Bell View Final Report

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Acknowledgements

Contents

List of Tables

List of Figures

Introduction and overview

Housing for an ageing population

Population ageing, and future funding arrangements for health and social care remain high on the political agenda. The issue of housing and where people choose to live in retirement are central to these discussions. In housing policy, the term 'older people' is applied to a very broad and disparate population group. It includes those over or approaching retirement age, including the active, newly retired through to the very frail elderly; whose housing needs can encompass accessible, adaptable general needs housing through to the full range of retirement and specialised housing for those with support or care needs.

There is no 'one size fits all' model of older people's housing. There is a consensus that what is required is a range of housing options across all tenures that can meet the very diverse needs and rising expectations of this growing older population group[1]. Recently published policy reviews and market research reports confirm that most older people will remain in their own homes in mainstream housing across all tenures[2]. However, there is a predicted rise in demand for accessible and sheltered/extra care housing as an alternative to residential care, particularly for people moving at later ages[3].

The supply of well-designed and fully accessible housing for older people is constrained by the shortage of suitable land, the availability of capital finance, and the lack of guaranteed revenue funding, especially for housing with on-site housing management and or /care, often referred to as 'supported housing'. There are additional obstacles limiting the provision of affordable housing provision in rural areas. These include; the shortage of affordable land in locations close to services and amenities, loss of affordable housing stock because of Right to Buy policies, and problems in finding developers and housing providers willing to invest in small-scale social housing schemes, including bungalows, outside larger settlements[4].

The right housing in the right place

The stated preference of planners and social care service commissioners is to concentrate larger 'housing with care' schemes in the larger market towns such as Alnwick, Berwick, Rothbury and Bellingham[5]. However, Northumberland County Council has also identified the potential for smaller community-led housing schemes to play an important role in supporting people to age with dignity, choice and control in well-serviced rural settlements.

There is growing interest in the potential for small community-led housing initiatives to fill some of the affordable housing gaps in smaller rural communities[6]. Across the Country, some rural communities have become direct providers of affordable housing. In others, community groups have partnered with larger housing associations to take advantage of

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[1] Beach (2016), Generation Stuck, Exploring the Reality of Downsizing in Later Life, report for the International Longevity Centre.
[2] Beach (2018), Stronger Foundations - International Lessons for the Housing-with-Care Sector in the UK, report for the International Longevity Centre, House of Commons CLG Committee (2018), Housing for Older People (second report of session 2017-2019), Savills (2017), Spotlight on Housing for Older People
[3] PSSRU (2017), Projected Demand for Supported Housing in Great Britain 2015-2030.
[4] APPG Report (2018), 'Rural Housing for an Ageing Population'. http://bit.ly/2WG0VZf.
[5] Northumberland Extra Care and Supported Housing Strategy (2018), Northumberland County Council.
[6] Social Regeneration Consultants (2017), Enabling Affordable Community-Led Housing in North Yorkshire and East Riding.

their ability to access to finance, and their development, housing management and maintenance expertise[7].

Different models of community-led housing and capital funding streams are emerging in Northumberland. This includes affordable housing provision for older people developed by the Glendale Gateway Trust in the nearby market town of Wooler. The SCATA project[8] has developed accessible housing for older people in Guessburn in the South of the County in partnership with registered housing provider Karbon Homes. There have been developments of private retirement apartments by McCarthy and Stone in Alnwick and Morpeth, and a new mixed tenure extra-care housing scheme has been built by Karbon Homes in Alnwick.

Bell View and housing

The Bell View charity has always had an interest promoting the supply of accessible housing to enable older people remain in the community of their choice. Through a partnership arrangement with Johnnie Johnson Housing, five new wheelchair accessible bungalows were built in the grounds of the Bell View Resource Centre. The bungalows in Bell View Court have been available for affordable rent since 2005. The bungalows are managed independently of the Bell View Charity by Johnnie Johnson Housing and remain popular. The Charity has completed and commissioned local studies of housing and support needs in the past however, Bell View has never been a direct housing provider.

The Bell View trustees are keen to explore the potential for Bell View to become a social housing provider. This would build on a strong foundation of service innovation by providing accessible and affordable housing targeted at older people who may otherwise lose the opportunity to grow older in the community where they have strong local connections. For this reason, the focus of this research has been households containing at least one older person aged 65 and over and has included consideration of both housing and housing-related support needs.

As (table 1) depicts, the charity offers a range of care and support options that can be tailored to the needs of an individual household as needs change over time. This would support the development of a new model of rural 'extra-care' housing where people have access to fully adapted housing AND a comprehensive offer of support from the Bell View Resource Centre.

Creating 'age-friendly' communities

Housing provision cannot be seen in isolation, but rather as part of a 'whole systems' approach to meeting the needs of an ageing population. This is sometimes referred to as a 'Lifetime Neighbourhood' approach. It requires investment in local infrastructure and the mobilisation of community resources to create places where where people can move around easily and remain socially valued and connected, even if their health and mobility status changes over time. The Lifetime Neighbourhood is a model of housing and support service development that Northumberland County Council is keen to progress[9]. It is a vision that fits with Bell View's mission to support and enable older people to live independently for as long as possible, delivering and developing innovative services that meet the needs of individuals and local communities in rural North Northumberland.

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[7] Such as the Esk Moor partnership with Abbeyfield in North Yorkshire. http://bit.ly/2N9yekm.
[8] For more information go to: https://www.scatacommunity.co.uk/news.
[9] Northumberland County Council (2018), Extra Care and Supported Housing Strategy.

Table 1 - Current services provided through Bell View Project

Direct Service provision
NHS Podiatry on site weekly, Advice and Guidance Service, Community Café (with Cooked meals twice a week), Volunteering Opportunities, Short term Wheelchair Loan Service, Community Transport (BRINGO), Prescription Delivery Service, Assisted Shopping Trips, Luncheon Clubs and Social Gatherings (at the centre and across North Northumberland), 'Help at Home' Domiciliary Care, Bell View Care (Day Centre, Fresh and Frozen Meals), Fundraisers / opportunities to get together: such as monthly Quiz Nights, Domino Drives, Coffee Mornings, Cultural Visits to the Theatre and Christmas Lights etc.
Health Related Activities
Pilates, Yoga, Gentle Exercise Group 'Young at Heart', Walking for Health, Older Persons Gym (Silver Sneakers)
Self-Led Groups
Camera Group, Life Drawing Class, Art Group, 'Savvy Surfers' (Digital Inclusion), 'Silver Singers' (Singing for Fun), Book Reading Group, Card Making, Handicrafts, Rag Rug group, Northumberland Genealogy Group, Belford History Group, Monthly Film Nights
New Services in the Pipeline
Men's Group, Hospital Visiting Service

The location of the Bell View Resource Centre in the Centre of the village and the presence of a good range of services and amenities means that Belford is uniquely equipped to offer a tailored package of care and support to older residents that other rural settlements would struggle to provide.

The Community Housing Fund

In December 2016, Northumberland County Council (NCC) was awarded just over £1.3m[10] from the Government's Community Housing Fund. The aim of the fund is to support communities to deliver affordable housing to meet local need. The fund includes capital and revenue funding streams. Just over £300k of the fund was allocated as revenue to support community group development, housing needs studies and feasibility studies. The remaining £1m was allocated as capital to support development/refurbishment costs. Some of the revenue funding was used to set up a local housing enabling hub, called Communities CAN

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[10] At the time of writing, the Community Housing fund has around £700k funding still available and community housing providers can request up to £50k capital funding support per unit up to a maximum of £200k for a single development.

North East Ltd (CCAN). Directors of CCAN work closely with communities and Northumberland County Council to bring forward housing schemes for development.

The Bell View application

In 2018, Bell View submitted a bid to the County Council for feasibility study to assess the local need and support for additional purpose-built housing to support older people to grow older in the community of their choice. The focus for the Bell View feasibility study is the provision of accessible, well-designed affordable social housing for that can be adapted to meet changing mobility and care needs as people grow older. The aim of combining accessible housing with locally available care and support is to delay or avoid the need for people to be forced to move outside the village into residential or nursing care wherever possible.

Funding was granted for an initial feasibility study to establish local housing need and local support for any proposed new housing scheme for older adults in Belford. The objective was to map and attempt to quantify existing need for additional affordable housing and housing related support for older people in the local area in order to progress a funding application for a full-scale feasibility study for a new community housing project.

The Consultant

Dr. Lynne Livsey of LQR Associates was commissioned by the Bell View Charity to complete a housing and support needs study during the summer of 2019. The consultancy work was undertaken between July and September 2019.

The Housing Needs Study complements previous research undertaken by LQR Associates for Northumberland County Council[11] and separate consultancy work completed for Bell View[12]. The report acknowledges the findings of these studies and draws on research findings on housing for older people undertaken elsewhere

Project Management

LQR Associates were responsible for the day to day project management. A Project Reference Group was established that included: Bell View Operations and Service Development Managers, trustee representatives, Duncan Roberts (Architect for the Bell View project), and representatives from Belford Parish Council, Belford Medical Group and Belford Community Group. The Reference Group met monthly and received regular updates from the Consultant.

The following sections outline the work undertaken to establish local housing need as part of this study. A multi-method approach was used including:

- A rapid desk-top review of existing local planning strategies and demographic profiles to assess need and likely demand for additional housing. This included gathering market intelligence to identify potential schemes in the pipeline that may impact on Bell View's plans

- Discussions with Northumberland Council's Housing Enablers and other social housing providers to discuss their experience of demand/turnover/void issues in the locality

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[11] LQR Associates (2013), 'Ageing well in Northumberland, Older People's Housing Needs and Aspirations' for Northumberland County Council.
[12] Trapeze Consulting (2017), 'Bell View 'Strengths and Needs' analysis of catchment area' (October 2017), Executive Summary and Full Report.

- Discussions with Social Care and Supported Housing Service Commissioners to discuss how the proposed model of accessible and affordable housing with care and support fits with their future commissioning strategies

- Collection of quantitative data by through a structured housing needs survey to assess local housing preferences and intentions from households aged 65+

- Collection of qualitative data from two separate focus groups and interviews with older people in Belford to discuss their housing and related support needs in more detail. The focus groups included: people who had moved home in retirement in Belford as their housing needs changed, and families with experience of moving older family members to live in Belford and surrounding area when their support needs have changed.

- A community consultation day to invite local residents and community groups to find out more about the research and to contribute their ideas and comments about a community housing proposal focused on supported housing.

This report presents a summary of the key findings from this research. It is intended to inform further discussions around community housing provision to support people growing older in Belford and surrounding rural and coastal settlements.

Data considerations

The Consultant has taken care to ensure that the information in this report is correct at the time of writing. Data and policy documents are constantly being updated and we have endeavoured to use the most up to date information available. Any errors and omissions are the responsibility of the author.

There are inconsistencies in the way that administrative data are collected and presented by different agencies. Data have been amalgamated from a range of different sources and levels of administrative geography for this report. This means that in some instances, the data and information presented may be 'best fit' for the purposes of this feasibility study.

A numbered system of referencing has been used throughout the text where other reports and research evidence are cited. This report contains links to information stored on various websites. However, LQR Associates do not endorse these websites and we are not responsible for their content. We cannot guarantee that these links will work or that the information cited will be available.

Finally, LQR Associates are not responsible for how the information from this report is ultimately used, how it is interpreted or what reliance is placed on it. We do not accept responsibility for any subsequent alteration or manipulation of our data and findings.

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The Demographic Evidence

This section of the report presents evidence from a desk-top review of demographic trends and relevant research literature that is relevant to understanding likely housing and support needs amongst the older population. The data are drawn from a range of national, regional, county-wide datasets and wider research literature.

An ageing rural population

In common with most rural areas of England, north Northumberland has a rapidly ageing population with an increase in the number and proportion of people aged 65 and older. Demographic analysis produced by Northumberland County Council identifies an anticipated increased population aged over 65 and a decrease in younger and middle age groups. The over 65 population is expected to account for 33.6% of the total population in Northumberland in 2039, compared to an estimated figure of 22.5% in 2014. The fastest growing population group comprises people aged 85 and over, sometimes referred to as the oldest old'[13].

The demographic profile for north Northumberland shows that rural and coastal settlements such as Belford, Bamburgh, Seahouses, Wooler, and Alnwick are at the forefront of the ageing population trend. Belford is located within the Bamburgh electoral ward. Neighbourhood profile data for the Bamburgh Ward produced by Northumberland County Council shows that almost a third of the population were aged 65 and over in the last census (2011) (see Table 2).

Table 2 - The Older Population in Bamburgh Ward

Age range	Number	Percent
All adults aged 65+	1356	29%
65 -74 years	758	16.2%
75 +	598	12.8
Median age	53	n/a

Source: Northumberland County Council Bamburgh Electoral Ward Profile (2011).

Figure 1 overleaf shows the population profile for Bamburgh ward by age group and the horizontal bands illustrate the concentration of the population in the older age groups for both men and women.

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[13] Source: https://www.northumberland.gov.uk/Northumberland-Knowledge-and-JSNA/Our-People/Older-People.aspx (accessed 10/10/2019).

