

TPAS



Developing Excellent People



Effective Resident Involvement and Consultation in Sheltered Housing

A Good Practice Guide for Providers and Commissioners
A project commissioned by the CLG Ministerial Working Group for Sheltered Housing

Foreword

Sheltered housing has been a home of choice for many older people in our society for the last 30-40 years. Giving that little bit of extra help when needed and providing opportunities for ongoing social activity with peers, it has proved a valuable setting in which older people have been able to live safely and maintain their independence.

In our strategy for an ageing society, Lifetime Homes, Lifetime Neighbourhoods, we recognised that such specialised housing will continue to play a valuable role in supporting us as we grow older, and will be a positive choice for many older people in the future.

Sheltered housing has always included a range of different models of accommodation and support. The changing and increasing expectations of older people, and the age and nature of some sheltered housing, mean that those models need to be able to adapt to different requirements. At the same time, different ways of funding the support that is included with sheltered housing – traditionally provided by a warden or sheltered scheme manager – has also led to changes in how sheltered housing is delivered.

Sometimes these changes have been done very well, but the report by Help the Aged – Nobody's Listening – captured the concerns of a growing number of older people where changes hadn't been done well, leaving them feeling vulnerable, distressed and unsure where to go with their complaints.

We are very clear that the best services are developed together with the active involvement of those who use them. The constraints of funding, the demands for different models of services are all things that sheltered housing residents are aware of, and can help providers and commissioners of services to address when they are fully involved.

So we brought together the Ministerial working group on sheltered housing, drawing on the expertise of representatives of older people, sheltered housing residents, providers and service commissioners. Its task was to identify ways to make a positive difference to the lives of people living in sheltered housing, now and in the future. It was also required to address some of the explicit concerns made by older people about how the changes in sheltered housing were being introduced.

Involvement and consultation are vital components of sheltered housing, both in the delivery and development of these services. It is recognised that a key driver for this guide came from sheltered housing residents, their families and advocates as a result of the changes within the sector to the pivotal role of the scheme manager. However, this guide seeks to go further, to identify the far wider benefits that effectively involving and consulting with residents can bring.

Attributes such as honesty, trust, partnership working, empowerment, ownership and choice add to the success of any consultation, and feature frequently in this guide.

The benefit of this guide, *Effective Resident Involvement and Consultation in Sheltered Housing*, is that it provides many practical case studies and snapshots for providers and commissioners as well as residents. It also identifies the potential barriers to effective consultation and how these can be overcome.

Lord Bill McKenzie of Luton
Parliamentary Under Secretary of State,
Communities and Local Government

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This guide is one of four projects commissioned by the CLG Ministerial Working Group for Sheltered Housing:

- More than just a few kind words! Reshaping support in sheltered housing: A good practice guide for providers and local authorities
- Guidance on Complaints Process
- EAC Housing for Older People Awards and Report

Executive Summary

The Challenges

There has been much focus in recent years on the changing role of sheltered housing, with providers facing challenges balancing the needs of current sheltered housing residents with those of future residents. One response, highlighted in Help the Aged's 2009 report, *Nobody's Listening*, is to re-model sheltered housing services, often involving changes to the role of the scheme manager. These changes have brought to the fore the lack of meaningful consultation around many issues. Residents often feel that key decisions have already been made without them, leaving them cynical about future consultation exercises, and leading them to lose trust in their provider.

The report recommended the "...establishment of good practice guidance for both commissioners and providers concerning resident involvement and engagement."

This Guide has been produced to meet this recommendation, but also focuses on the wider importance of genuine, effective resident involvement and consultation, and the benefits this brings for providers, residents, their relatives, carers and advocates, as well as staff and commissioners.

Commissioners working jointly with their adult social care counterparts, should also consider the 'personalisation' of wider housing services and related care and support locally, as set out in the concordat, *Putting People First*.

Section 1: Resident Involvement - What's the Problem?

This section explores the issue of effective resident involvement and consultation: what it means, what is expected, and potential barriers.

Effective involvement means a long-term commitment - from everyone in an organisation - to making the active involvement of, and consultation with, residents a core part of the organisation's activities, backed up by good written policies and procedures.

Assumptions and attitudes often present the biggest barriers to effective involvement and consultation, coupled with increasing pressures on funding and time constraints. Good quality preparation, training, support and information are essential in overcoming these barriers.

Section 2: From Informing to Empowering

A number of terms are currently used to describe resident involvement. However, not all terms have the same meaning or will lead to the same outcome. This Guide identifies the terms most commonly used within resident involvement, what these mean, and what each can achieve.

Good practice snapshot examples are included to illustrate the importance of offering different ways for residents to be involved, from formal means such as structured forums to informal social lunches and bingo sessions, to support as many residents as possible to take part in ways that best suit them.

Section 3: Encouraging and Valuing Older People's Involvement

Section three addresses the importance of actively valuing the contributions older residents make to the sheltered housing service. Encouraging residents to become involved helps ensure people feel valued and that their opinion matters.

Formal structures particularly support a democratic and accountable approach. Clearly defining the role of resident representatives is important if perceptions that the person is there to represent the provider rather than residents are to be minimised.

Hard-to-reach residents can provide valuable feedback, and their views should be sought. Providers should identify their hard-to-reach resident groups to ensure services develop in line with these residents' needs and expectations.

Section 4: Case Studies

This section contains three case studies that address particular involvement and consultation issues that arise when developing sheltered housing services.

Common to all the case studies is working to develop, in a planned and proactive way, services that residents want and will also find beneficial. As each case study demonstrates, consulting on how services might change has delivered benefits in other areas, such as the Decent Homes Standard (ensuring schemes are better places to live, making them easier to let, manage and maintain).

An additional benefit arose from enabling residents to make real decisions with a budget of £5 million, as this ensured the right balance was achieved between the need to improve disabled facilities and the wish and need to develop new facilities - such as a state-of-the-art IT suite - from the point of view of residents.

Section 5: Conclusions and Key Messages

Nobody's Listening highlighted a number of issues regarding consultation activities:

- A lack of what residents regarded as meaningful consultation
- The need for staff doing the consultation to be good communicators
- Feelings of powerlessness amongst sheltered residents
- The negative impact of the changes being imposed.

