

# Housing Strategy Evidence Review



Stafford  
BOROUGH COUNCIL

[www.staffordbc.gov.uk](http://www.staffordbc.gov.uk)

# Introduction

The 2008 Housing Strategy focused on five strategic priorities:

1. Improve the physical condition of the housing stock across all tenures
2. Preventing homelessness
3. Increasing the supply of affordable housing
4. Promoting independent living
5. Partnership working

Whilst Stafford Borough Council's Housing Team continues to focus on these areas, the formation of the Health and Housing Services Group in 2012 brought with it a unique opportunity to focus on the benefits that the Housing Team brings to improving the health and wellbeing of people living in the borough, ensuring that health and wellbeing is at the heart of any decision making that affects an individual's housing choices. Central to this approach is the recognition that the wider determinants of health such as housing, education, employment, environment and leisure are all essential in the battle against poor health. In fact, it is estimated that over 70% of health impacts<sup>1</sup> occur as consequences of factors outside the formal health service. It is recognised that housing provision interrelates with all of these wider determinants in a variety of ways and that a home can be seen extending beyond the house alone, to the wider community and neighbourhood environment.

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<sup>1</sup> *National Institute for Clinical Excellence – Impact of Housing on Health*

# Health and Wellbeing

The Building Research Establishment (BRE) has calculated that poor housing costs the NHS at least £600 million per year nationally. It is recognised that the lack of housing has a measurable effect on reduced life expectancy and is increasingly the focus of care in later life.

In Stafford Borough, the general health of the population is high with 81.7% of residents reporting good health compared to 47.2% across England. 5.1% report bad health compared to 5.5% for England as a whole <sup>2</sup>. Life expectancy is also higher than average, however, health inequality is apparent with a reduction of over 7 years for residents living in the most deprived areas compared to the least <sup>3</sup>. This difference indicates the significance of the home environment upon an individual's health.

19.3% of the borough population are aged 65 and over <sup>4</sup>, which is higher than the England average and a figure which is set to rise. 18.2% of residents have a long-term health problem or disability that limits their day-to-day activities; again slightly higher than average <sup>5</sup>. It is recognised that the needs of older and disabled people may have an impact upon their housing solutions, with an emphasis on maintaining independence with care and support available within a home setting. This can mean adaptation services to residents' existing homes or a move into new accommodation such as flexi-care facilities which provide a good alternative to residential care.

The Council has a duty to provide mandatory disabled facilities adaptations for residents who have been assessed by an Occupational Therapist as requiring them <sup>7</sup>. Such adaptations help residents to live independently within their own homes and have been shown to achieve positive health and wellbeing outcomes as well as a reduction in care costs.

Since the last Housing Strategy in 2008, Stafford Borough Council has funded 701 disabled facilities adaptations. This is estimated to have saved over £59m in residential care costs, before taking into account any health care savings in reduced accidental injury. The number of disabled facilities grant adaptations completed reached a high in 2009/10 due to a backlog of deferred approvals to correspond with annual budget provision. In recent years the number of disabled facilities grant completions has reduced slightly, partly reflecting the clearing of this backlog but also reflecting a slight reduction in the number of referrals from the Occupational Therapists of Social Services.

In June 2013 the Government announced the Better Care Fund (BCF), a pooled health and social care budget worth £3.8 billion starting from April 2015 to focus services more effectively on preventing ill health and ensuring the transformation to integrated care.

In October it was announced that the Government funding for Disabled Facilities Grants (DFG) was to be included within the BCF from 2015/16 so that the provision of adaptations can be incorporated in the strategic consideration and planning of investment to improve outcomes for service users. DFG funding will be paid to upper-tier authorities in 2015/16. However, the statutory duty on local housing authorities to provide DFG to those who qualify for it will remain. Therefore each area will have to allocate this funding to their respective housing authorities.

The Integrated Transformation Fund does not come in to full effect until 2015-16, however, plans for both that year and use of interim funding in 2014-15 must be signed off before March 14.