Figure 1 - Population profile for Bamburgh ward

Age pyramid for selection: male and female numbers per five-year age group, 2012
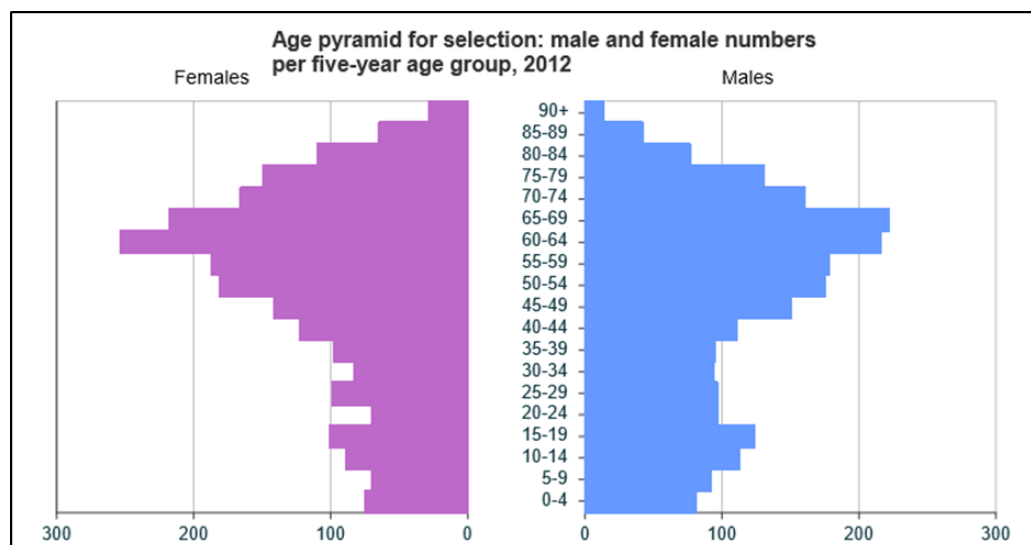
Source: ONS © Crown Copyright 2013

Average life-expectancy in Bamburgh Ward is slightly higher than the national average and the County as a whole (Table 3). The area is relatively affluent, and the proportion of older households classified as income deprived (15.9%) is slightly lower than the Northumberland average (16%) and England as a whole (18.8%)[14].

Table 3 - Average life expectancy in Bamburgh Ward

Average Life Expectancy at birth, years 2008 – 2012			
	Bamburgh Ward	Northumberland	England
Males	79.9 years	78.8 years	78.9 years
Females	83.3 years	82.2 years	82.8 years

Source: ONS © Crown Copyright 2013

However, the health indicators from the 2011 census paint a slightly different picture (figure 2) with a higher percentage of households living with poor health or a limiting long-term illness and disability. The percentage of people providing more than 50 hours of care per week (3.1%) is also higher than the Northumberland average (2.8%) and England as a whole (2.4%). This is likely due to the older population profile of Bamburgh ward.

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[14] Public Health England (2015), Local Health Report – Bamburgh Ward.

Figure 2 - Health and Caring in Bamburgh Ward 2011

Health and care indicators, 2011, %

Indicator	Selection	Lower Tier Local Authority ()	Upper Tier Local Authority (Northumberland)	England
General health very bad (%)	1.6	//	1.4	1.2
General health bad or very bad (%)	6.2	//	6.3	5.5
Limiting long term illness or disability (%)	23.6	//	20.7	17.6
Provides 1 hour or more unpaid care per week (%)	12.5	//	11.3	10.2
Provides 50 hours or more unpaid care per week (%)	3.1	//	2.8	2.4

Source: ONS Census

Living Arrangements

Historically women have lived longer than men and they have been more heavily represented in oldest old and the population of older adults in residential or nursing homes. However, the gap between male and female life expectancy is narrowing. Overall, male-life expectancy at age 65 is increasing. This means that more people are living with a partner or spouse in retirement. Older spouses are taking an increasing role in caring for frailer and or disabled partners, often with little support.

At national level, just under a third (31 per cent) of those aged 65 and over were living alone in 2011; this was a decrease from 34 per cent in 2001[15]. However, the risk of living alone increases with age and higher proportions of people are widowed. Amongst those aged 85 and over, 35.9% of men and 76.5% of women are widowed. The divorce rate amongst those aged 50 and over is increasing. The proportion of those aged 65 and over who were divorced almost doubled from 5.2 per cent in 2001 to 8.7 per cent in 2011. This is significant for housing because relationship breakdown and or bereavement can bring a major change in household income. Changes to relationship status can also trigger a housing move.

Recent research has shown that older people who live alone are more likely to be admitted to Accident and Emergency and or to use GP services[16]. Living alone with limiting health conditions is associated with increased risk of loneliness and social isolation in later life with detrimental impact on physical and mental health.

Of significance to this study, by 2030, the number of older people living alone in Northumberland is forecast to increase significantly. The largest percentage increase in will be older people aged 75+, where the proportion living alone is predicted to rise by nearly two thirds (65%) in the years 2014 to 2030. The increase in men aged 75+ living alone is particularly marked – up nearly 80% by 2030. Across the whole of Northumberland, Bamburgh ward has the highest number of older people living alone[17].

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[15] ONS (2014) :< http://bit.ly/325kYSc>.
[16] Dreyer et.al 2018.
[17] https://www.northumberland.gov.uk/Northumberland-Knowledge-and-JSNA/Our-People/Older-People.aspx (accessed 10/10/2019).

Housing

One of the societal changes in the twentieth and twenty-first century has been the rapid growth of home ownership in the retired population. In 2017, 77% of older households in England with a household reference person aged 65+ were homeowners[18]. Older households are more likely to own their homes outright without a mortgage. Around 64% of households aged 65 or older owning their properties outright. Data from The English Housing Survey for 2017-18[19] shows that the average age of outright owners was 68 years.

Most older people (90%) live in mainstream rather than specialist or age-designated housing and when surveyed most people say that they want to stay put in their current accommodation and residential or nursing homes are usually seen as the tenure of 'last resort'[20]. Recent research by the Institute for Fiscal Studies[21] looked at reported house moves using data collected from the English Longitudinal Study on Ageing. Their analysis concluded that moving is slightly more likely for individuals in their 50s and early 60s than for individuals in their late 60s and 70s (Figure 3). However, after the age of 80, the probability of a house move starts to increase, this accelerated moving trend is largely driven by moves into residential care.

Figure 3 - Patterns of age-related moves using ELSA data (IFS 2018)

Note: Dashed lines are for specific 10-year date-of-birth cohorts; solid lines are calculated across full pooled cross-section. Pooled sample of 46,324 owners and 9,916 non-owners (weighted) from ELSA 2002–03 to 2014–15.
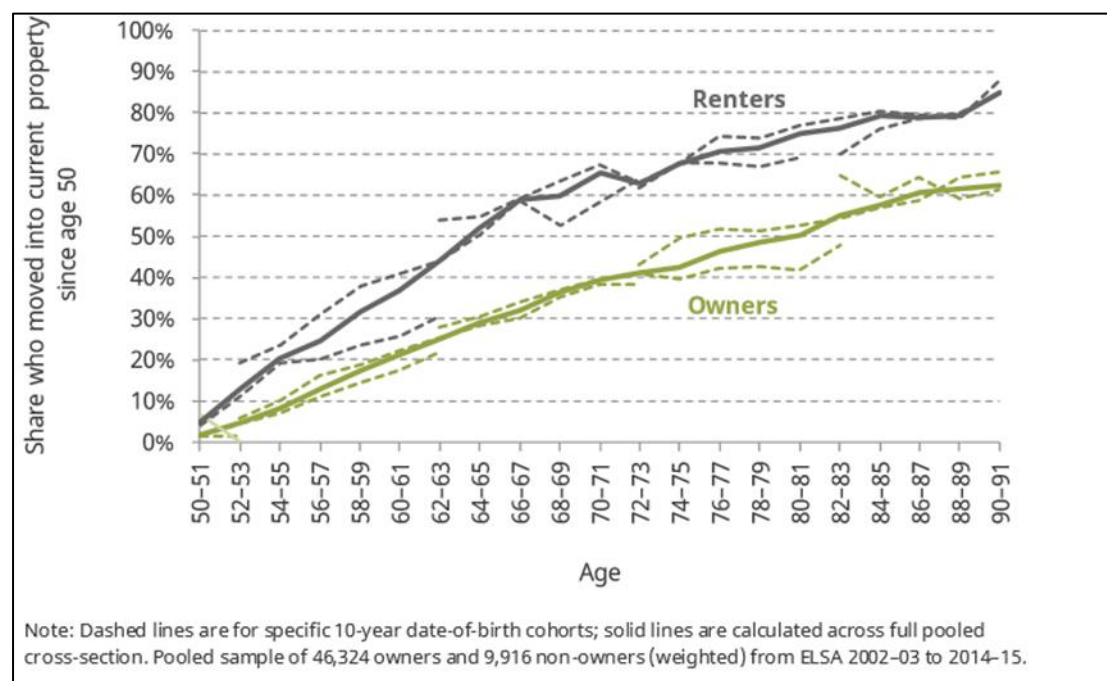
People living in rented housing, and single older women are more likely to move into residential care, partly reflecting higher levels of disability and ill-health in these population groups. However, the proportion of older people living in residential care has remained fairly static in recent years, in part because of stringent eligibility criteria and cuts in local authority

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[18] However, this proportion may fall in future as levels of homeownership are falling
[19] MHLG (2018) 'English Housing Survey 2017-18 – Home Ownership'.
[20] Beach (2016), Generation Stuck, Exploring the Reality of Downsizing in Later Life, report for the International Longevity Centre.
[21] Crawford, R (2018), 'The Use of Housing Wealth at Older Ages', Briefing Note BN239. The Institute of Fiscal Studies.

funded care. As a result, more people will be ageing in their own homes but living with more complex care and support needs in future.

One of the distinctive housing trends in north Northumberland is the high number and proportion of people living in tied or privately rented accommodation particularly in and around the Seahouses and Belford. This is in part a legacy of previous agricultural employment and reflects the traditional role of large land-owning estates in providing housing for employees and local residents. Research shows that older people living in private rented accommodation are more likely to experience poor housing conditions and fuel poverty than people living in other housing tenures. Fuel poverty is defined as households spending more than 10 percent of their income on heating their home.

In Northumberland, tied accommodation and housing rented from private estates tend to be older properties. Older dwellings typically have poor-energy efficiency ratings and may be costly and hard to insulate and heat. The rural location of many of these houses may mean they lack access to mains gas and are reliant on solid fuel, electricity, oil, or LPG to heat their homes. Anecdotal evidence suggests that private tenants may be reluctant to ask for repairs and maintenance and help with energy efficiency measures for fear of losing their accommodation or incurring higher rent.

There has historically been much less investment in social housing for rent in this part of the county. The combination of a low-wage rural economy and high rural housing costs has put owner occupation out of reach for some long-standing rural residents.

Ageing and health

Increased life expectancy at birth is a major societal achievement. However, people may be living longer lives but not necessarily healthier lives. The figures for 'Disability Free Life Expectancy' (DFLE) trends at age 65 and over are very relevant for understanding how housing and support needs change over time. DFLE refers to the number of years that men and women over the age of 65 can expect to live free from long term health conditions and associated disability.

The 2011 census showed that just over half (52 per cent or 4.6 million) of those aged 65 and over living in households had a long-term health problem or disability which limited their daily activities[22]. The number of people living with two or more chronic health conditions increases with age and around 69% of people over 85 years will have multiple limiting illness[23]. The number of people living with age-related memory loss including dementia is also increasing (see figure x). Latest prevalence estimates show that around 1 in 14 people aged 65 and over are living with dementia, however, this rises to 1 in 6 (17%) of those aged 85 and over [24]. Many people with dementia will also be living with long-term health conditions such as diabetes, arthritis and or sensory loss or incontinence. The number of people in the UK aged 85 or older who require daily help to eat, dress, wash and go to the toilet is predicted to almost double over the next 20 years, and many more will need some help with their daily living[25].

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[22] ONS (2017), Disability-free prevalence rates and disability-free life expectancy dataset.
[23] Kingston et.al (2018), Projections of multi-morbidity in the older population in England to 2035.
[24] Age UK (2019), Later Life in the United Kingdom.
[25] Kingston et.al (2018), Projections of multi-morbidity in the older population in England to 2035.