To address these issues, this Guide has identified six key messages for providers and commissioners to consider:

1. The importance and value of being involved – effective involvement and consultation leads to a greater ownership and empowerment of residents, in turn leading to increased satisfaction and individual well-being. Sheltered residents have a history of banding together to protest against service developments over which they felt they were not consulted. The resultant publicity and legal challenges are a powerful illustration of the effects of not involving residents effectively;
2. Establish a range of options – this ensures providers and commissioners are better able to capture and address the input from a diverse range and increasing numbers of residents;
3. Continuum of involvement – this does not mean that involvement methods higher up the continuum are intrinsically better, rather that offering a wide range of activities helps in establishing a long-term sustainable commitment to resident involvement;
4. Scope and scale of decision making – reviewing and challenging the decisions that could in fact be delegated to residents will strengthen the involvement process. Residents' desires to influence different decisions may also change over time, and this should be reflected;
5. Influencing external bodies – as external organisations are often also stakeholders within sheltered housing, positively involving residents can result in stronger relationships and an additional positive benefit to stakeholders, who gain more in-depth knowledge and understanding of residents which in turn may better support their own external roles;
6. Resourcing – time, energy and commitment are invaluable resources. If the whole organisation 'buys-in' to the process, involvement becomes more meaningful and effective – but the implications for staff and managers in terms of their time, commitment and energy need to be identified and factored in.

Section 6: Developing Your Own Good Practice

Providers and commissioners may have their own local or organisational barriers to overcome before effective involvement and consultation can become a reality. This section identifies six key areas to be tackled:

1. Reviewing your current practices
2. Clarifying your objectives
3. Being prepared
4. Knowing your people (employees, volunteers, residents)
5. Learning from others
6. Sustainability.

Annex

This Guide aims to promote good practice in involvement and consultation throughout sheltered housing, which means going beyond legal requirements. However, it is important to highlight these requirements and therefore this section contains a summary of the legal and regulatory duties placed on providers to consult.

Using this Guide

Help the Aged's report, *Nobody's Listening*¹, highlighted many issues facing both providers and residents of sheltered housing. A key concern was the extent to, and ways in, which residents had been consulted when developing or changing services, particularly the removal of the on-site 'warden'. The report highlighted residents' feelings that they were being excluded from major decisions that affected their daily lives or, if they were included, this was felt to be tokenistic, as if decisions had already been made and providers were simply 'ticking the box'.

In 2009, the Communities and Local Government (CLG) Select Committee report² on the Supporting People Programme also highlighted these issues, acknowledging the need for change in some circumstances, but also cautioning:

"...we are concerned that user choice is not being listened to." (2009: 225)

Although much of the emphasis within these reports and elsewhere is on the changes to service delivery models³, what this Guide demonstrates is the far wider benefits of involvement and consultation. Residents and providers can achieve significantly positive change by working together on matters such as improving communal areas, developing additional services including IT facilities, setting up health activities, gaining a detailed awareness and understanding of the needs and priorities of other residents, and a real ability to demonstrate that resident opinion matters.

Terms used in this Guide

The current complex nature of sheltered housing provision can be seen simply by the number of different terms used to describe those living there: resident, tenant, leaseholder, customer, client, and service user. As the purpose of this Guide is to promote full and open involvement and engagement with all older people living in sheltered housing, the term resident is used throughout to reflect all types of legal occupier.

Scheme manager is used to describe support staff or the warden role, and provider is the term used for the landlord or support provider.

1. Resident Involvement

What's the Problem?

Summary

This section considers the nature of effective involvement, and how this can be demonstrated. Potential barriers to effective resident involvement are recognised, and ways in which these can be overcome highlighted.

The research undertaken by Help the Aged for their report Nobody's Listening highlighted the link between effective involvement and satisfied, well-informed residents.

1.1 What is Effective Involvement?

"Resident involvement cannot be fully evaluated from policy and procedure alone. True and effective involvement is evidenced in the type of relationships displayed by staff and residents, particularly the level of trust expressed by residents, which can only be achieved by long-term organisational dedication to honouring its commitments. This dedication can be evidenced by providers in the real changes that effective involvement can and does make to the way that they deliver services and improve the lives of their residents." - Assessor for the Centre for Housing and Support's Code of Practice for Housing-related Support Services.

"Resident involvement should be the ethos of the organisation – it should not be a bolt-on to organisational activities. There must be a strong commitment at all levels, including management and board level; to seek, listen to and act on resident feedback. Effective involvement can be evidenced through regular liaison meetings, forums, feedback methods such as surveys and questionnaires. Resident involvement should discuss local and wider issues; to demonstrate that residents have the ability to influence and shape their own needs as well as that of the wider community." - Supporting People Review Officer.

1.2 What are the Barriers to Effective Involvement?

Explored in more detail within Section 3.1 Barriers and Solutions, potential barriers include:

- History of poor involvement and engagement. This can be particularly true of consultation exercises where residents felt they were not listened to. One outcome is a lack of trust where the provider is concerned; another is cynicism about the whole process.
- Funding and time constraints (especially where the funder is external e.g. Supporting People) mean that residents may be asked to engage in consultation about developments they either do not agree with or otherwise have little real influence over - particularly because of the stage at which they become involved.
- Assumptions that older people do not want to be involved are often coupled with the application of inflexible consultative approaches that do not reflect residents' needs or abilities.
- Ignoring people and organisations that play important roles in the lives of sheltered housing residents, including front line staff, relatives, advocates and carers.

1.3 Overcoming Barriers

This Guide is principally aimed at sheltered housing providers in England. It can be used in two key ways to help overcome such barriers to effective involvement:

1. As a training, information and support tool, particularly around sharing good practice examples. The Guide can support provider's own staff, managers and residents, and also be used more widely in partnership working with wider key stakeholders such as Supporting People Teams and other service commissioners;
2. Using the existing examples of good practice in action as a starting point for providers to work with residents to develop their own good practice that best suits local circumstances.

Many sheltered housing providers have faced significant challenges to how they deliver and develop their service, including potential changes to the pivotal role of the scheme manager. This Guide offers examples of good practice, discussion of different forms of involvement, identification of key issues and top tips, all in the particular context of sheltered housing. Providers may have their own additional local or organisational hurdles to identify and overcome; section 6 of this Guide sets out ways to achieve this.

2. From Informing to Empowering

Summary

This section considers the importance of defining the terms used in consultation exercises; the outcomes of different approaches; the benefits of using a variety of involvement methods; and gives examples of ways of involving residents.

Many different terms are used in resident involvement work and these are not always explained or have the same meaning for everyone. This can lead to misunderstandings, unrealistic expectations, and unhappy residents.

Lessons from Research

“The Anchor residents found the notion of consultation problematic...Consultation has a common sense meaning which implies that a dialogue will take place. The distinction between dialogue and consultation needs to be made clear to residents. Getting a good dialogue going requires skill, practice and it takes time.”

