# **APPENDIX 2**

# NORTHAMPTON PARTNERSHIP HOMES OLDER PERSONS' HOUSING STRATEGY APPENDICES

# **CONTENTS**

1	Population, Health & Deprivation – Detailed Section	3
2	Provision	8
3	Non Council-owned older persons' housing	10
4	Rankings for stock	13
5	Needs Mapping - Detailed Report	14
6	Detailed Waiting List Analysis	20
7	Outcomes from Sheltered Survey - Detailed Report	21
8	Outcomes from General Needs Survey with Tenants aged 50+ - Detailed Report	32
9	Outcomes of Survey with Support Officers	39
10	Outcomes of Survey with Rehousing & Support and Tenancy & Estate Teams	41
11	Outcomes of Consultation with Stakeholders	44
12	Outcomes of 'concept testing' pilot with sheltered housing tenants	46
13	Move Motivators	49

#### Appendix 1 - Population, Health & Deprivation - Detailed Section

### 1 Population

#### **Population Numbers and Projections**

- The current population in the Council area aged over 65 stands at 32,300, a figure that equates to 19% of the total adult population.
- The corresponding percentage for the County of Northamptonshire is 23%.
- Figures 1 and 2 below show that the 65 plus population is set to grow by almost a half and the 75 and 85 plus population by significantly more.
- In simple terms there are projected to be circa 15,000 more people aged 65 plus by 2030 and 3,300 aged 85 plus.

Fig 1 - Older people in Northampton: Projected change to 2030 (No.)

Projections (no.)	2015	2020	2025	2030
65 +	32,300	36,500	41,300	47,400
75+	14,100	16,400	20,700	23,900
85+	4,300	5,000	6,000	7,600

Fig 2 - Older people in Northampton: Projected change to 2030 (%)

NBC Projections (%)	2015 - 2020	2015 - 2025	2015 - 2030
65 +	13	28	47
75+	16	47	70
85+	16	40	77

Source: IPC POPPI

#### **Ethnicity**

- Ethnicity and the need to account for associated cultural sensitivities can impact on housing and service provision.
- As shown below (Fig. 3), BME groups aged 65+ represent 5% of Northampton's total 65 plus population compared to an average of 8.5% for the 18 64 age group.

Fig 3 - Ethnicity 65 + (No. &%)

Northampton Population 65 +	White	Mixed/ multiple ethnic group	Asian/ Asian British	Black/ African/ Caribbean/ Black British	Other Ethnic Group
Number	26,790	148	688	542	47
%	94.9	0.5	2.4	1.9	0.2

Source: IPC POPPI

#### Gender

Reviewing projections for the proportions of males and females across the older age bands (65 plus and 85 plus) for Northampton to 2030 shows relatively parallel rates of increase are

predicted for both gender categories. As would be expected the numbers of females in older age bands is higher than the corresponding numbers of males.

#### 2 Health

#### **Health Indicators - LLTI**

- Figure 4 shows that a predicted increase overall by 2030 of nearly 50% for Moderate LLTI (of note the increase for those aged 75-84 is 66% compared with 72% for people aged 85 +).
- In the case of Severe LLTI, the corresponding overall increase is approximately 54% while the increase for those aged 75-84 is 66% compared with 73% for the 85 plus age group.

Fig 4 - LLTI Projections - Northampton

Moderate LLTI ('Day-to-day activities are limited a little')	2015	2020	2025	2030
People aged 65-74	4,069	4,494	4,606	5,254
People aged 75-84	3,103	3,609	4,654	5,161
People aged 85 +	1,152	1,309	1,570	1,989
Total population aged 65+	8,323	9,412	10,830	12,404

Severe LLTI ('Day-to-day activities are limited a lot')	2015	2020	2025	2030
People aged 65-74	2,750	3,038	3,113	3,551
People aged 75-84	2,709	3,151	4,063	4,505
People aged 85 +	1,922	2,184	2,621	3,320
Total population aged 65+	7,381	8,373	9,797	11,376

Source: IPC POPPI

### **Health Indicators – Specific**

The table below illustrates the predicted growth in various health conditions in terms of older people.

Fig 8 - Health and other challenging circumstances for people aged over 65/75/85

Condition	Age	2015	2015 (%)	2020	2030
Predicted to have Dementia	85+	1,052	24.5	1,184	1,832
Predicted to have a moderate / severe learning	65+	92	0.3	114	130
disability	85+	8	0.2	11	14
Predicted to be admitted to hospital as a result of falls	65+	647	2.0	748	1,043
Predicted to be admitted to nospital as a result of falls	85+	523	12.2	604	880
Predicted to have diabetes	65+	4,060	12.6	4,528	5,896
Fredicted to flave diabetes	75+	1,700	12.1	1,944	2,838
Predicted to have a longstanding health condition	65+	747	2.3	838	1,119
caused by a stroke	75+	388	2.8	446	654
Predicted to have a Body Mass Index (BMI) of 30 or	65+	8,562	26.5	9,473	12,076
more	85+	701	16.3	779	1,165

Source: IPC POPPI

Of note numerically the largest groups now and into the future are those aged 65 plus with a Body Mass Index (BMI) of 30 or more (which is classified as obese), those with diabetes, and those suffering dementia. The potential impact of the figures for these conditions in particular suggests that they could have a significant influence on the design of future specialist housing for older people since, for example:

- Dedicated dementia clusters within specialist housing for those in the latter stages of this debilitating illness are increasingly being regarded as an appropriate solution for this client group in terms of their wellbeing. Also, the separation from the main development can assist in ensuring the health and wellbeing of other residents living in the same housing settings.
- The predicted growth in admission to hospital as a result of a fall, those suffering from diabetes or recovering from a stroke leads one to recognise the need for health and wellbeing services which can be delivered to those in the community using specialist older persons' housing and other community facilities as a resource centres. Of particular note here is the extent to which these services can be preventative in nature.
- People with a BMI of 30 or more can require appropriate adaptations to the built environment to facilitate the delivery of care in the home, in emergency situations and notably in terms of improved mobility and independence for the resident.

### **Health Indicators - Challenges to independence**

The table below illustrates predicted increases in all categories and of particular note these increases could have significant implications in terms of demand for care and support services.

Fig 9 – Challenges to independence for people aged 65 and 85 plus

Challenge	Age	2015	2015(%)	2020	2030
Unable to manage at least one domestic	65+	13,021	40	14,744	20,060
task*	85+	3,398	79	3,732	5,798
Unable to manage at least one self-care	65+	10,718	33	12,067	16,429
task **	85+	2,902	67	3,263	4,991
Unable to manage at least one mobility	65+	5,871	18	6,638	9,141
activity ***	85+	1,975	46	2,215	3,335

Source: IPC POPPI

#### **Living Alone**

Significant growth in Northampton is projected for those aged over 65 living alone. This underlines the need for appropriate housing and support to cater for this expanding category of older people. Of particular note here is that those living alone can be more susceptible to becoming socially isolated and good information about community facilities can assist in this respect particularly as social isolation can lead to / exacerbate health issues.

Fig 10 - People aged 65 and over living alone, by age and gender

People aged 65 and over living alone	2015	2020	2025	2030
Males aged 65-74	1,760	1,900	1,960	2,280

<sup>\*</sup> Including: household shopping, wash & dry dishes, clean windows inside, jobs involving climbing, use a vacuum cleaner, wash clothing by hand, open screw tops, deal with personal affairs, do practical activities

<sup>\*\*</sup> Including: bathe, shower /, dress / undress, wash & face and hands, feed, cut toenails, take medicines

<sup>\*\*\*</sup> Including: going out of doors and walking down the road; getting up and down stairs; getting around the house on the level; getting to the toilet; getting in and out of bed.

Males aged 75 and over	2,040	2,414	3,094	3,570
Females aged 65-74	2,820	3,150	3,210	3,660
Females aged 75 and over	5,124	5,673	7,015	8,174

Source: IPC POPPI

### 3 Deprivation

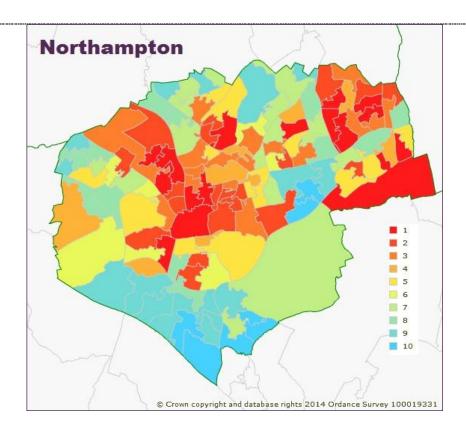
#### **Background**

The Index of Multiple Deprivation (IMD) is commissioned by the Department for Communities & Local Government (DCLG) as a means of measuring relative deprivation across England. This resource is created using statistics gathered for seven deprivation 'domains' for small geographical Lower Super Output Areas (LSOAs) each with populations of around 1,600 people. The recently released, latest edition of the index, IMD2015, is based on information from a total of 32,844 English LSOAs, of which 133 are in Northampton BC. Regarding the seven statistical domains contributing to overall deprivation measures in the IMD these focus, respectively, on the topics of: Income, Employment, Education, Health, Crime, Barriers to Housing & Services and, Living Environment.

#### **Overall Deprivation**

One output from IMD ranks the 354 English Local Authorities using a system where the rank of 1 is the most deprived authority overall while the rank of 354 is the least deprived. From IMD2015 Northampton has a rank of 108 which places it just outside the 30% most deprived Local Authorities.

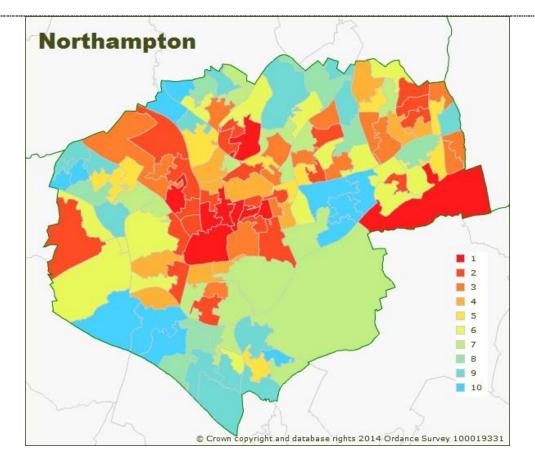
Invariably, however, overall rankings are influenced by pockets of significant and persistent deprivation, often existing alongside wider areas of relative affluence. Northampton is no exception in this respect and this is illustrated in the map below showing the spread of **overall deprivation** for the Borough from IMD 2015, colour coded by national Dectile where Dectile 1 is the most deprived area and Dectile 10 is the least deprived.



Looking at the above areas of significant deprivation at Ward level reveals that the 20 most deprived LSOAs in Northampton can be found in: Spencer (5), Lumbertubs (4), Castle (3), St David (2), Eastfield (2) Billing (1), Ecton Brook (1), Thorplands (1), and, St James (1).

### **Income Deprivation among Older People**

Another output from the IMD is the Income Deprivation Affecting Older People Index (IDAOPI) and the IMD2015 results for IDAOPI for Northampton are shown in the following map, again colour coded by national Dectile where Dectile 1 is the most deprived area and Dectile 10 is the least deprived.



As can be seen above there are similarities in the geographical spread of deprivation for IDAOPI with those for deprivation overall, albeit with some variations in terms of dectile ranking. Then, looking at the areas of significant deprivation flagged by IDAOPI in terms of the Borough's Wards, the 20 most deprived LSOAs for this index are in: Spencer (5), Castle (4), St Crispin (4), St David (2), Billing (1), Eastfield (1), Delapre (1), St James (1) and, West Hunsbury (1).

Note: the above maps have been sourced from Northamptonshire Analysis – www.northamptonshireanalysis.co.uk.

# Appendix 2 - Provision

### 1 Housing Characteristics

### **Dwelling Analysis**

The tables below show the complete number of dwellings in the Northampton area and an analysis of Accommodation Type. Of note there appear to be almost 3,000 empty homes in the Borough. Clearly not all of these can be viably brought back into use nor are all of them designated for older people.