DFG allocations for 14/15 and 15/16 have been announced, however, no detail is yet available regarding what will happen after this point.

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<sup>2</sup> *Census 2011 General Health*

<sup>3</sup> *Stafford Health Profile 2013*

<sup>4</sup> *Census 2011 Age Structure*

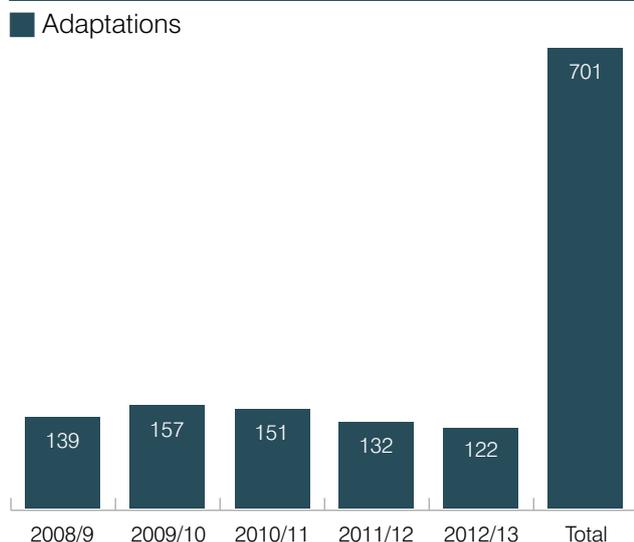
<sup>5</sup> *Interim 2011-based Population Projections*

<sup>6</sup> *Census 2011 Long-term Health Problem or Disability*

<sup>7</sup> *Housing Grants, Construction and Regeneration Act 1996*

<sup>8</sup> *Indicative results from Staffordshire County Council suggest that people who have not had an adaptation enter residential care aged 70 and stay there for 6.5 years on average. People who have had adaptations enter care later at age 81 and only stay there for 2 years on average, saving an estimated £85,000.*

## Disabled Facilities Grants



Not only does quality housing promote good physical and mental wellbeing, but it also provides appropriate environments for addressing existing health issues and support needs which often leads to better outcomes. The role of support providers is paramount in achieving sustainable housing solutions for many vulnerable residents including the young, first time parents, people in poor mental health, those living with substance misuse issues and ex-offenders.

Generally, the levels of teenage pregnancy are lower than the England average with 69 occurrences annually, a rate of 29.3 compared to 34.0 over England <sup>9</sup>.

The rate of drug misuse is better than the England average at 3.9 compared to 8.6. However, this still amounts to 327 users. Rates of residents aged 16 and over with increasing and higher risk drinking is similar to the England average at 24.1 compared to 22.3, however, alcohol-specific hospital stays for under 18s are worse than the England average at 107.0 compared to 61.8. This equates to 26 cases <sup>10</sup>.

Poor mental health may be an issue for some residents, indicated by a higher than average rate of hospital stays for self-harm at 240.9 compared to 207.9 across England. This totals 286 hospital admissions each year <sup>11</sup>. However, the number of people registered with a GP and recorded as having a severe mental illness stands at 805, which is lower than the England average <sup>12</sup>.

The number of crimes recorded by Staffordshire Police in Stafford Borough has reduced considerably in recent years, by 17% when compared with the previous year and 35% when compared to 2007/08. This is lower than both the County and National rate.

The number of Anti Social Behaviour incidents recorded across the district has remained stable but there has been a 44% reduction in 6 years. Females aged 20 - 29 years are most at risk of alcohol related violence in the Borough. Males and Females aged 20 - 24 years are at most risk of becoming victims of crime. Priority location for reducing crime in the Borough are Penkside, Stafford Town Centre, Stonefield and Christchurch

Domestic abuse is a crime that clearly may have an impact upon a person's housing solutions. Across Staffordshire there have been 2,937 recorded domestic violence crimes (an increase of 8%) and almost 9,000 calls to support services (an increase of 40%). The increases seen are not necessarily a sign of rising incidences but may reflect an increase in reporting and recording crimes. The Council recognises the importance of appropriate refuge style accommodation in providing emergency specialised support in potentially life threatening situations. A new scheme is currently being developed to provide support in a safe environment for vulnerable women and their children, helping to reduce any perceived need to return to the abuser.