Riseborough, M (1996). Listening to and Involving Older Tenants. Oxford: Anchor Trust

Using the diagram and questions below will help providers and commissioners to identify the most effective approach to involvement:

- What is the aim?
- What is the history and background?
- What are the constraints?
- Where are we in the diagram below?
- Where do we want to be?
- Do we know where residents want to be

Definition of Activity		Outcome
Informing To provide balanced and objective information to residents to assist them in understanding the problems, alternatives, opportunities and/or solutions	→→→→→→→→	Residents are given information in a timely and appropriate way
Consulting To obtain and consider feedback on analysis, alternatives and or proposals	→→→→→→→→	Residents are kept informed and listened to. Concerns and aspirations are acknowledged and feedback is given on how residents input influenced the decision
Involving To work directly with residents throughout the process to ensure that their concerns and aspirations are consistently understood and considered	→→→→→→→→	Residents concerns and aspirations are directly reflected in the alternative solutions developed and provide feedback on how residents input influenced the decision
Collaboration/Participating To work in partnership with residents in each aspect of the decision making process including the development of alternatives and the identification of the preferred solution.	→→→→→→→→	The provider looks to residents for advice and innovation in formulating solutions and incorporates their advice and recommendations into the decisions to the maximum extent possible
Empowering To place final decision making in the hands of the residents	→→→→→→→→	Providers implement what residents decide.

(Adapted from: International Association for Public Participation (2007). IAP2 Spectrum of Public Participation. Westminster: USA)

Organisations often use several approaches simultaneously, with residents influencing some decisions and making others.

Good Practice Snapshot – South Tyneside Homes: Service Improvement Group (SIG)

The SIG was established in 2007 to act as an advisory and consultative body with the capacity to assist in development, improvement, monitoring and reviewing of South Tyneside Homes' activities. It brings together residents from a range of schemes to influence decision making across the organisation. Residents have been involved in:

- Social events, giving everyone a chance to get to know each other
- Drawing up their own Terms of Reference
- Policy consultations
- Support planning for Decent Homes standards.

The SIG ensures that residents are:

- Informed about any changes that affect sheltered housing residents
- Involved in solving problems identified by residents or South Tyneside Homes
- Able effectively to take part in decision making by being well informed and ensuring decisions are made in a democratic manner
- Part of a dedicated forum where they can be consulted on specific issues
- Involved in monitoring performance and have the necessary tools, training, and information to do so.

Outcomes

- The work of the SIG has fed into wider policy decisions on Decent Homes
- It has helped to develop closer working with staff
- It has given residents the opportunity to spend time with staff and other residents in formal (SIG meetings) and informal (social lunches) ways
- Highlighted the importance of long-term commitment from staff, managers and residents to build trust and respect – this will not happen overnight!

Residents' feedback should be considered an expert opinion. It may be necessary, however, to enable this opinion to be heard through consultation or involvement. The new social housing regulator, the Tenant Services Authority (TSA) requires providers to not only offer opportunities for involvement in the management of their homes, but also to support residents and build their capacity to make meaningful use of those opportunities. Whilst residents may say that the idea of consultation does not appeal, they may openly discuss their views when asked. Offering a range of levels of opportunity and commitment, can better reflect the diversity of sheltered residents' backgrounds and life experiences. Other ideas include:

- Taking part as a member of a tenants' telephone panel, or
- Becoming a Resident Service Inspector, or
- Joining a tenants' forum.

Good Practice Snapshot – South Wight Housing Association (SWHA): Older People's Forum

In 2006, SWHA developed a forum for people aged 55 and over. Membership includes residents from sheltered housing, extra care, and older people living in the community who receive a support/care service.

Outcomes

- Brought together Supporting People, Age Concern and the Primary Care Trust (PCT) to consider changes in Supporting People funded provision
- Residents asked Supporting People and PCT staff about future services
- Discussed local hospital discharge policy around supporting residents to remain independent
- Residents have gained confidence from inviting regular guest speakers to participate in a range of discussions that they wish to influence
- Provides opportunities for socialising and sharing experiences
- Provides a clear route for statutory bodies to work locally with older residents to consider wider social care and Supporting People issues.

Top Tips

- Although legal requirements are the minimum providers need to achieve, setting higher standards may better reflect what residents want
- Be clear with all those involved in consultation exercises what the parameters are each time, and how their views will be taken into account
- Establish and support a clear, sustainable structure for residents to have an input into the decision making processes, and provide feedback to all residents about this
- Review and identify opportunities for residents to take on any existing decision making powers over issues currently decided by staff.

3. Encouraging and Valuing Older People's Involvement

Summary

This section highlights the importance of honesty and openness, as well as listening to and valuing contributions from residents. It considers how to attract and involve hard-to-reach groups and the benefits of doing so. The good practice snapshots demonstrate different ways of implementing these ideas.

One question that can occur is whether involving sheltered housing residents is, or should be, any different from that for younger residents. On the one hand, older residents should be treated like any independent adult. On the other hand, it is essential to be sensitive to different needs if involvement is to be effective.

Of fundamental importance is whether older people feel valued and believe that they can make a difference. Providers may not be alone in assuming older residents don't want to be bothered: families, friends, advocates and carers can be powerful allies in involvement and consultation, but may initially react negatively. There may be tensions within the residents group which inhibit some residents from getting involved. If these arise from an underlying issue such as anti-social behaviour by a resident, this needs to be addressed first.

3.1 Barriers and Solutions

3.1.1 "It's a waste of time...."

It may be difficult for residents to put themselves forward if the prevailing attitude amongst their neighbours – their peer group – is that this is a waste of time. Residents may fear being seen as the provider's representative rather than reflecting the interests of other residents. Clearly defining the role of resident representatives and offering training and support to potential volunteers can help dispel these fears. A clear definition also reinforces the representative nature of the role, so discouraging individuals from focusing narrowly on their own concerns:

Good Practice Snapshot - Central & Cecil: Defining the role of resident representatives and providing support

The role of Residents' Forum Representative is to:

- Act as a part of a consultation body
- Provide a means for residents to communicate complaints and concerns
- Put forward agenda items to be raised at Trust committee meetings
- Represent the "resident perspective" and the views of schemes
- Recommend resources to support the Resident Participation Compact and review these annually
- Operate at all times within the context of policies set by Central & Cecil and in particular the Equal Opportunities, Confidentiality and Health and Safety Policies, and have copies of these policies supplied to members
- Attend regular forum meetings - if a representative does not attend three consecutive meetings of the Residents' Forum, she/he will be asked to explain their non-attendance and may be asked to resign
- Have the opportunity to become a Resident Committee Member and become elected to the board
- Feedback to other residents on issues and information discussed at the Residents Forum
- Hold regular Resident Forum Representatives 'surgeries' where residents can discuss their views in private.

For some residents, it is the scheme manager who will provide support to get involved, so it is vital these staff members are knowledgeable and well-supported. Residents may sometimes turn to scheme managers inappropriately: for example, to discuss issues where there is a conflict of interest. Introducing an independent consultant or a known and trusted local agency such as Age Concern to work alongside residents can be helpful in these circumstances. It is important to ensure that promoting involvement is seen as everybody's responsibility and not left to specialist resident involvement staff. Involvement and engagement needs to be part of the whole organisation's culture.