#### Fig 11 - Total Dwellings

 Overall	Northampton
Household spaces	91,700
Household spaces with at least one usual resident	88,731
Household spaces with no usual residents	2,969

#### Fig 12 - Analysis of Dwellings by type

Туре	
Whole house or bungalow: Detached	19,595
Whole house or bungalow: Semi-detached	26,273
Whole house or bungalow: Terraced (including end-terrace)	29,228
Flat, maisonette or apartment: Purpose-built block of flats or tenement	14,009
Flat, maisonette or apartment: Part of a converted / shared house (Inc. bed-sits)	1,878
Flat, maisonette or apartment: In a commercial building	634
Caravan or other mobile or temporary structure	83

Source: Census 2011

#### **Tenure**

The chart and table that follow illustrate high levels of home ownership in Northampton which has significance given research that shows homeowners often wish to remain in the same tenure as they age.

Fig 13 - Tenure 65 plus



Sour

#### ce: IPC POPPI

- This factor, coupled with the projected growth in older age groups, suggests strong market opportunities for providers who develop purpose designed retirement properties for sale and shared ownership.
- Equally, there are significant numbers of people in social and private rented accommodation, a factor that suggests potential demand for specialist rented housing for older people.

However, research also indicates that there are factors that impede people moving to more suitable accommodation as they age.

Fig 14 - Tenure (No.) by age band

	People aged 65-74		People age	d 75-84	People aged 85+		
	No.	%	No.	%	No.	%	
Owned	14,064	77	7,618	78	3,022	70	
Rented from council	2,571	14	1,356	14	740	17	
Other social rented	584	3	366	4	223	5	

Private rented or living rent free	979	5	458	5	314	7
Source: IPC POPPI						

#### **Housing Market**

The table below shows there is little difference between the Borough and the County.

Fig 15 - House Type and Prices (October 2015) - Northampton and Northamptonshire

AREA (Sales)	Overall Average	Detached	Semi- detached	Terraced	Flat
Northampton (994)	£224,142	£375,868	£207,838	£192,165	£120,698
Northamptonshire (3,671)	£220,735	£398,620	£197,710	£172,463	£114,145

Source: <u>Home.co.uk</u>

- Whilst overall prices are similar for the County and Northampton the following factors should be considered:
  - Average prices for flats and semi-detached houses are around 5% higher in Northampton
  - Terraced properties are on average nearly 12% more expensive in Northampton
  - Detached houses cost on average 6% more in Northamptonshire.

Local house prices can have an influence on new housing developments for older people where some of the properties are for outright sale / shared ownership. It follows that price sensitivity is a key consideration for developers and careful market research is needed in terms of affordability. Of note, specialist housing for older people has a price premium and, for example, Wardington Court, a new assisted living scheme being developed by McCarthy & Stone in Kingsthorpe is advertising 1 bedroom properties from £169,950 and 2 bedroom properties from £240,950 which is significantly higher than the average property prices shown in Figure 14 below.

Fig 14 – Numbers of Rooms and Prices (October 2015) - Northampton

	Average price	Average price
	to buy	to Rent (PCM)
One bedroom	£109,972	£713
Two bedrooms	£146,963	£764
Three bedrooms	£209,269	£872
Four bedrooms	£332,367	£1,235
Five bedrooms	£471,833	£1,865

Source: Home.co.uk

# Appendix 3 – Non Council-owned older persons' housing

#### 1 RP provision – Social Rent

Provider/Scheme	Location	Accommodation	Built	Comments
EMH Homes				
Abington Lodge	NN3 2DE	42 bungalows 1&2 bed	2000	Incl. mobility/w'chair units
Addlecroft Estate	NN2 6NG	43 flats 1, 2 & 3 bed	1982	Incl. mobility/w'chair units
Byron/Shelley St	NN2 7JD	20 flats 1&2 bed	1982	
Carey Court	NN3 7SN	7 bungalows 1 bed	1995	Incl. mobility/w'chair units

Carol Trusler Mews	NN5 7AS	10 flats 1 bed	1994	
Chapel House	NN4 8HJ	20 flats 1 bed	1900	Renovated 1982
Collingwood House	NN1 4RX	25 flats, studio/1 bed	1985	
Crispin House	NN1 3BL	14 flats 1 bed	1991	Incl. mobility/w'chair units
Elizabeth House	NN3 3DE	46 flats, bungalows 1 bed	1981	Incl. mobility/w'chair units
Garfield House	NN2 6NW	29 flats 1 bed	1986	Incl. mobility units
Lower Adelaide St	NN2 6LQ	4 flats 1 bed	1992	Incl. mobility/w'chair units
Murray House	NN1 4PL	40 flats 1 bed	1988	Incl. mobility units
Randall House	NN1 4LZ	10 flats 1&2 bed	1983	Incl. mobility/w'chair units
Sheriff Road	NN1 4LT	6 flats 1 bed	1983	
St Albans Road	NN23 2RU	4 flats 1&2 bed	1992	Incl. mobility/w'chair units
Gharana HA (Accord Group)				
Nazarana Court	NN2 6DG	24 flats 1&2 bed	NS	Acquired from Housing & Care 21
Hanover				
Hanover Court	NN3 8QL	39 flats 1&2 bed	1980	
Camberley Close	NN3 9BS	39 flats 1 bed	1985	
Runnymede Gdns	NN3 9SW	23 flats 1 bed	1980	
Homestead Cottages				
Homestead Cottages	NN2 6JH	24 bungalows 1 bed	NS	
Orbit Heart of England HA				
Riverside Court	NN7 4RR	35 flats 1 bed	2000	
Jubilee House	NN7 3RN	15 flats 1&2 bed	NS	
Sanctuary Housing				
Pleydell Gdns	NN4 8DR	12 bungalows 1&2 bed	1994	Inc. mobility/w'chair units
St Giles Charity Estates				
Edward Watson Close	NN2 8LP	11 bungalows 1 bed	NS	
		TOTAL UNITS: 542		

Sources: Provider contact/EAC online data

# 2 Retirement Leasehold Provision

Manager/Scheme	Location	Accommodation	Built	Comments
Ashby Lowery Mgt				
Manning Court	NN3 7HE	31 flats 1 bed	NS	
Burlington Care Homes				
Burlington Court	NN1 4EU	15 flats 1&2 bed	2005	Close Care Housing
Countrywide Mgt Agents				
Fairway Oak	NN4 0XF	27 bungalows/cottages	1990	
EMH Homes			Ī	
Elmhurst Court	NN3 2LG	24 flats 1&2 bed	1988	
FirstPort				
Albion Court	NN1 1UG	59 flats 1&2 bed	1998	Ex McCarthy & Stone
Lalgates Court	NN5 7AF	50 flats 1&2 bed	2005	Ex McCarthy & Stone
Sheraton Close	NN3 2NQ	57 bungalows 1&2 bed	1987	
4 Seasons Health & Care				
Brampton View Care Village	NN6 8GB	34 flats, bungalows	2008	Close care housing
Hanover				

Pond Farm Close	NN5 6JQ	32 flats, bungalows	1987	
McCarthy & Stone				
Westonia Court	NN3 3JB	50 flats 1&2 bed	2013	At final sales stage
Old Schoolhouse				
Old School House	NN1 5RX	36 flats 2 bed	1989	
Retirement Security				
King Richard Court	NN4 0XU	52 flats 1&2 bed	1991	Enhanced sheltered
Richmond Villages				
Richmond N'hampton	NN4 5EB	92 flats 1&2 bed	2007	Enhanced sheltered/ECH
		TOTAL UNITS: 559		

Sources: Provider contact/EAC online data / \*125 units of which are affordable rent

# 3 Extra Care Housing Provision for rent & leasehold—Current / Pipeline

ExtraCare Charitable Trust				
St Crispin Village	NN5 4RB	270* flats & bungalows 1&2 bed	2006	ECH 125 for affordable rent, 145 Shared Ownership and Leasehold
Housing & Care 21				
Foxfields	NN5 4FR	77 flats 2 bed & 6 flats 1 bed	2016	Extra Care provision currently for affordable rent being built by Keepmoat as part of a large new mixed tenure residential scheme at Upton Park
McCarthy & Stone				
Wardington Court	NN2 8AG	40 flats 1&2 bed	2015/16	Assisted Living (available from Spring 2016)
		Total Rent: 202		
		Total Leasehold: 185		

### 4 Residential Care Provision

Abbreviations: CH = Care Home; C+N = Care with Nursing; NH = Nursing Home; OPG = Older People Generally; Dem = Dementia; LD = Learning Disabilities; PD = Physical Disabilities; MD = Mental Disabilities.

Home Name	Location	Owner	Туре	Conditions cared for	Capacity (residents)
The Avenue	NN3 6BA	St Matthews Ltd	C+N	OPG; Dem	28
Abbotsford	NN1 4EZ	Mr J Ng	CH	OPG; Dem	18
Argyle House	NN5 7AJ	Countrywide	C+N	OPG; PD; Dem	60
Bethany Homestead	NN2 7BP	The Trustees	CH	OPG; Dem	48
Boughton Lodge	NN2 7SU	Mr A Fussey	CH	OPG; Dem	13
Burlington Court	NN1 4RS	Burlington Court CH Plc	CH	OPG; PD; Dem	102
Cederwood	NN3 6QP	Cedarwood NH Ltd	C+N	OPG; PD; Dem	32
Cliftonville	NN1 5BU	Avery Healthcare	C+N	OPD; PD; Terminal	106
Clinton Care Home	NN1 4JQ	Holland Homes	CH	MD	17
Collingtree Park CH	NN4 0XN	Barchester Healthcare	CH	OPG; Dem	79
Crescent House	NN1 4SB	Crescent Homes Ltd	CH	OPG	33
Da-Mar CH	NN2 7HU	Mr Fanibi	CH	OPG; Dem	29
Ecton Brook House	NN3 5EN	Olympus Care	СН	OPG; Dem; LD; MD	46
Glenside CH	NN5 5DA	Glenside NH Ltd	CH	OPG; Dem	30
Green Park CH	NN3 3HN	Council of Voluntary	СН	OPG; PD	22
		Services			
Kingsley NH	NN2 7BL	Mr & Mrs Robinson	C+N	OPG; PD; Dem	25
Kingsthorpe Grange	NN2 8LT	St Matthews Healthcare	C+N	OPG; Dem	25
Lucas Court CH	NN3 7RQ	Avery Healthcare	C+N	OPG; PD; Dem	60
Margaret's Rest Hse	NN2 7BL	Mr & Mrs Robinson	CH	OPG; PD; Dem	27
Merrifield Hse	NN4 6JR	Mr & Mrs Skears	CH	OPG; Dem; MD	20
Nazareth Hse	NN5 6AD	Sisters of Nazareth	CH	OPG	50
Nicholas Rothwell Hse	NN2 8LR	Charity of St Giles	CH	OPG; PD; MD	21
Oak Lodge	NN5 6JW	Mrs Desai	CH	OPG; Dem	36
Oakwood NH	NN1 4SA	Oakwood NH ltd	C+N	OPG	29
Obelisk House	NN2 8SA	Olympus Care	CH	OPG; PD; Dem	44
Phoenix House	NN1 4BN	Stepping Stones Care	C+N	Dem; MD	15
Queens Park NH	NN2 6LP	Dr Munaliar & Mr Poon	C+N	Dem; MD	26
Rathgar Res CH	NN3 6QT	Mr & Mrs Clark	CH	OPG; Dem	23
Southfields House	NN3 5DS	Olympus Care	CH	OPG; PD; Dem	46
Spencer House CH	NN1 5BU	Avery Healthcare	C+N	OPG; Dem	64
St Christopher's	NN3 3AD	C of E War Memorial Homes	СН	OPG; PD	55
St John's Home	NN3 3JF	St John's Charitable Trust	СН	OPG	50
St Matthews NH	NN2 7HF	Mr Sidhu-Brar	C+N	MD; Dem	58
St Michael's House	NN1 4JQ	Messrs Going/Galbraith	СН	MD	13
Symphony House	NN2 6LP	Mr JP Arora	C+N	OPG	25
Templemore	NN5 6AA	B&M Care	СН	OPG; Dem	72
The Leys	NN3 6HP	Mrs P Eyre	СН	OPG; PD	18

Turn Furlong	NN2 8BX	Shaw Healthcare	C+N	OPG; PD; Dem	51	

Primary information source: EAC online data

# Appendix 4 –Rankings for stock

The table below shows all schemes with rankings denoting suitability.

