

Appendix A – A typical housing care pathway

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People remain independent within their own property with limited or no support.

Typically self-contained, independent homes – flats and sometimes bungalows – each with their own front door. A lower age limit of 55 or 60 is common.

The individual units are usually linked to an emergency alarm service and include design features to make life easier for elderly people. There is usually an on-site warden, and communal facilities such as a lounge and laundry. Rental and privately-owned sheltered housing is available, although not always on the same site.

These units offer self-contained accommodation with their own front door, but also provide a significantly higher level of support than sheltered accommodation. The level of support can increase as the person's level of care need increases. 24/7 care is available, and nursing care is sometimes on offer. The service element is often integral to the extra care product. There are additional facilities (for example, in terms of bathroom design) for the less mobile. Communal facilities tend to include social and practical facilities, such as lounges and laundries. A meals service is usually on offer. It aims to provide greater independent living.

Independent Living Services (ILS) are for residents above the age of 65

This approach is modeled on the residential care concept (24hr care/support) but its focus will be to move away from institutionalised care facility to a more enabling and maintaining independence. Every resident in the ILS will be entitled to claim housing benefit through DWP. The accommodation related cost will therefore not be funded through ASC.

Typically, residential homes offers 24/7 personal care and ensures residents basic personal needs such as meals, bathing, going to the toileting and medication are met.

Residential homes provide a home for people who struggle to live independently and need additional support but aren't yet in need of nursing care.

Nursing Care is similar to residential care, but with trained nurses on duty. A nursing home is considered where someone needs regular medical care and attention. Often this would be a clinical decision made by the MDT.

People may have lived in residential care or even in the community for a period before going to a nursing home due to a deterioration in their condition and the district nurse support do not have the capacity or ability to take care of the person's health needs.