Good Practice Snapshot - Pennine Housing 2000: A Resident Involvement Culture

Pennine Housing 2000 has established a range of strategic and operational resident participation arrangements, to ensure that services are driven by the needs and aspirations of residents. Culturally, the commitment to resident involvement is “mainstreamed” throughout the company, which means all staff hold responsibilities to ensure residents’ views influence service provision.

At the strategic level, residents are represented on the Board of Pennine Housing, whilst a long-established, independent Residents Federation also influences strategic decision-making. Other strategic level arrangements include:

- A Residents Compact setting out the policy on resident participation
- The Supported Housing Older People’s Forum, made up of resident representatives from sheltered and extra care housing schemes and customers of the floating support service, and a Resident Board Member. The Forum is consulted on service-wide matters, undertakes an annual service quality assessment, and identifies priorities for improvements which are then incorporated into the annual Service Improvement plan
- An annual event for residents to take part in disabled action planning.

Staff attitudes as well as their training are crucial for these approaches to succeed: “You can tell if staff are doing resident participation just because they have to or if they believe in it” (Elaine Penton, Mendip Housing resident).

3.1.2 “They don’t want to be involved...”

Another barrier to tackle is the assumption that older people don’t want to be involved. Applying standard involvement and engagement methods can reinforce this belief if there is little response from residents:

Research Findings

“Older people do want to get involved, but on their terms. Often no allowances are made for their needs – it’s up to providers to find flexible ways of involving them”. (from Riseborough, M (1996) Listening to and Involving Older Tenants)

This research found that different priorities and changing outlooks amongst older people may affect their willingness to join in certain long-term tenant involvement activities. Dealing with poor health may mean frequent hospital appointments and limited availability, or simply days where residents don’t ‘feel up’ to getting involved. It is essential for providers to guard against turning to the same people to join committees, as this will not ensure a representative view, and puts pressure on participating residents who may then feel they cannot refuse.

One obvious answer is to offer a range of involvement activities. Providing a variety of ways to get involved can help guard against overloading or otherwise relying on only one or two individuals, whilst a range of options creates more opportunities for residents to contribute and so feel valued:

Good Practice Snapshot - Lancaster City Council: Options for involvement

- The Sheltered Housing Forum
- Sheltered Housing Compact
- Sheltered Housing Walkabouts
- Representatives on the District Wide Tenants Forum (DWTF)
- Sheltered Housing Newsletter.

Outcomes

- Sheltered housing residents can choose how to be involved in influencing matters where they live, as well as in wider policy and decision making
- The organisation-wide commitment to resident involvement is reflected in all key strategic documents.

Participation can also be developed through existing activities such as via Residents Federations. These formal structures can prove surprisingly useful for the purposes of involvement, especially if they operate in a democratic and accountable way:

Good Practice Snapshot – Cross Keys Homes: Residents’ Forum

Residents of every sheltered scheme elect two representatives each year to represent their scheme at bi-monthly forum meetings with members of the supported housing staff team. This format ensures residents are consulted and involved in policy and procedure setting, future developments, and in the continual improvement of the existing sheltered housing service.

Outcomes

- Best practice visits to other housing associations and of recognised good practice were carried out. A report submitted to the forum has become the blue print for developing Cross Keys Homes’ sheltered housing service
- A number of residents have been trained in carrying out staff interviews. All interview panels within Cross Keys Homes now involve a resident
- Residents were involved in the development and appointment of a new post – the Independent Living Co-ordinator – to work with and across sheltered schemes as well as with the wider community
- Residents have influenced the Decent Homes programme by meeting with contractors in groups and one-to-one, to discuss and agree on scheme improvements, giving consideration to group and individual needs.

Some sheltered housing residents may be better engaged through less direct routes – the POPPIE Project described below shows how a wide range of health related activities has captured the interest of many residents, increased overall involvement, and had many beneficial health improvement effects:

Good Practice Snapshot: Sheffield Homes - The POPPIE Project

Rose Court residents took part in an “Active Ageing” study - the POPPIE Project. Run by Sheffield Homes and Sheffield’s two universities, using funding from Europe, Sheffield Health & Social Research Consortium, and the Foundation of Nursing Studies, it aimed to promote and encourage health and well being.

Outcomes:

Sheffield Homes developed a range of healthy living initiatives, including:

- **Health Day.** This also involved working with the Primary Care Trusts, Age Concern and the RNIB
- **Activity Sheffield.** Residents took part in the audit of older people’s needs and opportunities for exercise
- **Active Friends.** This initiative involved close working with the City Council, Primary Health Trust and some community projects to overcome isolation and get people active through shopping, bowling or dancing
- **Healthy Ageing.** Each Sheltered Scheme was provided with pedometers, ‘Help the Aged’ light exercise charts and videos, and Indoor Bowls sets. Sheffield Homes working with Agewell led to the setting up of an activity group with residents at every scheme
- **Importantly,** as a result of more active people, fewer demands on GPs and the health service were noted.

3.2.3 “What they want is just not possible...”

If involvement and consultation is effective, residents will feel they have participated, contributed and most importantly of all, been listened to. It may not always be possible to provide exactly the solution residents want, but it is always possible to listen to and consider their views. Make sure residents know and understand how the final decision was reached (including how their views were considered).

One key issue has been the development of different models of sheltered housing, which can lead to either changing or abolishing the role of the scheme manager. Many residents have complained about what they perceive to be a lack of genuine consultation over this issue, which provokes strong emotions. Sometimes, issues for consultation are out of the provider’s control – for example, if a local authority decides to change the funding for services. This will fundamentally affect providers’ ability to consult effectively with residents:

“The Housing Association wrote and said this is what’s going to happen because the Council decided – you didn’t have any choice.” (Extract from Nobody’s Listening, 2009)

Providers and commissioners can, however, successfully consult and involve residents on complex, controversial issues even when existing constraints mean it may not be possible to meet residents' demands and expectations by:

- Honesty and openness – if changes are necessary, set this out from the start; share new information with residents as soon as this is available
- Be clear about what residents can – and cannot - influence
- Enlist your residents' help to find innovative or creative solutions
- Make residents central to the review from the start so their fears are not ignored. Listen and respond to residents
- Work with residents at their pace, building confidence and trust first
- Ensure residents are full members of any Project Team
- Make clear that co-working with residents is a long-term commitment.

3.3.4 Reaching the 'Hard to Reach'

All residents need to have equal opportunities to be involved, which means making sure information or services are delivered in a way that meet residents' particular needs. By not including hard-to-reach residents, opportunities to improve the services they receive may be missed because of a lack of feedback. It also means potentially missing out on another source of good ideas. The first task is to identify who is 'hard to reach' within each sheltered housing service:

- is it groups or individuals?
- are they just exercising their right not to become involved?
- is this changing?