Sheltered Scheme Criteri		ing: Higher the number the leas		e for older persons' stock	T
	Rank		Rank		Rank
Hunters Close	14	Wallbeck Close	10	Churchill Avenue Bungalows	7
Abbey House	13	Blakesley Close	10	Westfield Road	6
Devonshire House	13	Eden Close Bungalows	10	Fieldmill Road	6
Melbourne House	13	Birchfield Court Bungalows	10	Blackberry Lane	6
St Johns House	13	Lawrence Court	10	Parsons Meade	6
James Lewis Court flats	13	Chalcombe Avenue bedsit	10	Nene Drive	6
Bouverie Walk	12	East Oval	9	Ashbrow Rd / Southwood Hill, Briar Hill Bungalows	5
Elkins Close Flats	12	Eskdale Avenue	9	Cambourne Close Bungalows	5
Spencer Haven Flats	12	Kelmscott Close	9	Coverack Close Bungalows	5
Churchill Avenue Flats	12	Montague Cres	9	Cotswold Avenue Bungalows	5
Alliston Gardens	11	Leicester St bedsit	9	Bouverie Road Bungalows	5
Cambourne Close Flats	11	Arthur Street	9	Cardigan Close Bungalows	5
Coverack Close Flats	11	Chalcombe Ave bungalow	9	Market Street Bungalows	5
Cotswold Avenue Flats	11	Brook Lane	8	Drayton Walk Bungalows	5
Bouverie Road Flats	11	George Nutt Court	8	Newnham Road Bungalows	5
Lodge Ave Flats	11	Larch Lane	8	Eastfield Road	5
Cardigan Close Flats	11	Briton Terrace Bungalows	8	Arlbury Road	5
Dallington Haven Flats	11	Rillwood Court	8	Goldcrest Court	5
Market Street Flats	11	Faracre Court	8	Trussell Road	5
Portland Place	11	Spencer Haven Bungalows	8	James Lewis Court Bungalows	5
Priory Close	11	Dallington Haven Bungalows	8		
Drayton Walk Flats	11	Redruth Close	7		
Newnham Road Flats	11	Lodge Ave Bungalows	7		
Queens Crescent Flats	11	Eastern Avenue South	7		
Eden Close Flats	11	Queens Crescent Bungalows	7		
Elkins Close Bungalows	11	Crestline Court	7		
Briton Terrace Flats	11	Jasmine Road	7		
Birchfield Court Flats	11	Mortar Pitt Road	7		
Fraser Road	11	Viscount Road	7		
Leicester St flat	11	Southeby Rise	7		
Leicester St bungalow	11	Hardy Drive	7		
Sandringham Close	11	Pennycress Place	7		
Grace John Court	11	Eleonore House	7		1

# Appendix 5- Needs Mapping - Detailed Report

# 1 Background

The needs mapping exercise has been challenging and time consuming due to the fact that it has required combining two separate databases with no common fields. The two database extracts were as follows:

- Callcare Dwelling List Containing: Name & Address (multiple fields), Scheme & Unit ID
- Support Containing: Name (in one field), Address (in one field), Support start / end date & duration

To this we manually added the following separate Callcare lists relating to health issues which could not be automatically included with the Dwelling list:

- Sight Issues
- Mobility Issues
- Heart Issues
- Hearing Issues

- Diabetes
- Confusion
- Blood Issues

The sections that follow are the initial outputs from the analysis of the newly developed master database and give profiles of gender, health and support to which will be added age. This report and database will allow officers to review needs and service delivery by geographic areas and, if required, more specific property locations (i.e. schemes).

#### 2 Units and Clusters

With the assistance of NPH staff we clustered the units into geographic clusters as shown below (ranked by numbers of units). A breakdown of former scheme names with clusters can be found at the bottom of this Appendix in section 6. As can be seen the largest cluster is in the Town Centre with 284 units and the smallest is Lumbertubs with 19 units.

### FIG 1 – GEOGRAPHIC CLUSTERS (%)

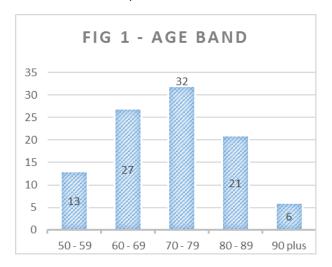
Cluster	Units	Cluster	Units
All	2,141		
Town Centre	284	Bellinge	90
Kingsthorpe etc.	271	Hardingstone	89
Briar Hill etc.	179	Eastfield / Headlands	86
Dallington / Kings Heath	168	Lakeview	73
Arlbury Road / Blackthorn	133	Spencer Estate	60
Abington etc.	123	Wellingborough Road	53
Ecton Brook	111	Rectory Farm	42
Duston	102	Pleydell Road, Far Cotton	34
St James	97	Ryehill	32

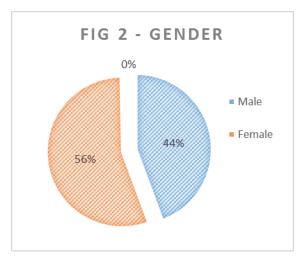
Delapre	95	Lumbertubs etc.	19	l
Delapi e	93	Lumbertubs etc.	13	ĺ

### 3 Age & Gender

Figures 1 and 2 below provide a breakdown of tenants' age and gender and, as can be seen:

- The majority of sheltered tenants are aged 60-69 and 70-79
- As would be expected more than half of all tenants are female





### 4 Health Issues

As illustrated in Figure 3 below, in overall terms, almost 46% of tenants are recorded as having no specified health issues and that, for the remainder, the most regularly identified health condition category is mobility issues (nearly 35%). This said, sight, hearing, diabetes and heart related issues affect between 10% and 18% of tenants in the proportions shown.

Figure 4 that follows presents these figures in more detail by cluster and, as can be seen, there are some marked variations within this prevalence matrix. Nevertheless, Pleydell Road, Far Cotton stands out as having the highest health condition incidence rates in terms of sight, mobility, heart and blood issues.

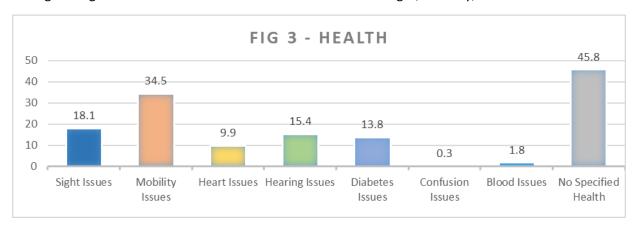


FIG 4 – HEALTH BY CLUSTER (%)

	Sight Issues	Mobility Issues	Heart Issues	Hearing Issues	Has Diabetes	Confusion Issues	Blood Issues	No Specified Health Issues
All	17.7	34.9	10.0	15.6	14.0	0.3	1.8	45.2
Hardingstone	21.3	31.5	4.5	11.2	12.4	-	2.2	59.6
St James	8.2	16.5	2.1	9.3	11.3	-	1	57.7
Eastfield / Headlands	11.6	26.7	3.5	11.6	12.8	-	-	57
Lakeview	2.7	24.7	6.8	12.3	12.3	-	2.7	54.8
Rectory Farm	35.7	33.3	9.5	14.3	11.9	-	-	50
Abington etc.	13	32.5	17.1	17.1	11.4	0.8	2.4	48
Town Centre	6.7	28.5	6.3	15.1	8.5	0.4	1.4	47.9
Arlbury Road / Blackthorn	9.8	37.6	3.8	18	17.3	-	0.8	47.4
Lumbertubs etc.	26.3	36.8	5.3	10.5	26.3	-	-	47.4
Dallington / Kings Heath	16.1	36.3	15.5	16.1	16.1	0.6	3.6	45.8
Kingsthorpe etc.	16.2	33.6	9.6	14.4	14.8	0.7	1.8	45.4
Bellinge	24.4	37.8	13.3	16.7	17.8	-	1.1	43.3
Duston	18.6	37.3	8.8	22.5	14.7	-	1	42.2
Ryehill	15.6	34.4	9.4	28.1	18.8	-	3.1	40.6
Ecton Brook	23.4	38.7	16.2	13.5	10.8	-	•	38.7
Spencer Estate	10	45	10	16.7	16.7	-	-	38.3
Wellingborough Road	118.9	37.7	11.3	18.9	20.8	-	-	37.7
Delapre	22.1	41.1	4.2	12.6	15.8	-	1.1	34.7
Briar Hill etc.	21.2	48	15.6	18.4	16.2	0.6	3.9	34.1
Pleydell Road, Far Cotton	2.9	58.8	41.2	20.6	14.7	-	8.8	20.6

# 5 Support and Care

Figures overall for support service delivery are illustrated in the chart immediately below and immediately apparent are the high proportions relating to 'No Housing Related Support' (77%) and 'Formerly had support' (nearly 68%). The reasons behind these headline findings, it is suggested, is the withdrawal of Supporting People funding and the introduction of the housing related support service which is predicated on assessed need. Overall, 2% receive Domiciliary Care services.

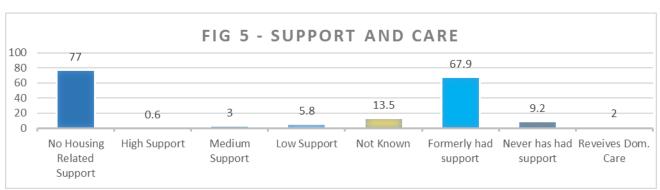


Figure 6 that follows shows the background proportions behind the headline figures by cluster and these findings, together with the attendant variations within the matrix, will be valuable in the continued development of the service. With regards to Domiciliary Care, as can be seen, there are marked variations with 16% in Lumbertubs, 15% in Hardingstone at one end of the spectrum and none in Lakeview and 2% in Abington, Duston, Arlbury Road / Blackthorn and Rectory Farm. There is no obvious correlation between the amount of Domiciliary Care delivered and the amount of support by cluster.

### FIG 6 – SUPPORT BY CLUSTER (%)

	No Housing Related Support	High Support	Medium Support	Low Support	Not Known	Formerly had support	Never has had support	Receives Dom Care
Spencer Estate	52	3.3	8.3	6.7	30	30	21.7	10
Eastfield / Headlands	55	1.2	3.5	7	33.7	45.3	9.3	8
Town Centre	68	0.4	7.7	6.7	16.9	61.6	6.7	6
Kingsthorpe etc.	71	0.4	2.2	10.7	16.2	63.5	7	5
Abington etc.	74	-	2.4	7.3	16.3	70.7	3.3	2
Dallington / Kings Heath	74	-	5.4	7.7	12.5	50	24.4	7
Ryehill	75	3.1	3.1	6.3	12.5	71.9	3.1	9
Wellingborough Road	76	1.9	1.9	11.3	9.4	62.3	13.2	6
All	77	0.6	3	5.8	13.5	67.9	9.2	7
St James	79	2.1	-	11.3	7.2	56.7	22.7	7
Duston	82	1	4.9	2	9.8	78.4	3.9	2
Hardingstone	82	-	1.1	1.1	15.7	78.7	3.4	15
Arlbury Road / Blackthorn	83	0.8	1.5	6.8	8.3	73.7	9	2
Ecton Brook	85	-	0.9	1.8	12.6	82.9	1.8	3
Lakeview	85	-	-	5.5	9.6	76.7	8.2	-
Pleydell Road, Far Cotton	85	-	-	5.9	8.8	76.5	8.8	12
Briar Hill etc.	86	-	2.2	1.1	10.6	77.1	8.9	11
Delapre	87	1.1	2.1	2.1	7.4	84.2	3.2	5
Bellinge	92	-	-	2.2	5.6	87.8	4.4	6
Lumbertubs etc.	95	5.3	_	-	-	57.9	36.8	16
Rectory Farm	95	-	-	-	4.8	88.1	7.1	2