<sup>9</sup> *Stafford Health Profile 2013*

<sup>10</sup> *Stafford Health Profile 2013*

<sup>11</sup> *Stafford Health Profile 2013*

<sup>12</sup> *Staffordshire Observatory Quality Outcomes Framework 2012/13*

# Housing Options and Homelessness

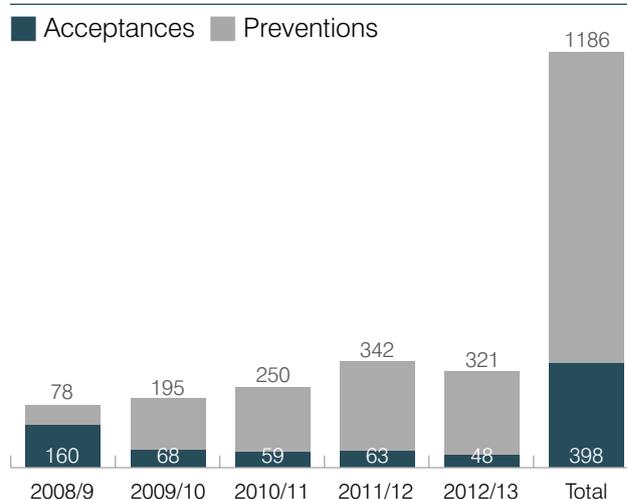
The Council has a legal duty <sup>15</sup> to ensure that suitable housing is available for households who are eligible, unintentionally homeless and in priority need. It is recognised, however, that the prevention of homelessness is not only more cost effective but is also likely to provide better health and wellbeing outcomes by minimising disruption for households.

The rate of homelessness at 0.87 per 1,000 households is better than the England average of 2.37 <sup>16</sup>. The most common reasons for homelessness is loss of rented/tied accommodation, violence, parents no longer willing to accommodate, non-violent relationship breakdown and mortgage arrears. Reasons for priority under homeless legislation are generally due to the existence of dependent children <sup>17</sup>.

The rate of homeless prevention (5.85) is lower than the England average (7.29) but the levels of prevention work still heavily outweigh the number of homeless acceptances <sup>18</sup>. The most commonly used methods of prevention are finding alternative accommodation through private renting with landlord incentive, nominations to social housing, the resolution of housing benefit problems, or debt advice to remain in an existing home or a move to supported accommodation.

Since the 2008 Housing Strategy, the Council has accepted 398 households as statutory homeless and has prevented 1,186 from becoming so, saving over £18K in Council costs alone <sup>19</sup>, before taking into account any savings to health and other services. The Welfare Reforms present several challenges for some households who will have to adjust to reduced benefits and increased responsibility for managing their own finances. This in turn presents greater demands on many services that residents turn to for assistance, such as the Council's housing department. It also presents an added risk for Registered Providers who have already seen a rise in rent arrears and anticipate further issues before the reforms are fully implemented.

## Homelessness Support



<sup>13</sup> *Stafford Borough Community Safety Profile*

<sup>14</sup> *Trends in Domestic Abuse in Staffordshire 2010/11*

<sup>15</sup> *Housing Act 1996, as amended by the Homelessness Act 2002*

<sup>16</sup> *Local Authorities' Action Under the Homelessness Provisions 2012/13*

<sup>17</sup> *Stafford Borough Council 2012/13*

<sup>18</sup> *Total Reported Cases of Homelessness prevention 2012/13*

<sup>19</sup> *Stafford Borough Council*

# Housing Conditions and Energy Efficiency

Environmental Health Services, in which the Housing Team sits, originated from a need to deal with public health issues such as poor sanitation and overcrowding which often led to the spread of diseases. Although these issues are not as prevalent in today's society, housing conditions still impact significantly on a person's health with 40% of all accidental injuries occurring within the home setting<sup>20</sup>. The Council's Environmental Health Officers assess properties against 29 different hazards under the Health and Housing Safety Rating System (HHSRS) and are under a duty to address any Category 1 hazards identified as these place significant risks to the health and safety of occupants<sup>21</sup>.

