they own available to the local authority under a Payment and Availability (P&amp;A) agreement for a certain period of time; usually up to 30 years.</li> <li>■ With these agreements in place it is easier for AHBs to access private financing, as the payments are made over the period of the agreement subject to conditions.</li> <li>■ AHBs may apply to the DHPLG for financial support in the form of a capital equity injection to help purchase or construct properties; the CALF loan.</li> <li>■ No repayments on the capital advance are required until the end of the term of the loan.</li> </ul>



	Capital Assistance Scheme (CAS)	CALF (Payment and Availability with option of a capital advance)
<b>Communal facilities</b>	<ul style="list-style-type: none"> <li>CAS has a maximum allocation for communal facilities of €7,500 per unit. Depending on the final design, Housing with Support may require significantly more funding per unit, and the issue of where the additional funding may be found remains to be resolved. The exact amount of funding that will be required for the communal facilities, per unit, will be determined as part of Phase 2.</li> </ul>	<ul style="list-style-type: none"> <li>P&amp;A provide the AHBs with a set rental rate per housing unit. It does not provide funding for communal facilities.</li> <li>The CALF loan provides up to 30% of the capital costs for the housing being provided for social housing.</li> </ul> <p>It is possible for housing bodies to apply for grants for communal facilities administered by local authorities. These grants are administered in the same way as CAS applications made using a CF1 form.<sup>25</sup></p>

### 2.3.6 Issuing of the EOI

The EOI was issued on the 6th March 2017 to 17 AHBs<sup>26</sup> under the communications protocol (see following information box for explanation) and this was the first time the protocol was used by DCC. The closing date was set as the 30th March 2017.

A total of 38 queries were received from the AHBs which had received the EOI; the majority related to the funding of the project, including communal facilities, while there were other queries related to the accuracy of the maps. Appendix 8 contains further details on the queries received. A composite answer was compiled to all of the queries received, and circulated to all 17 AHBs. As a result of the number of queries received and the time required to compile the answers, the original turnaround time for the EOI was extended by a period of three weeks from the 30th March 2017 to the 21st April 2017.

For those completing the EOI (and indeed those assessing the completed EOI's) the structured nature of the document meant that clear distinct boundaries were placed on the amount of information required to be provided, through the application and use of word limits. The schedule provided for the response enabled the respondents to diary it out in terms of their internal deadlines for the preparation of the tender. The overall results achieved were clear and concise submission requirements and a transparent application process.

#### What is a Communications Protocol?

The purpose of the communications protocol is to provide a transparent process through which local authorities can engage with Approved Housing Bodies for the delivery of social housing. The Dublin City Council protocol was developed by a subgroup of the Dublin Social Housing Task Force consisting of representatives of the four Dublin local authorities, the ICSH and Approved Housing Bodies. AHBs interested in developing social housing in Dublin City were invited to register their interest in forming a panel of AHBs for this purpose. The four main areas of delivery are:

- Schemes involving partnering of AHBs and private developers
- Schemes on local authority/State owned sites
- Part V Schemes
- Schemes on AHB owned (or acquired) lands

Delivery areas are sub-divided according to development scale, i.e. single units; <5 units; 6-20 units; 21-35 units and 35 + units.

25 | Paragraphs 6.5 and 6.2 - Memorandum on Capital Funding Schemes for Approved Housing Bodies, 2002, Dept. of Environment and Local Government (sometimes referred to as the Green Book)

26 | These 17 AHB's were those that had registered under the Communications Development Protocol and who had expressed an interest in developing schemes ≥21 units.

### 2.3.7 Awarding of the project

Completed EOI submissions were sent to DCC Housing and Community Services. A total of seven<sup>27</sup> completed EOI's were received by the extended closing date of the 21st April 2017. An assessment panel was established to evaluate the submissions. The panel of five members included a cross section of representatives from DCC (three), the HSE and the DHPLG. The DOH was also invited to participate in this panel but was not available to attend.

The assessors worked in pairs to assess completed submissions in relation to how well each submission met the brief. The evaluative criteria used to assess the panel was as follows:<sup>28</sup>

- Design (2,000 marks)
- Supports (2,000 marks)
- Community (2,000 marks)
- Delivery (2,500 marks)
- Project proposal (1,500 marks)

The panel met as a group on the 25th April 2017 to review the completed submissions. The panel reported that the majority of applications were well put together, and that respondents had followed the structure and format of the required submission. The panel scored and ranked the applications received under the assessment criteria. The panel was looking for a proposal that addressed the unique combination of construction and support needs. The three highest ranking AHBs were invited to present their proposals to the tender assessment panel in May 2017.

The winning proposal was the joint proposal made by Circle Voluntary Housing Association and ALONE Housing. A letter of offer was issued to AHB Circle/ALONE on the 10th May 2017 and accepted on the 17th May 2017. The Circle/ALONE submission won the competition because, according to members of the assessment panel:

*'it was the submission that most effectively and comprehensively addressed the three key elements of the project (design, support and community)' and 'it involved two experienced organisations with complementary skills.'*

## 2.4 Strengths and successes of the process to date

### 2.4.1 Partnership approach

The partnership is a key strength of the process to date; it has enabled the individual members of the Working and Steering Group Committees to benefit by increasing their own knowledge of the issues associated with housing for older people. It has enabled the development of a shared understanding and inclusive language in relation to the project and overcome challenges along the way. It also ensured that all the key stakeholders were involved from the inception of the project.

The various interagency, cross-departmental committee structures (e.g. the Working Group, the Steering Group, etc.) have been very useful in terms of bringing senior staff from the key organisations and two parent Departments around the table, and providing a formal way of working together and supporting joined up collaboration. The fact that these meetings are well run and independently chaired has clearly supported this process.

These structures have also enabled the organisations represented on the Committees to bring their particular knowledge (e.g. architecture, health supports, capital funding) to the table and then work together to bring a shared knowledge. What is also clear is that all the individuals appointed to these various structures have been committed to the project. This shared commitment has led to the building of trust within the group, and enabled the group to make important decisions, while recognising that that this type of interagency development will impact on the strategic and operational plans of multiple stakeholders. The ultimate value of this type of partnership approach has, however, been to build a shared understanding of the objectives and the challenges facing the project.

New relationships and personal contacts have been formed by Committee members involved in the project, which has supported this and also other related projects. It is also the case that the project has been able to withstand and deal with the departure and subsequent replacement of key individuals and roles (e.g. the departure of the Age Friendly Regional Co-ordinator, which left a gap which was ultimately filled by DCC staff).

27 | An EOI was also issued by another local authority for another site around the same time, and this may have diluted the capacity of AHBs to respond to the EOI.

28 | Dublin City Council (2017) Call for Expressions of Interest for selection of an Approved Housing Body from the Local Authority panel to Design, Finance, Build and Operate Housing with Supports at Inchicore, Dublin 8.



## 2.4.2 Consultation phase

The consultation phase of the project, while absorbing time and energy, made good use of existing knowledge (particularly in an Irish context, with some use made of international literature) and, indeed, generated new local knowledge in terms of the mapping and identification of suitable sites and locations for Housing with Support projects.

## 2.4.3 The vision

The vision document, developed as part of the project, has provided an ambitious and forward-looking narrative for the project. It very usefully built on and used the learning arising from the consultation process. It identified the three core concepts; lifetime adaptable housing, ageing in place and autonomy of housing and supports. It also critically highlighted the key determinants of quality of life for older people as the interplay between:

- Appropriate housing design and location
- The availability of supports (housing, social and care)
- Connection to the wider community

The vision document also specified that the scheme would seek to accommodate a mix of tenants with varying support needs, including high supports (29%), medium supports (35%) and minimal supports (36%). The vision also included the identification of a site in Inchicore capable of accommodating 52 Housing with Support units.

## 2.4.4 The EOI

The issuing of the EOI for this project was the first time DCC had successfully used the communication development protocol. The application and use of a composite answer format for queries, and the placing of restrictions on the size of answers allowed by tenderers, could provide a useful prototype for future EOI's to be issued by DCC and others. The EOI required compromises to be made, which ultimately generated a pragmatic expression of interest clear objectives, be it tinged with a level of conservatism in terms of its stated preference for a specific funding model.

## 2.4.5 Profile

The project was successful in receiving early senior level support and buy-in (e.g. the then Assistant Secretary in the DHPLG with a background in health) for its development. Elected members gave approval for the site to be used for the purposes of Housing with Support for older people. Its identification as a Pathfinder Project in Rebuilding Ireland Action Plan for Housing and Homelessness has ensured its ongoing visibility and monitoring. A site was also selected that met all the selection criteria and that was in the ownership of DCC.

## 2.5 Gaps, challenges, blockages and barriers to date

### 2.5.1 Partnership approach

This evaluation has found that different expectations exist among the individuals and organisations involved in the project, specifically in relation to the cost of the project and its completion date (some have an expectation of a 2020 completion date, others have an expectation of a 2021 completion date). This is probably not surprising given the different backgrounds, skills and knowledge of the individuals involved. Some slippage has indeed already occurred in relation to the expected completion date for the project.

There are, in addition, challenges within the project in relation to the need for the project to meet both housing needs and health needs. To be successful, this project needs to integrate and balance the requirements of these Departments. This project is focusing on delivery of flexibility in relation to the allocations of units within the development to individuals with housing needs and individuals with health needs. It will also be important to have clarity regarding the roles and responsibilities to ensure the effective management of the project once it is up and running.

Further flexibility and innovation is clearly needed in relation to both the capital and revenue funding of the project in order to avoid the risk of ending up with a regular housing scheme that does not achieve the ambition of the Housing with Support vision. Key to this is the ongoing support and inputs of both the

practitioners (DCC and the HSE) and government departments, as well as an awareness of the precedent being set by this Pathfinder project.

