

# Housing, Regeneration and Planning



The Scottish  
Government

## Review of Sheltered Housing in Scotland



# **Review of Sheltered Housing in Scotland**

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## **Dedication**

This report is dedicated to the memory of Pat Bagot, OBE.

Pat was an exemplary civil servant for almost 30 years and devoted her professional life to improving social housing and support services both at home and abroad. More recently Pat was pivotal in taking forward the Housing for Older People agenda in Scotland and was Chair of the Review of Older People's Housing (ROOPH) working group leading on development of future policies. Her dedication, knowledge and invaluable experience are greatly missed throughout the housing and support sector.

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We would like to thank John Galvin, at the Elderly Accommodation Counsel for providing us with the data from the Elderly Accommodation Counsel database.

In addition, many people in local authorities and housing associations in Scotland assisted us in a variety of ways, by completing provider questionnaires, by distributing questionnaires to residents of sheltered housing schemes, by taking part in telephone interviews, by arranging visits to sheltered housing schemes, and introducing us to residents. Furthermore, voluntary sector agencies assisted us with organising focus groups with older people from BME communities, older disabled people, and ‘younger’ older people. For the purpose of anonymity we cannot name particular individuals or organisations, but we are very grateful for their support and contribution to the project.

Finally, we would like to thank the residents in the sheltered housing schemes who completed questionnaires, and all those people who participated in the focus groups and interviews. We are grateful for their time and patience. Their contribution to the review is greatly valued.



## **NOTE ON TERMINOLOGY USED IN THIS REPORT**

This report was commissioned and completed under the previous Scottish administration, which was known as the Scottish Executive. The administration post-May 2007 refers to itself as the Scottish Government. However, the original terminology (“Scottish Executive”) and references to Scottish Executive departments have largely been retained in this report to reflect the period in which the research was commissioned and conducted.

## **SUMMARY OF KEY FINDINGS**

### **Section 1: Introduction, methods and data sources**

This report provides a review of sheltered housing for older people in Scotland. It has been undertaken by the Centre for Housing Policy and York Health Economics Consortium at the University of York for the Scottish Executive and Communities Scotland.

The review draws on both quantitative and qualitative data as follows:

- Analysis of the Elderly Accommodation Counsel (EAC) database;
- Use of data on provision collated and published by the Scottish Executive (S1B etc);
- Analysis of the responses to an electronic questionnaire sent to all local authority and housing association providers of sheltered housing in Scotland;
- More detailed work in six 'representative' local authorities, including:
- In-depth telephone interviews with senior managers employed by providers of sheltered housing in the six local authorities to discuss specific issues raised through the electronic survey;
- Postal survey to a sample of a total of 1,200 residents living in sheltered accommodation in each of the six local authorities;
- Site visits to each local authority to meet selected service managers, scheme managers, scheme residents and other relevant groups (e.g. representatives from local voluntary organisations);
- Specific discussions with representatives from black and minority ethnic communities and other relevant interest groups, (including older people with disabilities).
- Local reviews of sheltered housing and other relevant documents provided by respondents to the electronic questionnaire.

### **Section 2: Overview of the supply of sheltered housing in Scotland**

- In total there are almost 1,200 sheltered housing schemes with about 36,000 dwellings and 145 extra care housing schemes with just over 3,700 dwellings;
- Overall, local authorities and housing associations each provide about 45% of dwellings in sheltered housing schemes, with the private sector responsible for the other 10%;
- Housing associations provide about 85% of extra care housing dwellings;
- Analysis by geographical clusters and by local authority shows considerable variation in the amounts and rates of provision by age band of sheltered housing and extra care housing in Scotland;
- In recent years the number of dwellings in sheltered housing schemes has fallen (to 38.0 per 1,000 aged 65 and over in 2005) while the number of extra care housing units has increased (to 4.5 per 1,000 aged over 65 in 2005), although geographical variations are considerable.

### **Section 3: Age, condition and suitability of sheltered housing provision**

- Most local authority schemes have been built since 1970 and most housing association schemes since the 1980s;
- Most extra care housing has been built since the 1990s;
- Most new schemes provided since 2000 have been built by the private sector and by housing associations;
- The vast majority of accommodation is in one-bedroom flats; bedsits only account for a small (and decreasing) proportion of stock;

- Almost all accommodation provided by local authorities and housing associations is rented; almost all private sector provision is owner occupied;
- Considerable variations exist in the condition, quality and suitability (e.g. in terms of space standards and accessibility) of accommodation;
- In general, extra care housing tends to perform better against these criteria than sheltered housing, and housing association provision is superior to local authority stock;
- However, there is not always a close correlation between dwelling age and suitability, as some older accommodation performs well and some newer schemes (including extra care housing) are relatively poor;
- In some areas considerable (though varying) proportions of stock are felt to be non-viable for a variety of reasons, including poor condition, inappropriate location, lack of space and poor accessibility;
- Some non-viable stock is being demolished or remodelled and converted for other uses (including extra care accommodation);
- Non-viability and remodelling decisions are locally-determined and will in part depend on other forms of local housing provision and strategies for providing care and support to older people; no consistent patterns or cost estimates emerged from the analysis.

#### **Section 4: Demand for sheltered housing**

- Demand for sheltered housing is very variable and although several potential factors can be identified (e.g. small accommodation) they do not apply consistently;
- Although data exist on numbers of applicants per vacancy and waiting times, these tend to be determined by local allocations policies and do not necessarily reflect true demand or need;
- Some extra care schemes seem to be in low demand; this may be because moves into such accommodation tend to be through necessity rather than choice;
- Charges for extra care are seen as being very high, which may also dampen demand, even if there is an assessed need for such accommodation;
- Schemes with good local reputations (often due to their wardens) are generally popular, irrespective of their attributes;
- In general, strategic and service managers anticipate that demand for sheltered housing and extra care housing will increase over the next 5-10 years, although no consistent pattern emerges;
- Overall, demand for accommodation provided by the private sector is expected to increase (e.g. due to increased numbers of owner occupiers), though again this was not the view of all respondents.

#### **Section 5: Services provided and charges**

- Service provision – especially of warden support services – varies considerably across both sheltered housing and extra care schemes;
- Almost all residents have regular (though not necessarily full time) access to a warden, though these are generally non-resident;
- Some of the data are skewed due to the small numbers of providers of some types of housing (e.g. two-bedroom flats; bungalows; council provision of extra care) and all data on charges should be interpreted with caution;
- Weekly charges vary considerably, especially within housing association provision;

- These will in part reflect different facilities (e.g. the extent of communal facilities) and levels of support but these alone are unlikely to explain all of the observed variation;
- Some providers include all services within their weekly rent, whereas other provided breakdowns for each service element;
- Costs for extra care include support costs, which seem to vary considerably, especially within council-run schemes (although these may also be influenced by economies of scale relating to the sizes of schemes);
- Residents who are self funders, especially if they have formerly been owner occupiers with no mortgage, may feel that the charges for sheltered housing and extra care accommodation are very high when compared with their previous housing-related costs.

### **Section 6: Residents' experience of sheltered housing based on postal survey**

While the survey has some limitations, it demonstrates very clearly the continuing popularity of sheltered housing with residents. This is not to say that residents are entirely happy with all aspects of the service. Reductions in warden services are unpopular. Many respondents remarked on poor space standards (particularly for couples), and problems with access for disabled people. Value for money is also a concern. Nevertheless overall the great majority of residents were supportive of sheltered housing, and agreed that sheltered housing is a good service for older people.

### **Section 7: Key findings from site visits and interviews and focus groups with sheltered housing residents**

Interviews and discussion with residents offered further insights. Again most residents were eager to say they were happy with sheltered housing. Where there had been changes to the warden services, these were deeply unpopular, as highlighted by the survey responses. It was also clear that many people did not understand what was meant by "housing support". Some were not clear what the different charges were for. In addition residents were concerned about how the out of hours services operated, and many were reluctant to use the community alarm systems. With regard to choice of tenure, those residents we met who had previously been home owners did not regret selling their former homes, however there were concerns about the affordability of rents and service charges particularly for those who were self-funding.

### **Section 8: External impressions of sheltered housing**

Older people who do not live in sheltered housing can understand the attractions of sheltered housing, and many thought that it might be an option they would consider for themselves, however there were concerns about size of dwellings and the accessibility of sheltered housing, and maintaining privacy. Contentment with their current homes underpinned people's decisions not to move. For older people in Black and Minority Ethnic groups (BME), it was clear that there was a lack of knowledge about sheltered housing, however it is an attractive option for some people. It would be wrong to assume that all older people in BME communities want or can live with younger family members. The presence of staff with language skills and understanding of cultural beliefs and practices would make sheltered housing more attractive for older people from BME groups. Similarly having a significant number of other residents from the same community would enable people to socialise. Views were mixed as to the desirability of having schemes that were entirely for people from one ethnic group.

## **Section 9: The changing role of sheltered housing**

Most providers felt that recent changes to sheltered housing had been driven by a number of compelling and inter-related factors. Of primary significance were: the new regulations and legislation, particularly the European Working Time Directive; reductions and changes in funding and uncertainties around the future levels of Supporting People funding; new and alternative service developments that allowed older people the opportunity to remain in their own homes for longer; and changes in both levels and type of demand for services. Although there was general agreement about the drivers for change, the types of changes made by providers to services were varied.

## **Section 10: Concluding observations**

While this review has addressed many of the key questions demanded of it, the review raises more questions for the Scottish Executive and Communities Scotland than it answers.

It seems that a National Strategy for sheltered housing in Scotland is not feasible given the enormous diversity of current and planned future provision. Nevertheless it is vital that there are local strategic frameworks into which sheltered housing and very sheltered housing are placed, alongside other types of services for older people including housing, social care and health services.

It is also very clear that sheltered housing remains very popular with those who live in it. It is the support element that makes sheltered housing attractive, and yet it is the support element that is being eroded.

Clearly there are requirements for additional funding if sheltered housing is to continue in its present form, and if the current stock of sheltered housing is to be maintained and improved to provide accessible, and suitably spacious accommodation for older people now and into the future. Again the diversity of provision make estimating the amount of funding required across Scotland highly problematic.

Another key question is the future role of extra care housing. Evidence suggests that extra care housing is not a panacea for all older people's housing and care needs. Moreover it is widely perceived by providers to be an expensive option, particularly for those people who are self-funding. Given extra care housing seems to be the growth area in provision, some longitudinal evaluation of the effectiveness of extra care within the specific context of services for older people in Scotland is recommended.

## **SECTION ONE: INTRODUCTION, METHODS AND DATA SOURCES**

### **Overview**

1.1 This report provides a review of sheltered housing for older people in Scotland. It has been undertaken by the Centre for Housing Policy and York Health Economics Consortium at the University of York on behalf of the Scottish Executive and Communities Scotland. The six key topics the review was intended to address are as follows:

- To establish the supply and condition of sheltered housing stock in Scotland;
- To identify how and why sheltered housing developments are changing, and to explore any barriers to change;
- To establish the costs of developing, maintaining and staffing sheltered housing accommodation and the costs of different types of provision;
- To identify issues relating to low or high demand within the sheltered housing stock;
- To identify and discuss the changing role of sheltered housing for both providers and residents;
- To explore residents' experience of sheltered housing, including the impact of recent changes, costs, and aspirations for future housing.

1.2 In addition to these six topics, the project specification highlighted a number of more specific questions. These are shown in Appendix A.

1.3 This introductory section describes the methodology and data sources used for the review, as well as considering the different definitions of sheltered housing and identifying the main types of provider in Scotland.

### **Methodology and data sources**

1.4 The review draws on both quantitative and qualitative data collected from several sources, including:

- Analysis of the Elderly Accommodation Counsel (EAC) database;
- Use of data on provision collated and published by the Scottish Executive (S1B etc);
- Analysis of the responses to an electronic questionnaire sent to all providers of sheltered housing in Scotland, including local authorities, housing associations and private sector providers;
- More detailed work in six 'representative' local authorities, including:

In-depth telephone interviews with senior managers employed by providers of sheltered housing in the six local authorities to discuss specific issues raised through the electronic survey;

Postal survey to a total sample of approximately 1,200 residents living in sheltered accommodation in each of the six local authorities;

Site visits to each local authority to meet selected service managers, scheme managers, scheme residents and other key informants;

- Local reviews of sheltered housing and other relevant documents provided by respondents to the electronic questionnaire;
- Discussions with representatives from black and minority ethnic (BME) communities regarding attitudes to sheltered housing and housing aspirations for the future;
- Discussion with 'younger' older people regarding attitudes towards sheltered housing and their housing aspirations for the future;

- Discussion with older, disabled people not resident in sheltered housing regarding attitudes towards sheltered housing.

1.5 The analysis of existing databases was undertaken during October and November 2006 and the electronic questionnaires were distributed to providers of sheltered housing during November 2006. The postal survey was distributed during February and March 2007. The majority of the fieldwork was undertaken during February and March 2007.

1.6 The main sources of data and data collection methods used in the review are described in more detail below.

### ***The EAC Database***

1.7 The Elderly Accommodation Counsel's (EAC) aim is to help older people make informed choices about meeting their housing and care needs. It was founded in 1984 and became a registered charity the following year. It has two main objectives:

- To deliver a free information and advice service directly to older people and their relatives and carers;
- To raise awareness amongst other advisory agencies, professionals and policy makers of the importance people attach to information and advice which in turn helps them make their own decisions about how and where to live in older age.

1.8 EAC collects detailed information about services and specialist housing provision for older people and its two databases – 'Care Options' and 'Housing Options' – are widely used. They cover England, Scotland, Wales and Northern Ireland. EAC's Housing Options website ([www.housingcare.org](http://www.housingcare.org)) includes a database of retirement housing in the UK which can be searched according to a number of dimensions. For example, the schemes are classified as being 'unsupported', 'community alarm only', 'warden' and 'extra care'. Our analysis of the database focussed on those classified as 'warden' and 'extra care', thus excluding general needs and amenity housing suitable for older people. It should be noted that the classification is determined by the information provided to the database and may not fully match classifications used elsewhere (e.g. in the S1B forms, see below).

1.9 The EAC provided York Health Economic Consortium with the latest version of their Scottish database which drives the information shown on its Housing Options website.<sup>1</sup> It should be noted that these data are collected primarily to provide a source of information to the general public and relevant professionals and organisations. The database is not designed specifically to be a research tool. It includes information on private sector provision as well as on provision by local authorities and housing associations. It includes both numbers of schemes and numbers of dwellings.

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<sup>1</sup> It should be noted that some discrepancies in numbers of actual provision and provision shown in the EAC database were found when contacting the six 'representative' Local authorities for additional information. This was partly due to local changes in provision in recent months but also complete information had not always been submitted to the EAC. However, for consistency, all of the numbers attributed to the EAC database in this review are drawn from the database supplied by the EAC in October 2006, which was based on data submitted during the first part of 2006.

## ***Scottish Executive and Other National Statistical Sources***

1.10 Each year local authorities (Public Agencies) complete S1B returns for the Scottish Executive Development Department: Analytical Services Division (Housing Statistics). Housing associations return similar data to Communities Scotland. These forms request information on the numbers of ‘housing for the elderly’ dwellings in the following four categories (see Appendix B):

- Medium dependency housing;
- Other dwellings with alarm;
- Sheltered;
- Very Sheltered.

1.11 The Scottish Executive publishes regular statistical bulletins on housing provision by Public Agencies and housing associations, which include this information. Data for the last two categories have been used to verify the validity of the data on numbers of dwellings in the EAC database.

## ***Electronic Provider Survey***

1.12 An electronic questionnaire was also compiled and (slightly different versions were) sent to named contacts in each local authority, housing association and private sector provider. The contacts database was derived from data provided by Communities Scotland and from information in the EAC database. The questionnaire focused on the provision of qualitative and quantitative information needed to address the key research questions (see Appendix A). Due to the project’s timescale, respondents were asked to return their completed questionnaire within a two-week period in November, although many recipients asked for additional time. Non-respondents therefore received several requests and reminders (by e-mail and telephone) during December and early January to ensure that the response rate was as high as possible.

1.13 The local authority electronic questionnaire was sent to all Scottish local authorities apart from Dumfries & Galloway, Glasgow City and Scottish Borders, as these Councils were known to have transferred their housing stock to local housing associations. On receiving the questionnaire, Argyll & Bute and Inverclyde Councils stated that they were unable to complete the questionnaire as they were in the process of transferring their stock. It was also anticipated that the two local authorities that did not themselves provide any sheltered or extra care housing - Clackmannanshire and Falkirk<sup>2</sup> - would not submit a return, though one of them did. Twenty one questionnaires were returned (although not all were completed in full and two only included minimal information), which gives an overall response rate of 80.8%<sup>3</sup>.

1.14 The housing association electronic questionnaire (see Appendix K) was sent to 78 organisations identified from the EAC database and Scottish Executive data on Registered Social Landlords (RSLs). Although almost all of the organisations are Scottish-based, questionnaires were also sent to a few English-based providers with schemes in Scotland.

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<sup>2</sup> It should be noted that although neither of these Councils provide sheltered housing or extra care housing, they do provide medium dependency housing and dwellings with alarms designated for older people. Rentable sheltered housing provision in these areas is only provided by housing associations/Registered Social Landlords

<sup>3</sup> Based on an expected maximum number of 26 returns. The non-returners from which returns might have been made were East Lothian, Eilean Siar, Fife, North Ayrshire, and Perth & Kinross.



Questionnaires were returned by 36 organisations, ranging from small-scale providers responsible for one scheme (there were 11 such respondents) to national housing associations with schemes in many parts of Scotland (e.g. Bield housing association has 82 schemes and Hanover (Scotland) Housing Association has 91). Although the overall response rate of 46.2% is much lower than that for the local authorities, the respondents include a wide range of housing associations, including most of the ones responsible for large amounts of provision.

### *Cluster classification*

1.15 The researchers decided that it would be sensible to identify some clusters for analysing the data for the 32 local authority areas in Scotland. The aim was to group authorities according to a combination of their geographical and population density into groups with about 4-6 authorities in each. After seeking clarification from the Project's Research Advisory Group (see Appendix C for members), it was apparent that no specific grouping was routinely used by the Scottish Executive. The researchers therefore devised their own grouping, based on information from the Scottish Executive Urban Rural 8-Fold Classification 2005-2006<sup>4</sup>. Further details of the methodology used are provided in Appendix D.

1.16 Seven clusters have been used and these are shown in Table 1.1.<sup>5</sup>

**Table 1.1: Local authority clusters used in the analysis**

<b><i>NORTHERN SCOTLAND</i></b>		
<i>Very Urban and Mainly Urban</i>	<i>Mainly Rural</i>	<i>Very Remote</i>
Aberdeen City	Aberdeenshire	Eilean Siar
Angus	Argyll & Bute	Orkney Islands
Dundee City	Highland	Shetland Islands
Stirling	Moray Perth & Kinross	
<b><i>CENTRAL SCOTLAND</i></b>		
<i>Very Urban</i>	<i>Mainly Urban</i>	
East Renfrewshire	Clackmannanshire	
Edinburgh, City of	East Dunbartonshire	
Glasgow City	Falkirk	
North Lanarkshire	Fife	
Renfrewshire	Inverclyde West Dunbartonshire West Lothian	
<b><i>SOUTHERN SCOTLAND</i></b>		
<i>Mainly Urban</i>	<i>Mainly Rural</i>	
Midlothian	Dumfries & Galloway	
North Ayrshire	East Ayrshire	
South Ayrshire	East Lothian	
South Lanarkshire	Scottish Borders	

<sup>4</sup> The 8-fold classification subdivides 'remote' (as used in the 6-fold classification for small towns and for rural) into 'remote' and 'very remote'.

<sup>5</sup> The inclusion of Stirling within Northern Scotland can be questioned, but it was included in this area rather than in Central Scotland to balance the numbers and because it covers a large geographical area to the north of the city which is bordered by several of the northern Authorities.

### *Fieldwork in a sample of case study areas*

1.17 Six local authority areas were identified that represented urban areas in Central, Northern, and Southern Scotland, and rural areas in Northern and Southern Scotland<sup>6</sup>. In each of the six areas, we conducted telephone interviews with key informants from provider organisations (local authority and housing associations), and key informants involved in strategic planning and services development.

1.18 We undertook a postal survey (see Appendix K) of a total of approximately 1,200 residents living in sheltered accommodation in these six areas. We also undertook visits to 9 housing schemes in these areas to conduct focus groups and meetings with residents (these were attended by more than 70 people), residents' representatives and key personnel (e.g. service managers).

### *Consultations with older people*

1.19 In addition, we conducted four discussion groups. Two groups were with older people from BME communities. Both groups were assisted by an interpreter. The intention here was to explore the perceptions of sheltered housing among older people from different backgrounds, and to consider how sheltered housing might best meet the needs of older people from minority communities. We also undertook a discussion group with frail older people who did not live in sheltered housing to explore their reasons for not choosing sheltered housing, and with a group with younger older people to explore their aspirations for the future.

### **What is Sheltered Housing?**

1.20 There are a variety of possible definitions of sheltered housing and different organisations often use slightly different ones. There are two broad dimensions that can be included in a definition:

- Physical attributes of the property (e.g. meeting disability standards etc);
- Service provision associated with the property (e.g. community alarm; warden).

1.21 This review focuses on housing that is primarily intended for older people (i.e. over 60 years of age, though some schemes have a lower age limit of 55 years). However, it should be noted that such housing is sometimes used for younger people, especially if it is hard to let to older people (e.g. non-ground floor accommodation without a lift). Housing for older people falls into the following four broad categories:

- **Amenity or medium dependency housing** – this housing is generally considered to be suitable for older people due to its physical characteristics, but does not automatically include any services;
- **Housing with a community alarm** – as well as having suitable physical characteristics, these properties are linked to a call centre which responds if the alarm (or other equipment, such as smoke detectors) is triggered;
- **Housing with a warden service** (often referred to as sheltered housing) – such housing is usually built in a block or comprises a cluster of bungalows and often includes communal facilities, such as a lounge. In addition, scheme residents can call upon a warden for support if necessary and the warden often also organises activities

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<sup>6</sup> The 'very remote' areas were not included in the fieldwork case study areas due to their unique characteristics

for the residents. Although many schemes had resident wardens in the past, they have tended to be replaced in recent years by wardens who live off-site and are available during specific ‘working’ hours. Properties are also linked to a community alarm service;

- **Extra care housing** – in recent years an additional category – often known as ‘extra care housing’ or ‘very sheltered housing’ – has become increasingly popular. This accommodation is generally suitable for frailer people who might otherwise move into a Care Home. Although similar to schemes with wardens, extra care or very sheltered housing schemes usually allow for the provision of additional care services. They may also have additional facilities (e.g. provision of an assisted bathroom) and provision of meals. However, it should be noted that there is no single model for this type of housing, and provision can be varied.

1.22 Appendix B includes some of the definitions that are commonly used for sheltered housing. This review focuses on housing with a warden service and extra care housing, as these are considered to represent housing with levels of support likely to promote independent living for older people. Given that the EAC database and the Scottish Executive use slightly different terms and definitions, the review generally uses the terms ‘Housing with Wardens’ or ‘Warden Housing’ and ‘Extra Care Housing’ when referring to the EAC database and ‘sheltered housing’ and ‘very sheltered housing’ for Scottish Executive data. However, questionnaire respondents may use the terms they use locally and some may also use them interchangeably, as indeed they are in parts of this report.

### **How has Sheltered Housing developed in Scotland?**

1.23 Sheltered housing in Scotland has developed over the last 50 or so years. An overview of recent developments is provided in Appendix E. This considers many of the fundamental influences, including changes in legislation and in funding streams, which have shaped current provision. The introduction of Supporting People funding in 2003 helped to formalise the provision of support services for various client groups, including older people living in sheltered housing. Legislation such as the European Working Time Directive has had a fundamental effect on the way support can be delivered (e.g. on the need to use community alarm services with response services instead of providing 24-hour cover on site).

1.24 Given these various factors, it is not surprising that sheltered housing provision has developed in different ways across Scotland, reflecting councils’ responses to legislation and their local priorities. Furthermore, boundary changes over time mean that some current councils have ‘inherited’ their stock from former councils and are now having to work with this stock. As the data presented throughout this review show, provision of housing with support is highly diverse, with no consistent patterns being apparent across Scotland.

### **Who Supplies Sheltered Housing in Scotland?**

1.25 There are three main providers of sheltered housing for older people.

#### ***Local Authority Providers***

1.26 Most of the Scottish local authorities provide Housing with Wardens and several also provide extra care housing. However, the EAC database and the Scottish Executive databases showed that three local authorities – Dumfries & Galloway, Glasgow City and Scottish Borders - had transferred all of their stock to local housing associations. Furthermore, they showed that two authorities – Clackmannanshire and Falkirk – do not

provide any housing with wardens and several authorities do not provide any extra care housing. During the course of the review it became apparent that two other Councils – Inverclyde and Argyll and Bute – were in the process of transferring their stock to local housing associations. Responses to the electronic questionnaire showed that only two further local authorities are considering stock transfer.

### ***Housing Association Providers***

1.27 A wide range of housing associations provide sheltered and/or extra care housing. These range from ‘national’ organisations – such as Bield and Hanover (Scotland) – who manage large numbers of schemes and dwellings, often in several local authority areas to very small local organisations responsible for only one or two schemes. A few voluntary organisations have also been included in this category (although all 57 Abbeyfield Society schemes have been excluded due to the specific nature of their provision). Appendix F shows the range of such providers. It should be noted that some of these organisations provide shared ownership or shared equity accommodation. Such properties are included in the analysis of housing association provision. However, these forms of tenure tend to date from the 1980s and 1990s and only account for a small proportion of their sheltered housing stock.

### ***Private Sector Providers***

1.28 There is one major private sector provider of sheltered housing – McCarthy & Stone. This company constructs new schemes in locations that meet its particular criteria (e.g. being near amenities and facilities; being in neighbourhoods with a given proportion of home owners aged 65 and over). The flats within these schemes are then sold and the subsequent management of the building handed over to another organisation (for example, Peverel Management Services in Scotland). Flats can subsequently be sold on the open market or through the management agent. McCarthy & Stone started to develop schemes initially in Edinburgh around 20 years ago. Due to land shortages and land prices there they gradually developed schemes in other parts of Scotland, based on the numbers of people on the electoral roll who are owner occupiers aged 65 and above within a five mile radius of the proposed site. As a rule of thumb, there need to be about 40 such people per proposed unit.

1.29 There are also a small number of ‘one-off’ schemes by private sector providers. Some of these include extra care housing (such as the Inchmarlo estate in Aberdeenshire).

### **Structure of Report**

1.30 The analysis included in this report is presented in the following sections:

- Section 2: Overview of the supply of sheltered housing in Scotland
- Section 3: Age, condition and suitability of sheltered housing provision
- Section 4: Demand for sheltered housing
- Section 5: Services provided and charges
- Section 6: Residents’ experience of sheltered housing based on postal survey
- Section 7: Key findings from site visits and interviews and focus groups with sheltered housing residents
- Section 8: External impressions of sheltered housing
- Section 9: The changing role of sheltered housing
- Section 10: Concluding observations

Bullet points summarising the main points are included where appropriate.

## SECTION TWO: OVERVIEW OF THE SUPPLY OF SHELTERED HOUSING IN SCOTLAND

### Overview

2.1 This section provides an overview of the supply of sheltered housing across Scotland. A more detailed breakdown of aspects such as age, condition, suitability and tenure is presented in Section 3.

2.2 The data, which are mainly taken from the EAC database, are presented for housing with wardens and extra care housing. Aggregate data for Scotland by type of provider are considered initially followed by tables showing provision by local authority cluster. The following set of tables show the rates of provision for four age bands – 60 years and over, 65 years and over, 75 years and over and 85 years and over – are presented. These enable comparisons to be made between and within clusters.

### How Much Sheltered Housing is in Scotland?

#### Key Points

- There are about 36,000 units of sheltered housing (i.e. dwellings) in Scotland;
- About 16,000 (44%) of these are provided by local authorities;
- About 16,500 (46%) are provided by housing associations;
- The private sector provides slightly over 10% of sheltered housing dwellings;
- There are between 3,700-3,900 units of extra care housing in Scotland;
- Most of these dwellings (about 86%) are provided by housing associations;
- Local authorities provide about 11% and the private sector is responsible for the remaining 3%.

2.3 The main data source for identifying the supply of sheltered housing for older people in Scotland was the EAC database. Table 2.1 summarises the numbers of schemes and dwellings for housing with wardens and extra care housing (as defined within the database) by the three main types of provider.

**Table 2.1: Provision of sheltered housing by type of provider**

Provider	Housing with warden		Extra care housing	
	Schemes	Dwellings	Schemes	Dwellings
Local Authority	578	15,9691	20	407
Housing Association	538	16,434	123	3,194
<i>Sub-total</i>	<i>1,116</i>	<i>32,403</i>	<i>143</i>	<i>3,601</i>
Private Sector	79	3,680	2	127
<i>Total</i>	<i>1,195</i>	<i>36,083</i>	<i>145</i>	<i>3,728</i>

#### Notes to table

Source: EAC Database, 2006.

2.4 The numbers in the EAC database for local authorities and housing associations have been compared with those published by the Scottish Executive Development Department to determine the extent to which the two sources of information on provision match. It should be noted that the Scottish Executive data only include information on the numbers of dwellings and also exclude provision by the private sector. Table 2.2 summarises the most recent data from this source.

**Table 2.2: Housing for older people: number of dwellings as at 31 March 2005**

Agency	Sheltered housing	Very sheltered housing
<i>All public authorities:</i>	16,842	249
Local Authority	16,825	249
Scottish Homes	17	-
Housing Association	16,370	3,644
<b>Total</b>	<b>33,212</b>	<b>3,893</b>

**Notes to table**

Note: Figures may include estimates from providers.

Source: Table 20, Scottish Executive Statistical Bulletin Housing Series: HSG/2006/5 (August 2006).

2.5 Tables 2.3a and 2.3b compare the data from these two sources. Given that there are year-to-year fluctuations in provision (see Table 2.5), and also that the definitions differ slightly, the data seem to be sufficiently similar to show that the EAC database provides a good representation of current provision in Scotland.

**Table 2.3a: Comparisons of data sources for provision of housing with warden/sheltered housing**

	EAC Database (2006)	SE Statistics (2005)
Local Authority*	15,969	16,842
Housing Association	16,434	16,370
Sub-total	32,403	33,212
Private Sector	3,680	n/a
<b>Total</b>	<b>36,083</b>	

**Notes to table**

\* Includes Scottish Homes provision.

**Table 2.3b: Comparisons of data sources of provision of extra care/very sheltered housing**

	EAC Database (2006)	SE Statistics (2005)
Local Authority	407	249
Housing Association	3,194	3,644
Sub-total	3,601	3,893
Private Sector	127	n/a
<b>Total</b>	<b>3,728</b>	

2.6 Table 2.4 summarises the average sizes of schemes and their ranges according to the EAC database.

**Table 2.4: Summary of sizes of schemes**

Type of provider	Housing with warden		Extra care housing	
	Mean size	Range	Mean size	Range
Local Authority	28	2-216	20	2- 53
Housing Association	31	2-216	27	2-118
Private Sector	47	14-135	64	24 -03

**Notes to table**

Source: EAC Database, 2006.

## Recent Trends in Sheltered Housing Provision

### *Key points*

- The number of people aged 65 and over has increased steadily over the period 2000 to 2005;
- The number of sheltered housing units provided by local authorities and housing associations has fallen over the period from 36,912 in 2000 to 33,212 in 2005 (i.e. by about 10%);
- The number of units of sheltered housing per 1,000 Scottish residents aged 65 and over has fallen from 46.2 to 38.0 over this period (i.e. by almost 18%);
- The number of very sheltered housing units has more than doubled from 1,689 to 3,893 over this period;
- The number of very sheltered housing units per 1,000 Scottish residents aged 65 and over has also more than doubled - from 2.1 to 4.5 - over this period;
- When sheltered and very sheltered housing are considered together, the total number of such units per 1,000 Scottish residents aged 65 and over was lower in 2005 (42.5) than in 2000 (48.3).

2.7 The Scottish Executive dataset can also be used to show recent trends in the provision of sheltered and very sheltered housing in Scotland by Public Agencies and housing associations. Table 2.5 shows data for the period 2000-2005, along with population data and the rates of provision per 1,000 people aged 65 and over. More information on rates of provision is presented in Section 3.

**Table 2.5: Recent trends in provision of sheltered and very sheltered housing by public agencies and housing associations: 2000-2005**

Year (as at 31 March)	Population aged 65 and over in June	Sheltered Housing		Very Sheltered Housing*	
		Number	Rate per 1,000 aged 65 and over	Number	Rate per 1,000 aged 65 and over
2000	799,000	36,912	46.2	1,689	2.1
2001	807,000	34,615	42.9	1,822	2.3
2002	813,000	34,247	42.1	2,023	2.5
2003	819,000	33,861	41.3	2,787	3.4
2004	827,000	32,758	39.7	2,872	3.5
2005	873,000	33,212	38.0	3,893	4.5

#### Notes to table

\* Figures for 2005 include units previously classified as medium dependency or wheelchair housing.

Source: Table 1, Scottish Executive Statistical Bulletin Housing Series: HSG/2006/5 (August 2006) and [www.scotland.gov.uk/Topics/Statistics/14844/1762](http://www.scotland.gov.uk/Topics/Statistics/14844/1762).

2.8 Therefore, even though there has been a significant increase in the availability of very sheltered housing since 2000, overall provision of sheltered and very sheltered housing has fallen. At the same time, the number of older people living in Scotland has increased steadily.

### Provision by Cluster

2.9 The following four tables (Tables 2.6a/b and Tables 2.7a/b) show the numbers of housing with warden and extra care housing schemes by cluster and by type of provider using

data from the EAC database (2006). These tables are presented in more depth in Appendix G which shows the numbers of schemes and dwellings in each local authority area in the three clusters.

2.10 Table 2.6a and Appendix G show that:

- There is considerable variation in provision both within and between the clusters (e.g. there are about twice as many local authority schemes as housing association schemes in Northern Scotland as elsewhere, where housing associations tend to be responsible for more schemes than local authorities).

**Table 2.6a: Number of housing with warden schemes by cluster and type of provider**

	Local authority	Housing association	Private sector	Total
Northern Scotland	299	151	18	466
Central Scotland	164	263	44	471
Southern Scotland	115	124	17	256
SCOTLAND	578	538	79	1,195

2.11 Table 2.6b and Appendix G show that:

- The private sector is only responsible for two extra care housing schemes (both in Northern Scotland);
- Most local authority areas include provision by housing associations, though less than half include local authority provision of extra care housing;
- There is no extra care housing in three local authority areas (Clackmannanshire, Eilean Siar and Stirling).

**Table 2.6b: Number of extra care housing schemes by cluster and type of provider**

	Local authority	Housing association	Private sector	Total
Northern Scotland	13	24	2	39
Central Scotland	5	71	0	76
Southern Scotland	2	28	0	30
SCOTLAND	20	123	2	145

**Notes to table**

Source: EAC database 2006.

2.12 Table 2.7a and Appendix G show that:

- The private sector provides slightly over 10% of sheltered housing dwellings;
- In Northern Scotland, the local authorities provide twice as many dwellings as the housing associations;
- In Central Scotland, the housing associations provide about twice as many dwellings as the local authorities;
- In Southern Scotland, housing associations provide slightly more dwellings than local authorities



**Table 2.7a: Number of housing with warden dwellings by cluster and type of provider**

	Local authority	Housing association	Private sector	Total
Northern Scotland	8,578	4,615	827	14,020
Central Scotland	4,532	8,597	2,057	15,186
Southern Scotland	2,859	3,222	796	6,877
SCOTLAND	15,969	16,434	3,680	36,083

**Notes to table**

Source: EAC database, 2006.

2.13 Table 2.7b and Appendix G show that:

- The proportion of extra care housing provided by housing associations is greatest in Central Scotland.

**Table 2.7b: Number of extra care housing dwellings by cluster and type of provider**

	Local authority	Housing association	Private sector	Total
Northern Scotland	249	574	127	950
Central Scotland	112	1,980	0	2,092
Southern Scotland	46	640	0	686
SCOTLAND	407	3,194	127	3,728

**Notes to table**

Source: EAC database, 2006

**Rates of Provision – By Cluster**

2.14 Tables 2.8a and 2.8b show the rates of provision of sheltered and extra care housing for each local authority for residents aged 60 and over (60+), 65+, 75+ and 85+ and ranks these across the local authorities. Table 2.8a shows that:

- The overall rates of sheltered housing provision for Scotland are 32.2 dwellings per 1,000 residents aged 60 and over;
- Equivalent rates for those aged 65 and over, 75 and over and 85 and over are 43.0, 94.2 and 380.9, respectively;
- There is considerable variation both within and between the clusters;
- Dundee City consistently has the highest provision rate (e.g. 316.0 dwellings per 1,000 residents aged 75 and over);
- The Orkney Islands consistently have the lowest rate of provision (e.g. 26.7 dwellings per 1,000 residents aged 75 and above);
- Not all very remote island communities have low provision rates (e.g. the Shetland Islands have a rate of provision of 178.1 for residents aged 75 and over, which is the second highest value).

**Table 2.8a: Rates and ranks of housing with warden provision by cluster for various age bands**

	60+		65+		75+		85+	
	Rate	Rk*	Rate	Rk	Rate	Rk	Rate	Rk
<b>NORTHERN SCOTLAND</b>								
<i>Very Urban and Main Urban:</i>								
Aberdeen City	64	2	82.9	2	174	3	690.7	2
Angus	41.1	5	54.8	6	117.4	6	462.5	6
Dundee City	117.2	1	150.7	1	316	1	1,311.80	1
Stirling	27.9	11	37.4	11	83.5	13	323.3	16
<i>Mainly Rural:</i>								
Aberdeenshire	40.6	6	55.7	5	122.8	5	464.1	5
Argyll and Bute	25.6	18	34.3	17	76.4	18	286.3	22
Highland	22.8	22	31	23	68.5	24	277.3	27
Moray	25.5	19	33.9	19	75.6	19	312.6	17
Perth & Kinross	27	12	35.9	14	74.9	21	301.8	18
<i>Very Remote:</i>								
Eilean Siar	21.7	25	28.5	26	60.9	27	231.8	27
Orkney Islands	8.9	32	12.2	32	26.7	32	96.7	32
Shetland Islands	59.5	3	82.8	3	178.1	2	634.9	3
<b>CENTRAL SCOTLAND</b>								
<i>Very Urban:</i>								
East Renfrewshire	18.3	28	24	28	51.4	29	198.8	29
Edinburgh, City of	49.4	4	63.7	4	127.9	4	477.3	4
Glasgow City	24.3	21	31.4	21	68.4	23	290.7	19
North Lanarkshire	26.7	13	36.3	12	87.4	9	401.9	8
Renfrewshire	21.4	26	28.7	25	65.7	25	287.1	20
<i>Mainly Urban:</i>								
Clackmannanshire	20.3	27	28.1	27	64.2	26	270.6	26
East Dunbartonshire	25.7	17	34.3	17	76.9	17	326.3	5
Falkirk	14.6	31	19.7	31	44.8	31	192.4	30
Fife	29.5	9	39.8	9	85.7	11	333.9	13
Inverclyde	29.1	10	38.8	10	86.2	10	356	10
West Dunbartonshire	21.9	24	29.4	24	65.1	12	274.9	25
West Lothian	22.2	23	31.4	21	79	16	339.6	12
<b>SOUTHERN SCOTLAND</b>								
<i>Mainly Urban:</i>								
Midlothian	16.7	29	22.7	29	51.8	28	216.7	28
North Ayrshire	24.6	20	33.1	20	75.6	19	301.8	18
South Ayrshire	34.5	8	45.6	8	97.5	8	379.2	9
South Lanarkshire	26.9	14	36.1	13	81.1	14	347.5	11
<i>Mainly Rural:</i>								
Dumfries & Galloway	15.4	30	20.5	30	45.1	30	184.7	31
East Ayrshire	26.1	16	35.1	15	80.3	15	333.5	14
East Lothian	26.6	15	35.1	15	74	22	287.1	20
Scottish Borders	37	7	49.3	7	106.7	7	412.6	7
<b>SCOTLAND</b>	<b>32.2</b>		<b>43</b>		<b>94.2</b>		<b>380.9</b>	

**Notes to table**

\* Ranking: 1 = highest rate; 32 = lowest rate.

Source: EAC database, 2006.