The foundation of involvement and consultation is good quality, two-way communication. It is important to offer a range of communication methods to reach as many residents as possible. Scheme managers can often provide invaluable details about this. It is essential to avoid the temptation not to include those residents whose communication preferences are more difficult or time-consuming. Factors to address include whether people:

- do not read or write, or prefer telephone calls to letters
- like to have other family members present
- need support navigating the choice-based letting process
- prefer to meet face-to-face.

Good Practice Snapshot - Rooftop Housing Group: working with Gypsy, Roma and Travellers

In Worcestershire, Rooftop Housing Group identified that their main BME group was the Gypsy, Roma and Traveller Community who had moved into social housing in the Vale of Evesham due to ill health and old age.

Outcomes

- As a result of consultation about the difficulties experienced when Gypsies and Travellers move into bricks and mortar accommodation, Rooftop employed a support worker to help residents settle in their new homes and integrate with the wider community
- Monitoring forms have been adapted so that Gypsies, Roma and Travellers can record their ethnicity
- The Worcestershire Gypsy, Roma and Traveller Partnership (WGRTP), including some members from a Gypsy, Roma and Traveller background, produced a booklet *The Forgotten Minority: Gypsy and Travellers*
- WGRTP hosted a working lunch for the media to explore how they can work positively with the Gypsy, Roma and Traveller community and support an annual event to celebrate the Gypsy, Roma and Traveller history month at Hartlebury Museum.

'Younger-older' sheltered residents are often perceived to be hard to reach, as are other groups such as women in Asian communities:

Good Practice Snapshot - Gateway Housing Association: Engaging Hard to Reach Groups

In London, Gateway Housing Association developed a set of standards for sheltered housing in consultation with the Sheltered Housing Residents Forum, using older people to facilitate focus groups in each scheme.

Outcomes

- Development of clear service standards, incorporating residents' views
- Residents and other volunteers from the borough wide Older People's Reference Group were trained to facilitate the focus groups on service standards in each scheme. This encouraged the involvement of younger older people and women from Asian communities, and means trained resident facilitators are now available to work with other older people
- Residents who had not previously been involved have become active.

Top Tips

- Be clear about matching what you want to achieve to residents' needs
- Challenge assumptions that older residents do not want to get involved
- Show that you value residents' input by listening, considering their views, and keeping them informed about progress and outcome
- Provide clear information about the background to consultation issues
- Identify your hard to reach groups and adapt to meet their needs
- Be aware of the positive impact of relationships between residents, staff and advocates/carers
- Offer a range of ways to get involved.

4. Case Studies

Summary

Three in-depth case studies illustrate a range of good practice:

1. **Mendip Housing** – involved residents as soon as the need for change first started to be considered
2. **Hanover Housing** – developed local agreements with residents to ‘marry’ individualised services with a broader agreement on estate services
3. **Derwentside Homes** – involved residents in remodelling their homes including influencing decisions on investing £5 million in services.

4.1 Mendip Housing: Working with residents to change a service

Mendip Housing is a registered social landlord based in mid-Somerset. It provides housing and support to residents living in 21 schemes.

In early 2008, Mendip Housing began its work to involve residents in proposals to transform the traditional sheltered housing model to a new range of floating support services. This was triggered by a concern that spending resources on residents with no support needs living in sheltered homes was wasteful, and potentially deprived others in the wider community of support they might need.

Consultation with residents began with the Residents Forum. It quickly became clear that Mendip Housing needed to explain why it believed sheltered housing should change. Residents agreed that current arrangements were unfair but, whilst they could see the benefits of a person-centred approach, they were fearful of what the changes might mean for those already receiving support. Mendip’s first step was to record the views of residents and staff on a DVD, which was then shared and viewed as required.

This DVD helped to air different points of view. There was support for the logic behind the move away from residential wardens to seeing each scheme as a ‘hub’ with wider community use; but residents were concerned that, by developing schemes into being a wider community resource, the ‘community spirit’ in each scheme would be lost.

During 2008, Mendip Housing increased the range and number of activities that brought residents together. Examples included an inter-Scheme Olympics and monthly activities open to all, such as painting, dominoes and darts, knitting, crafts and quizzes. Regularly bringing residents and staff together meant confidence and trust were built up. Residents began to express a new view that the proposed changes would be beneficial, both to them and the wider community.

In December 2008, Mendip Housing made and issued a second DVD, focusing on making the new changes work and exploring how residents would influence the new service over time. Residents began to work with the Support Services Project Team to establish the new approach. They agreed new job descriptions and prepared information about the changes and new services for other residents. A new resident’s handbook was developed.

Outcomes – Empowerment and Other Benefits

The main outcome was the empowerment that arose from residents being involved at the beginning, and being able to influence and shape the service as it was being developed. As a result of the changes:

- The new person-centred service is more focused on the needs of vulnerable residents both within the scheme and the wider community
- There is a new link with younger people and learning disability services
- More older and disabled people have been able to access support services and overcome isolation.

Benefits for Residents

- Staff no longer 'living-in' is seen as promoting greater independence
- Services are tailored to individual residents' needs
- Greater emphasis on referring people to other appropriate agencies
- Residents can access a wider range of services and support on top of those activities that existed prior to the changes
- There is far more contact with people who live outside the scheme.

Other Benefits

- The former resident wardens have been able to make a clear distinction between their home and work lives
- Staff are now part of a wider team working around supported housing
- The accommodation formerly used by wardens has been re-developed for younger people with learning disability challenges
- The move to using schemes as 'hubs' benefits the wider community, more of whom now receive Mendip Housing's support services.

4.2 Hanover: Local Agreements

Hanover provides over 19,000 properties across nearly 700 estates, offering Retirement and Extra Care housing for rent, leasehold or shared ownership sale. As part of its work to move towards personalised support, it has developed a system and process of Local Agreements. These:

- form a written agreement between Hanover and the residents of each particular estate, covering the services provided
- set out which services can and cannot be provided.

The aim is to give residents as much choice as possible in determining local service levels. Local Agreements are developed in several phases

- **Phase 1** – initial discussions with residents on the estate. The contents of the Local Agreement will change over time as the process of defining the content is driven by the residents. The initial agreement clarifies the services to be provided on an estate. For example, the section on repairs will include the list of contractors residents agree will be used for their estate, as well as information on annual budgets.
- **Phase 2** – involves residents looking at services with their Estate Managers. They review elements that residents have identified as areas for improvement. This may include discussions on the Estate Manager Service, catering service, estate contracts (such as cleaning or gardening), hairdressing, shop and other services, social and leisure activities, and the wider community interaction with the estate.

These Local Agreements record and define services, then review and amend them in accordance with residents' needs.