Issues around funding the communal areas are currently under discussion, as well as the need for multi-annual funding to enable the future operation of the project.<sup>29</sup> The principle of the provision of revenue funding for the project is included in the HSE operational plans, but not the detail. Some evaluation consultees identified this a challenge for this project, which by its nature will require multi-annual funding. The view of the HSE representative on the Steering Committee was that *'it was sufficient that the project be referenced with the HSE plans as coming on stream, so that the requirement to have adequate funding available for revenue commitment in future years is documented and will remain within the estimates process which is currently an annual one'*.

This is a particular challenge for the project which will require multi-annual funding. This has created a degree of uncertainty, with clear commitments required in relation to the provision of necessary funding for the project and for any future similar model.

While the final decision in relation to the funding model to be used for the project has yet to be made, CAS was identified within the EOI as the preferred funding model. The decision to use CAS was linked, by some evaluation participants, to the need to get the project up and running as soon as possible to demonstrate proof of concept.

This difficulty with funding has the potential to create a mismatch between what is possible and the vision of the project. Other tensions and challenges that exist relate to achieving a balance between quality and cost, within the backdrop of a high inflation environment.

### **2.5.2 International consultations and a meaningful role for older people**

The consultations involved limited European and international input. The findings arising from research commissioned by the HSE in 2016 and due for publication have also been shared with the Steering Committee. It may still be useful to look at how other countries have designed, constructed and operated similar Housing with Support type developments.

Older people were consulted as part of the development of the vision for the project, but have not been involved since. In order to ensure that the needs of older people remain central to the project, it would be important for a meaningful mechanism to be found to support their involvement in the process on an ongoing basis.

### **2.5.3 Detailing and costing the technology**

According to the vision document, one of the core concepts that the Housing with Support model is based on is ageing-in-place, which in turn is linked to smart liveable design (including the use of assisted technology).

### **2.5.4 Designing landscapes and connections for older people**

The concept of the creation of an enabling environment for the individuals who will live in the project needs to be extended beyond the building to the landscaping around and between the building, as well as the connections between the building, the surrounding landscape and the surrounding community.

<sup>29</sup> | The HSE only commits resources on an annual basis but have agreed to include an endorsement of the project in their future estimates.



“ This project never really met resistance, it was like pushing an open door, it just makes sense and everyone can see that.

Evaluation Consultee

”



## CHAPTER 03

# Conclusions

### 3.1 Project evolution

The origins of the Housing with Support project can be traced back to 2013. It was influenced by both the formation of the Dublin City Age Friendly Alliance and its inclusion within the 2014-2019 Strategy of an action *to deliver a range of homes for older people as well as a number of national policies and publications.*<sup>30</sup>

### 3.2 Project implementation

The DCC Housing Summit in October 2015 was the first distinct action in the development of the housing project. This Summit successfully managed to bring together the key senior personnel responsible for housing and support (see Section 2.3.2 for details). It also provided the impetus for the establishment of the project Working Group. This group, very effectively facilitated by the Regional Age Friendly Co-ordinator and chaired by an Independent Chair, oversaw a detailed programme of mapping and engaged in a consultation process which involved visits to other housing schemes for older people, as well as workshops with older people and service providers working with older people. This group also identified the potential site for the project and ultimately captured all of the learning and the emerging vision for the project within their 2016 'Housing with Supports - A Housing Model for Older People' report.

A Steering Committee was established to progress the recommendations identified in the Working Group's report. The Steering Group has the same Chairperson as the Working Group, but was facilitated by DCC. The composition of this group was broadly the same as the Working Group, with the exception of the departure of the AHB member (ALONE). They left in order to ensure there was no conflict of interest should they ultimately decide to participate in the EOI process. This group has met monthly since its establishment and have overseen the development, issuing and awarding of the EOI process.

### 3.3 Partnership approach

Both the original inter-agency Working Group, and the subsequent Steering Committee structures have brought together a cross-section of senior staff and have been crucial in terms of promoting and facilitating a partnership approach to the development and implementation of this project. Everybody involved in these groups has brought knowledge, expertise and their own viewpoints, and these different views have shaped the vision and the EOI. The individuals involved in these groupings also report having made useful contacts as part of their engagement in the project. Importantly, both structures have been able to weather significant changes in membership, supported as they are by the constancy of the Independent Chairperson who has been involved in the project since its early stages.

### 3.4 Consultations

A lot of work went into the consultations undertaken as part of the development of the vision report. These consultations focused exclusively on the Irish experience. Interestingly, Working Group members particularly appreciated the value of the visits to other housing developments for older people. A workshop was held, both with older people and with representatives of services working with older people, to understand what was needed for a Housing with Support model. The workshop with older people was the only formal and direct engagement between the project and older people to date.

### 3.5 The EOI

The development and finalisation of the EOI involved the preparation of an internal scoping study to assist in the estimation of costs and specifications, and required the Steering Committee to review all the elements of the project again. This was useful and resulted in

30 | Dublin City Age Friendly (2014) Dublin City Age Friendly Strategy (2014-2019).



some significant changes and, indeed, readjustment of expectations in terms of what is possible and what is sufficient. Appendix 9 contains details of the schedule of accommodation developed by DCC architects as part of this process. Key documents consulted by DCC architects as part of the development of this schedule included a number produced by Housing LIN<sup>31</sup>. Resulting from this, adjustments were made to the balance of private and communal space.

The application and use of the communications development protocol ensured that the process was transparent and structured. The prescriptive structure of the EOI was also useful, in terms of placing clear boundaries in relation to the amount of information to be collected. A significant number of queries were received, of which the majority related to funding. The compilation of a composite answer to these queries took time and the deadline for the return of the completed EOI was extended by three weeks to reflect this.

### 3.6 Funding

There has been a lot of discussion since the establishment of this project about how it will be funded. This question is still to be resolved. In relation to capital funding, the EOI specified that CAS was the 'preferred' source of funding.

CAS provides for up to 100% capital funding of housing units. If an AHB applies for 100% CAS funding for the housing, all tenants will be nominated by the local authority from the social housing waiting list. With 95% funding, the AHB has the option of nominating 25% of the tenants. CAS limits the amount of funding available for communal facilities.

It is also the case that the specification and design for housing for Housing with Support units, by their nature, are larger than standard units.

Another possible source of funding is via a Payment and Availability Agreement (P&A) signed with local authorities, with or without a CALF loan. With a CALF loan of up to 30% of the capital costs and a commitment for long-term support under the P&A, AHBs can leverage the balance funding through private finance arrangements, including with the HFA. The P&A provides the AHB with up to 92% (or up to 95% in the case of apartments with service charges) of market

rent per housing unit (as opposed to an economic rent under the CAS Scheme)

The nature of Housing with Support means that funding will also be required for the provision of on-site support on a 24-hour basis. The principle of the provision of revenue funding for the project has been included in the HSE operational plans. The key questions in relation to this funding which remain open are as follows:

- How much funding will be required for support purposes annually?
- How will the multiannual funding required to operate the project be provided?

### 3.7 Allocations

The choice of which funding scheme is used to support the project will have an influence on allocations. The commitment to enable the HSE to nominate up to 25% residents based on their health needs provides a particular funding challenge. As part of this process it has been agreed that the Allocations Committee will include the HSE as a member.

### 3.8 Timings and expectations

It has taken 17 months to complete Phase 1 of the project. This is to gain capital appraisal approval and to appoint the successful AHB partnership, which was completed in May 2017. This timeframe is probably not unreasonable, given that the interagency approach to this project, is breaking new ground and that a lot of time and energy went into the development of the vision for the project.

### 3.9 Profile

The identification of this project as a Pathfinder Project within the Rebuilding Ireland Action Plan for Housing and Homelessness has ensured that the project has had both political and policy support and scrutiny throughout its development. Housing with Support is recognised under 2.18 and 2.19 of the Rebuilding Ireland Action Plan for Housing and Homelessness.

31 | Housing LIN (2015) Cost Model: Extra Care Housing (2015) [https://www.housinglin.org.uk/\\_assets/Resources/Housing/Support\\_materials/Reports/CostModel\\_ECH\\_April15.pdf](https://www.housinglin.org.uk/_assets/Resources/Housing/Support_materials/Reports/CostModel_ECH_April15.pdf) and

Housing LIN Funding Extra Care Housing TECHNICAL BRIEF [https://www.housinglin.org.uk/\\_assets/Resources/Housing/Support\\_materials/Technical\\_briefs/Technical\\_Brief\\_02\\_FundingECH.pdf](https://www.housinglin.org.uk/_assets/Resources/Housing/Support_materials/Technical_briefs/Technical_Brief_02_FundingECH.pdf)



“

**This model of housing has the potential to make it attractive for older people to downsize, if the quality is high enough and the location good enough.**

Evaluation Consultee

”



# Recommendations

The recommendations have been grouped under three distinct headings, which are recommendations for:

- Future development of this project
- Policy
- Wider national roll-out

## 4.1 Future development of this project

### 4.1.1 Funding

To date, the main project funding discussions have been focused on capital funding. The question of who and how the support part of the project will be funded throughout its lifespan remains unresolved. The possibility of a mixture of cross-departmental funding needs to be further explored, particularly in relation to the funding of the communal facilities.

**Rec 1:** The agreement reached for cross-departmental funding for this project should be formalised by the two departments going forward.

**Rec 2:** Identify the extent and detailed nature of the multi-annual revenue funding (including a staffing plan) that will be required for the project and, ideally, engineer a new and dedicated revenue line to ensure the ongoing financing of the project and the wider model. This will require a joint approach from the DOH and the HSE.