2.15 Table 2.8b shows that:

- The overall rates of extra care housing provision for Scotland are 3.3 dwellings per 1,000 residents aged 60 and over;
- Equivalent rates for those aged 65 and over, 75 and over and 85 and over are 4.4, 9.7 and 39.4, respectively;
- There is considerable variation both within and between the clusters;
- West Lothian generally has the highest provision rate (e.g. 30.4 dwellings per 1,000 residents aged 75 and over);
- Clackmannanshire, Eilean Siar and Stirling do not have any extra care provision;
- However, the other two very remote Authorities have relatively high rates of provision, as they rank between 4th and 7th highest;
- ‘Very urban’ areas such as Dundee City, Glasgow City and East Renfrewshire also have consistently high ranks (i.e. between 1st and 4th) and City of Edinburgh also tends to have a relatively high rank (i.e. between 6th and 9th).

**Table 2.8b: Rates and ranks of extra care housing by cluster for various age bands**

	60+		65+		75+		85+	
	Rate	Rk*	Rate	Rk	Rate	Rk	Rate	Rk
<b>NORTHERN SCOTLAND</b>								
<i>Very Urban and Main Urban:</i>								
Aberdeen City	4.1	9	5.3	9	11.2	10	44.5	10
Angus	2.4	18	3.2	19	6.9	19	27	18
Dundee City	5.9	3	7.6	3	15.9	4	66	4
Stirling	0	30	0	30	0	30	0	30
<i>Mainly Rural:</i>								
Aberdeenshire	4.3	8	5.9	8	13.1	7	49.3	8
Argyll and Bute	2.1	20	1.9	26	4.3	26	16	26
Highland	0.8	28	1.1	28	2.4	28	9.6	28
Moray	1.5	24	2	24	4.5	25	18.5	25
Perth & Kinross	4	10	5.3	9	11.1	11	42.1	11
<i>Very Remote:</i>								
Eilean Siar	0	30	0	30	0	30	0	30
Orkney Islands	4.9	7	6.6	6	14.6	6	52.7	6
Shetland Islands	5.3	5	7.4	5	15.9	4	56.7	5
<b>CENTRAL SCOTLAND</b>								
<i>Very Urban:</i>								
East Renfrewshire	9	1	11.8	2	25.2	2	97.5	2
Edinburgh, City of	5	6	6.4	7	12.9	8	48.2	9
Glasgow City	5.9	3	7.6	3	16.5	3	70.2	3
North Lanarkshire	1.5	24	2	24	4.8	23	22.3	21
Renfrewshire	2.9	13	3.9	13	8.9	13	39	13
<i>Mainly Urban:</i>								
Clackmannanshire	0	30	0	30	0	30	0	30
East Dunbartonshire	0.6	29	0.9	29	1.9	29	8.2	29
Falkirk	2.5	17	3.4	17	7.8	15	33.4	15
Fife	2.4	18	3.3	18	7	18	27.3	18
Inverclyde	2.1	20	2.8	20	6.2	20	25.7	20
West Dunbartonshire	2.6	16	3.5	15	7.7	17	32.3	16
West Lothian	8.5	2	12.1	1	30.4	1	130.6	1
<b>SOUTHERN SCOTLAND</b>								
<i>Mainly Urban:</i>								
Midlothian	3.1	12	4.3	12	9.7	12	40.6	12

	60+		65+		75+		85+	
	Rate	Rk*	Rate	Rk	Rate	Rk	Rate	Rk
North Ayrshire	1.5	24	2.1	23	4.7	24	18.8	24
South Ayrshire	2	22	2.6	21	5.6	21	21.8	22
South Lanarkshire	3.9	11	5.2	11	11.8	9	50.6	7
<b>Mainly Rural:</b>								
Dumfries & Galloway	2.7	15	3.5	15	7.8	15	31.8	17
East Ayrshire	2.8	14	3.7	14	8.6	14	35.6	14
East Lothian	1.2	27	1.6	27	3.3	27	12.9	27
Scottish Borders	1.8	23	2.4	22	5.3	22	20.5	23
<b>SCOTLAND</b>	<b>3.3</b>		<b>4.4</b>		<b>9.7</b>		<b>39.4</b>	

#### Notes to table

\* Ranking: 1 = highest rate; 32 = lowest rate.

Source: AC database, 2006.

2.16 The tables above (and the supporting tables in Appendix G) show the diversity in levels of local authority and housing association sheltered housing provision across Scotland. There does not appear to be any particularly obvious explanation for these differences. For example, it is not a simply question of reduced levels of provision in rural or remote areas. In the interviews we explored how sheltered housing provision had been developed to attempt to identify the underlying reasons for the diversity in levels of provision. Often respondents were unable to give clear reasons, as developments had been historic and the reasoning behind the developments mostly forgotten. It was clear, however, that local politics had an important influence on levels of provision, as well as the availability of funding at different times. There was also considerable diversity in levels of provision within local authority areas, often because local authorities' boundaries had changed, and a number of smaller authorities had become a single authority. Aberdeenshire is one such example, where provision in the north, south and central areas of the county are quite diverse, reflecting a time when the county was three different local authorities and sheltered housing had been developed in different ways in the three areas.

2.17 Whatever the historic reasons for sheltered housing developments, it seems that across Scotland older people will have (and have had) less or more choice depending on where they live. Similarly questions around demand for sheltered housing, or difficult to let sheltered housing, have to be seen in the context of a wide range in the levels of provision. For example, one respondent reported that a particular scheme was hard to let, but that there were four other sheltered housing schemes within a mile or so radius, all managed by different provider organisations, and inevitably this level of supply had an impact on demand.

#### Private sector provision

2.18 The main private sector provider of sheltered housing in Scotland is McCarthy and Stone<sup>7</sup>, who have provided 3,291 units in 65 developments. The dwellings are sold by McCarthy and Stone and each scheme is subsequently managed by a factoring service on behalf of the dwelling owners (e.g. Peverel or Trinity Factoring Services).

2.19 Schemes are built to high standards that exceed the Scottish Quality Housing Standards. McCarthy and Stone believe that most people move into their schemes because they need to due to their personal circumstances. A typical buyer is a widow in her mid 70s,

<sup>7</sup> The information on private sector provision was provided through personal communication with Steve Wiseman at McCarthy and Stone

although some buyers are couples. Although location remains a key factor affecting demand, concerns about personal security and safety (e.g. fear of crime and fear of falling) are the most important influencing factors. Company and companionship are other important elements. Sites for schemes are selected to be near local amenities. In most schemes about three-quarters of the properties are one bedroom flats. Their initial price is based on approximately 70% of the local price for a 3 bedroom semi-detached property, so that buyers can also release some equity through the move. Although it may take up to 30 months to sell all of the properties in a scheme, no developments have made a loss. Although build prices vary slightly from area to area, land prices are prohibitive in some areas. Subsequent property prices will be determined by the local market for such accommodation. Properties (to which various stipulations apply) can be sold on the open market or by the management company.

2.20 McCarthy and Stone believe that there will be a vast increase in demand for sheltered housing over the next 20 years as the baby boomers grow older. This increased demand will be across all types of provision, but may be strongest for private sector provision, due to the effect of increased owner occupation. However, other factors, such as people retiring younger and retired people acquiring property abroad wishing to maintain a secure home in the UK will also alter the market. Over the last few years customer expectations have also changed, with increasing numbers wanting ready access to satellite TV and broadband, as well as wanting smarter kitchens and bathrooms. At the other end of the age spectrum, there will be a bigger demand from owner occupiers for assisted living accommodation. A major challenge facing suppliers of private sector schemes will be sourcing sufficient land in the right areas, and planning restrictions will also be a significant barrier. The future supply of such housing will also shape the demands of potential purchasers.

2.21 Schemes' residents pay a service charge to the organisation that manages their scheme, which includes the services of a scheme manager (who may or may not be resident on site), a central call service that can be contacted in the event of an emergency, maintenance of and running costs for common areas and facilities (including gardens and grounds). The weekly service charges will depend on the size of the development<sup>8</sup>.

2.22 Although McCarthy and Stone do not currently provide any assisted living (their term for extra care housing) developments in Scotland, this may change, especially in areas where they built their early sheltered housing schemes, as many residents of these are becoming increasing old and frail. Demand for such accommodation is expected to increase considerably in the future. However, moving into this market will require building new schemes, with more room for facilities such as dining rooms and assisted bathrooms.

2.23 Although many people tend to spend all of their lives in one area, many who have moved away like to return to their roots when they retire or when they are no longer able to manage their previous home. This suggests that some future demand for privately provided sheltered housing will come from Scottish people who have worked and lived in England (or elsewhere) for much of their lives wishing to return to Scotland in their latter years. This 'external demand will also influence the amount of provision and its locations.

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<sup>8</sup> For a 45-unit development this will typically be £22-£25 for a 1 bedroom flat and £35-£37 for a 2 bedroom flat.

## Summary

2.24 This section has shown that:

- In total there are almost 1,200 sheltered housing schemes with about 36,000 dwellings and 145 extra care housing schemes with just over 3,700 dwellings;
- Overall, local authorities and housing associations each provide about 45% of dwellings in sheltered housing schemes, with the private sector responsible for the other 10%;
- Housing associations provide about 85% of extra care housing dwellings;
- Analysis by geographical clusters and by local authority shows considerable variation in the amounts and rates of provision by age band of sheltered housing and extra care housing in Scotland;
- In recent years the number of dwellings in sheltered housing schemes has fallen (to 38.0 per 1,000 aged 65 and over in 2005) while the number of extra care housing units has increased (to 4.5 per 1,000 aged over 65 in 2005), although geographical variations are considerable.

## **SECTION THREE: AGE, CONDITION AND SUITABILITY OF SHELTERED HOUSING PROVISION**

### **Overview**

3.1 This section addresses the age, type of dwelling and the condition of sheltered housing across local authority areas. The data for age and type of dwelling, which are taken from the EAC database, are presented for housing with wardens and extra care housing. Information about the condition, quality and suitability of sheltered housing stock is taken from responses to the electronic survey of providers, as are the estimates of the percentage of sheltered housing stock that has been or is in need of remodelling.

3.2 Supporting information is presented in Appendices G and H.

### **Age of Properties**

3.3 The EAC database includes data on the year of build for about three-quarters (76.6%) of housing with warden schemes and a higher proportion (86.9%) of extra care housing schemes. Although a relatively small number of these have subsequently been remodelled, these data give a good indication of the age profiles of schemes run by the different types of provider. Table 3.1 shows that:

- Most local authority schemes have been built since 1970;
- However, 14% of housing with warden schemes pre-date 1970, with at least one or two schemes being built in each earlier decade (especially the 1930s and 1960s);
- The majority of housing association schemes have been built since 1980, though there was also some activity in the 1970s;
- All private sector schemes have been built since 1980, with similar levels of activity in each subsequent decade;
- The 1970s and 1980s were the decades of greatest activity, suggesting that many schemes (and especially those built in the 1970s, unless they have recently been remodelled) may be of an outdated design and specification;
- Local authorities have built very few schemes since 2000; the main activity during this century has been private sector schemes and housing association extra care schemes;
- Most properties used for extra care have been built since the 1980s.

**Table 3.1: Date of build of housing with warden and extra care housing by type of provider for Scotland**

	Housing with warden			Extra care housing		
	Local authority	Housing association	Private sector	Local authority	Housing association	Private sector
SCOTLAND						
Pre 1900	1				8	
1900-1909	1					
1910-1919	2					
1920-1929	4					
1930-1939	11					
1940-1949	3					
1950-1959	9	1				
1960-1969	37	2			1	
1970-1979	148	52		3	8	
1980-1989	126	278	27	3	20	1
1990-1999	68	87	22	2	43	1
2000-	1	8	27	3	23	
TOTAL	411	428	76	11	103	2

Notes to table

Source: EAC database, 2006

3.4 Furthermore the EAC database shows that almost a fifth (19.2%) of local authority housing with warden schemes in the very urban and mainly urban areas of Northern Scotland were built prior to 1960.

### Types of Dwellings

3.5 Another proxy in the EAC database for the suitability of dwellings is their type. For example, bed sits are generally not considered to provide residents with sufficient space and are not usually suitable for occupancy by a couple. This can make them very hard to let in some places (though this may also be influenced by other factors, such as the location of the scheme and whether they are on the ground floor). One-bedroom flats are likely to provide more space, though they too may be rather cramped for two people to share. Many commentators suggest that 2 bedrooms are preferable, though these are likely to carry higher rents, which may not be affordable for some potential occupants.

3.6 Table 3.2 summarises the data for housing with warden dwellings for Scotland as a whole in the EAC database. Information is provided for almost all local authority and housing association dwellings (95.6% and 98.1%, respectively), though coverage is not quite so high (at 85.9%) for those provided by the private sector (for which high proportions of more specific detail are also often missing). Tables in Appendix H show the same information for each cluster group. The EAC database also includes similar information for Extra Care dwellings. The vast majority of these are one-bedroom flats, thus these data are not presented in tabular form.

3.7 Table 3.2 and Appendix H show that:

- Almost three-quarters (73.5%) of local authority housing with warden provision is in flats, compared with nine-tenths (90.4%) of housing association provision and almost all (99.7%) of dwellings provided by the private sector;



- Bungalows account for almost one quarter (23.0%) of local authority provision but less than a tenth (8.0%) of the dwellings provided by housing associations;
- Although data on the size of the dwellings is often missing, the data seem to indicate that bed sit flats are more commonly provided by housing associations (10.3% of flats) than by local authorities (7.8% of flats);
- Furthermore, given that housing associations provide more flats than local authorities, this means that housing associations are responsible for considerably more bed sits than local authorities;
- The vast majority of provision is in one-bedroom dwellings (for flats, bungalows and cottages/houses);
- Although there are relatively few two- or three-bedroom properties for older people, these are much more likely to be provided by local authorities than by housing associations;
- In Northern Scotland (where local authority provision greatly exceeds that of housing associations), local authorities are most likely to provide flats in urban areas, whilst more rural and remote areas have relatively high numbers of bungalows;
- However, just over one-third (34.8%) of local authority provision in Central Scotland's very urban areas is in bungalows;
- In Southern Scotland, housing associations provide a higher proportion of bungalows in urban than rural areas (34.8% compared with 27.1%), whilst the opposite is observed for housing associations (with 8.5% of dwellings in urban areas being bungalows, compared with 16.8% in rural areas)<sup>9</sup>.

**Table 3.2: Types and sizes of housing with warden dwellings in Scotland**

	Local authority		Housing association		Private sector	
<b>SCOTLAND (34,548)</b>						
<b>Total dwellings</b>	<b>15,267</b>		<b>16,121</b>		<b>3,160</b>	
	<b>No</b>	<b>%</b>	<b>No</b>	<b>%</b>	<b>No</b>	<b>%</b>
<b>Flats:</b>	11,226	73.50%	14,576	90.40%	3,150	99.70%
<i>Bed sit</i>	880	7.80%	1,507	10.30%	0	0.00%
<i>1 bed</i>	7,681	68.40%	9,316	63.90%	160	5.10%
<i>2 or 3 bed</i>	1,704	15.20%	1,148	7.90%	48	1.50%
<i>Missing</i>	961	8.60%	2,605	17.90%	2,940	93.30%
<b>Bungalows:</b>	3,513	23.00%	1,294	8.00%	0	0.00%
<i>Bed sit</i>	100	2.80%	27	2.10%	0	0.00%
<i>1 bed</i>	2,677	76.20%	925	71.50%	0	0.00%
<i>2 or 3 bed</i>	502	14.30%	156	12.10%	0	0.00%
<i>Missing</i>	234	6.70%	187	14.40%	0	0.00%
<b>Cottages/Houses:</b>	528	3.50%	251	1.60%	10	0.30%
<i>Bed sit</i>	31	5.90%	12	4.80%	0	0.00%
<i>1 bed</i>	483	83.00%	210	83.70%	10	100.00%
<i>2 or 3 bed</i>	59	11.10%	28	11.50%	0	0.00%

**Notes to table**

Source: EAC database, 2006.

3.8 Bedsits are often cited as the reason why sheltered housing is becoming less attractive to older people. However these data suggest that bedsits only account for a small proportion of the total sheltered housing stock. In the interviews, many respondents reported that many

<sup>9</sup> This observation may in part be due to the fact that two of the four rural Authorities in Southern Scotland have transferred their housing stock to housing associations.

schemes with bedsits had already been decommissioned (i.e. demolished or used for purposes other than sheltered housing), or had been adapted and extended.

3.9 Of interest are the comments from the manager of a scheme where many flats still had bedsitting rooms (with separate kitchen, shower room and large store cupboard). She felt that as the scheme had bedsits and was less attractive, those people who accepted the offer of accommodation in the scheme were quite often desperate and in crisis, consequently the resident group had greater and more complex needs than in other schemes which were more popular.

### **Tenure Codes**

3.10 The EAC database includes information on the main tenure code for all 1,195 housing with warden schemes and 145 extra care schemes. These data show that;

- All sheltered housing provided by local authorities is rented;
- Over 90% of provision by housing associations is also rented, although a few schemes (mainly in urban areas) include other forms of tenure (mainly freehold)<sup>10</sup>;
- Only one scheme provided by the private sector comprises properties for rent; almost all the other schemes comprise freehold properties;
- The pattern of tenure of extra care housing is very similar to that of housing with wardens, with the vast majority (95.1%) of occupants renting their homes from a local authority or housing association.

### **Condition, quality and suitability**

3.11 Respondents to the electronic questionnaires were asked to assess the physical condition of their sheltered housing and extra care housing stock ('very good', 'good', 'fair', and 'poor') and its suitability for older people ('very suitable', 'suitable', 'not very suitable', and 'unsuitable'). They were also asked to estimate the percentage of their stock of each type of housing meeting Scottish Quality Housing Standards. Their stated percentages for their sheltered housing and extra care housing were applied to their total numbers of dwellings of each type.<sup>11</sup> These data were then aggregated for all of the responding local authorities to give the total numbers of sheltered housing dwellings and extra care housing dwellings in each category. These data were then used to calculate the overall percentages for each type

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<sup>10</sup> It is recognised that some of the tenure codes included in the information from the EAC database do not apply (or no longer apply) in Scotland and are therefore unfamiliar (e.g. freehold). The information presented below simply summarises that provided in the EAC database. Some of this has been provided by English-based providers, who may have used terminology that is relevant in England. In particular, under freehold ownership, the freeholders own the property (including the land) outright. For leasehold, the building and the land are owned by the freeholder who grants someone else the right to use the property for a period of time by granting a lease to the lessee. This type of ownership is called leasehold and people buying flats would have bought a leasehold interest (although under a new tenure known as commonhold, which was introduced in 1994, it became possible for a flat in an interdependent property to effectively be held on a freehold basis).

<sup>11</sup> For example, if Council A has 200 dwellings and stated that 50% of these were in 'very good' physical condition, 25% were 'good', 15% were 'fair' and 10% 'poor', it therefore provides 100 dwellings in 'very good' physical condition, 50 in 'good' condition, 30 in 'fair' condition and 20 in 'poor' condition. Council B has 50 dwellings and stated that all of these were in 'good' condition. Therefore, overall, 40% (100 of the total of 250 dwellings) are 'very good', 40% (100 of the 250) are 'good', 12% (30 of the 250) are 'fair' and 8% (20 of the 250) are 'poor'.

of housing provided by local authorities and housing associations. The raw returns used in the analysis are presented in Appendix I.

### ***Physical Condition***

3.12 There were a range of replies received from the 15 Councils that answered this question. For example, one respondent felt that 100% of their sheltered housing provision was in ‘very good’ physical condition, whilst another felt that 40% of their sheltered housing was ‘good’ and the other 60% only ‘fair’.

3.13 Table 3.3 shows the percentages of sheltered housing and extra care housing provided by local authorities classified as being in ‘very good’, ‘good’, ‘fair’, or ‘poor’ condition. It shows that, overall, just over two-fifths (21.8%) of sheltered housing was deemed to be in ‘very good’ physical condition, whilst slightly more than half (51.7%) is in ‘good’ physical condition. Almost a quarter (24.8%) is in ‘fair’ physical condition and slightly fewer than 2 per 100 (1.7%) dwellings are in ‘poor’ physical condition. In contrast, a higher proportion of extra care housing provided by local authorities is considered to be in ‘very good’ or ‘good’ physical condition. For example, almost two-thirds (65.5%) of such dwellings are in ‘very good’ physical condition and more than a quarter (26.8%) are in ‘good’ physical condition. Fewer than one-in-ten such dwellings (7.7%) are in ‘fair’ physical condition and none are considered to be in ‘poor’ condition.

**Table 3.3: Physical condition of sheltered housing and extra care housing provided by local authorities in Scotland – percentage shares (aggregated and weighted data)**

	Sheltered housing	Extra care housing
Number of Respondents	15	6
Very Good	21.8%	65.5%
Good	51.7%	26.8%
Fair	24.8%	7.7%
Poor	1.7%	0.0%
Total	100.0%	100.0%

3.14 Table 3.4 show the percentages of sheltered and extra care housing provided by housing associations classified as being in ‘very good’, ‘good’, ‘fair’ or ‘poor’ condition. These data show that a higher proportion of housing association provision than local authority provision is either ‘good’ or ‘very good’ in terms of its physical condition. For example, 63.1% of sheltered housing provided by housing associations was considered to be in “very good” condition compared with only 21.8% of local authority provision.

**Table 3.4: physical condition of sheltered housing and extra care housing provided by housing associations in Scotland – percentage shares (aggregated and weighted data)**

	Sheltered housing	Extra care housing
Number of Respondents	33	10
Very Good	63.1%	85.1%
Good	29.0%	9.3%
Fair	5.5%	5.6%
Poor	2.4%	0.1%
Total	100.0%	100.0%

### ***Scottish Quality Housing Standards***

3.15 Thirteen local authority respondents provided data about the percentage of their sheltered housing stock that meets Scottish Quality Housing (SQH) Standards and six provided this information for their extra care housing provision. Thirty of the housing associations provided similar data for their sheltered housing stock and nine for their extra care housing. When these data were aggregated and weighted, they showed that overall three-fifths (60.6%) of sheltered housing and one in ten (9.3%) of extra care dwellings provided by local authorities meets the SQH Standards. For housing associations, 65.2% of sheltered housing, and 92.2% of extra care housing meet the SQH Standards. Half of the housing associations (15/30) reported 100% compliance for their sheltered housing stock, compared with slightly less than one-third (4/13) of local authorities. The raw data show the wide range of responses (see Appendix I).

3.16 The overall impression is that a higher proportion of sheltered housing provided by housing associations meets the Scottish Quality Housing Standards (SQHS) but that the standards are met by almost identical proportions of council-provided and housing association-provided extra care housing. The housing association questionnaire also asked respondents what proportion of their stock would meet these standards after completion of the Standard Delivery Plan. Five respondents indicated that varying percentages of their sheltered housing stock (1%, 2%, 5%, 28% and 100%) would still not meet the standards and one respondent stated that 10% of their extra care housing stock would be sub-standard. However, overall 98.0% of sheltered housing and 99.8% of extra care housing provided by housing associations are expected to meet the standards after the completion of their Standard Delivery Plan. One respondent, with five schemes and just over 400 sheltered dwellings, indicated that they would require external funding of £5 million to achieve the Plan.

3.17 It should also be noted that McCarthy & Stone (the main private sector provider) developments are built to standards that exceed the Scottish Quality Housing Standards.

### ***Suitability for Older People***

3.18 The above analysis has shown that council-provided extra care housing tends to be in better physical condition than their sheltered housing stock and that a higher proportion of their extra care housing meets Scottish Quality Housing Standards. This finding is reinforced by the respondents' assessments of the suitability of their stocks of such housing for older people. Respondents were asked to rate their stock as 'very suitable', 'suitable', 'not very suitable', and 'unsuitable' for older people.

3.19 The aggregated and weighted data presented in Table 3.5 show that, overall, just under a quarter (23.8%) of local authority provided sheltered housing stock is 'very suitable' for older people and almost all of the rest is 'suitable'. However, about three-in-a-hundred such dwellings are 'not very suitable' and a further three-in-a-hundred are 'unsuitable'. In contrast, four-fifths (80.0%) of council-provided extra care housing is deemed to be 'very suitable' for older people, and the remaining one-fifth (20.0%) is 'suitable'.

**Table 3.5: Suitability for older people of sheltered housing and extra care housing provided by local authorities in Scotland – percentage shares (aggregated and weighted data)**

	<b>Sheltered housing</b>	<b>Extra care housing</b>
Number of Respondents	14	7
Very suitable	23.8%	80.0%
Suitable	69.8%	20.0%
Not very suitable	3.3%	0.0%
Unsuitable	3.1%	0.0%
Total	100.0%	100.0%

3.20 Respondents to the survey were asked to indicate the main factors that made their stock not very suitable or unsuitable. The three most frequently cited reasons were:

- Bedsit accommodation;
- Dwellings on upper floors with no lift;
- Being located in a hilly area (sometimes with steps and/or narrow paths).

Other reasons included:

- Inadequate provision of communal facilities;
- Aged heating systems;
- Poor kitchen facilities;
- Not meeting current electrical standards (e.g. regarding the number of sockets).

3.21 One respondent stated that some of their sheltered housing was not purpose-built and is in “tenemental (sic) properties or main door flats with no common facilities and unsuitable for people with mobility problems”.

3.22 Housing association respondents were asked about the suitability of their provision with respect to space standards and access. Their responses are summarised in Tables 3.6 and 3.7 (with disaggregated data presented in Appendix I). The overall impressions are that stock provided by housing associations is more suitable for older people than that provided by local authorities and that extra housing is generally more appropriate than sheltered housing. Similar reasons for unsuitability were cited by housing association respondents.

**Table 3.6: Suitability for older people with regard to space standards of housing association-provided sheltered housing and extra care housing in Scotland – percentage shares (aggregated and weighted data)**

	<b>Sheltered housing</b>	<b>Extra care housing</b>
Number of Respondents	30	10
Very suitable	46.3%	50.9%
Suitable	32.0%	30.4%
Not very suitable	20.0%	15.4%
Unsuitable	1.7%	3.3%
Total	100.0%	100.0%

**Table 3.7: Suitability for older people with regard to access of housing association-provided sheltered housing and extra care housing in Scotland – percentage shares (aggregated and weighted data)**

	<b>Sheltered housing</b>	<b>Extra care housing</b>
Number of Respondents	29	10
Very suitable	53.5%	75.7%
Suitable	21.0%	17.0%
Not very suitable	19.0%	4.0%
Unsuitable	6.5%	3.3%
Total	100.0%	100.0%

## **Viability**

3.23 Half of the local authorities felt that at least some of their sheltered housing stock is non-viable, with the percentage ranging from 2% to 30%. This compares with a quarter of housing associations feeling that some of their sheltered housing is non-viable, with a range of 5% to 28% for eight of the nine respondents and 100% for the ninth respondent. Reasons given included:

- Poor physical condition;
- Lack of communal facilities;
- Inappropriate location
- Dwellings too small;
- Lack of lift;
- Poor energy efficiency;
- Lack of demand (which will be linked to the above factors);
- Inappropriateness for people with disabilities.

3.24 Examples were also given of sheltered housing schemes linked to a care home becoming non-viable on closure of the care home.

3.25 Several alternative uses were being made of non-viable stock, including:

- Demolition and clearance of site, which would then be sold on the open market;
- Demolition and site redevelopment for extra care housing;
- Use as mainstream or amenity housing.

## **Remodelling**

3.26 The electronic questionnaire asked providers whether any of their sheltered housing stock was in need of remodelling.

### ***Responses from local authorities***

3.27 Just over two-thirds (68.8%) of the local authority respondents felt that at least some of their sheltered housing stock needed remodelling, with the proportion of stock in need of this ranging from 15% to 100% (with most identifying around a quarter to a third). No respondents reported that extra care provision needed remodelling. Four local authorities had undertaken some remodelling in the past five years and two were currently undertaking such work. The remodelling takes (or will take) a variety of forms, including:

- Conversion to housing with care/extra care housing;
- Possible development of another housing with care complex;
- Replacing a residential unit operated by Social Work with new amenity housing;

- Converting bed sits with one- or two-bedroom flats;
- General modernisation, refurbishment and upgrading (e.g. new kitchens and bathrooms; installing level-access showers; improved heating);
- Bringing accommodation up to SHQS (by 2015);
- Additional provision of lifts and common rooms.

3.28 Costs are estimated as ranging from £100,000 to £2.8 million, depending upon the work undertaken. Most local authorities were unable to identify the impact of their remodelling on their revenue, as it is generally too early for them to identify this.

### ***Responses from Housing Associations***

3.29 Almost half (44.4%) of the housing association respondents felt that some of their sheltered housing stock is in need of remodelling. The proportion of stock requiring remodelling generally ranged from 10% to 30%, although four respondents felt that all of their sheltered housing stock required remodelling. In addition, seven respondents thought that some or all of their extra care housing needed remodelling.

3.30 Ten respondents (27.8%) had undertaken some remodelling in the last five years and one was currently undertaking some remodelling. The completed work included:

- Demolishing former sheltered housing units and replacing them with extra care provision;
- Increasing communal areas and dining space;
- Refitting bathrooms and kitchens;
- Better guest room facilities;
- Upgrading alarm equipment to enable remote inactivity monitoring by a call centre and removing the warden service from some developments;
- Demolishing former sheltered housing units and replacing them with amenity and general needs housing;
- Converting studio apartments to one- or two-bedroom flats;
- Converting former warden accommodation within schemes to provide an additional rented flat and a dining area.

3.31 The following two quotations give examples of the remodelling undertaken by two of the housing association respondents.

*The five very sheltered complexes were created from the redevelopment of sheltered stock. This involved extensive modernisation of all common areas (corridors, stairwells, common rooms involving design for dementia), lift installation, creation of additional common areas (e.g. conservatories), assisted bathing areas and laundries.*

*In 2003 we created supported housing models in one new build development, and upgraded the sheltered service to 24/7 support in 4 developments. We extended the sheltered housing support hours in 4 other developments. We introduced floating support in 9 developments. We opened a new build in October 2006 as very sheltered housing but there is no sleepover as the Council provides a 24/7 mobile response unit. We are about to start a care at home contract by expanding the staff team in one of the supported housing developments, and we are negotiating to make similar changes with three other Councils. Staff now do not have to be residential and we have taken the opportunity to convert these properties into communal facilities and/or staff*

*team facilities. We have created kitchens and dining rooms for a meal service, provided assisted bathrooms, and staff sleepover accommodation. We are currently investing in similar conversion but also adding a rentable flat. This development will provide care at home in addition to the supported housing service. In some developments we are increasing the dining rooms and upgrading the kitchens to provide for the expanding meal service. Where it is not cost effective to convert, we utilise ex-staff houses as rentable flats for general needs tenancies or offer tenancies to people who have special needs and require 24/7 support provided by the Council.*

3.32 In addition, nine respondents are planning to undertake some remodelling in the near future. Some are considering replacing bedsits with one bedroom flats. One is planning to replace 14 sheltered dwellings with 12 amenity and 5 general needs dwellings. Another has many potential developments under consideration, as illustrated by the following quotation:

*We are negotiating with one Council at their request to probably close a care home and convert two sheltered developments to extra care housing with care at home services to extend into the local community. Another Council has proposed that we convert one of the two developments in their area to amenity housing and the other to 24/7 extra care housing. We will be taking a critical look at possible causes for the low demand properties and considering how best to change the trend, e.g. reducing the number of bed-sits which will result in fewer lettable units. Future re-modelling will also take into account the potential for full cost recovery. If this is not supported by Council revenue funding then we will reflect on whether we wish to stay in that particular housing support service.*

3.33 Estimated conversion costs depended upon the nature of the work undertaken, but one respondent gave a cost of £4,500 per unit and another stated £25,000 per unit. Another provided new build costs of £1.1 million for replacing 12 sheltered housing units with 12 very sheltered units and £1.7 million for converting a 14 unit sheltered housing complex into 17 amenity and general needs units. One respondent calculated that investing in alarm equipment and introducing staff restructuring and new work practices (e.g. changing weekend working practices) had produced savings in staff time of £11,000 over a year. Another reduced on-site warden provision to full-time (7 hours per day) support and provided links to a community alarm service, enabling them to reduce their funding shortfall of about £69,000 by almost £48,500, thus leaving a gap of about £20,500.

3.34 When asked about the impact of remodelling undertaken to date on their revenue, two respondents stated that it had increased by a large amount, two that it had increased by a small amount and five that it had stayed about the same. Another pointed that although their revenue had increased, so had their costs. Over time their increased staff costs were not being matched by increased Supporting People funds. Most of those planning to undertake some remodelling in the near future thought that their revenue would either stay the same (four of the nine respondents) or increase by a small amount (four of the nine respondents), although one respondent thought revenue would decrease by a small amount.

## **Summary**

3.35 This section has shown that:

- Most local authority sheltered housing schemes have been built since 1970 and most housing association schemes since the 1980s;



- Most extra care housing has been built since the 1990s;
- Most new schemes provided since 2000 have been built by the private sector and by housing associations;
- The vast majority of accommodation is in one-bedroom flats; bedsits only account for a small (and decreasing) proportion of stock;
- Almost all accommodation provided by local authorities and housing associations is rented; almost all private sector provision is owner occupied;
- Considerable variations exist in the condition, quality and suitability (e.g. in terms of space standards and accessibility) of accommodation;
- In general, extra care housing tends to perform better against these criteria than sheltered housing and housing association provision is superior to local authority stock;
- However, there is not always a close correlation between dwelling age and suitability, as some older accommodation performs well and some newer schemes (including some extra care housing) are relatively poor;
- In some areas considerable (though varying) proportions of stock are felt to be non-viable for a variety of reasons, including poor condition, inappropriate location, lack of space and poor accessibility;
- Some non-viable stock is being demolished or remodelled and converted for other uses (including extra care accommodation);
- Non-viability and remodelling decisions are locally-determined and will in part depend on other forms of local housing provision and strategies for providing care and support to older people; no consistent patterns or cost estimates emerged from the analysis.

## SECTION FOUR: DEMAND FOR SHELTERED HOUSING

### Overview

4.1 This section addresses questions regarding the demand for sheltered housing. It draws on providers' responses to the electronic questionnaires, information from the EAC database, and the interviews with key informants. It includes information on current demand for various types of accommodation, including the reported number of applicants per vacancy and waiting times for accommodation. It also explores anticipated changes in demand in the future.

### Demand

#### *Meeting demand*

4.2 The electronic survey asked respondents to estimate what proportions of their stock of sheltered housing and extra care housing faced low demand, adequately met demand, and were in high demand. Not all respondents answered this question and some gave values that did not sum to 100% for the sheltered housing category. Once again, the respondents gave a wide range of responses. Some reported that they have few or no dwellings in low demand, whilst others have none in high demand.

4.3 When the raw data have been aggregated and weighted, they show that about two-fifths (39.4%) of local authority sheltered housing stock is in high demand and a quarter (24.5%) is in low demand (Table 4.1). About one-third (34.4%) of local authority extra care housing is in high demand and three-fifths (60.5%) adequately meets demand. Only about one-in-twenty (5.1%) of such dwellings are in low demand. The raw data are presented in Appendix J.

**Table 4.1: Demand for local authority sheltered housing and extra care housing in Scotland – percentage shares (aggregated and weighted data)**

	Sheltered housing	Extra care housing
Number of Respondents	14	4
High demand	39.4%	34.4%
Adequately meets demand	36.1%	60.5%
Low demand	24.5%	5.1%
Total	100.0%	100.0%

4.4 In comparison (see Table 4.2 below and also Appendix J), housing association respondents reported that 28% of their sheltered housing stock was in high demand and 48% adequately met demand, with a similar proportion of sheltered housing to that for local authorities (about a quarter) in low demand. The differences between the local authority and housing association respondents' reports of demand for extra care housing are more striking. The aggregated and weighted data indicate that only 8.9% of housing association extra care housing is in high demand compared with 34.4% of local authority extra care housing. For housing associations, 56.2% of extra care housing adequately meets demand (compared with 60.5% of local authority extra care housing), and 35.4% is in low demand compared with only 5.1% of local authority extra care housing.

**Table 4.2: Demand for housing association-provided sheltered housing and extra care housing in Scotland – percentage shares (aggregated and weighted data)**

	<b>Sheltered housing</b>	<b>Extra care housing</b>
Number of Respondents	32	9
High demand	28.0%	8.4%
Adequately meets demand	48.0%	56.2%
Low demand	24.0%	35.4%
Total	100.0%	100.0%

4.5 These findings on extra care housing should be viewed with some caution given the small number of both local authority and housing association respondents and their relatively low levels of provision. Nevertheless these figures do bring into question the common perception that extra care or very sheltered housing is the way forward in addressing the housing needs of older people in Scotland.

4.6 With regard to private sector provision, according to a representative from McCarthy & Stone, location used to be a key factor affecting demand, although concerns about personal security and safety (e.g. fear of crime and fear of falling) are now the most important influencing factors. Company and companionship are other important elements. A typical buyer is a widow in her mid 70's. Development sites are chosen based on the number of people on the electoral roll who are owner occupiers aged 65 and above within a given radius of the site. Sites for schemes are selected to be near local amenities. In most schemes about three-quarters of the properties are one bedroom flats. Their initial price is based on 70% of the local price for a 3 bedroom semi-detached property, so that buyers can also release some equity through the move. Although it may take up to 30 months to sell all of the properties in a scheme, no developments have made a loss.

4.7 The EAC database also includes information about the popularity of schemes, which are described as being “popular”, “average”, “not so popular” and “hard to let/sell”. Table 4.3 summarises the data, but also shows that the popularity of about half of all schemes is not known. It shows that relatively few schemes (e.g. 5.5% of schemes with a warden) are described as being “not so popular” or “hard to let/sell”. However, given that the EAC database is primarily designed to provide prospective tenants and owners of sheltered housing with information about potential schemes, it is possible that negative information was not included in some of the returns. Although these data are available for each local authority, the high and varying proportions of “don't knows” make comparisons at this level meaningless.

**Table 4.3: Popularity of schemes**

	<b>Housing with warden</b>		<b>Extra care housing</b>	
	<b>Number</b>	<b>%</b>	<b>Number</b>	<b>%</b>
Popular	349	29.0%	33	22.6%
Average	238	19.8%	21	14.4%
Not so popular	47	3.9%	2	1.4%
Hard to let/sell	19	1.6%	1	0.7%
Not known	550	45.7%	89	61.0%
Total	1,203	100.0%	146	100.0%

**Notes to table**

Source: EAC database, 2006.

4.8 The EAC database also includes some information for each scheme about aspects such as site accessibility. Although the data suggest that the unpopular schemes (i.e. ‘not so popular’ and ‘hard to let/sell’) are less accessible than all schemes taken together, accessibility does not seem to be an issue for many unpopular schemes. For example, getting to the sites of unpopular schemes appears to be “easy” or “manageable” for about two-thirds (66.2%) of less mobile people. However, the high proportions of missing data, especially across all schemes, mean that these data should be viewed with some caution, although the broad message – that accessible schemes can be unpopular for other reasons – is likely to be valid.

### **Applicants per vacancy and average waiting times**

4.9 Respondents to the electronic questionnaires were asked about the average number of applicants they have for each vacancy and for the average number of months older people have to wait for a property. Their replies are summarised in Tables 4.4 and 4.5, which show that there are more applicants per vacancy for sheltered housing than for extra care housing and that older people generally wait much longer for a sheltered housing vacancy than for extra care housing. The data also show that the median (i.e. middle) and mode (most prevalent) values are less than the mean value, suggesting that the mean value is skewed upwards by a small number of high values. Therefore, for example, although the mean wait for older people for local authority sheltered housing is almost two years (22.2 months), half of the respondents have a waiting time of 17 weeks or less for such housing and 12 months is the most frequently cited waiting time. However, it should also be noted that the following sub-section includes some material from the respondents expressing the need for caution when trying to link waiting lists with demand and/or housing need.

4.10 The data provided by local authorities and housing associations for sheltered housing are similar. Although data for extra care housing should be treated with some caution due to the small numbers of responses, the responses received suggest that there are considerably fewer applicants per vacancy and that waits for extra care housing are much shorter.

