Housing for Older People: Future Perspectives

Executive Summary
SLIOTAR

Sustainable Living Integrating Older people with Technological Advancements in Regeneration Limerick

The research and findings of the SLIOTAR project

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As people age they spend more time in their own homes. This means that older people’s quality of life, and thus their health, can depend on the appropriateness of their home environment and the conditions in which they live. For many, living in adapted or specialist housing reduces reliance on health services and can contribute to a greater sense of wellbeing. Age Friendly Cities and Counties create the opportunities to establish a broad range of housing options which suit all needs and enable older people to stay independent for as long as possible.

I welcome this research report. The Great Northern Haven Housing project in Dundalk provides an excellent example of inter agency cooperation. It is through this kind of collaborative working and planning that we will be better placed to meet the challenges that lie ahead for our older citizens.
Housing policy is primarily about people and their communities. We do need to remember that we are providing homes not just buildings. The vision outlined in the Social Housing Strategy 2020 is that every household will have access to secure, good quality housing suited to their needs in a sustainable community.

Encouraging mixed tenure is important for sustainable communities, as is good planning to allow for social, health, transport and other key services to be put in place. Social inclusion is a key element of our Housing Strategy and appropriate provision for older people will be a key component of our housing programmes for the foreseeable future. While we are very conscious at present of the urgency of delivering new homes, we are equally conscious of the importance of doing so while bearing these issues in mind. The findings from this particular research will be extremely valuable for housing providers when considering the development of an appropriate continuum of housing choices and options for older people.
Government policy is to support older people to live with dignity and independence in their own homes and communities for as long as possible. Services such as Home Help and Home Care Packages are critical to supporting this Government policy and older people’s own preferred wishes to remain in their own homes. These kinds of services also reduce pressure in the wider care system.

The National Positive Ageing Strategy sets out a vision for an age-friendly society and includes the goal to ‘enable people to age with confidence, security and dignity in their own homes and communities for as long as possible.’ In particular the Strategy recognises the role for lifetime adaptable housing, alternative housing options, assistive technologies and linkages between housing and health and personal and social services. The findings identified through this research will therefore be very valuable in informing relevant approaches in this key area.

It is important that no section of the community is left behind in the future delivery of our services. It is particularly important that older people are supported to maintain autonomy, control and independence through living in appropriate housing.
Developments such as the Great Northern Haven have demonstrated how we can enhance the quality of life of older people through the provision of an integrated, community-oriented housing model that incorporates innovations in sustainable housing design, smart living technologies and person-centred community and health supports. This research brings together many of the key learnings gathered through this and other innovative housing and independent living projects and will be a key source of information in pointing the way forward.

The Age Friendly concept resonates significantly with much of the work within the County and City Councils and the communities that they serve. We will need to provide more homes that are ‘lifetime adaptable’, and designed to meet the changing needs of residents over time. The Councils have a particularly important role to play in building communities that are truly age friendly.
Acknowledgements

This research study would not have been possible without significant input from across the housing sector in Ireland and beyond. Age Friendly Ireland would like to thank and acknowledge the many contributors to this report.

We greatly appreciate the help of Rodd Bond and all at the Netwell Centre, at Dundalk Institute of Technology who were so willing to share their knowledge and results with us and Dara McGuigan, Limerick City and County Council, who managed the project from a Limerick perspective.

We would also like to thank each of the case study interviewees for their commitment to this work and their valuable input; from Great Northern Haven and Cúltaca Dundalk, Co. Louth; McAuley Place, Naas, Co. Kildare, the Local Area Coordination service, Thurrock, Essex, UK and the SOPHITAL® project in Bamberg, Germany.

The members of the SLIOTAR research Steering Group, convened by Age Friendly Ireland, to advise on this project brought their invaluable expertise from a range of different fields to the process. We would like to formally thank Rodd Bond, Netwell Centre, Dundalk Institute of Technology; Dave Storey, Louth County Council; Brian Geaney, Sarah Newell and Seamus Hanrahan, Limerick City and County Council and finally, Michael O’Sullivan of Age Friendly Ireland, who undertook the research.

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OUR VISION IS THAT IRELAND BECOMES A GREAT COUNTRY IN WHICH TO GROW OLD
This report presents the research and findings of the SLIOTAR project, which set out to review housing design, assistive living technologies and social interventions used in the Great Northern Haven (GNH) development in Dundalk by comparing them with other national and international case studies of older-person-specific housing projects.

SLIOTAR is an acronym for ‘Sustainable Living Integrating Older people with Technological Advancements in Regeneration Limerick’. The study aims to provide insight into the integrated nature of the GNH project, and to provide guidance to planners and designers charged with the creation of more liveable, sustainable, resource effective and enabling housing solutions for older people. SLIOTAR project partners include Age Friendly Ireland, Dundalk Institute of Technology, the Limerick City and County Council (Regeneration) and Louth County Council.

