Working with health professionals Health professionals have found that effective liaison by sheltered and retirement housing staff, when encouraged, is invaluable. The National Service Framework for Older People encourages health agencies to work with housing and social services to deliver the eight standards relating to: age discrimination; personal, hospital and intermediate care; strokes; falls; mental health, active old age 27 Are hospital discharge arrangements satisfactory? Yes In progress 28 Do sheltered and retirement housing staff participate? If not, do sheltered and

retirement housing staff know what

No

action to take?

Yes

29 Has the role of sheltered and retirement housing staff, as monitors of individuals' behaviour and physical condition been understood by GPs, district nurses and other health professionals?			
Yes	No	In progress	
 30 Do staff in care?	have a role in fa	acilitating choice	
Yes	No	In progress	
	31 Are they accessed to a range of optical, chiropody and dental services in the community?		
chiropod	ly and dental se	•	
chiropod	ly and dental se	•	
 chiropoc commur	ly and dental se nity?	ervices in the	
 chiropod commur Yes	ly and dental se nity?	In progress	
chiropod commur Yes 32 Have you	ly and dental sental se	In progress	
chiropod commun Yes 32 Have you sheltered to make	ly and dental se nity? No u considered en	In progress npowering t housing staff ions to team	

Checklist for sheltered and retirement housing providers

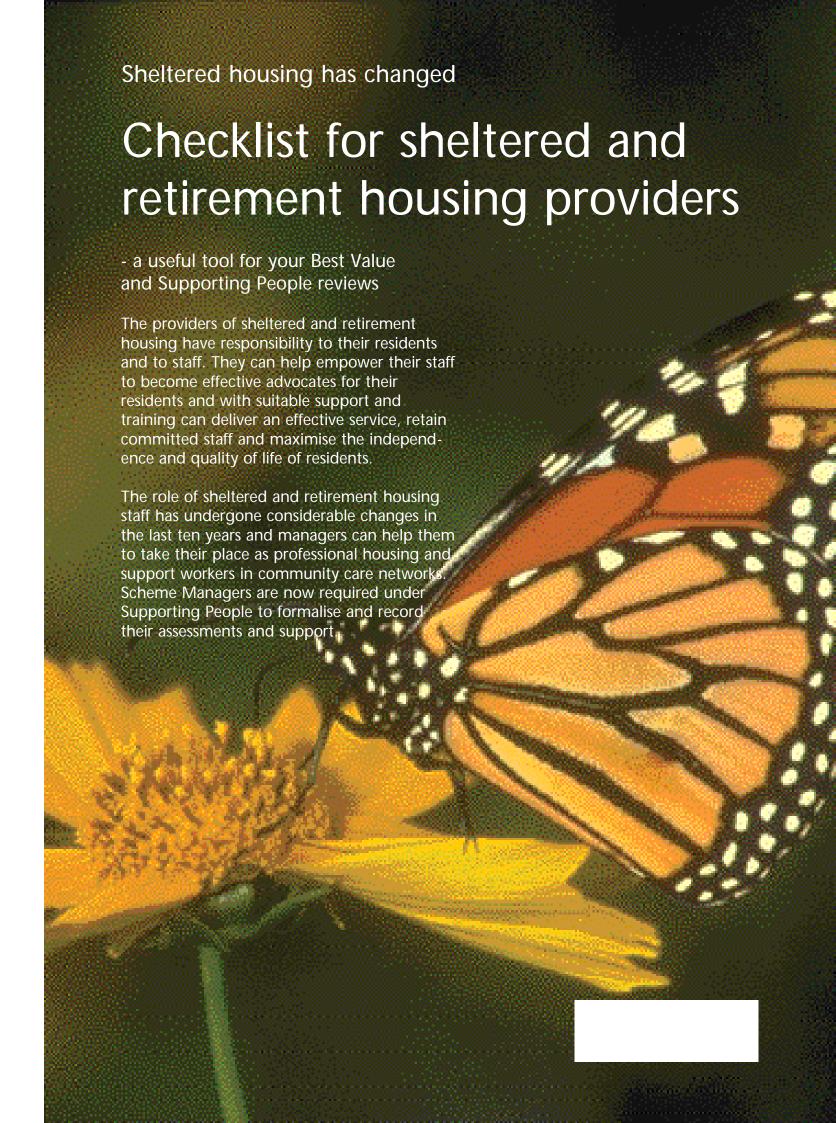
In progress

Sheltered and retirement housing is a huge resource. More older people (two thirds of a million) in the UK currently live in sheltered and retirement housing than in residential and nursing care put together. Sheltered and retirement housing was originally intended for fit, active older people. However, demographic trends and community care have led to an older and frailer population living, or wishing to live, in sheltered and retirement housing. The service has therefore evolved in response to these changing needs and new models of extra care sheltered housing are being developed. Residents can live independent and fulfilled lives in specially designed accommodation that aims to offer a "home for life". This leaflet, one of a series of four*, has been produced by a consortium of sheltered and retirement housing providers.

Phone 01249 654 249 for:

- more leaflets
- further information on this consortium or obtain information from www.shelteredhousing.org
- * Four different leaflets are available for:
- Hospital and primary care staff
- Social services
- Sheltered and retirement housing providers
- General enquirers, older people, their

friends and relatives ERoSH, PO Box 2616, Chippenham, Wiltshire, SN15 1WZ T: 01249 654249 F: 01249 654249 E: info@shelteredhousing.org Registered Charity No: 1098050



Checklist for sheltered and retirement housing providers

Working within your organisation The following questions suggest some areas where networks can be built and how the accessing of social and healthcare services by staff, on behalf of residents, can ensure their needs are met swiftly.

Line managers of sheltered and retirement

nousing schen	ne staff		