**Table 4.4: Numbers of applicants per vacancy and months older people wait for local authority vacancies**

	<b>Sheltered housing</b>	<b>Extra care housing</b>
<b>Applicants per vacancy:</b>		
Number of Respondents	16	6
Mean	13.3	4.7
Median	4	2
Mode	3	1
Range	1 - 77	0 – 17
<b>Months older people wait for vacancy:</b>		
Number of Respondents	11	5
Mean	22.2	6
Median	17	6
Mode	12	6
Range	0 - 17	1 – 72

**Table 4.5: Numbers of applicants per vacancy and months older people wait for housing association vacancies**

	Sheltered housing	Extra care housing
<b>Applicants per Vacancy:</b>		
Number of Respondents	30	8
Mean	15.0	1.0
Median	10	1
Mode	2	0
Range	0 - 60	0 - 3
<b>Months Older People Wait for Vacancy:</b>		
Number of Respondents	23	5
Mean	16.6	1.2
Median	12	0
Mode	6	0
Range	2 - 48	0 - 5

### Factors influencing current demand

4.11 Respondents to the survey stated that the demand for sheltered housing is influenced by a wide variety of factors, relating to the schemes themselves, and also to the individual circumstances of applicants. Factors relating to the schemes included:

- Their size (e.g. bedsits/studio apartments are generally unpopular, and many people want more than one bedroom);
- Their location:
- Hilly areas are less popular;
- Distance from shops, transport and amenities;
- Being located in a ‘good’ or ‘safe’ neighbourhood;
- Age and design (new, purpose-built complexes tend to be popular);
- Local demographic profile (very rural schemes may not be popular);
- Availability of a lift for non-ground floor properties;
- Lack of alternative options;
- Local allocations policies;
- Warden resident on site.

4.12 Factors relating to individual circumstances included:

- Proximity to family and other support networks;
- Medical and social needs;
- Changing aspiration of older people;
- Costs and financial situation of applicants.

4.13 Apart from these commonly reported factors, other influences on demand were highlighted by respondents as illustrated by some of the more specific (and sometimes contradictory) comments from survey respondents presented below. The costs and service charges were often highlighted as being a disincentive to prospective applicants, particularly for extra care housing. Similarly increasing options for home care were felt to make sheltered housing a less attractive option.

*“Factors contributing to local demand are costs, especially in the extra care housing where service charges are high”.*

*“Applicants who have purchased their house can be reluctant to move to sheltered housing due to service charge and housing support charge”.*

*“Charging levels can put some applicants off, especially if they have to self-fund support costs”.*

*“A significant issue that has recently developed is that the choice of sheltered housing is becoming less popular due to additional charges associated with Supporting People”.*

*“The main factor [influencing demand] is that people increasingly wish to be supported in their existing homes and that [our] Council has developed a range of services to make this possible for all levels of care need in most types of mainstream accommodation”.*

4.14 Some respondents cautioned about the use of waiting lists as a measure of demand, as people often applied for sheltered housing as an insurance policy well before they actually needed or intended to move. Conversely others highlighted that rather than being a planned choice, as had formerly been the case, many applicants were often seeking sheltered housing at a crisis point (a view supported by many of the scheme managers that we met).

*“All of our sheltered housing generally remains popular..... Despite this, we have high refusal rates of offers, especially from owners. We have significant amounts of owner occupiers on our waiting lists as an “insurance policy”. Additionally, our allocations policy allows waiting time priority so applicants often queue for sheltered housing from a young age. Hence the figures above are pretty meaningless as an indicator of housing need. From local research we know that many applicants are looking more for a sense of security from sheltered housing as opposed to housing support/care. Many do not call on the services of the warden”.*

*“There is also a perception that sheltered housing is something that is only taken up at the point of crisis rather than as a long term housing plan”.*

*“Very sheltered housing waiting lists can be small or non-existent, but this type of housing tends to cater for a particular client group who may be in hospital or whose health/independence suddenly changes. There is more immediacy of need from this group, hence a growing waiting list is unlikely”.*

*“Demand varies a great deal depending on the type of community in which the development is situated (i.e. rural/urban), the type of accommodation on offer (bedsits/one bedroom etc) and the location (i.e. how close to shops, buses etc). If an applicant is not being too specific about any of these factors, but simply wants or needs the support sheltered housing can offer, they may be able to be housed within days or weeks. If they are choosing one particular development that is more popular, they will have a longer wait depending on their priority points. Also, we are unable to say how many applicants there are for each vacancy. Our allocation is needs/points based and when a vacancy arises we take six applications from the top of the list (i.e. those with the most points) and arrange to visit them. At the visit we establish that they have been awarded the correct points and that their need*

*matches the type of property available (i.e. whether they can manage stairs or not in developments where there is no lift). We also take the opportunity to explain what the sheltered housing support service offers and how much it costs, and give the applicant the opportunity to ask questions about the service”.*

4.15 Interviews with key informants from local authorities and housing associations echoed the points made above. They felt that increased charges for services made sheltered housing less attractive. Many noted that the charges for extra care housing could be prohibitive particularly for those who were self funding. In some instances, they provided examples of recently developed very sheltered housing that had proved hard to let, or perhaps could be more accurately described as slow to let because of the high costs to residents. Moreover they noted that whereas previously tenants had paid “rent” which included all charges, now a number of different charges for different elements of the services were made, and residents and prospective residents were not always clear why these charges were being levied or what they got for their money. They also noted that the reduction in the warden service - which had been what attracted many people to sheltered housing - was having an adverse impact on demand for sheltered housing.

4.16 Key informants also felt that increased provision of home care services made sheltered housing a less popular option. As a consequence, applicants for sheltered housing had often reached the point when they could no longer be supported in their own homes, and often had complex needs. The expectations of residents, their families, and sometimes health and social care professionals about the amount of support on offer in sheltered housing were often unrealistic. Many noted that health and social care professionals often assumed that sheltered housing could offer considerably more support than was the case. It was seen as a step between living in the community, and moving into residential care.

4.17 Although many key informants spoke about the increasing needs of some applicants, they also noted that where schemes had voids that were difficult to fill, applications were often accepted from people who would not usually qualify for sheltered housing – for example, older (and sometimes younger) adults who were primarily looking for housing rather than for sheltered housing. Such tenants often did not need the housing support services on offer in the schemes, and in some cases were reluctant to pay for these support services.

4.18 However, informants also stressed that it was difficult to generalise about demand, and the causes for the popularity (or lack of popularity) of different schemes. Many cited examples of schemes which remained popular despite being in a poor location or remote location, or offering relatively small accommodation. Similarly, relatively new schemes or schemes in apparently good locations could sometimes be less popular than older, less well placed schemes. Informants felt that often the reputation of the scheme was a key influence on demand.

### **Anticipated changes in future demand**

4.19 Respondents to the survey were asked for their views on how the demand for sheltered housing and extra care housing provided by different agencies was likely to change over the next 5 – 10 years. Expectations regarding the demand for sheltered housing are summarised in Tables 4.6a and 4.6b and those regarding extra care are presented in Tables 4.7a and 4.7b. These tables show a wide range of views.

4.20 For example, Table 4.6a shows that about a quarter (23.5%) of local authority respondents think that there will be a large increase in the demand for council-provided sheltered housing, which is the same as the proportion of respondents predicting a large decrease in demand for this type of provision. Overall, local authority respondents expect demand for housing association sheltered housing provision to increase by slightly more than that provided by councils (with 73.3% of local authority respondents predicting a small or large increase in demand for housing association stock compared with 48.8% expecting an increase in the demand for local authority provision).

4.21 Table 4.6b shows that housing association respondents also expect that demand for their sheltered housing will increase by more than that for council-provided stock (with 66.6% expecting an increase in demand for housing association stock compared with 58.3% expecting an increase in demand for local authority provision).

4.22 Increased demand for private sector provision is anticipated by just under half (44.2%) of local authority respondents (although 15.2% expect this to decrease). Slightly less than a third (30.8%) of these respondents expect the demand for shared ownership/shared equity sheltered housing provision to increase (and none expect a decrease). Over half (57.2%) of housing association respondents expect demand for private sector provision to increase, although some (14.3%) anticipate a small decrease. Almost half (47.8%) of these respondents expect an increase in demand for shared ownership/shared equity.

4.23 Tables 4.7a and 4.7b show that most local authority respondents expect the demand for extra care housing either to increase or to stay the same, whereas some housing association respondents anticipate falling demand for this type of provision in the future (although the overall view is that demand will increase).

**Table 4.6a: Anticipated changes in demand for various types of sheltered housing provision over the next 5 – 10 years: local authority respondents**

	Sample size	Increase		Stay the same	Decrease	
		Large	Small		Small	Large
Rented from/managed by Council	17	23.5%	35.3%	17.6%	0.0%	23.5%
Rented from/managed by HA	15	13.3%	60.0%	6.7%	0.0%	20.0%
Rented from/managed by other organisations	11	0.0%	18.1%	63.6%	9.1%	9.1%
Provided by private sector	13	7.7%	38.5%	38.5%	7.7%	7.7%
Shared ownership/shared equity	13	7.7%	23.1%	69.2%	0.0%	0.0%

**Table 4.6b: Anticipated changes in demand for various types of sheltered housing provision over the next 5 – 10 years: housing association respondents**

	Sample size	Increase		Stay the same	Decrease	
		Large	Small		Small	Large
Rented from/managed by Council	24	20.8%	37.5%	12.5%	20.8%	8.3%
Rented from/managed by HA	30	23.3%	43.3%	27.3%	52.4%	34.8%
Rented from/managed by other organisations	22	9.1%	27.3%	40.9%	22.7%	0.0%
Provided by private sector	21	4.8%	52.4%	28.6%	14.3%	0.0%
Shared ownership/shared equity	23	13.0%	34.8%	43.5%	8.7%	0.0%



**Table 4.7a: Anticipated changes in demand for various types of extra care housing provision over the next 5 – 10 years: local authority respondents**

	Sample size	Increase		Stay the same	Decrease	
		Large	Small		Small	Large
Rented from/managed by Council	12	33.3%	41.7%	25.0%	0.0%	0.0%
Rented from/managed by HA	12	33.3%	41.7%	16.7%	8.3%	0.0%
Rented from/managed by other organisations	9	0.0%	33.3%	66.7%	0.0%	0.0%
Provided by private sector	10	10.0%	30.0%	50.0%	10.0%	0.0%
Shared ownership/shared equity	10	10.0%	20.0%	70.0%	0.0%	0.0%

**Table 4.7b: Anticipated changes in demand for various types of extra care housing provision over the next 5 – 10 years: housing association respondents**

	Sample size	Increase		Stay the same	Decrease	
		Large	Small		Small	Large
Rented from/managed by Council	16	37.5%	31.3%	12.5%	6.3%	12.5%
Rented from/managed by HA	19	52.6%	26.3%	5.3%	5.3%	10.5%
Rented from/managed by other organisations	16	12.5%	31.3%	43.8%	6.3%	6.3%
Provided by private sector	17	17.6%	41.2%	23.5%	11.8%	5.9%
Shared ownership/shared equity	17	11.8%	47.1%	35.3%	5.9%	0.0%

4.24 Respondents provided a number of comments about the influences on future demand for sheltered housing. Such influences were related to changes in the provision itself, such as the changes in warden services, and increases in charges, and also external factors such as other types of services development (particularly increasing home care and the capacity of social services to meet increasing demands for home care services, and use of assistive technologies), and the increase in numbers of home owners. Some assumed that older home owners will not be so willing to rent, particularly if support services continue to be reduced. However others noted the rising number of applications from older homeowners particularly those who had bought under the Right to Buy, and felt that tenure choice in the future would be difficult to predict. It was clear that many key factors that are already perceived to be impacting on demand will continue to influence demand in the future. Affordability was often highlighted as a key issue. Similarly, the increasing opportunities for people to be cared for at home and to have their homes adapted were seen to be already influencing demand. The comments also highlighted the complex interplay of various factors.

## Summary

4.25 This section has shown that:

- Demand for sheltered housing is very variable and although several potential factors can be identified (e.g. flats not bedsits, location) they do not apply consistently;
- Although data exist on numbers of applicants per vacancy and waiting times, these do not necessarily reflect true demand or need;
- Some extra care schemes seem to be in low demand; this may be because moves into such accommodation tend to be through necessity rather than a planned choice;
- Charges for extra care are seen as being very high, which will also dampen demand, even if there is an assessed need for such accommodation;
- Schemes with good local reputations (often due to their wardens) are generally popular, irrespective of their attributes;

- In general, strategic and service managers anticipate that demand for sheltered housing and extra care housing will increase over the next 5-10 years, although no consistent pattern emerges;
- Overall, demand for accommodation provided by the private sector is expected to increase (e.g. due to increased numbers of owner occupiers), though again this was not the view of all respondents.

## SECTION FIVE: SERVICES PROVIDED AND CHARGES

### Overview

5.1 This section presents information on services received and the costs paid by local authority and housing association tenants living in sheltered housing and extra care housing.

### Service Provision

5.2 Respondents to the electronic questionnaire were asked to identify which services were available in all or some of their schemes. Their responses for sheltered housing are shown in Tables 5.1a and 5.1b and those for extra care housing in Tables 5.2a and 5.2b.

5.3 It is not possible to tell from the questionnaires whether an unanswered question has not been completed because it does not apply in the respondent's area or because the respondent chose not to (or was unable to) answer the question. Therefore the responses should be interpreted with some caution. Nevertheless, Table 5.1a suggests that all most all council-provided sheltered housing includes a community alarm service, though this may not be run by the local authority itself. Almost all schemes include some form of warden support, though their availability varies. A few councils still seem to have some sheltered housing where the resident warden is available on a 24/7 basis. Similar patterns are seen in Table 5.1b for schemes provided by housing associations. A small number of schemes include regular or optional meals; these may be part of a scheme that also includes extra care provision. A few council-provided schemes have on-site care teams available during day time only or all of the time. These schemes may be linked to a local residential/care home, with tenants being able to share their facilities and staff.

**Table 5.1a: Service provision in council-provided sheltered housing**

	All schemes		Some schemes	
	Number	%*	Number	%*
Resident warden <sup>12</sup> available 24/7	2	10.5%	4	21.5%
Resident warden working fixed hours	4	21.5%	7	36.8%
Full-time non-resident <sup>13</sup> warden	5	26.3%	7	36.8%
Part-time non-resident warden	2	10.5%	7	36.8%
Council-run community alarm service	14	73.7%	4	21.5%
Externally-run community alarm service	3	15.8%	0	0.0%
Optional meals ("pay as you go")	1	5.3%	1	5.3%
Regular meals (covered by weekly charge)	1	5.3%	0	0.0%
On-site care team (24 hours)	2	10.5%	0	0.0%
On-site care team (day time only)	0	0.0%	2	10.5%

#### Notes to table

\* based on responses from 19 Councils

<sup>12</sup> The questionnaire defined resident wardens as living on site. They may always be available to residents (i.e. available 24/7) or they may only work fixed hours (e.g. Monday to Friday, 9am – 5pm). They may also cover other sheltered housing schemes during their working hours.

<sup>13</sup> A full-time non-resident warden works 'full time' fixed hours on site, but lives elsewhere.

**Table 5.1b: Service provision in housing association-provided sheltered housing**

	All schemes		Some schemes	
	Number	%*	Number	%*
Resident warden <sup>14</sup> available 24/7	1	3.1%	2	6.3%
Resident warden working fixed hours	7	21.9%	7	21.9%
Full-time non-resident <sup>15</sup> warden	19	59.4%	5	15.6%
Part-time non-resident warden	4	12.5%	7	21.9%
In-house community alarm service	4	12.5%	1	3.1%
Externally-run community alarm service	24	75.0%	2	6.3%
Optional meals (“pay as you go”)	1	3.1%	2	6.3%
Regular meals (covered by weekly charge)	0	0.0%	1	3.1%
On-site care team (24 hours)	0	0.0%	1	3.1%
On-site care team (day time only)	0	0.0%	1	3.1%

**Notes to table**

\* based on responses from 32 housing associations

5.4 The data in Table 5.2a suggest that people living in council-provided extra care housing are more likely to have access to regular or optional means and to an on-site care team, though these services do not seem to be available in all such facilities. Most schemes (but again, not all) are linked to a community alarm service and most (but again, not all) have a full-time non-resident warden to provide support at predetermined times to tenants. Table 5.2b suggests that extra care schemes provided by housing associations are more likely to have regular input from a warden (who may be resident or non-resident), but otherwise have similar patterns of service provision as in council-provided extra care housing.

**Table 5.2a: Service provision in council-provided extra care housing**

	All schemes		Some schemes	
	Number	%*	Number	%*
Resident warden available 24/7	0	0.0%	0	0.0%
Resident warden working fixed hours	0	0.0%	0	0.0%
Full-time non-resident warden	4	66.7%	0	0.0%
Part-time non-resident warden	0	0.0%	0	0.0%
Council-run community alarm service	5	83.3%	0	0.0%
Externally-run community alarm service	0	0.0%	0	0.0%
Optional meals (“pay as you go”)	5	83.3%	1	16.7%
Regular meals (covered by weekly charge)	2	33.3%	1	16.7%
On-site care team (24 hours)	3	50.0%	0	0.0%
On-site care team (day time only)	3	50.0%	0	0.0%

**Notes to table**

\* based on responses from 6 Councils

<sup>14</sup> The questionnaire defined Resident Wardens as living on site. They may always be available to residents (i.e. available 24/7) or they may only work fixed hours (e.g. Monday to Friday, 9am – 5pm). They may also cover other sheltered housing schemes during their working hours.

<sup>15</sup> A full-time non-resident Warden works ‘full time’ fixed hours on site, but lives elsewhere.

**Table 5.2b: Service provision in housing association-provided extra care housing**

	All schemes		Some schemes	
	Number	%*	Number	%*
Resident warden available 24/7	1	9.1%	1	9.1%
Resident warden working fixed hours	2	18.2%	3	27.3%
Full-time non-resident warden	5	45.5%	2	18.2%
Part-time non-resident warden	0	0.0%	2	18.2%
In-house community alarm service	3	27.3%	1	9.1%
Externally-run community alarm service	7	63.6%	2	18.2%
Optional meals (“pay as you go”)	1	9.1%	3	27.3%
Regular meals (covered by weekly charge)	6	54.5%	2	18.2%
On-site care team (24 hours)	2	18.2%	1	9.1%
On-site care team (day time only)	1	9.1%	1	9.1%

**Notes to table**

\* based on responses from 11 housing associations

**Charges**

5.5 The weekly charges paid for by (or on behalf of) tenants of sheltered housing and extra care housing may comprise several elements, such as rent, service or property charges (e.g. for external maintenance and cleaning); a heating and lighting charge (e.g. for communal areas); charges for meals; community alarm charges; and support charges. Respondents were asked to record their charges for each type of property they provided (e.g. bedsit/studio apartment; one bedroom flat). These costs have then been aggregated to determine the total charges for each property type.

5.6 It is clear from the responses that charges are determined in many different ways. For example, some providers seem to charge an inclusive amount for all of the elements, while others quoted separate amounts for each element. Furthermore, although some providers gave a range of local charges, it was only possible to use mid-point values for each respondent in the analysis. Given the wide variations in provision of both services and facilities within schemes, it is not possible to identify ‘definitive’ charges for each type of accommodation. This is another aspect of sheltered housing where practice differs considerably both between areas and between providers.

5.7 Tables 5.3a and 5.3b show these charges for council-provided and housing association sheltered housing. The average total weekly charges for similar types of accommodation tend to be lower for local authority provision than for housing association schemes. Although the lowest charges are similar, the highest charges associated with housing association providers are much higher than those charged by councils, which raised the average costs of living in housing association schemes. Some housing association charges, however, were lower than those levied by local authorities. Furthermore, because not all providers have all five types of property, the costs can be influenced by whether or not a particular local authority or housing association provides a particular type of accommodation. For example, the average total charge for one bedroom flats provided by housing associations is higher than that for two bedroom flats because the more expensive providers do not include two bedroom flats in their property portfolio.

5.8 Tables 5.4a and 5.4b show that the average weekly charges for similar accommodation in extra care housing differ much less between local authority and housing association providers. Indeed, for this type of housing, there appears to be more variability in

charges across local authority providers, though small numbers of providers mean that these costs should be treated with some caution. The four tables show clearly that provision and charges vary considerably and that extra care housing can be very expensive (especially in council-run schemes).

**Table 5.3a: Summary of weekly charges for council-provided sheltered housing**

	Number of providers	Average (Total) charge	Lowest charge	Highest charge
Bed-sitting room	16	£59.19	£35	£89
One bedroom flat	17	£63.33	£38	£88
Two bedroom flat	11	£72.33	£52	£109
One bedroom bungalow	11	£62.52	£40	£85
Two bedroom bungalow	5	£76.65	£68	£87

**Table 5.3b: Summary of weekly charges for housing association-provided sheltered housing**

	Number of providers	Average (Total) charge	Lowest charge	Highest charge
Bed-sitting room	16	£78.19	£36	£164
One bedroom flat	26	£124.27	£47	£391
Two bedroom flat	18	£105.83	£39	£299
One bedroom bungalow	14	£91.36	£37	£298
Two bedroom bungalow	10	£104.80	£39	£335

**Table 5.4a: Summary of weekly charges for council-provided extra care housing**

	Number of providers	Average (Total) charge	Lowest charge	Highest charge
Bed-sitting room	2	£77.50	£68	£87
One bedroom flat	6	£140.09	£55	£271
Two bedroom flat	4	£159.54	£68	£358
One bedroom bungalow	2	£149.24	£55	£243
Two bedroom bungalow	1	£68.32	£68	£68

**Table 5.4b: Summary of weekly charges for housing association-provided extra care housing**

	Number of providers	Average (Total) charge	Lowest charge	Highest charge
Bed-sitting room	9	£151.78	£106	£221
One bedroom flat	6	£138.17	£114	£191
Two bedroom flat	6	£142.50	£121	£192
One bedroom bungalow	4	£144.00	£117	£190
Two bedroom bungalow	3	£169.33	£121	£195

## Summary

5.9 This section has shown that:

- Service provision – especially of warden support services – varies considerably across both sheltered housing and extra care schemes;
- Almost all residents have regular (though not necessarily full time) access to a warden, though these are generally non-resident;
- Some of the data are skewed due to the small numbers of providers of some types of housing (e.g. two-bedroom flats; bungalows; council provision of extra care) and all data on charges should be interpreted with caution;

- Weekly charges vary considerably, especially within housing association provision;
- These will in part reflect different facilities (e.g. the extent of communal facilities) and levels of support, but these alone are unlikely to explain all of the observed variation;
- Some providers include all services within their weekly rent, whereas other provided breakdowns for each service element;
- Costs for extra care include support costs, which seem to vary considerably, especially within council-run schemes (although these may also be influenced by economies of scale relating to the sizes of schemes);
- Residents who are self funders, especially if they have formerly been owner occupiers with no mortgage, may feel that the charges for sheltered housing and extra care accommodation are very high when compared with their previous housing-related costs.

## SECTION SIX: EXPERIENCE AND IMPRESSIONS OF SHELTERED HOUSING

6.1 The next three sections focus primarily on the views of current residents and potential future residents of sheltered housing. This section considers how current sheltered housing residents experience sheltered housing, drawing mainly on the responses to the postal questionnaire survey which was distributed to 1,200 residents across the six case study areas. Section 7 draws on information from six focus groups and various interviews with residents of sheltered housing undertaken during the site visits. The four additional focus groups that were conducted with younger older people and with older people not living in sheltered housing, including older people from BME communities in Glasgow and Edinburgh, are considered in Section 8.

### Residents' experience of sheltered housing

6.2 The survey of residents currently living in local authority, housing association, and private sector sheltered housing was conducted between February and March 2007. Twelve hundred questionnaires were distributed to a sample of sheltered housing schemes in the six case study areas (with the number of questionnaires allocated to each area being determined by the numbers of sheltered housing dwellings and their types of provider) and 641 responses were returned. The survey questionnaire is presented in Appendix K.

6.3 We cannot be sure whether those residents who responded to the survey are representative of all those who were surveyed, and it might be the case that those who are fitter and more able were more likely to respond. It should also be noted that time and resources did not allow for the survey to be offered in different formats (for example as an audio tape), or to offer people assistance with completing the questionnaire. Despite these limitations we believe that the survey offers a highly useful insight into the views of residents of sheltered housing.

### *Profile of survey respondents: gender, ethnicity, age, care needs, and health status*

6.4 Seventy two per cent (72%) of respondents were women. All but three of the respondents described their ethnic origin as white. Fifty three per cent of respondents lived in local authority schemes, 36% lived in housing association schemes, and 11% in private schemes. The age of respondents is shown in Table 6.1 below, and their responses to questions about their general health and needs for assistance are presented in Table 6.2.

**Table 6.1: Ages of survey respondents by type of provider**

Age bands	Local authority	Housing association	Private sector	Total
Under 60	16 (4.7%)	6 (2.5%)	5 (8.2%)	27 (4.2%)
60-69	35 (10.3%)	26 (11.8%)	6 (9.8%)	67 (10.4)
70-79	111 (32.6%)	76 (34.6%)	19 (31.%)	206 (31.1%)
80-89	146 (42.9%)	102 (46.1%)	27 (44%)	275 (42.9%)
90 and over	32 (9.4%)	25 (11.36)	4 (6.5%)	61 (9.5%)
Sub-total respondents	340 (53.4%)	235 (36.9%)	61 (9.5%)	636 (100%)
No response	2	2	1	5
Total	342	237	62	641



**Table 6.2: Self-reported health status of survey respondents**

Statement	Local authority	Housing association	Private sector	Total agreeing
I have good health	135 (39.5%)	112 (47.3%)	32 (51.6%)	279 (43.5%)
I cannot climb stairs	163 (47.7%)	84 (35.4%)	16 (25.8%)	263 (41.0%)
I need help with cooking healthy meals	49 (14.3%)	32 (13.5%)	3 (4.8%)	84 (13.1%)
I need help with cleaning	139(40.6%)	96 (40.5%)	17 (27.4%)	252 (39.3%)
My home has been adapted to let me do more things for myself	56 (16.4%)	32 (13.5%)	7 (11.3%)	95 (14.8%)
I have trouble with my eyesight	104 (30.4%)	71 (30.0%)	9 (14.5%)	184 (28.7%)
I have trouble with my hearing	112 (32.7%)	71 (30.0%)	18 (29.0%)	201 (31.4%)
I sometimes have trouble remembering things	110 (32.2%)	68 (28.7%)	13 (21.0%)	191 (29.8%)
I get home care services	69 (20.2%)	52 (21.9%)	3 (4.8%)	124 (19.3%)
The nurse comes to see me often	48 (14.0%)	22 (9.3%)	1 (1.6%)	71 (11.1%)
I need help with the shopping	132 (38.6%)	88 (37.1%)	10 (16.1%)	230 (35.9%)
I cannot walk short distances	81 (23.7%)	47 (19.8%)	6 (9.7%)	134(20.9%)
Total	342 (100%)	237 (100%)	62 (100%)	641 (100%)

6.5 Less than half of the respondents reported that they had good health (43.4%), but the health of those in local authority schemes appears to be slightly worse than that of residents in housing association schemes and private sector schemes. Overall 41.0% of respondents reported that they cannot climb stairs; 20.9% had problems with walking short distances; almost 28.7% reported problems with eyesight; and 31.4% reported problems with hearing. Almost one in three residents (29.9%) reported that they sometimes have problems remembering things. With the exception of memory problems a higher percentage of residents in local authority schemes report having these problems than residents in housing association and private sector schemes.

6.6 One in four residents in local authority and housing association schemes reported being in receipt of home care services. However, only a small minority of residents in private sector schemes received home care. Similarly, almost one in ten residents in local authority and housing association schemes receive a regular visit from a nurse, but less than 2% of private sector scheme residents have regular visits from a nurse. Approximately 40% of residents in local authority and housing association schemes need help with cleaning (as opposed to 27.4% in private schemes), and almost 40% of residents in local authority and housing association schemes need help with their shopping (compared with 16% of private sector residents).

6.7 The survey responses indicate that the health profile of residents in private sector schemes is considerably different from that of residents in local authority and housing association properties. Moreover, the needs of a significant proportion of residents in local authority and housing association schemes appear to be quite complex, with respondents receiving regular home care and health care assistance, as well as needing help with domestic tasks.

### ***Attitudes towards accommodation***

6.8 Ninety one per cent (91%) of respondents lived in one bedroom properties. Table 6.3 below show the type of accommodation in which respondents lived by the type of scheme. Table 6.4 shows respondents' answers about access.

6.9 These data show that 79.5% of those who lived above the ground floor had a lift, although this was higher (96.1%) for those who living in private sector schemes, and much lower (63.4%) for those who living in housing association schemes. Over eighty per cent (80.4%) stated that there were no steps to their front door, although this percentage was lower for those in housing association schemes (75.7%) and higher (96.6%) for those who lived in private sector schemes. However, 14.4% of those who lived in local authority schemes had to climb three or fewer steps, compared with 4.4% in housing association schemes although 19.9% of those who lived in housing association schemes had to climb four or more steps, compared with only 5.1% in local authority schemes.

**Table 6.3: Type of accommodation by type of provider**

Accommodation type	Local authority	Housing association	Private sector	Total
Flat – ground floor	130 (38.5%)	87 (36.7%)	22 (37.3%)	239 (37.7%)
Flat – non ground floor	119 (35.2%)	130 (54.9%)	35 (59.3%)	284 (44.4%)
Studio - ground floor	7 (2.1%)	0 (0.0%)	0 (0.0%)	7 (1.1%)
Studio - non ground floor	13 (3.8%)	10 (4.2%)	0 (0.0%)	23 (3.6%)
Single storey cottage or bungalow	64 (18.9%)	8 (3.4%)	0 (0.0%)	72 (11.4%)
2 storey house	5 (1.5%)	2 (0.8%)	2 (3.4%)	9 (1.4%)
Sub total of respondents	338 (100%)	237 (100%)	59 (100%)	634 (100%)
No response	4	0	3	7
Total	342	237	62	641

**Table 6.4: Access to accommodation by type of provider**

	Local authority	Housing association	Private sector	Total
Is there an accessible lift				
Yes	176 (88.4%)	104 (63.4%)	49 (96.1%)	329 (79.5%)
No	23 (11.6)	60 (36.6%)	2 (3.9%)	85 (20.5%)
Total	199 (100%)	164 (100%)	51 (100%)	414 (100%)
Do you climb any steps to get to your front door				
No	269 (80.8%)	171 (75.7%)	57 (96.6%)	497 (80.4%)
Yes 3 or less	47 (14.1%)	10 (4.4%)	2 (3.4%)	59 (9.5%)
Yes more than 3	17 (5.1%)	45 (19.9%)	0 (0.0%)	62 (10.0%)
Sub total of respondents	333 (100%)	226 (100%)	59 (100%)	618 (100%)
No Response	9	11	3	23
Total	342	237	62	641

6.10 Table 6.5 shows the responses to the question on how happy were residents with their accommodation, giving number and percentage of respondents in each category, and by type of accommodation.

6.11 Overall, 52.0% are very happy and 37.2 % quite happy with the amount of space they have. A slightly lower percentage is very happy in housing association schemes (46%) and a slightly higher percentage (56.1%) in local authority schemes. Overall, 56.7% are very happy and 36.6% quite happy with the condition of their accommodation. In this case, a slightly higher percentage is very happy in private sector schemes (64.4%) and a slightly lower percentage in local authority schemes (55.5%) Finally, on average, 61.2 % are very happy and 29.2% are quite happy with the heating in their accommodation.

**Table 6.5: Satisfaction with accommodation by type of provider**

	Local authority	Housing association	Private sector	Total
<b>Amount of Space</b>				
Very happy	189 (56.1%)	108 (46.0%)	31 (52.5%)	328 (52.0%)
Quite happy	112 (33.2%)	100 (42.6%)	23 (39.0%)	235 (37.2%)
Neither happy nor unhappy	14 (4.2%)	20 (8.5%)	4 (6.8%)	38 (6.0%)
Quite unhappy	12 (3.6%)	5 (2.1%)	0 (0.0%)	17 (2.7%)
Very unhappy	10 (3.0%)	2 (0.9%)	1 (1.7%)	13 (2.1%)
Total	337 (100%)	235 (100%)	59 (100%)	631 (100%)
No response	5	2	3	10
<b>Condition</b>				
Very happy	182 (55.5%)	127 (56.4%)	38 (64.4%)	347 (56.7%)
Quite happy	118 (36.0%)	86 (38.2%)	20 (33.9%)	224 (36.6%)
Neither happy nor unhappy	18 (5.5%)	10 (4.4%)	1 (1.7%)	29 (4.7%)
Quite unhappy	3 (0.9%)	1 (0.4%)	0 (0.0%)	4 (0.7%)
Very unhappy	7 (2.1%)	1 (0.4%)	0 (0.0%)	8 (1.3%)
Total	328 (100%)	225 (100%)	59 (100%)	612 (100%)
No response	14	12	3	29
<b>Heating</b>				
Very happy	203 (62.1%)	142 (62.0%)	31 (53.4%)	376 (61.2%)
Quite happy	89 (27.2%)	69 (30.1%)	21 (36.2%)	179 (29.2%)
Neither happy nor unhappy	15 (4.6%)	7 (3.1%)	26 (4.2%)	26 (4.2%)
Quite unhappy	9 (2.8%)	7 (3.1%)	1 (1.7%)	17 (2.8%)
Very unhappy	11 (3.4%)	4 (1.7%)	1 (1.7%)	16 (2.6%)
Total	327 (100%)	229 (100%)	58 (100%)	614 (100%)
No response	15	8	4	27

6.12 One hundred respondents provided additional comments about their accommodation, covering a range of topics including: heating, space, access (in particular, for the very elderly and disabled) and general living conditions. (for example, décor). Residents' comments varied, with some criticising certain aspects of the accommodation, for example:

*"I have no view from my house only a high fence which is very depressing".*

6.13 Others, however, were more positive, making comments such as:

*"In winter weather the house is so cosy and I think of all the other poor souls who don't have the good life that I have and I count my blessings".*

*"I am very happy with my house and very lucky to be here".*

6.14 Many comments concerned space. Respondents appear critical of the lack of space, particularly in areas such as the bedroom and kitchen. Some also complained about the lack of outside space. Some comments made over space were more positive, although positive comments primarily appear from residents living alone, and those residents sharing accommodation seemed less content:

*"The bedroom is smaller than some cupboards I've had. There are no storage space/wardrobes provided".*

*"Storage space outside non-existent for clothes props and garden equipment".*

*"This accommodation is ideal for one person".*

*“For a couple with one of them a stroke patient I felt that we would have and did need two bedrooms as the carer was in need of a bit of space and privacy to have quality time”.*

6.15 The general condition of the accommodation was commented upon. Some respondents provided considerable detail about the poor state of their homes, and some residents noted that they have spent their own money renovating the accommodation. However, some commented less critically, and acknowledged that repairs and maintenance are carried out where possible:

*“The flat was really rundown. I have spent around £7k to make it habitable”.*

6.16 There were also many comments – both positive and negative about the heating systems. Critical points raised included issues regarding a lack of control and regulation over the systems in place, thus providing residents with a lack of choice and independence, for example:

*“Far too hot with no control over temperature”.*

*“I am very unhappy that one cannot regulate the heating due to new substandard heaters”.*

6.17 Access was an issue raised particularly by and on behalf of disabled respondents. Residents commented on problems such as poor access for wheelchairs and scooters due to narrow doors and corridors. Some respondents commented that they needed further assistance with access such as stair lifts. Others commented on problems with access to plugs, cupboards etc.

*“My husband is getting more disabled and we would prefer a flat with wider doors for the wheelchair”.*

*“I have difficulty getting in and out of the door to the building with my 4 wheeler wheelchair”.*

*“Space in general is a problem inside house and in alcoves as we are both severely disabled and hard for us both to use aids (electric wheelchair indoor use, outside use scooter)”.*

### ***Feeling safe***

6.18 Table 6.6 shows the analysis of questions on whether residents felt safe in and around their sheltered housing schemes. Residents usually reported feeling safe inside their accommodation and inside their scheme, however fewer respondents reported feeling safe in the area around their schemes in urban areas. A slightly smaller percentage of private sector residents (80.6%) felt safe inside their sheltered housing schemes compared with residents in housing association and local authority schemes (89.7% and 88.2% respectively). It is interesting that there is little difference between residents of different schemes in their reported sense of security in their local neighbourhood. This is perhaps surprising given that the sample of schemes where questionnaires were distributed were in a wide variety of locations, including urban and rural areas.

**Table 6.6: Whether residents feel safe by type of provider**

Feeling safe	Local authority	Housing association	Private sector	Total
I feel safe inside my accommodation	316 (92.4%)	215 (90.7%)	59 (95.2%)	590 (92%)
I feel safe inside my sheltered housing scheme	302 (88.2%)	213 (89.7%)	50 (80.6%)	565 (88.2%)
I feel safe in the area around my sheltered housing scheme	255 (74.6%)	186 (78.3%)	46 (74.1%)	487 (76.0%)
Total	342 (100%)	237 (100%)	62 (100%)	641 (100%)

***Warden services, scheme facilities and social activities***

6.19 The survey asked questions about the level of warden support. Table 6.7 shows the analysis of services that are provided by the warden in the sheltered housing schemes. .

**Table 6.7: Services provided by the warden**

Services provided by warden	Local authority	Housing association	Private sector	Total
Warden or scheme manager lives on site/in the building	162 (47.4%)	162 (68.4%)	56 (90.3%)	380 (59.3%)
Warden is on site/in the building for some of the time each day including weekends	254 (74.3%)	101 (42.6%)	7 (11.3%)	362 (56.5%)
Warden is on site/in the building for some time every weekday	185 (54.1%)	149 (62.9%)	32 (51.6%)	366 (57.1%)
The warden only visits my sheltered housing scheme sometimes	13 (3.8%)	8 (3.4%)	1 (1.6%)	22 (3.4%)
24-hour cover is provided by the warden service or by scheme assistants (though not necessarily by the scheme warden)	218 (63.7%)	135 (57.0%)	34 (54.8%)	387 (60.4%)
The warden regularly checks that everyone is alright	305 (89.2%)	183 (77.2%)	43 (69.4%)	531 (82.8%)
The warden helps with shopping	44 (12.9%)	32 (13.5%)	3 (4.8%)	79 (12.3%)
The warden helps with filling in forms	178 (52.0%)	135 (57.0%)	11 (17.7%)	324 (50.5%)
The warden helps if something goes wrong in my home, for example, if a light bulb needs to be changed or if I need help with a problem like a leaking pipe	249 (72.8%)	172 (72.6%)	33 (53.2%)	454 (70.8%)
The warden comes in for a chat on a regular basis	13 (3.8%)	14 (5.9%)	1 (1.6%)	28 (4.4%)
Total	342 (100%)	237 (100%)	62 (100%)	641 (100%)

6.20 It is clear from the responses and comments made by respondents that there is considerable diversity in the amount and type of support provided by wardens. It also appears that services provided by the same type of provider can be quite different.

6.21 Wardens appear to be more likely to live on site in housing association and private sector schemes than in local authority schemes. Wardens in local authority schemes are more likely to be on site at weekends, and to check on residents every day. Wardens are also more likely to offer practical help such as changing a light bulb in local authority and housing association schemes.

6.22 Many residents commented further on their warden service, and many of these comments focused on the restructured service and the reduction in service hours provided. Respondents stated that their warden is no longer available at certain periods, for example, evenings, overnight and weekends, which makes them feel more vulnerable and at risk. The warden presence was seen as an integral part of sheltered housing.

*“I still feel occasionally insecure because of the fact that we have no warden on site at night now. Now that service has been withdrawn”.*

*“The warden’s hours are 9-5 weekdays and 9-1 weekends. I think the most vulnerable time for old people is during the night when we have no cover”.*

*“Warden is a must. Our warden is not available 4pm-10pm which is crazy. How can anyone know you won’t have a problem then?”*

*“Warden services should cover the complex 24 hours seven days a week that is the reason we came into sheltered housing. They only work office hours, many people have died on weekends and holidays and have not been discovered for days.”*

*“Wardens are the most important part of sheltered housing. For motivation and support and to continue an active life”.*

*“I have been in sheltered housing for 13 years and in my experience the warden service should have top priority in any future developments”.*

6.23 Comments were given on the types of services wardens provide to residents. Some respondents complimented a well-provided service from their warden. Residents mentioned the additional services received such as chats, organised social events, and help with household tasks.