Established in 2014 as an intermediary organisation, Age Friendly Ireland coordinates the national Age Friendly Cities and Counties Programme. With the assistance of funding from the European Commission Age Friendly Ireland has coordinated this research and will support the dissemination of the findings set out within this report.
It is intended that the findings in this report can assist in informing the development of future older-person-specific accommodation. To this end, this report is targeted at both those who develop policy and housing providers (including Local Authorities, approved housing bodies and private developers); suppliers of assistive technology for older people; and social intervention initiatives.

**Project Context & Rationale**

The Age Friendly Cities and Counties Programme in Ireland has found through consultation with older people in various areas across Ireland, that older people want to stay in their own home and community for as long as possible. However, over time older people may need more care and support and their houses may become unsuitable. Current alternative housing options for older people are limited and this lack of choice can result in unnecessary admissions to a long-term care setting (nursing home), with its associated costs and potential reduction in quality of life. Developing older peoples’ supported housing can provide a viable alternative in many cases.

![Housing-with-care continuum diagram](image)

**FIGURE 2**

Cullen et al. (2007) suggest that many older people can adequately live in mainstream housing; however, a move to ‘supportive housing’ may be required in certain instances.
This supports the concept of ‘Ageing in Place’, whereby older people are supported to stay living in the place they know and are attached to, with the people they know, for as long as possible. Specific housing designed for older people and their support needs, allows older people improved choice as to how and where they will age. The National Positive Ageing Strategy (2013, Department of Health) set out a vision for ageing and older people that will ‘act as a catalyst’ for action. It supports the concept of ageing in place under Goal 3 – “to enable people to age with confidence, security and dignity in their own homes and communities for as long as possible.”

This project supports the argument that by developing housing that meets the needs of older people in the future, significant improvements can be gained by both the older person in terms of quality of life, and also by the State in terms of potential financial economies.

According to the Central Statistics Office, life expectancy at 65 is rising faster in Ireland than anywhere else in the EU. By 2041, there will be around 1.4m people in Ireland over the age of 65; of these, 440,000 will be aged 80 or more – that’s four times as many as in 2006. This predicted increase in the number of older people, will continue to stretch the expenditure of state budgets on long-term care facilities for older people if other alternatives are not fully explored.

According to Home and Community Care Ireland, almost 34% of all people in long-term nursing care have low to medium dependency and as such, could perhaps remain living at home with the support of enhanced home care packages (HCCI, 2014).

The Dublin Declaration on Age Friendly Cities & Communities expresses a clear and strong commitment of political leaders of cities and communities around the world to strengthen and champion action to make their communities more age-friendly. All 31 Irish local authorities have formally signed the declaration, making Ireland the first EU State to declare a national commitment to developing itself as a place where older people can live full, active and healthy lives. Amongst the various principles set out in the declaration, there is a commitment to support housing for older people that is of the highest quality.

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<thead>
<tr>
<th></th>
<th>Hospital</th>
<th>Care Home</th>
<th>Home</th>
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**FIGURE 3** Home is where the heart is (SOURCE: P. McGarry, Valuing Older People (VOP), Manchester).
The signatories committed to undertake a continuous cycle of improvement through a planning process, which is supported by participation in the World Health Organisation’s (WHO) Global Network of Age-Friendly Cities. The anticipated results of these initiatives are more positive ageing, more inclusive and sustainable cities and counties, and more relevant and effective local government, service delivery and business opportunities.

The Age Friendly Cities and Counties Programme in Ireland provides a local multi-agency collaborative structure, in partnership with older people, with local authorities taking the lead on changing thinking about ageing, and how services are planned and delivered.

The Great Northern Haven was developed to promote an independent living environment for its residents, through the fusion of innovative and inclusive housing design, greater social connectivity through the integration of ICT technologies, and improved access to informal and formal supports through service brokerage. Taken together, these elements can strengthen the capability of older persons with higher-dependency needs to remain in their homes and communities, with a positive quality of life, for longer. This provides an opportunity for new alternative models centred on shifting the focus on delivery of care, from long-term care settings to home and community settings.

The Project Methodology

The research for this project focused on identifying good practice nationally and internationally and an in-depth review of the example provided by the Great Northern Haven development in Dundalk.

Methodologies included a desktop study, field visits and interviews with staff in the case-study sites: Great Northern Haven and Cultaca Dundalk; SOPHITAL Bamberg, Germany; Local Area Coordination Thurrock, in Essex; and Mc Auley Place Naas, Co. Kildare, as well as secondary analysis of data gathered in these locations.
Great Northern Haven

The Great Northern Haven is strategically located on Barrack street, close to supports, services and amenities in the centre of Dundalk, Co. Louth. This housing project is a core component of the Nestling Project, a collaborative initiative between Dundalk Town Council, the HSE in the Dublin North East area, and Dundalk Institute of Technology. The initiative was part funded by Atlantic Philanthropies with the additional collaboration of Sustainable Energy Ireland, Ulster University and Dublin City University. The Nestling Project is aimed at transforming communities, environments and technologies to support older people to age-in-place.