### 4.1.2 Sustaining a socially mixed community

A balanced community could include a socio-economic mix if the funding scheme used facilitates mixed tenure.

**Rec 3:** Explore the options in relation to the possibility of a mix of social and private tenants within the development (e.g. via the financial contribution scheme).

### 4.1.3 Involvement of older people

Phase 1 benefited from the input generated by a snapshot of the views of older people as well as

informal communications between the members of the Working Group and the residents in the housing developments they visited.

**Rec 4:** There is a need to involve older people in Phase 2 (for example, the Local Area Age Friendly Alliance could be asked to nominate a representative to liaise and engage on an ongoing basis with the successful AHB).

### 4.1.4 Learning from other jurisdictions

The Housing with Support model, while relatively new in an Irish context, has been operational in other jurisdictions for quite some time.

**Rec 5:** The Steering Committee needs to continue the learning process by researching and engaging with similar types of housing projects in other countries to learn about what works.

### 4.1.5 Timing

There has been some slippage in relation to projected completion date for the build part of the project.

**Rec 6:** There is a need to revisit and clarify the projected completion date for the build part of the project. There have been some delays due to the innovative nature of the project and the completion date may be affected which is an issue as building costs continue to rise.

### 4.1.6 Future evaluation

An evaluation framework was developed by the Phase 1 evaluator in association with the project Steering Committee. This is included as Appendix 11. It was designed for the purposes of supporting and enabling the ongoing monitoring and evaluation of Phase 2 and 3 of the Housing with Support project in Inchicore.

**Rec 7:** The evaluative framework developed as part of the Phase 1 evaluation be used for the evaluation of Phases 2 and 3 of the project.

## 4.2 Recommendations for policy

### 4.2.1 Recognition of the Housing with Support model

The Housing with Support model is a relatively recent development in an Irish context and, while it has been identified as a Pathfinder Project in Rebuilding Ireland Action Plan for Housing and Homelessness, it has not yet been formally recognised by the State as a housing model. Carefully developed, it has the potential to transform existing models of Housing for Older People.

**Rec 8:** Share the learning, to date, from Phase 1 of the DCC Housing with Supports Pathfinder Project with the DHPLG in the context of the proposed policy statement on Housing for Older People (Actions 2.18 and 5.9 respectively in Rebuilding Ireland Action Plan for Housing and Homelessness).

### 4.2.2 Financial support scheme to fund Housing with Support

There is a need to consider the establishment of a new financial funding scheme to support people to live in the Housing with Support model. Similar to the 'Fair Deal' scheme, individuals support needs and financial situation could be assessed to consider the level of contribution that could be made.

There is a need to consider whether a type of scheme similar to the 'Fair Deal' scheme but in the home, could be created for use with a Housing with Support model, as this could ease some of the funding pressures.

**Rec 9:** There is a need to make the case for the creation of a new financial support scheme (funding follows the individual) to enable individuals to live within a Housing with Support model.

## 4.3 Recommendations for wider roll-out

Any consideration of the wider replicability and roll-out of the model is contingent on there being clarity in relation to how the model can be funded, from both a capital perspective and an ongoing revenue stream perspective.

**Rec 10:** Consider the development and use of a cross-departmental capital funding model and/or the creation of a new dedicated capital funding stream designed to facilitate and promote the development of additional Housing with Support projects.

**Rec 11:** Wider roll-out requires a clear budget heading for funding the annual operation of these types of project.

**Rec 12:** As this project develops, wider roll-out will be supported by the development of a clear business case for the model.

The recommendations have been compiled in Table 3.1.

**Table 4.1:** Summary of evaluation recommendations.

	Recommendations for future development of the project
Funding	<p><b>Rec 1:</b> The agreement reached for cross-departmental funding for this project should be formalised by the two departments going forward.</p> <p><b>Rec 2:</b> Identify the extent and detailed nature of the multi-annual revenue funding (including a staffing plan) that will be required for the project, and ideally engineer a new and dedicated revenue line to ensure the ongoing financing of the project and the wider model. This will require a joint approach from the Departments of Housing and Health and the HSE</p>
Sustaining a socially mixed community	<p><b>Rec 3:</b> Explore the options in relation to the possibility of a mix of social and private tenants (e.g. via the financial contribution scheme).</p>



Recommendations for future development of the project	
<b>The involvement of older people</b>	<b>Rec 4:</b> There is a need to involve older people in Phase 2 (for example, the Local Area Age Friendly Alliance could be asked to nominate a representative to liaise and engage on an ongoing basis with the successful AHB).
<b>Learning from other jurisdictions</b>	<b>Rec 5:</b> The Steering Committee needs to continue the learning process by researching and engaging with similar types of housing projects in other countries to learn about what works.
<b>Timing</b>	<b>Rec 6:</b> There is a need to revisit and clarify the projected completion date for the build part of the project. There have been some delays due to the innovative nature of the project and the completion date may be affected which is an issue as building costs continue to rise.
<b>Future evaluation</b>	<b>Rec 7:</b> The evaluative framework developed as part of the Phase 1 evaluation be used for the evaluation of Phase 2 and 3 of the project.
Recommendations for policy	
<b>Recognition of the Housing with Support model</b>	<b>Rec 8:</b> Share the learning to date from Phase 1 of the DCC Housing with Support Pathfinder Project with the DHPLG in the context of the proposed policy statement on Housing for Older People (Actions 2.18 and 5.9 respectively in Rebuilding Ireland Action Plan for Housing and Homelessness).
<b>A financial support scheme</b>	<b>Rec 9:</b> There is a need to make the case for the creation of a new financial support scheme (funding follows the individual) to enable individuals to live within a Housing with Support model.
Recommendations for wider roll-out	
<b>Recommendations for wider roll-out</b>	<p><b>Rec 10:</b> Consider the development and use of a cross-departmental capital funding model and/or the creation of a new dedicated capital funding stream designed to facilitate and promote the development of additional Housing with Support projects</p> <p><b>Rec 11:</b> Wider roll-out requires a clear budget heading for funding the annual operation of these types of project</p> <p><b>Rec 12:</b> As this project develops, wider roll-out will be supported by the development of a clear business case for the model</p>

# Appendices

## APPENDIX 1 INTERVIEWS CONDUCTED

Name	Organisation	Date of interview	Involvement
Maurice O'Connell	Independent	20th July	Maurice O'Connell
Karen Murphy	Irish Council for Social Housing	25th July	Karen Murphy
Caren Gallagher		3rd August	Caren Gallagher
Ann O'Donovan	DCC Executive	1st August	Ann O'Donovan
Céline Reilly		1st August	Céline Reilly
Derek Rafferty		2nd August	Derek Rafferty
Owen O'Doherty		3rd August	Owen O'Doherty
Críona Ní Dhálaigh	DCC elected representative	8th August	Críona Ní Dhálaigh
Barry Quinlan	Dept. of Housing	4th August	Barry Quinlan
Emer Connolly		8th August	Emer Connolly
Patricia Lee		8th August	Patricia Lee
Paul Altman		9th August	Paul Altman
Joan MacMahon		11th August	Joan MacMahon
Pat Doherty	ALONE	16th August 29th August	Pat Doherty
Kevin White		29th August 5th September	Kevin White
Anne Kearney CHO 7	HSE	18th August	Anne Kearney CHO 7
Samantha Rayner		5th September	Samantha Rayner
Justin O'Brien	Circle Housing	6th September	Justin O'Brien



## APPENDIX 2

### DUBLIN AGE FRIENDLY HOUSING WORKING GROUP

#### Membership

(August 2016)

Organisation	Member Name
DCC (2)	Niall Mooney, Age Friendly Programme Office/Social Inclusion.
	Céline Reilly, Housing and Community.
Dept. of Health (1)	Barry Murphy
Dept. of Environment, Community and Local Government <sup>32</sup> (1)	Barry Quinlan, Housing policy
HSE (3)	Anne Kearney CHO 7
	Mary Walsh CHO 9
	Samantha Rayner Social Care
Irish Council for Social Housing (1)	Caren Gallagher
Age Friendly Ireland (2)	Pat Doherty
	Oonagh Ryan (OPRAH)
ALONE (1)	Sean Moynihan
Independent Chair	Maurice O'Connell

<sup>32</sup> | Following the formation of a new government in May 2016, this Department was renamed the Department of Housing, Planning, Community and Local Government with effect from the 23rd July 2016. The Department of Environment, Community and Local Government was subsequently renamed again as the Department of Housing, Planning and Local Government on the 1st August 2017.

## APPENDIX 3

### DUBLIN AGE FRIENDLY HOUSING STEERING COMMITTEE

#### Membership

(June 2017)

Organisation	Name	Member of the earlier Working Group
DCC (4)	Ann O'Donovan, Housing and Community	
	Bernie Doherty, Housing and Community	
	Céline Reilly, Housing and Community	✓
	Owen O'Doherty, City Architects	
Department of Health (2)	Niall Redmond	
	Patricia Lee	
Department of Housing (5)	Derek Rafferty (previously Barry Quinlan) Housing policy	
	Emer Connolly, Capital	
	Joan MacMahon, Architect Advisor	
	Paul Altman, Senior Advisor, Architecture and Urbanism	
	Patricia Curran, Housing Policy	
HSE (3)	Anne Kearney, CHO 7	✓
	Brena Dempsey	
	Samantha Rayner, Social Care	✓
Irish Council for Social Housing (1)	Karen Murphy (previously Caren Gallagher)	
Independent Chair	Maurice O'Connell	✓



## APPENDIX 4

### COPY OF THE INVITATION LETTER FOR THE HOUSING SUMMIT

[Insert address]

[Insert Name]

[Address line 1]

#### **Re: Dublin City Older People's Housing Summit**

#### **Call to action - developing a demonstrator model of 'Housing with Care' for Dublin's Older Citizens**

Dear [insert name]

I am writing to invite you to a 'Summit' to be held on the 7th October 2015. At this gathering, we will gather a small group of senior people from key organisations and sectors within Dublin City to further the development of a prototype housing scheme - 'housing with care', that will meet the needs of our aging population.