*“Our wardens are extremely helpful, couldn’t ask for better”.*

*“We have splendid wardens, we have two and I can’t find fault with either of them. They are much appreciated..*

*“A great feeling having a warden”.*

6.24 Residents highlight that some household tasks such as taking down curtains or changing electricity bulbs are difficult, especially when family are not close at hand, and a warden or handy person service for such things would be useful:

*“There is no help for certain things. Curtains taking down for washing and put up again, light bulbs to be changed, this is an old building - ceilings are high”;*

*“We could do with someone to change light bulbs and small jobs as some of us have no family in Scotland”.*

6.25 Table 6.8 shows the responses to questions on general facilities provided by their sheltered housing scheme.

**Table 6.8: Scheme facilities by type of accommodation**

Facilities provided	Local authority	Housing association	Private sector	Total
There is a lounge	301 (88.8%)	220 (92.8%)	60 (96.8%)	581 (90.6%)
There is additional accommodation that can be used for by guests staying overnight	246 (71.9%)	212 (89.5%)	60 (96.8%)	518 (80.8%)
There are laundry facilities	284 (83.0%)	233 (98.3%)	58 (93.5%)	575 (89.7%)
Meals are provided for residents	50 (14.6%)	37 (15.6%)	2 (3.2%)	89 (13.9%)
There is access to a garden or patio where I can sit	270 (78.9%)	193 (81.4%)	57 (91.9%)	520 (81.1%)
If someone needs extra care, the staff who work in the scheme can provide it (rather than people from social services or the NHS)	138 (40.4%)	50 (21.1%)	3 (4.8%)	191 (29.8%)
There is suitable car parking nearby	307 (89.8%)	207 (87.3%)	59 (95.2%)	573 (89.4%)
Total	342 (100%)	237 (100%)	62 (100%)	641 (100%)

6.26 The analysis indicates that residents in private sector schemes generally have a greater range of facilities (except for laundry) probably reflecting the relative newness of most of the private sector developments compared with local authority and housing association properties. Residents in local authority schemes had the smallest range of facilities, particularly with regard to additional accommodation for guests and laundry facilities. Across all schemes, only a small percentage provided meals.

6.27 Additionally, 90% of respondents overall also said that social activities were provided, with a similar percentages in private schemes (89.7%) and local authority schemes and a higher percentage in housing association schemes (93.2%). Eighty two per cent of respondents said that they did not feel pressurised into participating in these activities, with a higher percentage in private schemes (85.5%) and housing association schemes (84.0%) and a slightly lower percentage in local authority schemes (80.7%).

### ***Reasons for moving to sheltered housing and previous tenure of respondents***

6.28 Table 6.9 shows the responses to the question on how the resident made the decision to move into sheltered housing.

**Table 6.9: How decisions were made to move into sheltered housing by type of provider**

Rationale	Local authority	Housing association	Private sector	Total
It was purely my decision to move	206 (60.2%)	140 (59.1%)	40 (64.5%)	386 (60.2%)
While other people/professionals were involved, I took the decision myself	82 (24.0%)	47 (19.8%)	9 (14.5%)	138 (21.5%)
It was a joint decision between myself and my family	131 (38.3%)	102 (43.0%)	21 (33.9%)	254 (39.6%)
It was more the decision of my family than myself that I should move	22 (6.4%)	12 (5.1%)	2 (3.2%)	36 (5.6%)
It was more the decision of doctors/social services that I should move	56 (16.4%)	23 (9.7%)	0 (0.0%)	79 (12.3%)
The council/my housing association suggested I move into sheltered housing (including offers made under incentive schemes)	21 (6.1%)	6 (2.5%)	0 (0.0%)	27 (4.2%)
Total	342 (100%)	237 (100%)	62 (100%)	641 (100%)

6.29 Overall, three-fifths (60.2%) of respondents said that it was purely their decision to move to sheltered housing. Just over a fifth (21.5%) stated that other people and professionals were involved, with a higher percentage in local authority schemes (24.0%) and a lower percentage in private sector schemes (14.5%). The percentage of people who said it was more the decision of doctors/social services to move was much higher for those in local authority schemes (16.4%) than housing associations (9.7%), whilst no respondents in private sector schemes gave this reason. Quite small numbers stated that the decision was taken mostly by their family or by the local authority or housing association. It is encouraging to see that for many respondents the decision to move to sheltered housing was theirs.

6.30 Table 6.10 shows the responses to the question on why the resident moved into sheltered housing.

**Table 6.10: Reasons for moving to sheltered housing**

	Local authority	Housing association	Private sector	Total
I was worried about my health and wanted a warden service	203 (59.4%)	186 (78.5%)	5 (8.1%)	195 (30.4%)
I needed somewhere to live that was designed for older people	158 (46.2%)	95 (40.1%)	26 (41.9%)	279 (43.5%)
I wanted to downsize my home as the upkeep of my previous home was getting too much	79 (23.1%)	71 (30.0%)	22 (35.5%)	172 (26.8%)
I wanted to feel safer from crime	136 (39.8%)	97 (40.9%)	21 (33.9%)	254 (39.6%)
I needed somewhere warmer/in better condition than my previous home	53 (15.5%)	46 (19.4%)	4 (6.4%)	103 (16.1%)
I was lonely and/or bored and wanted the company of people my own age	50 (14.6%)	36 (15.2%)	3 (4.8%)	89 (13.9%)
I felt isolated in my previous home	57 (16.7%)	41 (17.3%)	3 (4.8%)	89 (13.9%)
Even though I might need some help, I want to stay independent as long as possible	219 (64.0%)	155 (65.4%)	29 (46.8%)	403 (62.9%)
I decided to move now rather face upheaval in later years	136 (39.8%)	128 (54.0%)	33 (53.2%)	297 (46.3%)
Other	67 (19.6%)	48 (20.3%)	12 (19.4%)	127 (19.8%)
Total	342 (100%)	237 (100%)	62 (100%)	641 (100%)



6.31 Worries about health and wanting a warden service were the reasons most frequently cited by residents in housing association schemes and local authority schemes. Very few private sector respondents cited health worries and wanting a warden service as a motivation for moving. Their most frequently cited reason for moving was the intention to move now rather than face more upheaval later. Maintaining independence was also a driving factor for housing association and local authority residents but less of a motivation for private sector residents. Security and having accessible accommodation were also important concerns for all three groups of respondents.

6.32 A further 43 respondents gave other reasons, mostly related to the respondent's or spouse's health. Others commented on moving closer to their family or moving for family reasons, such as the death of their spouse, and many commented that their previous home was too big, ill-located (such as on top of a hill) or had too large a garden.

6.33 Table 6.11 shows the previous type of tenure of residents by type of provider.

**Table 6.11: The ownership of residents' previous homes by type of provider**

Previous home	Local authority	Housing association	Private sector	Total
I owned my previous home	122 (36.9%)	88 (38.8%)	52 (91.2%)	262 (42.6%)
I rented my previous home from a local authority	164 (49.5%)	80 (35.2%)	2 (3.5%)	246 (40.0%)
I rented my previous home from a housing association	18 (5.4%)	38 (16.7%)	1 (1.8%)	57 (9.3%)
I partly owned my home but also paid rent	4 (1.2%)	2 (0.9%)	0 (0.0%)	6 (1.0%)
Other	23 (6.9%)	19 (8.4%)	2 (3.5%)	44 (7.2%)
Total	331 (100%)	227 (100%)	57 (100%)	615 (100%)
No response	11	10	5	26

6.34 Overall, 42.6 % of all respondents owned their previous home, 40.0% had rented from a local authority, and only 9.3% had rented from a housing association. As might be expected 91.2% of people in private sector schemes previously owned their own homes. Perhaps more surprising is the finding that almost two-fifths of residents in both local authority (36.9%) and housing association (38.8%) schemes previously owned their own homes.

6.35 Almost half (49.5%) of respondents living in local authority schemes and just over one third (35.2%) of respondents living in housing association schemes had previously rented from a local authority. Only 5.4% of respondents in local authority schemes, and 16.7% of respondents in housing association schemes had previously rented from a housing association,

6.36 Only six respondents partly owned and partly paid rent on their previous home. Those who responded 'other' included people who previously lived with relatives, had accommodation provided with their employment or rented from other sectors such as the private sector or the Church

### ***Views on living in sheltered housing,***

6.37 Table 6.12 shows the views of residents on whether their scheme gives good value for money.

**Table 6.12: Views on value for money offered by sheltered housing**

Does your scheme offer value for money?	Local authority	Housing association	Private sector	Total
Very good	150 (46.7%)	88 (39.8%)	20 (36.4%)	258 (43.2%)
Quite good	148 (46.1%)	109 (49.3%)	32 (58.2%)	289 (48.4%)
Quite poor	20 (6.2%)	22 (10.0%)	3 (5.5%)	45 (7.5%)
Very poor	3 (0.9%)	2 (0.9%)	0 (0.0%)	5 (0.8%)
Total	321 (100%)	221 (100%)	55 (100%)	597 (100%)
No response	21	16	7	44

6.38 In response to the question on whether the respondent felt that their scheme provided good value for money, 43.2% responded that it gave very good value for money, and 48.4% that it gave quite good value for money. However, a greater percentage of those in local authority schemes (46.7%) felt their scheme was very good value compared with a lower percent in housing association (39.8%) and private sector schemes (36.4%). Only 7.5% said their scheme provided quite poor value for money and only five respondents responded very poor value for money. Two hundred respondents gave an explanation for their response. Most qualified their response with comments about high maintenance costs, service charges or rent; high council taxes; relatively small sized accommodation; or a reduction in services provided, especially warden services (for which there had been no reduction in charges).

6.39 Table 6.13 shows the numbers of residents who agreed with a series of statements.

**Table 6.13: Residents' views on living in sheltered housing by type of provider**

Statement	Local authority	Housing association	Private sector	Total
I can be independent	315 (92.1%)	219 (92.4%)	58 (93.5%)	592 (92.4%)
I have my own front door and privacy	283 (82.7%)	184 (77.6%)	48 (77.4%)	515 (80.3%)
My home is well designed	247 (72.2%)	158 (66.7%)	41 (66.1%)	446 (69.6%)
Help is close by, should the need arise	301 (88.0%)	204 (86.1%)	56 (90.3%)	561 (87.5%)
My rent / mortgage costs are reasonable	232 (67.8%)	147 (62.0%)	10 (16.1%)	389 (60.7%)
The service charge(s) are reasonable	160 (46.8%)	129 (54.4%)	35 (56.5%)	324 (50.5%)
There is company for older people who might otherwise be alone	290 (84.9%)	189 (79.7%)	43 (69.4%)	522 (81.4%)
Social activities are arranged for residents	281 (82.2%)	183 (77.2%)	44 (71.0%)	508 (79.3%)
It is safe from crime	265 (77.5%)	199 (84.0%)	51 (82.3%)	515 (80.3%)
Total	342 (100%)	237 (100%)	62 (100%)	641 (100%)

6.40 Overall, the majority of all residents agreed with all the statements, although only half (50.5%) of respondents agreed with the statement that service charges are reasonable, and three-fifths (60.7%) agreed with statement that rent/mortgage costs are reasonable. There are, however, a small number of notable differences by type of provider. For example only 46.8% of residents in local authority schemes agreed with the statement that service charges are reasonable, and only 16.1% of private sector residents agreed that rent/mortgage costs are reasonable. Nevertheless the survey responses indicate that sheltered housing does allow older people to be independent, feel reassured that help is at hand, and have company.

6.41 Eighty five respondents described other good things about living in sheltered housing, most of which focus on the combination of independence, company and social activities, and relative safety. Representative comments include: *“peace of mind”*, *“the ability to be independent and at the same time to have easy access to support”*, *“help at hand, feeling of belonging to a community”*, and *“feeling of security”*. Fifty one respondents described less good things, which include low levels of maintenance and problems with repairs, sharing of facilities such as laundries, and the reduction in warden services and other facilities. Many

commented on the lack of privacy, for example, “there is less privacy. Because the rooms are so small, it is difficult to entertain friends” ; “we are supposed to be living in retirement flats not an old folks home”, and “Old women are in the majority and, with time on their hands, the bitching has to be heard to be believed! I dislike communal facilities, having to wait for washing machines”.

6.42 Residents were asked whether they agreed or disagreed with statements about living in sheltered housing schemes. Table 6.14 show the percentage of respondents agreeing with the statements, showing the differences across local authority, housing association and private sector schemes.

**Table 6.14: Percentages of respondents’ agreeing with various statements on living in sheltered housing**

Statement	Local authority	Housing association	Private sector	Total
Sheltered housing is a good service for older people	316 (92.4%)	229 (96.6%)	55 (88.7%)	600 (93.6%)
Sheltered housing could be used for groups other than older people who might benefit from a warden service, such as younger people with disabilities	154 (45.0%)	105 (44.3%)	35 (56.5%)	294 (45.9%)
Sheltered housing is a good option for some older people, but there should be services to let you stay in an ordinary house if you become ill or vulnerable in some way	179 (53.3%)	123 (51.9%)	29 (46.9%)	331 (51.6%)
Sheltered housing is better than residential care homes	285 (83.3%)	187 (78.9%)	45 (72.6%)	517 (80.7%)
If you are in sheltered housing, it is easy to get social services and health services if you need them	268 (78.4%)	184 (77.6%)	40 (64.5%)	492 (76.8%)
I would find it difficult to share sheltered housing with people who were very ill or disabled	101 (29.5%)	98 (41.4%)	26 (41.9%)	225 (35.1%)
I would find it difficult to share sheltered housing with people with dementia or confusion	129 (37.7%)	119 (50.2%)	32 (51.6%)	280 (43.7%)
I was worried about moving somewhere full of older people as this is often associated with ill health	61 (17.8%)	48 (20.3%)	18 (29.0%)	127 (19.8%)
Being in sheltered housing is more like being in an institution than being in your own home	24 (7.0%)	11 (4.6%)	4 (6.5%)	39 (6.1%)
I would rather be living in an ordinary home than in sheltered housing	52 (15.2%)	38 (16.0%)	16 (25.8%)	106 (16.5%)
I would not mind if non residents came into my sheltered scheme to get day centre/other services	159 (46.5%)	92 (38.8%)	9 (14.5%)	260 (40.6%)
Sheltered housing works best for older people who are in relatively good health and who are able to lead quite active lives	270 (78.9%)	205 (86.5%)	54 (87.1%)	529 (82.5%)
I wish I had moved into sheltered housing earlier than I did	152 (44.4%)	87 (36.7%)	10 (16.1%)	249 (38.8%)
Total	342 (100%)	237 (100%)	62 (100%)	641 (100%)

6.43 The responses to these statements indicate high levels of support for sheltered housing among residents. More than 90% of respondents agree that sheltered housing is a good service, over 80% agree that sheltered housing is better than residential care, and over 76% agree that it is easy to access other services if you need them. Although only about 46% of respondents agree that sheltered housing could be used for other groups, responses suggests that the majority of people would not find it difficult to share sheltered housing with people with disabilities or dementia. Only about 16% would rather be living in an ordinary home rather than sheltered housing, and only 6% agree that sheltered housing is more like being in an institution than in one's own home.

6.44 Table 6.15 shows the level of agreement to a series of statements regarding how sheltered housing could be improved.

**Table 6.15: Improvements in sheltered housing by type of provider**

Improvements	Local authority	Housing association	Private sector	Total
The rooms in some sheltered homes should be bigger	123 (36.0%)	112 (47.3%)	27 (43.5%)	262 (40.9%)
It could be easier to enter/leave some sheltered schemes (e.g. fewer steps, more ramps and lifts)	83 (24.3%)	69 (29.1%)	10 (16.1%)	162 (25.3%)
Interior design (e.g. it should be easy to reach switches and cupboards)	122 (35.7%)	83 (35.0%)	19 (30.6%)	224 (34.9%)
There should be fewer stairs or shorter corridors inside schemes	79 (23.1%)	62 (26.2%)	13 (21.0%)	154 (24.0%)
Sheltered housing rent should be cheaper	160 (46.8%)	117 (49.4%)	7 (11.3%)	284 (44.3%)
Service charges should be cheaper	140 (40.9%)	119 (50.2%)	28 (45.2%)	287 (44.8%)
Sheltered housing should have more social activities	90 (26.3%)	59 (24.9%)	7 (11.3%)	156 (24.3%)
There should be extra care services if you need them	109 (31.9%)	78 (32.9%)	13 (21.0%)	200 (31.2%)
There should be more facilities (e.g. lounges, laundry rooms, gardens)	52 (15.2%)	29 (12.2%)	6 (9.7%)	87 (13.6%)
I would like more contact with the warden	36 (10.5%)	30 (12.7%)	1 (1.6%)	67 (10.5%)
Other	50 (14.6%)	29 (12.2%)	6 (9.7%)	85 (13.3%)
Total	342 (100%)	237 (100%)	62 (100%)	641 (100%)

6.45 When asked how sheltered housing might be improved, responses to a number of statements were more muted. Improvements to space, interior design, affordability, and accessibility appear to have some support. Given the comments on the reductions in warden services it is perhaps surprising that only 10.5% of respondents would like more contact with the warden (and only 1.6 % of private sector residents), and only 13% felt there should be more facilities. These responses seem to indicate a high degree of contentment with most aspects of their accommodation and its facilities.

## Summary

6.46 While the survey has some limitations, it demonstrates very clearly the continuing popularity of sheltered housing with residents. This is not to say that residents are entirely happy with all aspects of the service. Reductions in warden services are unpopular. Many respondents remarked on poor space standards (particularly for couples), and problems with access for disabled people. Value for money is also a concern. Nevertheless overall the great

majority of residents were supportive of sheltered housing, and agreed that sheltered housing is a good service for older people.

## **SECTION 7: KEY FINDINGS FROM SITE VISITS AND INTERVIEWS AND FOCUS GROUPS WITH SHELTERED HOUSING RESIDENTS**

7.1 Some of the key questions addressed in the survey were further explored in more depth when we visited nine different schemes across the six case study areas, and conducted six focus groups and eight face-to-face interviews with residents. Schemes included one very sheltered housing scheme, and two schemes which provided both very sheltered and sheltered accommodation on the same site. During the visits to the schemes we were shown around by the staff, and had the opportunity to talk informally with staff and residents, and on a number of occasions were invited into people's homes. More than 70 older people participated in the focus groups and interviews, with ages ranging from mid-fifties to late nineties. Topics covered in the focus group included the reasons why people had chosen to move to sheltered housing, how satisfied they were with their accommodation, the services they received, and their attitudes towards affordability and value for money.

### **General satisfaction**

7.2 Perhaps the first and most important point to make is that the majority of people we met were eager to say that – overall – they were happy with living in sheltered housing. This is not to say that people did not have concerns. In line with the comments made on the survey responses, the size of accommodation, maintenance and repair, charges and increases in charges, and most importantly the reduction in warden services were the focus of much discussion. However, most people felt it had been a good move, and that they were happy with their circumstances.

7.3 When asked what the best things were, participants highlighted the combination of independence and security, but they also stressed how they valued the opportunities to have company and social contact. Many people had lost their spouse partners or other close relatives and friends either before they moved or since moving to sheltered housing. In one small rural scheme almost all the residents took the time to attend the discussion group, and described their small community as “an extended family”. Although opportunities to take part in organised activities or social events were valued, it was the day-to-day opportunities for meeting people and knowing your neighbours were about and would help you if you needed help that appeared to be as important as more formal social activities. The responses to the survey indicated that wanting company was not a primary motivation for moving to sheltered housing. However it may be that over time, opportunities for companionship were an unexpected bonus of sheltered housing.

7.4 In some schemes, participants remarked that it was always the same people that joined in at events or came to meetings, and that there were others who always stayed in their flats and did not come out. This was perceived to be the individual's choice. Of interest here is that when asked what were the main challenges of the job scheme managers and wardens noted that they had great difficulty getting residents to be more proactive in organising social activities and events. While there was evidence in all the schemes of different events, meetings, and religious services, mostly these appeared to have been instigated by the scheme managers. Most wardens felt that the communal facilities were not fully used, although residents did not always agree with this view.

## **Views on accommodation**

7.5 With regard to accommodation, most people said how happy they were with their homes. It is to be noted that many of the schemes we visited were “typical” of sheltered housing provision in as much as they had been built 20 or 30 years ago. The very sheltered scheme was typical of very sheltered accommodation as it was built within the last three years, and opened very recently. It was clear from the visits that accommodation varied considerably, and that this was not related to the age of the scheme.

### ***Space standards***

7.6 Clearly space is a major issue. Some of the older schemes that we visited were “bedsits” where usually the living room doubled as a bedroom. In some cases, the flats had been extended, or changed in some way, for example, moving the kitchen to one end of the living room, and making the former kitchen a bedroom. We met some residents who were living in bedsits. Clearly people had worked hard to make the best of their accommodation, although most said it would be “lovely” to have a bedroom. Some noted that in the past they had lived in far worse places, although others were used to something bigger and better. One resident remarked that although she could currently make up the bed, and cover it with cushions and throws to disguise it, in future she might not be able to make that effort every day.

7.7 Even in flats which had been designed to have one (or very rarely two) bedrooms, space was often a concern for the residents of sheltered housing that we met, although space standards were very variable. Some flats were spacious, and these were not necessarily those in the newest developments. Most of the residents we met who were living in smaller accommodation felt that you could ‘manage’ with the space available, and said they were quite comfortable, and indeed liked their flats, but would ideally have preferred to have more space. There were mixed views about the desirability of having two bedrooms. For couples, particularly where one partner is unwell, two single beds may be preferable to a double bed, and often there was no room for two single beds in the bedroom. Indeed, spouse carers may prefer to have a separate bedroom. People were obviously concerned about the increased rent that a two bedroom property would require. Where there were guest rooms, people said a second bedroom was not really necessary. Preference was generally for better space standards (as opposed to additional rooms), and for good storage space. Where people had walk-in cupboards, these were frequently remarked on as “marvellous” and “wonderful”.

7.8 There are a number of issues with regard to space. Firstly, many remarked that it was difficult to have more than one or two visitors at one time in their home because there was nowhere to sit, and certainly nowhere to put a table and share a proper meal. This seems like a sure way of limiting people’s social activities. Furthermore, it possibly undermines a sense of identity and purpose if family can no longer be invited for Sunday lunch, for example, or to celebrate special occasions. In the one bedroom flats, there often was only room for a single bed. As one respondent remarked, “I am not built for a single bed”. There is also an assumption here that people will always be sleeping alone, which may not necessarily be the case.

7.9 In addition, there was no space for what one lady who did not live in sheltered housing described as her “den”, where she kept her personal computer, papers and documents, did her ironing, and so forth, knowing that she could shut the door on it all.

Activities that give people a sense of purpose and motivation can be restricted if there is no space for these activities, or for storing craft and hobby equipment.

7.10 Finally, if increasingly people are to be cared for in their own homes, there needs to be space for caring. Small bedrooms (and living spaces) for both single and double occupancy flats do not allow space for carers to lift or hoist people, or in some cases even to assist with getting dressed, or for keeping large pieces of medical equipment such as oxygen cylinders.

7.11 A further issue that arose frequently in discussion with regard with to space standards within individual dwellings, but also within communal areas, was the difficulties many schemes have accommodating electric scooters or buggies, given that there are growing numbers of older people with mobility problems who use (and depend on) them. Most schemes do not have adequate parking or storage for buggies, or places where batteries can be re-charged. In some instances wardens reported that the main entrance doors could not accommodate buggies, as many are so large. There were also concerns about the width of corridors and size of lifts with regard to buggies, damage to the fabric of the building caused by buggies and the possible risk they posed to other frail residents.

### **Improvements to accommodation**

7.12 When asked what could be done to improve their accommodation and to make life easier, the single improvement that was constantly referred to was the installation of a walk-in shower (where these were not already in place). Newer schemes had walk-in showers, but many older schemes still had baths. While some people preferred a bath, they also remarked that a shower would be easier and probably, over time, very necessary. A cause for complaint was where residents who had wanted to install a shower had paid for this out of their own pockets. In other cases, showers had been installed by the landlord for individuals that needed them.

### **Motivation for moving**

7.13 As might be expected, people reported a range of reasons for moving to sheltered housing – bereavement, declining health, the need for accessible and manageable accommodation, the need to feel safe and know that help is at hand, and moving to prepare for future uncertainties of later life while individuals felt they could cope with the upheaval. Residents had chosen to move to particular schemes often because it was the nearest place to close family, or because the location of the scheme gave them better access to facilities.

### **Housing support services**

7.14 It is important to note that residents generally spoke very highly of their scheme managers or wardens. There were also many positive comments in the residents' survey regarding individual wardens. When residents (and key informants) were asked what makes a scheme "successful", and "a good place to be", a key factor was considered to be the individual scheme manager or warden. Changes to warden services generated the most discussion in the focus groups with sheltered housing residents, and also were the subject of many comments on the residents' survey.



### ***The role of the warden***

7.15 It was clear from the site visits (and discussion with key informants from provider organisations) that different providers offer different levels of warden service. In some instances, the warden was only on-site or on duty for a small number of hours in the day, usually being on duty in the mornings only. In other schemes there was cover through out the day. In the schemes offering very sheltered housing there was staff cover on site at night. The number of hours worked by the scheme managers or wardens did not appear to be related to the size of the schemes, for example the smallest and largest of the schemes that were visited had very similar levels of warden cover. Wardens that we met in the larger schemes felt that their services were stretched, particularly when significant numbers of residents were frail or unwell. Often they had to focus on the most vulnerable residents, and although they did not feel other more able residents were neglected, in some cases they did feel that they were not getting an equal service.

7.16 One of the schemes we visited - where a number of units had been designated “very sheltered” and were effectively embedded in a sheltered housing scheme - provided sleeping night cover. The scheme co-ordinator here felt that the night cover arrangement was making it difficult to recruit staff as people were reluctant to take a job that required them ‘sleeping in’ on a regular basis. She also felt that because only one person was on duty the amount of assistance that could be offered was highly limited, for example, a lone worker could not lift someone who had fallen. Given that the scheme was relatively large, and some residents were very frail, the manager felt that the resources used for sleeping night cover could have been better directed to provide more for residents during the day. In discussion, however, some residents were adamant that knowing there was someone on site at night was crucial to their well-being.

7.17 A number of the scheme managers we met remarked on the increasing amount of paper work that now went with the job, which reduced the time that could be spent with residents.

*“Once upon a time, you were hands on with tenants, now I’m stuck in that office with that computer...the job has completely changed. When I first took this job I never thought I’d end up in front of a computer.”*

(Scheme manager)

7.18 It was also clear that that when needs arose, individuals did more than the tasks outlined in their job description, for example collecting prescriptions for people who lived alone and required medication in an emergency, waiting in the scheme after hours to make sure a GP had called and to find out the outcome of the GP visit and to see whether relatives needed to be contacted and so forth.

7.19 In two schemes the managers felt that other health and social care professionals were not always clear about the role of the scheme manager. Sometimes they assumed greater levels of support were in place than was actually the case. An example was that of a resident with severe mental health problems. Despite making repeated requests for additional support to local community psychiatric nurses, GPs and social workers, little help was forthcoming, and the housing support staff within the scheme were left to cope with an individual who was actively psychotic. Finally the resident was sectioned under the Mental Health Act but only after she had been violent towards a visiting GP. In a different scheme, the manager spoke

about an elderly gentleman who was clearly beginning to become confused. In this case, although health care professionals did become involved, they did not communicate very well with the scheme manager regarding what was happening with the particular individual, and how best the scheme manager might help. Another scheme manager remarked that sometimes if a GP was visiting a resident they would speak to the manager as they left for example, and let the manager know whether relatives should be contacted, or whether the resident was going to be admitted to hospital, or needed medication. On other occasions however, depending on the GP, the scheme manager was not informed of the outcome of the visit. While she understood that confidentiality needed to be protected, this scheme manager felt that she would be better placed to assist residents if more information was shared. There were similar concerns in some instances regarding hospital discharge, and the need to notify scheme managers that individuals were coming home.

7.20 When asked what were the main challenges of the job scheme managers noted that they had great difficulty getting residents to be more proactive in organising social activities and events. While there was evidence in all the scheme of different events, meetings, and religious services, these mostly appeared to have been instigated by the scheme managers. Most felt that the communal facilities were not fully used, although residents did not always agree with this view.

7.21 Many respondents to the survey and participants in the focus groups expressed their concerns about the reduction in warden service hours and the lack of cover at weekends and at night. There were also some fairly ad-hoc arrangements when cleaning staff would cover for an absent warden if no other cover could be arranged. Although there may be compelling reasons for the changes to the warden service (such as the European Working Time Directive and problems recruiting staff to residential posts), it is quite clear from both the focus groups and comments made in response to the survey questionnaire that they have not been welcomed by residents of sheltered housing, and are very unpopular. It is difficult to know how the changes were introduced to residents, and what explanation was given as to why they were taking place. From the residents' perspective, however, most felt the changes had been forced upon them without any discussion of what they needed or preferred.

*"We were all quite happy with the way things were, until they made all these changes to the warden..."*

7.22 For many of the participants the reduction in service was a clear indication of the low priority given to older people's services and needs, as illustrated in the comments below:

*Participant 1: "They're probably thinking, well you've had your life".*

*Participant 2: "We're lasting too long".*

7.23 People no longer felt as safe as they once had, and many noted that their reasons for moving to sheltered housing was primarily around safety and knowing help was at hand.

### ***Night cover***

7.24 Where there was no on-site night cover, residents' calls for assistance out-of-hours went through to a central call centre, and assistance was summoned. This assistance could be delivered by support workers providing the night cover, who were usually based in a central location and covered a number of different schemes, or in some instances by a nominated key holder, who would be contacted by the alarm service. The key holder was usually a member of the family or a friend living nearby, or in some instances other residents within the same scheme. In one scheme with bungalows and flats with external doors, a key box had been

installed outside those houses where residents could not easily answer their doors. Residents questioned whether this was a particularly secure arrangement, as they felt “anyone” could break into the key box and gain access to the property.

7.25 It was clear that many residents did not fully understand how the out-of-hours cover operated. For example, some people clearly believed that when their call went through to a central call centre, workers were dispatched from the call centre itself, which was often many miles away (for example, people living in the Glasgow area believed care workers would come from Edinburgh to assist them and people in rural Aberdeenshire believed that carers came ‘all the way from Aberdeen’). There were two concerns here. Firstly, people felt that assistance would be slow in arriving, and secondly, it seemed like a costly way to deliver a service when staff had to travel long distances to respond. When the warden still lived on site, residents were often bemused that they could no longer call the warden when s/he was close at hand and instead had to wait on someone coming from elsewhere. In some instances, groups of residents had agreed among themselves that they would call each other in an emergency primarily because help would be more immediate, rather than contact the call centre and wait for help to be dispatched. Residents seemed happy with these informal arrangements, although clearly they are not without their limitations.

7.26 Some wardens also remarked that some residents, particularly the very elderly, were very reluctant to pull their emergency alarm chords when the wardens were not on duty. One lady in her eighties reported in her interview that she would “never” pull the chord, although she could not really explain what she did not like about pulling the chord, or what worried her about it, she just “didn’t like it”. In an emergency her preference was either to wait until the warden was on duty, or to contact her son. In another scheme, the night before the focus group a very frail lady in her nineties had been admitted to hospital. She too was reluctant to “pull her chord”, and had telephoned a younger resident within the scheme who had come to her assistance in the early hours of the morning, and called an ambulance for her.

7.27 The provision of the out-of-hours service was a concern to some of the service providers that were interviewed. It was difficult to recruit staff who were willing to work the shifts, moreover there were concerns about the safety of lone workers, and what they could actually do to assist in an emergency. A service co-ordinator expressed her concern about out-of-hours cover provided by an agency service with high staff turn-over rates. It was highly unlikely that anyone responding to an emergency out-of hours call out would be known to the person in difficulty. Moreover, it was also felt that the agency staff were providing cover elsewhere (although this was difficult to prove) and might be slow to respond. There had been a complaint of slow response, which was being investigated.

7.28 The extent to which people are not calling for emergency help is difficult to judge. It clearly is an issue as it was referred to on a number of different occasions in different places. It may be that people are reluctant to call for out-of-hours help because they do not know who will come to their assistance, and they may be fearful or embarrassed by strangers arriving to help them. Some may be fearful or mistrusting of the technology, and unclear how it should be used. When discussing recent changes to schemes with residents, out-of-hours cover was frequently a topic for discussion. It was clear that many residents were angry that there was no longer a warden living on site. The change in service, and the perception that “*the warden was taken away*”, might have generated negative impressions of out-of-hours services.

*“You’ve got to understand, a lot of elderly people don’t like speaking on a phone, they don’t bother them (the call centre) whereas at the one time there was the warden there, so that was much more satisfactory, they can see you, and you can go up to them”.*

Participant in focus group

*“We preferred 24 hour cover by our own 2 wardens. It now means that strangers appear instead.”*

Comment from survey

7.29 It is important to note that some residents we met were more positive about the out-of-hours service alarm service. These were usually those who had used the service, or knew someone who had used the service, or were clear about how the service worked, or had experienced a ‘false alarm’ and the response. Perhaps knowing from direct experience that the service worked as it should was reassuring. More positive attitudes may also be due in part to how the operation of the service was explained to people. In one scheme however the warden still lived on site. Residents here were positive about the out-of-hours service, although they explained that if they needed the warden in the night they could still call her, even though they knew she was no longer on duty.

7.30 Overall, the comments made about the provision of support services show that many residents seem to lack a clear understanding of the reasons underlying the recent changes. Furthermore, some seem to lack the confidence to use the new elements, such as their community alarm. These observations suggest that a great deal of ‘public relations’ work needs to be undertaken in sheltered housing schemes

### **Location and access**

7.31 Clearly better access to facilities had been a motivation for moving for some the sheltered housing residents that we met. In both urban and rural schemes, residents were eager to be located near to shops and health care services. In two of the rural areas residents in the focus groups reported that although they had chosen to move into larger settlements to be closer to facilities such as shops, banks and the post office, the most important reason was to be closer to health care services. Although the retail facilities were fairly limited in smaller rural settlements (for example, shopping for clothes had to be done elsewhere), residents were satisfied that their day-to-day needs could be met. Some residents had previously lived in small villages or remote locations. When asked if they would have preferred to stay where they were, and have services delivered to them in their home, the answer was inevitably no. People had been concerned not so much about their care needs, but about the possible social isolation they would experience as they got older, and the difficulties they would have attending the doctors’ surgery or just with day-to-day activities, particularly if the point came when they could no longer drive. There is an on-going debate about how best to deliver services to older people in rural areas, particularly those living in isolated settlements. While our residents may not be representative of those who have chosen not to move into sheltered housing, those we met were clear that rural living had its disadvantages and had become less attractive as they had got older. No one reported regretting that they had moved.

7.32 One scheme we visited was located in a small village in a rural area with very limited transport services (two buses a week to a nearby town), and a post office/general store. The residents here were mainly local, previously living either in the village, or on outlying,

isolated farms. Despite there being apparently very limited public transport, residents remarked that the service was very good, and they were very happy with it, commenting, “*What more do you want?*” The importance of the post office was stressed because it offered banking facilities. Local health care services were highly spoken of, and the doctors’ surgery, located nearby, offered a range of specialist services that often reduced the need to attend the hospital for tests and treatment.

7.33 The importance of access to transport was stressed, particularly bus stops that were located near to the scheme entrance. In one case, residents had successfully petitioned to get an additional bus stop installed outside the scheme. In another, the bus stop for taking people to town was just outside the front entrance.

7.34 Residents across the different schemes did note that for those who had mobility problems, or were housebound, going out even to very nearby shops was more or less impossible. Other residents or volunteers often provided a shopping service for those who had mobility problems and did not have families to take them out or bring their shopping in.

7.35 Many comments received with the survey related to poor accessibility within sheltered housing, particularly for disabled residents. Accessibility inside the different scheme we visited was variable. Once more this was not necessarily related to the age of the scheme. The point has already been made above about mobility scooters. Some schemes did have lifts, however others did not, and in some instances the layout of the schemes and sloping sites meant that even the installation of a lift would not have made access easier to all the flats in the building. Shared facilities, such as lounges and laundries, were also more or less accessible to residents depending on where they lived within the scheme. A number of people spoke about the distance they had to carry their washing to reach the laundry room. Sharing laundry facilities could also be a source of tension. There were many references to what was described in one instance as “laundry wars”. On several occasions wardens and residents questioned whether it would be possible to evacuate a building quickly in the case of a fire (especially at night and at other times when the warden was not on site).

7.36 Very few schemes appeared to have given much thought to visual or tactile signing that would be make orientation easier for people with visual or cognitive impairment. In one instance the scheme manager had struggled to persuade the maintenance department of the local authority to put up hand rails on long corridors, and requests for colour coding of corridors had been turned down – although as a compromise a different coloured carpet tile had been placed outside the lift doors on each floor. However, in this instance the majority of residents had been against the use of different colours to aid navigation around the scheme.

### **Value for money and affordability**

7.37 As noted above, responses to the survey indicated that a significant proportion of respondents did not feel that they were getting value for money. Questions around affordability and value for money were addressed in focus groups and interviews with residents of sheltered housing. However, it should be noted that people are always reluctant to talk about financial matters in interview situations, and particularly in focus groups, when residents may be in different financial situations with some self-funding and others receiving means-tested assistance. Such differences are a constant source of tension in many older people’s housing settings. In some instances, individuals privately expressed their disquiet to the researcher that there were those who “*get everything for nothing*”, and others who had to pay quite considerable charges. Conversely, others were concerned that people who had

previously owned properties were living in the social rented sector and, in their opinion, were taking the opportunity of living in sheltered housing away from others who were less well off. Depending on when residents had moved in, some paid separate charges for housing support services whilst others did not (i.e. those who had been residents in the scheme prior to the advent of the Supporting People programme). This appeared to be inequitable to residents, as well as confusing.

7.38 Many people remarked that living in sheltered housing was expensive, when rent, service charges, council tax and housing support charges were added together. Key informants also noted that the increasing costs of sheltered housing, and particularly of very sheltered housing, were preventing people with clear needs from taking placements, particularly those who are self-funding. There were different discussions in the various schemes. In some schemes, residents were quite happy with what they paid. Perhaps the first and most important point is that many people were not exactly sure what they were being charged for in terms of ‘services’, and exactly what service charges covered, and this is supported by comments on survey responses.

*“In our sheltered housing some of us pay £58.72 a month for supporting people, including alcoholics, drug addicts, single parents etc. As I have osteoarthritis in my spine I would like to have a carer, but the costs added to the SP would make the cost of living go through the roof”.*

Comment from survey

7.39 The term “housing support” meant very little to the people we met. In one scheme, the residents’ committee had asked for a meeting with their housing association to clarify exactly what the manager “could and should” do, and to define “housing support”. Discussion often returned to the reduction in warden services, and many commented that their service charges were going up, and yet the warden service had been reduced. People also spoke about council tax, and how they had previously paid less council tax although they had lived in larger properties. Some people felt that if all the charges were added up, it would be no more expensive to pay a mortgage.

7.40 Two key informants reported two recent separate cases where individual residents within sheltered housing had decided to no longer subscribe to housing support. Both informants felt that these circumstances presented providers with a dilemma. In one case, the provider had disconnected the alarm system within the resident’s home, but was unsure what else could be done, for example it would be impossible to prevent the resident from attending social events organised by the scheme manager within the scheme. Another provider was facing a similar problem where a resident no longer wished to purchase housing support services. Both informants were hopeful that these would be isolated cases, however they felt that if this became a trend it would present considerable difficulties.

### **Choice of tenure**

7.41 Given the survey results indicated that almost 40% of both local authority and housing association sheltered housing residents had previously been home owners we explored preferences for tenure in the interviews and focus groups, particularly with those people who had sold properties prior to moving to sheltered housing. It would appear from the discussions with those who participated in this review that retaining a stake in the house market was not a primary concern. (although it should be noted that we did not meet any residents in private sector schemes). People were more concerned about finding an

accessible, safe home that was in a convenient location, where there would be help if they needed it, regardless of tenure.

7.42 Motivations for moving were often around the location of particular schemes. People were eager to move to locations with better access to mainstream facilities (this was particularly the case with participants in rural areas), or because a particular scheme was nearer to family members. Respondents also reported that their previous homes were too big, or presented difficulties in access both to the home (e.g. stairs up to a flat located on a steep hill) and within the home. In addition some people did not want “the bother” of being responsible for the maintenance of a property. With one exception, no one we met regretted selling their former home.

7.43 Some people did, however, report that rent and associated charges were very high, and increasing year on year, and that they could be paying a mortgage with the money they were spending. Paying rent, especially if people had owned their properties outright for a number of years, could come as a shock. One respondent remarked that because of the increases in house prices since she had sold her property, it would be impossible to move back into home ownership (at least it was certainly not possible to buy the type of property she had sold). There was some discussion in one group about the current charges in the scheme and how people might be financially better off elsewhere. However, one respondent pointed out that private sector sheltered housing also levied considerable service charges, so the private sector was not a cheaper option.

## **Summary**

7.44 Interviews and discussion with residents offered further insights. Again most residents were eager to say they were happy with sheltered housing. Where there had been changes to the warden services, these were deeply unpopular, as highlighted by the survey responses. It was also clear that many people did not understand what was meant by “housing support”. Some were not clear what the different charges were for. In addition residents were concerned about how the out of hours services operated, and many were reluctant to use the community alarm systems. With regard to choice of tenure, those residents we met who had previously been home owners did not regret selling their former homes, however there were concerns about the affordability of rents and service charges particularly for those who were self-funding.