The most common hazards identified in the 2008 Private Stock Condition Survey were falls between levels, damp and mould, excess cold and electric shocks, fires, burns and scalds. It was also suggested that the problems are spread across the borough, although the worst housing conditions are generally in the rural areas.

The 2008 survey, a physical assessment of over 1,000 dwellings, identified 2.4% homes as having Category 1 hazards. A later desktop survey produced in 2011 by the BRE estimated the percentage to be closer to 23%; the same level as the England average. Due to the outdated nature of both surveys, looking at obsolete standards such as 'unfitness' and referencing 2001 Census data, further investigation as to the true level of hazards will be taking place.

Fire safety is generally at a reasonable standard with a total of 69 accidental dwelling fires occurring in 2012/13, resulting in only 1 injury and no deaths. This is a rate of 1.3 fires per 1,000 households, which is in line with the England average<sup>22</sup>.

Whether or not property conditions are poor enough to constitute a Category 1 hazard, it is important to recognise that poor energy efficiency levels across the stock contributes to the overuse of fossil fuels, high carbon emissions, fuel poverty and poor health (if occupants under heat their homes). The energy efficiency levels of homes across the borough are generally better than the England average<sup>23</sup>, although domestic CO<sub>2</sub> emissions per person are relatively high. Rates of emission reductions are also comparatively low<sup>24</sup>, despite a high uptake of loft and cavity wall insulation<sup>25</sup>. 1,055 households have no form of central heating<sup>26</sup> and a large proportion of the borough is off gas mains<sup>27</sup>. Fuel poverty is prevalent with 13.2% (7,149) fuel poor households compared to 10.9% across England<sup>28</sup>. Excess winter deaths, a complex

issue with many contributory factors, are also unusually high at 28.6, compared to 19.1 over England<sup>29</sup>.

The majority of the Council's work in ensuring good property standards focuses on the private sector, with the approach largely dependent upon whether the property is owner-occupied or rented. Inspections of privately rented properties are carried out and notices seeking improvements issued if necessary; ultimately enforcement action can be taken against landlords as a last resort to improve standards and protect the health and safety of residents. Owners can access advice from the council and partner agencies on housing conditions, most usually on energy efficiency. They can be directed to organisations that provide loans or grants to carry out these works. The inspection of Houses in Multiple Occupation (HMO) is a particular priority, as being the cheapest accommodation they may have poorer standards and attract some of the more vulnerable households who have little choice about where they live. Furthermore, it is likely that there will be increased demand for HMO accommodation with the single room benefit allowance extension, under the welfare reforms, to people aged 35 and under. Currently, there are an estimated 400 HMOs of which 31 are licenced<sup>30</sup>.

Since the 2008 Strategy 188 households have accessed a home improvement loan or grant. The amount of assistance has seen a reduction over the past few years, originally marking a move from grant assistance to loan provision and in the past year, reflecting the removal of ring-fenced funding from central Government. 85 homes had a total of 106 Category 1 hazards addressed through a combination of informal and formal enforcement action. With approximately 50,440 private sector dwellings<sup>31</sup>, there is the potential to save the NHS over £4.58M by removing housing hazards in the private sector<sup>32</sup>.