**FIGURE 4**
The Great Northern Haven is a housing development comprising 16 apartments, built purposely to support an Ambient Assisted Living (AAL) environment for older people. Each apartment is equipped with ambient sensors and interactive technology. The design allows for physical adaptability of each unit to cater for the changing needs of the residents as they age. Cúltaca provides a number of social connections and interventions in the development, including a ‘one to one’ brokering service to help people make their ‘personal plans’ and to match people with an array of local services available to them.

Residents have lived in the GNH since June 2010. The apartments were allocated to people over the age of 65 who had a health or housing need. Fourteen of the fifteen original tenants are still residents (at March 2015).

Designed to help older people remain in their own homes and communities for as long as possible, the holistic approach of the Great Northern Haven comprises four strands:

1. **Physical Considerations** how the planning and design of accommodation complements the existing character of its surrounding environment, including the use of brownfield sites; how the building implements innovative sustainable energy features; how it applies universal design principles; how it is constructed to accommodate a technical infrastructure that facilitates assisted living; and the importance of its location in relation to existing amenities and facilities.

2. **Technological Considerations** how different technologies can monitor and report on aspects of a resident’s daily life and routines for their increased security and comfort; how assistive technologies contribute to an increase in residents’ independence; and how the technology can increase a resident’s ability to enjoy social interaction beyond the immediate community. On-going ‘action research’ activities within the project are developing and testing sensor technologies that are more ‘aware of a person’s life-pattern context’, supporting possibilities to provide proactive, preventative and predictive services that can open-up new types of interventions that can reduce pressures on health and care services.

*Cúltaca adopts a person-centred approach to meeting the needs of older people by acting as a liaison between statutory and non-statutory services and the older adult and in doing so, aims to address barriers to access, particularly in services that are fragmented and uncoordinated.*
**Social Considerations** how the residents are supported on an individual basis to manage their own lives as part of a community; and empowered to make informed choices about their life and care.

**Cost Considerations** how cost effective, supported accommodation is in relation to European expenditure on Long Term Care (LTC) and in comparison to domestic long-term residential care. Capital costs involved in the construction of older-person-specific accommodation also need to be considered and measured appropriately in comparison to the construction of LTC facilities.
Comparative Best Practice Case Studies

To strengthen insight into these strands, additional case studies were undertaken on examples of current good practice to support the findings at GNH and provide further depth of evidence. These comparative case studies are as follows:

- **McAuley Place, Naas, Co. Kildare** A residential care community designed to place older people at the heart of their community and managed by Nás na Ríogh Housing Association Ltd.

- **Cúltaca** A Louth Age Friendly County Programme initiative that aims to provide information to older people. The Cúltaca’s core feature is its person-centred approach to the support of older people, achieved by working one to one with them in their own home.

- **Local Area Coordination, Thurrock, Essex, UK** A social intervention method designed to foster self-advocacy for all age groups by supporting people on an individual basis and helping them ‘build a vision for a good life’. This is achieved by concentrating expert knowledge of local issues, services and opportunities in key support individuals, who then apply that expertise in a one-to-one relationship with older individuals based on respect and trust.

- **SOPHITAL®, Bamberg, Germany** An Ambient Assisted Living technology that focuses on solutions enabling older people to live independently in their own home by using appropriate wireless technology components connected to a central hub.

The research conducted across the four study sites facilitated the development of eleven recommendations for policy makers/housing providers across the four strands involved ie:

1. Physical considerations (Five recommendations)
2. Technological considerations (Two recommendations)
3. Social considerations (Two recommendations)
4. Cost considerations (Two recommendations)

These **eleven recommendations** are set out under the **four strands** as part of this executive summary.
In this section, the physical aspects of the Great Northern Haven were compared to MacAuley Place, in Naas, to assess commonalities and good practice.

The Great Northern Haven was developed to promote an independent living environment for its residents. It was designed as an attractive development that older people would actively seek to live in rather than have to move into. This sentiment mirrors the aspiration of Nás na Riogh Housing Association in their management of McAuley Place in Naas, Kildare) to provide attractive accommodation that an older person would ‘choose to live in, not have to live in’.

The Great Northern Haven exemplifies a number of key features that support the development of sustainable communities.

They are:

- The location of the Great Northern Haven is key to its success. The proximity of amenities and services allows for greater independence and general accessibility for the residents. (See Image figure 4 page18)

- The Great Northern Haven was developed on a brownfield site. This is an important factor in urban development to maximise the potential of otherwise unused land to consolidate urban areas.