retirement I	Do the job descriptions of sheltered and retirement housing staff match the tasks they actually perform?		
Yes	No	In progress	
2 Are you monitoring procedures to en their implementation?			
Yes	No	In progress	
B Do you have a staff training plan for all sheltered and retirement housing staff?			
Yes	No	In progress	
Are staff fully briefed and trained regarding their new role under Supporting People, including needs and risk assessment, support planning, preventing abuse and promoting diversity and inclusion?			
Yes	No	In progress	
5 Are staff aware of the positive contribution they can make to the access and delivery of community care?			
Yes	No	In progress	
Do senior management recognise that the will need to take responsibility for chasing up the failures of other services if the effort of sheltered and retirement housing staff have been to no avail?			
Yes	No	In progress	

sheltered a with socia		housing facilities th, the Supporting
Yes	No	In progress
•	and retirement	advocacy role of housing staff with
Yes	No	In progress
strategy o so, have y of your sc	n older people	
Yes	No	In progress
0 0 0	to be fully info	paring staff and primed and
Yes	No □	In progress
CSHS Coo	u considered ac de of Practice to with Supporting ering Authorition	g People
Yes	No	In progress
Assessment	and procedure	S
needs to allocation	arrange for care be assessed as n process, or at moves in?	• •
Yes	No	In progress
	cation forms re needs as well a	ecord care and as housing needs?
Yes	No	In progress

14 Are needs assessment and support plans in place and staff trained to use them effectively?					
Yes	No	In progress			
dependen	15 Do you regularly assess levels of dependency in schemes and the impact on service delivery on each site?				
Yes	No	In progress			
involved in	16 Are sheltered and retirement housing staff involved in the allocation process - if not, could they be?				
Yes	No	In progress			
17 Do staff have an up to date manual of procedures for assessment of care and support needs, hospital discharge, medication and the help they can give in an emergency?					
Yes	No	In progress			
18 Does the community care/single assessment form adequately deal with housing need, e.g. whether sheltered and retirement housing would reduce or help to meet a person's care and support needs?					
Yes	No	In progress			
Working with social services Care management staff, assessors and occupational therapists have found that successful links with sheltered and retirement housing staff assist liaison with their clients. 19 Do line managers fully appreciate the impact of community care arrangements on					
the jobs of sheltered and retirement housing staff?					
Yes	No	In progress			
		Ц			

priorities	for sheltered a with social serv	cy for allocation and retirement vices and health
Yes	No	In progress
	ered and retire in the allocatior	ment housing staff process?
Yes	No	In progress
adequate retiremen	•	e of sheltered and s integration into
Yes	No	In progress
clear pro sheltered	cedure and rol	thousing staff in
Yes	No	In progress
liaising w	senior officer with social servi ity care assessr	
Yes	No	In progress
care shel		potential of extra and intermediate s?
Yes	No	In progress
-	al services staff	ed joint training f, for example on
Yes	No	In progress