Planning for the changing demographics within our city is essential. Now is the time to look at how we develop appropriate housing options for older people that incorporate:

- **Housing design** – *that is attractive, suitable and affordable*
- **Location** – *that is appropriately based, i.e. located in places that are near services required more as we age (post office, shops, health care services etc.)*
- **Community support** – *to ensure that residents of the scheme are given the opportunity to be involved in meaningful activities, and that the scheme is an integral part of the life of the local community*
- **Care supports** – *allocated to the scheme allowing for the changing needs as people age, and that the appropriate care supports are in place to assist people to remain at home for as long as they want*

Each person invited to this summit has a critical role to play in ensuring that such a development is successful and appropriate. From your experience, and from consultation with older people carried out through the Age Friendly Programmes here in Dublin and nationally, as well as international research and evidence, we aim to develop a scheme that will be a front runner prototype that can be used in Dublin and elsewhere in Ireland. This prototype should provide value for money, as well as an alternative to what some older people feel are their only options - nursing homes or their current situations which, for many, are not ideal.

I look forward to seeing you at the gathering, so please can you let Pat Doherty (Age Friendly Ireland) know of your availability to attend the summit at [pat@agefriendlyireland.ie](mailto:pat@agefriendlyireland.ie). If you cannot attend yourself, can you let us know who will represent your organisation and what position they hold within your organisation.

Yours sincerely

Mr Brendan Kenny

Assistant CE Dublin City Council & Chair of Age Friendly Ireland

## APPENDIX 5

### BRIEFING DOCUMENT FOR THE HOUSING SEMINAR

#### INNOVATIVE 'HOUSING WITH CARE' FOR OLDER PEOPLE BRIEFING DOCUMENT FOR DUBLIN SUMMIT (7th OCTOBER 2015)

##### PURPOSE

This meeting will bring together key senior staff across Dublin City responsible for housing and care of older people with the single aim of agreeing an outline of what a prototype for an innovative housing scheme for older people should include, from the physical to the care and community supports. From this meeting, it is hoped a road map will be agreed that will result in the commissioning of a demonstrator scheme in Dublin based on the concept of 'Housing with Care' and 'Extra Care Housing'. This collaborative event will provide a platform to build a housing prototype model that will serve the needs and give choice for older people, it will establish an integrated approach to care in the community and housing, and give an alternative to long term care, where appropriate.

This scheme will be influenced by work carried out by Age Friendly Ireland (AFI and the Age Friendly Cities and Counties Programme - Review of the Great North Haven), CEUD (Universal guidelines for housing design in Ireland) and also planned work underway through ISAX, regarding 'best practice' in the development of a housing-for-life model for older people as an alternative to nursing home care. Building on a number of reviews, as well as looking at existing models within Dublin City and nationally, the meeting will examine and agree on the following broad principles;

- **Site identification** – Identify sites suitable for a 'housing with care' development within the city boundary that meet the needs of older people and ensure the housing design and supports meet peoples evolving social, care and physical needs.
- **Person centred design** – Agree on the process to identify the design requirements of the housing development. This will include a consultation with older people, through Dublin City's Older Peoples Councils as well as specialist agencies.
- **Support Models** – Identifying the range of appropriate care and supports that need to form part of the development.
- **Assisted Technology:** The role of assisted technology in the development and ongoing support of residents that will be included in the development
- **Access and Tenure:** Identify how the development can be developed and made attractive, for both social housing and to older people seeking to downsize from their 'owned homes'.
- **Funding** – Developing an effective funding mechanism for the capital and ongoing revenue costs of the development. This will include exploring the potential that Public Private Partnership (PPP) can play in such development and examining schemes, such as the 'Financial Contribution Scheme' as models to utilise.
- **Social and care partnership** – Identify the key partners (public, private and voluntary and community based).

The meeting is a call to action, with the end result being the establishment of a multi-stakeholder Working Group, led by DCC Housing, tasked to develop an action plan for preparing a development brief that will be put out as an expression of interest for housing developers and providers to tender for development, in early 2016.



## APPENDIX 6

### KEY FINDINGS ARISING FROM THE WORKSHOP WITH OLDER PEOPLE

#### What three to four things would help you remain in your own home community for longer?

- Access to a second bedroom or a shared unit on the complex for overnights, if sick.
- Lifts where accommodation is on multiple floors
- Larger living spaces to allow for a wheelchair
- Storage space to allow for wheelchair/frames etc.
- Accommodation that is adaptable to meet our needs and that is adapted in a timely fashion
- Good connectivity – broadband, phone lines and internet
- Access to good transport links (bus or rail) near accommodation
- Closer to shops (a good choice of shops), post office, banks, GPs
- Access to assistance with housework when I cannot manage it anymore
- Support and information when needed. Assistance in filling out forms, especially from utility providers
- Access to maintenance and odd jobs around the house and garden
- Camaraderie with peers and neighbours
- Health supports, when and if needed

#### What's good about where you live that helps you stay independent – what's important to you?

Location was an important factor for older participants. In one of the schemes that people were from, they had everything required within a short walking distance. Others had to walk long distances to services, as well as encounter steps to get into services.

People felt it should be near the following:

- Shops - getting out to the shops and meeting people is very important to them
- Post office
- Church is vital for them and where they live now.
- Transport options
- Community and family were also indicated as most important

#### Community integration

Being integrated with the wider community is important. Not having homes in gated communities or away from shops and the community.

#### Home

Participants felt that, internally, their homes should be of level access, larger rooms, with plenty of storage, floor boards and tiles in kitchen and bathroom, no open fires or storage heaters. For some people, their current accommodation was not ideal as they were living in bedsits with very little space.

They felt the following should be considered;

- Housing on ground floor or have access to a lift if on multiple floors
- A kitchen with a view – not facing other apartments
- Furnished/unfurnished - should have the choice

- Kitchen with space for dining, oven at a higher height. Also need space in kitchen to sit down to monitor cooking. In some cases, kitchens are purely a workspace which can present a fire hazard if they are forced to sit in a separate room while waiting for cooking to complete
- Positioning of kitchen closer to front door than the living space could trap residents in the housing unit if a kitchen fire occurred, as some units do not have back door exits
- Living room separate to kitchen / dining room, that is large enough for pull down bed to accommodate family or carers if living in a one-bedroom unit
- Bathroom should be of a wet-room construction
- Private outdoor space that is of low maintenance.

### Communal facilities

- Access to a community area and activity rooms for services – PHN, chiropody, hairdresser, activities, meals, reading/quiet room

### Sense of community

- One person talked about creating a community feeling, and gave an example of where one of his neighbours had died and he only found out 2 weeks later. He would have liked to have paid his respects to the man.

### Safety and security

Participants felt that safety and security were very important in the design and location of a scheme. All participants think that feeling safe allows them to live better lives. Consideration should be given to the following:

- Good neighbours and family supports
- Good relationships with support staff – one person in a wheelchair talked about his home help who goes far beyond her role in helping out and involves her family; if this was not the case his life would be a lot more difficult and lonely
- Knowing there is someone there to call if you need help - an on-site presence
- Security CCTV is important
- Gates
- Security chain and latches for windows and doors, spy hole/intercom
- Having an alarm

### Technology

- Technology needs to be extremely user-friendly and training must be provided, as some of the group were unfamiliar with technology and were sceptical about its ability to assist.

### External environment

All participants recognised the value of external spaces and that, when well-designed, they could enable activities, meeting other people, and improved the overall aesthetics of the place, giving a sense of pride to there they live;

- Having a garden was seen as being positive. It is, however, difficult to maintain a garden. One participant got rid of the grass, as it's easier. Looking at something outside, i.e. flowers, is nice
- All agreed that having an outdoor space was good for a person and their health. Gardens with raised beds and seating dispersed throughout, so they can garden themselves and rest outdoors
- Issues around footpaths (a lot of them are broken and dangerous) and dog faeces were frequently raised



- There were mixed views around the scheme being gated or not, the wish to reduce the instances of anti-social behaviour happening on site
- External painting should be every 5 years, not 7 as per DCC policy
- Maintenance and odd jobs service available.

### Age mix within the housing scheme

Mixing with other age groups is important. We all enjoy spending time with younger people. In one centre, there is a crèche onsite. However, care needs to be given when allocating people to schemes so that there is not a huge over-concentration of complex needs in any one scheme and that staff have the required support skills to support complex needs.

It was raised by some that a wide mix of ages can lead to challenges, as the needs and requirements of a 55-year-old are very different to those of an 85-year-old. It needs to recognise that the service is not one where 'one size fits all'.

The age of older people ranges from 55 up to 104 years old. Older people are very diverse

### What supports/extra supports would help you as you get older?

All participants agreed that 'supports' are essential for them, and saw this as being more and more important as they age. They felt that greater community involvement is very important; this should be supported and facilitated. Participants did not want things done for them but agreed that they should be made available when and if needed.

The participants described services they use as:

- Day Centres
- Doctor and Public Health Nurse
- Meals on Wheels
- Family supports
- Local Centre for Independent Living
- Local services and organisations.

### Information

The participants raised concerns about how to get information about services, feeling that, in general, such information is not readily available: 'you have to ask a lot to find out about what you can get'. Older people find out about services they use from their local church, hospitals and friends. Some people felt that community supports have decreased over the years, some facilities being utilised and others not.