## **SECTION 8           EXTERNAL IMPRESSIONS OF SHELTERED HOUSING**

8.1     Given the perception among many providers that sheltered housing is “less popular”, part of the remit of this review was to explore attitudes to sheltered housing among older people who do not live in sheltered housing, and to talk to younger older people about their future housing plans, and to ascertain what – if anything – would make sheltered housing more attractive. We held four focus groups: two with older people from Black and Minority Ethnic (BME) communities, one with older people with disabilities who were not living in sheltered housing, and one with younger older people.

### **Older people from Black and Minority Ethnic Groups**

8.2     In the future, there will be growing numbers of older people from Scotland’s BME communities. A question for this review was to explore what would make sheltered housing a more attractive option for older people from BME communities. In the early part of 2007 two focus groups were undertaken with older people from BME communities. The groups were held in Glasgow and Edinburgh. Seventeen older people from the Indian, Pakistani and Chinese communities participated, with the assistance of interpreters. Three participants already lived in sheltered housing schemes. Others were living in a range of different situations including living alone, living with their partners, and/or with other family members. One participant moved regularly to stay with each of his sons, and said he could either be described as “homeless or as having four homes”.

### ***Experience of sheltered housing***

8.3     The small number of participants who were living in sheltered housing said that on the whole they were happy with their accommodation.

*“I like living in sheltered housing because I feel safe, have good neighbours, with great transport links and many facilities nearby. I have an alarm system and I know if I needed help in an emergency someone will be there.”*

8.4     One participant noted that although you do get help in sheltered accommodation, family support is still very important. Another participant living in a small flat said it was difficult for him to host his daughter if she came to visit from Pakistan because there was nowhere for her to stay. Because of the distance, visits tended to be quite long, and guest room accommodation was not suitable if numbers of visitors came from abroad for longer stays. He felt this was a limitation of his accommodation, although otherwise he was happy.

8.5     Some participants had friends who lived sheltered accommodation, and while sometimes experiences had been positive, others had found it difficult. In particular, there were issues about language and associated difficulties in communicating with staff and other residents (although this was also a concern with home care services). Cultural beliefs and practices were also not always fully understood by staff and other residents. These could be quite simple things, like eating with your hands as opposed to using a knife and fork.

### ***Knowledge and impression of sheltered housing***

8.6     With the exception of those few people who lived in sheltered housing or knew someone who lived in sheltered housing, most of the participants knew very little about sheltered housing and were interested in knowing more as the discussion in the group



progressed. Although many had not thought particularly about moving in the near future, others were thinking ahead, and some were already experiencing some difficulties in their current accommodation. People talked about needing a smaller property in the future that would be easier and cheaper to maintain and heat, and be more accessible. Choice of location was also important for retaining links with family, but also to access culturally appropriate shops and facilities such as places of worship, and community centres.

*“I would move because we cannot maintain the flat we are living in, so a smaller, modern property which will be cheaper to look after, and cheaper in the long run to heat. If I was to move, the highest priority would be being close to family and easy to shop nearby.”*

### ***Family attitudes***

8.7 The idea of sheltered housing seemed attractive to some people, but less so to others. Family and expectations of families were a focus of some discussion. In one group participants discussed how it was not always the best thing for the older person to live with their families. If the family was out all day at work, older people could become isolated. Overcrowding too could be an issue, especially if there were young children and growing families. Similarly, the physical aspects of the family house – such as steps and bathroom facilities – were not always suitable for older people. It could be difficult however, for an older person to suggest that they should have their own flat. There could be considerable stigma attached to the family if they were not seen to be looking after their parents, even if their parents would prefer to have their own independent accommodation. In the second group participants felt that it was no longer the case that older people could depend on their families to look after them as they got older. Sometimes younger people did not want to look after their parents, and sometimes they simply could not. Some people felt that there needed to be a discussion of older people’s needs within the different communities that took account of social change, and changing aspirations of both younger and older people. Moreover older people should be encouraged to think about their futures, and make plans.

### ***Making sheltered housing more attractive to older people from BME communities***

8.8 When asked what would make sheltered accommodation more attractive to people from BME communities, participants discussed a number of ways in which sheltered housing could better meet their needs. Language was the key factor. Although some people were very comfortable and fluent in English, others were not, and language was a major difficulty for them. However, even those who were comfortable in English felt that having both staff and other residents who spoke their mother tongue, and shared their cultural beliefs and practices, was very important, for both offering assistance and addressing needs, but also for socialising and making friends. It was noted that often older people are dependent on family to act as interpreters, but that this was not always desirable when people had things they wished to discuss that they might not want their family to hear. Alongside staff with language skills, participants also felt that schemes needed to address cultural beliefs and practices, for example, the preparation of particular kinds of food and drinks.

8.9 Services need to recognise the diversity of different cultural practices in different communities. For example, one Indian lady had been offered Halal food in hospital, because staff assumed that all Asian people would eat Halal food, which of course is not the case. In another example, an elderly lady had been asked why she did not cut her hair to make it easier to manage, although this was not something she would want to do at all.

8.10 We also discussed whether people thought sheltered housing schemes intended specifically for people from particular cultural or ethnic groups to be more attractive options. There were mixed views about this. Some participants felt it was important for schemes to offer accommodation for different ethnic groups, otherwise they could be seen as ghettos. Nevertheless, such schemes had to be balanced with sufficient numbers of people from the same community to ensure people did not become isolated. For these participants it was important that services for older people from BME communities were part of the mainstream, and not something separate. Others, however, felt they would be more comfortable in schemes that were specifically for people from the same ethnic community, and if this was not possible, to ensure that there were sufficient number of people from the same ethnic community within individual schemes.

8.11 Some participants, although attracted by the idea of the sheltered housing (i.e. a more manageable home, and support services) wanted to remain living with younger family members, particularly if they had adult children who were unmarried. While they liked the idea of sheltered housing and the support it offered, they would like their adult children to be able to continue to live with them.

### ***Information needs***

8.12 It was clear that people did not know very much about the options that might be available to them. Information needs were discussed, and people talked about where they would go to find out more, suggesting the local council, or voluntary sector organisations that they knew about. But as one participant pointed out, if you do not what is available, you do not know what to ask for. Workers in the organisation that had helped to arrange the focus groups felt that compared with services for BME people in England, Scotland lagged behind. They had concerns for older people who lived outside the two major cities, as they felt there was very little support for older people from BME groups outside of Glasgow and Edinburgh. Information about the type of housing and support that was available was crucial, and the absence of this information was a barrier to older people accessing services.

### **Older disabled people**

8.13 In the focus group of older people who did not live in sheltered housing all the six participants were home owners. Most had a disability or long-term health problem, and all lived alone. Most of the participants had adapted their homes in some way, sometimes just to make things easier as they got older, and sometimes because of a particular problem. These adaptations ranged from the relatively simple things such as handrails through to more extensive and costly items such as walk-in showers. The adaptations had not always worked as intended.

### ***Impressions of sheltered housing***

8.14 In principle the participants in the group had nothing against sheltered housing. Most of the participants knew people who either lived in local sheltered housing schemes or in schemes further afield. They could see the advantages of sheltered housing, which were perceived to be help and assistance and companionship. One participant talked about a friend who had recently purchased a sheltered flat from a large housing association:

*“She has a good social life, that’s what makes up for it, and she has a gentleman friend, you know, a companion, so it’s opened up her life for her, so that is the positive side for her, and the security’s very good.”*

8.15 On the less positive side, some participants felt that their privacy might be compromised in a sheltered housing scheme. They knew of schemes where the flats were small, and where maintenance had been a problem. One participant cited an incident where it had taken three weeks to repair a lift in a local scheme, leaving residents on upper floors stranded and unable to go out. Participants were also aware that warden services had changed, and in many cases been reduced, so there was a feeling that sheltered housing was perhaps not all that it once had been. In discussion they all felt that an on-site warden was very important.

*“Now they [local sheltered housing scheme] had all the wee wardens’ houses, and they were there all the time, but they’ve done away with that.”*

*“When she [family member living in sheltered housing] was in at first, they had wardens, it was wonderful, they had days out, and the cooking staff would make special meals, and they would have a wee bring and buy, and everything was lovely, and then money took over, management moved in, and they shut it back, done away with the wardens as such, they have a women for a few hours. She has to pay to get a shower, she books somebody for an hour, which she pays for, but they only come for twenty minutes. Now she’s frail she’s 86, and she says, now wait a minute, and they say, but M, we’re short staffed, and she says but I pay you for an hour.”*

8.16 Most of the group said they might perhaps consider sheltered housing in the future, however several participants stressed they were very happy in their current homes, and that leaving would be a terrible wrench. People spoke about good neighbours, being in convenient locations, having enough space for visitors to stay. As noted above, every one had made some adaptation to their home, and others had chosen their current home because it would be easy to manage as they got older. For many of the group there were no particular incentives to move.

*“The appeal [of sheltered housing] is that you have someone there, and you have company to a certain extent, ..... with no one else in the house, you feel insecure, but I know it’s there if I need it, I know where they are, but at the moment no...”*

*“The bungalow has two bedrooms, a small green house - which is my enjoyment. When we moved, my husband said it had to be on the flat, we were getting older”.*

8.17 The group also talk about a late friend that had been offered three different sheltered housing places.

Participant 1: *“But the bottom line was that she didn’t want to move her house.”*

Participant 2: *“It was more her cat .....”*

Participants 1: *“Her cat was the excuse, the cat is still in that house, an empty house, and a neighbour feeds it”.*

Participant 2: *“She didn’t want to go, they’d bought that house, and her husband had done to it what they wanted.”*

Participant 3: *“It’s such a wrench to leave your house”*

8.18 One participant had already investigated local options, and had been offered a number of different properties but had refused them all, usually on the grounds of size, sometimes in combination with very obvious accessibility issues. He also remarked that in some cases he had not been allowed to view the flat prior to accepting the offer, and was not going to agree to move to something that he was not allowed to see first. Another participant, who was blind, was eager to know about sheltered housing, particularly schemes that would be suitable for someone with a visual impairment. She felt that there were not enough options for people with visual impairment. She had lived in her current home for many years and was happy with her flat – it was all to her liking – and home carers came in to see her everyday. Although neighbours were helpful if she had any problems, there was not the old sense of community and sharing, and she was often lonely, especially as it was difficult for her to go out. Deciding on whether to move or not was a difficult decision for her.

*“And then again, it’s like any other decision you have to make, it making that first step, I mean you’ve always got to make a first step with a decision, right or wrong. I think maybe I would like a bit more company, and yet sometimes I prefer to be on my own. It’s a difficult decision...”*

### ***Making sheltered housing more attractive***

8.19 When asked what could be changed that would make sheltered housing more attractive, the group reflected on both the type of accommodation and the type of services that could be in place.

8.20 Although they recognised that in future it would be unlikely that schemes with bungalows would be built, many had a preference for ground floor accommodation. Lifts were viewed with some suspicion – the visually impaired participant felt she could not use a lift, and others were concerned about maintenance, and also fire risk. Privacy was important, although being part of a community and having company was thought to be a great advantage of sheltered housing. There were also discussions about designs that were appropriate for older people, and making sure designers understood older people’s needs. Another point raised regarded standardisation – making sure that schemes met basic minimum standards that were shared.

*“It’s [designer] got to be somebody that can understand the feelings of the elderly, their illnesses, and how they move about....”*

8.21 Perhaps the most important “pull factor” was the warden service. Participants were adamant that there should be on-site support. When asked about the using new technologies as a means of supporting older people, participants were highly sceptical. Community alarms were viewed with some suspicion, and participants did not like the idea of calls going through to Edinburgh, and then someone deciding what should happen.

8.22 A further point was that schemes should be for older people exclusively.

### ***Choice of tenure***

8.23 When asked whether choice of tenure would be an influence should they chose in the future to move to sheltered housing, there were mixed views. One participant felt that owning a property might allow more choice of when to move, and the property you could move to, as illustrated below:

*“We feel it would be better if they would build these sheltered buildings so you could buy them, so you could move in when you’re ready and chose which flat you wanted as such, rather than be allocated through the different channels, and have so many points or something. I don’t know how it’s done now, but I know when this place was built in [nearby town], it was supposed to work on a points system, and used to be allocated by the doctor who decided whether you needed to be in sheltered housing or in a home of that sort, but since then I think it’s changed...”*

8.24 Others, however, were put off sheltered housing not because it meant moving tenure but because they had did not want to leave their current homes, or they had concerns about privacy or the quality of the accommodation. Tenure did not appear to be a particular consideration. Another participant (the participant who was visually impaired and received personal care twice a day at home) was adamant that she would sell her home and move to sheltered housing if it offered the care and support she needed:

*“I would sell my house to go into sheltered housing – I’ve talked to my daughter about this – if it has a warden, because after all we will be needed care and every scheme doesn’t have a warden, but I wouldn’t hesitate to sell my house..... if you need care and by selling your house you get it, why not do it, why deprive yourself to leave to your family, if you’ve given them a good chance in life, it’s up to them to make the most of it, so why, why deprive yourself to leave to them? . This is a view that is shared by my children....a great deal depends on the family’s outlook, not the person’s outlook, the family’s outlook.”*

### **Better information**

8.25 It was clear from the discussion that although some participants would know how to find information about available sheltered housing schemes, others would not. Given that this group were all homeowners, some people were not sure how to go about contacting the council and others did not know what a housing association is. People were also unclear about the process of applying for rented property, and some believed that you would only be allocated a place if you were ill or eligible for benefits. Although in theory councils could provide relevant information services on housing options, one key stakeholder pointed out that these require funding and may not be seen as a high priority locally.

### **Younger old people**

8.26 With the group of younger old people we discussed their future housing choices and their views about sheltered housing. Some of the participants were owner occupiers, but others lived in rented accommodation. Most people felt that they would probably need to move to more accessible properties and/or locations as they got older. They were not optimistic, however, about the choices they would have.

8.27 An important concern for this group was affordability. Choices were felt to be limited for homeowners and for people who were renting. Suitable (i.e. more accessible) properties to buy were expensive, for example bungalows would be out of the price range of most of the owner occupiers in the group. One participant who had bought her council house explained that when the Right to Buy had been introduced, it had been cheaper at that time to pay the mortgage than to continue paying rent. However the equity in her property was not enough

to purchase private sheltered accommodation or a more suitable type of property such as a bungalow, thus renting a property would be her only option should she need to move. This would be expensive, particularly as releasing her housing equity would disqualify her from receiving benefits. Within the group there were mixed views regarding whether home owners should be able to access to local authority sheltered housing. Some felt very strongly that if people had a property to sell, they should not be able to move into schemes that were subsidised.

8.28 Suitable properties to rent (from the council or housing associations) were also thought to be difficult to find. One participant with a disabled partner had tried to be rehoused in a more suitable property, and it had proved impossible, because such properties were in short supply and there was great demand.

8.29 Access to local shops and services, and transport links were also considered important. In the particular area where there were many small, relatively isolated villages, transport services were considered to be poor, and often smaller communities had very few local shops and services. Not only would it be difficult to find an accessible property, it would be difficult to find a suitable property in the right location.

8.30 Security was also an important concern. One participant had moved as the result of anti-social behaviour and harassment. The group were eager to ensure that older people's housing should be in "good" areas where they would not be victims of crime or abuse.

## **Summary**

8.31 Older people who do not live in sheltered housing can understand the attractions of sheltered housing, and many thought that it might be an option they would consider for themselves, however there concerns about size of dwellings and the accessibility of sheltered housing and maintaining privacy. Contentment with their current homes underpinned people's decisions not to move. For older people in BME groups, it was clear that there was a lack of knowledge about sheltered housing, however it is an attractive option for some people. It would be wrong to assume that all older people in BME communities want or can live with younger family members. The presence of staff with language skills and understanding of cultural beliefs and practices would make sheltered housing more attractive for older people from BME groups. Similarly having a significant number of other residents from the same community would enable people to have a more active social life. Views were mixed as to the desirability of having schemes that were entirely for people from one ethnic group.

## **SECTION 9: THE CHANGING ROLE OF SHELTERED HOUSING**

9.1 Reflecting on the different elements of this review, it is clear that sheltered housing has undergone a number of changes. Perhaps the most notable and far reaching are the changes to warden services (including reductions in hours worked by wardens, and changes to the role of the warden), and increases in services charges to residents. These changes however are not uniform across all providers. It appears that some providers are still determined to provide 24 hour on-site cover. Others however have implemented significant reductions to the hours of warden cover provided in their schemes. Moreover, increasing numbers of providers are beginning to develop very sheltered housing schemes either as entirely new schemes or as re-developed existing sheltered provision. Again, these developments are not taking place uniformly across Scotland, and the responses to the provider survey indicate that there is no single blueprint for very sheltered housing.

9.2 Responses to the provider survey identified a number of different factors that, in combination, are driving changes to sheltered housing. These fall into four broad inter-related groups – new regulation, funding issues, new and alternative service developments, and supply and demand factors. In this section we reflect on the drivers for those changes, how provider organisations have responded, and how these changes have been received by residents.

### **New Regulation**

9.3 Providers noted new regulatory requirements which had led to changes in sheltered housing provision and were presenting particular challenges. These were:

- Impact of the European Working Time Directive and UK Minimum Wage Legislation on warden services;
- Scottish Social Services Council requirements for qualifications for housing support staff, including wardens, with their potential impact on recruitment and the additional costs associated with training, particularly for staff replacement/cover;
- Requirements to meet Care Commission standards, and annual inspections;
- Administrative pressures and the extensive effort associated with performance reporting to Supporting People, the Care Commission and Communities Scotland;

9.4 Of these, the European Working Time Directive (and, to a lesser extent, the Minimum Wage Legislation) had generated the most profound changes to sheltered housing. As a result warden services had been reviewed, and most providers had decided it was no longer possible to provide 24 hour on-site warden cover, as it would be too costly. Consequently, warden cover is now most usually provided at given hours through the day, and in some cases there is no on-site cover at weekends. Community alarms provide the links to out-of-hours cover. In conjunction, the requirements of Supporting People to clarify sheltered housing services had meant that the role of warden was more clearly defined. Although some providers were uncomfortable with the changes, most were not, and indeed welcomed the opportunities to review services. It has already been noted in Sections 6 and 7 that residents of sheltered housing have not welcomed the changes to the warden services.

9.5 Many providers also noted that the Scottish Social Services Council requirements for housing support staff to be qualified were creating difficulties. Many reported the difficulties

in finding a suitable training course, as most focused on skills required by home care staff rather than housing support staff. Moreover, the numbers of staff that needed to be trained created funding difficulties as well as problems in providing cover while staff were away.

9.6 Care Commission inspections, and what were generally perceived as the onerous requirements of performance reporting for Supporting People, were also generating additional pressures for providers. This was felt at all levels in provider organisations. Many wardens we met were frustrated by the increasing levels of paper work which reduced their capacity to spend time with residents. In addition, housing associations operating in a number of local authority areas noted that requirements for inspection were different in most local authority areas - as one noted, “they ask the same set of questions in six different ways”. Many also felt that Care Commission inspectors appeared to unclear about the role of sheltered housing, and how sheltered housing could be “inspected” in a meaningful way.

### **Funding Issues**

9.7 Most providers reported shortfalls in funding for sheltered housing. These were due to:

- Falls in (and uncertainty about) levels of Supporting People funding and the implications for housing support services for older people;
- Lack of financial resources including capital resources for investment and remodelling and revenue funding for service development.

9.8 Although the Supporting People programme has had profound effects on sheltered housing, it is important to note that it was only one of a number of factors that providers felt were driving changes. In some areas, local authorities were reported to be more supportive of sheltered housing than in others, and consequently they were more willing to fund services. Some key informants also felt that estimates of the costs of services made in preparation for the introduction of Supporting People (“sizing the pot” or the period of Transitional Housing Benefit) had been hurried and proved inaccurate; consequently there had been winners and losers in terms of Supporting People funding allocations. The expected falls in levels of Supporting People funding nationally, along with local uncertainties about future levels of funding, are undoubtedly creating considerable difficulties for providers. Some providers questioned whether current and already reduced levels of housing support could be maintained in the future, although given uncertainties about funding, they were unclear about what further changes would be required. Nevertheless, some organisations had welcomed the opportunities that Supporting People had provided for developing tenure-neutral services and for reviewing sheltered housing provision in the wider context of older people’s service more generally.

### **New Service Developments**

9.9 Alongside changing regulations and funding issues, new service developments were raising questions about the future role of sheltered housing. These included:

- Promotion of independent living and the associated move away from care homes;
- Increasing opportunities to provide home support, thus reducing demand/need for sheltered housing;



- Improving technology and availability of aids/adaptations to enable people to remain in their current home;
- Introduction of Free Personal Care;
- Need to provide support on a peripatetic basis rather than linked to a housing scheme;
- Development of extra care housing.

9.10 New service developments, particularly those designed to enable people to stay in their own homes, were seen to be changing the profile of applicants to sheltered housing. It was felt that sheltered housing was no longer such an attractive option to older people when there were greater opportunities to receive services (for example community alarms) or have aids and adaptations that could support independence at home, along with community services to reduce social isolation (for example, via day centres). Alongside increasing numbers of services delivered at home, there was a new emphasis on promoting independent living for older people who previously might have entered residential care. Consequently many providers noted that the profile of applicants was changing, and applicants had more complex needs and were generally older than had previously been the case. These observations, as well as the growing numbers of sheltered housing residents who were getting older and needing more assistance, were generating the interest in the development of very sheltered housing.

9.11 Many respondents highlighted the need for a national strategy to guide local decision making and planning, and the coordination of strategies across older people's services generally to provide clarity about the role of 'traditional' sheltered housing and how it relates to other types of service provision, particularly the new enhanced models of housing with care and home care services.

### **Supply and Demand Factors**

9.12 In addition, historic patterns of supply of sheltered housing did not meet current and changing patterns of demand.

- Changing expectations and perceptions of older people were leading to voids in some schemes;
- Need for new developments – especially for very sheltered/extra care provision to meet needs of the increasing numbers of frail older people;
- Mismatch between supply and demand – some respondents reported lack of demand; others reported the lack of suitable housing including sheltered housing for older people.
- Increasing numbers of existing tenants with high levels of frailty, and the increasing age and complex needs of new applicants;
- Older people wanting to retain housing equity rather than rent;
- Older home owners with insufficient housing equity to purchase private sector provision.

9.13 Levels of demand have been considered in some detail Section 4, however it is also important to emphasise that most providers felt that the types of demand and needs of residents and prospective residents were changing. As noted above, opportunities to receive services at home were influencing the choices made by older people. Also many noted that new and future generations of older people were used to higher living standards, and had different attitudes toward service provision.

9.14 Despite shared perceptions about the need for sheltered housing to change, respondents had differing views about the future of sheltered housing, as illustrated by the comments below, indicating a lack of consensus regarding how sheltered housing should change, and its position on the spectrum of care services for older people.

*“I don’t think sheltered housing has a future. When it was developed in the 60s/70s the idea of a good neighbour to help out in emergencies was relevant and appropriate. Now with changes in expectations about service, changes in legislative requirements and our greater ability to support people in their own homes for longer I think that it has had its day.”*

Local authority provider

*“The most significant national challenges relate to the balance of care changing from long term care homes back into the community and older people having more say about remaining in the community for as long as possible. Resourcing is an issue and more funding is required for community care services and housing costs, especially the provision of more sheltered housing, more very sheltered housing and more extra care housing. Due to current perceptions this should take the form of new build rather than conversion of existing properties.”*

Local authority provider

9.15 It was also clear that different provider organisations were at different points in their strategic thinking and service development. For example, one respondent reported an on-going strategic review of sheltered housing that would inform the future direction of local services. Others, however, were much further on in their thinking, and were already transforming and developing services in what they felt were innovative ways to meet changing needs.

*“We believed that the demand for the current model of sheltered housing is in longer term decline. In [Local Authority] we are developing a “core and cluster” approach for existing schemes in which “warden”, community alarm and communal facilities will be shared between residents and the other older people living in the vicinity in their own homes irrespective of tenure. We are also developing a “virtual” sheltered scheme using peripatetic “warden” services, enhanced community alarm services with videophone communications to facilitate social interaction, and transport to a central community facility for communal activities. However, we believe the future lies in developing services which will bring many of the benefits of sheltered housing to people in their own homes.”*

Local authority provider

9.16 Given the relatively small market in private retirement housing in Scotland, it is useful to note that the main private sector provider had no doubt that the market for private sector developments would continue to grow. The main difficulty for private developers was the difficulties in finding suitable sites for development. There was little evidence of lack of demand for this type of property. There is also a growing interest within the private sector in providing extra care or retirement housing with enhanced levels of care as it was felt that it

would be extremely difficult to remodel existing private sector provision, and that private sector housing with enhanced care would require new sites and new developments.

## **Summary**

9.17 Most providers felt that recent changes to sheltered housing had been driven by a number of compelling and inter-related factors. Of primary significance were: the new regulations and legislation, particularly the European Working Time Directive; reductions and changes in funding and uncertainties around the future levels of Supporting People funding; new and alternative service developments that allowed older people the opportunity to remain in their own homes for longer; and changes in both levels and type of demand for services. Although there was general agreement about the drivers for change, the types of changes made by providers to services were varied.

## **SECTION 10: CONCLUDING OBSERVATIONS**

10.1 Drawing on the different elements of the review, there are a number of concluding observations that can be made. In this final section we address a number of the most key issues, and reflect on the implications for the future of sheltered housing in Scotland, and what further thinking and action need to be considered by the Scottish Executive and Communities Scotland. Key issues include:

- Diversity of provision;
- Continuing popularity of sheltered housing with residents;
- Promoting realistic expectations of sheltered housing;
- Nature of current and future demand;
- Requirement for additional funding;
- Remodelling and changes to provision
- Future role of extra care housing.
- Implications of changing patterns of tenure;

### **Diversity of provision**

10.2 The review demonstrates very clearly that the provision of sheltered housing and very sheltered housing in Scotland is extremely diverse. As can be seen in Section 2, different areas have different rates of provision per head of population aged 65 and over. Housing associations provide the greater part of provision in some areas, but not in others, where local authorities remain the main provider. Private sector provision is generally located in the more urban areas, particularly in central Scotland. Space standards, the quality of accommodation, and facilities available in different sheltered housing schemes also vary considerably. This is only in part related to the age of schemes, but not to whether schemes are managed by local authorities or housing associations. Responses to both the provider and resident survey demonstrate that services are also highly variable (for example, in terms of hours of housing support provision delivered to different schemes, how on-site night cover is provided, staffing levels). Charges and rents also vary greatly for seemingly similar provision. These differences can be observed between and within different provider organisations. Provider organisations are also very different. Housing associations themselves vary in size and in the scale of their operations, with some of the bigger national associations operating across Scotland, while others are much smaller with a predominantly local focus. The thirty two Scottish local authorities have historically taken different approaches to the provision of sheltered housing and rural and urban authorities face different challenges. It is important to note that as private sector sheltered housing has largely been developed by McCarthy and Stone, using a very similar template for all their schemes, there is perhaps less diversity among this type of provision, although it is clearly serving a very different client group (as can be seen from the residents' survey). In comparison with local authority and housing association properties, private sector provision is relative new. On-site services are also different, and appear to be more limited than the type of support available to residents in housing association or local authority schemes.

10.3 This multi-dimensional diversity makes it problematic to make generalisations about sheltered housing or indeed the future of sheltered housing in Scotland.

## **Continuing popularity of sheltered housing with residents**

10.4 In contrast to (and despite) the diversity of provision, the review also shows very clearly that sheltered housing remains very popular with residents. This is not to say that residents are entirely satisfied with all aspects of sheltered housing, as the responses to the survey and discussions with residents indicated (see Sections 6 and 7). Nevertheless, very few respondents to the residents' survey (16.5%) agreed with the statement, "I would rather be living in an ordinary home than in sheltered housing" (see Table 6.14), and 93 per cent agreed with the statement "Sheltered housing is a good service for older people" (see Table 6.14).

10.5 In addition, those older people we met who did not live in sheltered housing had – on the whole - positive attitudes towards sheltered housing, and for some it was indeed an option they might consider for themselves at some point in the future. Similarly, the focus groups with older people from BME communities suggested that the concept of sheltered housing was appealing to some (although not all) participants. Crucial to increasing the appeal of sheltered housing for older people from BME communities are the presence of staff who could speak to people in their own language, services that demonstrated understanding of different cultural practices and spiritual beliefs, and a significant number of other older people from the same communities to reduce social isolation and loneliness.

10.6 It is the combination of independence and security that makes sheltered housing attractive to older people, as well as opportunities for greater levels of companionship and socialising. Independence is closely related to having your own front door and private space. Conceptions of security are more complex and do not just encompass feeling safe in and around the scheme. Security is about knowing help is at hand, that if there are problems with maintenance and repair someone will help, that your neighbours will be likely to have a similar outlook and life style, and of course security of tenure. For many older people, effective warden services are at the heart of feeling secure, are greatly valued by sheltered housing residents, and are key to making the service attractive to older people. As previously noted, the frequently reported reductions in warden services have not been well received by residents.

10.7 The responses to the provider survey were often in sharp contrast to the views of residents. Many respondents felt that sheltered housing was an out-dated form of provision, noting the sometimes poor accommodation standards, the introduction of new models of service delivery that enabled people to stay in their own homes for longer, problems with voids, and so forth. Some felt that future generations of older people will expect more, particularly in regard to accommodation. Many noted, however, that their own in-house surveys and recent inspections demonstrated high levels of satisfaction among residents.

## **Promoting realistic expectations of sheltered housing**

10.8 It is clear that there is a great need to promote a better and more realistic understanding of what sheltered housing can do for individuals with different levels of need. Similarly, the role of the warden needs to be more clearly defined to residents and to other service providers. Given the diversity of provision, it can only be confusing for residents (and prospective residents)

10.9 As noted in Section 7, many residents did not fully understand what different service charges covered or what housing support services were. Key informants also noted that the

expectations of families, and crucially of other service providers regarding what sheltered housing could offer particularly to people with high levels of support needs or challenging behaviours, were often unrealistic. Some also suggested that sheltered housing is associated with some stigma – the place to go when you can no longer cope on your own.

10.10 Many key informants remarked that even simple changes to sheltered housing schemes (for example, a new carpet or different colour schemes) are often resisted by residents. More profound changes such as reduction in warden services and the introduction of new technologies, are always going to be hard to introduce.

### **Nature of current and future demand**

10.11 As outlined in Section 4, levels of demand for sheltered housing were reported to vary. Results from the survey suggest that overall about 25% of both housing association and local authority sheltered housing provision in Scotland is perceived by provider organisations to be in low demand (see Table 4.1). However, this overall figure masks considerable local differences – with some areas suggesting that nearly all their provision is in high demand, and others suggesting nearly all of theirs is in low demand. Factors influencing demand are outlined in paragraphs 4.11 - 4.18, and include factors relating to individual schemes (for example, size of accommodation, location, accessibility), factors relating to individuals' particular choices and preferences (for example, being in a scheme near one's family), and other factors such as affordability, local level of provision, and the development of home care services and community alarms. Although these factors were echoed in the interviews with key informants, they also noted that demand could be unpredictable. Most informants could give examples of schemes which were very popular despite their age, small accommodation, and less attractive locations, and other apparently more attractive schemes which were more difficult to let. It was clear that demand can be unpredictable, and is influenced by a complex inter-play of different factors (including, for example, acceptance criteria and allocations policies).

### **Remodelling and changes to provision**

10.12 In response to changing patterns of demand, and concerns about the quality of the accommodation on offer in some sheltered housing, many providers were looking at how their existing provision could be remodelled. Again it is difficult to generalise about the form and extent of remodelling because of the diversity of existing provision and variation in levels of demand. In some instances, remodelling involved installing new kitchens and bathroom, double glazing and so forth, and was more general improvement and updating similar to that required in any dwelling. However other providers had embarked on more far-reaching re-modelling programmes. Broadly speaking, elements which were generally to be added to schemes that were to be remodelled included: community rooms and facilities, dining rooms and kitchens, and better access for people with disabilities, including installation of lifts, and improvements to individual dwellings. Usually the intention was to move towards extra care housing, and make schemes more suitable for older and frailer residents. In one case, the intention was to develop some existing schemes as a focus for older people's services in the local area, for example, including provision for day care and other services. Some respondents acknowledged that some existing schemes will not lend themselves to being remodelled. Not all sites will have room for expansion to develop additional facilities, and the design of some buildings will not allow for the additional features, such as lifts. Most usually in these cases, it was planned to either use the schemes for amenity housing for older people, or for a range of other purposes, including housing for

younger people. In some cases redundant schemes were going to be demolished, and the sites redeveloped. Note that the requirement for remodelling or refurbishment is not necessarily about the age of schemes. It would be too simplistic to suggest that all schemes built prior to a particular date are no longer fit for purpose.

10.13 A multi-disciplinary team of researchers (including architects, an occupational therapist, and social scientists) from University College London and King's College London have been investigating the benefits and challenges of remodelling sheltered housing and residential care homes to provide extra care housing in England. Ten remodelled schemes have been involved in the evaluation. Preliminary findings suggest that remodelling is not an easy or a cheap option. Particular challenges include carrying out building work while residents still remain in place with the associated health and safety issues, and underestimates of the extent of the work required. Frequently, significant and previously unrecognised structural problems came to light only once the remodelling process was underway, often increasing the length of the building programme and its costs. This study is due to be published later this year.<sup>16</sup> Its findings will provide valuable lessons regarding the costs and benefits of remodelling existing provision.

### **Requirement for additional funding**

10.14 It is clear that, among other drivers of change in sheltered housing, concerns and uncertainties about current and future levels of Supporting People funding are creating great difficulties for providers. Many questioned the long-term viability of sheltered housing if funding from this source continued to be reduced over time.

10.15 It is also widely recognised that considerable capital investment is needed both to develop new accommodation (especially for frailer older people) and to improve and remodel existing accommodation (possibly for use by other client groups). The amounts needed for these developments will depend upon local circumstances. Furthermore, additional capital funds will be needed for investing in aids and adaptations to existing properties and in telecare equipment for all types of properties for older people. Coupled with developing flexible needs-based support services, such investment will enable many older people to remain in their own homes for longer, rather than needing to move into housing with support and/or into residential care. It is also important that both capital and revenue funding are regularly adjusted and uplifted to reflect changes in demographics and in cost pressures. Many areas are (or will shortly be) facing considerable demographic challenges and many service providers highlighted the ongoing pressures on their revenue costs (e.g. those associated with meeting statutory requirements). One respondent referred to the need to act now to avoid a crisis in the future.

### **The future role of extra care housing**

10.16 Given that there will be growing numbers of older people in the future, particularly very old and very frail people, many providers felt that extra care housing was the way forward. They had also observed that existing residents of sheltered housing were growing older, and that new applicants had increasingly complex needs. They felt that the majority of older people want to remain in their own homes if they can, and this is increasingly being made possible by a growing range of home care and home support services. Extra care

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<sup>16</sup> For further information contact Professor Anthea Tinker, Kings College London.

housing will be better placed to meet the more complex needs of those who can no longer continue in their own homes.

10.17 Not all providers were enthusiastic about extra care housing. Some noted the very high costs of extra care housing, and the responses to the provider survey also show that this is not a cheap option (see Section 5). For residents who were self-funding, the costs and charges could be prohibitive, and several provider organisations noted that newly-opened schemes could be “slow to let”. They noted that even when applicants had defined needs, they did not always accept the offer of a place, usually on the grounds of cost. One provider gave an example of a scheme which, although intended for older people, had broadened its entry criteria to accept younger people with disabilities as they usually were eligible for more generous disability benefits and were therefore more able to afford to live in extra care housing.

10.18 It was not possible within the remit of this review to explore in great depth the various different ways that residents find their way into extra care housing, and the type of assessment tools that are most commonly in use. Shared assessment appears to be the main mechanism for entry, however it seems likely that the criteria for entry vary across different schemes. On-going work for the Joseph Rowntree Foundation suggests that entry and eligibility criteria for different types of housing with care schemes for later life vary enormously, with obvious implications for staffing levels (and therefore costs).

10.19 As we have seen from the analysis of the EAC database, there are currently 145 extra care or very sheltered housing schemes in Scotland, provided in the main by housing associations. Most of these are relatively new schemes. It seems that this type of provision is likely to increase, given the number of provider organisations who indicated their intention to invest in extra care housing in the future. It is difficult to know whether all the schemes offer similar types or levels of provision, or serve similar types of people. The small number of responses to the provider survey that offered details about extra care housing (see Tables 5.2a and 5.2b) indicate some diversity of provision (for example around the provision of on-site care teams).

10.20 There are clearly considerable expectations of very sheltered housing across the UK. A recent review of the evidence (Croucher et al, 2006) around new models of housing with care commissioned by the Joseph Rowntree Foundation highlighted the lack of a clear definition of what extra care actually is. The evidence base around extra care housing – limited as it is at present – suggests that some of these expectations may not be met. While the evidence demonstrates that older people greatly value the combination of independence and security offered by the new models of housing with enhanced levels of care, on key issues such as combating social isolation, meeting the care needs of the very frail elderly, offering a home for life, and cost effectiveness, the evidence is at best ambivalent, and raises doubts about the capacity of schemes to act as a substitute for residential care, and particularly to support people with dementia-type illnesses. A more recently published study (Valleley et al, 2006) further explores the capacity of extra care housing to support people with dementia.

10.21 It may be that in future the same questions that are now being raised about sheltered housing will be raised about extra care housing. It would also seem that very sheltered housing would benefit from a wider national evaluation in the Scottish context, taking account of, for example, the provision of Free Personal Care, issues around rural and urban areas. It seems that there would be value in setting up a research and/or practice network to



share experience of extra care developments in Scotland, and also draw on experience elsewhere in the UK.

### **Changing patterns of tenure**

10.22 Given the increase in owner-occupation in Scotland over the last 25 years, it might seem that in future home-owners will be very reluctant to become tenants. However, there is some evidence that people find home ownership increasingly burdensome as they get older, reflecting concerns about the costs and management of essential maintenance and repair (see for example, Hancock et al, 1999; Askham et al, 1999; Croucher et al, 2003). There is also some evidence that some older people, particularly the very old, or those whose properties are not particularly valuable and do not allow trading down (for example, those who have bought under the Right to Buy) are prepared to change tenure to escape the responsibilities and costs of home maintenance, and to release housing equity (Croucher and Hicks, forthcoming).

10.23 The survey of residents of sheltered housing showed that 42% of respondents owned their previous home. As might be expected, almost all residents of private sector schemes owned their previous homes. However, almost 40% of local authority tenants and housing association tenants had also previously been home owners. This is slightly higher than figures reported by the City of Edinburgh Council in their own Review of Sheltered Housing, where approximately 30% of those who were renting sheltered housing had previously been home owners.

10.24 There may be a number of factors at play here. It may be that there is simply not enough private sector sheltered housing to meet demand, and therefore people rent simply because they have no choice if they are seeking sheltered housing and associated support. The EAC database indicates an unevenness of provision in the private sector across Scotland. Discussion with the leading provider of private sector sheltered housing in Scotland indicated that it is highly unusual for there to be any difficulties in selling properties once schemes have been developed, and that the lack of suitable sites for development and planning restrictions limited private sector activity.

10.25 Affordability might also be a factor. Private sector sheltered housing might not be affordable to some older home owners, particularly those whose properties are in the lower end of the housing market (for example, ex-council properties bought under the Right to Buy). Similarly for those who might be looking to buy a more suitable property (not necessarily sheltered housing), there may not be an adequate supply of properties for example bungalows, or suitable properties in the right location, or at the right price. An alternative explanation, however, might be that home ownership is not necessarily the tenure of choice for some older people. As noted above, there is some evidence from other studies that this indeed might be the case. Informants also noted that many of the people on their waiting lists were home owners (often people who had bought under the Right to Buy), and in some cases were people already living in private retirement housing. Another alternative explanation might be that people will go to the service provider that is providing the service they want, regardless of tenure. Those older people we spoke to – both those living in sheltered housing and those who were not - were more concerned with the quality and accessibility of the accommodation, the location of the scheme, and importantly the services that were on offer (including the support services), as opposed to opportunities to buy properties.

10.26 With regard to future patterns of tenure, it would seem unwise to assume that all older home owners who seek sheltered accommodation will want to remain as homeowners.

## The future of sheltered housing

10.27 Through out the review process, a wide variety of suggestions were made for the future direction of sheltered housing, indicating that although there are common concerns, there is no consensus among housing providers as to the shape of sheltered housing in the future. The list below and the quotes that follow give some indication of how different providers saw the way forward.