# 6 Schemes and Clusters

Cluster Name	Scheme ID	Units	District		Scl	neme names		
Town Centre	410	34	Not stated	Brunswick Place	Brunswick Walk	Market Street	Market Walk	Talbot Rd.
Town Centre	412 / 413	71	Not stated	Exeter Place	Portland Place			
Town Centre	212	4	Grafton Street	St Stephens House				
Town Centre	207	17	Lower Harding Street	St Barnabas House				
Town Centre	217	20	Off Bailiff Street	Deal Court	Lawrence Court			
Town Centre	218	21	Off Lorne Road	Lawrence Court				
Town Centre	202	1	Pike Lane	Berkeley House				
Town Centre	216	29	Semilong	Leicester Street				
Town Centre	301 / 302	52	Semilong	Alliston Gardens				
Town Centre	319	8	Semilong	Burleigh Rd.	Semilong Rd.			
Town Centre	211	6	Spring Boroughs	Fitzroy Place	Fort Place			
Town Centre	208	18	St Andrews Street	St Johns House				
Abington etc.	403	21	Abington	Briton Terrace	Wheatfield Rd South			
Abington etc.	601	13	Abington	Sandringham Close				
Abington etc.	615	22	Billing Rd East	Priory Close				
Abington etc.	600	11	Birchfield Road East	Birchfield Court				
Abington etc.	405	47	Booth Lane South	Ekins Close				
Bellinge	414	32	Bellinge	Fieldmill Rd.				
Bellinge	416	32	Bellinge	Trussell Rd.				
Bellinge	418	26	Bellinge	Faracre Court	Inglewood Court			
Arlbury Road / Blackthorn	401	47	Blackthorn	Arlbury Rd.				
Arlbury Road / Blackthorn	409	45	Goldings	Kelmscott Close				
Arlbury Road / Blackthorn	417	23	Goldings	Goldcrest Court	Prentice Court			
Arlbury Road / Blackthorn	603	15	Goldings	Crestline Court				
Briar Hill etc.	102	30	Briar Hill	Burnside	Broom Court	Hunsbarrow Rd	The Springs	Thorn Hill
Briar Hill etc.	110	56	Briar Hill	Blackberry Lane				
Briar Hill etc.	116	35	Briar Hill	Hunsbarrow Rd.	Rothersthorpe Rd.	Southwood Hill	The Briars	Thistle Court
Briar Hill etc.	114	55	Camp Hill	Parsons Meade				
Dallington / Kings Heath	203	50	Dallington	Cardigan Close	Merthyr Rd.	Tennyson Close		
Dallington / Kings Heath	215	40	Dallington	Dallington Haven				
Dallington / Kings Heath	610	14	Dallington	Brook Lane				
Dallington / Kings Heath	206	10	Kings Heath	Avon Drive	North Oval	Witham Walk		
Dallington / Kings Heath	219	37	Kings Heath	Nene Drive				
Dallington / Kings Heath	616	10	Kings Heath	East Oval				
Delapre	104	40	Delapre	Camborne Close				
Delapre	106	23	Delapre	Coverack Close				
Delapre	115	26	Delapre	Gloucester Av.	Redruth Close			

	Scheme ID	Units	District		Sc	heme names		
Duston	105	31	Duston	Cotswold Av.	Pendle Rd.			
Duston	108	40	Duston	Darwin Walk	Eastfield Close	Limehurst Close		
Duston	602	18	Duston	Westfield Rd.				
Duston	613	7	Duston	Larch Lane				
Eastfield / Headlands	612	5	Eastfield	Eskdale Av.				
Eastfield / Headlands	699	34	Eastfield	Eleonore House				
Eastfield / Headlands	408	44	Headlands	Cherry Close	James Lewis Court			
Ecton Brook	411	47	Ecton Brook	Pennycress Place				
Ecton Brook	415	55	Ecton Brook	Sotheby Rise				
Hardingstone	103	30	Hardingstone	Bouverie Rd.	Martins Lane	The Warren		
Hardingstone	119	44	Hardingstone	Hardy Drive				
Kingsthorpe etc.	306	25	Kingsthorpe	Blakesley Close	Hinton Rd.			
Kingsthorpe etc.	308	41	Kingsthorpe	Helmdon Crescent	Hinton Rd.			
Kingsthorpe etc.	311	14	Kingsthorpe	Badby Close	Churchfield Close	Drayton Walk		
Kingsthorpe etc.	313	13	Kingsthorpe	Hunters Close				
Kingsthorpe etc.	317	26	Kingsthorpe	Newnham Rd.				
Kingsthorpe etc.	318	39	Kingsthorpe	Kingsthorpe Grove	Queens Crescent			
Kingsthorpe etc.	320	24	Kingsthorpe	Wallbeck Close				
Kingsthorpe etc.	321	24	Kingsthorpe	Catesby Close	Drayton Walk	Everdon Close	Fax ton Close	Holdenby Rd.
Kingsthorpe etc.	305 /307	34	Kingsthorpe Hollow	Arthur Street	Bunting Rd.			
Kingsthorpe etc.	312	23	Kingsthorpe/Kingsland Gdns	Cranford House	Gracejohn Court	Kingsland Av.		
Kingsthorpe etc.	611	7	St Davids	Eastern Av. South				
Lakeview	404	31	Lakeview	Churchill Av.	Kettering Rd. North			
Lakeview	406	31	Lakeview	Eden Close				
Lumbertubs etc.	608	8	Lumbertubs /	Rillwood Court				
Lumbertubs etc.	604	10	Thorplands	Fraser Rd.				
Pleydell Road Far Cotton	109	34	Pleydell Road Far Cotton	George Nutt Court				
Rectory Farm	605	13	Rectory Farm	Fengate Close				
Rectory Farm	607	13	Rectory Farm	Mortar Pit Rd.				
Rectory Farm	609	15	Rectory Farm	Viscount Rd.				
Ryehill	113	32	Ryehill	Hawksmoor Way	Montague Crescent	Perceval Close	Rokeby Walk	Tresham Green
Spencer Estate	205	31	Spencer Estate	Spencer Haven				
Spencer Estate	214	29	Spencer Estate	Spencer Haven	***************************************			
St James	101	26	St James	Abbey House				
St James	107	30	St James	Devonshire House				
St James	111	33	St James	Melbourne House				
Wellingborough Road	402	30	Wellingborough Road	Bouverie Walk	Melbourne Walk			
Wellingborough Road	407	23	Wellingborough Road	Elizabeth Walk	Vernon Walk			

# Appendix 6 – Detailed Waiting List Analysis

Overall	Total	%
Total on list aged 55 plus	482	100
Priority	Total	%
А	73	15
В	203	42
С	37	8
EMERGENCY	169	35
Ethnicity	Total	%
White British / Irish / Other	381	79
Asian / Asian British	18	4
Black / Black British	16	3
Mixed Ethnicity	6	1
Chinese other	5	1
Not Known / not stated	54	11
Age	Total	%
55-64	282	59
65-74	135	28
75-84	46	10
85plus	19	4
Gender	Total	%
Male	206	43
female	276	57
Medical Priority	Total	%
Yes	68	14
No	414	86
Needs (Bedrooms)	Total	%
1 bed need	284	58.9
1 or 2 Bed Need	132	27.4
2 Bed Need	12	2.5
2 or 3 Bed Need	1	0.2
3 Bed Need	6	1.2

4 plus need	2	0.4
Other (Includes WEB)	45	9.3
Current Status	Total	%
Council Tenant	205	43
HA Tenant	39	8
Homeseeker	238	49
Time on list	Total	%
0 to 6 months	142	29.5
7 to 12 months	53	11.0
13 to 18 months	57	11.8
19 to 24 months	37	7.7
25 to 36 months	67	13.9
37 to 48 months	25	5.2
49 to 60 months	29	6.0
5 years plus	72	14.9

# Appendix 7 – Outcomes from Sheltered Survey - Detailed Report

# 1 Background

This survey was conducted to gain feedback from all of NPH's sheltered housing tenants concerning their current and future housing aspirations and related service preferences. The methodology was based on a paper questionnaire developed in conjunction with the NPH project team and this document, together with a summary of the review aims and a pre-paid reply envelope, was sent to all households. In the interests of ensuring survey confidentiality, completed questionnaires were posted by individual respondents direct to Ridgeway Associates Consulting Ltd for subsequent data capture, analysis and storage.

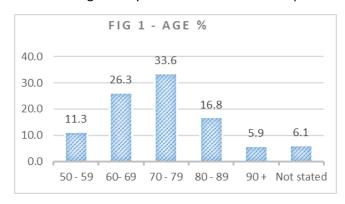
The number of completed questionnaires received was 441, representing a return level of 22% which, from Ridgeway's experience, is a moderate figure which nonetheless represents a robust basis for reporting.

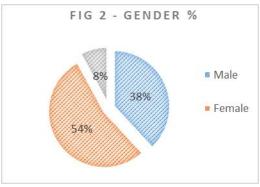
The survey outcomes are set out below in tabular and graphical form, supported as appropriate by commentary and replies to the questionnaire's open questions inviting written responses.

# 2 Respondent Profile

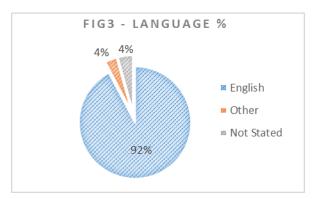
As illustrated below there was representation in this survey from respondents within all age bands with highest levels being among those aged between 60 and 79. Also noticeable is the relatively strong 17% response from tenants in their 80s and the 6% level among those aged 90 plus. It

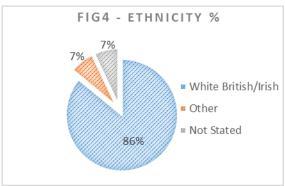
can also be seen from Figure 2 that there was a higher proportion of female respondents compared with males which reflects the fact that females are generally more numerous in older persons' housing.





From the charts below the vast majority of respondents speak English as a first language and consider themselves to be White British. However, as can also be seen, there was a small proportion of respondents from other ethnic backgrounds. In this regard it is generally accepted that where the ethnic minority populations are small consideration needs to be given to their housing and support needs as they are often less likely to have access to ethnically based community groups and can experience isolation.



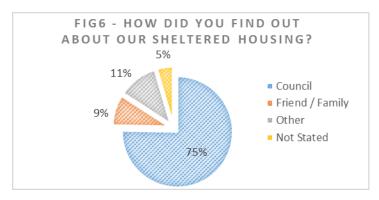


### 3 Current Circumstances

As illustrated in Figure 5 below 60% of respondents live in bungalows and virtually all of the remainder have flats.

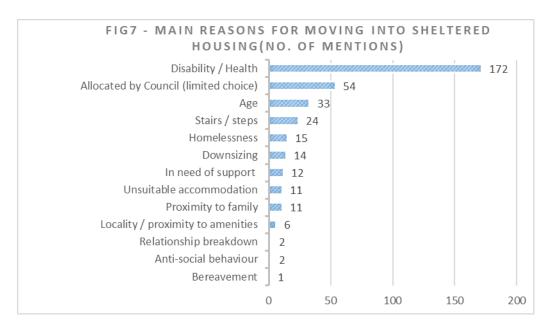


Respondents were also asked how they learned about sheltered housing and it can be seen from the chart below that for three-quarters of them the information source was the Borough Council. However, as also shown, friends and family members and a range of other sources played a part in this regard.



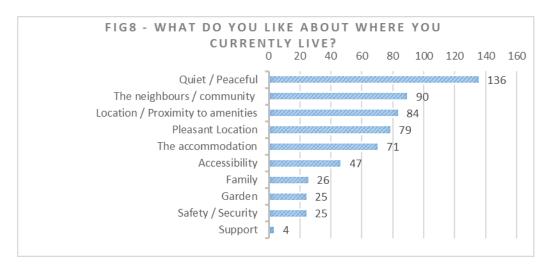
# 4 Reasons for Tenancy

Respondents were asked why they looked to access sheltered housing and, as illustrated below, disability and health considerations were identified as the main reasons stated by the majority. Nevertheless, it can also be seen that a range of other factors were involved, particularly in terms of Council allocations and also the impact of ageing/mobility issues and, in some cases, homelessness.

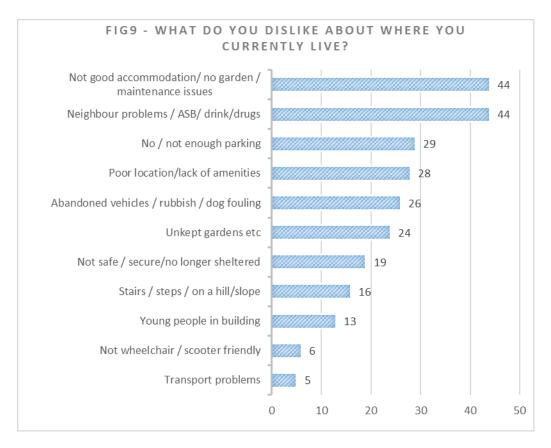


### 5 Likes and Dislikes

Figure 8 below shows what respondents said they like about where they live and that the most regularly stated reason concerned the 'peace and quiet' offered. Nevertheless, as can be seen, neighbours/ communities, convenient/pleasant locations and accommodation factors also featured strongly among the responses.