<sup>20</sup> *National Institute for Clinical Health Excellence - Impact of housing on Health*

<sup>21</sup> *Housing Act 2004*

<sup>22</sup> *Staffordshire Fire and Rescue 2012/13*

<sup>23</sup> *House Condition and Energy Efficiency Report 2008*

<sup>24</sup> *CO<sub>2</sub> Emissions Estimates 2005-2011*

<sup>25</sup> *Department of Energy and Climate Change (DECC) 2012*

<sup>26</sup> *Census 2011 Central Heating*

<sup>27</sup> *Home Energy Conservation Act 2013*

<sup>28</sup> *2011 Fuel Poverty Data: Low Income High Costs Indicator*

<sup>29</sup> *Stafford Health Profile 2013*

<sup>30</sup> *Stafford Borough Council 2013*

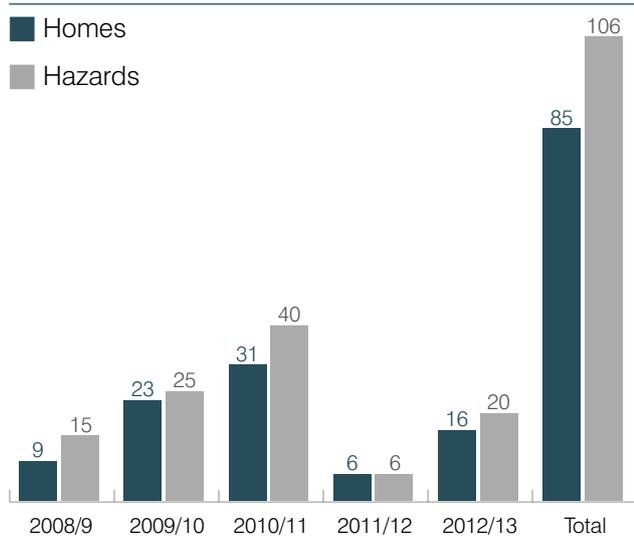
<sup>31</sup> *Dwellings by Tenure and District 2012*

<sup>32</sup> *BRE HHSRS Cost Calculator*

### Housing Improvement Assistance



### Removal of Category 1 Hazards



# Housing Supply and Affordability

The Council understands that growth is needed within the housing stock to accommodate a growing population. It also recognises local resident opinion<sup>33</sup> that best use should be made of existing stock with empty properties being utilised where possible. There are added incentives to the Council in encouraging the development of new homes, with the new homes bonus for both new builds and long term empty properties brought back into use and an added bonus for those used as affordable housing. The Council's Planning Department has authority in respect to approving developments and ensuring good quality design, retention of green space and access to amenity requirements. The Housing Team plays an important role in negotiating favourable levels of affordable housing<sup>34</sup> within developments and ensuring that these housing types are appropriate. An understanding of current and future needs as well as Government policy is essential in this task. For instance, the relocation of military personnel to Stafford by the MOD and the decision to move the University campus from Stafford to Stoke-on-Trent will have significant impacts upon the housing market. Changes to the spare room subsidy have also impacted upon the market, resulting in an increased demand for smaller sized affordable properties.

There are approximately 57,920 dwellings currently in the borough<sup>35</sup>. 1,660 homes are empty, of which 655 have been empty long-term, often attracting nuisances and representing a wasted resource in terms of housing stock and land<sup>36</sup>.

Homeownership is high at 71.6% compared to 63.3% across England. 36.4% of households own their home outright<sup>37</sup>. Between 2001 and 2011 there was a 92.2% increase in households living in private rented accommodation, compared to an 11.4% increase across all tenures. This substantial rise reflects a national increase in private renting across England. However, the number of owner-occupier and social renting households has also risen in the borough, at 4.7% and 7.9%, in contrast to small decreases across England<sup>38</sup>.