- The Great Northern Haven enhances the distinctiveness of the local area. The density and scale are in keeping with the existing streetscape and complement the local environment, and the demographics of the area.
• Through appropriate **design**, the standard of accommodation to which older people can aspire to has been raised. The Centre for Excellence in Universal Design developed a design manual that aims to promote universal design concepts in the development of homes. This document has referenced the design of the Great Northern Haven to illustrate how it has incorporated key universal design features.

• The emphasis on **adaptability** of the building fabric can result in accommodation that can be altered to meet the needs of the older person as they age. For example, the inclusion of easily adaptable ‘soft-spots’ to allow internal walls to change from two bedroom layout to one larger bedroom; and the provision of ‘hard-spots’ in ceiling construction for hoist tracks to be installed when required.
The high quality of the building, including energy efficient insulation levels, has a positive effect on the environment and the resident in terms of overall comfort and cost-effectiveness.
This is an approach to supported housing premised on maintaining the independence of the residents living within the complex, which was developed on a brownfield site, a converted convent in the centre of town. The location of the development is vital to its success. It is within walking distance to essential services including shops, café, church, taxi rank and bus stops (local and regional). It now provides a focal point for the community by housing the arts and cultural centre in McAuley Place.

Many of the complex’s attributes (location, ethos, intergenerational facilities, and a focus on what people can still do rather than what they can no longer do) contribute to greater independence; enhanced feelings of safety and security; and improved health and wellbeing for residents.

Some of the residents noted that in their previous accommodation they would have been more vulnerable, isolated and lonely. McAuley Place offers greater social interaction; and the added feeling of living in a safe and secure congregated setting. The increased feeling of safety has a positive effect compared to the stress associated with living alone and fears of being alone at night or of an accident occurring.

McAuley Place has become a community for the residents who live there, with residents feeling that the improvement in their own social interaction had facilitated the development of a sense of community within the complex. General independence has also improved with the ability to access amenities and services in the town and use facilities within the complex.

No specific care services are provided and that is in keeping with their concept of independent living. This is a specific policy to ensure that the development has no sense of institution but management, staff and volunteers do care and this provides a sense of security and support for those who live there. The expectation is that the HSE provides any necessary medical supports on an individual basis.
<table>
<thead>
<tr>
<th>Physical</th>
<th>GNH</th>
<th>McAuley Place</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Location</strong></td>
<td>Town centre</td>
<td>Town centre</td>
</tr>
<tr>
<td><strong>Development</strong></td>
<td>Brownfield site</td>
<td>Brownfield site</td>
</tr>
<tr>
<td><strong>Services</strong></td>
<td>Walking distance</td>
<td>Walking distance</td>
</tr>
<tr>
<td><strong>Design</strong></td>
<td>Adaptable to be lifetime home</td>
<td>Not adaptable, reused a historic building</td>
</tr>
<tr>
<td><strong>Build Quality</strong></td>
<td>Energy efficient</td>
<td>Part M</td>
</tr>
<tr>
<td><strong>Apartments with common /community facilities</strong></td>
<td>16</td>
<td>53</td>
</tr>
<tr>
<td><strong>Allocation Policy</strong></td>
<td>Some allocated from HSE list</td>
<td>Waiting list for apartment</td>
</tr>
<tr>
<td><strong>Social Supports</strong></td>
<td>Cúltaca</td>
<td>Independence with accessible services, HSE medical care</td>
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</tbody>
</table>

**Allocation**

The GNH provides community living for fifteen residents. In allocating accommodation within the GNH, ten of the apartments were filled from housing waiting lists. These residents were chosen as needing supported accommodation to avoid the risk of nursing home care. Five of the apartments were allocated to individuals on the HSE waiting list. These people, who actually owned their own homes but could not sustain a tenancy, were moving from hospitals or residential centres. This was an innovative response to provide flexibility in terms of the allocation of homes to older people who were not specifically from the housing waiting list. In McAuley Place, 75% of apartments were allocated from the housing list, with the remainder allocated to people choosing to move from their own unsuitable homes.
Physical Considerations | Recommendations

1 Development Principles

Four factors must be recognised as crucial to promoting the concept of ‘sustainable communities’ to support older people living in various communities for longer;

- **Location** providing accommodation in proximity to amenities and services to enhance the general independence of older people.

- **Placemaking** the creation of attractive developments that add to the local context and urban form of the area and meet the aspirations of older people regarding accommodation.

- **Reuse of land** aim to re-use brownfield sites wherever possible to promote the development of sustainable communities. There may be a reduced need for parking spaces and green areas in housing dedicated to older people.

- **Socially and environmentally appropriate** incorporate a mix of dwelling type, size and tenure to support sound social, environmental and economic sustainability policy objectives, based on the demographic profile of the area.