Figure 4 - Prevalence of dementia by age and gender
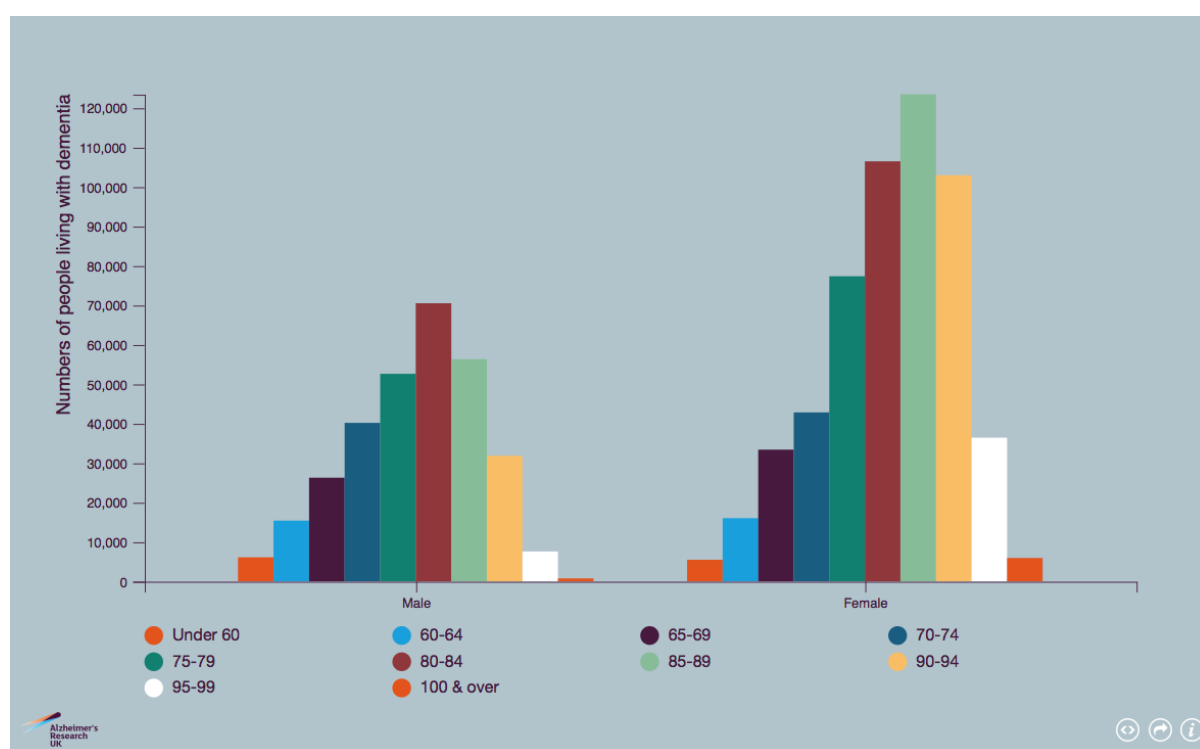
Source: Prince, M et al (2014) Dementia UK: Update Second Edition report produced by King's College London and the London School of Economics for the Alzheimer's Society.

Demographic profiling for Northumberland estimates that the number of people aged 65 and over whose activities are limited 'a little' will have risen by 43% between 2014 and 2030. This percentage figure increases to 94% for those aged 85 and over. Northumberland projections anticipate a 51% increase in the number of people whose activities are limited a lot over the same period[26].

The care-gap

Despite the rapid ageing of the population the number of households receiving local authority-funded care is falling. About half of older people using social care get some help with the costs from their local authority[27]. The rest must make their own funding arrangements. In 2018, national charity Age UK[28] reported an unprecedented increase in the number of older people in England have unmet social care needs. They estimate that the number has increased by 20% in the last two years with one in seven people with social care needs are having to make their own arrangements or do without[29] . Paying for care is expensive. Research undertaken by the Coram Trust estimated that at nearly £17 an hour, it will take just one year and one month for self-funders using 21 hours of support a week (3 hours per day) to spend £20,000 of savings paying for care at home.

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[26] Northumberland Knowledge (2017) Northumberland population, Older people - age profile. https://www.northumberland.gov.uk/Northumberland-Knowledge-and-JSNA/Our-People/Older-People.aspx.

[27] Cottall and Harding (2018), Older People's Care Survey. Report for Coram Children Family Foundation.

[28] Age UK (2019), Later Life in the United Kingdom.
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Unpaid family care

There is an increase in the number of people aged 65 and over providing significant amounts of care for an older partner or spouse. Figures from the ONS show that 14 per cent of older people living in households in England and Wales provided unpaid care in 2011, compared to 12 per cent in 2001. The largest increase in proportion was for those aged 65 and over providing 50 hours or more unpaid care a week: up from 4.3 per cent (341,000) in 2001 to 5.6 per cent (497,000) in 2011[30].

Families remain the most important providers of care and support to people aged 65. The need to be close to family is a frequently cited reason for moving in retirement with some retirees moving closer to help with the care of grandchildren, and (typically) older households to access family support.

Funding retirement

Economic policy has assumed that most people will be mortgage-free in retirement. However, pathways to retirement are less predictable than in previous decades and an increasing number of people are working beyond state pension age (which is changing for both men and women). An increasing number of older households still have a mortgage on their current property in retirement. They include households who have used specific financial products such as life-time mortgages or equity release loans to release equity or wealth from their home to spend on other things (including in some cases, releasing equity to carry out home improvements to age-proof their home for the future[31].

Poverty in later life

While pensioner poverty has been decreasing over recent decades, some groups are seeing an increase. Since 2010/11, the gap between single and couple pensioners has started widening once again, with increases in poverty among single pensioners accounting for most of the growth in pensioner poverty in the three years to 2015/16. The experience of poverty in later life is also linked to housing tenure (see *Figure 5*) with people living in rented housing (and private sector tenants in. particular) more likely to experience poverty in retirement.

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[30] ONS (2013) - Download from:< http://bit.ly/325kYSc >.
[31] Crawford, R. (2018), 'The Use of Housing Wealth at Older Ages', Briefing Note BN239. The Institute of Fiscal Studies.

Figure 5 - Pensioner poverty by housing tenure

Pensioner poverty by tenure
Source: Family Resources Survey and Households Below Average Income
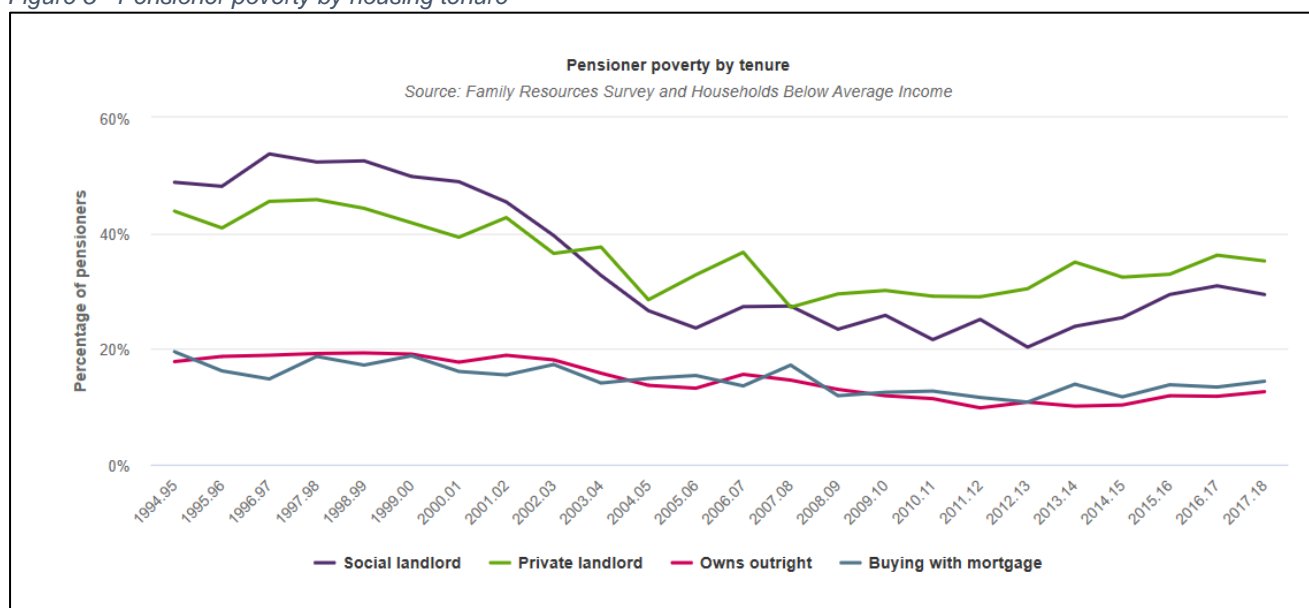
Source: Joseph Rowntree Foundation https://www.jrf.org.uk/data/pensioner-poverty (accessed 10/10/2019)

Making the money last

For older households, increased life-expectancy places additional pressures on household budgets as people must make their money last for a longer period in retirement[32]. Looking ahead this may be a growing concern as levels of household savings and occupational pension coverage is falling. A growing number of working age parents and some grandparents are drawing on potential retirement income to support adult children with university fees and entry to the housing ladder. Over a third of first-time home buyers in England now benefit from financial help from family[33]. Many more home owning households may need to draw on housing wealth to fund income shortfalls in retirement by re-mortgaging or 'down-sizing' to a smaller or cheaper property.

This need becomes particularly acute if household composition changes or people suffer a financial shock or life-course transition such as retirement, redundancy, relationship breakdown, bereavement or when one partner in a couple needs intensive care at home or had to move into residential care.

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[32] Research evidence confirms that most people find it extremely difficult to plan ahead and there is a recognised tendency for individuals to under-estimate potential life-expectancy and the associated care and disability costs (see Kings Fund (2018), A fork in the road – next steps for social care funding reform).

[33] Royal Bank of Scotland https://www.adambank.com/insight-articles/news/2018/the-private-bank-of-mum-and-dad.html

Summary

This section has provided an overview of the key demographic trends that are influencing care and support needs and housing choices in later life. This shows that while most people will stay in their own homes in retirement, the number of people living with multiple and potentially life-limiting health conditions will increase. The number of older people caring for a frailer spouse or partner is rising. The lack of affordable, attractive and accessible housing options means that some people will be effectively 'stuck' in homes that are unsuitable and/or unaffordable as their needs change.

Fewer households are receiving local-authority funded care and the level of unmet support need is rising. Families remain the main providers of care and support but not everyone can access this. There is likely to be increased reliance on voluntary and community organisations such as Bell View to fill the growing care and support gaps. Population ageing will generate increased consumer demand for home adaptations, housing related support and age-adapted housing, however as the following section will show there is a mismatch between housing demand and appropriate supply in the Bell View Catchment area.

Housing supply and demand in Belford

Having previously reviewed the likely demand for age-adapted housing and support in the previous section, this chapter investigates the supply of age-adapted housing in Belford and the surrounding rural hinterland. A range of sources have been used, including local intelligence, consultation with Supported Housing Commissioners and Housing Enablers, The Strategic Housing Market Assessment[34] produced by the County Council, and local waiting list data for Social Housing.

The Strategic Housing Market Assessment

Belford is located within the Bamburgh electoral ward and sits within the North Delivery Area for Northumberland's Strategic Housing Market Assessment (SHMA) (see figure 6). The SHMA was produced in 2015 and updated in June 2018 and is subject to further review. The SHMA examines the County's housing market, identifying the needs and demands for 'market' and 'affordable' homes and it looks specifically at the need for housing for older and vulnerable people. The SHMA informs the Council's Local Plan and Housing Strategy, including the Extra Care and Supported Housing Strategy (2018) and it is used to inform planning decisions and housing allocations. Within the North Delivery Area, three distinct housing 'sub-markets' have been identified:

- Alnwick and the Tourist Coast

- Berwick upon Tweed and the Borders

- Wooler and the North Cheviots

Figure 6 - Map of the North Delivery Area for Northumberland SHMA

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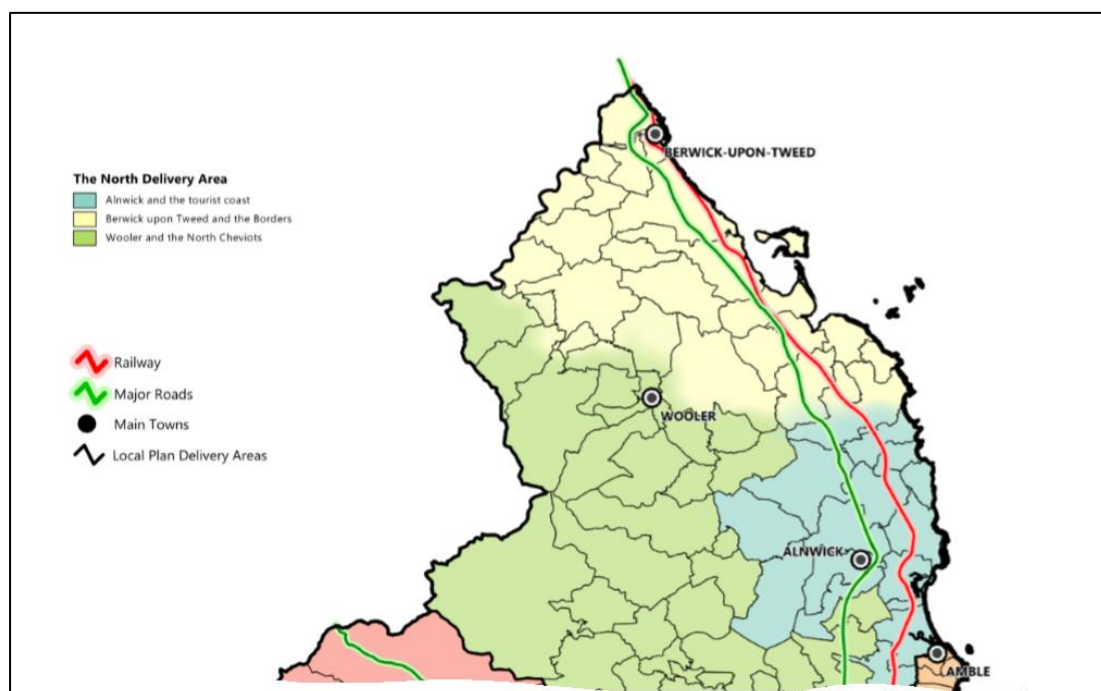
[34] Northumberland Strategic Housing Market Assessment (2015, and updated report 2018) available from: https://www.northumberland.gov.uk/Planning/Reports.aspx.