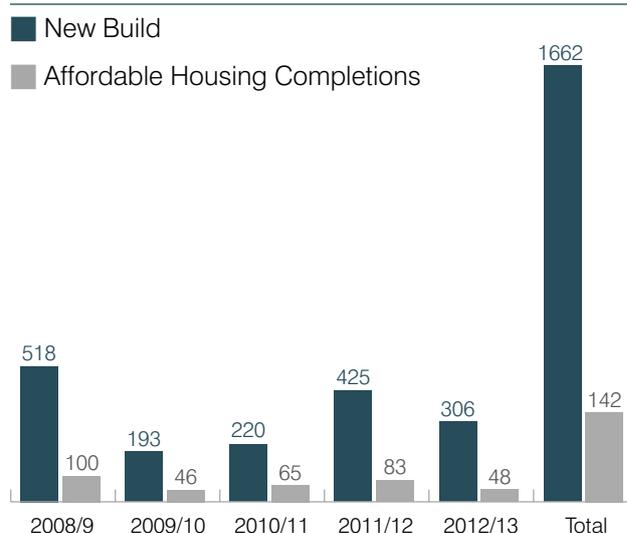
There is an identified need for 500 new homes each year of which 210 should be affordable<sup>39</sup>. Planning Policy<sup>40</sup> requires that either 30% or 40% of dwellings in housing developments be affordable (dependent on size and location). The usual split of tenures will be 80% social rent and 20% intermediate. The need from gypsies and travellers has been identified as 44 pitches, in total, from 2012/13 to 2026/27<sup>41</sup>.

Housing Type	Bedrooms	Annual Requirement
General needs	1	102
	2	70
	3	-18
	4	1
Older persons	1	57
	2	-2
<b>Total</b>		<b>210</b>

The demand for affordable housing is further evidenced by the sizable waiting list. 1,415 households were registered on the Housing Register in April 2013, of which 703 were in reasonable preference categories (housing need). There are roughly 524 lets per year through the Choice Based Lettings system used to allocate nominated social housing to households on the register, with an average waiting time of 218 days<sup>42</sup>.

Since the 2008 Strategy there have been a total of 342 affordable housing completions<sup>43</sup>. Last year alone, 48 completions generated approximately £340K to the Council over 6 years (and an additional £85K to Staffordshire County Council)<sup>44</sup>. Partly due to the economic climate, the levels of both new build and affordable housing are at lesser rates than the identified need<sup>45</sup>.

## Housing Supply



The Council recognises that employment and levels of income has a major role in securing residents' sustainable housing solutions. As the provision of welfare benefits reduces under national policy, it is increasingly important to help households gain employment and access to any benefits that they are entitled to. This helps to ensure that their housing costs can be met and they can achieve a reasonable standard of living. Conversely, a healthy and competitive housing market is seen as supporting a strong borough economy.

Median earnings of residents are £26,603, higher than the average across Great Britain. The lower quartile (LQ) earnings are £18,431. Unemployment is low at 4.5%, compared to 7.8% across Great Britain<sup>46</sup>. Similarly, rates of economic inactivity are low at 17.5% compared to 22.7%<sup>47</sup>. The rate of people claiming job seekers allowance is 1.7% (1,439), compared to 4.1%<sup>48</sup>. Deprivation is generally low but pockets do exist with 4 lower super output areas within the 20% most deprived in England, and 2,600 children still living in poverty<sup>49</sup>.

Despite the affordability of buying or renting a home being better than the England average, it still remains an issue for many borough residents as illustrated in the tables below<sup>50</sup>.

Median Income   £26,603 <sup>51</sup>				
Affordability for LQ Earners	Median house price	LQ house price	Average Annual Rents	LQ Rents
Costs	£165,000	£124,999	£6,444	£5,220
Ratio	6.2	4.7	0.2	0.2

LQ Income   £18,431 <sup>52</sup>				
Affordability for LQ Earners	Median house price	LQ house price	Average Annual Rents	LQ Rents
Costs	£165,000	£124,999	£6,444	£5,220
Ratio	9.0	6.8	0.3	0.3

This is further illustrated by statistics showing the number of households accessing support to help with their housing costs. In February 2013, 6,323 households were accessing housing benefit<sup>53</sup>, with approximately 855 households being affected by the under occupancy reforms in social housing in April, which resulted in around 700 households experiencing a 25% reduction in housing benefit and the remaining

experiencing a 14% reduction<sup>54</sup>. Other welfare reforms will also impact on the income of some residents, which include changes in regards to the Benefit Cap, Council Tax Support and Personal Independence Payments.

In addition to housing costs that are an undisputable outgoing each month, households also have to budget for other essential living costs, such as food and heating. Fuel poverty, an issue linked intrinsically to a home, is particularly prevalent across the borough.