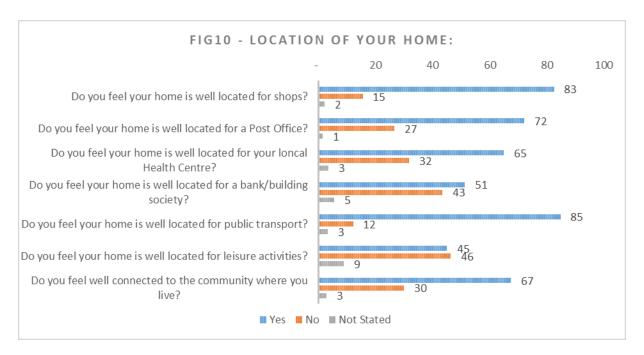


Turning to the question of 'dislikes' the chart below illustrates the range of topics raised. As shown, accommodation quality/maintenance considerations featured strongly as did problem areas concerning the behaviour of neighbours and others locally in terms of ASB and substance misuse.

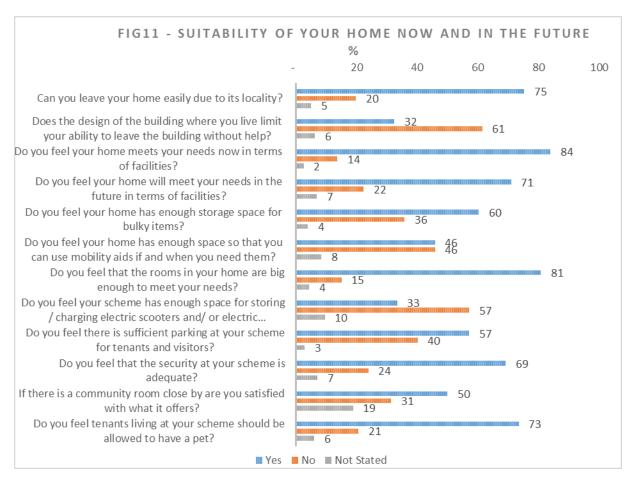


# 6 Suitability of your home

Respondents were then asked to rate the suitability of their homes in terms of a range of key attributes. Figure 10 below illustrates the responses made on the topic of 'location' and, while in general, the positive ratings were in the majority, the findings do reveal levels of dissatisfaction, notably concerning the ability to access a bank/building society/post office, a health centre and, leisure activities.



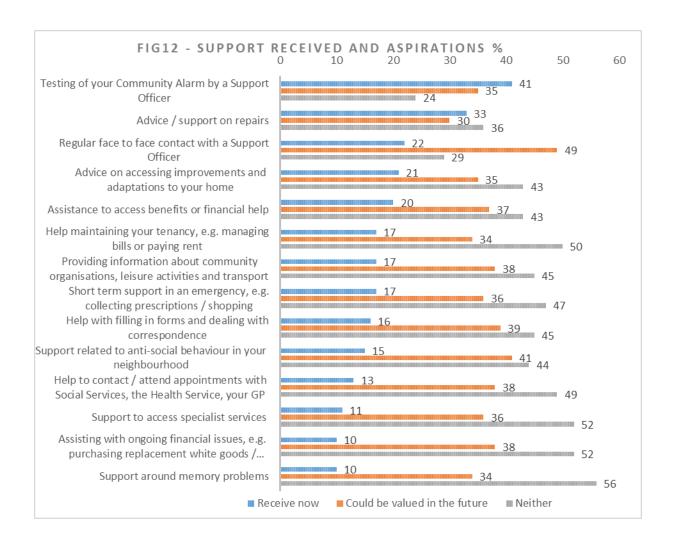
Responses to the questions asked about accommodation suitability now and in the future are illustrated in the chart below and, as can be seen, a mixed picture emerged. For example, while there are strong levels of positive replies in some areas there are clearly issues of concern felt by many respondents, notably in terms of building design/accessibility, the space to use mobility aids, facilities for storing/charging electric scooters/wheelchairs and, limited parking availability.

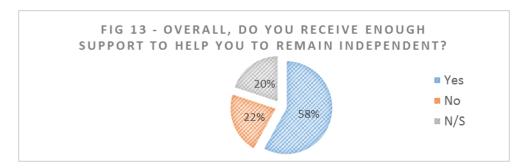


### 7 Support

Respondents were asked to indicate the extent to which they currently receive a given range of support services and which of these services they do not currently receive from NPH but feel could be of benefit to them. As can be seen from Figure 12 below there is currently a gradient of service delivery levels among those responding within which the most frequently accessed services involve the testing of Community Alarms by a Support Officer and, advice / support with repairs.

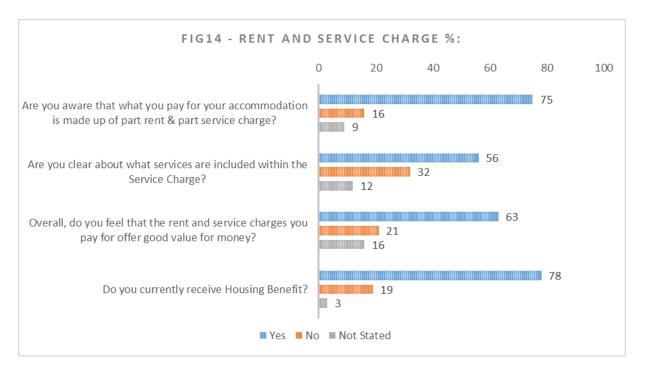
However, of particular significance is the extent to which respondents believe that the services they do **not** currently receive could be of benefit to them. Related to this, as illustrated in Figure 13 that follows, is that 22% of those responding stated that they do not receive enough support to help them remain independent, a level that could potentially be higher, given that 20% of respondents chose not to answer the question asked. It is clear therefore that this is an area where the Housing Related Support Service funded by NPH could be of assistance for these tenants. It will be important, however, that the service evidences the benefits it achieves in monetary terms if other agencies are to contribute to the funding of this service which will enable it to expand.





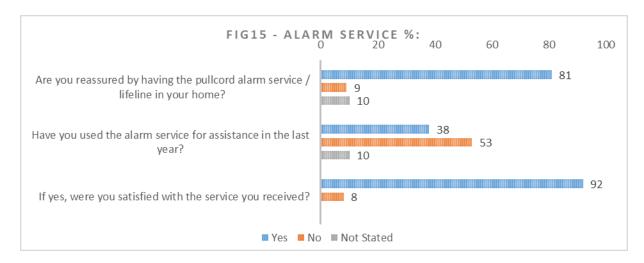
# 8 Rent and Service Charges

Figure 14 below shows that a majority of respondents (75%) said they understood that what they pay for their accommodation comprises rent and service charges and that a majority (56%) also indicated that they are clear about what services are covered by the service charge. However, this still leaves minorities indicating that they do not understand the composition of their accommodation charges and this is perhaps worthy of investigation and increasing information-giving, as appropriate. To the third question a majority of respondents (63%) indicated that they feel their rent and service charges represent good value for money, compared with 21% who said the opposite. Finally, it emerged from a further question that 78% of respondents currently receive housing benefit, 19% do not and 3% provided no answer.



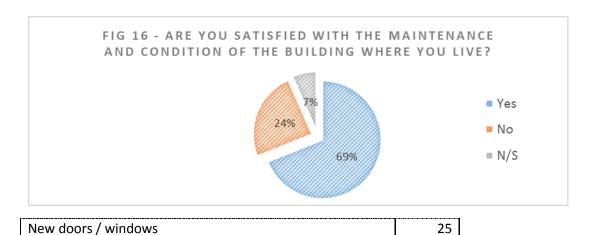
### 9 The Alarm Service

A can be seen from Figure 15 below a significant majority of those responding feel reassured by having an alarm service and, of those who had used it recently virtually all indicated that they were satisfied with the service received.



### 10 Maintenance

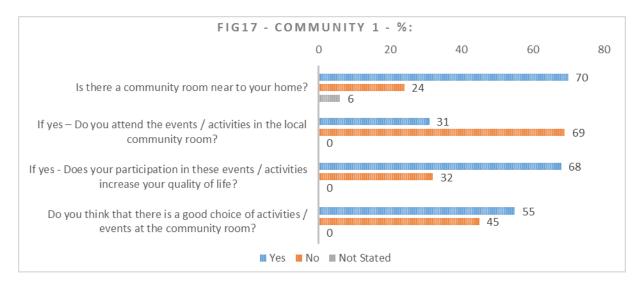
The chart below shows that 70% of respondents are satisfied with the maintenance service provided compared with a quarter who are not. Towards identifying of the reasons for dissatisfaction the themes emerging from respondents' written comments are shown in the table beneath the chart.



Garden / Communal areas	22
Internal refurbishment	18
Insulation/ Heating	11
Better security / outside	7
Decoration	5
Litter	3
Scooter store / charging	2
Asbestos Removal	2
Stairlift	1

### 11 Community Rooms and Events/Activities

Figure 17 below illustrates findings to the questions asked on this topic and it can be seen that while 70% of those responding have a community room nearby only 30% said that they attend events/activities there. Perhaps a key reason for this low involvement level is illustrated by the view from 45% of respondents who feel that there is not a good choice of events/activities available to them. This possibility is supported by the range of 'additional activities' identified by respondents and included in the table beneath the chart. This is an area where perhaps Support Officers could become more involved in initiating activities in the first instance and also we understand the that physical attributes of some of the community rooms are being improved which could assist in the use of these facilities. It should be stressed that 'prevention' in terms of health issues will become even more important with the predicted growth in the older population and these facilities could provide an important asset in this regard.

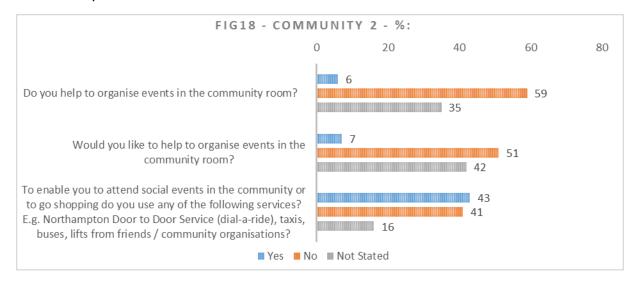


# 12 Are there any additional activities / events that you would like to be offered at the community room?

A speaker on various topics	I would like a keep fit class
Activities for people aged 50 and younger	If events are held I have no one to help me to get there
afternoon events	IT instruction for beginners
An elderly keep fit class	Keep active for the elderly
Anything other than Bingo!	Maybe a lunch club and a craft group
As far as I know there is no community room	Monthly meetings for complaints etc.
at the moment I have no use for a community room	More activities in the community.
Big screen football events	More holiday trips/shows with help with costs
Bingo	More varied activities, e.g. seated yoga
Chair aerobics, a computer course, talks on different subjects	Our centre has a cooker - dinner once a week would be nice
community room closed	Perhaps a church service once a month
Creative artistry	Quizes, craft activities - things for my age group (I'm 57)
Day trips	Social events

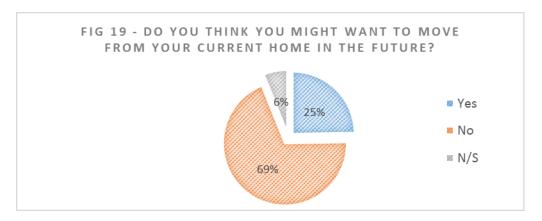
Exercises to keep mobile with housing officers	Table tennis, pool, darts
dropping in to answer questions	
Fitness for older people	Talks and demonstrations
Games quizzes and activities	Too old for these activities
I am informed about any activities	Trips out, keep fit for older people
I have a busy social life already	

Continuing with the theme of tenant participation Figure 18 below shows that few respondents said they either help or would like to help organise events in their community room. Then, in terms of accessing a range of local transport arrangements a slight majority among those responding said that they do so.