Housing providers will find that these factors contribute to increased attractiveness of developments to planning requirements and therefore a more successful development in terms of residents’ satisfaction and long tenure.
The appropriate location for the development of older person housing should be determined using a hierarchical approach similar to that set out for retail development – Retail Planning Guidelines, 2012. Promote the concept of town centre first.

Demographic Analysis

To assess the need at local level, current demographic projections by age cohort can be used. This can inform strategic planning (Development Plans, Local Area Plans) and determine future demand for older persons housing.

Design

Promote the development of housing for older people that takes into consideration a universal design approach that allows for the adaptability of the home over a life course. The Centre for Excellence in Universal Design’s (CEUD) document; ‘Universal Design of Homes’ provides guidance in this regard in Ireland.

Allocation Model

Based on the success of the allocation model in GNH, where they partnered with the HSE, the roll out of these schemes should be considered with the HSE or Department of Health partnering with the Local Authority. This would support greater tenure mix in line with the Social Housing Strategy to ensure that social housing supports are responsive to current needs.
For some older people, living alone carries intrinsic risks, the use of assistive technology shares the risk between the health service and the older person, and creates a safer environment.

‘Smart Homes’ monitor the activities of the user within their home and based on the information collected, the environment can be modified or assistance can be provided to the person within his or her own home. Because successful ageing also depends on the psychological health of an older person, technologies that support social connections are an important component of any home-based care system. The use of assistive technologies needs to be balanced with human contact and not result in a situation where services and supports that are generally the responsibility of people are essentially replaced by technology (CARDI 2013, Shannon 2012, Age UK 2010).

The Great Northern Haven was compared with SOPHITAL in this section.

A unique feature of the Great Northern Haven development is the Ambient Assisted Living (AAL) system designed to improve the wellbeing of residents. People were invited to participate in this pilot and become part of this ‘living lab’. The residents’ interaction with the adaptable and controllable home environment is studied to determine behavioural trends on features such as sleep, mood and social interaction. Dundalk Institute of Technology (DkIT) researchers work with residents to develop technology that can be used in the future to help manage their personal wellbeing. A wide and rich data set is continuously being gathered from consenting residents within the apartments and from the grounds of the development. Each apartment has 100+ wired sensors, connected TVs, touch screen devices and a core network infrastructure throughout.
Available Technology

<table>
<thead>
<tr>
<th>Self – Reported</th>
<th>Ambient Technology</th>
<th>Automated Components</th>
</tr>
</thead>
<tbody>
<tr>
<td>YourWellness Application (Ground Truth Data)</td>
<td>• Passive Infra Red (PIR) Sensors to detect motion</td>
<td>• Emergency Call System</td>
</tr>
<tr>
<td></td>
<td>• Contact Sensors on Doors and Windows</td>
<td>• Adjustable Hob and Sink *</td>
</tr>
<tr>
<td></td>
<td>• Contact Sensors on Light Switches</td>
<td>• Self Closing Doors and Windows *</td>
</tr>
<tr>
<td></td>
<td>• Electricity Sensors monitoring usage</td>
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</table>

**TABLE 1** The technology that is present in all the apartments in GNH. (*) automated components that are currently only in two GNH apartments.

Data collection from the ambient sensors has been ongoing since residents first moved into GNH in June 2010. This is a long-term process, as the patterns or trends must be verified a number of times before the researchers can be certain that specific patterns or trends correlate with the onset of a period of declining health, thus facilitating early intervention. So far two case studies have been published. Doyle et al. (2014). One of these reviews the monitoring of sleep patterns, variations in which may suggest an underlying issue that needs to be addressed. The other shows a ‘clock plot’, which illustrates the activity patterns of two residents, one of whom was particularly active and the other who was less active. In both examples the patterns can be used to determine issues that may go unseen.

Self-reported data, gathered from residents within the Great Northern Haven and referred to as ‘Ground Truth’ data, is used by the researchers to ‘make sense of the ambient sensor data’. It is gathered via an iPad application and by quarterly clinically validated questionnaires.

Each apartment has an iPad for the residents to capture their input through the YourWellness application developed for the iPad. This self-assessment data has proved important for older people living in the Great Northern Haven. The resident’s data is illustrated graphically showing their ratings under variables such as sleep, mood and activity. This simple graphic uses traffic light colours to indicate if something needs to be addressed (green – healthy, amber – requires attention, red – requires immediate attention).
Key themes have emerged through the development of the application. Quality of social interaction was identified as an important factor in determining wellbeing. Sleep quality was also identified as being vital to older people’s wellbeing, with residents noting that the quality of sleep rather than the length of sleeping time was more important. Residents also determined that being aware of their emotional and mental wellbeing was important in maintaining general wellbeing and that an active social life would support this. Finally, the residents were also happy to share their data with clinicians if they felt there was a decline in their health – a very positive factor in assisting the early detection of potential health issues.