Most of Bell View's current service provision is concentrated in Belford and that is the focus for this study. However, the charity also provides outreach services to outlying rural areas close to Wooler and the North Cheviots and the Borders within the North Delivery area. The Glendale Gateway Trust has completed separate research into the housing needs of older people in that sub-market area.

The SHMA confirms the popularity of Belford and the coastal strip as a popular holiday and retirement housing destination with house prices reflecting this. This is reflected in growth of second and holiday homes in the rural and coastal villages. The updated SHMA (2018) includes qualitative feedback from local estate agents who confirm a strong demand for bungalows from prospective purchasers and average prices can range upwards from £169,000 for a new build 2-bedroom in Belford to around £300,000 for a 3-bedroom detached bungalow[35]. Estate agents consulted for the SHMA identified a steady demand from older homeowners who want to move into to larger market towns such as Alnwick, Berwick, Wooler and into larger villages including as Belford to be closer to services and amenities.

The Northumberland SHMA confirms the findings of other nationally produced research into older people's housing needs around market failure to meet demand. In particular, the SHMA confirms that overall, the new-build housing market has not kept pace with demand for retirement housing and it is not 'meeting the needs of older households wishing to 'downsize' or in many cases to 'right-size' by moving to accommodation that is accessible, affordable and easier to manage in a location of their choice. As a result, growing numbers of people may well be 'stuck' in homes that are too large or unsuitable to support independent living in later life because of a lack of available and affordable alternatives across all tenures.

Housing for older people in Belford

Since the Bell View Resource Centre opened in 2005 there has been a considerable expansion of residential housing development in Belford. This has included the provision of new-build housing for sale and social housing affordable rent. Local developer NB Clark has been instrumental in developing housing both for sale on the open market and some available for affordable rent through partnership with housing associations. The main providers of social housing in the village are currently Johnnie Johnson Housing, Bernicia and Karbon homes. Johnnie Johnson have the largest stock of affordable bungalows.

The new-build housing includes bungalows of varying sizes that have proved popular with retirees. Some of those residents have taken part in interviews and discussion groups as part of this study. There is currently no designated older person's sheltered or extra-care housing scheme in the village. There is no registered nursing or residential care home provision in Belford and residents requiring residential care provision must move out of the village to access this in larger market towns such as Alnwick, Berwick and Wooler. Johnnie Johnson have the largest stock of affordable bungalows.

Despite this increase in new-build housing, the Strategic Housing Market Assessments, The Northumberland County Council Extra Care and Strategy, and previous research undertaken by Bell View identify an ongoing gap in supply and demand for affordable, accessible and age-adapted properties for older people in Belford and the surrounding catchment area. The mismatch between the growing housing needs and restricted market supply is predicted to

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[35] Indicative figures from https://www.zoopla.co.uk/for-sale/bungalows/belford/ (as at 10/10/2019).

grow. There are no current plans registered with the County Council to build any retirement or sheltered housing in Belford at the time of this research.

Waiting lists for social housing

Northumberland County Council operate a 'choice-based lettings' register for people wishing to apply for social housing (or those wishing to move to a different property or area). Data from their HomeFinder register showed that there were 74 applicants in total looking for housing in Belford and the surrounding area. 23 of these (31%) were aged over 55 years.

Other key findings from HomeFinder database:

- The average time on the register was 2.3 years.

- On average, applicants had lived in current property for 19 years

- 82% were currently living in a house

- Most commonly cited reasons for applying to move:

    - 'Home too large'

    - 'Medical Reasons'

    - 'To move nearer family'

In terms of supply, the HomeFinder data showed that only 3 Bungalows were advertised in Belford during the period Sept 2018 to Sept 2019. There were 56 bids for these 3 Bungalows, an average of 18 bids per property. Only 3 of the current applicants had placed bids on these Bungalows, other bidding applicants had placed bids for properties in Amble, Seahouses, Longhoughton and Warkworth. The County Council Housing Enablers confirmed that some people on the HomeFinder register will not have an immediate housing need or local connection to Belford but may wish to move there from elsewhere and they may bid for a rural or coastal property in a range of locations. There was agreement that the Home-Finder data is an under-representation of need as many older people do not know about or cannot easily access the register.

Johnnie Johnson have the largest stock of bungalows in the centre of Belford and their waiting list data gave some indication of demand for properties (table 4). They have not actively marketed their properties recently, so their data is likely to under-represent local demand. Their turnover data showed that between April 2018 and September 2019 there were *only* four tenancy terminations for their properties in Belford. Three of these tenancy terminations were for bungalows and the reasons for ending the tenancy were because one person had died and two had moved into residential care.

Table 4 - Waiting list data from Johnnie Johnson (Sept 2019)[36]

Location	Property Type	No on waiting list
Bell View Court	5 x 2 bedroom bungalows	12
Raynham Close	6 x 2 bedroom bungalows, 4 x 3 bedroom houses	32
Raynham Road/Rowan Court	10 x 2 bedroom bungalows 6 x 3 bedroom houses	26
Rogerson Road	14 x 2 bedroom bungalows 2 x 3 bedroom bungalows 2 x 3 bedroom houses 2 x 4 bedroom houses	31
Williams Way	6 x 2 bedroom bungalows 1 x 3 bedroom bungalow 1 x 4 bedroom bungalow 2 x 3 bedroom house	26

The waiting list data is problematic because it is likely to under-estimate demand. A significant number of older people do not know how to apply or to access the internet to bid on-line for properties. During the Focus Group discussions, individuals and families who had used HomeFinder described the experience of looking for social housing bungalows as '*like waiting for dead-men's shoes*' because the supply is so scarce. The waiting time is unpredictable which is off-putting to many older people and it means that people cannot plan with certainty. Discussions with Glendale Gateway Trust (GGT) confirmed that they do not hold a large waiting list for their retirement properties in Wooler. However, GGT have never found a problem filling their voids, they usually receive word of mouth inquiries as soon as a property becomes vacant.

Summary

The desk-top review of available evidence and consultation with housing providers and focus group participants revealed that affordable bungalows remain in high demand and short supply in Belford across all tenures. The following section provides further evidence from the structured housing needs survey conducted for this research that attempts to quantify the type of housing people are looking for and their likely housing related support needs.

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[36] However, Johnnie Johnson could not provide a detailed breakdown of how many people on the waiting list were waiting for houses versus bungalows and it is likely that the same households have applied for more than one road within the village.

Figure 7- Map showing Bell View catchment area

Findings from the housing needs survey

Target audience
After discussion with Bell View staff and the Project Reference Group it was agreed that the target audience for the housing needs survey would be households in Belford and or surrounding Bell View catchment/service delivery area containing at least one adult aged 65 years or over.

Survey design
The questionnaire was designed using 32 questions that have been previously validated in housing needs surveys and research with older people. The questionnaire was designed to be user-friendly and easy to complete, yet comprehensive enough to provide meaningful data without losing participant's interest. Bell View also wanted to know about housing related support needs in addition to housing to inform future service development plans. Questions about current receipt of help to live at home and future priorities were included to capture this information.

The draft survey questionnaire was piloted by a panel of five older volunteers representing a range of housing tenures and circumstances. Their feedback on the content, design and ease of completion was incorporated into the final questionnaire. The Project Reference Group also had input into the final content. The questionnaire was designed using Microsoft Form software and made available as a paper survey form and on-line. To comply with General Data Protection Regulations, the responses were anonymous and respondents were advised of purpose of the survey and intended use of the data collected.

Distribution method
Paper Questionnaires were distributed over a 6-week period between July and the end of August 2019. The survey was publicised in a local newspaper article, and via Parish and community newsletters. Copies of the questionnaire were made available via Belford GP Surgery, local Home-Care Staff, Bell View Service Delivery team, Belford Community Shop, and Bell View Resource Centre. The survey was also publicised through social media using Bell View's Facebook and Twitter accounts. The Service Delivery Manager gave presentations to local WI and community groups. Help with completion was offered to participants who needed it and completed paper surveys were collected from the distribution points outlined about.

Analysis
The average time taken to complete the on-line version was around 8 minutes. Data from the paper surveys were entered manually into a separate Microsoft Form by the Consultant. Both sets of survey data were exported into excel-spreadsheets for further data analysis.

There were some issues with missing data in some of the paper returns. This not a surprising finding, and it a recognised methodological limitation of using structured postal surveys. The on-line survey responses were easier to control using routing tools to stop participants skipping content until they have completed the previous question. However, despite some gaps in responses, it did not greatly affect the quality of the data. Non-responses to questions are reported where relevant when summarising the findings in this report. For ease of presentation, percentages quoted in the results were rounded to the nearest whole number so figures may not total 100 in all tables.

Survey response

In total 121 survey responses were received. 67 (57%) households completed the paper questionnaires and 54 (46%) households completed the survey on-line.

Location of respondents

The survey attracted responses from a wide range of settlements. Table 5) shows the current location of respondents. Unsurprisingly, the largest number of respondents were existing Belford residents (58%). The scattered nature of the responses reflects the distribution methods and the fact that Bell View provides services across a wide catchment area of around 200 square miles. The possibility of completing a survey on-line and the article in the local paper meant that the survey had wider geographical reach. The responses identified some demand for suitable housing in Belford from people living in outlying rural settlements.

Table 5 - Current location of survey respondents

Current location of respondents	Number	Percent
Belford	70	58%
Seahouses	16	13%
Beadnell	6	4%
Wooler	5	4%
Glanton	3	3%
Warenton	2	2%
Other[37]	16	14%
Not Stated	3	2%
Total	121	100

Profile of Survey respondents

89% of the survey returns were completed by a household member aged 65 or over (108 in total), 11 questionnaires were completed by family members on behalf of an older family member. 2 were completed by other people, including one Community Occupational Therapist on behalf of someone else. 84 (69%) of returns were received from households occupied by couples and 31 (26%) from people living alone (Table 6).

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[37] Responses were received from older households in: Branxton, Fenwick, Etal, Haggerston, Lucker, Roddham, South Charlton, West Horton, Berwick and Morpeth.

Table 6 - Household composition

Household Composition	Number	Percent
Single Person	31	26%
Couple	84	69%
3 People	2	2%
4 People	2	2%
Not Stated	2	2%
Total	121	100%

Ages of household members

The questionnaire asked respondents to provide the age-ranges of people in the household (Figure 8). 60% were aged 65-74, 33% aged 75 – 84 and 13% aged 85 and over. One household only contained adults aged 55-64 (but they are included in the analysis as the oldest member was approaching 65 during the survey period). Where younger ages are cited, they were part of multi-generational households containing at least one household member aged 65 and over.

Figure 8 - Ages of household members
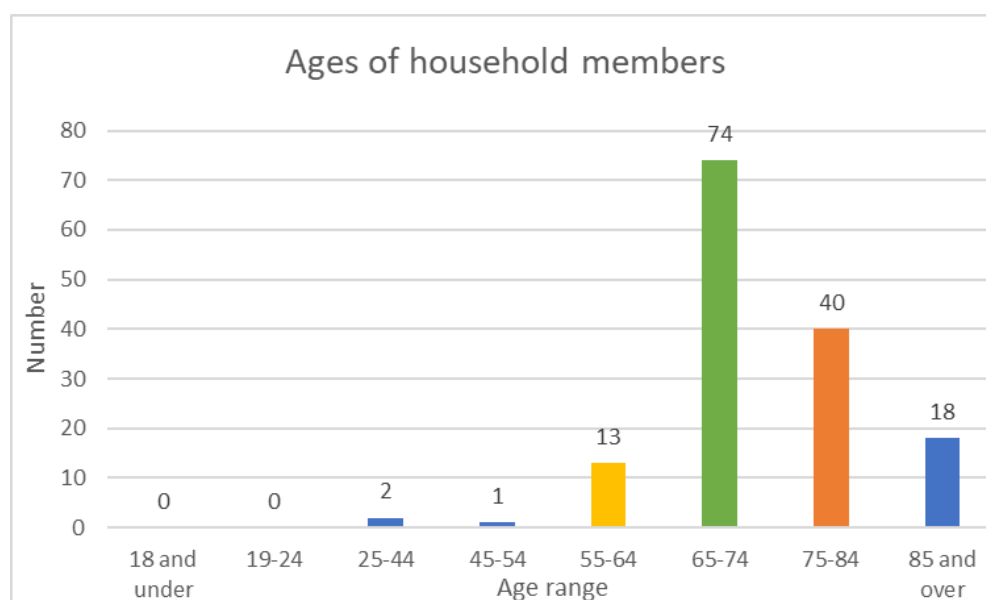
Current housing tenure

Reflecting national homeownership trends amongst the retired population, 86 (71%) of survey respondents were homeowners, with 79 households owning their property outright. 16 households were renting from a private sector landlord and 2 were in rent-free or tied

accommodation. 1 respondent was co-resident with their family, 1 household was in a shared ownership property. 15 households were renting from a social landlord (see *Table 7* - Current housing tenure of respondents.