Outcomes - Empowerment and Other Benefits

Residents are empowered by having a choice over the services used or needed by everyone on their estate which promotes independence, and balancing this with services that are needed by individuals with varying support needs:

- The introduction of Local Agreements reflects Hanover's commitment to providing personal services to residents. It marries the estate-wide services to individual choices that best meet residents' needs
- Hanover use four steps to achieving a good relationship with residents:
 1. Providing clarity to allow choice
 2. Engaging residents in determining quality, standards and priorities for improvement
 3. Offering new opportunities for rent and home ownership
 4. Helping residents to do the things they want.

Benefits for Residents

- Provides an on-going review of estate- or scheme-wide services
- Builds on individual choice to 'marry' community provision with the personal care and support needs.

Other Benefits

- Hanover can develop services that meet the estate or scheme choices made by residents
- Personal needs dovetail with the wider community needs and choices.

4.3 Derwentside Homes: Reviewing Sheltered Housing

Derwentside Homes is the main social housing provider in the District of Derwentside, Co Durham. It was set up in December 2006 following residents' decision to transfer the housing stock from Derwentside District Council.

In January 2007, Derwentside Homes commissioned a report by resident participation experts TPAS to appraise the options available for the future of its eight units of accommodation providing independent living for the over 55s (formerly known as sheltered courts). The average age of residents moving in during 2005 - 2006 was 76 years old, compared to the average over the previous decade of 72. Derwentside Homes wanted to look at five options:

1. Remodeling
2. Extending
3. Demolition and Rebuilding
4. Changing Client Groups
5. Joint Working with Care Providers and Social Services.

The TPAS report made clear that any proposal needed the full, effective and meaningful involvement of current residents for outcomes to be successful. Derwentside drew up detailed plans following an in-depth consultation period with residents. Residents were asked their views on how the £5million budget should be spent, which included getting the right balance between improving existing communal areas and developing new facilities.

As a result of the consultation with residents, two units are being transformed from bedsit-style accommodation into one and two bedroom flats.

Five other schemes are also being refurbished through a programme of works including upgrades to communal areas and individual flats.

The schemes will also be updated to reflect current lifestyles and promote independent living for those aged 55 and older. This includes the provision of a wet room, and a multi-functional room used by an on-site hairdresser or chiropodist, and a state-of-the-art IT suite.

One scheme - Delight Court in Dipton - now has a new computer room, conservatory, improved disabled facilities, and a larger laundry room and enhanced shower facilities. One of Derwentside's long-standing residents, Sylvia Pickard, said: "Everyone's been so impressed with the improvements. I am a former secretary, and like to use the computers to type letters. One of the residents who has family in Germany and Canada uses the computer to stay in touch with her relatives."

Outcomes - Empowerment and Other Benefits

The main area of empowerment arose through involving residents in decision-making over the allocation of the £5million budget:

- The developments improved the overall quality of accommodation and offer greater well-being to residents through better facilities
- Disabled access and facilities were significantly improved.

Benefits for Residents

- They appreciated influencing what happened to their scheme and home
- Residents felt the best option was chosen and implemented.

Other Benefits

- Derwentside Homes addressed its Decent Homes challenges across all eight schemes
- The schemes are better places to live - making them easier to let, manage and maintain.

5. Conclusions and Key Messages

Six key messages have emerged:

5.1 The importance and value of being involved

Involvement adds value in many ways for all stakeholders. Resident satisfaction and well-being increases. Effective involvement leads to a greater sense of 'ownership' by residents and staff. Staff job satisfaction increases as they work with residents to achieve what is needed.

Providers gain from closer partnership working and a raised profile with other services as well as in the wider community. Listening to residents' feedback supports work to improve current services, and explore and plan future needs. Conversely, there are now greater risks for providers who do not involve their residents. Regulators have monitored involvement levels for some time, but it is now central to the new TSA regime. Sheltered residents have in the past mobilised effectively against service developments they have not felt consulted about. The resultant publicity and legal challenges are a powerful illustration of the effects of not involving residents effectively.

5.2 Establish a Range of Options

A range of ways for residents to get involved ensures providers capture the input and reflect the diversity of the greatest possible number of residents. Informal scheme-based and social opportunities are important, particularly for frailer residents. Dedicated forums addressing relevant issues are a valuable mechanism for bringing older people together, and can also be used to address issues of wider concern and become a focus for meaningful consultation.

5.3 Continuum of Involvement

By offering a range of options there is a continuum of involvement stretching from basic information-giving, to delegated decision-making. Building and sustaining constructive relationships, and setting clear parameters or boundaries, are necessary at all stages. Although there needs to be a continuum of involvement this does not mean there is a hierarchy in which some involvement methods are better than others; rather, it is the appropriateness of the method which counts.

5.4 Scope and Scale of Decision Making

Decision making is an empowering process. Providers need to review and challenge which decisions can be delegated to residents. As some residents become older the range of decisions over which they want control may change, but continuing to support decision-making is important. Larger-scale decision making (such as investment and re-modelling of schemes) needs to be supported by clear information and a full explanation of the alternatives.

5.5 Influencing External Bodies

As many external bodies are now stakeholders in sheltered housing, the positive impact of involving residents can influence them in many ways. Many external bodies welcome the opportunity to access or consult an existing group of older people. The provider's profile is raised when external bodies are invited to attend forums or similar events, partnership working is supported and further developed, and residents enabled to influence service and policy development in related fields with other organisations.

5.6 Resourcing

Providers need to adopt a strategy of involving and engaging residents which is central to all work and has the 'buy-in' of the whole organisation. The resources required need to be identified and budgeted for. Capacity building of both residents and staff may involve training, support to attend events, and access to computers. Independent advocates or advisers may be needed.

Time, energy and commitment are invaluable resources: providers need to capitalise on where ever these exist in their organisation.

6. Developing Your Own Good Practice

There are six key elements to developing good practice:

1. Review Your Current Practice

- Review what happens now, formally and informally. Resist altering long-standing arrangements to which residents feel committed
- Identify your hard to reach groups
- Are there any initiatives that have worked well or other agencies successfully engaging your residents?
- Are there particularly enthusiastic and committed staff who could act as positive role models?

2. Clarify Your Objectives

- What are your strategic objectives for involving sheltered residents?
- Does the strategy include building relationships as well as establishing structures?
- What are the parameters of the involvement?

3. Be Prepared

- Be prepared to work through reactions like hostility and apathy. Find out why any previous attempts to involve or consult residents were unsuccessful, and check if those reasons might reoccur. Brief all staff involved and allow sufficient time to explore objections
- Identify the political dimension especially if consulting on controversial proposals e.g. closing a sheltered scheme. If the decision is to be made by politicians or staff in other organisations, what do you know about their views? How can you best seek to influence them?
- Develop involvement at residents' pace - start early and build this up.