- Reclassify sheltered housing that cannot meet the needs of frailer elderly people for other client groups;
- Invest in more extra care housing (remodelling and/or new build);
- Better space standards (e.g. second bedrooms) and design for new properties;
- Investigate smarter, more cost-effective ways of providing the support service elements (e.g. greater use of peripatetic wardens and enhanced community alarms services, including greater use of telecare);
- Good design to enable residents to socialise informally as well through organised activities in communal areas;
- Develop more “virtual” sheltered schemes;
- Develop the market for shared ownership of retirement housing (as many owner occupiers who were previously council tenants cannot bridge the gap between the value of their ex-council property and private sector retirement housing);
- More sheltered housing to meet the needs of ethnic minorities.

*“It is vital that sheltered housing is not seen in isolation from other housing options for older people. Priority needs to be given to preventative/low-level interventions to enable people to remain in their own homes rather than investment in specialist housing solutions. However, extending the role of sheltered housing to enable extra care provision or the development of “lifetime homes” complexes may be appropriate in some areas. Indeed, we have developed this approach in some of our schemes. However, increasingly intensive or intermediate care is being successfully delivered in people’s homes, removing the need for specialist accommodation. This would seem to be the direction in which the service users wish us to go.”*

Local authority provider

*“Although sheltered housing is generally popular with residents/applicants, the Council is unable to secure funds to build any more units of this type. Where properties are built on a hill or contain a number of studio apartments (very costly to amalgamate), it is likely that these properties will be demolished at some point in the future. The Council is currently looking at ways of meeting the aspirations of older people by providing/creating amenity housing within a multi-storey block of mainstream housing and providing a social space and base for support workers. It is anticipated that that this approach could address the existing/anticipated future shortfall of sheltered housing places.”*

Local authority provider

*“Our strategic review concluded that the traditional sheltered model is no longer fit for purpose. Where feasible, we are moving to an extra care model to obtain best value from purpose-built supported accommodation for older people.”*

Local authority provider

## **Recommendations**

10.28 Reflecting on the outcomes of this review, we would make the following recommendations or suggestions to the Scottish Executive:

### ***Strategic frameworks***

10.29 A key question for the Executive must be whether sheltered housing should be allowed to thrive or decline according to local plans or priorities or whether there should be some National Strategy. It seems that a National Strategy for sheltered housing in Scotland is not feasible given the enormous diversity of current and planned future provision. It is vital, therefore, that there are local strategic frameworks into which sheltered housing and very sheltered are placed, alongside other types of services for older people including general needs housing, social care, health and transport services. It is our view that sheltered housing still has a role to play in supporting the independence and well-being of older people.

### ***Minimum standard for sheltered housing services***

10.30 There is an argument for promoting a minimum standard for sheltered housing services to give greater clarity about the core services that should be provided within schemes, for example, hours of on-site warden services that should be provided, whether there is a handy man service, how out-of-hours services should operate. This is something that the Scottish Executive might care to consider. A minimum standard would also facilitate more accurate costing of services that would begin to give some indication of the level of investment required in service (as opposed to bricks and mortar) provision.

10.31 Note that sheltered housing remains very popular with those who live in it. It is the support element that makes sheltered housing attractive, and yet it is the support element that is being eroded. There needs to be some judgement regarding a suitable, and affordable level of support that offers older people the security they need and value.

### ***Levels of funding and investment***

10.32 Clearly there are requirements for additional funding if sheltered housing is to continue in its present form, and if the current stock of sheltered housing is to be maintained and improved to provide accessible and suitably spacious accommodation for older people now and into the future. Again the diversity of provision makes estimating the amount of funding required across Scotland highly problematic. More work could usefully be done to establish how much investment is required across Scotland, and how such funding might be delivered (for example, a special programme of funding that organisations might bid for if they can demonstrate need, and viability of schemes).

10.33 It is clear that the Supporting People programme has offered opportunities to review sheltered housing provision. The uncertainty over future levels of funding is leaving

providers (and to a certain extent residents) in limbo. This year-on-year uncertainty about funding should be resolved.

### ***Promote sheltered housing***

10.34 Older people –regardless of tenure – should be able to access good information about the housing and sheltered housing options available to them locally, in a range of formats (i.e. suitable for people with visual impairment, for people whose first language is not English). In one of our case study areas, work was almost completed on a Handbook of Sheltered Housing which explained the local authority provision, how to apply, what residents should expect, service charges and so forth. All providers should be able to offer their tenants and prospective tenants up-to-date information about their own provision.

10.35 Similar efforts should be made to inform other service providers about the role and potential of sheltered housing, and to place sheltered housing in local strategic frameworks. Because of its longevity, sheltered housing seems to be overlooked, and yet clearly greatly valued by its residents.

### ***Evaluate extra care housing and other new forms of provision***

10.36 Many believe that sheltered housing has had its day as a form of provision, and inevitably there is much interest in new models of housing with care, and in alternative ways of delivering services to the homes of older people.

10.37 Evidence suggests that very sheltered or extra care housing is not a panacea for all older people's housing and care needs. Moreover it is widely perceived to be an expensive option, particularly for those people who are self-funding.

10.38 Given the growth in extra care provision, some longitudinal evaluation of the effectiveness of extra care housing within the specific context of services for older people in Scotland is recommended.

10.39 Similarly, other types of service delivery for older people that are commonly presented as being alternatives to sheltered housing (see 10.27) and the reasons for its decline, could usefully be evaluated. Are the putative alternatives to sheltered housing any better or more efficient, or more popular with older people?

### ***Establish practice and research networks***

10.40 As noted above (10.12), research will soon be reported about the costs and benefits of remodelling sheltered housing provision. In addition there is a small but growing evidence base regarding extra care housing, and the rapidly increasing number of extra care schemes suggests practice is also developing. Opportunities should be created to share good practice, and learn from experience. An example of how this might be achieved in the Department of Health Change Agent Team's Housing Learning and Intelligence Network ([www.cat.csip.org.uk/housing](http://www.cat.csip.org.uk/housing)), which provides various opportunities for networking, reporting good practice and research findings around extra care housing.

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## **APPENDIX A: KEY RESEARCH QUESTIONS**

### **Phase 1**

- 1 To establish the supply and condition of sheltered housing stock in Scotland:
  - What is the distribution, by age and condition of sheltered housing across local authority areas?
  - What proportion of sheltered housing is in need of remodelling?
  - What proportion of sheltered housing could be classed as ‘extra care’ or ‘very’ sheltered housing?
  - What are the particular issues facing local authority, housing association and private sheltered housing providers?
- 2 To identify how and why sheltered housing developments are changing and to explore any barriers to change:
  - What are the key changes being made? (e.g. provision of extra care, meals, different cultural dietary requirements, different solutions to EWTD, remodelling, adaptations);
  - What have been the stimuli for these changes?
  - Where sheltered housing developments are not viable, what options are being taken forward re their future use, so that the capital investment in the physical buildings is not lost? (e.g. disposal to the private or independent sector for alternative housing use, use for an alternative model of care such as intermediate care, other).
- 3 To establish the costs to providers of developing, maintaining and staffing sheltered housing accommodation and costs of different types of provision:
  - What are the cost ranges for sheltered housing provision and what are the reasons for differential costs?
  - What aspects of provision do charges cover?
  - What are the costs to providers of providing existing services?
  - What are the costs to providers of any remodelling/changes which are required to address low demand/ meet future need?
  - Is any increase/decrease in revenue anticipated as a result of remodelling (e.g. bedsits to 1 bed flats means fewer units and less income)?
  - What do providers see as being the key funding priorities for sheltered housing? How do providers assess the long-term viability of sheltered housing?

### **Phase 2**

- 4 To identify issues relating to low or high demand within the sheltered housing stock:
  - What proportion (in each local authority area) of sheltered housing is in low demand/hard to let, adequately meeting demand, or has excess demand (with long waiting lists)?
  - What are the key factors which contribute to low or high demand/void rates and patterns?
  - Again, are there particular issues for specific geographic areas, and for particular urban or rural locations / area types?<sup>17</sup>
  - Why do properties need to be remodelled?

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<sup>17</sup> See for more information the Scottish Executive’s urban / rural classification <http://www.scotland.gov.uk/Resource/Doc/933/0034463.pdf>.

- What are the specific issues for local authority, housing association and private sheltered housing stock?
- Has the change in tenure to more owner occupation meant that fewer people are moving into sheltered housing/other higher levels of care such as very sheltered housing?

5 To identify and discuss the implications of the changing role of sheltered housing (for both providers and residents):

- What are the implications for providers? (Likely issues are the need to remodel existing stock, ability to provide more flexible and greater levels of care, how to respond to the European Working Time Directive. Any other factors should be identified, e.g. what are the key drivers for change for providers?);
- What are the implications for residents? (Likely issues are changes to role of Warden, increased use of alarm systems and assistive technologies/Telecare, changing profile of client group. Any other factors should be identified);
- What are the implications of, and issues with, providing housing management services (or caretaking) separately from support services?
- What are the implications in meeting needs for special diets, language support and culturally sensitive services?

6 To explore residents' experience of sheltered housing, including the impact of recent changes, costs, and aspirations for future housing:

- What are the factors which contribute to a positive or negative experience?
- Why do people choose to live in sheltered housing? Is it a positive choice or one made out of necessity?
- How are residents' experiences mediated by age, disability, health, gender, race, sexual orientation, language, religion or other personal attributes?
- How affordable do residents find sheltered housing? Do they consider it to be good value for money?
- Do residents have an accurate understanding of what they are paying for?
- Are there any key changes which residents feel would improve sheltered housing?

## **APPENDIX B: DEFINITIONS OF SHELTERED HOUSING**

1 A variety of different definitions are used for various types of housing for older people. Some of these are presented below as illustrations.

### **Scottish Executive Definitions**

2 The following definitions are taken from the General Notes and Guidance for completing the annual S1B return.

#### ***Very Sheltered Housing***

3 This form of housing (sometimes known as ‘care’ and ‘extra care’ housing) generally has all the features listed for sheltered housing, but will usually have special bathroom facilities. In addition, a greater level of care and support is offered through the service of extra wardens, full-time carers or domiciliary assistance and the provision of meals.

#### ***Sheltered Housing***

4 The design is based on the standards for general needs housing with the addition of the following features:

- The housing should be provided at ground or first floor level, or in blocks over 2 storeys high served by at least one lift;
- Space standards should be the same as for one or two person general needs houses;
- Handrails should be provided on both sides of all common access stairs, and on at least one side of all common access areas and passages;
- Bathroom doors should be either sliding or capable of opening outwards, and fitted with locks operable from the outside;
- Bathroom floors should have a non-slip finish;
- Handrails should be fitted beside the WC and bath/shower;
- A space heating system must be provided which is capable of maintaining a temperature of 21C when the outside temperature is -1C in the following parts of the house: living area, sleeping area, kitchen, bathroom, hallway;
- Light switches arranged to line horizontally with door handles;
- Socket outlets fixed at a height of at least 500mm above the floor;
- A warden service should be provided;
- An emergency call service should be provided connecting each house to a warden system.

#### ***Sheltered Wheelchair Housing***

5 The design is adapted to wheelchair standards but also has the features listed above for sheltered housing. It is for elderly people confined to wheelchairs, rather than for other such disabled people.

#### ***Amenity Housing***

6 The design is based on the standards of general needs housing with the addition of those features listed in 2.1 to 2.9 of the sheltered housing definition above. There is no warden, and a community alarm may or may not be fitted.



## *Community Alarm*

7 A system of alarms in more than one special needs house that is linked to a central point. This is either manned or temporarily supervised, or connected via a telephone link-up to a point where a response to a distress call can be guaranteed.

## **Bield Housing Association**

8 Bield is one of Scotland's biggest housing associations (see Appendix E). Its website ([www.bield.co.uk/housing\\_types/Index.html](http://www.bield.co.uk/housing_types/Index.html)) includes the following definitions:

### ***Retirement Housing***

9 Retirement housing is designed for more active older people. It is purpose built and designed to enable independent living. Accommodation will typically have the following facilities:

- Living room, bedroom, kitchen and bathroom or shower room;
- Barrier-free access and grab rails in the bathroom;
- Full central heating and good insulation;
- Security and safety features such as good locks and protective design, including smoke alarms;
- Emergency call system that gives 24-hour access to help through Bield Response 24.

10 Some developments have communal facilities such as a laundry and lounge. A manager will look after the development and property related matters. All repairs and maintenance are taken care of by Bield.

### ***Sheltered Housing***

11 Sheltered housing provides cottages or flats that are specially designed for older people combined with support and community facilities. Bield has a large number of sheltered houses at various locations in Scotland.

12 Sheltered Housing has all the design features of amenity housing and many more. Additional facilities normally include:

- A community lounge to assist social contact and companionship;
- A laundry complete with efficient and economic washing and drying facilities;
- A guest suite for use by friends and relatives;
- Enhanced security by controlled entry access and a full fire alarm system;
- A Scheme Manager provides support and assistance to tenants as well as managing the development.

(Some sheltered housing developments may not have a full range of community facilities.)

13 A higher level of support and service is available in sheltered housing, although personal care is not provided by Bield. Additional services include:

- A Scheme Manager provides support and assistance to tenants as well as managing the development;
- Cleaning of common areas;
- Maintenance of all shared areas, including the garden and grounds.

### ***Very Sheltered Housing***

14 Very sheltered housing provides cottages or flats that are specially designed for older people combined with support, community facilities and meals. Bield has a large number of very sheltered houses at various locations in Scotland.

15 Very sheltered housing is designed for older people who may require some assistance to live independently. It has all the facilities of sheltered housing and more.

16 A meals service is provided in an attractive dining room. There are more staff available than in sheltered housing to provide additional support where required.

17 In addition to the high quality of accommodation, extra facilities in very sheltered housing include:

- Communal lounge to assist social contact and companionship;
- A laundry complete with efficient and economic washing and drying facilities;
- A guest suite for use by friends and relatives;
- Enhanced security by controlled entry access and a full fire alarm system;
- A Scheme Manager provides support and assistance to tenants as well as managing the development;
- Additional staff cover to provide extra support as required;
- Cleaning of common areas;
- Maintenance of all shared areas, including the garden and grounds.
- 

### **Hanover (Scotland) Housing Association**

18 According to their website ([www.hsha.org.uk](http://www.hsha.org.uk)), Hanover (Scotland) has:

*“... designed a range of housing choices to meet the different support needs of older people.*

*Our sheltered housing developments offer residents a daytime Sheltered Housing Manager, extra security features and an emergency alarm system;*

*Very sheltered housing caters for the frailer, older residents through the provision of meals, additional communal area and 24-hour staffing;*

*For more active older people, we’ve developed amenity housing which provides residents with the security of the emergency alarm system but without a Sheltered Housing Manager.”*

19 The website describes Sheltered Housing developments as having the following features:

- Unfurnished flatted accommodation, self-contained with its own living room, kitchen, bathroom and bedroom;
- A daytime Sheltered Housing Manager Service throughout the week, assisting residents in the event of an emergency. (On some larger developments this service is also available at weekends.);
- Community alarm service cover when the Sheltered Housing Manager is off duty;
- Connection to Hanover Telecare or another provider of community alarm services;
- Control door entry system;
- Communal facilities such as laundries, guest room facilities and lounges;
- Grounds and gardens maintained by Hanover (Scotland).

20 Some developments have two bedroom properties and cottages.

21 Hanover (Scotland)'s very sheltered housing is specially designed to meet the needs which some older people may have or develop in later life. Very sheltered developments promote independent living, allowing frail older people to live in their own homes but at the same time providing peace of mind with the knowledge that extra care is available if required. Some of the facilities that the unfurnished flatlets offer are:

- An en suite toilet and disabled access shower;
- A kitchen area with sink, cupboards and facility for a refrigerator to allow snack preparation (not available on all developments);
- Own front door, letterbox and tenant control over entry to the development;
- A 24-hour alarm system.

22 As well as this, the developments offer:

- 24-hour staff cover on site;
- Meals in the communal dining room;
- Communal facilities like a laundry room, a lounge and quiet areas;
- Liaison with health and social work agencies.

## **APPENDIX C: MEMBERSHIP OF WORKING GROUP AND ADVISORY GROUP**

### **Members of the Sheltered Housing Review Advisory Group (SHRAG)**

Pat Bagot, Housing Support Team, Scottish Executive (Chair)  
Chris Taylor, Housing Support Team, Scottish Executive  
Ben McClory, Housing Support Team, Scottish Executive  
Kate Bilton / Lisa Taylor, Housing and Planning Research Team, Scottish Executive  
Jackie Wilkins, Communities Scotland  
Chris McAleavey, East Ayrshire Council  
Alister McDonald, Bield Housing Association  
Alice Farquhar, Viewpoint Housing Association Resident  
Agnes MacFadyen, Bield Housing Association Resident  
George Wilkie, Housing Association Owner-Occupier  
Walter Wood Hanover Housing Association Tenant

### **Members of the Review of Older People's Housing (ROOPH) Group**

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Tessa Brown, Communities Scotland  
Murdo Macpherson, Communities Scotland  
Chris McAleavey, East Ayrshire Council  
Jill Pritchard, Fife Council  
Douglas Edwardson, Aberdeenshire Council  
Ian Quigley, West Lothian Council / ADSW  
Andrew Sim / Helena Scott, Age Concern Scotland  
Lyn Jardine, Chartered Institute of Housing  
David Bookbinder / David Ogilvie, Scottish Federation Housing Association (SFHA)  
Gary Day / Steve Wiseman, McCarthy and Stone Developments plc  
Helen Murdoch, Director, Hanover Housing Association  
Alister McDonald, Bield Housing Association  
Rohini Sharma, Trust Housing Association  
Sandra Brydon, Viewpoint Housing Association  
George Wilkie, Housing Association Owner-Occupier  
Walter Wood Hanover Housing Association Tenant

## APPENDIX D: METHODOLOGY FOR DETERMINING THE CLUSTERS FOR ANALYSIS

- 1 The Scottish Executive produces annual 6-fold and 8-fold urban rural classifications.
- 2 The Scottish Executive Urban Rural 8-Fold Classification 2005-2006<sup>18</sup> comprises the following categories:
  - Large Urban Areas (LUA);
  - Other Urban Areas (OUA);
  - Accessible Small Towns (AST);
  - Remote Small Towns (RST);
  - Very Remote Small Towns (VRST);
  - Accessible Rural (AR);
  - Remote Rural (RR);
  - Very Remote Rural (VRR).
- 3 The classification shows the percentages of the population classed as living in these areas. Classifications are available for Local authorities, Health Boards and Parliamentary Constituencies.
- 4 Table D.1 (overleaf) shows the 8-fold classification for Local authorities, grouped into seven categories for this review. The grouping is inevitably arbitrary, but is intended to capture geographical and population density aspects and also to provide clusters with similar numbers of Local authorities. These groupings are used in the analysis of the EAC database to show if there are differences across different geographical areas of Scotland and between urban and rural areas.
- 5 Scotland has been divided into three geographical areas – northern, central and southern.
- 6 Four categories have been determined to capture the extent of urbanisation and rurality, based on the following definitions.
  - Very Urban:  $LUA > 60\%$
  - Mainly Urban:  $LUA < 60\%$  and  $LUA+OUA > 50\%$
  - Mainly Rural:  $AST+RST+VRST+AR+RR+VRR > 50\%$  and  $VRST+VRR < 100\%$
  - Very Remote:  $VRST+VRR = 100\%$

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<sup>18</sup> The 8-fold classification subdivides ‘remote’ (as used in the 6-fold classification) into ‘remote’ and very remote’.

**Table D.1: Composition of clusters used in analysis**

	LUA	OUA	LUA+ OUA	AST+ RST+AR+RR	VRST+ VRR	AST+ RST+ VRST+ AR+RR+VRR
<b>NORTHERN SCOTLAND: Very Urban and Mainly Urban</b>						
Aberdeen City	93	0	93	7	0	7
Angus	8	54	62	38	0	38
Dundee City	100	0	100	0	0	0
Stirling	0	53	53	46	1	47
<b>NORTHERN SCOTLAND: Mainly Rural</b>						
Aberdeenshire	0	27	27	72	1	73
Argyll & Bute	0	18	18	26	56	82
Highland	0	21	21	37	42	79
Moray	0	24	24	75	1	76
Perth & Kinross	1	32	34	64	2	66
<b>NORTHERN SCOTLAND: Very Remote</b>						
Eilean Siar	0	0	0	0	100	100
Orkney Islands	0	0	0	0	100	100
Shetland Islands	0	0	0	0	100	100
<b>CENTRAL SCOTLAND: Very Urban</b>						
East Renfrewshire	86	0	86	14	0	14
Edinburgh, City of	96	0	96	4	0	4
Glasgow City	100	0	100	0	0	0
North Lanarkshire	65	16	82	18	0	18
Renfrewshire	75	10	85	15	0	15
<b>CENTRAL SCOTLAND: Mainly Urban</b>						
Clackmannanshire	0	54	54	46	0	46
East Dunbartonshire	59	27	86	14	0	14
Falkirk	0	86	86	14	0	14
Fife	0	66	66	34	0	34
Inverclyde	0	88	88	12	0	12
West Dunbartonshire	50	49	99	1	0	1
West Lothian	0	71	71	29	0	29
<b>SOUTHERN SCOTLAND: Mainly Urban</b>						
Midlothian	0	66	66	34	0	34
North Ayrshire	0	71	71	25	4	29
South Ayrshire	0	68	68	32	0	32
South Lanarkshire	22	56	80	20	0	20
<b>SOUTHERN SCOTLAND: Mainly Rural</b>						
Dumfries & Galloway	0	28	28	72	0	72
East Ayrshire	0	37	37	63	0	63
East Lothian	25	0	25	75	0	75
Scottish Borders	0	27	27	73	0	73

**Notes to table**

\*Some totals appear incorrect due to rounding to the nearest percent.

## **APPENDIX E: OVERVIEW OF RECENT DEVELOPMENTS IN SHELTERED AND EXTRA CARE HOUSING IN SCOTLAND**

1 At present sheltered housing provides a way of meeting older people's accommodation requirements and support needs by combining the two into a single package. Although there are a number of definitions of sheltered housing, the term is generally used to describe a cluster of flats (studio and/or one bedroom) and/or bungalows, sometimes with communal facilities, to which a dedicated warden is attached.

2 Sheltered housing therefore falls part way along a spectrum of accommodation and support packages for older people. This spectrum ranges from amenity housing (e.g. in accommodation designed to be suitable for older people, but with no additional support provision) to extra care housing, which is designed to enable care and support to be provided within the person's home. Extra care housing may be an alternative to long-term care in a residential or nursing home for some frail, older people.

3 To better understand some of the issues currently surrounding sheltered housing, it is useful to provide a quick overview of its development over the last 50 or so years.

4 In recent years there has been a great deal of debate about the role of sheltered housing in Scotland in the early years of the 21st century. This is driven partly by demographic factors, but also by political aspects. For example, it is widely recognised and accepted that older people want to live as independently as they can in community settings for as long as possible. Technological advances, such as those leading to the development of sophisticated monitoring devices that are nevertheless simple to use and trigger a response from a call centre if an adverse event occurs, have the potential to enable far more people to live safely in their own homes for longer. There is also a strong national policy drive to reduce the use of residential and nursing homes by older people where possible (partly due to their high costs).

5 Sheltered housing was originally established in the 1950s and 1960s as a housing option for relatively healthy and fit older people with limited (or no) support needs and a wish to downsize from their under-occupied family homes. The provision of sheltered housing significantly increased in the 1960s and 1970s, as a greater proportion of "special needs" accommodation was built. Much of this sheltered housing was built and managed by local authorities, although in some areas voluntary and religious organisations played a role. The 1980s saw the further development of a considerable number of sheltered housing units, many of which were built and managed by housing associations. Sheltered housing residents rented their accommodation from their landlord. Development has been somewhat more sporadic since the 1980s, although the 1990s and early 2000s have seen increased provision by private sector providers of sheltered housing schemes for owner-occupiers. Currently over 5% of older people in the UK live in sheltered housing, which is more people than in residential and nursing care combined.<sup>19</sup>

6 The two main Scottish providers of rented sheltered housing – local authorities and housing associations – faced different sets of political and financial pressures. Local authorities, for example, tend to be highly politicised, resulting in some areas giving higher priority to, say, housing for young people and families, than to warden-supported sheltered

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<sup>19</sup> Sheltered Housing's Future: SFHA Discussion Paper, January 2005

housing. Section 89 of the Housing (Scotland) Act 2001 requires councils take the needs of persons with special needs into account when drawing up local housing strategies.

7 Different financial requirements meant that housing associations could build up funds (e.g. from rental payments) for maintaining and upgrading the capital stock (e.g. installing double glazing; replacing kitchens and bathrooms), whilst local authorities have to rely on annual capital allocations, which were always subject to many competing pressures. However, annual capital allocations are no longer issued in Scotland as, with the introduction of the prudential borrowing regime for housing in April 2004, councils are now able to borrow prudentially.

8 These differences were exacerbated by changes in the local authority boundaries in 1996/97 (resulting in some authorities “inheriting” decisions made by bodies that no longer existed). Furthermore, the introduction of Right to Buy (RtB) legislation in Scotland in 1980, whilst considerably widening access to owner-occupation, also tended to reduce the amount of new build undertaken by local authorities. The Housing (Scotland) Act 2001 made some fundamental changes to the RtB legislation, including enabling councils to suspend RtB sales for up to five years in areas of high housing stress. However, although tenants of sheltered housing are unable to buy their properties, the overall impact of the RtB legislation was to reduce council’s willingness to build new housing stock (at least during the 1980s and 1990s) as respective governments imposed spending limits on local authority capital allocations, which actively discouraged new build. In Scotland, RtB receipts were retained by the landlord and could be used to improve the remaining council stock and, or, pay off outstanding capital debt. These capital consents were gradually withdrawn from 1996 following growing concern about rising debt on Housing Revenue Accounts, the interest on which had to be serviced from rents - the principal source of income for housing providers. Housing associations with charitable status were outwith the RtB legislation, meaning that many housing associations have continued to build sheltered (and other) housing stock.

9 During the 1970s and 1980s attempts were made to try to determine an appropriate prevalence rate for sheltered housing provision in Scotland. The Scottish Office initially recommended 40 dwellings per 1,000 population. This was updated in the 1990s but subsequently dropped, as it was found not to be robust in towns with populations of less than 10,000. Nevertheless, these decisions are likely to have had an impact on investment in new sheltered accommodation during the 1970s, 1980s and early 1990s.

10 Other influences have been the changes in space standards since the 1980s and the introduction of Scottish Housing Quality Standard (SHQS) in 2004. The latter sets out the minimum quality standards for housing in the social rented sector. During the 1980s homes had to be a minimum of 30m<sup>2</sup> which was subsequently increased to 38m<sup>2</sup> and then to 52m<sup>2</sup>. Therefore many properties built in the 1980s (e.g. studio flats) fail to meet current space requirements. All accommodation in Scotland will have to meet the SHQS by 2015. It is likely that this will be less of a problem for sheltered housing managed by housing associations, as they face fewer pressures on accessing funds for remodelling than local authorities (although this may be alleviated by the prudential regime for local authorities), as well as tending to have more recently-built stock. It may well be more appropriate to demolish some existing sheltered housing and replace it with new build than to try to remodel it. In many instances former sheltered housing schemes are being replaced with extra care accommodation. Some funding for services provided to residents of such accommodation will be covered by free personal care entitlements.



11 More recent changes at a national level include the introduction of Supporting People funding in April 2003 to replace a number of funding streams<sup>20</sup> for housing support services. Supporting People funds are managed by local authorities. Their use is linked into local plans and strategies for aspects such as housing, community care, health improvement and social inclusion. Furthermore, although annual allocations have not always matched inflation, councils are nevertheless receiving considerably greater sums of money for housing support services than they were prior to the introduction of Supporting People. During the 1990s, funding warden could be problematic for councils if there was no local pooling of rents for such services. Furthermore, local authorities experienced a form of planning blight until Transitional Housing Benefit was introduced, which further restricted their investment in sheltered housing schemes during much of the 1990s.

12 A number of legislative developments have already been mentioned. Another important one is the European Working Time Directive, which has effectively altered the hours that can be worked (including the number on call) by Wardens. Thus even if a Warden lives within a sheltered housing scheme, they can only be available to residents at pre-determined times. In addition, the introduction of Supporting People funding means that sheltered housing schemes and their staff have to meet the inspection requirements of the Scottish Commission for the Regulation of Care. This places an additional burden on providers of sheltered housing.

13 Another relatively recent development (i.e. since the mid 1980s) has been the transfer by councils of some or all of their housing stock to one or more Registered Social Landlords. Whole stock transfers have taken place in Dumfries & Galloway, Glasgow, the Scottish Borders, Argyll & Bute and the Western Isles. Inverclyde Council is due to transfer its stock later this year. However, council tenants in Edinburgh, Renfrewshire, Stirling and Highland have voted against transfer. Stock transfer does not mark the end of a council's involvement in local housing as it will retain its strategic housing role and its statutory responsibilities to the homeless.

14 In recent years the age and needs profiles of sheltered housing residents have tended to change. Some residents, for example, have no support needs when they move in initially (although they may expect these to increase over time as they get older). However, a charge for the warden support is generally included within the rent or as a compulsory support charge, irrespective of whether or not the resident wants to receive it. This can cause some resentment, especially if the tenant is self funding, and may affect demand for such housing.

15 The final recent development that is likely to contribute to the future development of sheltered and extra care housing is the increase in home ownership over the last thirty or so years. This is partly due to Right to Buy (RtB) legislation. Research suggests that since 1980 around half of homeowners have bought through RtB.<sup>21</sup> As many people approaching retirement age now hold equity in property, it is likely that the provision of sheltered housing will have to change to reflect this. Whilst private sector providers (e.g. McCarthy & Stone) may meet the needs of many "traditional" home owners, some owner occupiers (e.g. those who bought their council house through RtB) may only have limited equity in their property. This may exclude them from buying into private sector provision, but may open up

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<sup>20</sup> For example, Housing Benefit (the Transitional Housing Benefit Scheme), Special Needs Allocation Package (SNAP) and Resettlement Grant.

<sup>21</sup> See the Scottish Executive report *The Right to Buy in Scotland – Pulling Together the Evidence*, September 2006, available at <http://www.scotland.gov.uk/Publications/2006/09/26114727/0>

opportunities for housing associations and other sheltered housing providers to develop a wider range of tenure-related options in the future.

16 It has been suggested<sup>22</sup> that the key question facing sheltered housing at present is whether it should move towards being “retirement housing” with a property-based caretaking service or a more highly supported type of provision which can be a housing-based alternative to residential care. Although developments in telecare mean that many more people can be supported to continue living in their current homes, sheltered housing has tended to be popular for several reasons. These include:

- Providing easy-to-manage housing with a high degree of security;
- Offering the option of social integration and engagement with others living in the scheme (especially if there are communal facilities);
- The reassurance provided by a dedicated warden (many of who were resident on-site until relatively recently);
- Being generally affordable (especially for those in receipt of income-related benefits).

17 The challenge for the future for providers is how to maintain these benefits whilst providing suitable accommodation (e.g. with barrier-free access) that enables recent legislative changes affecting support provision to be met. Furthermore, housing and support providers need to recognise the changing financial circumstances (e.g. property ownership; occupational pensions) and expectations of older people (e.g. regarding space). These changes then need to be considered alongside political moves, such as the increasing emphasis on enabling older people to live independently for as long as possible in community settings.

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<sup>22</sup> For example in *Sheltered Housing’s Future: SFHA Discussion Paper*, January 2005

## APPENDIX F: HOUSING ASSOCIATION PROVIDERS

- 1 The EAC database and the information on Registered Social Landlords provided by Communities Scotland to help compile the contacts database for the distribution of the electronic questionnaire identify a large number of housing associations. These vary from housing associations with large numbers of schemes and properties, often in several local authority areas, to associations with very few schemes and properties working in only one area.
- 2 Table F.1 provides a summary of all of the housing associations contacted during the review and shows the number of schemes for which they are responsible. They are ranked by their number of schemes (according to the EAC database).

**Table F.1: Scottish housing associations**

Housing Association	Location of headquarters	Number of sheltered housing schemes	Number of extra care schemes
Hanover (Scotland)	Edinburgh	113	21
Bield	Edinburgh	88	39
Trust	Edinburgh	52	14
Glasgow, The	Glasgow	29	5
Cairn	Edinburgh	25	8
Viewpoint	Edinburgh	17	9
Castle Rock Edinvar	Edinburgh	22	1
Servite	Dundee	17	6
Castlehill	Aberdeen	19	2
Scottish Borders	Selkirk	13	0
Link Group	Edinburgh	11	0
West of Scotland	Glasgow	8	0
Abertay	Dundee	7	0
Thenew	Glasgow	7	0
Dunedin Canmore	Edinburgh	6	0
Loreburn	Dumfries	6	0
Arklet	Glasgow	4	1
Eildon	Melrose	2	3
Bridgewater	Erskine	4	0
Cube	Glasgow	3	1
Dalmuir Park	Clydebank	4	0
Methodist Homes	Derby (England)	4	0
Angus	Arbroath	3	0
Berwickshire	Duns	3	0
Charing Cross	Glasgow	3	0
Loretto	Glasgow	3	0
Manor Estates	Edinburgh	3	0
New Gorbals	Glasgow	3	0
North Glasgow	Glasgow	3	0
Port of Leith	Edinburgh	3	0
Tenants First Housing Cooperative	Aberdeen	3	0
Albyn Housing Society	Invergordon	2	0
Crown	Cheam (Surrey)	2	0

Housing Association	Location of headquarters	Number of sheltered housing schemes	Number of extra care schemes
Irvine	Irvine	2	0
Isle of Arran Homes (in Trust HA)	Isle of Arran	2	0
Hillcrest	Dundee	2	0
Kingdom	Glenrothes	2	0
Parkhead	Glasgow	2	0
Scottish Veterans	Edinburgh	2	0
Southside	Glasgow	2	0

3 In addition, the following housing associations each manage one sheltered housing scheme (the location of their headquarters is shown in brackets):

- Barrhead (Barrhead);
- Garrion People’s Cooperative (Wishaw);
- Govan (Glasgow) – Extra care housing;
- Hjaltland (Lerwick);
- Queen’s Cross (Glasgow);
- Reidvale (Glasgow);
- Royal Air Forces (Leicester);
- Soroptimist Housing (Dundee);
- Thomas Chalmers (Glasgow);
- Yoker (Glasgow).

4 In addition, the following voluntary organisations are also providers:

- AgeCare Aberdeen have two sheltered housing schemes and three extra care housing schemes in Aberdeen;
- The Mungo Foundation have three sheltered housing schemes in Glasgow;
- The Retail Trust (which is based in London) has an extra care housing scheme in East Renfrewshire.

5 As Table F.1 shows, some housing associations are significant providers of sheltered and extra care housing. This is illustrated further in Table F.2, which provides further information about their provision. For example, it shows the numbers of dwellings they provide of each type of housing and the number of Local authorities in which these are located.

**Table F.2: Summary of provision by the 12 largest housing associations**

Housing Association	SH Schemes	SH Dwellings	SH in # LAs	ECH Schemes	ECH Dwellings	ECH in # LAs
Hanover (Scotland)	113	3,782	24	21	437	10
Bield	88	3,016	21	39	1,177	17
Trust	52	1,355	21	14	475	10
Glasgow, The	29	883	1	5	182	1
Cairn	25	985	15	8	70	1
Viewpoint	17	681	2	9	307	3
Castle Rock Edinvar	22	783	3	1	8	1
Servite	17	550	4	6	120	3
Castlehill	19	391	3	2	74	2
Scottish Borders	13	284	1	0	0	0
Link Group	11	325	7	0	0	0
West of Scotland	8	192	5	1	10	1

## APPENDIX G: NUMBERS OF SCHEMES AND DWELLINGS BY CLUSTER AND TYPE OF PROVIDER

**Table G.1a: Number of sheltered housing schemes by cluster and type of provider**

	Local authority	Housing association	Private sector	Total
<b>NORTHERN SCOTLAND</b>	<b>299</b>	<b>151</b>	<b>18</b>	<b>468</b>
Very Urban and Mainly Urban:	117	65	8	190
Aberdeen City	46	16	4	66
Angus	24	16	1	41
Dundee City	41	21	1	63
Stirling	6	12	2	20
Mainly Rural:	124	83	10	217
Aberdeenshire	58	21	1	80
Argyll and Bute	11	13	2	26
Highland	33	22	2	57
Moray	11	14	-	25
Perth & Kinross	11	13	5	29
Very Remote:	58	3	0	61
Eilean Siar	19	2	-	21
Orkney Islands	3	-	-	3
Shetland Islands	36	1	-	37
<b>CENTRAL SCOTLAND</b>	<b>164</b>	<b>263</b>	<b>44</b>	<b>471</b>
Very Urban:	86	183	27	296
East Renfrewshire	5	8	7	20
Edinburgh, City of	33	63	13	109
Glasgow City	-	85	5	90
North Lanarkshire	37	15	-	52
Renfrewshire	11	12	2	25
Mainly Urban:	78	80	17	175
Clackmannanshire	-	7	-	7
East Dunbartonshire	6	10	4	20
Falkirk	-	11	2	13
Fife	57	23	6	86
Inverclyde	8	5	3	16
West Dunbartonshire	4	8	-	12
West Lothian	3	16	2	21
<b>SOUTHERN SCOTLAND</b>	<b>115</b>	<b>124</b>	<b>17</b>	<b>256</b>
Mainly Urban:	90	34	12	136
Midlothian	1	8	-	9
North Ayrshire	28	6	1	35
South Ayrshire	19	7	6	32
South Lanarkshire	42	13	5	61
Mainly Rural:	25	90	5	120
Dumfries & Galloway	-	32	1	33
East Ayrshire	21	9	1	31
East Lothian	4	12	1	17
Scottish Borders	-	37	2	39
<b>SCOTLAND</b>	<b>578</b>	<b>538</b>	<b>79</b>	<b>1195</b>

### Notes to table

Source: EAC database, 2006.

**Table G.1b: Number of extra care housing schemes by cluster and type of provider**

	Local authority	Housing association	Private sector	Total
<b>NORTHERN SCOTLAND</b>	<b>13</b>	<b>24</b>	<b>2</b>	<b>39</b>
Very Urban and Main Urban:	3	14	0	17
Aberdeen City	2	4	-	6
Angus	1	3	-	4
Dundee City	-	7	-	7
Stirling	-	-	-	-
Mainly Rural:	8	10	1	19
Aberdeenshire	2	2	1	5
Argyll and Bute	1	1	-	2
Highland	5	-	-	5
Moray	-	2	-	2
Perth & Kinross	-	5	-	5
Very Remote:	2	0	1	3
Eilean Siar	-	-	-	-
Orkney Islands	-	-	1	1
Shetland Islands	2	-	-	2
<b>CENTRAL SCOTLAND</b>	<b>5</b>	<b>71</b>	<b>0</b>	<b>76</b>
Very Urban:	2	49	0	51
East Renfrewshire	-	4	-	4
Edinburgh, City of	-	18	-	18
Glasgow City	-	19	-	19
North Lanarkshire	1	3	-	4
Renfrewshire	1	5	-	6
Mainly Urban:	3	22	0	25
Clackmannanshire	-	-	-	-
East Dunbartonshire	-	1	-	1
Falkirk	1	1	-	2
Fife	1	8	-	9
Inverclyde	-	2	-	2
West Dunbartonshire	-	2	-	2
West Lothian	1	8	-	8
<b>SOUTHERN SCOTLAND</b>	<b>2</b>	<b>28</b>	<b>0</b>	<b>30</b>
Mainly Urban:	2	15	0	17
Midlothian	-	3	-	3
North Ayrshire	-	2	-	2
South Ayrshire	1	1	-	2
South Lanarkshire	1	9	-	10
Mainly Rural:	0	13	0	13
Dumfries & Galloway	-	6	-	6
East Ayrshire	-	3	-	3
East Lothian	-	1	-	1
Scottish Borders	-	3	-	3
<b>SCOTLAND</b>	<b>20</b>	<b>123</b>	<b>2</b>	<b>145</b>

**Notes to table**

Source: EAC database, 2006.