Residents noted in their feedback that their comfort in using technology has improved, supported by the implementation of iPad classes for the residents. This has opened other avenues to support social connection, for example, using Skype to connect with family members.
SOPHITAL®, Bamberg, Germany – one of a number of products currently being ‘live tested’ in the homes of older people under a European funded (INTERREG IVB) project called I-stay@Home (ICT SoluTions for an Ageing societY). It comprises an AAL system developed by the SOPHIA Living Network GmbH, which focuses on solutions for enabling older people to live independently in their own homes for as long as possible. Using a wireless network to connect the various components to a central hub, technology can be added or removed to best suit the needs of the individual. The most commonly used technology includes safety and security features, such as the alarm system (all lights turned on and audio alarm at the press of a button); sensors on doors and windows to detect if they are left open; stoveguard, which switches off the hob if left on for too long; or a water detection sensor to signal an alarm if water is left running in the bathroom and spills onto the floor.

**Technological Considerations Key Facts**

**GNH**

**Technology integrated into design**
- PIR (passive infra-red motion sensors)
- Contact sensors on doors and windows
- Sensors on light-switches
- Electriciy sensors

**Track Feedback to iPad**
- Wellbeing
- Weather
- Sleep
- Movement
- Security

**Emergency Call System**

**Sophital**

**Wireless technology**
- Can be fitted anywhere in the house
- Flexibility - products can be used anywhere in the community

**Range of Technology Features**
- Safety and security
- Health Monitoring
- Comfort

**Emergency Call System**
As many older people face problems associated with decreased mobility, they found a system that helps them to control their dwelling from a central point or via a tablet/PC is useful.

SOPHITAL® offers many flexible functions; it’s comparably easy to tailor solutions for the specific tenants’ needs. Devices can be installed and uninstalled without damaging the dwelling. A number of tenants were particularly interested in functions that increase their security, such as emergency calls; a centralised switch-off when they leave their homes; and a signal in case a window was still open. Tenants also found technological support that was centred on health monitoring valuable, the most cited examples were emergency alarms and blood pressure monitors. The technology supports the informal care network (i.e. that technology alone is not enough and its role and that of carers, family, and friends is interlinked in providing optimum support for older people).

Technology is welcomed by older people where it improves their safety and security, monitors their health and saves unnecessary journeys. Communication technology is embraced where older people are shown how to use it, and it supports social connectedness.
Technological Considerations
Recommendations

6 Broadband
The adequate provision of broadband within older-person accommodation can cost-effectively and efficiently facilitate the use of technology within these developments.

7 Technology in the Home
The development of housing stock with assistive technology that meets the changing needs of the individual is encouraged. The following features are the suggested minimum requirements to support older people living independently:

- Safety & Security (e.g. Emergency Call System to alert others that the older person is in need of assistance; and/or door and window sensors that signal an alarm if a door or window is left open for a period of time).
- Comfort (e.g. Energy monitoring device to allow the resident to monitor their energy consumption with remote access heating controls and automatic doors and windows).
- Health Monitoring (e.g. Blood and weight monitoring technology that can support older people to track and monitor their health).
Social interventions are based on preventative care and support for older people. Prevention can promote independence; prevent or delay the deterioration of wellbeing resulting from ageing, illness or disability; and delay the need for more costly and intensive services. The Centre for Policy on Ageing (2011) outlines that older people really value practical support that enables them to live well in their own homes, which includes befriending and opportunities for social participation. Furthermore, low-level practical support initiatives can have dramatic outcomes – both in terms of increased quality of life and in terms of lower use of formal services and institutional forms of support. The Cúltaca Initiative in the Great Northern Haven was compared to the Local Area Coordination model based in Thurrock, UK.

Compared with the general population, social networks tend to be relatively small in older age. Social isolation is associated with a higher risk of death amongst older people. Socially isolated and vulnerable older people are more likely to suffer from loneliness.
Case Study 3
Cúltaca

Since 2009, Cúltaca has been helping older people to continue to live in their own homes in Dundalk, Co. Louth, including those living in the GNH. A key issue identified by Cúltaca was that due to the fragmented nature of service provision, many older people are ‘invisible’ in the community; prone to loneliness and poor health; and are generally vulnerable.

Cúltaca adopts a person-centred approach to meeting the needs of older people by acting as a liaison between statutory and non-statutory services and the older adult and in doing so, aims to address barriers to access, particularly in services that are fragmented and uncoordinated. Two Cúltaca work with a client base of 1000 with about 150 new clients each year.
Cúltaca has developed services (e.g. Netwell social groups, Men’s Sheds, Good Morning Louth) in the local community that have addressed needs presented by various older people in the community. Cúltaca work with vulnerable people on an individual basis and develop a personal support plan that best suits their needs. Cúltaca has also assisted in building strong communities that look out for and support vulnerable members, e.g. a network of volunteers drawn from the local community to provide weekly social visits in the homes of vulnerable older people.