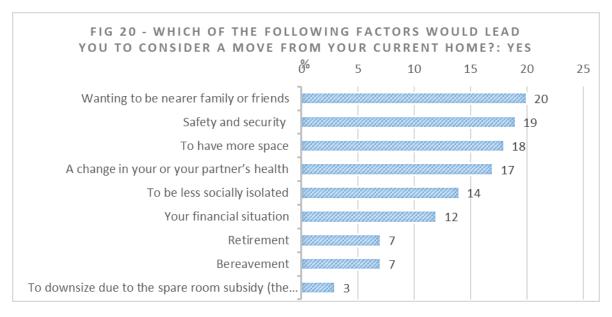


# 13 Future Housing Options

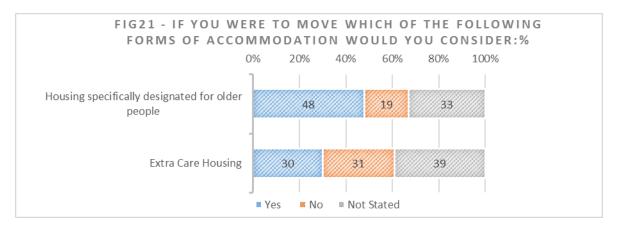
A series of questions were asked on this topic and, as shown in Figure 19 below, nearly 70% of respondents stated that they did not think they would want to move home in the future. However, this does leave a significant minority of 25% who indicated that they might do so.



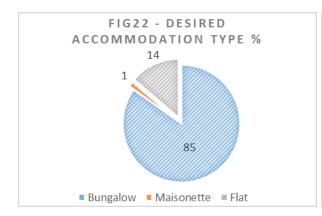
Respondents were then asked to identify which from a given range of factors would lead them to consider moving home. The findings are illustrated in the chart below and, as can be seen, the most regularly mentioned considerations involved being closer to family and friends, safety and security, having more space and, changes to health.

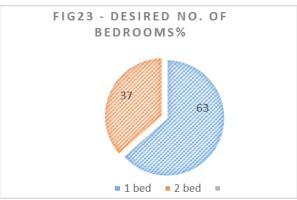


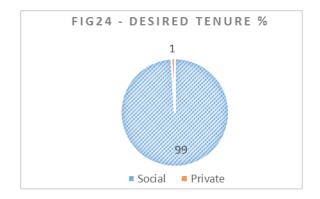
In terms of specific accommodation categories that respondents might consider the chart below illustrates levels of interest in housing designated for older people (48%) and Extra Care Housing (30%). There were, however, relatively high 'not stated' responses in each case to take into account. In terms of the Extra Care Housing interest level a factor could be a lack of understanding of what this housing option can offer as people become more dependent on care services.



Then, looking at future housing preferences in more detail, Figure 22 shows that a bungalow would be preferred by a significant majority while Figure 23 indicates that nearly two-thirds of those responding would like 2 bedrooms in their properties, compared with just over a third who would prefer 1 bedroom. Then, in terms of tenure, Figure 24 shows that social housing would be the choice for virtually all of those responding. Although it is accepted that bungalows are the preferred option for the majority well designed flats can be a clear option when prospective tenants are involved in such developments from the outset.

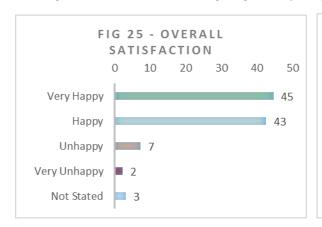


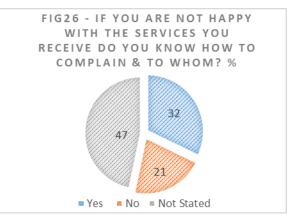




## 14 Overall Satisfaction with current housing circumstances

This survey asked respondents 'Overall how happy are you living in your current home?' and, as can be seen in Figure 25 below, the vast majority, in roughly equal proportions, replied that they are either 'Very happy' or 'Happy' in this regard. Then, finally, respondents were asked if they know how to complain if they are not happy with the services they receive and Figure 26 shows that a majority of those responding replied 'Yes'. However, a significant minority said 'No' and this, together with a 47% 'not stated' proportion, suggests that this outcome is worthy of investigation and an information-giving activity, if appropriate.





# Appendix 8 – Outcomes from General Needs Survey with Tenants aged 50+ - Detailed Report

# 1 Background

This survey was conducted to gain feedback from a 20% sample of NPH's General Needs housing tenants aged 50 and over concerning their current and future housing aspirations and related service preferences. Tenants aged between 50 and 55 years of age were included within this survey as they will all meet the criteria for sheltered housing within 5 years.

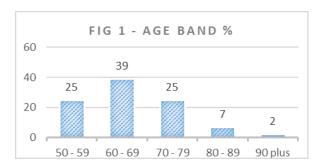
The methodology was based on a paper questionnaire developed in conjunction with the NPH project team and this document, together with a summary of the review aims and a pre-paid reply envelope, was sent to all households identified by the random sampling process. In the interests of ensuring survey confidentiality, completed questionnaires were posted by individual respondents direct to Ridgeway for subsequent data capture, analysis and storage.

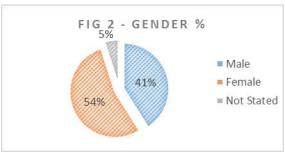
The number of completed questionnaires received was 150, representing a return level of 20% which, from Ridgeway's experience, is a moderate figure which nonetheless represents a robust basis for reporting.

The survey outcomes are set out below in tabular and graphical form, supported as appropriate by commentary and replies to the questionnaire's open questions inviting written responses.

### 1.1.1 Respondent Profile

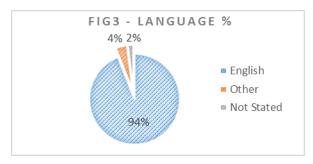
As can be seen below there was representation from all age bands but most notably from those aged between 60 and 69. Of note almost 10% of respondents are aged 80 plus. A higher proportion of females responded than males as might be expected as females are generally more numerous among older populations.

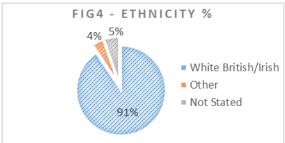




The vast majority of respondents speak English as a first language and consider themselves to be White British. However, as can be seen below, there was a small proportion of respondents from other ethnic backgrounds. Where the ethnic minority population is small consideration needs to

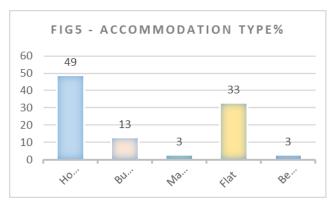
be given to housing and support needs as they are often less likely to be represented by ethnically based community groups and could face isolation.

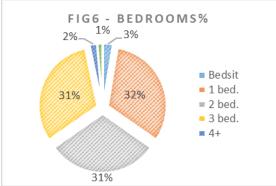


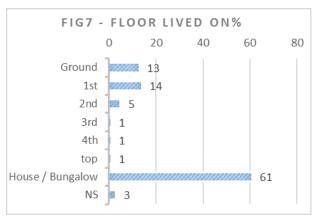


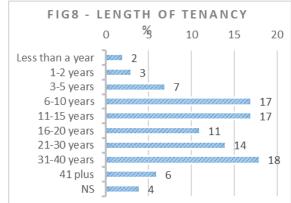
#### 2 Current Circumstances

As illustrated below the vast majority of respondents currently live in 1 or 2 bedroom houses or flats but a significant minority live in in bungalows. Of note few among those responding who reside in bedsits and, among the flat / bedsit dwellers, most live on the first or ground floor. When looking at length of tenancy it can be seen from Figure 8 below that the majority of respondents have lived in their current homes for at least 5 years and in many cases for considerably longer periods.



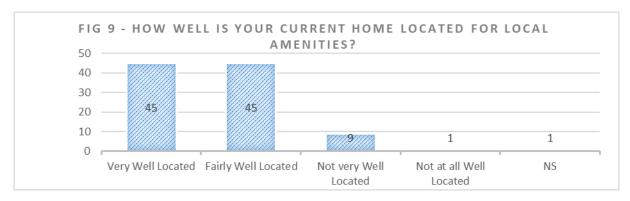






### 3 Suitability of your home now and in the future

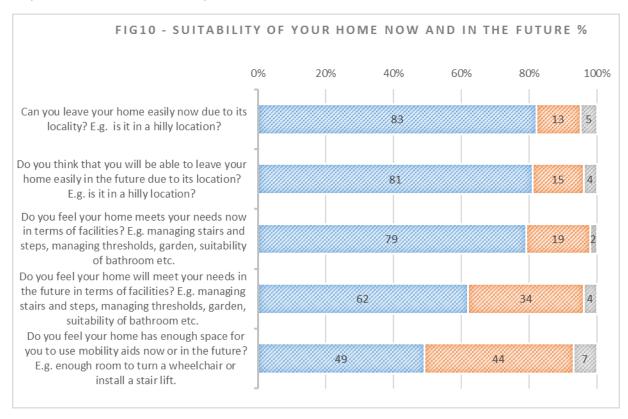
Almost 90% of respondents in equal proportions feel that their accommodation is either very well or well located for local amenities. However, 10% provided negative responses to this question with the majority replying 'not very well located'.



Looking at suitability of accommodation in more detail high proportions of respondents feel that they can currently leave their homes easily with a similar proportion feeling there is no obvious impediment to them doing so in the future. However, these statistically positive results should not hide the fact that over 1 in ten do experience issues in this regard now and expect to do so in the future.

A marginally lower proportion of respondents show positivity about facilities in their homes that involve accessibility generally and the difference in this regard between suitability now and in the future is significantly more marked.

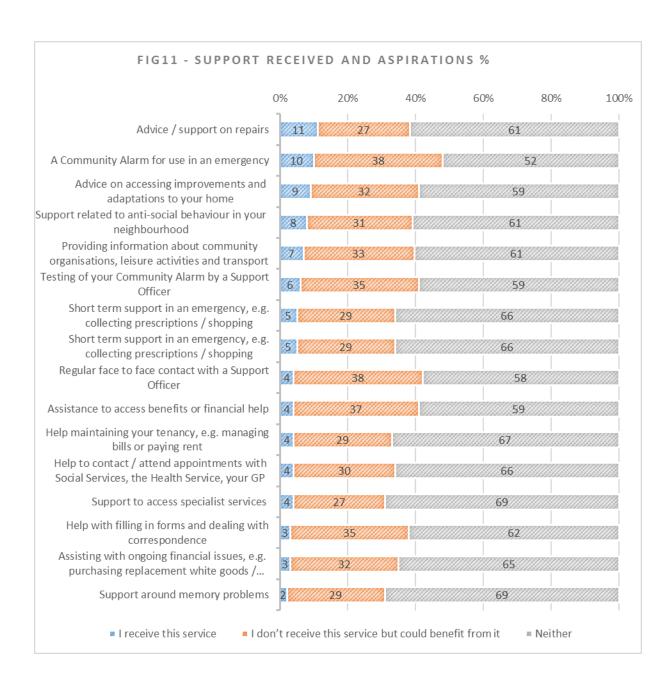
Ratings are yet lower when looking at suitability of homes to accommodate mobility aids / adaptations with only half feeling that their homes are suitable now and slightly fewer believing this will be the case in the future, which suggests that homes are perceived to be suitable as long as respondents retain their mobility.

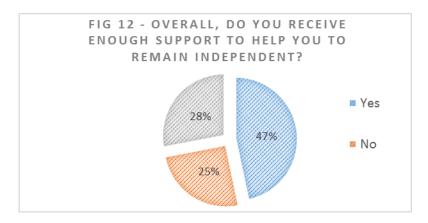


# 4 Support

Respondents were asked to indicate: 1) the extent to which they currently receive a given range of support services and 2) which of these services they do not currently receive but feel could be of benefit to them. As can be seen from Figure 11 below there is currently a gradient of low service delivery levels among those responding within which the most frequently accessed services involve advice / support with repairs followed by a community alarm service for emergencies.

However, of significance is the extent to which respondents feel that the services they do **not** currently receive could be of benefit to them. Related to this, as illustrated in Figure 12 that follows, is that 25% of those responding indicated they do not receive enough support to help them remain independent. These findings suggest a market opportunity for NPH that is worthy of specific research to reveal more about the demand for services.



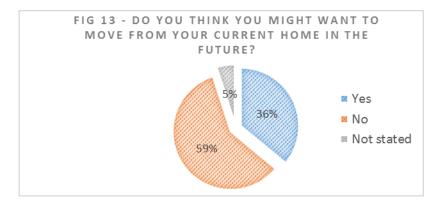


Related to a subsidiary survey question the table below shows how respondents feel support services could be best publicised.