**Table G.2a: Number of sheltered housing dwellings by cluster and type of provider**

	Local authority	Housing association	Private sector	Total
<b>NORTHERN SCOTLAND</b>	<b>8,578</b>	<b>4,615</b>	<b>827</b>	<b>14,020</b>
Very Urban and Main Urban:	5,634	2,183	373	8,190
Aberdeen City	2,015	444	212	2,671
Angus	604	498	44	1,146
Dundee City	,921	877	39	3,837
Stirling	94	364	78	536
Mainly Rural:	2,540	2,359	454	5,353
Aberdeenshire	1,382	629	40	2,051
Argyll and Bute	205	358	64	627
Highland	496	583	100	1,179
Moray	149	374	-	523
Perth & Kinross	308	415	250	973
Very Remote:	404	73	0	477
Eilean Siar	92	61	-	153
Orkney Islands	44	-	-	44
Shetland Islands	268	12	-	280
<b>CENTRAL SCOTLAND</b>	<b>4,532</b>	<b>8,597</b>	<b>2,057</b>	<b>15,186</b>
Very Urban:	2,555	5,993	1,316	9,864
East Renfrewshire	28	88	251	367
Edinburgh, City of	1,089	2,532	745	4,366
Glasgow City	-	2,420	212	2,632
North Lanarkshire	1,132	580	-	1,712
Renfrewshire	306	373	108	787
Mainly Urban:	1,977	2,604	741	5,322
Clackmannanshire	-	213	-	213
East Dunbartonshire	130	352	155	637
Falkirk	-	360	106	466
Fife	1,423	675	288	2,386
Inverclyde	221	203	116	540
West Dunbartonshire	141	284	-	425
West Lothian	62	517	76	655
<b>SOUTHERN SCOTLAND</b>	<b>2,859</b>	<b>3,222</b>	<b>796</b>	<b>6,877</b>
Mainly Urban:	2,260	978	652	3,890
Midlothian	22	266	-	288
North Ayrshire	565	133	90	788
South Ayrshire	539	189	300	1,028
South Lanarkshire	1,134	390	262	1,786
Mainly Rural:	599	2,244	144	2,987
Dumfries & Galloway	-	598	40	638
East Lothian	144	394	41	579
Scottish Borders	-	1,031	36	1,049
<b>SCOTLAND</b>	<b>15,969</b>	<b>16,434</b>	<b>3,680</b>	<b>36,083</b>

**Notes to table**

Source: EAC database, 2006.

**Table G.2b: Number of extra care housing dwellings by cluster and type of provider**

	Local authority	Housing association	Private sector	Total
<b>NORTHERN SCOTLAND</b>	<b>249</b>	<b>574</b>	<b>127</b>	<b>950</b>
Very Urban and Main Urban:	116	316	0	432
Aberdeen City	102	70	-	172
Angus	14	53	-	67
Dundee City	-	193	-	193
Stirling	-	-	-	-
Mainly Rural:	108	258	103	469
Aberdeenshire	61	54	103	218
Argyll and Bute	6	29	-	35
Highland	41	-	-	41
Moray	-	31	-	31
Perth & Kinross	-	144	-	144
Very Remote:	25	0	24	49
Eilean Siar	-	-	-	-
Orkney Islands	-	-	24	24
Shetland Islands	25	-	-	25
<b>CENTRAL SCOTLAND</b>	<b>112</b>	<b>1,980</b>	<b>0</b>	<b>2,092</b>
Very Urban:	25	1,434	0	1,459
East Renfrewshire	-	180	-	180
Edinburgh, City of	-	441	-	441
Glasgow City	-	636	-	636
North Lanarkshire	12	83	-	95
Renfrewshire	13	94	-	107
Mainly Urban:	87	546	0	633
Clackmannanshire	-	-	-	-
East Dunbartonshire	-	16	-	16
Falkirk	27	54	-	81
Fife	23	172	-	195
Inverclyde	-	39	-	39
West Dunbartonshire	-	50	-	50
West Lothian	37	215	-	252
<b>SOUTHERN SCOTLAND</b>	<b>46</b>	<b>640</b>	<b>0</b>	<b>686</b>
Mainly Urban:	46	376	0	422
Midlothian	-	54	-	54
North Ayrshire	-	49	-	49
South Ayrshire	28	31	-	59
South Lanarkshire	18	242	-	260
Mainly Rural:	0	264	0	264
Dumfries & Galloway	-	110	-	110
East Ayrshire	-	75	-	75
East Lothian	-	26	-	26
Scottish Borders	-	53	-	53
<b>SCOTLAND</b>	<b>407</b>	<b>3,194</b>	<b>127</b>	<b>3,728</b>

**Notes to table**

Source: EAC database, 2006.



## APPENDIX H: FURTHER INFORMATION ABOUT DWELLING TYPES

**Table H.1a: Types and sizes of sheltered housing dwellings in Northern Scotland**

	Local authority	Housing association	Private sector
<b>NORTHERN SCOTLAND – Very Urban and Mainly Urban (8,038)</b>			
Total Dwellings	5,592	2,192	254
Flats:	89.0%	92.5%	100.0%
Bed sit	5.9%	13.9%	-
1 bed	74.0%	66.1%	22.4%
2 or 3 bed	20.1%	12.3%	10.3%
Missing		7.7%	67.3%
Bungalows:	7.6%	7.2%	0.0%
Bed sit	8.0%	4.9%	
1 bed	79.8%	71.0%	
2 or 3 bed	12.2%	24.1%	
Cottages/Houses:	3.4%	0.3%	0.0%
Bed sit	2.1%	-	
1 bed	96.4%	-	
2 or 3 bed	1.5%	100.0%	
<b>NORTHERN SCOTLAND – Mainly Rural (5,125)</b>			
Total Dwellings	2,539	2,226	360
Flats (1,801):	70.9%	81.4%	100.0%
Bed sit	8.3%	10.5%	
1 bed	52.8%	80.8%	
2 or 3 bed	3.8%	5.7%	
Missing	35.1%	3.0%	
Bungalows (654):	25.8%	16.7%	0.0%
Bed sit	-	3.0%	
1 bed	78.1%	91.9%	
2 or 3 bed	7.8%	5.1%	
Missing	14.1%	-	
Cottages/Houses:	3.3%	1.9%	0.0%
Bed sit	-	28.6%	
1 bed	70.2%	52.4%	
2 or 3 bed	29.8%	19.0%	
<b>NORTHERN SCOTLAND – Very Remote (462)</b>			
Total Dwellings	401	61	
Flats:	18.7%	98.4%	0.0%
Bed sit	49.3%	33.3%	
1 bed	42.7%	61.7%	
2 or 3 bed	8.0%	5.0%	
Bungalows:	81.3%	0.0%	0.0%
Bed sit	1.5%		
2 or 3 bed	37.1%		
Cottages/Houses	0.0%	1.6%%	0.0%

**Notes to table**

Source: EAC database, 2006.

**Table H.1b: Types and sizes of sheltered housing dwellings in Central Scotland**

	Local council	Housing association	Private sector
<b>CENTRAL SCOTLAND – Very Urban (9,662)</b>			
Total Dwellings	2,469	5,957	1,236
Flats:	59.7%	95.5%	100.0%
Bed sit	8.2%	7.8%	-
1 bed	83.5%	48.8%	2.3%
2 or 3 bed	4.8%	5.9%	1.2%
Missing	3.5%	37.5%	96.5%
Bungalows:	34.8%	3.4%	0.0%
Bed sit	5.7%	-	
1 bed	90.3%	71.8%	
2 or 3 bed	1.1%	14.8%	
Missing	2.9%	13.4%	
Cottages/Houses:	5.5%	1.1%	0.0%
Bed sit	7.4%	-	
1 bed	72.8%	84.8%	
2 or 3 bed	19.8%	15.2%	
<b>CENTRAL SCOTLAND – Mainly Urban (4,760)</b>			
Total Dwellings	1,741	2,505	514
Flats:	68.9%	94.9%	98.1%
Bed sit	13.8%	14.0%	-
1 bed	54.7%	76.7%	14.7%
2 or 3 bed	20.0%	6.6%	1.6%
Missing	11.6%	2.7%	83.7%
Bungalows:	26.9%	4.4%	0.0%
Bed sit	-	7.3%	
1 bed	73.3%	69.7%	
2 or 3 bed	10.5%	9.2%	
Missing	16.2%	13.8%	
Cottages/Houses:	4.2%	0.7%	1.9%
1 bed	100.0%	100.0%	-
2 or 3 bed	-	-	100%

**Notes to table**

Source: EAC database, 2006.

**Table H.1c: Types and sizes of sheltered housing dwellings in Southern Scotland**

	Local council	Housing association	Private sector
<b>SOUTHERN SCOTLAND – Mainly Urban (3,889)</b>			
Total Dwellings	2,260	977	652
Flats:	68.5%	91.3%	100.0%
Bed sit	6.5%	13.9%	-
1 bed	72.7%	67.3%	-
2 or 3 bed	20.7%	11.3%	-
Missing	-	7.5%	100.0%
Bungalows:	34.8%	8.5%	0.0%
Bed sit	-	-	-
1 bed	63.3%	7.2%	-
2 or 3 bed	30.8%	-	-
Missing	5.9%	92.8%	-
Cottages/Houses	0.2%	0.2%	0.0%
<b>SOUTHERN SCOTLAND – Mainly Rural (2,612)</b>			
Total Dwellings	265	2,203	144
Flats:	58.9%	78.0%	100.0%
Bed sit	7.7%	6.8%	-
1 bed	-	74.1%	-
2 or 3 bed	-	11.6%	-
Missing	92.3%	-	100.0%
Bungalows:	27.1%	16.8%	0.0%
Bed sit	16.7%	-	-
1 bed	80.6%	84.3%	-
2 or 3 bed	2.7%	15.7%	-
Cottages/Houses:	14.0%	0.2%	0.0%
Bed sit	45.9%	-	-
1 bed	54.1%	100.0%	-

## APPENDIX I: CONDITION, QUALITY AND SUITABILITY

**Table I.1a: Physical condition of council-provided sheltered housing and extra care housing in Scotland – percentage shares (raw data)**

<b>Sheltered housing</b>			
<b>Very good</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>
100%	0%	0%	0%
95%	5%	0%	0%
90%	10%	0%	0%
75%	25%	0%	0%
70%	30%	0%	0%
37%	49%	8%	6%
28%	70%	2%	0%
23%	77%	0%	0%
10%	80%	0%	0%
0%	100%	0%	0%
0%	100%	0%	0%
0%	100%	0%	0%
0%	51%	49%	0%
0%	46%	46%	8%
0%	40%	60%	0%
<b>Extra care housing</b>			
<b>Very good</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>
100%	0%	0%	0%
100%	0%	0%	0%
100%	0%	0%	0%
50%	50%	0%	0%
0%	100%	0%	0%
0%	50%	50%	0%

**Table I.1b: Physical condition of housing association-provided sheltered housing and extra care housing in Scotland – percentage shares (raw data)**

<b>Sheltered Housing</b>				
<b>Very good</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>	
100%	0%	0%	0%	
100%	0%	0%	0%	
100%	0%	0%	0%	
100%	0%	0%	0%	
100%	0%	0%	0%	
100%	0%	0%	0%	
100%	0%	0%	0%	
100%	0%	0%	0%	
100%	0%	0%	0%	
100%	0%	0%	0%	
100%	0%	0%	0%	
95%	5%	0%	0%	
85%	15%	0%	0%	
77%	0%	23%	0%	
50%	50%	0%	0%	
50%	35%	15%	0%	
30%	70%	0%	0%	
24%	17%	35%	24%	
10%	75%	10%	5%	
8%	80%	12%	0%	
0%	100%	0%	0%	
0%	100%	0%	0%	
0%	100%	0%	0%	
0%	100%	0%	0%	
0%	100%	0%	0%	
0%	100%	0%	0%	
0%	100%	0%	0%	
0%	100%	0%	0%	
0%	100%	0%	0%	
0%	100%	0%	0%	
0%	52%	48%	0%	
0%	35%	41%	24%	
<b>Extra care housing</b>				
<b>Very good</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>	
100%	0%	0%	0%	
100%	0%	0%	0%	
100%	0%	0%	0%	
100%	0%	0%	0%	
88%	12%	0%	0%	
85%	15%	0%	0%	
18%	47%	35%	0%	
0%	100%	0%	0%	
0%	85%	10%	5%	
0%	20%	80%	0%	

## Scottish Quality Housing Standards

**Table I.2a: Percentages of council-provided sheltered housing and extra care housing in Scotland meeting Scottish quality housing standards**

Sheltered housing		Extra care housing	
Number of respondents	13	Number of respondents	6
Raw data:		Raw data:	
1% - 24%	2		
25% - 49%	1	50%	1
50% - 79%	2	100%	5
80% - 99%	4		
100%	4		
Raw data range: 1% - 100%		Raw data range: 50% - 100%	
Average (aggregated and weighted data)		60.6%	92.3%

**Table I.2b: Percentages of housing association-provided sheltered housing and extra care housing in Scotland meeting Scottish quality housing standards**

Sheltered housing		Extra care housing	
Number of respondents	30	Number of respondents	9
Raw data:		Raw data:	
0%	2	71- 79%	2
1% - 24%	3	80% - 99%	2
25% - 49%	1	100%	5
50% - 79%	5		
80% - 99%	4		
100%	15		
Raw data range: 0% - 100%		Raw data range: 71% - 100%	
Average (aggregated and weighted data)		65.2%	82.2%

## Suitability for Older People

**Table I.3a: Suitability for older people of council-provided sheltered housing and extra care housing in Scotland – percentage shares (raw data)**

<b>Sheltered housing</b>			
<b>Very suitable</b>	<b>Suitable</b>	<b>Not very suitable</b>	<b>Unsuitable</b>
100%	0%	0%	0%
95%	3%	2%	0%
90%	10%	0%	0%
75%	0%	25%	0%
70%	20%	10%	0%
25%	54%	19%	%
10%	89%	0%	1%
0%	100%	0%	0%
0%	100%	0%	0%
0%	97%	0%	3%
0%	90%	0%	10%
0%	89%	11%	0%
0%	73%	27%	0%
0%	20%	40%	40%
<b>Extra care housing</b>			
<b>Very suitable</b>	<b>Suitable</b>	<b>Not very suitable</b>	<b>Unsuitable</b>
100%	0%	0%	0%
100%			
100%	0%	0%	0%
100%			
100%			
0%			
0%			
	0%	0%	0%
	0%	0%	0%
	0%	0%	0%
	100%	0%	0%
	100%	0%	0%

**Table I.3b: Suitability for older people with regard to space standards of housing association-provided sheltered housing and extra care housing in Scotland – percentage shares (raw data)**

<b>Sheltered Housing</b>			
<b>Very suitable</b>	<b>Suitable</b>	<b>Not very suitable</b>	<b>Unsuitable</b>
100%	0%	0%	0%
100%	0%	0%	0%
100%	0%	0%	0%
100%	0%	0%	0%
100%	0%	0%	0%
100%	0%	0%	0%
100%	0%	0%	0%
100%	0%	0%	0%
95%	0%	5%	0%
87%	13%	0%	0%
70%	30%	0%	0%
55%	22%	15%	0%
43%	42%	15%	0%
40%	0%	14%	0%
10%	71%	19%	0%
0%	100%	0%	0%
0%	100%	0%	0%
0%	100%	0%	0%
0%	100%	0%	0%
0%	100%	0%	0%
0%	100%	0%	0%
0%	100%	0%	0%
0%	100%	0%	0%
0%	100%	0%	0%
0%	100%	0%	0%
0%	90%	10%	0%
0%	84%	16%	0%
0%	80%	20%	0%
0%	50%	30%	20%
0%	47%	53%	0%
0%	12%	88%	0%
0%	0%	100%	0%
<b>Extra care housing</b>			
<b>Very suitable</b>	<b>Suitable</b>	<b>Not very Suitable</b>	<b>Unsuitable</b>
100%	0%	0%	0%
87%	13%	0%	0%
77%	12%	11%	0%
50%	46%	4%	0%
10%	88%	2%	0%
0%	100%	0%	0%
0%	60%	20%	20%
0%	50%	50%	50%
0%	0%	100%	0%
0%	0%	0%	100%



**Table I.3c: Suitability for older people with regard to access of housing association-provided sheltered housing and extra care housing in Scotland – percentage shares (raw data)**

<b>Sheltered Housing</b>			
<b>Very suitable</b>	<b>Suitable</b>	<b>Not very suitable</b>	<b>Unsuitable</b>
100%	0%	0%	0%
100%	0%	0%	0%
100%	0%	0%	0%
100%	0%	0%	0%
94%	0%	6%	0%
90%	0%	10%	0%
83%	17%	0%	0%
81%	2%	3%	14%
80%	0%	20%	0%
75%	25%	0%	0%
58%	0%	42%	0%
50%	0%	50%	0%
50%	0%	50%	0%
45%	43%	12%	0%
30%	40%	20%	10%
10%	30%	40%	30%
0%	100%	0%	0%
0%	100%	0%	0%
0%	100%	0%	0%
0%	100%	0%	0%
0%	100%	0%	0%
0%	89%	11%	0%
0%	73%	27%	0%
0%	62%	38%	0%
0%	58%	42%	0%
0%	50%	50%	0%
0%	50%	0%	50%
0%	47%	53%	0%
0%	40%	60%	0%
<b>Extra care housing</b>			
<b>Very suitable</b>	<b>Suitable</b>	<b>Not very suitable</b>	<b>Unsuitable</b>
100%	0%	0%	0%
100%	0%	0%	0%
100%	0%	0%	0%
98%	0%	0%	0%
75%	25%	0%	0%
30%	40%	20%	10%
5%	25%	35%	35%
0%	100%	0%	0%
0%	100%	0%	0%
0%	100%	0%	0%

## APPENDIX J: DEMAND FOR SHELTERED HOUSING

**Table J.1: Demand for council-provided sheltered housing and extra care housing in Scotland – percentage shares (raw data)**

<b>Sheltered housing</b>		
<b>High demand</b>	<b>Adequately meets demand</b>	<b>Low demand</b>
100%	100%	0%
80%	0%	0%
69%	14%	17%
64%	0%	33%
60%	30%	10%
50%	35%	15%
23%	27%	50%
20%	80%	10%
20%	50%	30%
16%	54%	30%
11%	70%	20%
0%	100%	0%
0%	25%	75%
0%	0%	100%
<b>Extra care housing</b>		
<b>High demand</b>	<b>Adequately meets demand</b>	<b>Low demand</b>
100%	0%	0%
50%	40%	10%
0%	100%	0%
0%	100%	0%

**Table J.2: Demand for housing association-provided sheltered housing and extra care housing in Scotland – percentage shares (raw data)**

<b>Sheltered Housing</b>		
<b>High demand</b>	<b>Adequately meets demand</b>	<b>Low demand</b>
100%	0%	0%
100%	0%	0%
100%	0%	0%
100%	0%	0%
100%	0%	0%
100%	0%	0%
77%	23%	0%
70%	30%	0%
64%	0%	36%
60%	30%	10%
50%	40%	10%
44%	32%	24%
40%	30%	30%
35%	41%	24%
33%	33%	33%
30	40%	30%
25%	26%	49%
10%	58%	32%
0%	100%	0%
0%	100%	0%
0%	100%	0%
0%	100%	0%
0%	100%	0%
0%	100%	0%
0%	100%	0%
0%	100%	0%
0%	100%	0%
0%	100%	0%
0%	90%	10%
0%	85%	15%
0%	70%	30%
0%	58%	42%
0%	0%	100%
<b>Extra care housing</b>		
<b>High demand</b>	<b>Adequately meets demand</b>	<b>Low demand</b>
88%	0%	12%
40%	30%	30%
27%	34%	39%
10%	58%	32%
10%	30%	60%
0%	100%	0%
0%	70%	30%
0%	0%	100%
0%	0%	100%

**Table J.3: Demand for council-provided sheltered housing and extra care housing in Scotland – percentage shares (raw data)**

<b>Sheltered Housing</b>		
<b>High demand</b>	<b>Adequately meets demand</b>	<b>Low demand</b>
100%	100%	0%
80%	0%	0%
69%	14%	17%
64%	0%	33%
60%	30%	10%
50%	35%	15%
23%	27%	50%
20%	80%	10%
20%	50%	30%
16%	54%	30%
11%	70%	20%
0%	100%	0%
0%	25%	75%
0%	0%	100%
<b>Extra care housing</b>		
<b>High demand</b>	<b>Adequately meets demand</b>	<b>Low demand</b>
100%	0%	0%
50%	40%	10%
0%	100%	0%
0%	100%	0%

**Table J.4: Demand for council-provided sheltered housing and extra care housing in Scotland – percentage shares (aggregated and weighted data)**

	<b>Sheltered housing</b>	<b>Extra care housing</b>
<b>Number of respondents</b>	<b>14</b>	<b>4</b>
High demand	39.4%	34.4%
Adequately meets demand	36.1%	60.5%
Low demand	24.5%	5.1%
Total	100.0%	100.0%

**Table J.5: Demand for housing association-provided sheltered housing and extra care housing in Scotland – percentage shares (raw data)**

<b>Sheltered housing</b>		
<b>High demand</b>	<b>Adequately meets demand</b>	<b>Low demand</b>
100%	0%	0%
100%	0%	0%
100%	0%	0%
100%	0%	0%
100%	0%	0%
100%	0%	0%
77%	23%	0%
70%	30%	0%
64%	0%	36%
60%	30%	10%
50%	40%	10%
44%	32%	24%
40%	30%	30%
35%	41%	24%
33%	33%	33%
30	40%	30%
25%	26%	49%
10%	58%	32%
0%	100%	0%
0%	100%	0%
0%	100%	0%
0%	100%	0%
0%	100%	0%
0%	100%	0%
0%	100%	0%
0%	100%	0%
0%	100%	0%
0%	100%	0%
0%	90%	10%
0%	85%	15%
0%	70%	30%
0%	58%	42%
0%	0%	100%
<b>Extra care housing</b>		
<b>High demand</b>	<b>Adequately meets demand</b>	<b>Low demand</b>
88%	0%	12%
40%	30%	30%
27%	34%	39%
10%	58%	32%
10%	30%	60%
0%	100%	0%
0%	70%	30%
0%	0%	100%
0%	0%	100%

**Table J.6: Demand for housing association-provided sheltered housing and extra care housing in Scotland – percentage shares (aggregated and weighted data)**

	<b>Sheltered housing</b>	<b>Extra care housing</b>
<b>Number of respondents</b>	<b>32</b>	<b>9</b>
High demand	28.0%	8.4%
Adequately meets demand	48.0%	56.2%
Low demand	24.0%	35.4%
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>

## APPENDIX K: COPIES OF ELECTRONIC QUESTIONNAIRES FOR PROVIDERS AND POSTAL QUESTIONNAIRE FOR RESIDENTS

### Review of Sheltered Housing for Older People in Scotland Questionnaire for Housing Association Providers

Researchers at the University of York based at the Centre for Housing Policy and York Health Economics Consortium have been commissioned by the Scottish Executive and Communities Scotland to undertake a **Review of Sheltered Housing for Older People**. As part of this review, we are sending electronic questionnaires to all providers of such housing. We would be very grateful if you could provide the required information (either electronically or by hand).

**Please return the completed questionnaire to us by email to [yhec@york.ac.uk](mailto:yhec@york.ac.uk),  
by fax to 01904 433628 or by freepost to:**

York Health Economics Consortium  
FREEPOST YO405  
2<sup>nd</sup> Floor Market Square  
University of York  
Vanbrugh Way  
Heslington  
YORK YO10 5ZZ

**By 5pm on Monday 20<sup>th</sup> November**

If you have any queries about completing this questionnaire, please email York Health Economics Consortium on [yhec@york.ac.uk](mailto:yhec@york.ac.uk). We will respond within 2 working days.

We realise that you may not always have precise information to answer some of the questions – where this is the case, please try to provide an estimate if possible.

We are interested in two types of provision – ***sheltered housing (i.e. a cluster of dwellings for older people with a warden service and – for most schemes - an emergency call service) and extra care (or very sheltered) housing (i.e. offering 24 hour care and/or support and provision of meals)***. We do not want to know about amenity housing for older people (even though these dwellings may be fitted with a community alarm).

If you have any key local documents relating to the provision of sheltered housing – such as a local review of sheltered housing, housing strategies, needs assessments, condition surveys – we would very grateful if you could provide us with a hard or an electronic copy (or a web link).

**Please can you provide your contact details in case we need to clarify any answers.**

**Name:            Organisation:**

**Job Title:            Email:**

**Telephone:**

***Thank you very much for your help.***

**A. THE SUPPLY AND CONDITION OF SHELTERED HOUSING**

We have used the Elderly Accommodation Counsel (EAC) database to get an overview of your sheltered housing schemes. However, we would like to ask you a few supplementary questions which are not always fully covered in the database.

**PLEASE NOTE THAT THESE QUESTIONS REFER ONLY TO THE STOCK THAT YOUR ORGANISATION OWNS.**

**1. How many sheltered housing and extra care housing schemes and dwellings for Older People does your Housing Association own?**

	Number of Schemes	Number of Dwellings
Sheltered Housing for Older People	1	3
Extra care housing	2 4	

**2a. What is the physical condition of the buildings? (Please give estimate of percentage)**

	Very Good	Good	Fair	Poor
<b>Sheltered Housing:</b>				
Percentage of stock/dwelling	1	3	5	7
<b>Extra care housing:</b>				
Percentage of stock/dwellings		2	4	6 8

**2b. What percentage of your stock currently meets the Scottish Housing Quality Standards?**

	Meeting Standards	Not Meeting Standards
<b>Sheltered Housing:</b>		
Percentage of stock/dwelling	1	3
<b>Extra care housing:</b>		
Percentage of stock/dwellings		2 4

**2c. What percentage of your stock will meet the Scottish Housing Quality Standards after completion of the Standard Delivery Plan?**

	Will Meet Standards	Will Not Meet Standards
<b>Sheltered Housing:</b>		
Percentage of stock/dwelling	1	3
<b>Extra care housing:</b>		
Percentage of stock/dwellings		2 4

**2d. Does your organisation require any external funding to achieve the Standard Delivery Plan?**

Yes <sup>1</sup> No <sup>2</sup>



If yes, how much external funding is required?:

1

3a. How suitable are the schemes and dwellings for older people requiring such housing in 2006/07 with regard to space standards?

	Very Suitable	Suitable	Not Very Suitable	Unsuitable		
<b>Sheltered Housing:</b>						
Percentage of stock/dwellings			1	3	5	7
<b>Extra care housing:</b>						
Percentage of stock/dwellings			2	4	6	8

3b. How suitable are the schemes and dwellings for older people requiring such housing in 2006/07 with regard to access?

	Very Suitable	Suitable	Not Very Suitable	Unsuitable		
<b>Sheltered Housing:</b>						
Percentage of stock/dwellings			1	3	5	7
<b>Extra care housing:</b>						
Percentage of stock/dwellings			2	4	6	8

4. Please give main reasons why you consider your stock to be not very suitable or unsuitable?

5a. What percentage of your stock has come to your organisation via stock transfer from Local Authorities?

Sheltered Housing for Older People	1
Extra care housing	2

5b. Please make any comments you may have regarding stock transfer in the box below:

## B. THE DEMAND FOR SHELTERED HOUSING

We need to know about the popularity of your local schemes and the underlying reasons for this.

6. What percentage of your sheltered housing is ...?

	In Low Demand (i.e. hard to let to older people)	Adequately Meets Demand (from older people)	In High Demand (i.e. has long waiting lists)
<b>Sheltered Housing:</b>			
Percentage of stock	1	3	5

**Extra care housing:**

Percentage of stock                      2            4                                      6

**7a. On average, how many applicants do you have per vacancy?**

In Sheltered Housing                      1

In Extra care housing                      2

**7b. What is the average time older people have to wait for a property?**

In Sheltered Housing                      Months<sup>1</sup>

In Extra care housing                      Months<sup>2</sup>

**8. What are the key factors contributing to current local demand patterns for your sheltered housing? (e.g. types of property; location of property):**

1

**9a. How do you think that demand in your area for various types of sheltered housing will increase or decrease over the next 5-10 years (please mark the relevant boxes)?**

	<b>Increase Large Small</b>	<b>Stay the same Small</b>	<b>Decrease Large</b>		
<b>Sheltered Housing:</b>					
Rented from/managed by the local authorities	<input type="checkbox"/> <sup>1</sup> <input type="checkbox"/> <sup>6</sup>	<input type="checkbox"/> <sup>11</sup>	<input type="checkbox"/> <sup>16</sup>	<input type="checkbox"/> <sup>21</sup>	
Rented from/managed by Housing Associations	<input type="checkbox"/> <sup>2</sup> <input type="checkbox"/> <sup>7</sup>	<input type="checkbox"/> <sup>12</sup>	<input type="checkbox"/> <sup>17</sup>	<input type="checkbox"/> <sup>22</sup>	
Rented from/managed by other organisations	<input type="checkbox"/> <sup>3</sup> <input type="checkbox"/> <sup>8</sup>	<input type="checkbox"/> <sup>13</sup>	<input type="checkbox"/> <sup>18</sup>	<input type="checkbox"/> <sup>23</sup>	
Provided by the private sector	<input type="checkbox"/> <sup>4</sup> <input type="checkbox"/> <sup>9</sup>	<input type="checkbox"/> <sup>14</sup>	<input type="checkbox"/> <sup>19</sup>	<input type="checkbox"/> <sup>24</sup>	
Shared ownership/shared equity	<input type="checkbox"/> <sup>5</sup> <input type="checkbox"/> <sup>10</sup>	<input type="checkbox"/> <sup>15</sup>	<input type="checkbox"/> <sup>20</sup>	<input type="checkbox"/> <sup>25</sup>	

	<b>Increase Large Small</b>	<b>Stay the same Small</b>	<b>Decrease Large</b>		
<b>Extra care housing:</b>					
Rented from/managed by the local Council	<input type="checkbox"/> <sup>1</sup> <input type="checkbox"/> <sup>6</sup>	<input type="checkbox"/> <sup>11</sup>	<input type="checkbox"/> <sup>16</sup>	<input type="checkbox"/> <sup>21</sup>	
Rented from/managed by Housing Associations	<input type="checkbox"/> <sup>2</sup> <input type="checkbox"/> <sup>7</sup>	<input type="checkbox"/> <sup>12</sup>	<input type="checkbox"/> <sup>17</sup>	<input type="checkbox"/> <sup>22</sup>	
Rented from/managed by other organisations	<input type="checkbox"/> <sup>3</sup> <input type="checkbox"/> <sup>8</sup>	<input type="checkbox"/> <sup>13</sup>	<input type="checkbox"/> <sup>18</sup>	<input type="checkbox"/> <sup>23</sup>	
Provided by the private sector	<input type="checkbox"/> <sup>4</sup> <input type="checkbox"/> <sup>9</sup>	<input type="checkbox"/> <sup>14</sup>	<input type="checkbox"/> <sup>19</sup>	<input type="checkbox"/> <sup>24</sup>	
Shared ownership/shared equity	<input type="checkbox"/> <sup>5</sup> <input type="checkbox"/> <sup>10</sup>	<input type="checkbox"/> <sup>15</sup>	<input type="checkbox"/> <sup>20</sup>	<input type="checkbox"/> <sup>25</sup>	

**9b. Please use this box for any other comments on the demand for your sheltered housing:**

1

**C. THE CHANGING ROLE OF SHELTERED HOUSING**

**10. Please describe briefly any key changes that you have made in the last five years (i.e. since 2001/02) or are planning to make in the near future to your service provision (e.g. provision of extra care; provision of meals; meeting different cultural dietary requirements; changes due to the European Working Time Directive; adaptations).**

**Changes made recently (i.e. since 2001/02) to sheltered housing:**

1

**Changes planned for the near future:**

1

**11a. If you have made, or are planning to make such changes, what were/are the main reasons for these changes? (Please tick all that apply)**

- European Working Time Directive <sup>1</sup>
- Reduction in Supporting People funding <sup>2</sup>
- Changing needs of existing residents <sup>3</sup>
- Other (please specify) <sup>4</sup>

**11b. If you have not made and are not planning to make any such changes, please explain why**

1

**12a. Do you consider that any of your sheltered housing stock is non-viable?**

**Yes** <sup>1</sup> **No** <sup>2</sup>

**If YES: What percentage of dwellings is considered non-viable?** 1  
(Now go to Qs12b-d)

**If NO:** Please go to Q.13

**12b. Please rank the reasons for their non-viability, giving 1 to the most important reason (and use N/A to indicate any non-applicable reasons)**

- Poor physical condition 1
- Lack of communal facilities 2
- Inappropriate location 3
- Dwellings too small 4

- Lack of lift 5
- Poor energy efficiency 6
- Lack of demand 7
- Inappropriate for older people with disabilities 8
- Other (please specify below): 9

**12c. Please indicate how you plan to use non-viable buildings and sites in the future (please mark all that apply):**

- Disposal to private or independent sector for alternative housing use  1
- Disposal to private or independent sector for alternative non-housing use  2
- Disposal to local authority for alternative housing use  3
- Disposal to local authority for alternative non-housing use  4
- Retain by your organisation for alternative model of care (e.g. intermediate care)  5
- Retain by your organisation as housing for younger tenants  6
- Retain by your organisation for other uses (e.g. non-care service; offices)  7
- Other (please specify below): 8

**12d. Please use this box for any other comments about non-viable sheltered housing stock:**

1

**D. SERVICE PROVISION AND THE COSTS OF SHELTERED HOUSING**

**13. We recognise that your organisation probably provides a range of sheltered housing and extra care schemes. Please indicate which of the following services are provided for residents in some or all of your schemes (please mark all that apply):**

	<b>Sheltered Housing</b>	<b>Extra Care Housing</b>		
	<b>All</b>	<b>Some</b>	<b>All</b>	<b>Some</b>
Resident warden* available 24/7	<input type="checkbox"/> 1	<input type="checkbox"/> 11	<input type="checkbox"/> 21	<input type="checkbox"/> 31
Resident warden* working fixed hours	<input type="checkbox"/> 2	<input type="checkbox"/> 12	<input type="checkbox"/> 22	<input type="checkbox"/> 32
Full-time non-resident warden**	<input type="checkbox"/> 3	<input type="checkbox"/> 13	<input type="checkbox"/> 23	<input type="checkbox"/> 33
Part-time non-resident warden***	<input type="checkbox"/> 4	<input type="checkbox"/> 14	<input type="checkbox"/> 24	<input type="checkbox"/> 34
In-house community alarm services	<input type="checkbox"/> 5	<input type="checkbox"/> 15	<input type="checkbox"/> 25	<input type="checkbox"/> 35
Externally-run community alarm service	<input type="checkbox"/> 6	<input type="checkbox"/> 16	<input type="checkbox"/> 26	<input type="checkbox"/> 36
Optional meals (e.g. paid for "as you go")	<input type="checkbox"/> 7	<input type="checkbox"/> 17	<input type="checkbox"/> 27	<input type="checkbox"/> 37
Regular meals (e.g. covered by a weekly charge)	<input type="checkbox"/> 8	<input type="checkbox"/> 18	<input type="checkbox"/> 28	<input type="checkbox"/> 38
On-site care team (24 hours)	<input type="checkbox"/> 9	<input type="checkbox"/> 19	<input type="checkbox"/> 29	<input type="checkbox"/> 39
On-site care team (day time only)	<input type="checkbox"/> 10	<input type="checkbox"/> 20	<input type="checkbox"/> 30	<input type="checkbox"/> 40

\* Resident wardens live on site. They may always be available to residents or they may only work fixed hours (e.g. Monday to Friday, 9am-5pm) (n.b. they may also cover other sheltered housing schemes during their working hours).

\*\* A full-time non-resident warden works 'full-time' fixed hours on site, but lives elsewhere.

\*\*\* A part-time non-resident warden visits several schemes on a regular basis (e.g. twice a week), but lives elsewhere (n.b. they may work full-time, but cover two or more schemes).

**14. Please provide the following information on weekly charges (please provide the range if relevant and please enter N/A for non-applicable charges)**

<b>Sheltered Housing</b>	<b>Extra Care Housing</b>		
Rent for Bed Sitting Room (BSR)/Studio flat		1	7
Rent for 1-bedroom flat		2	8
Rent for 2-bedroom flat		3	9
Rent for 1-bedroom bungalow		4	10
Rent for 2-bedroom bungalow		5	11
Rent for other type of property (please specify below):		6	12
Service or property charge for BSR/Studio flat		1	7
Service or property charge for 1-bedroom flat		2	8
Service or property charge for 2-bedrom charge		3	9
Service or property charge for 1-bedroom bungalow		4	10
Service or property charge for 2-bedroom bungalow		5	11
Other service or property charge (please specify charge below):		6	12
Heating/lighting charge for BSR/Studio flat		1	7
Heating/lighting charge for 1-bedroom flat		2	8
Heating/lighting charge for 2-bedrom charge		3	9
Heating/lighting charge for 1-bedroom bungalow		4	10
Heating/lighting charge for 2-bedroom bungalow		5	11
Other heating/lighting charge (please specify below):		6	12
Support charge (per person)		1	5
Meals charge (per person)		2	6
Community alarm charge (per dwelling)		3	7
Other charges (please specify below):		4	8

- 15. This question focuses on the annual costs to your organisation of providing various services (please enter N/A where non-applicable). Please indicate with an \* if these amounts also include costs associated with service provision to amenity housing for older people, as we recognise that it may not always be possible to identify costs associated only with sheltered housing and extra care housing:**

**Annual Cost to organisation  
(e.g. amount in**

**Budget for 2006/07)**

Warden provision to sheltered housing  
Community alarm service to sheltered housing  
Repairs to and maintenance of sheltered housing

**If necessary, please explain these annual costs below:**

- 16. What percentage of your stock is in need of remodelling?**

	Yes	No
Sheltered Housing	1	3
Extra care housing	2	4

**17a. Have you remodelled any of your sheltered housing provision in the last five years (i.e. since 2001/02)?**

Yes, already undertaken <sup>1</sup>  
 Yes, currently underway <sup>2</sup>  
 No <sup>3</sup>

*If YES, please answer the following questions (17b – d). If NO, please go to Q.18.*

**17b. Please provide a brief description of the remodelling:**

1

**17c. What was the cost of the remodelling?**

1

**17d. What impact has the remodelling had on revenue (e.g. has it decreased because there are fewer dwellings or has it increased because dwellings are easier to let)?**

Increased by a large amount <sup>1</sup>  
 Increased by a small amount <sup>2</sup>  
 Stayed about the same <sup>3</sup>  
 Decreased by a small amount <sup>4</sup>  
 Decreased by a large amount <sup>5</sup>  
 Other (please explain): <sup>6</sup>

**18a. Are you planning any remodelling of your sheltered housing provision in the near future?**

Yes <sup>1</sup>  
 No <sup>2</sup>

*If YES, please answer the following questions (b – d). If NO, please go to Q.19.*

**18b. Please provide a brief description of the remodelling planned:**

1

**18c. What is the anticipated cost of the remodelling?**

1

**18d. What impact is it anticipated that the remodelling will have on revenue (e.g. will it decrease because there are fewer dwellings or will it increase because dwellings are easier to let)?**

Increased by a large amount  
Increased by a small amount  
Stayed about the same  
Decreased by a small amount  
Decreased by a large amount  
Other (please explain):

1  
 2  
 3  
 4  
 5

6

**E. CURRENT AND FUTURE CHALLENGES**

**19. What do you see as the most significant local and national challenges facing your organisation's provision of sheltered housing?**

**19a. Local issues:**

1

**19b. National issues:**

1

**20. How do you think that sheltered housing *overall* needs to change to meet the future requirements and wishes of older people in your area?**

1

**21. What will be needed to bring this about?**

1

**22. Please use this box for any other comments you wish to make about sheltered housing provision.**

1

***Once again, thank you very much for your help with this review.***

## **Review of Sheltered Housing for Older People in Scotland Questionnaire for Local Authority Providers**

Researchers at the University of York based at the Centre for Housing Policy and York Health Economics Consortium have been commissioned by the Scottish Executive and Communities Scotland to undertake a **Review of Sheltered Housing for Older People**. As part of this review, we are sending electronic questionnaires to all providers of such housing. We would be very grateful if you could provide the required information (either electronically or by hand).

**Please return the completed questionnaire to us by email to [yhec@york.ac.uk](mailto:yhec@york.ac.uk),  
by fax to 01904 433628 or by freepost to:**

York Health Economics Consortium  
FREEPOST YO405  
2<sup>nd</sup> Floor Market Square  
University of York  
Vanbrugh Way  
Heslington  
YORK YO10 5ZZ

**By 5pm on Friday 17<sup>th</sup> November**

If you have any queries about completing this questionnaire, please email York Health Economics Consortium on [yhec@york.ac.uk](mailto:yhec@york.ac.uk). We will respond within 2 working days.

We realise that you may not always have precise information to answer some of the questions – where this is the case, please try to provide an estimate if possible.

We are interested in two types of provision – ***sheltered housing (i.e. a cluster of dwellings for older people with a warden service and – for most schemes - an emergency call service) and extra care (or very sheltered) housing (i.e. offering greater level of care with 24 hour care staff on site, provision of meals and addition support)***. We do not want to know about amenity housing for older people (even though these dwellings may be fitted with a community alarm).

If you have any key local documents relating to the provision of sheltered housing – such as a local review of sheltered housing, housing strategies, needs assessments, condition surveys – we would very grateful if you could provide us with a hard or an electronic copy (or a web link).