<sup>33</sup> People's Panel Survey Autumn 2011

<sup>34</sup> Affordable housing means subsidised housing for rent or sale that is made available to specified eligible households whose needs are not met by the open market. It includes such tenures as social rent, affordable rent and intermediate housing.

<sup>35</sup> Dwellings by Tenure and District 2012

<sup>36</sup> Empty Homes Statistics 2012

<sup>37</sup> Census 2011 Tenure - Households

<sup>38</sup> Census 2001 Tenure - Households

<sup>39</sup> Strategic Housing Market Assessment 2012

<sup>40</sup> Plan for Stafford Borough 2014

<sup>41</sup> Gypsy and Traveller Accommodation Needs Assessment 2012

<sup>42</sup> Stafford and Rural Homes 2011/12

<sup>43</sup> Please note due to reporting delays, some delivery completed within the 2012/13 financial year will be recorded within the following year's figure.

<sup>44</sup> New Homes Bonus Calculator

<sup>45</sup> Please note due to reporting delays, some delivery completed within the 2012/13 financial year will be recorded within the following year's figure.

<sup>46</sup> Nomis Employment and Unemployment July 2012/June 2013

<sup>47</sup> Nomis Economic Inactivity July 2012/June 2013

<sup>48</sup> Nomis Out of Work Benefits September 2013

<sup>49</sup> English Indices of Deprivation 2010

<sup>49</sup> A mortgage is said to be affordable if it is 3.5x or less than the mortgagee(s)' income. Renting is deemed to be affordable when it represents less than 25% of a household's income.

<sup>50</sup> Strategic Housing Market Assessment 2012

<sup>51</sup> Private Rental Market Statistics 2012/13

<sup>52</sup> Housing Benefit Recipients February 2013

<sup>53</sup> Stafford Borough Council 2013

# Resident Profile

An understanding of demographics within the borough helps to inform how the Council operates to ensure that the needs of residents are met, with no discrimination present and an ease of access to services. It also helps to determine priorities and target groups for assistance, based on existing knowledge and future projections i.e. size of homes and suitability for vulnerable groups such as children, elderly or disabled people.

Stafford Borough covers an area of 59,817 hectares and has a population of around 130,869. This equates to a population density of 2.2, much lower than the England average of 4.1 <sup>55</sup>.

92.6% of residents are White; English/Welsh/Scottish/Northern Irish/British <sup>56</sup>, a slight decrease from 95.6% in 2001 <sup>57</sup>. This is still much higher than the England average of 79.8%. The next most common ethnic groups in the borough are White - Other White (1.7%) and Asian/Asian British - Indian. All other ethnic groups each represent less than 1.0% of the total population.

67.9% of the population are Christian <sup>58</sup>, a decrease from 2001 when 79.9% were Christian <sup>59</sup>. This is, however, still higher than the England average of 59.4%. 22.8% of residents report no religion, compared to 24.7% across England. All other religions represent less than 1.0% of the total population within the borough.

50.1% of the population are male, which is higher than the England average of 49.2% <sup>60</sup>. It is also a change from 2001 when 50.5% of the population were female <sup>61</sup>. No data could be found at a local level to illustrate the sexual identity of the resident population but regional statistics show that 93.5% of the West Midlands population is heterosexual and 1.2% is gay/lesbian/bisexual <sup>62</sup>.

With a significant rural community (over 37% of the population living in smaller settlements) <sup>63</sup> and a small but growing population of minority groups, accessing and offering services to residents can be challenging with issues around communication, transport, cost and trust. However, the Council recognises that communication is key in ensuring that the needs of all residents are met and currently has a range of routes into the service on offer (i.e. telephone, email, website, translation services, drop ins and outreach projects).