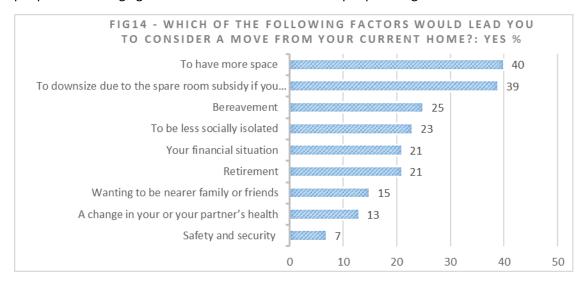
What do you feel is the best way for people to learn about these types of services?	No.	
Newsletters	39	
GP Surgery	17	
Leaflets	15	
All	14	
Libraries	8	
Local Radio	8	
Advice Centre	6	
Website	5	

# 5 Future Housing Options

A series of questions were asked on this topic and, as shown in Figure 13 below, not far short of two-thirds of respondents did not think they would want to move home in the future. However, this does leave a significant minority of 36% who indicated that they might do so (with 5% not answering the question).

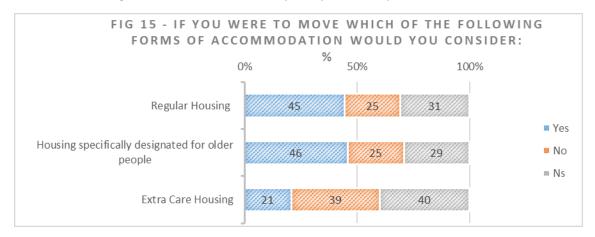


Respondents were then asked to identify which from a given range of factors would lead them to consider moving home. The findings are illustrated in the chart below and, as can be seen, the most regularly mentioned considerations were to do with having more space in the home and downsizing due to the Spare Room Subsidy, where applicable. In terms of the latter it should be noted that the spare room subsidy applies to people 'of working age' and is based on the number of people living in the accommodation and the size of the accommodation.

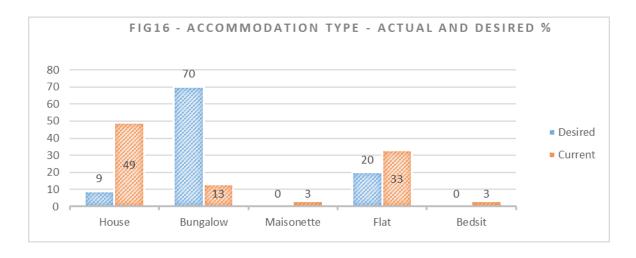


Asked about accommodation preferences if a move was contemplated, Figure 15 below illustrates that equal proportions of those responding would consider mainstream housing or properties specifically for older people, while less than half that number indicated an interest in Extra Care

provision. In the latter respect, although a short description of the provision was included within the questionnaire, it is likely that the benefits of Extra Care housing are not well understood by many of the respondents.

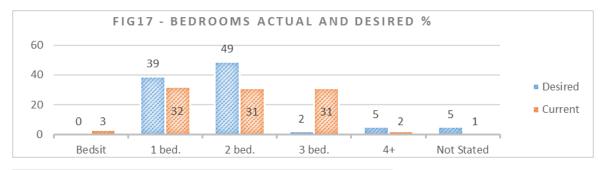


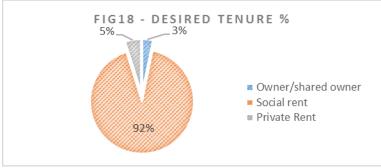
Then, looking at these housing preferences in more detail, Figure 16 shows what kinds of properties those responding would like if they moved. As can be seen, a bungalow would be preferred by the majority while flats and houses were the choice, respectively, of 20% and 9% among those responding. Of interest here is the current housing profile among respondents illustrated in Figure 5 above which shows that half occupy houses and a third live in flats.



In terms of the number of bedrooms respondents would prefer if they moved Figure 17 below illustrates that nearly 50% would like 2 bedrooms and 39% would choose a 1 bedroom home. Again, of interest, the current profile among respondents in this respect is shown in Figure 6 above where it can be seen that proportions of just over 30% of those responding have, respectively, 1, 2 or 3 bedroom homes.

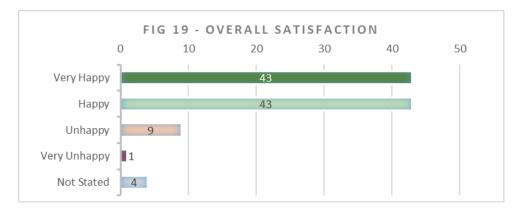
Finally, in terms of future housing preferences, the survey asked about tenure and Figure 18 below shows that nearly all (92%) of those responding would choose properties for social rent. While this result might have been expected from NPH tenants aged 50-plus it could also be seen as indicating a lack of interest in or the wherewithal for a form of home ownership.





# 6 Overall satisfaction with current housing circumstances

A final question in this survey asked respondents 'Overall how happy are you living in your current home?' and, as can be seen in Figure 19 below, the vast majority, in equal proportions of 43%, replied that they are either 'Very happy' or 'Happy' in this respect. Nevertheless, this leaves 10% who said that they are not happy to some extent and some reasons for this can be found in the themes that emerged from written comments from respondents shown in the table shown beneath Figure 19.



Do you have any other comments about your current home?	
Needs refurbishment	15
Problems with Stairs / steps	10
Needs bathroom Adaptation	6
Accommodation not suited to state of health	6
Anti-social behaviour / noisy neighbours	5
Accessibility adaptation needed	1
Needs decoration	1

# Appendix 9 – Outcomes of Survey with Support Officers

The questionnaire was sent out to 12 Support Officers via an e-survey. By the closing date 4 had responded, all of whom had worked for the council / NPH for at least 4 years. Despite the relatively small response rate there are some valuable insights contained in the summary below.

Most enjoyable / satisfying aspects of their job

 $Perceptions \ here \ focus \ on \ the \ enabling \ role \ taken \ by \ officers \ with \ their \ customers \ including:$ 

- Dealing with crises
- Supporting the vulnerable
- Helping tenants overcoming challenges to improve their quality of life
- Helping tenants to live independently and free from worry.

Least enjoyable / satisfying aspects of their job

Aspects stated for this area included:

- The burden of paperwork
- Visiting properties where tenants smoke
- Missed appointments by tenants.

Things that could be put in place to enable an officer to work more effectively and efficiently on a day to day basis

Comments relate mainly to the use of tablets / laptops to aid mobile working, specifically:

- A simplified system for recording and tracking support and outcomes
- Having information at hand when visiting tenants allowing staff to manage their workload more effectively and professionally.

How the service meets the needs of clients?

The emphasis of the comments focuses on the fact that support is now delivered where it is needed and wanted across all tenures and Borough wide. The support service is perceived to be invaluable for tenants, underpinned by good information gathering, home visits and finding solutions to needs often via good coordination between departments / external agencies.

'Due to funding cuts we have just spent the last 4 years re-setting the expectations of our sheltered tenants who, on the whole, are now accepting this.'

#### Areas for improvement in service delivery

Suggested areas for improvement are:

- More flexible working using technology
- Better back office systems for referrals, tracking support delivered and outcomes
- More control over requests from the control centre.

To what extent does the current service delivery model fully promote independence and choice for the tenants

2 respondents feel that it does and 2 do not. Comments made were:

'We say we are moving towards floating support and promoting independence but we still treat the elderly as incapable of being independent. We are still being paternalistic towards them.'

'Can be limited due to funding availability.'

'There is a lack of consistency with the way in which support workers carry out their role. Some will do far more than others to the extent that if there was a new starter shadowing 2 workers at different ends of this spectrum they would be confused about what the job role is.'

Additional services / activities for its tenants living in its older persons' housing that NPH could provide.

Most of the areas mentioned relate to the issue of social isolation:

Befriending services

- A minibus service for appointments and shopping
- Transport to and from community room events.

Potential improvements to older persons' housing stock to make it suitable for older people now and in the future:

Most of the areas mentioned relate to accessibility and adaptations:

- Ensure a minimum level of adaptations in all properties
- Accessibility to services and social events
- Warm eco-friendly accommodation.

Type(s) of housing NPH could develop in the future and that facilities that should be included:

- Bungalows with level access and fully adapted
- Self-contained fully adapted Extra Care flats (like at St. Crispins) providing independence within a structured community
- Traditional social housing 'blocks' with spaces designated for hospital discharge.

#### Potential Benefits of Telecare:

- Especially for elderly clients with dementia
- Only if backed up with a good response service

A service individually suited for each tenant, but funded by whom?

# Appendix 10 – Outcomes of Survey with Rehousing & Support and Tenancy & Estate Teams

The questionnaire was sent out to 33 Staff Members via an e-survey. By the closing date 11 had responded. This represents a good response rate and valuable insights are contained in the summary below.

#### **Respondent Profile**

All responses came from people in the Rehousing & Support and Tenancy & Estate teams. Respondents are employed in a range of roles within this team covering:

- Rehousing and support to vulnerable clients
- Promoting the service
- Allocations
- Property exchanges
- Refining working practices
- Inter-agency partnership working.

Views on the current stock of older persons' housing (sheltered) managed by NPH and its ability to meet the needs of its client group now and into the future:

There was a general consensus that some of the current stock is suitable and where it is not currently there is scope for adaptations. However, there is a clear recognition that a good proportion of the stock is unsuitable and would remain so regardless of investment.

'There is a need to cleanse the current stock to make sure all properties are suitable for future letting...'

Specific issues were raised relating to the challenges of allocating properties to people with mobility issues and the mix of sheltered and general needs tenants in one block (a product of recent allocations).

The following verbatim comment relates to the challenges foreseen:

'As an ageing population greater emphasis should be placed on the provision of housing to meet the needs of older people, including more provision and planning structured to reduce social isolation, i.e. close proximity to community services.'

Potential improvements to the current older persons' housing stock to make it more suitable for older people now and in the future.

Most of the responses focused on adaptations:

'Adaptations e.g. wider doorways, ramping, wet rooms, raised electrical sockets'

Other comments focus on allocations and use:

'A consistent approach to allocations for Sheltered and General Needs.'

'I believe we should return some units back to general needs housing, blocks of flats that have unsuitable access and are only called sheltered housing because they are connected to call care. We should then invest in the suitable stock making it a home for life with appropriate adaptations.'

#### Other comments focused on new provision:

'New stock where a level of independence can be maintained in a suitable provision for the elderly no longer able to maintain full independent living/managing in the home alone.'

Main perceived gaps in future older persons' provision requirements given population growth and projected needs.

There was a general call for new accommodation, in particular Extra Care Housing, e.g. more schemes like Eleonore House. One respondent raised the idea of NPH investing in retirement villages with outreach floating support. Retirement housing for rent with high mobility standards was also mentioned while provision for those with Alzheimer's or Dementia was also seen as a priority.

Looking from the perspective of market considerations the following verbatim comment raised a number of key issues:

'I do not believe sheltered social housing can meet this demand. Retirement housing, within an affordable rent bracket should be a priority. Even as a home owner in the current, and future, economic environment buying is not a strategy that can be embraced wholesale. Retirement housing with affordable rents should be a priority.'

#### Potential Improvements to Allocations

Some feel that the allocations systems works well:

'The allocations process: for sheltered clients, I feel the system works well and is equitable and fair.'

'The allocation of accommodation is based on the applicants who demonstrate the greatest need, therefore I do not feel that there are any improvements that require urgent attention.'

Others feel there is scope for refining approaches, e.g. by addressing historic allocations / allocating sensitively in the future:

'Currently we are finding that inappropriate allocations and unsuitable housing is causing impacts on how some tenants are living in their properties. This has reduced recently as more consideration is being taken when placing a mixture of general needs tenants and previously sheltered tenants in the same block with some more sensitive lettings going forward.'

'Customers are bidding for properties and not because its 'sheltered' housing. We should have age specific properties allowing people to live amongst similar minded people.'

'Emergency band needs to expand in order that there is a level of discretion based on the individual case...'

#### Potential Improvements to the Housing Related Support Service.

There was a consensus that the service currently works well. One respondent felt that if the service was streamlined further this could lead to important information being missed at the referral stage, so resulting in inappropriate service provision. On the theme of information gathering one respondent pointed to the fact that better early identification and initial information gathering could help achieve better allocations to those in most need and make better use of scarce resources.

Potential operational improvements to assist Support Workers with their workload and enhance joined up working across departments.

Prompt and effective information gathering and sharing was raised as a key way to avoid duplication of effort and thus improve the service. The other main theme related to mobile working and technology use:

'As the service is relatively new it is difficult to assess at this time what may not be working. It would be of huge benefit to staff to be able to mobile work. A specific IT package would be of benefit so that the assessment tool turns into a support plan once the customer has been rehoused.'