**Please can you provide your contact details in case we need to clarify any answers.**

**Name:            Council:**

**Job Title:            Email:**

**Telephone:**

***Thank you very much for your help.***



## A. THE SUPPLY AND CONDITION OF SHELTERED HOUSING

We have used the Elderly Accommodation Counsel (EAC) database to get an overview of your sheltered housing schemes. However, we would like to ask you a few supplementary questions which are not always fully covered in the database.

### 1. How many sheltered housing and extra care housing schemes and dwellings for Older People does your Local Authority manage?

	Number of Schemes	Number of Dwellings
Sheltered Housing for Older People	1	3
Extra care housing	2	4

### 2a. What is the physical condition of the buildings? (Please give estimate of percentage)

	Very Good	Good	Fair	Poor
<b>Sheltered Housing:</b>				
Percentage of stock/dwelling	1	3	5	7
<b>Extra care housing:</b>				
Percentage of stock/dwellings	2	4	6	8

### 2b. What percentage of your stock meets the Scottish Housing Quality Standards?

	Meeting Standards	Not Meeting Standards
<b>Sheltered Housing:</b>		
Percentage of stock/dwelling	1	3
<b>Extra care housing:</b>		
Percentage of stock/dwellings	2	4

### 3. How suitable are the schemes and dwellings for older people requiring such housing in 2006/07 (e.g. on ground floor or first floor; include a lift; dwellings include at least one bedroom?)

	Very Suitable	Suitable	Not Very Suitable	Unsuitable
<b>Sheltered Housing:</b>				
Percentage of stock/dwellings	1	3	5	7
<b>Extra care housing:</b>				
Percentage of stock/dwellings	2	4	6	8

### 4. Please give main reasons why you consider your stock to be not very suitable or unsuitable?

**5. Are you intending to transfer some or all of your stock of Sheltered and Extra care housing to a Housing Association ?**

Yes <sup>1</sup> No <sup>2</sup>

**If yes, please give further details below:**

1

**B. THE DEMAND FOR SHELTERED HOUSING**

We need to know about the popularity of your local schemes and the underlying reasons for this.

**6. What percentage of your sheltered housing is ...?**

	<b>In Low Demand (i.e. hard to let to older people)</b>	<b>Adequately Meets Demand (from older people)</b>	<b>In High Demand (i.e. has long waiting lists)</b>
<b>Sheltered Housing:</b>			
Percentage of stock	1	3	5
<b>Extra care housing:</b>			
Percentage of stock	2	4	6

**7a. On average, how many applicants do you have per vacancy?**

In Sheltered Housing 1

In Extra care housing 2

**7b. What is the average time older people have to wait for a property?**

In Sheltered Housing Months<sup>1</sup>

In Extra care housing Months<sup>2</sup>

**8. What are the key factors contributing to current local demand patterns for your sheltered housing? (e.g. types of property; location of property):**

1

**9a. How do you think that demand in your area for various types of sheltered housing will increase or decrease over the next 5-10 years (please mark the relevant boxes)?**

	<b>Increase Large</b>	<b>Stay the same Small</b>	<b>Decrease Large</b>		
<b>Sheltered Housing:</b>					
Rented from/managed by the local Council	<input type="checkbox"/> 1	<input type="checkbox"/> 6	<input type="checkbox"/> 11	<input type="checkbox"/> 16	<input type="checkbox"/> 21
Rented from/managed by Housing Associations	<input type="checkbox"/> 2	<input type="checkbox"/> 7	<input type="checkbox"/> 12	<input type="checkbox"/> 17	<input type="checkbox"/> 22
Rented from/managed by other organisations	<input type="checkbox"/> 3	<input type="checkbox"/> 8	<input type="checkbox"/> 13	<input type="checkbox"/> 18	<input type="checkbox"/> 23
Provided by the private sector	<input type="checkbox"/> 4	<input type="checkbox"/> 9	<input type="checkbox"/> 14	<input type="checkbox"/> 19	<input type="checkbox"/> 24
Shared ownership/shared equity	<input type="checkbox"/> 5	<input type="checkbox"/> 10	<input type="checkbox"/> 15	<input type="checkbox"/> 20	<input type="checkbox"/> 25

	<b>Increase Large</b>	<b>Stay the same Small</b>	<b>Decrease Large</b>		
<b>Extra care housing:</b>					
Rented from/managed by the local Council	<input type="checkbox"/> 1	<input type="checkbox"/> 6	<input type="checkbox"/> 11	<input type="checkbox"/> 16	<input type="checkbox"/> 21
Rented from/managed by Housing Associations	<input type="checkbox"/> 2	<input type="checkbox"/> 7	<input type="checkbox"/> 12	<input type="checkbox"/> 17	<input type="checkbox"/> 22
Rented from/managed by other organisations	<input type="checkbox"/> 3	<input type="checkbox"/> 8	<input type="checkbox"/> 13	<input type="checkbox"/> 18	<input type="checkbox"/> 23
Provided by the private sector	<input type="checkbox"/> 4	<input type="checkbox"/> 9	<input type="checkbox"/> 14	<input type="checkbox"/> 19	<input type="checkbox"/> 24
Shared ownership/shared equity	<input type="checkbox"/> 5	<input type="checkbox"/> 10	<input type="checkbox"/> 15	<input type="checkbox"/> 20	<input type="checkbox"/> 25

**9b. Please use this box for any other comments on the demand for your sheltered housing:**

1

**C. THE CHANGING ROLE OF SHELTERED HOUSING**

**10. Please describe briefly any key changes that you have made in the last five years (i.e. since 2001/02) or are planning to make in the near future to your service provision (e.g. provision of extra care; provision of meals; meeting different cultural dietary requirements; changes due to the European Working Time Directive; adaptations).**

**Changes made recently (i.e. since 2001/02) to sheltered housing:**

1

**Changes planned for the near future:**

1

**11a. If you have made, or are planning to make such changes, what were/are the main reasons for these changes? (Please tick all that apply)**

- European Working Time Directive  1
- Reduction in Supporting People funding  2
- Changing needs of existing residents  3
- Other (please specify)  4

**11b. If you have not made and are not planning to make any such changes, please explain why**

1

**12a. Do you consider that any of your sheltered housing stock is non-viable?**

Yes  1 No  2

*If YES: What percentage of dwellings is considered non-viable?* 1  
(Now go to Qs12b-d)

*If NO: Please go to Q.13*

**12b. Please rank the reasons for their non-viability, giving 1 to the most important reason (and use N/A to indicate any non-applicable reasons)**

- Poor physical condition 1
- Lack of communal facilities 2
- Inappropriate location 3
- Dwellings too small 4
- Lack of lift 5
- Poor energy efficiency 6
- Lack of demand 7
- Inappropriate for older people with disabilities 8
- Other (please specify below): 9

**12c. Please indicate how you plan to use non-viable buildings and sites in the future (please mark all that apply):**

- Disposal to private or independent sector for alternative housing use  1
- Disposal to private or independent sector for alternative non-housing use  2
- Retain (within public sector) for alternative model of care (e.g. intermediate care)  3
- Retain by Council as housing for younger tenants  4
- Retain by Council for other uses (e.g. non-care service; offices)  5
- Other (please specify below):  6

**12d. Please use this box for any other comments about non-viable sheltered housing stock:**

1

**D. SERVICE PROVISION AND THE COSTS OF SHELTERED HOUSING**

**13. We recognise that your Council probably provides a range of sheltered housing and extra care schemes. Please indicate which of the following services are provided for residents in some or all of your schemes (please mark all that apply):**

	<b>Sheltered Housing</b>		<b>Extra Care Housing</b>					
	<b>All</b>	<b>Some</b>	<b>All</b>	<b>Some</b>				
Resident warden* available 24/7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resident warden* working fixed hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Full-time non-resident warden**	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Part-time non-resident warden***	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Council-run community alarm service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Externally-run community alarm service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Optional meals (e.g. paid for "as you go")	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Regular meals (e.g. covered by a weekly charge)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On-site care team (24 hours)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On-site care team (day time only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

\* Resident wardens live on site. They may always be available to residents or they may only work fixed hours (e.g. Monday to Friday, 9am-5pm) (n.b. they may also cover other sheltered housing schemes during their working hours).

\*\* A full-time non-resident warden works 'full-time' fixed hours on site, but lives elsewhere.

\*\*\* A part-time non-resident warden visits several schemes on a regular basis (e.g. twice a week), but lives elsewhere (n.b. they may work full-time, but cover two or more schemes).

**14. Please provide the following information on weekly charges (please provide the range if relevant and please enter N/A for non-applicable charges)**

	<b>Sheltered Housing</b>		<b>Extra Care Housing</b>					
Rent for Bed Sitting Room (BSR)/Studio flat					1			7
Rent for 1-bedroom flat					2			8
Rent for 2-bedroom flat					3			9
Rent for 1-bedroom bungalow					4			10
Rent for 2-bedroom bungalow					5			11
Rent for other type of property (please specify below):						6		12
Service or property charge for BSR/Studio flat						1		7
Service or property charge for 1-bedroom flat						2		8
Service or property charge for 2-bedrom charge						3		9
Service or property charge for 1-bedroom bungalow							4	10
Service or property charge for 2-bedroom bungalow							5	11
Other service or property charge (please specify charge below):								6
								12
Heating/lighting charge for BSR/Studio flat						1		7
Heating/lighting charge for 1-bedroom flat						2		8
Heating/lighting charge for 2-bedrom charge						3		9

Heating/lighting charge for 1-bedroom bungalow	4	10
Heating/lighting charge for 2-bedroom bungalow	5	11
Other heating/lighting charge (please specify below):	6	12

Support charge (per person)	1	5	
Meals charge (per person)	2	6	
Community alarm charge (per dwelling)		3	7
Other charges (please specify below):		4	8

**15. This question focuses on the annual costs to the Council of providing various services (please enter N/A where non-applicable). Please indicate with an \* if these amounts also include costs associated with service provision to amenity housing for older people, as we recognise that it may not always be possible to identify costs associated only with sheltered housing and extra care housing:**

**Annual Cost to Council (e.g. amount in Budget for 2006/07)**

Warden provision to sheltered housing  
 Community alarm service to sheltered housing  
 Repairs to and maintenance of sheltered housing

**If necessary, please explain these annual costs below:**

**16. What percentage of your stock is in need of remodelling?**

	<b>Yes</b>	<b>No</b>
Sheltered Housing	1	3
Extra care housing	2	4

**17a. Have you remodelled any of your sheltered housing provision in the last five years (i.e. since 2001/02)?**

- Yes, already undertaken <sup>1</sup>  
 Yes, currently underway <sup>2</sup>  
 No <sup>3</sup>

*If YES, please answer the following questions (17b – d). If NO, please go to Q.18.*

**17b. Please provide a brief description of the remodelling:**

1

**17c. What was the cost of the remodelling?**

1

**17d. What impact has the remodelling had on revenue (e.g. has it decreased because there are fewer dwellings or has it increased because dwellings are easier to let)?**

- Increased by a large amount  1
- Increased by a small amount  2
- Stayed about the same  3
- Decreased by a small amount  4
- Decreased by a large amount  5
- Other (please explain):  6

**18a. Are you planning any remodelling of your sheltered housing provision in the near future?**

- Yes  1
- No  2

*If YES, please answer the following questions (b – d). If NO, please go to Q.19.*

**18b. Please provide a brief description of the remodelling planned:**

1

**18c. What is the anticipated cost of the remodelling?**

1

**18d. What impact is it anticipated that the remodelling will have on revenue (e.g. will it decrease because there are fewer dwellings or will it increase because dwellings are easier to let)?**

- Increased by a large amount  1
- Increased by a small amount  2
- Stayed about the same  3
- Decreased by a small amount  4
- Decreased by a large amount  5
- Other (please explain):  6

**E. CURRENT AND FUTURE CHALLENGES**

**19. What do you see as the most significant local and national challenges facing your Council's provision of sheltered housing?**

**19a. Local issues:**

1

**19b. National issues:**

1

**20. How do you think that sheltered housing *overall* needs to change to meet the future requirements and wishes of older people in your area?**

1

**21. What will be needed to bring this about?**

1

**22. Please use this box for any other comments you wish to make about sheltered housing provision.**

1

***Once again, thank you very much for your help with this review.***



## **Review of Sheltered Housing for Older People in Scotland Questionnaire for Private Sector Providers**

Researchers at the University of York based at the Centre for Housing Policy and York Health Economics Consortium have been commissioned by the Scottish Executive and Communities Scotland to undertake a **Review of Sheltered Housing for Older People**. As part of this review, we are sending electronic questionnaires to all providers of such housing. We would be very grateful if you could provide the required information (either electronically or by hand).

**Please return the completed questionnaire to us by email to [yhec@york.ac.uk](mailto:yhec@york.ac.uk),  
by fax to 01904 433628 or by freepost to:**

York Health Economics Consortium  
FREEPOST YO405  
2<sup>nd</sup> Floor Market Square  
University of York  
Vanbrugh Way  
Heslington  
YORK YO10 5ZZ

**By 5pm on Monday 20<sup>th</sup> November**

If you have any queries about completing this questionnaire, please email York Health Economics Consortium on [yhec@york.ac.uk](mailto:yhec@york.ac.uk). We will respond within 2 working days.

We realise that you may not always have precise information to answer some of the questions – where this is the case, please try to provide an estimate if possible.

We are interested in two types of provision – ***‘retirement’ or ‘sheltered housing’ (i.e. a cluster of dwellings for older people with a warden service and – for most schemes - an emergency call service) and extra care (or very sheltered) housing (i.e. offering 24 hour care and/or support and provision of meals)***. We do not want to know about amenity housing for older people (even though these dwellings may be fitted with a community alarm).

If you have any key local documents relating to the provision of sheltered housing we would very grateful if you could provide us with a hard or an electronic copy (or a web link).

**Please can you provide your contact details in case we need to clarify any answers.**

**Name:**           **Organisation:**

**Job Title:**           **Email:**

**Telephone:**

***Thank you very much for your help.***

## A. THE SUPPLY AND CONDITION OF SHELTERED HOUSING

We have used the Elderly Accommodation Counsel (EAC) database to get an overview of your sheltered housing schemes. However, we would like to ask you a few supplementary questions which are not always fully covered in the database.

### 1. How many sheltered housing and extra care housing schemes and dwellings for older owner-occupiers does your organisation manage?

	Number of Schemes	Number of Dwellings
Sheltered Housing for Older People	1	3
Extra care housing	2	4

### 2a. What is the physical condition of the buildings? (Please give estimate of percentage)

	Very Good	Good	Fair	Poor
<b>Sheltered Housing:</b>				
Percentage of stock/dwelling	1	3	5	7
<b>Extra care housing:</b>				
Percentage of stock/dwellings	2	4	6	8

### 2b. What percentage of your stock currently meets the Scottish Housing Quality Standards?

	Meeting Standards	Not Meeting Standards
<b>Sheltered Housing:</b>		
Percentage of stock/dwelling	1	3
<b>Extra care housing:</b>		
Percentage of stock/dwellings	2	4

1

### 3a. How suitable are the schemes and dwellings for older people requiring such housing in 2006/07 with regard to space standards?

	Very Suitable	Suitable	Not Very Suitable	Unsuitable
<b>Sheltered Housing:</b>				
Percentage of stock/dwellings	1	3	5	7
<b>Extra care housing:</b>				
Percentage of stock/dwellings	2	4	6	8

**3b. How suitable are the schemes and dwellings for older people requiring such housing in 2006/07 with regard to access?**

	<b>Very Suitable</b>	<b>Not Very Suitable</b>	<b>Unsuitable</b>			
<b>Sheltered Housing:</b> Percentage of stock/dwellings			1	3	5	7
<b>Extra care housing:</b> Percentage of stock/dwellings			2	4	6	8

**4. Please give main reasons why you consider your stock to be not very suitable or unsuitable?**

## **B. THE DEMAND FOR SHELTERED HOUSING**

We need to know about the popularity of your schemes and the underlying reasons for this.

**5. What percentage of your sheltered housing is ...?**

	<b>In Low Demand</b>	<b>In High Demand</b>
<b>Sheltered Housing:</b> Percentage of stock	1	3
<b>Extra care housing:</b> Percentage of stock	2	4

**6a. On average, how many potentially interested buyers do you have when a newly built property (i.e. properties that are coming on to the market for the first time) comes on to the market?**

In Sheltered Housing	1
In Extra care housing	2

**6b. What is the average time it takes to sell a newly built property?**

Sheltered Housing	Months <sup>1</sup>
Extra care housing	Months <sup>2</sup>

**6c. On average, how many potentially interested buyers do you have when a property that is not newly built (i.e. property that have had one or more former owners) comes onto the market?**

In Sheltered Housing	1
In Extra care housing	2

**6d. What is the average time it takes to sell a property that is not newly built?**

Sheltered Housing Months<sup>1</sup>

Extra care housing Months<sup>2</sup>

**7. What are the key factors contributing to current local demand patterns for your sheltered housing? (e.g. types of property; location of property):**

1

**8a. How do you think that demand in your area for various types of sheltered housing will increase or decrease over the next 5-10 years (please mark the relevant boxes)?**

	Increase Large	Stay the same Small	Decrease Large		
<b>Sheltered Housing:</b>					
Rented from/managed by the local authorities	<input type="checkbox"/> <sup>1</sup>	<input type="checkbox"/> <sup>6</sup>	<input type="checkbox"/> <sup>11</sup>	<input type="checkbox"/> <sup>16</sup>	<input type="checkbox"/> <sup>21</sup>
Rented from/managed by Housing Associations	<input type="checkbox"/> <sup>2</sup>	<input type="checkbox"/> <sup>7</sup>	<input type="checkbox"/> <sup>12</sup>	<input type="checkbox"/> <sup>17</sup>	<input type="checkbox"/> <sup>22</sup>
Rented from/managed by other organisations	<input type="checkbox"/> <sup>3</sup>	<input type="checkbox"/> <sup>8</sup>	<input type="checkbox"/> <sup>13</sup>	<input type="checkbox"/> <sup>18</sup>	<input type="checkbox"/> <sup>23</sup>
Provided by the private sector	<input type="checkbox"/> <sup>4</sup>	<input type="checkbox"/> <sup>9</sup>	<input type="checkbox"/> <sup>14</sup>	<input type="checkbox"/> <sup>19</sup>	<input type="checkbox"/> <sup>24</sup>
Shared ownership/shared equity	<input type="checkbox"/> <sup>5</sup>	<input type="checkbox"/> <sup>10</sup>	<input type="checkbox"/> <sup>15</sup>	<input type="checkbox"/> <sup>20</sup>	<input type="checkbox"/> <sup>25</sup>

	Increase Large	Stay the same Small	Decrease Large		
<b>Extra care housing:</b>					
Rented from/managed by the local Council	<input type="checkbox"/> <sup>1</sup>	<input type="checkbox"/> <sup>6</sup>	<input type="checkbox"/> <sup>11</sup>	<input type="checkbox"/> <sup>16</sup>	<input type="checkbox"/> <sup>21</sup>
Rented from/managed by Housing Associations	<input type="checkbox"/> <sup>2</sup>	<input type="checkbox"/> <sup>7</sup>	<input type="checkbox"/> <sup>12</sup>	<input type="checkbox"/> <sup>17</sup>	<input type="checkbox"/> <sup>22</sup>
Rented from/managed by other organisations	<input type="checkbox"/> <sup>3</sup>	<input type="checkbox"/> <sup>8</sup>	<input type="checkbox"/> <sup>13</sup>	<input type="checkbox"/> <sup>18</sup>	<input type="checkbox"/> <sup>23</sup>
Provided by the private sector	<input type="checkbox"/> <sup>4</sup>	<input type="checkbox"/> <sup>9</sup>	<input type="checkbox"/> <sup>14</sup>	<input type="checkbox"/> <sup>19</sup>	<input type="checkbox"/> <sup>24</sup>
Shared ownership/shared equity	<input type="checkbox"/> <sup>5</sup>	<input type="checkbox"/> <sup>10</sup>	<input type="checkbox"/> <sup>15</sup>	<input type="checkbox"/> <sup>20</sup>	<input type="checkbox"/> <sup>25</sup>

**8b. Please use this box for any other comments on the demand for your sheltered housing:**

1

**C. THE CHANGING ROLE OF SHELTERED HOUSING**

**9. Please describe briefly any key changes that you have made in the last five years (i.e. since 2001/02) or are planning to make in the near future to your service provision (e.g. provision of extra care; provision of meals; meeting different cultural dietary requirements; changes due to the European Working Time Directive; adaptations).**

**Changes made recently (i.e. since 2001/02) to sheltered housing:**

1

**Changes planned for the near future:**

1

**10a. If you have made, or are planning to make such changes, what were/are the main reasons for these changes? (Please tick all that apply)**

- European Working Time Directive <sup>1</sup>
- Reduction in Supporting People funding <sup>2</sup>
- Changing needs of existing residents <sup>3</sup>
- Other (please specify) <sup>4</sup>

**10b. If you have not made and are not planning to make any such changes, please explain why**

1

**11a. Do you consider that any of your sheltered housing stock is non-viable?**

**Yes** <sup>1</sup> **No** <sup>2</sup>

*If YES: What percentage of dwellings is considered non-viable?*  
(Now go to Qs.11b-d)

1

*If NO: Please go to Q.12*

**11b. Please rank the reasons for their non-viability, giving 1 to the most important reason (and use N/A to indicate any non-applicable reasons)**

- Poor physical condition 1
- Lack of communal facilities 2
- Inappropriate location 3
- Dwellings too small 4
- Lack of lift 5
- Poor energy efficiency 6
- Lack of demand 7
- Inappropriate for older people with disabilities 8
- Other (please specify below): 9

**11c. Please indicate how you plan to use non-viable buildings and sites in the future (please mark all that apply):**

- |                                                                                    |                          |   |
|------------------------------------------------------------------------------------|--------------------------|---|
| Disposal to private or independent sector for alternative housing use              | <input type="checkbox"/> | 1 |
| Disposal to private or independent sector for alternative non-housing use          | <input type="checkbox"/> | 2 |
| Disposal to local authority or housing association for alternative housing use     | <input type="checkbox"/> | 3 |
| Disposal to local authority or housing association for alternative non-housing use | <input type="checkbox"/> | 4 |
| Retain by your organisation for alternative model of care (e.g. intermediate care) | <input type="checkbox"/> | 5 |
| Retain by your organisation as housing for younger tenants                         | <input type="checkbox"/> | 6 |
| Retain by your organisation for other uses (e.g. non-care service; offices)        | <input type="checkbox"/> | 7 |
| Other (please specify below):                                                      | <input type="checkbox"/> | 8 |

**11d. Please use this box for any other comments about non-viable sheltered housing stock:**

1

**D. SERVICE PROVISION AND THE COSTS OF SHELTERED HOUSING**

**12. We recognise that your organisation probably provides a range of sheltered housing and extra care schemes. Please indicate which of the following services are provided for residents in some or all of your schemes (please mark all that apply):**

	Sheltered Housing		Extra Care Housing					
	All	Some	All	Some				
Resident warden* available 24/7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resident warden* working fixed hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Full-time non-resident warden**	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Part-time non-resident warden***	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In-house community alarm services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Externally-run community alarm service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Optional meals (e.g. paid for "as you go")	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Regular meals (e.g. covered by a weekly charge)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On-site care team (24 hours)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On-site care team (day time only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

\* Resident wardens live on site. They may always be available to residents or they may only work fixed hours (e.g. Monday to Friday, 9am-5pm) (n.b. they may also cover other sheltered housing schemes during their working hours).

\*\* A full-time non-resident warden works 'full-time' fixed hours on site, but lives elsewhere.

\*\*\* A part-time non-resident warden visits several schemes on a regular basis (e.g. twice a week), but lives elsewhere (n.b. they may work full-time, but cover two or more schemes).

**13. Please provide the following information on weekly charges (please provide the range if relevant and please enter N/A for non-applicable charges)**

	Sheltered Housing	Extra Care Housing
Service or property charge for BSR/Studio flat	1	7
Service or property charge for 1-bedroom flat	2	8
Service or property charge for 2-bedrom charge	3	9

Service or property charge for 1-bedroom bungalow	4	10
Service or property charge for 2-bedroom bungalow	5	11
Other service or property charge (please specify charge below):		6

12

Heating/lighting charge for BSR/Studio flat	1	7
Heating/lighting charge for 1-bedroom flat	2	8
Heating/lighting charge for 2-bedrom charge	3	9
Heating/lighting charge for 1-bedroom bungalow	4	10
Heating/lighting charge for 2-bedroom bungalow	5	11
Other heating/lighting charge (please specify below):	6	12

Support charge (per person)	1	5
Meals charge (per person)	2	6
Community alarm charge (per dwelling)	3	7
Other charges (please specify below):	4	8

- 14. This question focuses on the annual costs to your organisation of providing various services (please enter N/A where non-applicable). Please indicate with an \* if these amounts also include costs associated with service provision to amenity housing for older people, as we recognise that it may not always be possible to identify costs associated only with sheltered housing and extra care housing:**

**Annual Cost to organisation  
(e.g. amount in Budget for  
2006/07)**

Warden provision to sheltered housing  
Community alarm service to sheltered housing  
Repairs to and maintenance of sheltered housing  
Other (please specify below):

**If necessary, please explain these annual costs below:**

## **E. CURRENT AND FUTURE CHALLENGES**

- 15. What do you see as the most significant local and national challenges facing your organisation's provision of sheltered housing?**

**15a. Local issues:**

1

**15b. National issues:**

1

**16. How do you think that sheltered housing *overall* needs to change to meet the future requirements and wishes of older people?**

1

**17. What will be needed to bring this about?**

1

**18. Please use this box for any other comments you wish to make about sheltered housing provision.**

1

***Once again, thank you very much for your help with this review.***



## REVIEW OF SHELTERED HOUSING IN SCOTLAND: SURVEY OF RESIDENTS OF SHELTERED HOUSING

### SECTION A: ABOUT YOUR SHELTERED HOUSING SCHEME

- 1. What type of accommodation do you live in? Please tick the box that best describes your accommodation:**

Flat (ground floor)	<input type="checkbox"/>
Flat (non-ground floor)	<input type="checkbox"/>
Bedsitting room/studio apartment (ground floor)	<input type="checkbox"/>
Bedsitting room/studio apartment (non-ground floor)	<input type="checkbox"/>
Bungalow/cottage (single storey)	<input type="checkbox"/>
House (two storey)	<input type="checkbox"/>

- 2. If you live above the ground floor, is there a lift that you can use? Please tick a box:**

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

- 3. Do you have to climb any steps to get to your front door?**

No – there are no steps	<input type="checkbox"/>
No – because I have a ramp and/or can use the lift	<input type="checkbox"/>
Yes – I have to climb 3 or less steps	<input type="checkbox"/>
Yes – I have to climb 4 or more steps	<input type="checkbox"/>

- 4. What is your accommodation like? Please tick all the boxes that apply to your accommodation:**

I have one bedroom	<input type="checkbox"/>
I have two bedrooms	<input type="checkbox"/>
I have three or more bedrooms	<input type="checkbox"/>
I have an accessible bath	<input type="checkbox"/>
I have an accessible shower	<input type="checkbox"/>
I have central heating	<input type="checkbox"/>
I have double glazed windows	<input type="checkbox"/>

**5. Do you rent your home or have you bought it? Please tick the box that best describes your home:**

I own my home outright	<input type="checkbox"/>
I own my home but still have an outstanding mortgage	<input type="checkbox"/>
I rent my home from a local authority	<input type="checkbox"/>
I rent my home from a housing association	<input type="checkbox"/>
I partly own my own home but also pay rent	<input type="checkbox"/>
Other, please describe:	<input type="checkbox"/>

**6. Are you happy with the following? Please tick the boxes that most closely describe your views:**

	Very happy	Quite happy	Neither happy nor unhappy	Quite unhappy	Very unhappy
The amount of space I have in my accommodation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The condition of my accommodation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The heating in my accommodation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

**SECTION B: ABOUT THE AREA AROUND MY SHELTERED HOUSING SCHEME**

**7. Are the following facilities in easy reach of your sheltered housing (walking distance or easily accessible by public transport)? For each facility please tick the box indicating either yes or no:**

	<b>Yes</b>	<b>No</b>
A supermarket or high street where you can do your weekly shop	<input type="checkbox"/>	<input type="checkbox"/>
A corner shop	<input type="checkbox"/>	<input type="checkbox"/>
Post Office	<input type="checkbox"/>	<input type="checkbox"/>
Doctor's surgery or Health centre	<input type="checkbox"/>	<input type="checkbox"/>
Pharmacy/Chemist	<input type="checkbox"/>	<input type="checkbox"/>
A day centre for older people	<input type="checkbox"/>	<input type="checkbox"/>
Leisure centre/swimming pool	<input type="checkbox"/>	<input type="checkbox"/>
Parks and green areas	<input type="checkbox"/>	<input type="checkbox"/>
Places for entertainment – clubs, pubs, cinemas etc.	<input type="checkbox"/>	<input type="checkbox"/>
A place of worship for your faith or denomination	<input type="checkbox"/>	<input type="checkbox"/>
A library	<input type="checkbox"/>	<input type="checkbox"/>
Local public transport	<input type="checkbox"/>	<input type="checkbox"/>
National public transport	<input type="checkbox"/>	<input type="checkbox"/>

**8. Do you feel safe in and around your sheltered housing scheme? Please tick the box indicating your views for each of the following:**

	<b>Yes</b>	<b>No</b>
I feel safe inside my accommodation	<input type="checkbox"/>	<input type="checkbox"/>
I feel safe inside my sheltered housing scheme	<input type="checkbox"/>	<input type="checkbox"/>
I feel safe in the area around my sheltered housing scheme	<input type="checkbox"/>	<input type="checkbox"/>

**SECTION C: ABOUT THE FACILITIES IN MY SHELTERED HOUSING SCHEME**

**9. What services are provided by your warden in your sheltered housing scheme? Please tick all the boxes that apply to your housing scheme:**

Warden or scheme manager lives on site/in the building	<input type="checkbox"/>
Warden is on site/in the building for some of the time each day, including weekends	<input type="checkbox"/>
Warden is on site/in the building for some time every weekday	<input type="checkbox"/>
The warden only visits my sheltered housing schemes sometimes	<input type="checkbox"/>
24-hour cover is provided by the warden service or by scheme assistants (though not necessarily by your scheme warden)	<input type="checkbox"/>
The warden regularly checks that everyone is alright	<input type="checkbox"/>
The warden helps with shopping	<input type="checkbox"/>
The warden helps with filling in forms	<input type="checkbox"/>
The warden helps if something goes wrong in my home, for example, if a light bulb needs replacing or if I need help with a problem like a leaking pipe	<input type="checkbox"/>
The warden comes in for a chat on a regular basis	<input type="checkbox"/>
Other:	<input type="checkbox"/>

Comments:
-----------

**10. What alarm system do you have in your sheltered housing scheme. Please tick the boxes which best describes the alarm system in your housing scheme:**

There are alarms (to the warden or to a call centre) in every room in my home	<input type="checkbox"/>
There are alarms in one or more of the rooms in my home	<input type="checkbox"/>
I have a personal alarm which I wear (e.g. a pendant) to call the warden or call centre	<input type="checkbox"/>
There are no alarms in my home	<input type="checkbox"/>
There are alarms in the communal areas of my housing complex (e.g. corridors, lifts and stairways)	<input type="checkbox"/>

**11. What facilities does your sheltered housing scheme provide? Please tick all the boxes that apply to your housing scheme:**

There is a lounge	<input type="checkbox"/>
There is additional accommodation that can be used by guests staying overnight	<input type="checkbox"/>
There are laundry facilities	<input type="checkbox"/>
Meals are provided for residents	<input type="checkbox"/>
There is access to a garden or patio where I can sit	<input type="checkbox"/>
If someone needs extra care, the staff who work in the scheme can provide it	<input type="checkbox"/>
There is suitable car parking nearby	<input type="checkbox"/>

If there are other services please describe them below:

**12. What social activities does your sheltered housing scheme provide? Please tick all the boxes that apply to your housing scheme:**

There are social activities in my sheltered housing scheme (such as coffee mornings, bingo sessions, trips)	<input type="checkbox"/>
If social activities are provided, I do not feel pressurised into taking part in arranged social activities	<input type="checkbox"/>

**SECTION D: ABOUT YOUR DECISION TO MOVE TO A SHELTERED HOUSING SCHEME**

**13. How did you make the decision to move into sheltered housing? Please tick the boxes showing all the reasons that best describe your decision to move:**

It was purely my decision to move	<input type="checkbox"/>
While other people/professionals were involved, I took the decision myself	<input type="checkbox"/>
It was a joint decision between myself and my family	<input type="checkbox"/>
It was more the decision of my family than myself that I should move	<input type="checkbox"/>
It was more the decision of doctors/social services that I should move	<input type="checkbox"/>
The council/my housing association suggested I move into sheltered housing (including offers made under incentive schemes)	<input type="checkbox"/>

**14. Why did you move into sheltered housing? Please tick the boxes showing all the reasons that best describe your decision to move:**

I was worried about my health and wanted a warden service	<input type="checkbox"/>
I needed somewhere to live that was designed for older people	<input type="checkbox"/>
I wanted to downsize my home as the upkeep of my previous home was getting too much	<input type="checkbox"/>
I wanted to feel safer from crime	<input type="checkbox"/>
I needed somewhere warmer/in better condition than my previous home	<input type="checkbox"/>
I was lonely and/or bored and wanted the company of people my own age	<input type="checkbox"/>
I felt isolated in my previous home	<input type="checkbox"/>
Even though I might need some help, I want to stay independent as long as possible	<input type="checkbox"/>
I decided to move now rather than face upheaval in later years	<input type="checkbox"/>
Other, please describe below:	<input type="checkbox"/>

**15. Where did you live before you moved into the sheltered housing scheme? Please tick the box that best describes where you lived before:**

In the same town or district within 2 miles of the scheme	<input type="checkbox"/>
In the same town or district within 10 miles of the scheme	<input type="checkbox"/>
Between 10-20 miles away from the scheme	<input type="checkbox"/>
More than 20 miles away from the scheme	<input type="checkbox"/>
Other, please specify below:	<input type="checkbox"/>

**16. Did you rent or own your previous home? Please tick the box that best describes your previous home:**

I owned my previous home	<input type="checkbox"/>
I rented my previous home from a local authority	<input type="checkbox"/>
I rented my previous home from a housing association	<input type="checkbox"/>
I partly owned my home but also paid rent	<input type="checkbox"/>
Other, please describe below:	<input type="checkbox"/>

**17. How long have you lived in your sheltered housing scheme? Please tick the box that best describes your situation:**

Under one year	<input type="checkbox"/>
Between one and two years	<input type="checkbox"/>
Between two and three years	<input type="checkbox"/>
Between three and four years	<input type="checkbox"/>
Between four and five years	<input type="checkbox"/>
Over five years	<input type="checkbox"/>
Not sure	<input type="checkbox"/>

**SECTION E: YOUR VIEWS ON YOUR SHELTERED HOUSING SCHEME**

**18. Do you feel that the scheme you live in, gives you good value for money? Please tick the box that best describes your views:**

<b>Very good value for money</b>	<b>Quite good value for money</b>	<b>Quite poor value for money</b>	<b>Very poor value for money</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please explain the reasons for your views:

**19. Do you agree or disagree with the following statements about living in your sheltered housing scheme? Please tick the box that best describes your views:**

	<b>Agree</b>	<b>Disagree</b>
I can be independent	<input type="checkbox"/>	<input type="checkbox"/>
I have my own front door and privacy	<input type="checkbox"/>	<input type="checkbox"/>
My home is well designed	<input type="checkbox"/>	<input type="checkbox"/>
Help is close by, should the need arise	<input type="checkbox"/>	<input type="checkbox"/>
My rent / mortgage costs are reasonable	<input type="checkbox"/>	<input type="checkbox"/>
The service charge(s) are reasonable	<input type="checkbox"/>	<input type="checkbox"/>
There is company for older people who might otherwise be alone	<input type="checkbox"/>	<input type="checkbox"/>
Social activities are arranged for residents	<input type="checkbox"/>	<input type="checkbox"/>
It is safe from crime	<input type="checkbox"/>	<input type="checkbox"/>



**Please describe any other good things about living in sheltered housing below:**

**Please describe any other less good things about living in sheltered housing below:**

**20. We are interested in whether you agree or disagree with the following statements. Please tick the box next to each statement indicating whether you agree or disagree:**

	Agree	Disagree
Sheltered housing is a good service for older people	<input type="checkbox"/>	<input type="checkbox"/>
Sheltered housing could be used for groups other than older people who might benefit from a warden service, such as younger people with disabilities	<input type="checkbox"/>	<input type="checkbox"/>
Sheltered housing is a good option for some older people, but there should be services to let you stay in an ordinary house if you become ill or vulnerable in some way	<input type="checkbox"/>	<input type="checkbox"/>
Sheltered housing is better than residential care homes	<input type="checkbox"/>	<input type="checkbox"/>
If you are in sheltered housing, it is easy to get social services and health services if you need them	<input type="checkbox"/>	<input type="checkbox"/>
I would find it difficult to share sheltered housing with people who were very ill or disabled	<input type="checkbox"/>	<input type="checkbox"/>
I would find it difficult to share sheltered housing with people with dementia or confusion	<input type="checkbox"/>	<input type="checkbox"/>
I was worried about moving somewhere full of older people as this is often associated with ill health	<input type="checkbox"/>	<input type="checkbox"/>
Being in sheltered housing is more like being in an institution than being in your own home	<input type="checkbox"/>	<input type="checkbox"/>
I would rather be living in an ordinary home than in sheltered housing	<input type="checkbox"/>	<input type="checkbox"/>
I would not mind if non residents came into my sheltered scheme to get day centre/other services	<input type="checkbox"/>	<input type="checkbox"/>
Sheltered housing works best for older people who are in relatively good health and who are able to live quite active lives	<input type="checkbox"/>	<input type="checkbox"/>
I wish I had moved into sheltered housing earlier than I did	<input type="checkbox"/>	<input type="checkbox"/>

**21. How could sheltered housing be improved? Please tick all the boxes that best describe your views:**

The living spaces in some sheltered homes should be bigger	<input type="checkbox"/>
It could be easier to enter/leave some sheltered schemes (e.g. fewer steps, more ramps and lifts)	<input type="checkbox"/>
Interior design (e.g. it should be easy to reach switches and cupboards)	<input type="checkbox"/>
There should be fewer stairs or shorter corridors inside schemes	<input type="checkbox"/>
Sheltered housing rent should be cheaper	<input type="checkbox"/>
Service charges should be cheaper	<input type="checkbox"/>
Sheltered housing should have more social activities	<input type="checkbox"/>
There should be extra care services if you need them	<input type="checkbox"/>
There should be more facilities (e.g. lounges, laundry rooms, gardens)	<input type="checkbox"/>
I would like more contact with the warden	<input type="checkbox"/>
If there is anything else you would like to say about how sheltered housing could be improved, please describe them below:	<input type="checkbox"/>

**SECTION F: WE WOULD LIKE TO ASK YOU A FEW QUESTIONS ABOUT YOURSELF. YOUR ANSWERS WILL HELP US TO ANALYSE THE INFORMATION WE COLLECT**

**22. Are you male or female? Please tick a box:**

Male	<input type="checkbox"/>
Female	<input type="checkbox"/>

**23. How old are you?**

	<b>Years</b>
--	--------------

**24. How would you describe your ethnic origins? Please tick a box:**

White	<input type="checkbox"/>	Indian	<input type="checkbox"/>
Black Caribbean	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>
Black African	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>
Black Other	<input type="checkbox"/>	Chinese	<input type="checkbox"/>
Other, please specify below:			<input type="checkbox"/>

**25. Would you say that any of the following apply to you? Please tick all the boxes that best apply to you:**

I have good health	<input type="checkbox"/>
I cannot climb stairs	<input type="checkbox"/>
I need help with cooking healthy meals	<input type="checkbox"/>
I need help with cleaning	<input type="checkbox"/>
My home has been adapted to let me do more things for myself	<input type="checkbox"/>
I have trouble with my eyesight	<input type="checkbox"/>
I have trouble with my hearing	<input type="checkbox"/>
I sometimes have trouble remembering things	<input type="checkbox"/>
I get home care services	<input type="checkbox"/>
The nurse comes to see me often	<input type="checkbox"/>
I need help with the shopping	<input type="checkbox"/>
I cannot walk short distances	<input type="checkbox"/>

**26. Is there anything else you would like to tell us about living in sheltered housing?**

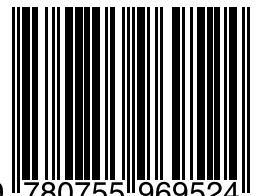
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