### Day centres

The majority of the participants attend a day centre and they all love going to them. They really enjoy the interaction, the friends they meet there and, in general, they are good fun. It's a huge support to them, and the staff are very helpful and knowledgeable. They exercise there and get a lovely hot meal for only €5. Some felt that some older people may be too proud to look for and use Day Centres.

### Health care supports

Older people felt that access to good health supports is important:

- Extra care support when needed
- Home helps
- Doctors
- Other health care professionals (OT, PH PHN etc.)

Some of the people had little concern for current or future care support needs. None of the group envisioned a time when they might require medium level 'medical care' supports. Participants were critical of the HSE's focus on medical efficiency and bureaucracy and the lack of 'compassion' on the part of medical services.

### **Weekend shortfall in service provision**

A lot of the participants highlighted that a number of services (e.g. Meals on Wheels) are only available Monday – Friday. What happens to people over their weekends? These services should be available 24/7.

### **Family supports**

Some older people said that their family supports were very important but for others, where there was no family, this was not the case and they had limited support outside of formal support.

Older people felt the following design supports should be included in a scheme;

- Call system (24/7 response)
- Regular check in calls
- Someone available who can signpost them to services
- Onsite at set periods to assist in signposting
- Access to maintenance for small jobs; a person on site would be helpful to assist with bins, gardens etc.
- Meals on Wheels
- A range of activities in the complex
- Linking into other services / activities in the area
- Linking into relevant professionals in the area (PHN / OT / PT)
- Assist in accessing HCP / MH
- Ensure accessing of entitlements and benefits
- Assist in financials
- Home Help cleaning services (option rather than mandatory)
- Near local bus or access to community bus
- Assistance with shopping
- Laundry – option of assistance given with laundry, whether in individual homes or in a communal area
- Access to independent home care packages, if required for tenants
- Help with getting up and into bed, with washing, and other things they find harder as they age
- Assisted technology, only if needed

### **Biggest concerns about how suitable your home is at the moment in relation to meeting your needs as you get older?**

Many of the participants biggest concerns lay in how suitable their homes were if their health and mobility decreased. As is the case with most older people in Ireland, they want to remain living in their homes and their communities. They acknowledged that their ability will decline, and they want accommodation and supports in place to counter this. Some of the comments and suggestions were:

- Accessibility within their homes - No access to a lift, only stairs, and this will become more of an issue as we age. If stairs / steps are present, can a ramp be installed?
- Accessibility in local environment – a good age-friendly public realm is essential, allowing for people to get out and about – pathing, routes to shops etc.
- Currently too far away from services if mobility deteriorates
- Hard to get assistance to help with domestic work
- Limited space for wheelchair/frame



- No room to have someone stay over if I am sick
- Being able to open windows
- Having enough storage downstairs
- Having a ramp installed to front door
- Security – low walls, need external lights
- A lot of the participants use a mobile phone, with no interest in the internet
- Cost of heating and cost of living – e.g. the cost of broadband and internet is prohibitive
- Maintenance and cost of repairs – many older people felt that they were ripped off by builders and maintenance people
- Isolation and loneliness, even when being in a community setting – need supports in scheme and community to feel part of it.
- Adaptability of homes going into the future as needs increase
- Staff awareness of disability awareness needs is important
- Antisocial behaviour – drug dealing, fear of strangers
- Dampness and darkness are issues in some existing older people's accommodation

## APPENDIX 7

### KEY FINDINGS ARISING FROM THE WORKSHOP WITH STAFF

#### Location requirements

It was agreed on the following as prerequisites with regards 'location', for a successful Housing with Support model of housing that will promote independence and the chances of older people remaining to live independently in their communities as long as possible. Location of housing schemes needs to be near the following:

- Services that are used on a weekly basis - staff defined them as;
  - Retail outlets - Shops, Chemists,
  - Essential services – Post Office
  - Primary health services – GPs, PHC Centres, PCT
  - Social – Pub,
  - Spiritual, - Churches
- Community, family and friends
- Transport routes: schemes should be located with easy access to main transport routes that enable older people to get out and about, in particular
  - Get to hospitals / health clinics for appointments.
  - Getting into main urban town centres
- Other
  - Churches and other religious centres
  - Pubs and other community and social centres

It was further felt that housing schemes should not be located near or under the following circumstances

- Near schools
- On top of steep hills
- On busy roads

Safety was a big concern raised by people though there were mixed views on whether the schemes should be gated or not gated.

#### Physical layout requirements – internally

##### Housing units (homes):

It was felt the universal design guidelines were very good and should be used as a minimum standard. Homes should be fully accessible and should be built with the capacity to upgrade or make changes as needs of older person increase.

- Ground floor if possible but where two or more floors are used then lifts (the number of lifts used should be considered in terms of density of build) that can accommodate for stretchers is essential.
- Doors throughout should not be too heavy and have handles that are easy to use and push button controls available for wheelchair users.
- Windows should also be easy to open and close with easy access to handles.
- Corridors should be wide enough to allow for wheelchair and movement of large furniture.
- Kitchens should be easy to access and wheelchair friendly and non-slip flooring. They should include the following;
  - height adjustable counters with plenty of counter space



- easy open presses / drawers (not too deep)
- washing machine and dryer
- Plenty of storage
- Dining area – this can be incorporated into the kitchen area but should be separate from sitting room / living room.
  - Dining chairs easy to push under table
  - Room for wheelchair access around table and under table.
  - Bedrooms should be of a good size that are adequate to accommodate a double bed or two single ones (one being a bariatric bed) and still have adequate room for wheelchair manoeuvring. Rooms should also accommodate the following;
- Non-slip flooring
- Easy access to switches, sockets and TV point
- En-suite or have the bathroom near.
- Ceilings should be strong enough to facilitate hoist tracking being installed when and if needed in future. Some of the groups felt that there is a need for 2 bedrooms or at least a sitting room with a space for a good fold down bed for carers (formal and informal) who may need to stay overnight as care needs increase in a one-bedroom home.
- Bathroom should be of a wet room construction. The construction should allow for the facility for grab rails (fluted design) to be installed at a later date where not required initially. In addition;
  - Flooring should be tiled not lino
  - Space for shower seat
  - Shower thermostat
- Living and sitting room space is essential. Where possible the living rooms space should be separate to the kitchen dining area, especially in one-bedroom homes. This rooms should allow for space to:
  - A space for people to be able to bring some of their own personal belongings.
  - Higher level seating
  - Space for wheelchair and other seating
- A space for scooters with docking station for charging. This can either be internal or external (if the latter a covered area - see below under external areas section) but if within homes then this could be incorporated within a wide hallway.
- Key safes should be installed outside doors to homes, for carers and family to get access in case of emergency or for staff to get access.
- Storage is very important – particularly if occupants are moving from bigger houses.
- Energy efficiency measures should be incorporated into the design to allow for cheaper bills - solar panels and easy to use control panels. The use of a 'one switch' as you exit the accommodation was also suggested though this should exclude appliances such as fridges and freezers
- Universal design – electrics and heating - sockets, lighting, door saddles and underfloor heating should be included in buildings. Communal heating works better, some people under-heat their homes unless the heating is communal.
- Decoration, facilities should be put in place that allows for homes to be regularly redecorated. A pay-in scheme where people can contribute over a number of years towards decoration.

## Physical layout requirements – externally

Common areas were identified as important. These should be within internal building communal spaces as well as external garden / courtyard spaces. The layout of the housing should be cognisant of light and it was suggested that the scheme be designed in a semi-circle so you can see each other's doors.

- Internal circulation spaces should include the following;
  - Wide corridors
  - Handrails
  - No or minimal steps
  - Community spaces / services should be built into the design to accommodate the following;
- Community room – meals activities, exercises, community groups
- Library (tenants leave books)
- Space for people to get together and socialise, chat (this is critical to address isolation and loneliness.
- Training space – computers and other technology, arts and crafts and lifelong learning education.
- Kitchenette area – independent use for tea/coffee
- Nurse / GP consultation room that also accommodates visits from other healthcare professionals such as Chiropodist, etc.
- Hairdresser
- External spaces were seen as being important for aesthetics and for encouraging people to get outside and active. Tenants should have scope, and be encouraged, to be involved in the management and development of the external areas. The following should be considered in the design;
  - Raised bed for garden (flowers and veg)
  - Seating areas / adapted raised seating and at regular intervals
  - Low maintenance private outdoor spaces
  - No trees (leaves can cause falls and slips) and the wrong trees' roots also can in long term cause surface areas to lift / buckle.
  - Each home if possible should have a private garden space. Tenants should have individual choice as to whether private outdoor spaces should have grass or not
- Parking spaces to allow for people who still drive as well for family visiting and for services coming in to assist in everyday living
- Campus type facilities – highlighted as a good example. Where people can live on site and progress if an illness takes hold e.g. dementia. Other participants expressed concerns about optics of this and of the residents been cut off from society and community
- The question of gated schemes was raised and there were seen to be as many minuses to pluses in their use
- If docking space not possible within homes then space such as lock ups down stairs where motorised scooters could be parked and charged to save space up stairs

It was also advised that when the scheme is being developed the access to services in the surrounding areas should be assessed and recommendations made as to improvements to assist older people when out and about in the public realm. A number of tools and guidance have been developed by Age Friendly Ireland and NDA (Walkability Audits) and 'Being Friendly in the Public Realm'. This will address items such as dips in the paths for wheelchairs, traffic lights should be put in etc.