Key outcomes for Cúltaca included the positive effect of working one to one with the person on their personal plan in their own home; improving independence and building self-esteem; improving mental health; improving access to information; reducing demand on acute services; constantly building, developing and improving social networks (e.g. Netwell Memory Cafe); and empowering the older person to take control of decision making in their lives.

The LAC initiative based in Thurrock, UK is premised on creating community and individual resilience and empowerment. The primary role of the LAC is to work with individuals one on one, build relationships and ‘buck the system’ (i.e. advocate for individuals when no-one else will or they are left between services).

GNH - Cúltaca & Local Area Coordination (LAC)

- Working one-to-one with the person, developing a personal plan
- Reduces dependency on health services and add independence
- Develops an ‘expertise’ in supporting older people
- Addresses service fragmentation and poor coordination
- Outcomes
  - Improved health and wellbeing and independence of older person
  - Reduce demand on acute services
  - Empower older people to make their own decisions
LAC coordinators identify the best source of support for an issue and create a connection between that resource and the person in need. Coordinators know their areas intimately and are able to identify key resources and develop a relationship with people in the community. The objective of building local connection is more likely to create resilience and empowerment and encourage the community to build social capital.

Key outcomes arising from LAC support include:
- people supported to reduce demand on acute services;
- increasing relationships and circles of support (reducing isolation);
- improved access to information;
- support to self-advocate and early development of community connections;
- understanding of community and citizen resources; and
- inclusive, supportive community action.

8 Linking with existing Social Supports

Housing providers (i.e. Local Authorities, Approved Housing Bodies) should consider linking with local agencies prior to developing housing for older people to ensure that supports for residents are in place as soon as they move in to their new home.

9 Technology in the Home

Initiatives (similar to Cúltaca or LAC) should be fostered or developed to strengthen community capacity, technological capabilities and social networks to help support older people to remain living in their own homes and communities for as long as possible. Key features include:

- **Person-centred approach** working one to one with the person in their own home.
- **Knowledge of local supports/amenities** building strong communities that look out for and support vulnerable members.
- **Identify gaps in service provision** develop services within local community to address gaps identified.
- **Supporting communication** amongst service providers.
Cullen et al. (2007) determined that the issue of cost-effectiveness of different housing options is complex and no simple general rule can be applied. The following information illustrates a basic breakdown of the costs of keeping an older person living in one apartment in the GNH (Table 1).

Significant savings can be made by keeping older people in their own home and communities for longer. The basic cost associated with keeping one older person in the GNH has been calculated. If an older person is unable to sustain their current tenancy, and needs accommodation with more support, in the absence of supportive housing, a nursing home can become the only option. Comparing the GNH to the cost associated with public and private nursing homes (for a period of one year), suggests that maintaining older people in the community in supportive housing such as the GNH can be less expensive than nursing home care.
### Charges

<table>
<thead>
<tr>
<th>Charges</th>
<th>Cost (per week)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average Rent*</td>
<td>€30</td>
</tr>
<tr>
<td>Service Charge*</td>
<td>€12</td>
</tr>
<tr>
<td>Average Electricity Bill*</td>
<td>€3.75</td>
</tr>
<tr>
<td>Average Heating Bill*</td>
<td>€7</td>
</tr>
<tr>
<td>Average Food Bill (@ 31.7% of Income - €230.30)**</td>
<td>€73</td>
</tr>
<tr>
<td>Average Local Authority Cost (Differential Rent) ^</td>
<td>€4.90</td>
</tr>
</tbody>
</table>

**Total (No Care Package)**

| Cost (per week) | €130.65 [A] |

**Care Package (@ 3 hours x €21.90 p/hr***) ^^

| Cost (per week) | €65.7 [B] |

**Total [A+B]**

| Cost (per week) | €196.35 |

**Care Package (@ 15 hours x €21.90 p/hr***) ^^

| Cost (per week) | €328.5 [C] |

**Total [A+C]**

| Cost (per week) | €459.15 |

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**TABLE 1** Average cost associated with keeping one resident in an apartment in GNH.

* Figures provided by Clúid Housing Association who manage the GNH complex.

** Bantry White, et al. (2011) found that people aged 65 and over in ROI spend an average 31.7% of their income on food.

*** www.careforme.ie/Rates ^ Cost covered by the Local Authority. ^^ Cost covered by the HSE.

**** www.hse.ie/eng/services/list/4/olderpeople/nhss/costs

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**Cost of Nursing Home Care - Average across all regions ****

<table>
<thead>
<tr>
<th>Public (March 2011)</th>
<th>Private/ Voluntary (January 2015)</th>
</tr>
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<tbody>
<tr>
<td>€1,245 p/w</td>
<td>€898 p/w</td>
</tr>
</tbody>
</table>

**Average in County Louth ****

| €1,272 p/w          | €910 p/w                          |
Cost Considerations

Recommendations

10 Cost Comparison Research

Further comparative research is underway to examine the costs associated with an older person living in older person specific accommodation as opposed to a Long Term Care setting. This is with a view to inform the development of a model of shared costs from an operational perspective.