Table 7 - Current housing tenure of respondents

Current Housing Tenure	No	Percent
Own outright	79	65%
Own with a mortgage	7	6%
Rent from a Private Landlord	16	13%
Rent from Council/Housing Association	15	12%
Live in Tied Accommodation	1	1%
Live Rent Free	1	1%
Shared Ownership	1	1%
Live with Family	1	1%
Total	121	100

Amongst the home-owning respondents, 7 households still had a mortgage on their current property (Table 8). Although this is a small proportion (c.6%), it reflects a growing national trend for older households to hold housing debt on their property in retirement. In two of the households with a mortgage at least one person is working part-time. One household has at least 1 adult working full-time. Four households who still have a mortgage describe themselves 'retired'. One household with mortgage is a 4-person household with adults aged between 55-64 and 75-84.

Table 8 - Age composition of households with mortgage on current property

Age range	Number of households
55-64	2
65-74	3
75-84	2

From the data provided it is not possible to distinguish whether these are primary mortgages or equity release mortgages that may have been taken out on the existing property and there is no indication of the size of the mortgage or amount still owed.

Type of property currently occupied

Respondents occupied a range of different housing types (see Table 9). 45 households (37%) were already in bungalow accommodation and 69 households were living in houses

that are likely to have stairs. Living in a bungalow was no guarantee that people did not need or want to move. For example, people currently living in bungalows accounted for 9 (28%) of the 32 households who indicated that they were planning to move from their current property. 2 households were living in caravans/park-homes and none of the respondents currently occupy age-designated retirement or sheltered housing. Most respondents lived in a home with 2 or 3 bedrooms (Table 10), although 26 households (21%) were in larger properties with 4 or more bedrooms. 4 households were living in accommodation with just one bedroom, and one of these, a Council tenant was looking to 'upsize' and move to a 2-bedroom property within the next 1-3 years.

Table 9 - Current accommodation

What Type of Home Do you Live in Now?	No	Percent
Detached house	27	22%
Semi-detached house	28	23%
Terraced house	14	12%
Bungalow	45	37%
Flat or apartment	3	2%
Caravan, mobile home or park home	2	2%
Retirement or Sheltered Housing	0	0%
Other	2	2%
Total	121	100

Table 10 - Size of existing home

Number of bedrooms in current property	No	Percent
1 bedroom	4	3%
2 bedrooms	49	40%
3 bedrooms	42	35%
4 or more bedrooms	26	21%
Total	121	100

Personal mobility

Levels of car ownership are generally higher in rural areas and loss of driving ability is often associated with a major loss of independence, especially if public transport alternatives are lacking or difficult to access[38]. This may mean that people drive for longer periods than they

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[38] Age UK (2015), report that 18% of those over 65 living in rural areas don't use public transport because none is available, compared to 2% of those living in urban area. Their research into transport decisions shows that health problems are more

should do. Access to transport and changes in personal mobility have an impact on housing decisions in retirement. Loss of access to a car or the inability to access public transport may force a housing move as people need to move closer to services and amenities.

As (figure 9) shows, 89 (74%) of respondents were car owner/drivers and 18 (15%) had access to car transport when they needed it as a passenger only. 14 households (12%) had no access to car transport at all.

Figure 9 - Access to transport
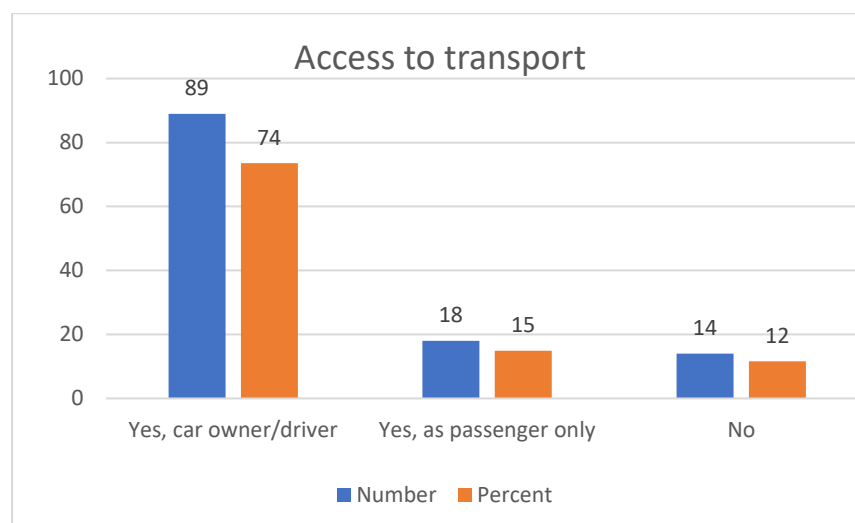
Getting around

The survey asked about current levels of personal mobility within the household (Table 11). Data was collected for 140 household members. The results showed that just under half of the people covered by this survey had some degree of mobility restriction. 3 people used a wheelchair, 7 used a mobility scooter and 1 respondent was housebound unable to go out without help.

Table 11 - Current mobility status

Current mobility status of household members	Number of people	Percent
Walk independently, no difficulty	71	51%
Walk independently, some difficulty	31	22%
Walking aid required	27	19%
Wheelchair needed	3	2%
Mobility scooter used	7	5%
Housebound, cannot go out without help	1	1%

likely than age alone to lead to giving up driving. Only 1% of people surveyed by Age UK who aged 60+ said that they would give up driving because of their age, while 43% would stop driving due to health concerns.

Total	140	100

Accessibility into and around the home and immediate neighbourhood has a major impact on personal safety and independence as people age. Wheelchair access and the need to have adequate facilities to park and charge mobility scooters emerged as priority housing needs for respondents taking part in this research. Adequate storage space for equipment was highlighted as a desirable housing design feature, alongside covered parking areas so that people can park close to main entrances and transfer in and out easily in wet weather.

Alternatives to car transport

The survey asked about use of alternatives to car transport (Table 12) and results showed that 45 people used public transport. However, 51 respondents did not use any of the alternatives listed. 4 people respondents were cyclists. At the Community Consultation event held as part of this study, the lack of safe cycle paths and poor lighting was identified as a deterrent to cycling in and around Belford.

Table 12 - Alternative transport use

Type of transport	Number of respondents
Motorbike	0
Bicycle	4
Taxis	14
*Community Transport	14
Lifts from family and friends	37
Public Transport	45
None of these	51

The data shows that families are significant providers of transport support. Therefore, the need to be close to them is linked to housing decisions if household members can no longer drive or use public transport[39].

*Figures were obtained from Bell View to provide an indication of current usage of the BRINGO Community Transport Scheme which supports people who cannot drive or use public transport. At the time of writing (October 2019) the BRINGO service had 58 registered users and provided around 1850 journeys each year.

Providing support to others

National studies show that families remain the main providers of care and support to older adults and this study confirms this. With increases in male life expectancy, the proportion of people ageing as a couple in retirement has increased. Health and mobility decline with age

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[39] The level of public transport use declines at later ages, this is mainly due to difficulties accessing it and getting on and off buses and trains (Age UK, 2015).

and consequently, the number of people aged 65 and over who are providing care and support to a partner or spouse is increasing[40] . Many of these older carers have significant health issues of their own.

In the Bell View survey, 23 (19%) of respondents were providing care and support to another household member. 20 are caring for someone else aged 65+ and 3 are caring for someone aged 19-64. The reasons why their support was required are shown in (figure 10).

Figure 10 - Reasons why support was needed
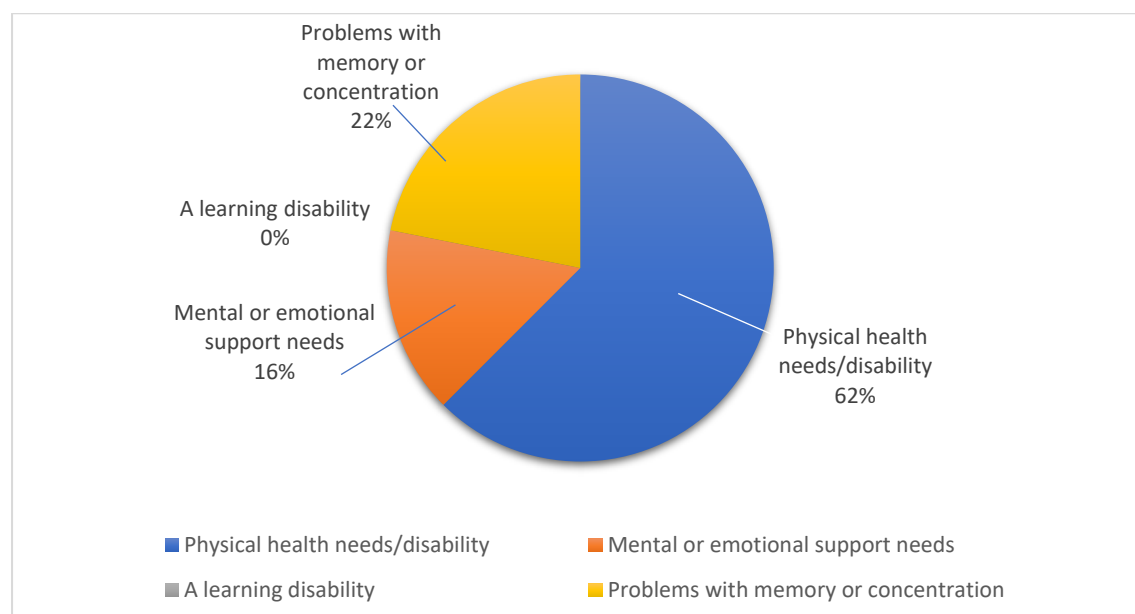
Help at home

The survey investigated the extent to which households were *receiving* care or support in their current accommodation, including help to maintain their current property. In piloting the survey, we identified an issue for people distinguishing between care and support. Respondents were likely to under-report the help that they received to maintain and manage their home. For example, pilot respondents demonstrated a tendency to select the 'No support received' option but then, in the follow up question to indicate that they did receive help with domestic cleaning and housework. To try to capture all these support needs, the question was re-worded to read:

'Are you currently receiving care and support YOURSELF – this includes help to maintain your current home and garden'

Domestic housework and gardening were included in the multiple-choice response list as a prompt. The responses are summarised in (Figure 11). Gardening, housework, shopping and help with basic repairs and maintenance were the types of household support most

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[40] Figures from the ONS (2013) based on census data show that 14 per cent of older people living in households in England and Wales provided unpaid care in 2011, compared to 12 per cent in 2001. The largest increase in proportion was for those aged 65 and over providing 50 hours or more unpaid care a week: up from 4.3 per cent (341,000) in 2001 to 5.6 per cent (497,000) in 2011.

frequently required. Nineteen households were paying for with gardening and or domestic cleaning.

Figure 11 - Support received at home
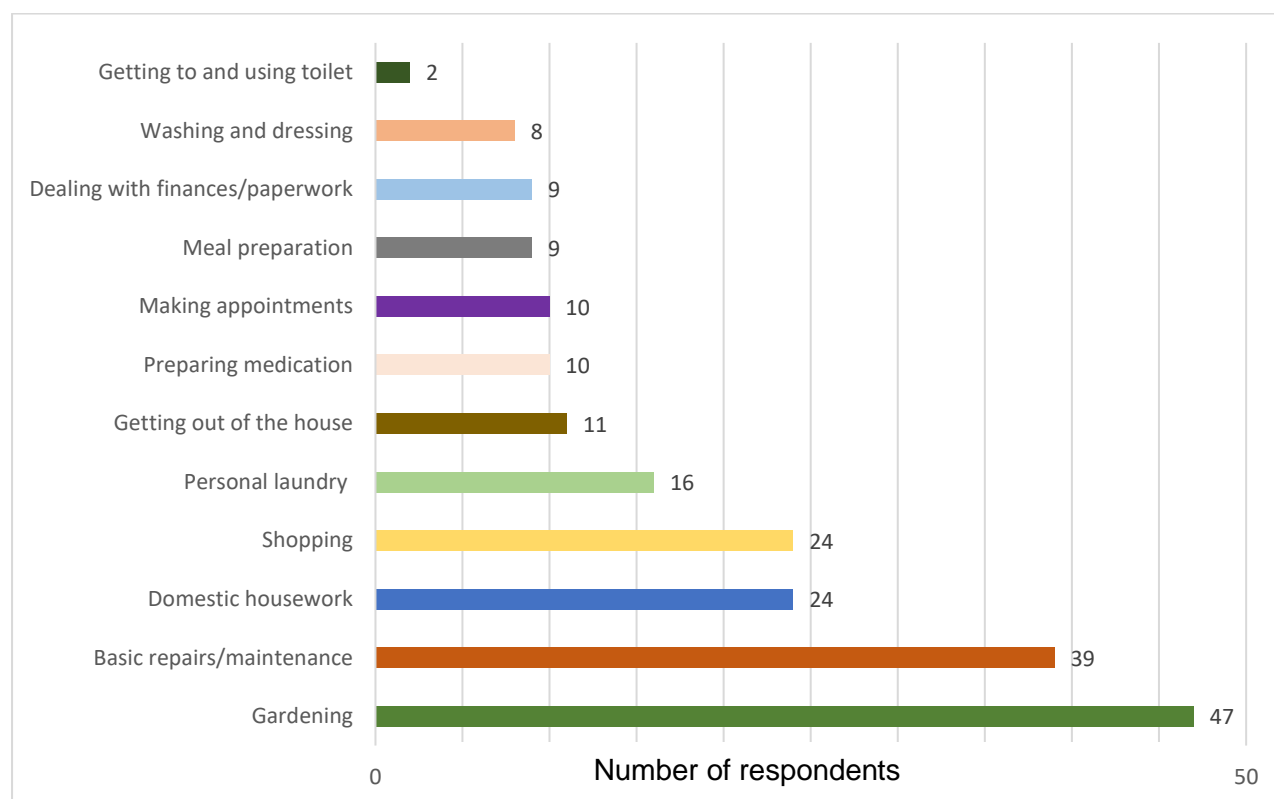
In England, the number and proportion of older people receiving local authority funded care is decreasing. This largely reflects cutbacks in Government funding to local authorities and the more stringent eligibility criteria and means-testing arrangements used. As a result, more older households are taking responsibility for funding their own care or, in some cases going without[41].