## Support requirements

Social and care supports were felt as being essential in a new model of housing by staff from all agencies. It was stressed that these supports need to be consistent and clear. Many shared the opinion that the development of a model that would bring together housing and social and care funding would be very beneficial for all. A new housing model where supports were coordinated and provided onsite would address many issues such as Reduced home care packages in the community,

- Reduced scope in what supports can be provided,
- Time allocation been driven by rostering challenges of supporting people living in diverse settings.
- Lack of continuity of care provision – people receiving support from multiple carers and providers,
- Challenges in recruiting carers

The ethos of the scheme needs to be one where we are encouraging people to get out and about and to keep involved in their community and involved in local services. Care needs to be taken that people don't become dependent on the supports before they are needed. Choice should always be paramount.

Supports should incorporate the following;

- All tenants should be given a tenancy that lays out what services they get within rental charge and what additional services are available to add onto support package if their needs increase – individual choice is essential here.
- Regular check in calls - this could either be onsite at regular times or 24/7 preferable
- There was a strong feeling that a 24/7 presence was desirable as this would cater for 24/7 emergencies – falls, sudden health deterioration etc.
- Signposting people to mainstream and other services both in the scheme and within the wider community / area – e.g. health (PCT, PHCC, OT, PT) social (day care, active retirement groups etc.). Accessibility of information or lack of it is often an issue, particularly for people who may not have used the public system/ Council/Health before. A signposting service would address this
- Care supports normally delivered by Home care packages should be part of support levels, however additional supports from Enhanced HC Packages should be available where care needs are higher than the scheme can cater for with in-house team.
- Supports need to be flexible – being delivered when older people want and need them rather than being dictated by HH rostering
- Support in cleaning and maintaining homes though this was felt should be optional rather than mandatory – people could buy in support as part of support levels offered
- Visits from GP and other health care professionals to be incorporated especially for those tenants who have reduced mobility.
- Close links with hospitals, in cases where tenants are hospitalised, to ensure that when being discharged that scheme is informed of discharge plan.
- Need to encourage and facilitate family involvement – be careful that family take on responsibility for supports and don't see it as the sole responsibility of the service provider. 'out of sight out of mind'
- Access to maintenance services for small jobs as physical ability declines
- Meals on wheels or an in-house catering facility – café, restaurant etc. If part of the service provided then design and delivery should be one where it is not seen as a negative, feeding into stigma associated with receiving meals and stereotypes with old age

- There were mixed views on the provision of communal Laundry rooms. For some it was a good idea but felt that a policy is needed around use of the laundry room, to avoid abuse, Pay a token amount like the prescription. Others felt that older people should have the facilities themselves in homes and supported to do so if and when frailty increases.
- Option of communal eating or collect meal and bring it back to the apartment.
- Activities in complex
- Support in accessing and getting entitlements and benefits
- Financial advice
- Assistance with shopping
- Laundry – option of assistance given with laundry whether in individual homes or in a communal area.
- A quiet space to meet their spiritual needs, especially if they develop or have mobility needs
- Community awareness raising – the scheme should work with local services and business to be responsive to the needs of older people living there and in the wider community.
- Establish links with local pharmacy in order to delivery medication.

Tenant mix - Homelessness is a massive issue – the participants have been told to prioritise people with severe addictions. This is having a detrimental effect of housing schemes where a large number of older people with complex support needs are being housed in older people’s schemes leading to other tenants having fears about safety and anti-social behaviours. Schemes need to be able to support people with complex needs but a good mix is essential – should not be a dumping ground. Also, allocation needs to be mindful of the need for a cultural and gender mix of tenants.

### Technology requirements?

Assisted technology was seen by most staff as a positive addition to housing for older people, however we need to make sure it is relevant and that tenants are able and educated in how to use it. It was felt that the scheme should have broadband as a core element in its design.

Some of the examples of technology that could be used where;

- Basic technology - easy to use, such as pendant alarms, mobiles. Many schemes use this already e.g. McKee Court and very successfully. Easy to overcome negative perceptions in older people of how to use and benefits.
- Dementia friendly assisted technology – door sensors, watch for tracking wondering etc.
- Fobs on door – accurate type of devises (tremors)
- CCTV in internal and external communal areas for security
- Sensors – light, falls, doors and windows etc.
- Automotive technology, allowing people to adjust temp, open windows from chair where mobility is limited

The consensus seemed to be technology can be great but it is critical that we get that balance right between using technologies as a tool but mindful in retaining human interaction. Some users have psychological needs and enjoy talking to people. If use properly it can assist scheme in spotting changes in life of older person and assist in directing the person support and care plan.

Peoples (staff and older people) use of technology is increasing. There is need for training on the use of assisted technology in order to ensure that the most is made of it by older people and that staff can use it to assist in support and care plans.

Broadband – most participants felt that tenants should pay for it themselves if they want it. From their experience most of their users do not use the internet.



## Tenancy management issues

Staff shared the following issues, in particular with regards to DCC housing and tenancies

- Relook at the model of 40 years ago, ensure people are obliged to mind their flats
- Downstairs flats are not available, so if people develop mobility problems, instead of being able to get a transfer easily they have to go back on the list
  - DCC allocation methods should prioritise existing tenants needing accessible flats, either with lifts or a flat at ground level.
  - Allocation model, where people could trade in their house for an accessible flat is gone and should be reinstated
- Bedsits, people should get priority for move locally, if tenants are a long time in a bedsit, they should be allowed a flat before new tenants get one.
- Tenants in a new property are not allowed move for two years, this is hard on people if their new home is no longer suitable due to sudden change in their abilities.
- People should be responsible for their own units, not just depending on the HSE / DCC for repair and up-keep – take responsibility of their home
- Too lenient on bad tenants – need to be proactive in managing tenants.

## APPENDIX 8

### QUERIES RECEIVED BY DCC FROM AHBs IN RELATION TO THE EOI

Theme	Topic	Query	
Funding	Funding	Could we receive a clear explanation of funding mechanism for construction?	
		If CAS funding?	Will it be 100%?
			Will funding cover all the communal areas in the EOI?
		If Private finance leasing model?	Will this funding cover assistive technologies?
			How will the land transfer arrangements work?
			How will communal areas be financed?
	Rents	If CAS funded?	Can an economic rent above the cap be charged?
			Can the costs of management of communal facilities be part of the economic rent calculation?
			What will be the impact on residents on pensions/ social welfare payments, if above CAS Rent supplement limit?
			Can it be arranged that rent supplement/HAP will allow residents while pay standard personal contribution?
	Allocations	If 100% CAS funded.	Can 25% of residents come from outside council lists?
			Will 100% of residents come from allocation panel?
			With an allocation panel in place and due the nature of the residents for the scheme how will the delays in allocations be dealt with?
			Will this mean a loss in rental income to AHBs managing the scheme?
		If funded by private finance.	Would DCC extend the timeframe within the P&A Agreement if there is a delay in allocation due to support assessments?
			What is the envisaged term of lease?
			Is it a possibility that the land could be transferred to facilitate private finance?
	Communal facilities	How will community facilities, including fit out, be funded?	
		Which mechanism will be used?	
		Is there a limit for communal facilities costs, including fit out?	
		Can National Lottery funding be used for private finance model? If not, is there an alternative source of funding under private finance?	



Theme	Topic	Query
<b>Funding</b>	Funding for support and care services	Can longer term revenue plan than 12 months be put in place over all areas?
		Will this be paid annual or reviewed annually?
		What areas of the SLA with the HSE cover? Will this cover Pillar 2 costs, Pillar 3 costs, 24/7 cover on site, catering etc. (excluding housing costs)?
		What 'agency' is being referred to on page 5: – <i>"An annual grant will be given to the organisation under the terms and conditions of an SLA to provide for the agreed care needs of the residents. This will include funding for the provisions of assessed care needs which will be assessed through a MDT HSE Team and the agency".</i>
	Revenue funding	Can a longer term contractual agreement be given other than annual grant? If not, if the annual grant is not renewed what arrangements will be put in place to protect residents with care and support needs?
Support funding	The Housing with Supports paper of September 2016 defines 5 graded levels of support from 1 to 5. The definition and funding levels to be provided by the HSE are not defined from Level 3 to Level 5 in terms of support requirements for the category of need in terms of proposed staffing levels. The HSE and the Department of Health in my discussions with them regarding similar projects stated that they did not have a budget line for the provision of supported accommodation. Has there been a new policy and budget line approved for such levels of support. Is this budget line and policy available to review?	
	The project design includes a kitchen dining room area for communal meals etc. Is there an approved budget line for the employment of staff such as cooks, cleaners, etc. for this level of service from either DCC or the HSE	
	Capital budget	The proposed design has a significant scale of staff and communal accommodation for the residents. How are the capital costs of this scale to be paid for as they would be inconsiderable excess of the communal facilities grant that is allowed by DHPLG? CAS funding will allow a capital grant for each unit of accommodation so how can the communal and staffing facilities be Paid for. Is the HSE contributing to the capital costs of these facilities?
	Assisted technology	The project proposal includes the provision of life time adaptable and assisted aids in the accommodation. Is there additional capital funding available for this or will it be covered in the capital CAS grant.
<b>Community integration</b>		We note the ambition that the scheme would serve the needs of older people in the wider catchment area. Do they anticipate that this will be through the communal facilities listed at Appendix C (e.g. hairdressing) or is there scope for more expansive facilities to be provide.
		Similarly, in terms of engagement with the wider community, is there scope for community facilities not specifically targeted at older people (a childcare service, for example) to be integrated?
		They refer to scope for a cafe to be included but this does not appear to be in the schedule of accommodation?