4. Know Your People

- Residents are the experts on your service; capitalise on this while remaining sensitive to the range of residents' needs and abilities
- Staff attitude and commitment are as important as skills, support and training all those involved - consider an enhanced role for those who are very positive e.g. Involvement Champions
- As well as resident profiles, support plans and other written records, consider the culture and relationships in each scheme
- Capitalise on the interest and talents of both residents and staff
- Provide information, training and support for all to become involved
- Find out who is important in residents' lives e.g. carers or relatives and include them appropriately and at times convenient to them.

5. Learn From Others

- Residents will be frustrated if you cannot give clear answers based on experience. However, if consultation involves new areas e.g. new service models⁴ - look externally for other examples if this is not available within the organisation. Find out if others have gone through similar consultation exercises and invite them to attend meetings or provide feedback based on their experiences and knowledge - use your own networks.

6. Sustainability

- Look to the future in terms of how you deliver the service or modernise the buildings and how you develop resident involvement. This is particularly important if you are moving away from support staff based on site who are likely to have been an important point of contact for involvement activities
- Consider how to avoid over-relying on a small number of residents
- Offer flexibility in how residents can get involved and build in review processes so they develop to reflect changing needs and aspirations
- Work to ensure resident involvement is embedded in the culture of the whole organisation.

7. Further Information

7.1 Providers featured in this Guide

Central & Cecil Housing Trust - www.ccht.org.uk
Cross Keys Homes - www.crosskeyshomes.co.uk
Derwentside Homes - www.derwentsidehomes.co.uk
Gateway Housing Association - www.gatewayhousing.org.uk
Hanover - www.hanover.org.uk
Lancaster City Council - www.lancaster.gov.uk
Mendip Housing - www.mendiphousing.co.uk
Pennine Housing 2000 - www.tph.org.uk
Rooftop Housing Group - www.rooftopgroup.org
South Tyneside Homes - www.southtynesidehomes.org.uk
Sheffield Homes - www.sheffieldhomes.org.uk

7.2 Other organisations

AIMS
Age Concern England
1268 London Road
London SW16 4ER
Tel: 020 8765 7465 or
lo-call helpline: 0845 600 2001 (9.30am-4.30pm Mon-Fri)
Email: aims@ace.org.uk
Web: www.ageconcern.org.uk/aims

Association of Retirement Housing Managers (ARHM)

Southbank House
Black Prince Road
London SE1 7SJ
Tel: 020 7463 0660
Web: www.arhm.org
Email: enquiries@arhm.org

Centre for Housing and Support

1st Floor, Elgar House
Shrub Hill Road
Worcester
WR4 9EE
Tel: 01905 727272
Web: www.chs.ac.uk
E-mail: info@chs.ac.uk

Essential Role of Sheltered Housing (ERoSH)

PO Box 2616
Chippenham
SN15 1WZ
Tel: 01249 654249
Web: www.shelteredhousing.org
E-mail: info@shelteredhousing.org

Tenant Participation Advisory Service (TPAS)

5th Floor
Trafford House
Chester Road
Manchester, M32 0RS
Tel: 0161 868 3500
Web: www.tpas.org.uk
E-mail: info@tpas.org.uk

Tenant Services Authority (TSA)

Maple House
149 Tottenham Court Road
London
W1T 7BN
Tel: 0845 230 7000
Web: www.tenantservicesauthority.org
E-mail: enquiries@tsa.gsx.gov.uk

7.3 Further reading

Age Concern AIMS Resident Involvement.
Resolve. Issue 13 July 2007

AIMS Consultation/Ballot Counting Service Information Factsheet, May 2009

AIMS Scheme Managers: Changing from a Resident to Visiting Scheme Manager on Leasehold Retirement Schemes Information Factsheet, May 2009

Audit Commission/Housing Corporation Housing Briefing (undated) Housing: Improving services through resident involvement.

Centre for Housing and Support (2006) Scheme and Service Reviews Good Practice Guide. Issue 3 Cornwall: Cornwall College

Chartered Institute of Housing (Professional Practice Team) Feb. 2008. Customer Insight: Knowing your Customers. Good Practice Briefing. Issue 32 Coventry: CIH p7 (Collecting the right information)

Chartered Institute of Housing (2010) Complaints. Coventry: CIH

Department of Health (2007) Putting People First: A shared vision and commitment for transformation of Adult Social Care HM Government

Department of Health (2010) Personalisation Network <http://www.dhcarenetworks.org.uk/personalisation/>

Housing Learning and Improvement Network and TPAS (forthcoming briefing) Putting People Centre Stage

Thompson L & Parry I (2005) Sheltered and Retirement Housing: A Good Practice Guide Coventry: CIH

TPAS (2003) Criteria for Recognising Tenants' and Residents' Associations Factsheet

TPAS (2005) Running a Tenants' Association. Factsheet

TPAS (2006) Setting up a Tenants' and Residents' Association. Factsheet

TSA (2009) A new regulatory framework for social housing in England: A statutory consultation

Annex - Legal and Regulatory Duties to Consult

The legal duties to consult and be consulted are outlined below.

Housing Act 1985 (section 105)

The main legal requirement to consult sheltered housing tenants relates to the landlord obligation to consult about changes to housing management arrangements as laid out in the 1985 Housing Act.

Local Government Act 1999

Local Authorities have a statutory duty to have Tenant Participation Compacts – agreements set out between local authorities and their tenants. Under the duty of Best Value (Part 1 of the Act) local authorities must show that its services have been influenced by resident's views and provide the best possible value⁵.

Compacts and Housing: "Tenants must be at the heart of decisions about their services and the future of their homes. If services are to improve, they must reflect tenants' needs and priorities and tenants' views should influence and shape the planning and delivery of those services." (ODPM 2005: 10-11)

Compacts involving everyone: "Councils must have arrangements in place to consult and involve tenants who are not involved in formally recognised groups and make a special effort to reach those tenants who do not normally get involved. This means making an assessment of the barriers to involvement and planning action to overcome those barriers." (ODPM, 2005: 14)

Boyajo & Ors, R (on the application of) v Barnet London Borough Council [2009] EWHC 3261 (Admin) (15 December 2009)⁶

The judicial reviews sought of the decisions by Portsmouth and Barnet Councils to replace their resident scheme manager services have now been completed. Included within the judgment was the legal duty to consult with disabled people under the Disability Discrimination Act 2005.

Disability Discrimination Act 2005

Every public authority shall in carrying out its functions have due regard to-

- the need to eliminate discrimination that is unlawful under this Act;
- the need to eliminate harassment of disabled persons that is related to their disabilities;
- the need to promote equality of opportunity between disabled persons and other persons;
- the need to take steps to take account of disabled persons' disabilities, even where that involves treating disabled persons more favourably than other persons;
- the need to promote positive attitudes towards disabled persons, and
- the need to encourage participation by disabled persons in public life.