Other studies have shown that paying for help to maintain a home can be an increasing cost burden for older households. Many households are spending thousands of pounds on practical help such as gardening or domestic cleaning, minor repairs and maintenance before they ever start needing or paying for care. This type of spending on practical help at home is rarely accounted for in official social care spending figures.

The providers and funding sources for the support received by the Bell View survey respondents are shown in (*Figure 12*) and (*Table 13*) overleaf.

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[41] Age UK (2018), reported an unprecedented increase in the number of older people in England have unmet social care needs. They estimate that the number has increased by 20% in the last two years with one in seven people with social care needs are having to make their own arrangements or do without.

Figure 12 - Sources of care and support

Figure 12 - Sources of care and support
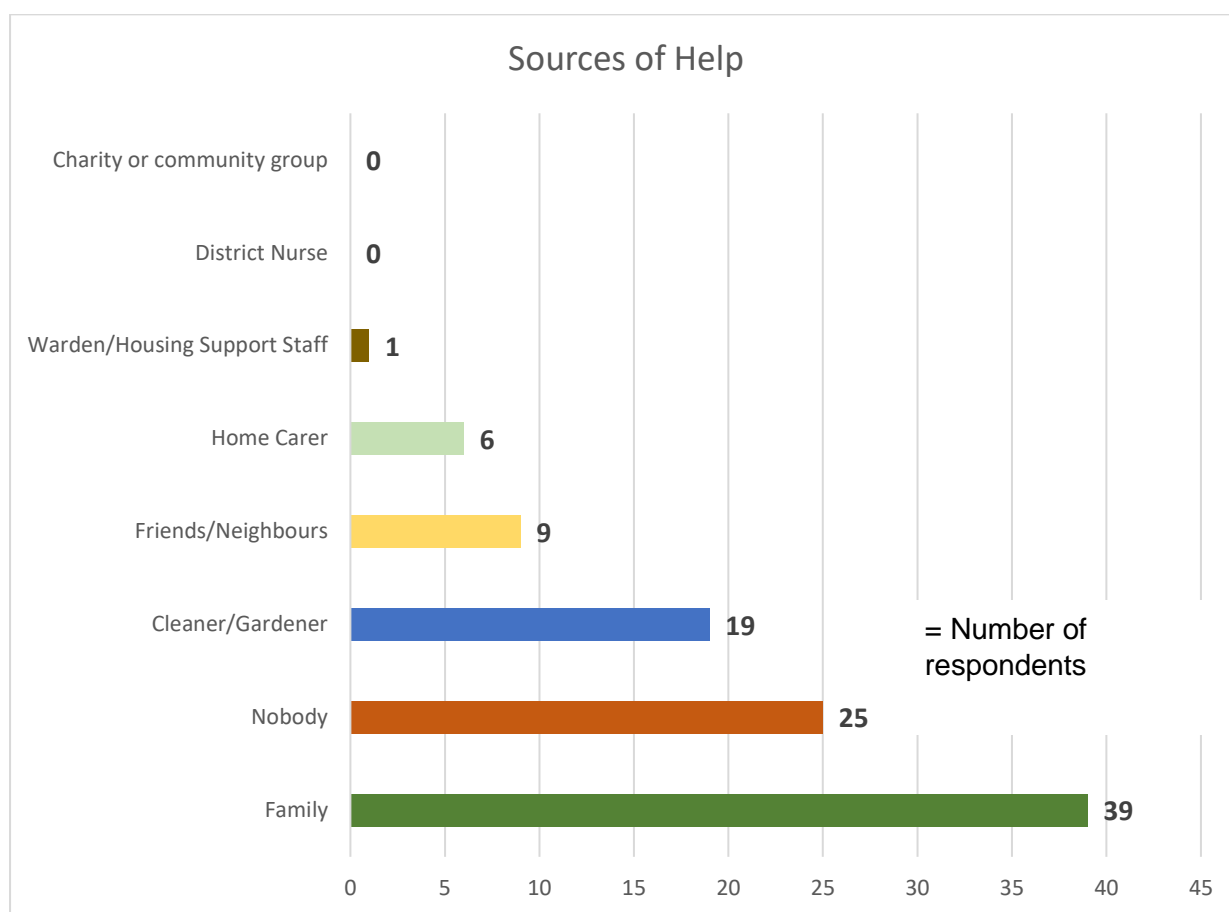
Families were identified as the main providers of providers help and support and the proximity of this support will be an important factor determining housing decisions.

Table 13 - How care and support is funded

How existing care and support is funded	Number of respondents
Unpaid help from friends and family	32
Local authority funding (including personal budget)	2
NHS	0
Self-funded	27
Prefer not to say	5
Total	66

The number of people in receipt of local authority funded care is low amongst respondents in this survey. This may reflect the smaller number of respondents aged 85 and above who are most likely to be in receipt of this type of care. This may be a methodological issue in that frailer older people with higher care needs are less likely to complete a structured survey

form and they may not have been reached through the distribution methods used (although information about the survey was distributed to domiciliary social care providers).

The Manager of the Bell View Day Care Service reported a noticeable increase in referrals for day-care support for people living with multiple and complex health needs and disabilities including, a growing number of people living with dementia. The Bell View 'Help and At Home' service is operating at full capacity and currently supports 98 clients to live at home, providing 687 hours of care per week with a waiting list for new referrals[42].

Assessing future housing needs and aspirations

Reflecting the other housing needs studies and findings from academic research, most older people responding the Bell View survey are happy in their current home. Just over half (51%) of respondents stated that they were not planning to move home. However, 34 respondents (30%) were contemplating a housing move, 13 respondents were unsure, and 15 would rather stay put and adapt their current home. Ten respondents hadn't thought about it yet (but may do so in future). 6 households were actively looking to move in the next 12 months, 17 within the next 5 years (Table 5) and (figure 13).

Table 14 - Plans to move

Plans to move	Number	Percent
No	62	51%
Yes, within next 12 months	6	5%
Yes, within 1-3 years	10	8%
Yes, but in 3-5 years	7	6%
Yes, but in 5 or more years	11	9%
Maybe, but would prefer to stay in current home and adapt	15	12%
Have not thought about it yet	10	8%
Total	121	100%

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[42] Figures obtained from Bell View Project (09/10/2019).

Figure 13 - Anticipated timeframe for moving
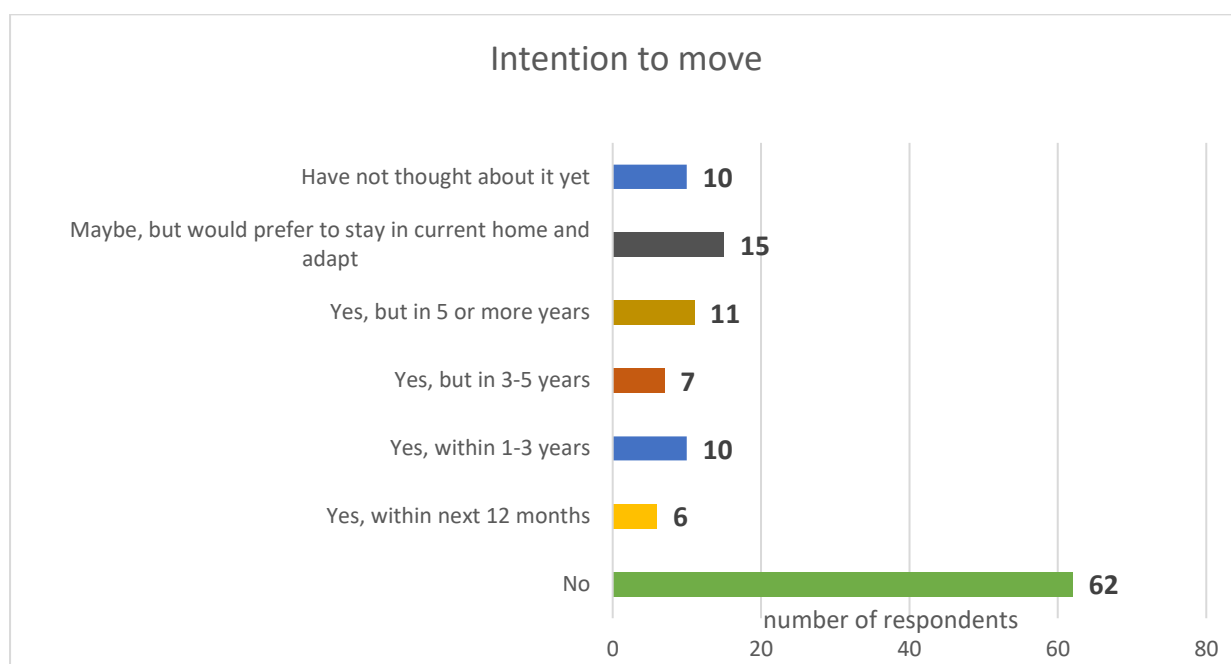
Where do people want to live?

The survey asked all respondents to state their current location. Those interested in moving were asked to choose their preferred locations from a set list). The responses indicated that most respondents and do not want to move far. Table (15) overleaf shows the current location of households looking to move and their preferred destinations.

Table 15 - Preferred locations for potential movers

Households intending to move		
Current Location	No	Preferred destination (s)
Beadnell	2	Beadnell (2),
Belford	18	Belford (17), Alnwick (3), Berwick (2), Seahouses (3), Wooler (1), Further afield (1)
Branxton	1	Further afield
Fenwick	1	Undecided
Haggerston	1	Haggerston
Lucker	1	Further afield
Roddham	1	Belford, Wooler, Alnwick
Seahouses	1	Seahouses
South Charlton	1	Alnwick
Warenton	1	Warenton, Belford, Alnwick, Undecided (1)
West Horton	1	Further afield
Wooler	2	Wooler (1), Belford, Berwick or Further Afield
Not Stated	1	Stay put, Alnwick, Undecided
	32	

Profile of potential movers

Amongst the 32 households looking to move, 26 were couples, 2 were single adults and 2 were households comprising 3 adults. The current tenure of those intending to move is shown in *Figure 14*.

Figure 14 - Current tenure of prospective movers (numbers in each)
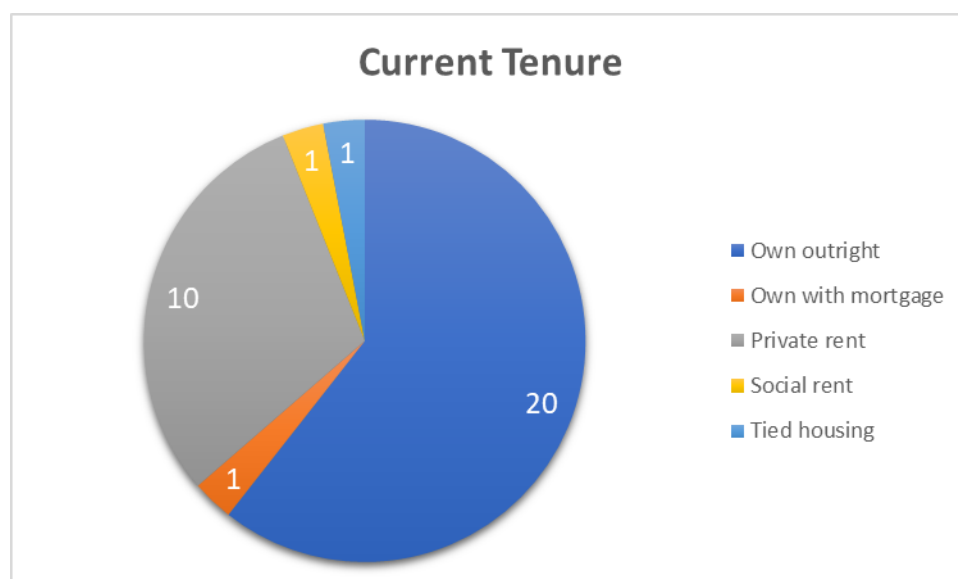
Future housing requirements

Respondents who expressed an interest in moving were asked to indicate the type of housing they were looking for. They could select more than one type of housing from a set list. The results are summarised in *Figure 15*.