Theme	Topic	Query
<b>Community integration</b>		We note the generous space standards for the units. Is there scope to review the space provision if that serves to meet the needs of residents (e.g. visits from families)?
		Do we need to assume that the norms of Space Standards apply – Given the disparity between DCC space standards and Department space standards, which should prevail given the national intent
<b>Consortia</b>		Can non-AHB service providers be included in a consortium?
		Submissions from consortia of AHBs requires the parties to form a JV for the delivery of the project prior to entering into the Development Agreement. Is a copy of the proposed development agreement available for review, to allow partner AHBs to assess how they might work together to meet all of the development requirements?
		Where the submission for the panel application includes a partner that is site specific, is there a capacity within the panel framework to elect different partners for future projects if site specifics make this desirable?
<b>Submission requirements</b>		Can it be assumed that item F of the submission requirements should include a completed EOI form if the form has not previously been submitted?
<b>Site map</b>		Could we respectfully a copy of the site map – the copy supplied is very difficult to read. A scale map of the site if possible would be very helpful.



## APPENDIX 9

### SCHEDULE OF ACCOMMODATION DEVELOPED BY DCC

	Description	m <sup>2</sup>	Total m <sup>2</sup>
<b>Total area residential – 52 units</b>	70% 1.5 bed units (36) @ circa 63m <sup>2</sup> .	2,268	4,080
	30% 2 bed units (16) @ circa 80 m <sup>2</sup>	1,280	
	Add 15% circulation to accommodate bariatric hospital bed	532	
<b>Communal Accommodation and Facilities</b>	Main communal lounge	92	516
	Dining area	73	
	Main catering kitchen	70	
	Small lounges/ hobby room incl. tea kitchen	36	
	Large lounge	35	
	Public WC	47	
	Assisted Bathroom	18	
	Hairdressing/Beauty	7	
	Laundry	24	
	Informal seating	36	
	Entrance foyer and reception area	60	
	Small meeting room for residents/visitors	18	
<b>Staff and Ancillary Accommodation</b>	Manager's Office	18	132
	Care Staff Office	21	
	Staff lounge, kitchenette and WC	24	
	Staff locker & changing rooms	15	
	Guest room with en-suite	24	
	Catering Staff WC	6	
	General storage incl. cleaner's storage	24	
<b>Services and Plant</b>	Refuse store	24	104
	Recycling collection point	7	
	Plant room & service risers	30	
	Electrical intake/meter room	12	
	Add 15% circulation	31	
<b>Total Building Area</b>			<b>4,832</b>

## APPENDIX 10

### MEMORANDUM OF UNDERSTANDING BETWEEN

**Dublin City Council (DCC), Health Services Executive (HSE), Department of Housing Planning Community and Local Government (DHPCLG), Department of Health (DoH), Irish Council for Social Housing (ICSH)**

**To support the development of a 'Housing with Support' model for older people in Dublin City as one of five demonstration projects under the Government's 'Action Plan for Housing and Homelessness' 2016 (Rebuilding Ireland)**

This Memorandum of Understanding will take effect in March 2018 and will be valid for an initial period of 3 years or until the completion of the pilot phase of the demonstrator project in Dublin, and will be reviewed towards the end of the 3rd year. This Memorandum of Understanding maintains, restates and formalises the positive and collaborative work undertaken by the signatories/Steering Group members since the commencement of the project in 2016.

#### Context

The projected doubling of the over-65 population, and the quadrupling of the over-80 population, by 2045 makes planning for the future housing needs of older people a matter of critical importance.

Most of us want to stay in our own homes as we grow older but this can pose additional challenges, as people get older and their frailty increases. Some can live viably at home with home care supports but when this approach ceases to be viable, residential nursing home care is the only option available to many. This is the option least preferred by older people and which does least to preserve independence and autonomy. The costs of residential nursing home care will become increasingly expensive in the coming years and decades as the number of older people increases.

There is accordingly a compelling case for examining the potential of new housing with associated care and support models, which fall between home care and full-time nursing home care. The objective is to provide essential care and supports while preserving and protecting independence, functionality, and social connectedness for as long as possible, in a way that is

as affordable as possible for older people themselves and for the State. "Housing with supports" may offer older people who do not require nursing home care the benefits of living in their own home, but in settings where supports and care are provided in an effective and economical way.

This demonstration project, as stated in 'Rebuilding Ireland, Action Plan for Housing and Homelessness 2016', is a collaborative, cross-sectoral and cross-department project that recognises the need for a joined-up approach to address the critical issue of creating housing choice for the changing demographic, one that requires housing, social and care supports to be incorporated into a single scheme.

This Memorandum of Understanding set out the key elements of the agreement between, DCC, HSE, DHPCLG, DoH and ICSH to work together to-

- Oversee the progression and delivery of the demonstration project while at pilot stage
- Consider how best to collaborate on the resourcing of the 'Housing with Supports' demonstration project from concept to completion of pilot stage
- To develop a 'Framework Toolkit' to provide a means by which the demonstration prototype project will be used to replicate and adapt the prototype in other geographical areas of Ireland. An on-going evaluation process will assist this.

In signing this Memorandum of Understanding, the signature organisations commit to realise the three main objectives as stated above.

#### Commitments of individual key stakeholder members

Dublin City Council (DCC)

- To identify a site for the use for the demonstration project
- To lead out on behalf of 'Housing with Supports Steering Group' in identifying an Approved Housing Body to develop the demonstration project



- To participate in the development and evaluation processes for the demonstration project (including selection or AHB, development of referrals criteria and process to be used in project and others as identified by steering group going forward)
- To assist in drafting a Framework Toolkit' to support the replication of the prototype in other parts of Ireland that is mindful of scalability, sustainability and that meets needs of older people

### **Health Services Executive (HSE)**

- To provide revenue funding for 'care elements' of support for the project in pilot stage and beyond
- To contribute capital funding as a once off up to a maximum of €0.45m to support the development of additional communal areas in this particular demonstrator project and to bridge the shortfall in capital on the CAS funding model.
- To participate on the 'Housing with Supports Steering Group' up to oversee the demonstration project from concept to completion of pilot stage
- To participate in the development and evaluation processes for the demonstration project (including selection of AHB, development of referrals criteria and process to be used in demonstration project and others as identified by steering group going forward)
- To assist in drafting a Framework Toolkit' to support the replication of the prototype in other parts of Ireland that is mindful of scalability, sustainability and that meets needs of older people.

### **Department of Housing, Planning, Community and Local Government**

- To provide capital funding to develop the Demonstration Project as part of Rebuilding Ireland, Action Plan for Housing and homelessness , 2016
- To participate on the 'Housing with Supports Steering Group' to oversee the demonstration project from concept to completion of pilot stage,

to include the evaluation of the demonstration project.

- To provide support through personnel from the Department to participate on the oversight steering group
- To advise and support the Steering Group on policy related matters pertinent to the demonstration project and the potential for national replicability.
- To assist in drafting a Framework Toolkit' to support the replication of the prototype in other parts of Ireland that is mindful of scalability, sustainability and that meets needs of older people.

### **Department of Health**

- Recognising the potential future benefits to community health service provision, to support DHPLG in its' bid for capital funding related to health services to develop the Demonstration Project as part of Rebuilding Ireland, Action Plan for Housing and homelessness , 2016
- To support the HSE in budget and service planning processes in relation to its resource contributions
- To participate on the 'Housing with Supports Steering Group' to oversee the demonstration project from concept to completion of pilot stage including the provision of financial support to a maximum of €10,000 per phase towards the cost of an independent evaluation of the demonstration project.
- To advise and support the Steering Group on policy related matters pertinent to the demonstration project and the potential for national replicability.
- To assist in drafting a Framework Toolkit' to support the replication of the prototype in other parts of Ireland that is mindful of scalability, sustainability and that meets needs of older people.

## Irish Council for Social Housing

- To participate on the 'Housing with Supports Steering Group' up to oversee the demonstration project from concept to completion of pilot stage.
- To participate in the development and evaluation processes for the demonstration project (development of referrals criteria and other processes as identified by steering group going forward, excluding the selection process of the AHB)
- To advise and support the Steering Group on policy related matters pertinent to the demonstration project and the potential for national replicability.
- To assist in drafting a Framework Toolkit' to support the replication of the prototype in other parts of Ireland that is mindful of scalability, sustainability and that meets needs of older people.

<p><b>Signatories</b>          Brendan Kenny          Deputy Chief Executive          Housing and Community Section          Dublin City Council          Wood Quay          Dublin 1</p> <p>Signed</p>	<p>Pat Healy          HSE - National Director of Social Care          HSE Social Care Division          Dr Steeven's Hospital          Dublin 8</p> <p>Signed</p>
<p>Mr John McCarthy          Secretary General          Department of Housing, Planning, and Local          Government          Customs House          Dublin 1</p> <p>Signed</p>	<p>Mr Jim Breslin          Secretary General          Department of Health          Hawkins House          Dublin 2</p> <p>Signed</p>
<p>Maurice O'Connell          Independent Chair          Housing with Support Steering Group</p> <p>Signed</p>	<p>Donal Mc Manus          CEO          Irish Council for Social Housing          50 Merrion Square East          Dublin 2</p> <p>Signed</p>



## **APPENDIX 11**

### THE EVALUATION FRAMEWORK FOR PHASE 2 AND 3 OF THE DUBLIN AGE FRIENDLY HOUSING WITH SUPPORT MODEL

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## 1. Introduction

This Appendix (11) contains details of the evaluation framework developed as part of the Phase I evaluation of the Dublin City Age Friendly Housing with Support Model in Inchicore.

This framework was developed by the Phase I evaluator in association with the project Steering Committee. It was designed for the purposes of supporting and enabling the ongoing monitoring and evaluation of Phase 2 and 3 of the Housing with Support' project in Inchicore.