11 Capital Cost Funding Models

A review of the current capital costs funding model is needed for the development of older person accommodation.
To meet the changing needs of older people as they age, we need to think differently in terms of how we develop specific housing for older people. The findings of this research recommend that future housing developments consider:

- Locating new developments close to (within walking distance of) services and
- Incorporating a universal design approach to allow for flexibility and adaptability of the dwelling in the future.
- Integrating technology into developments which enhance safety and security, support health monitoring, increase comfort and improve social connectedness.
- Integrating social supports into developments which support access to information, find non health service based solutions and reduce demand on formal services.

The research has had the benefit of being presented to and endorsed by the National Integration and Implementation Group (NIIG), which advises Age Friendly Ireland and is made up of senior representatives from the Local Authority sector, government departments, the HSE, An Garda Síochána, the third/fourth level sector, the NGO sector and business.

The research findings and recommendations have been presented to the County and City Management Association’s (CCMA) Housing, Social and Community Committee, the Department of the Environment, Community and Local Government and the Department of Health who have all committed to supporting the dissemination of the findings of the research, as well as to many of the Age Friendly City and County Alliances and Housing Strategic Policy Committees (SPC’s) across the country.

This will create a platform to further the conversation regarding the future housing needs of older people and promote discussions that can inform policy at a national level.

Conclusions
Who is Age Friendly Ireland?

Background
As in all other countries in the world, the population of Ireland is ageing. To plan for this, in 2013 the Department of Health published the National Positive Ageing Strategy. The Strategy sets out a vision for an age-friendly society through the achievement of four national goals (participation, health, security and research). It recognises that all sectors of society - government, businesses, voluntary groups, service providers, local authorities and the general public - have a part to play in creating an age-friendly society.

The Strategy allocates lead responsibility for its Priority Action Areas to various Government Departments and agencies. It also sets out the need for local joint working structures to complement this national-level activity, since many of the factors that contribute to a good quality of life for older people are community-based.

Role of Age Friendly Ireland
Established in January 2014 as an intermediary organisation, Age Friendly Ireland coordinates the national Age Friendly Cities and Counties Programme. The Programme brings together, supports and provides technical guidance to the 31 local authority-led, multi-agency Age Friendly City and County Programmes in every local authority area.


The WHO programme involves a multi-agency, multi-sectoral approach to age-related planning and service provision. Applying this methodology consistently throughout the country Age Friendly Ireland helps cities and counties to be more inclusive of older people by addressing their expressed concerns under eight headings:
1 outdoor spaces and buildings
2 housing
3 social participation
4 transport
5 respect and social inclusion
6 civic participation and employment
7 communication and information
8 community support and health services
Age Friendly Ireland actively promotes partnerships and collaborations. The Age Friendly Cities and Counties Programme is run by effective city- and county-based Alliances, involving senior decision-makers from public, commercial and not-for-profit organisations. Age Friendly Ireland assists Alliances aim to streamline the work of all key players at local level, putting the views, interests and needs of older people at their core. Through an Older People’s Council in each participating local authority area older people exercise a strong, guiding influence on age-friendly local development.

Age Friendly Ireland provides guidance to the Alliances as they consult widely with older people. The Age Friendly City and County Strategies which the Alliances draw up are based squarely on the expressed views, needs and interests of older people. Through an Alliance’s Age Friendly Strategy, participating service providers and businesses become accountable to each other, and to older people, for the age-friendly actions they take.

Age Friendly Ireland develops tools and methodologies for age-friendly practitioners at frontline and management levels. It works as a hub for knowledge transfer, brokering connections and information exchange between agency officials, service providers and older people, both locally and nationally. The aim is to ensure the exchange of age-friendly best practices that older people want and value, and which are appropriate, sustainable and cost-effective.

Age Friendly Ireland offers access to valid, reliable and timely evidence on the lives of older people in Ireland through its partnership with the Department of Health and the HSE on the Healthy and Positive Ageing Initiative (HaPAI). This work offers a baseline against which Ireland can measure progress on positive ageing.
Local Age Friendly Alliances can share their successful experiences and learn from the achievements of others through the online, searchable compendium of age-friendly practices at www.agefriendlyireland.ie.

For more information about how Age Friendly Ireland can help your Age Friendly City or County to achieve the best possible outcomes for older people, please contact:

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w www.agefriendlyireland.ie