Importantly, the judgment made reference to consultation and a summary of these points is below⁷ :

1. There is a duty to consult properly
2. Consult when proposals are at the formative stage
3. Reasons for proposed changes should be given
4. Options should be given including the option to do nothing
5. Sufficient time should be given
6. Full information should be given, not partial.

Leaseholders

If any party wishes to make amendments to special services⁸ they must check the wording of the lease, which will set out three main options. It may say that:

1. There must be a resident scheme manager (or warden or caretaker); or
2. There needs to be a scheme manager, but not specify residency; or
3. The lease may be silent on the issue.

Any variations to these services first need to seek the approval of all leaseholders by means of a ballot to ensure 100% agreement to the changes. Where special services have been provided through custom and practice (rather than by specification within the lease). Leaseholders must still be consulted about any changes to these practices in accordance with Section 6 of the ARHM Code of Practice (see section 7 of this Guide for contact details).

Regulation of Providers

Housing Corporation Regulatory Code and new Standards

The Housing Corporation was replaced by a new social housing regulator called the Tenant Services Authority (TSA) in December 2008. The Housing Corporation's Regulatory Code⁹, which remains in place until March 2010, sets out clear objectives for Housing Associations regarding resident consultation:

- Must seek to be responsive to residents' views and priorities
- Reflect these interests in their business strategies
- Give residents and other stakeholders opportunities to comment on their performance
- Provide opportunities for residents to play their part in decision-making over how services are managed and provided.

From April 2010, the TSA will operate a new regulatory framework based upon six key outcome-focused standards covering Tenant Involvement and Empowerment; the Home; Tenancy; Neighbourhood and Community; Value for Money; and Governance and Financial Viability¹⁰.

Residents will be at the core of the new co-regulation regime. The TSA will set the national framework of standards that providers will need to meet. In doing this, tenants and landlords will need to work together to determine how these outcomes should be achieved. The primary focus for discussions on service delivery and improvement should be between providers and their tenants rather than between the regulator and the provider;

The Audit Commission's Key Lines of Enquiry (KLOEs) will be revised to reflect the six new standards.

Audit Commission's Key Lines of Enquiry (KLOE)¹¹

Supported Housing (including Sheltered Housing)

Questions and statements set out in the KLOEs provide consistent criteria for assessing and measuring the effectiveness and efficiency of housing services. For service user involvement, questions include:

- How does the level of resources and training for service users demonstrate the organisation's commitment to resident involvement?
- Is there clear evidence that service user involvement has led to improved services and outcomes?
- How have service users involved in consultative groups been chosen?
- Are methods of involvement appropriate for service users?

Quality Assessment Framework (QAF)

Supporting People Teams use this tool to assess the quality of housing-related support services provided. C1:5 covers Client Involvement and Empowerment:

- There is a commitment to empowering clients and supporting their independence. Clients are well informed so that they can communicate their needs and views and make informed choices. Clients are consulted about the services provided and are offered opportunities to be involved in their running. Clients are empowered in their engagement in the wider community and the development of social networks.

The Centre for Housing and Support - Code of Practice for Housing-related Support¹²

This is an independent quality award for housing-related support services, including sheltered housing, designed to raise and monitor standards within the sector, and links to the Quality Assessment Framework (QAF):

Standard 1: Service Delivery, Review and Continuous Improvement

To demonstrate the organisation's commitment to quality assurance and continuous improvement through clear performance indicators for housing related support services, regular service reviews, and the monitoring of consistency of delivery across the service

1.5 The organisation is committed to involving service users, their families/advocates and other key stakeholders in performance management, continuous improvement and service review.

Standard 4: Rights and Responsibilities

To demonstrate the organisation is committed to promoting service users' rights, consultation, participation, choice, and involvement

4.1 Service users are clear about the service user, service provider, their rights and responsibilities and (where appropriate) the landlord's rights and responsibilities.

Standard 6: Independence and Empowerment

To demonstrate the organisation's commitment to the promotion of independence, and to empowering service users to participate, direct their own lives and engage in the wider community

6.1 The organisation proactively promotes choice, independence and empowerment taking into account service users' views, goals and aspirations.

6.4 Independence and empowerment is promoted through appropriate skills training.

References

- 1 Help the Aged (2009). *Nobody's Listening*. London: Help the Aged
- 2 Communities and Local Government Committee (2009). *The Supporting People Programme (HC 649-I)*. London: The Stationery Office
- 3 For types of service delivery model, see: National Housing Federation (2010). *More than just a few kind words! Reshaping Support in Sheltered Housing*, Cornwall: Cornwall College Group
- 4 Types of service delivery models are identified within the sister document *More than just a few kind words! Reshaping Support in Sheltered Housing*, National Housing Federation (2010)
- 5 Office of the Deputy Prime Minister (2005). *Tenant Participation Compacts – A Guide for Tenants*. London: ODPM. See also ODPM (2005). *National Framework for Tenant Participation Compacts*
- 6 For full judgment see <http://www.bailii.org/ew/cases/EWHC/Admin/2009/3261.html>
- 7 See paragraphs 67, 70 and 72 of the judgment <http://www.bailii.org/ew/cases/EWHC/Admin/2009/3261.html>
- 8 Defined in the ARHM Code of Practice as Scheme Manager service, emergency alarm system and link to monitoring centre and communal facilities - see www.arhm.org/code_of_practice.cfm
- 9 Housing Corporation (2005) *The Regulatory Code and Guidance*. London: Housing Corporation
- 10 For the full consultation document see <http://www.tenantservicesauthority.org/server/show/nav.14649>
- 11 See www.audit-commission.gov.uk/housing/inspection/Keylinesofenquiry/Pages/default.aspx
- 12 See www.chs.ac.uk/index.php?page=_Code_of_Practice&id=2123



The ministerial working group on sheltered housing is chaired by Lord Bill McKenzie of Luton.

The working group was convened by the Department in early 2009 to identify ways to make a positive difference to the lives of people living in sheltered housing, now and in the future. The working group brings together representatives of sheltered housing residents, providers and service commissioners. The following organisations are represented on the working group:

- Age Concern and Help the Aged
- AIMS - Age Concern's housing advice, mediation and information service
- Association of Directors of Adult Social Services
- Audit Commission
- Centre for Housing and Support
- Chartered Institute of Housing
- Department of Health
- Department for Work and Pensions
- Elderly Accommodation Counsel
- EROSH - the Essential role of sheltered housing
- FirstStop advice service
- Homes and Communities Agency
- Local Government Association
- McCarthy and Stone
- National Housing Federation
- Sheltered Housing UK
- Tenant Services Authority
- Tenants Participation Advisory Service