## 2. The evaluation plan

### 2.1 Why evaluation is being conducted?

The evaluation is being conducted to capture the learning arising from the implementation of the project in relation to:

- 1) The extent to which the project has met its overall aims and objectives?
  - Integrated and provided appropriate physical environment and care supports onsite
  - Integrated into the community
  - Older people at the centre
- 2) The added value of the partnership approach
- 3) The extent to which the project has influenced policy (including how the critical issues of home care and financing can be more effectively provided).

### 2.2 Who will do it?

The evaluation will be undertaken by an independent evaluator/team of evaluators who will report to the project Steering Committee.

### 2.3 When will it be done?

The Phase 2 evaluation will be conducted throughout the implementation of phase 2 of the project. The Phase 3 evaluation will be conducted as the first tenants take up residence in the accommodation and completed at the end of the first year of residence.

### 2.4 How the findings will likely be used?

The findings will be used to:

- 1) Inform the ongoing and future direction of the project
- 2) Inform the potential rollout of the model
- 3) Inform policy and decision makers

### 2.5 The key evaluation questions

There are three key evaluation questions:

- Did the project meet its core stated objectives?
  - Integrate and provide appropriate physical environment and care supports onsite
  - Integrate the project into the community
  - Place older people at the centre
- What has been the added value of the partnership approach?
- What has the impact of the project been on
  - The project partners
  - National policy and rollout (particularly in relation to home care)
  - The services and older people connected to the project
  - Developing an innovative financing model



### 3. The evaluation framework

Project Objectives	Evaluation Question	Indicators	Data Collection Strategy Phase 2	Data Collection Strategy Phase 3
1. Integrate and provide appropriate physical environment and care supports onsite	To what extent has the project successfully integrated physical environment and care supports on site?	The physical environment and the care supports are in place to enable tenants to live in the development until the stage that they need 24-hour nursing care	<ul style="list-style-type: none"> <li>– Review of relevant documentation</li> <li>– Interviews with project partner organisation and the AHB staff</li> <li>– Site visits and observation</li> </ul>	<ul style="list-style-type: none"> <li>– Site visits and observation</li> <li>– Interviews with key project staff (on site)</li> <li>– Point in time interviews and focus groups with older people living in the development</li> </ul>
2. Integrate the project into the community	How has the project connected and integrated with the wider community?	Project has strong (two-way) connections with the wider community, and is seen as part of the community infrastructure of the local area.	<ul style="list-style-type: none"> <li>– Key local stakeholder interviews</li> </ul>	<ul style="list-style-type: none"> <li>– Key local stakeholder interviews</li> <li>– Interviews and focus groups with older people living in the development</li> <li>– Feedback from local business/ community on development</li> </ul>
3. Place older people at the centre	Have the views and opinions of older people been taken into account and is the project accessible and inclusive of older people?	Older people are meaningfully involved in the project development and subsequent operation on an ongoing basis.	<ul style="list-style-type: none"> <li>– Review of documentary records</li> <li>– Interviews and focus groups with older people involved in the project</li> </ul>	<ul style="list-style-type: none"> <li>– Interviews and focus groups with older people involved in the project</li> <li>– Interviews/ focus group with members of the Allocations Committee</li> <li>– Interviews with key project staff (on site)</li> </ul>

<b>Project Objectives</b>	<b>Evaluation Question</b>	<b>Indicators</b>	<b>Data Collection Strategy Phase 2</b>	<b>Data Collection Strategy Phase 3</b>
4. Maximize the value of the partnership approach	What has been the added value of the partnership approach?	The partnership and the organisational partners have effectively supported the project.	<ul style="list-style-type: none"> <li>– Partner interviews</li> <li>– Interviews relevant AHB staff</li> </ul>	<ul style="list-style-type: none"> <li>– Partner interviews</li> <li>– Interviews relevant AHB staff</li> </ul>
5. Serve as a high-quality exemplar for other such schemes in Ireland	What is the learning from this project relevant to wider roll-out?	The learning from the project is clearly identified, documented and shared widely.	<ul style="list-style-type: none"> <li>– Review of documentary record and publications</li> <li>– Partner interviews</li> <li>– Key national stakeholder interviews</li> </ul>	<ul style="list-style-type: none"> <li>– Review of documentary record and publications</li> <li>– Partner interviews</li> <li>– Key national stakeholder interviews</li> </ul>
6. Contribute the policy in relation how the critical issue of home care can be more effectively provided.	How successful has this project been in relation to influencing relevant policy?	The housing with support model is recognised by the state.	<ul style="list-style-type: none"> <li>– Review of policy work</li> <li>– Partner interviews</li> <li>– Key national stakeholder interviews</li> </ul>	<ul style="list-style-type: none"> <li>– Review of policy work</li> <li>– Partner interviews</li> <li>– Key national stakeholder interviews</li> </ul>



# References

- Age Friendly Ireland (2014) 'Housing for Older People: Future Perspectives' report.
- DCC (undated) Dublin\_Housing\_Seminar\_invite\_letter\_20150904.docx.
- DCC (undated) Innovative 'Housing with Care' For Older People, Briefing Document for Dublin Summit 7th October 2015.
- Detweiler, M. B. Sharma, T. Detweiler, J. G. Murphy, P.F. Lane, S. Jack Carman, J. Chudhary, A.S. Halling, M.H. and Kim K.Y. (2012) What Is the Evidence to Support the Use of Therapeutic Gardens for the Elderly? *Psychiatry Investigation* Jun; 9(2): 100–110.
- DHPCLG (2016) FAQs on: Social Housing Design, Approval & Delivery Process & Procedures Review Social Housing Construction Project Status Report.
- DHPCLG (2016) Rebuilding Ireland Action Plan for Housing and Homelessness.
- DOH (2013) Healthy Ireland- A framework for improved Health and Wellbeing 2013-2015.
- DOH (Ireland) (2013) National Positive Ageing Strategy.
- Dublin City Age Friendly (2014) Dublin City Age Friendly Strategy (2014-2019).
- Dublin Age Friendly Housing Working Group (2016) Housing with Supports- A Housing Model for Older People. Communications Development Protocol between Local Authorities and Approved Housing Bodies Lot 1: LA Owned Land. March 2017, CA16026.
- Dublin Age Friendly Housing Steering Committee (2016) 'Inchicore Housing with Support Demonstration Project-A partnership between Housing, Health and Community' Vision Document.
- Dublin City Council (2017) Call for Expressions of Interest for selection of an Approved Housing Body from the Local Authority Panel to Design, Finance, Build and Operate Housing with Supports at Inchicore, Dublin 8.
- HaPAI (2015) Age-Friendly Cities and County Survey by Dublin City.
- Housing Agency/ISAX (2016) Housing for Older People- Thinking Ahead carried out by Amárach Research, Lyons, R., SIRR, L., and Innovation Delivery.
- Housing Agency (2016) Guidance Note on the Capital Advance Leasing Facility (CALF) for Approved Housing Bodies and Housing Authorities.
- Housing LIN (2015) Cost Model: Extra Care Housing (2015) [https://www.housinglin.org.uk/\\_assets/Resources/Housing/Support\\_materials/Reports/CostModel\\_ECH\\_April15.pdf](https://www.housinglin.org.uk/_assets/Resources/Housing/Support_materials/Reports/CostModel_ECH_April15.pdf).
- Housing LIN Funding Extra Care Housing TECHNICAL BRIEF [https://www.housinglin.org.uk/\\_assets/Resources/Housing/Support\\_materials/Technical\\_briefs/Technical\\_Brief\\_02\\_FundingECH.pdf](https://www.housinglin.org.uk/_assets/Resources/Housing/Support_materials/Technical_briefs/Technical_Brief_02_FundingECH.pdf).
- OPRAH National Working Group (2015) OPRAH Older People Remaining at Home Promoting systems change towards independent living for older people.
- Report of Forum on Long-term Care for Older People (2015) Responding to the Support and Care Needs of our Older Population-Shaping an Agenda for Future Action.
- Riseborough, M. Fletcher, P & Gillie, D. (2015) Extra care housing what is it? Housing Learning & Improvement Network.
- The Housing Agency (2016) Social Housing Current Expenditure Programme (SHCEP) Guidance Note on the Capital Advance Leasing Facility (CALF) for Approved Housing Bodies and Housing Authorities. [https://www.icsh.ie/sites/default/files/attach/icsh-news/1035/calf\\_guidance\\_april\\_2016.pdf](https://www.icsh.ie/sites/default/files/attach/icsh-news/1035/calf_guidance_april_2016.pdf) (assessed 1st October 2017).
- Report of the Interdepartmental Working Group on Long Term Care Report (2008). This Working Group was established by the Tánaiste and the Minister for Social and Family Affairs in January 2005. It was chaired by the Department of the Taoiseach and comprised senior officials from the Departments of Finance, Health and Children and Social and Family Affairs. The report can be accessed at [http://health.gov.ie/wp-content/uploads/2014/03/long\\_term\\_care\\_report.pdf](http://health.gov.ie/wp-content/uploads/2014/03/long_term_care_report.pdf) (accessed 1st February 2018)/

# List of Abbreviations

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<b>AHB</b>	Approved Housing Body
<b>CALF</b>	Capital Advance Leasing Facility
<b>CAS</b>	Capital Assistance Scheme
<b>DCC</b>	Dublin City Council
<b>DHPLG</b>	Department of Housing, Planning and Local Government
<b>DOH</b>	Department of Health
<b>EOI</b>	Expression of Interest
<b>HSE</b>	Health Services Executive
<b>ICSH</b>	Irish Council for Social Housing
<b>P&amp;A</b>	Payment and Availability (agreement)