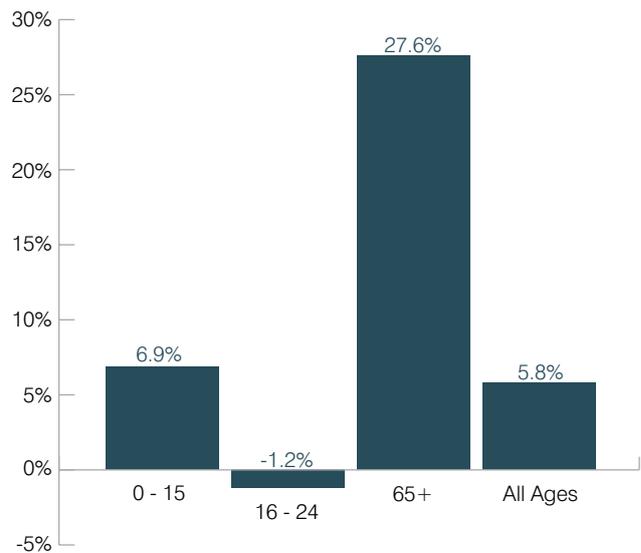
18.2% of borough residents have a long-term health problem or disability that limits their day-to-day activities <sup>64</sup>. This is a slight increase from 2001 when 17.6% of the population had limitations <sup>65</sup>. The

percentage is also slightly higher than the England average of 17.6%.

63.6% of the population are of working age (16 to 64), compared to 64.8% across England. 19.3% of the population are aged 65 and over, higher than the England average of 16.3%. 19.5% of the population are aged under 18 (17.1% under the age of 16), compared to 21.4% (and 18.9%) across England <sup>66</sup>.

The population is growing and it is anticipated that there will be an all age increase of around 5.8% to 138,430 residents by 2021. The demographic of the population is also ageing with the number of people aged 65 and over set to increase by 27.6% and the number aged 70 and over by 40.2% <sup>67</sup>. The population mean and median age have increased from 40.45 and 40 in 2001 <sup>68</sup> to 41.8 and 43 in 2011.

## Population Projections (2011 - 2021)



The population of the borough equates to a total of approximately 57,000 households <sup>69</sup>. The majority of households consist of couples with no dependent children (39.0%), couples with dependent children (20.7%) and single person households (29.1%). 851 (1.5%) households are multi-person, of which 316 (0.6%) consist completely of full time students. 14,820 (26.6%) households contain at least one dependent child <sup>70</sup>.

The particular needs of the young, elderly and disabled are seen as a priority for the Council as individual's health needs have a major part to play in determining the most suitable and sustainable housing solutions for the future. Help for single

households is also seen as an area for expansion as the Council recognises that they may too require help, despite statutory homeless acceptances being primarily for households with dependent children. Some work has already been commenced in this area, with a new private sector leasing scheme accessible to single people.

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<sup>55</sup> *Census 2011 Population Density*

<sup>56</sup> *Census 2011 Ethnic Group*

<sup>57</sup> *Census 2001 Ethnic Group*

<sup>58</sup> *Census 2011 Religion*

<sup>59</sup> *Census 2001 Religion*

<sup>60</sup> *Census 2011 Sex*

<sup>61</sup> *Census 2001 Sex*

<sup>62</sup> *Integrated Household Survey 2012*

<sup>63</sup> *Census 2011 Usual Resident Population*

<sup>64</sup> *Census 2011 Long-term Health Problem or Disability*

<sup>65</sup> *Census 2001 Limiting Long-term Illness*

<sup>66</sup> *Census 2011 Age Structure*

<sup>67</sup> *Interim 2011-based Population Projections*

## Conclusion and Recommendations

The Council recognises its duties in ensuring good property standards across tenures that the most vulnerable residents are helped to access accommodation and that residents are assisted in living safely and independently. It also recognises the interrelationship between the work of different services, such as health, education, police and planning, and the overall contribution that all of these services can have to the health and wellbeing of residents. It is therefore recommended that the new Housing Strategy look at the wider environment and the role that partners have to play not only in contributing to any distinct housing objectives, but also their wider work in ensuring that Stafford Borough is a great place to live, work, learn, visit and invest in.

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