Figure 15 - Future housing requirements
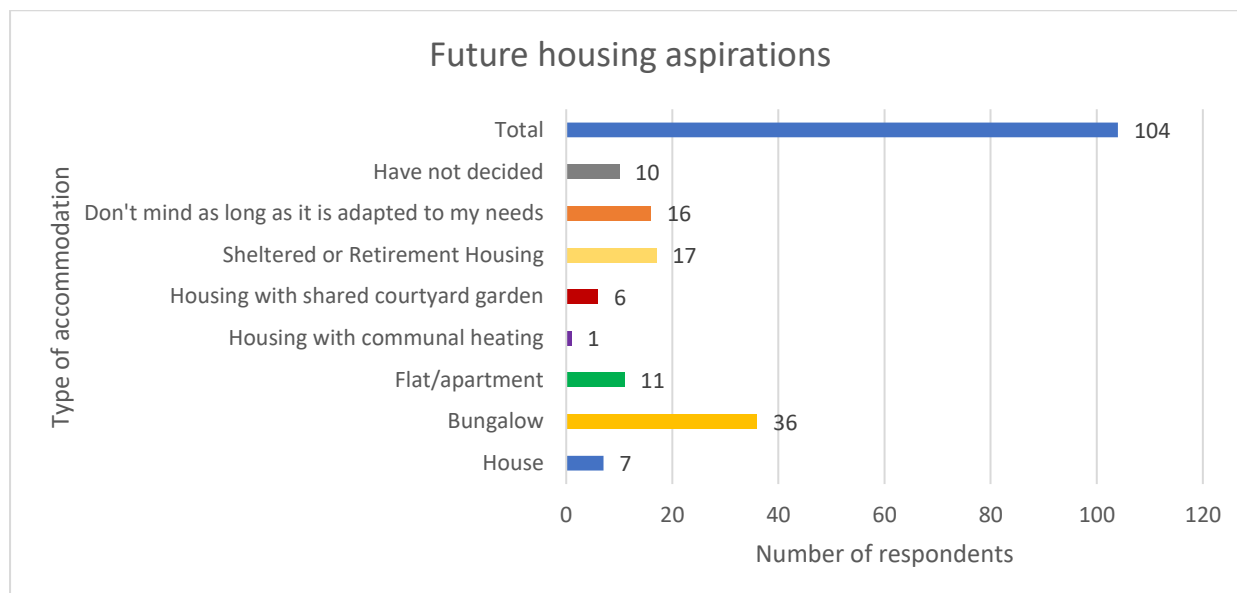
Size of accommodation

Amongst the 32 households looking to move, 26 were looking for 2-bedroom accommodation and 8 households were looking for accommodation with 3 or more bedrooms. No household expressed a preference for one-bedroom accommodation and one of the households currently occupying one-bedroom accommodation was looking to upsize to a 2-bedroom sheltered housing property in future.

Sixteen respondents were flexible at the type of future housing, provided that the accommodation was accessible and adaptable to their needs. 10 were undecided. 11 respondents were prepared to consider a move to a flat or an apartment and 7 households were looking for a house.

Mainstream versus retirement or specialised housing

The survey results indicated a stronger demand for mainstream housing than accommodation that was specifically aimed at older people. However, 17 respondents stated that they were actively considering moving to Retirement or Sheltered Housing.

Future housing tenure

Potential movers were asked to indicate the housing tenure options that they would consider in future and they could choose more than one. The results are shown in Figure 16. They showed that some existing homeowners would consider changing tenure to move into rented housing. Of those respondents considering a housing move, 31 respondents were looking to buy their future home, with 25 people looking for affordable housing and 13 households were undecided. 3 respondents expressed an interest in co-housing[43], although this would

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[43] Cohousing communities are created and run by their residents. Each household has a self-contained, private home as well as sharing some elements of community space. They are run on a cooperative basis and residents typically come together to manage their community, share activities, and regularly eat together.

be a relatively new and largely untested model for meeting older people's housing needs in rural north Northumberland at the present time. Five respondents were interested in exploring shared ownership models that combined part ownership and part rent.

Figure 16 - Future tenure preferences
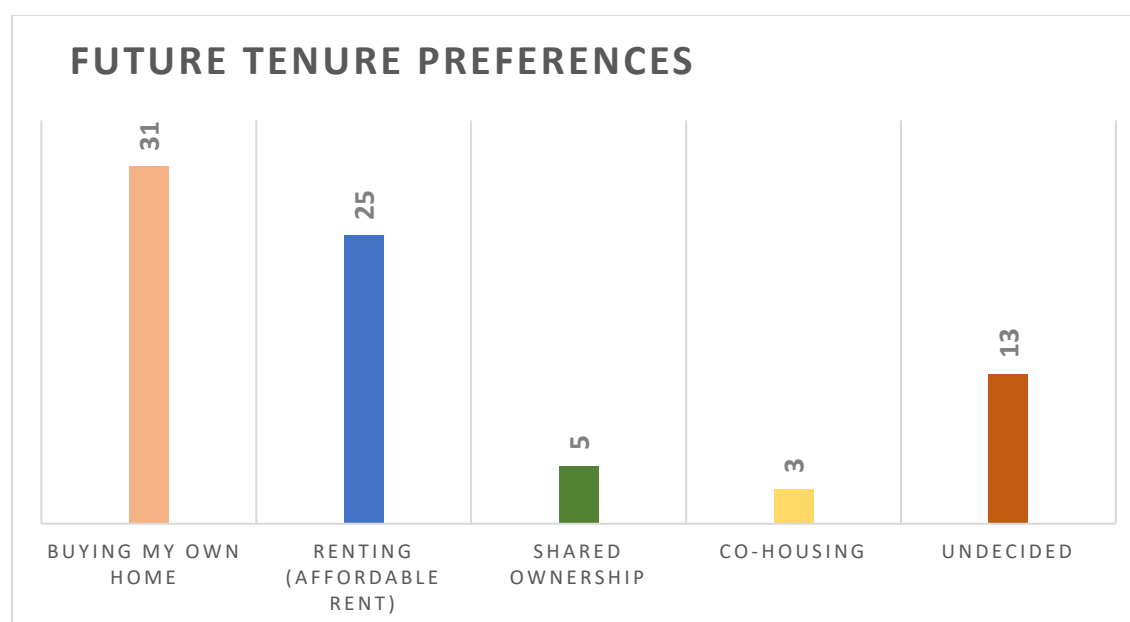
Reasons for moving

The survey explored why people wanted to move and provided multiple answer options. The responses are shown in (Figure 17). Key themes emerged around **manageability, affordability, accessibility, proximity to local services** and amenities to sustain personal independence. 8 households were moving to be closer to family/friends.

Figure 17 - Reasons why people want to move
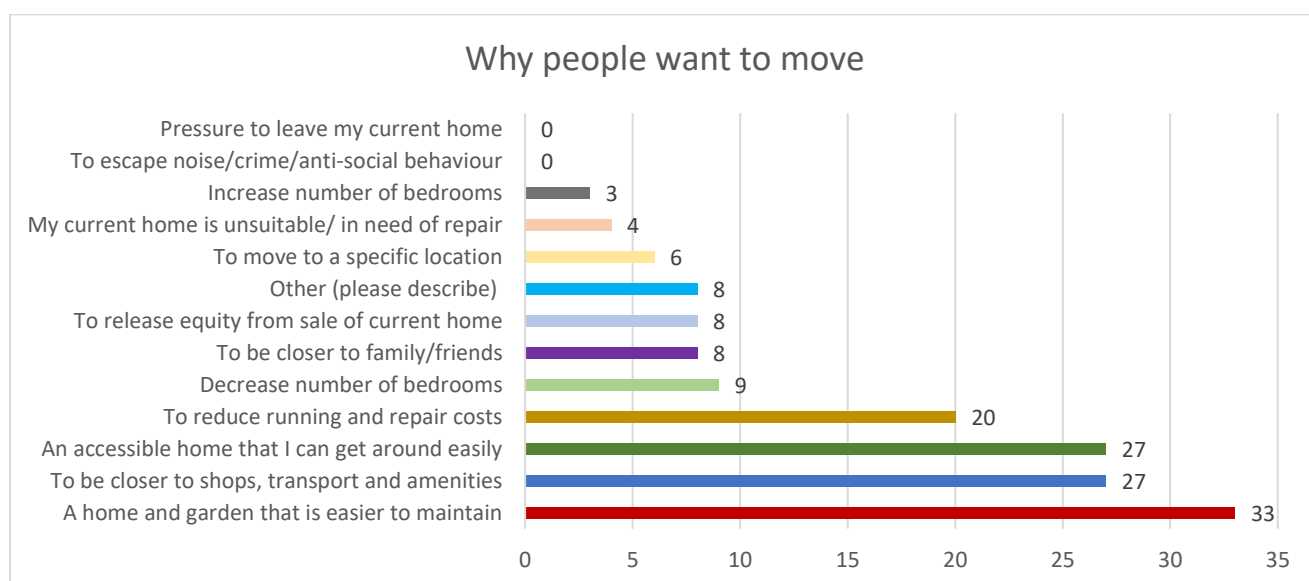
Perceived barriers to moving

In the housing needs survey, all respondents (including those respondents who had previously indicated that they did not want to move) were asked to identify issues that that might be acting as a deterrent to moving. Respondents could select from a multiple-choice list. As Figure 18 illustrates (see overleaf), **financial cost, the perceived stress** and **the hassle of moving** were identified as a significant barriers and 35 households said that '**lack of suitable and affordable housing in current location'** was an issue, 28 respondents thought that they had already moved to housing that was suitable for their long-term needs and 28 respondents said that they did not want to move to sheltered or retirement housing.

The identification of 'stress' and the 'financial costs' as potential barriers to moving has been reported in other housing studies, including local research undertaken by LQR Associates for Northumberland County Council[44]. The timing of the decision and proximity of family support is relevant here, as people may be less willing to contemplate a housing move at later ages, if they are experiencing health problems or living with mobility restrictions. In the qualitative interviews undertaken for this study one family member described it is as being '*almost a full-time job'* to support an older parent to move from their existing property outside the County to a bungalow in Belford to be nearer to family. Older individuals lacking this support are less likely to attempt the move.

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[44] LQR Associates (2013) 'Ageing Well in Northumberland, Older People's Housing Needs and Aspirations'. A Qualitative Study for Northumberland County Council.

Figure 18 - Perceived barriers to moving

Barriers to moving

Barrier	Value
No-one to help sort out possessions and furniture	3
Family and friends don't want me to move	5
Health difficulties	6
Personal reasons	8
Other	9
Financial - cost of rent and service charges	13
Financial - cost of moving	16
I don't want to move to retirement/sheltered housing	28
I have already moved to suitable housing for long-term needs	28
Lack of suitable housing in current location	35
Stress - the hassle and upheaval of moving	35
Nothing putting me off	41

Housing priorities

All survey respondents were asked to indicate their housing priorities using a list of 20 features (shown in *Figure 19*). They were asked to rank each option on a numerical scale of 1-5 with 1 being NOT very important to 5 being considered VERY important. The results are summarised in (Figure 19 and Table 16 - **nergy efficiency and affordable heating** were ranked highly, along with **accessibility, security features**, and **proximity to local services**. There were mixed responses on the question about shared access to a garden or outdoor seating area and storage facilities for equipment.

These issues were explored further at the Community Consultation event and in the Focus Groups. Unsurprisingly, the extent to which people rated items such as 'pet-friendliness' as a high or low priority was dependent on their personal circumstances and preferences. Households who were looking for rented housing or who were already in rented accommodation placed a higher priority on 'Affordable Rent' than homeowners.

Figure 19 - Housing priorities ranked by respondents

Priorities for survey respondents

Legend: Series1, Series2, Series3, Series4, Series5

Features (top to bottom):
- Regular contact with someone to check that I'm OK
- Other people to socialise with
- Pet-friendly
- Wi-fi and internet access
- Close to family and friends
- Care available if required
- Close to GP, Dentist, Healthcare
- Close to local shops/supermarket
- Close to public transport provision
- Internal storage for disability equipment
- Covered parking area
- Shared garden and outdoor seating area
- Own private garden and outdoor seating area
- Help with repairs and maintenance
- 24-hour care alarm
- Fully accessible for wheelchair use
- Affordable rent
- Secure entrance with good lighting
- Energy efficient and affordable heating
- Environmentally sustainable design

Y-axis: Feature
X-axis: Number of respondents (0, 20, 40, 60, 80, 100, 120, 140)

Key to order of priority given by respondents:

- Rank 1 = NOT very important
- Rank 2
- Rank 3
- Rank 4
- Rank 5 = VERY important
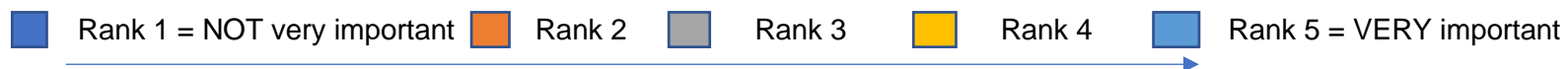
Table 16 - How respondents ranked priorities

Feature	Rank 1	Rank 2	Rank 3	Rank 4	Rank 5	Not Stated	Total
Environmentally sustainable design	17	8	25	26	35	10	121
Energy efficient and affordable heating	3	1	2	18	95	2	121
Secure entrance with good lighting	3	3	13	28	71	3	121
Affordable rent	32	4	7	5	62	11	121
Fully accessible for wheelchair use	16	7	20	20	49	9	121
24-hour care alarm	16	9	28	22	35	11	121
Help with repairs and maintenance	9	4	22	33	42	11	121
Own private garden and outdoor seating area	5	7	21	29	53	6	121
Shared garden and outdoor seating area	42	17	31	12	5	14	121
Covered parking area	40	9	24	18	20	10	121
Internal storage for disability equipment	19	12	31	21	29	9	121
Close to public transport provision	9	4	12	27	63	6	121
Close to local shops/supermarket	3	3	9	31	71	4	121
Close to GP, Dentist, Healthcare	1	2	11	23	80	4	121
Care available if required	4	3	15	29	66	4	121
Close to family and friends	9	3	23	28	51	7	121
Wi-fi and internet access	12	5	12	21	67	4	121
Pet-friendly	35	10	14	8	43	11	121
Other people to socialise with	7	4	30	30	44	6	121
Regular contact with someone to check that I'm OK	4	9	20	27	52	9	121

Interest in Assistive Technology

There is growing interest amongst Health and Social Care Service Commissioners in the potential to use Assistive Technology such as tele-care and tele-health monitoring and reminder devices, to support people to live safely and independently. Northumberland County Council have identified the potential to use Assistive Technology to support community housing schemes in their Extra-Care and Supported Housing Strategy[45].

