## Appendix 1 – Housing Options for Older People (HOOP): A Case Study

BC is a 53 year old gentleman who was admitted to hospital in summer 2017 for an operation to amputate one leg from above the knee. BC has suffered health and social issues over a prolonged period associated with alcohol abuse. Prior to going into hospital, BC lived in a rented 1 bedroom flat on the first floor for over 10 years.

When BC had his operation he was adamant that he would return to his old home and adjust to his circumstances to live as he had previously. Upon his home visit to assess his home environment with the ward occupational therapist, there were a number of issues identified, both internally and externally, including narrow doorways and stairs (no lift available), no space for turning circles for his wheelchair and steps leading to front door. BC agreed as the home assessment went on that returning to his old home was no longer a feasible option for his physical and mental wellbeing.

When BC was well enough to be discharged from hospital, he moved into a transitional flat suited to his physical needs at that time funded by Manchester City Council Directorate for Adults and Families. The aim was to use his time there to update his Manchester Move Rehousing Application priority and to look at all suitable options for BC. His case was referred to the HOOP service by MCC Commissioning Team for Adult Social Care.

When I first met BC we discussed all his rehousing options and prospects for suitable homes across areas in North Manchester including age restricted properties and sheltered schemes. BC advised me that he wanted to stay in his local area as he relied on his family to be his support network. He talked about his struggle with alcohol abuse and his wishes to cut down in the immediate future. We agreed that we would concentrate on finding a home in his local area in the first instance. I explained that if we were not successful then he may consider widening his areas in the next few weeks. BC had already been awarded priority 1 for health issues on his Manchester Move application at the time of his operation so we did not have to ask health professionals to provide a hospital discharge statement (which also produces band 1 priority if successful). It did come to light that BC was in considerable housing debt at this time and I advised him that this could affect any suitable housing offer as he would be asked to provide references to prove positive residency for at least the past 3 years. I immediately liaised with the Manchester Move Manager for permission to override this debt implication for purposes of the rehousing application due to BC serious ill health and safety/wellbeing. Manchester Move agreed. I explained to BC and his sister about how they could set up a payment plan to pay off this debt if he was unable to make a full payment.

I kept in regular contact with BC and his sister to advise them about properties that became available for bidding on Manchester Move that may be suitable for him. BC bid on and was offered two of these age restricted properties within his local area in a short space of time. Both properties met BC's physical needs, however it was apparent that BC was very anxious on both viewings; he explained that they felt very isolating, that he would be scared living in them. When we discussed this further BC said that he had enjoyed his time living in the transitional flat where he felt safe and settled. He was enjoying the social side of the sheltered scheme; he had built a rapport with the scheme manager and his neighbours. He was joining in activities occasionally in communal lounge. He said he was not having a drink of alcohol until much later in the day than he did before his operation.

Unfortunately the transitional flat BC was staying/ sheltered scheme for over 55's. I explained the allocations policy around the scheme he was staying in meant he would not be considered to live permanently in that particular scheme. I offered him other very similar options/information about two sheltered schemes within his local area that accepted applications from applicants over 50 years old. BC and his sister (who supported BC daily) were very interested in these options and asked for more details. I arranged for them to visit the schemes to look around, explaining that they may not get to look at the actual flats as there were no empty properties available at that time but it would give them an overview of what the schemes offered.

The visits to the two schemes went well. BC had a preference but said he would consider both. One scheme advertises all vacancies through Manchester Move Shared Register; the other only advertises 50%. I contacted the landlord of the latter scheme to advise their rehousing team about BC's interest in the next available property. I asked both scheme managers to give me a call when the next voids became available. Both schemes contacted me within a few weeks to say there were available properties coming up. I contacted the Adapted Homes Team straight away, they arranged for occupational therapists to go on assisted viewings with BC at both properties to make sure they were suitable (with or without adaptations as required) to cater for BC's physical needs. The first flat was not suitable due to lack of space inside for turning circles. We immediately discounted this property and arranged for viewing at the second property. This time it was successful at the property that BC preferred as his first choice. BC moved into the sheltered scheme with physical help from his sister. With BC's permission I contacted BC housing officer for his old home to explain BC's physical health and purpose of move. I also explained his financial situation. The housing officer agreed to override any clear out charge at his old flat due to BC being unable to help physically with the move himself.

HOOP Worker October 2018