'Provide laptops to support workers when they are out meeting customers.'

Perceived benefits that the tenants and the organisation as a whole derive from the Support Service.

The two comments below summarise the overwhelmingly positive factors raised by respondents:

'The support service is no longer property specific and so more customers can access support and less tenancies will fail.'

'Tenants know there is help should they need this thus giving them piece of mind. NPH benefits by being able to identify/act early on any concerns thus preventing issues, maximizing income from tenancies and reducing property turnover; again reducing costs from VOID time.'

Perceived partnership working within NPH departments and with external agencies.

The comment provides a balanced view:

'Internally things have already improved. Better links are needed with Statutory services with them accepting their part of the responsibility.

Health is a customer that we could potentially offer more to, particularly around hospital discharges and this could generate an income for NPH.'

Also raised:

'More information from external agencies on potential tenants' needs.'

'Better service level agreements that state what the responsibilities are for all parties.'

#### Perceived key priorities for the Older Persons' Strategy

A range of valuable closing comments are shown below:

'Retaining sheltered accommodation/older person's accommodation that could be adapted to meet the needs of the ageing population.'

'Involve the tenants in the process.'

'More appropriate, appealing accommodation in order to rehouse more elderly residents and release larger general needs properties for families in need.'

'The ability to maintain a register independent from the general housing register, specifically to identify suitable properties to meet the needs of those with mobility issues. This would ensure the most appropriate allocations could be made to those, including older people, with a need for adaptations. Address social inclusion - i.e. a befriending scheme etc.'

'Suitability of homes: an agreed standard for all sheltered properties, more sensitive lettings, better awareness for tenants and staff and releasing unsuitable homes back to general housing stock.'

'A clear definition of roles and responsibilities, analysis of the customers and their needs with outcomes for housing and an improvement in the properties we offer.'

# Appendix 11 – Outcomes of Consultation with Stakeholders

A series of in-depth face to face interviews were held with participants from the above groups to gain contributions for the Strategy evidence base. The following represents a summary of the responses made to the series of questions asked during the interviews.

Respondents were asked their views on current provision of the older persons' rented housing managed by NPH and its capacity to meet the needs and aspirations of this client group in the future. As might be expected there was a wide range of views expressed in this area. The main points raised are set out below:

- The stock is adequate in terms of numbers if managed correctly, although it is spread out across the Borough and there is a perception that this causes a lack of community cohesion
- It is important to ensure that adapted properties are flagged on the database so that provision can be allocated appropriately
  - However, there is a need for clear criteria concerning the provision of aids and adaptations in terms of what is 'necessary' and what 'is nice to have'
- It is clear that tenants aspire to living in bungalows and future proofing this stock will provide long term advantages
- There is also a need to prioritise the work on the remaining stock following reclassification of unsuitable accommodation
- Where there is a shortage of adapted properties introduce measures to enable older people to access adapted general needs stock
- Identify and launch initiatives to promote 'downsizing' across NPH stock
- Create a void standard for stock to ensure that properties are attractive to prospective tenants
- Identify solutions that can provide 'buggy stores' in NPH stock
- Reconsider the current allocations criteria to avoid, for example, younger people accessing older persons' stock.

Respondents were asked to consider future provision needs as a whole and what they regard as being the main gaps to be identified within the Strategy. The key outcomes were as follows:

- There is a need to understand the demand for Extra Care Housing provision across the Borough
- More dementia provision should be developed
- In terms of Extra Care Housing and dementia provision develop and introduce information and marketing strategies
- Define the requirement for good retirement housing across tenures
- With the recognition that some older persons' stock is no longer suitable, undertake a robust assessment of the properties and invest where necessary to provide stock for other client groups.

Respondents were asked their views on the NPH-funded a short term 'housing related support service' for tenants irrespective of age. The main views expressed were as follows:

- Support service management should make links with tenants' service at the Council
- Effort should be made to continue to improve the service and define how it should be delivered
- NPH should decide what it can deliver and what they can't in terms of this service
- This service is important in terms of looking after vulnerable people it cannot necessarily represent a 'gold standard' but 'cut coat according
  to cloth' taking into account current budgetary constraints
- Welfare checking within the housing related support service should extended and this role developed further.

It is widely recognised that partnership working is a key element in providing effective housing and services for older people. Asked how they would wish to improve partnership working between NPH and other organisations / Agencies respondents' replies included:

- NPH should have a representative on the Health & Well-being Board at Northampton County Council (NCC)
- There is a need for increased partnership working with NCC, for example, the reablement services, long term mental health services
- Partnership working is improving but there is a need to pool resources and so avoid the risk of duplication
- Other examples of areas where partnership working can be beneficial include, care and repair services and the voluntary sector.

Finally, respondents were asked to consider what they feel should be key priorities within the Older Persons' Strategy. The following main points arose:

- The vision should be to create a good quality, fit for purpose housing for older people
  - Achieving this requires a high level Action Plan with key milestones
- Analyse how current stock is being used and determine how this relates to need
- Reorganise the stock that has been reclassified and determine if it can be utilised for other client groups
- Given that funding suitable provision / refurbishment of existing stock will be a challenge identify potential funding streams
- Make better use of community rooms to reduce social isolation / enable older people to help each other
- Additionally, consideration should be given to addressing the needs of minority groups
- Consider the introduction of a befriending service
- Review IT systems within the older persons' housing service
- Expand the housing related support service to include people irrespective of where they live
- Consider establishing a social enterprise to deliver services, e.g. gardening, decorating
- Ensure that allocations to ECH are effective and so ensure that the right people are housed
- NPH stock is only part of the picture and therefore there is a need to consider older people in general and identify need.

# Appendix 12 - Outcomes of 'concept testing' pilot with sheltered housing tenants

As part of the development of the Strategy 'concept testing' was undertaken with sheltered housing tenants by NPH staff (using a template questionnaire form) to gain their views on the options they would choose if some of the current older persons' properties are no longer designated as 'sheltered'. The options discussed were; moving to a more suitable property; remaining in their current home with an alarm / support service (if assessed as requiring this service); or remaining in their current home as a general needs tenant. In all 28 households participated in this pilot process (comprising, together with co-tenants, 31 individuals) and a summary of the outcomes overall is given below:

#### Respondent profile

- The average length of tenancy is 11 years, ranging from one to 26 years
- All of those engaged with (who stated their age) were aged over 70 with an average age of 79 years. The most numerous were the 11 tenants aged 70 to 79, nine were aged between 80 to 89 and three were aged 90-plus
- 19 tenants were female and 12 were male
- All respondents were (where stated) White British or Irish.

#### **Support Services received**

• In terms of access to support services two of the 31 respondents currently receive NPH's housing related support service.

#### **Household accessibility**

- 12 respondent households have properties not on the ground floor of whom 4 identified challenges in terms of using the stairs
- Seven households have ramps and of these only one identified difficulties
- Six households have a mobility scooter but only one has suitable storage and charging facilities
- Eight respondents cannot leave their home easily due to its locality (e.g. a hilly location).

#### **Adaptations**

• 20 of the respondents have at least one adaptation in their home – in half of these cases adaptations were installed before moving in. The table below shows type and numbers of adaptations involved:

Grab rail	13
Level access shower	12
Hand rail	7
Adaptations for blindness	1

100		
	Stair lift	1

- Of the 20 respondents with adaptations 17 feel that they help them remain independent
- Half of the respondents feel that their home has enough space to use mobility aids should they be required in the future.

The following comments were recorded by NPH staff concerning the suitability of respondents' accommodation:

'Accommodation suitable but location is not - so difficult to get out as she would need a wheelchair and property not wheelchair accessible.'

'Aged 90 lives independently, no personal care. Family assist. Employs cleaner. Self-tester.

Doesn't want to move.'

'Although ground floor, access is poor. Requested adaptations but ramps cannot be fitted due to layout. Level access shower in bathroom in wrong place so cannot get to w.c. very easily or to the sink.'

'Cannot reach kitchen window; nowhere to dry clothes.'

'Close to town, so good at the moment. Probably will not be suitable in future and will need ground floor.'

'Enough space to get around; near amenities.'

'Fine apart from when lift breaks down, happy in flat.'

'Help from family when needed. May need level access shower in future. Moved from upstairs - wouldn't want to move.'

'Likes flat - moved for location, close to family - has all she needs at present.'

'Loves the flat but can't get out.'

'Moved from 1st floor flat - diagnosed COPD. Generally, can get about. Property in very good order throughout.'

'Need hand rails in the bathroom for getting in and out of bath.'

'Very happy with property. Has high levels of family support.'

'Very heavy entry door; would prefer a wet room - can't have one as it's a flat.'

#### **Alarm Systems**

The hardwired alarm systems in NPH's properties are ageing and cannot be maintained. As a result, these systems are being replaced with dispersed as they fail. The table below shows how tenants responded to the question concerning alarm systems in their homes.

Please give details of the type of alarm in your home,		
e.g. hard wired, dispersed.		
dispersed	16	
hardwired	8	
No alarm	1	
Not stated	3	

#### The Future

- 22 respondents said they would like to stay put in their current sheltered property as a general needs tenant with an alarm and / or a NPH Support Service, if needed
- Nine respondents would like to move to more suitable accommodation, e.g. a flat or a bungalow which has level access and is designated for older people
- Tenants who said that they might choose to move home were asked to assess and rate, in terms of importance to them, the potential value of various ways that NPH could assist them. The responses to this are given in the table below:

	Essential	Desirable	Not Important	Not stated
A person to help me through the moving process, e.g. at the end of the phone	3	3	4	18
Disconnection / connection of utilities	2	4	4	18
Packing / unpacking and removals	3	3	4	18
New carpets	3	4	3	18
New curtains	2	4	4	18
New white good, e.g. cooker, fridge	1	4	5	18
Replacement of aids and adaptations if not in place	4	3	3	18

Tenants were then asked if they had any special requirements to help them maintain their independence, e.g. because of sensory, bariatric, mental health, and physical disabilities. Relevant responses are given below:

'Aids to assist with arthritis.'

'Door entry is very difficult to use.'

'A good location and would like more frequent maintenance of property - lift keeps breaking down.'

'Happy except for level access required.'

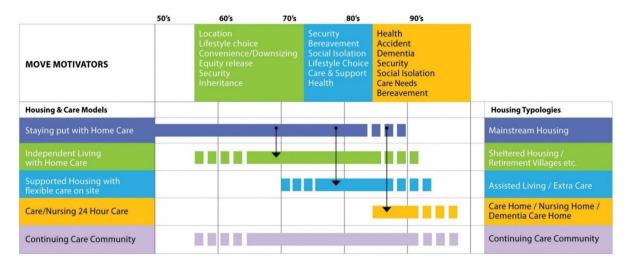
'A place to dry clothes.'

'Social involvement - only has meals on wheels; goes to day centre once a week; old Warden assists her; says too old to move.'

'Tenant would like to socialise more as she often feels lonely and has some guilt around asking daughter to do so much. Interested in Eleonore House.'

#### **Appendix 13 - Move Motivators**

Separate forms of accommodation are often presented in ways that suggest they are distinct / discrete. The diagram and explanation below point out the underlying reality that there is inevitably considerable overlap between different stages and kinds of older persons' housing and that a broad range of support is widely available across the spectrum.



"The diagram illustrates, very broadly, the four housing/care options available to us as we get older with a fifth in the form of a Continuing Care Community - where a combination of two or more of these options are co-located in a development.

Developments can vary widely within each of these categories in terms of their care regimes, housing typologies, scale and tenure. The diagram shows how a range of 'move motivators' change as we get older depending on our needs and circumstances and how these influence our decision whether to move, and if so, to what sort of housing.

Few of us are likely to make more than one move. Therefore each housing/care setting needs to be flexible and offer, as far as is possible, a 'home for life' to delay the need to move to more expensive and less desirable institutional care in nursing homes or hospitals.

For instance, those of us who choose to 'stay put' should be enabled to do so by 'aids and ix move, the more likely it will be a forced move to a care/nursing home or hospital as a result of an accident or emergency.

On the other hand, those who might choose an earlier 'lifestyle' move to a care-ready 'independent living' apartment in an active retirement community, should be more easily supported and cared for within the development."

(Source: Affordability Later in Life, The Housing Forum, 2011, and Living Well at Home Enquiry, 2011)