The expansion of Assistive Technology is a priority in the newly published NHS Long-Term Plan[46]. The types of technology highlighted in the literature on innovation in housing design in later life include; movement sensors, remote health monitoring devices, falls detectors, and Bluetooth-enabled household appliances. However, in research literature there is mixed evidence regarding user acceptability for remote monitoring devices and some issues around compliance amongst older adults[47].

To explore user reactions to this, respondents in the Bell View survey were asked:

'*Looking ahead, if there are technologies available that have been shown to improve health and memory and support your independence, would you be interested in having this type of help in your home?'*

Responses were received from 113 responses households and the answers are shown in *Table 17*.

Table 17 - Interest in assistive technology in the home

YES	NO	Maybe	Non-response
65 (58%)	5 (4%)	43 (38%)	8

In the previous priorities question respondents were asked to rate how important wi-fi-access was as a housing feature and the responses are shown in (*Figure 20* - Priority given to wi-fi access overleaf).

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[45] NCC (2018), Extra-Care and Supported Housing Strategy.

[46] NHS Long Term Plan (2019), https://www.england.nhs.uk/long-term-plan/ (accessed 12/10/2019).

[47] Liu et.al (2016), '*SMART homes and home health monitoring technologies. A systematic review*.'

Figure 20 - Priority given to wi-fi access

	Rank 1 Not very important	Rank 2	Rank 3	Rank 4	Rank 5 VERY important	Not stated
Number of respondents	5	12	12	21	67	

How important is wifi and internet access?

KEY

Responses by Rank first, and number responding
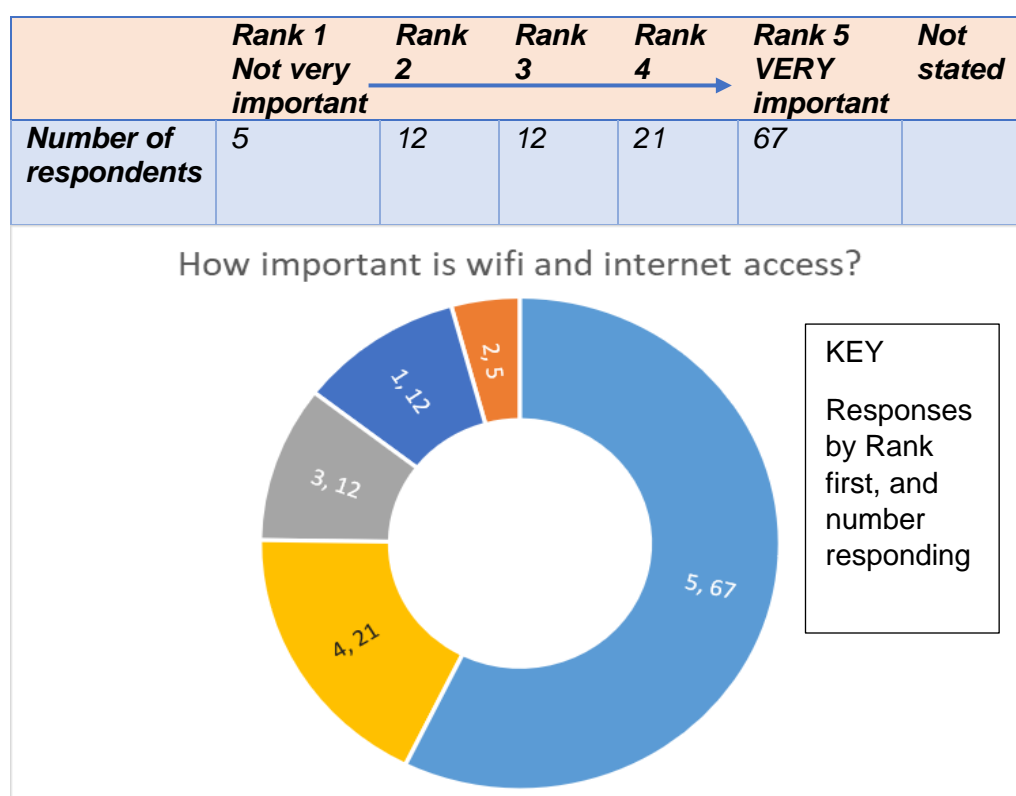
This implies that respondents are becoming increasingly familiar with some of the digital devices and platforms that might be used in future to support tele-care and assisted living such as mobile phones and tablets. However, the extent to which people use and welcome new technology was explored in the focus groups and at the Community Consultation event and this produced a more mixed response.[48] Research into assistive technology and digital engagement has shown that levels of digital competency and frequency of digital and technological engagement decline as people reach later ages, even amongst previously confident and competent user groups.

Interest in age-friendly retirement housing in current location

At the end of the survey, all survey respondents the following question:

'*If specially designed, accessible housing with care and support to promote your independence was available locally, would you be interested in moving to this type of housing?*

Responses were received from 114 households just under a third of respondents (31%) indicated that they would be interested this type of housing. More than half (52%) were willing to consider it. Only 17% of survey respondents said 'No' *(Table 18).*

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[48] It is also worth noting that if Bell View wanted to provide housing with 24-hour care alarm in situ, the houses would have to have broadband access as the old analogue systems of remote alarm monitoring are being phased out as part of a national digital switchover programme (see Dodd, (2019) Blog for the Housing LiN (2019) http://bit.ly/35vV7WB).
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Table 18 - Interest in age-friendly housing

Response	Number of people responding to the question	Percentage
YES	35	31%
NO	20	17%
MAYBE	59	52 %
Non-response	7	

This is an interesting finding and it implies that people may previously have said that they didn't want to move. However, if there was suitable and well-designed accommodation with access to support available in their local community, they would be prepared to consider it. However, it is very difficult for people to plan a move to housing that doesn't yet exist and there is no other sheltered or supported accommodation in Belford to provide a clear comparison.

Summary

Housing needs surveys can only provide a snapshot of people's stated intentions and aspirations at a given moment in time. There are many reasons why housing intentions may not translate into actual moves. These might include but not be limited to; difficulty in finding the right accommodation at the right time, affordability issues, difficulty selling existing property, competition for popular housing schemes and long-waiting lists for social housing, plus unexpected changes in health and personal circumstances.

There are methodological problems in using a self-completion questionnaire to access the views of older adults. For example, although help was offered with completion, the use of a questionnaire may have excluded some people who find these difficult to complete. Some older people, including the pilot group reported that they found multiple choice options and questions using ranking scales more difficult to interpret.

The sample size and the method of self-selection cannot provide a statistically representative sample of the whole population of households aged 65 and over within the target catchment area. For this reason, it is not possible to generalise these findings across the wider population. This is a common methodological limitation of most community housing needs surveys, particularly when targeted at a dispersed rural population group in a restricted timeframe. However, the quantitative survey and the data it has yielded, does provide important and updated market research insight into older household's housing needs and priorities, that was previously missing. The study has identified a demand for two-bedroom bungalows as the preferred type of housing across all tenures.

In relation to housing design and future service planning, it is important that housing is not considered in isolation. A life-time neighbourhood approach is required that fully recognises that **accessibility, affordability, security** and **proximity to services** and amenities are key priorities for older households. If plans for a supported housing scheme in Belford are progressed, the location of the site will be of critical importance. Identification of site availability is outside the scope of this initial housing needs assessment. However, the site identification and a viability assessment would form the basis for a more detailed phase II

Feasibility Study if the Bell View Trustees decide to progress their Community Housing Fund application.

Feedback from the community consultation day

To supplement the quantitative data collected in the housing needs survey and qualitative insights from the Focus Groups and interviews, a community consultation event was organised on 26th September 2019 at Bell View and widely publicised.

Aims

The aims of the day were to reach people who may not have completed the household survey, and to hear from local residents and their families, and other community stakeholders. The event was used to add insight into the type of housing that older people were looking for, their experience of finding it in Belford and to gather community views about proposals for additional supported housing in the village. The event was also used to find out whether people saw Belford as an 'Age-Friendly' community and what could be improved.

Involvement Activities used

Lynne Livsey from LQR Associates attended, with staff from Bell View, and local Architect Duncan Roberts.

In addition to opportunities to talk to the Consultant, Architect and Bell View staff, a series of interactive displays were organised, they included:

- **A 'Suggestions Tree'** - where participants could add a leaf to describe what made Belford a good place to grow old and what could be improved

- **An interactive housing scheme design model**

- **A display on Assistive Technology** and a poll repeating the survey question to find out how interested people were in having assistive technology solutions in their home.

- A representative from the **Northumberland 'Ageing Well' Team** attended to provide information of interest to older adults and their families**.**

Attendance

Over twenty people attended the event including people attending the Bell View Lunch Club and with additional input from Bell View Day-Care service users who were involved in adding to the 'Suggestion Tree' (see Figure 21 - The 'Suggestion Tree'

Interactive housing design consultation

An important element of the community consultation event was an interactive scale model of a proposed community housing development prepared by local architect Duncan Roberts[49]. The model enabled participants to experiment with alternative types of housing arrangements. It incorporated different layouts for garden areas, car-parking and access roads for a hypothetical development of five wheelchair accessible bungalows. Participants were also shown information about Lifetime Home design standards and guidance from the Pocklington Trust on lighting. This helped them to discuss layout options with the Architect and to explore the options for environmentally sustainable and innovative design features.

This interactive planning session proved very popular. The model provided a focal point for wider discussions around the nature of the new housing and the factors that the participants felt were important in their design. Consistent themes developed over the course of the event that complemented and reinforced the qualitative data from the previous Focus Group discussions and the response patterns emerging from the survey research. The outcomes of the design discussions are summarised in (Table 19 - Community Consultation Discussion Summary).

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[49] A Belford resident, Duncan has extensive experience in designing Community-Led housing projects in rural Northumberland and elsewhere, including the Bell View Resource Centre and the bungalows in Bell View Court[49].

Table 19 - Community Consultation Discussion Summary

	Key points emerging from housing design discussions 26/9/2019
1	The benefits of two bedroomed accommodation to allow for carers & relatives to stay.
2	Two-bedroom accommodation would also allow couples to continue to live together if one had to sleep alone for medical reasons
3	Larger than standard main bedrooms were also desirable that would enable two single beds, plus any necessary medical equipment, to be comfortably accommodated. This would allow a couple to continue to share the same bedroom & to provide mutual care more effectively than if separate bedrooms were to be used.
4	Bungalows were the preferred housing type
5	The idea of moving from privately owned property to rented accommodation was seen as being a good thing if people cannot buy the type of accommodation that they need and/or if people need to release income from housing equity to fund care or pension shortfalls.
6	Participants who, as a couple, each had their own car could anticipate managing with only one vehicle between them if they were to move to Belford village from an outlying area.
7	Housing that could be easily adapted to changing health and mobility needs was requested. This included partition walls that could be relocated or knock-out panels to allow easy access between bedrooms & shower-rooms. Variable height sanitary-ware was also discussed as a desirable bathroom feature
8	The idea that each house should have a small private garden or outdoor seating area but that these should then give access to a larger shared garden was repeatedly requested
9	The responsibility for the maintenance of the shared garden was discussed. The were some suggestions that parts of the shared garden might be used for communal fruit & vegetable growing.
10	It was also discussed that the shared garden might form a pedestrian route into the village.
11	The implication that the arrangement of the houses around a shared garden would mean that vehicular access & car-parking would be around the perimeter of the development was discussed.
12	The cost of a long access road - compared with a central cul-de-sac - was considered. The idea of sharing the cost of access roads with other developers of a larger site was proposed.

13	Orientation of the houses so that their roofs would be suitable for fitting solar photo-voltaic & solar thermal panels was discussed. Both types of panels particularly benefit people who are at home during the day - in contrast to working people whose houses are empty at the time of maximum energy production.
14	There was a discussion as to who should benefit from the potential income from electricity generation from solar panels as the proposed bungalows would be rented & the installations presumed to be in the ownership of Bell View.
15	Healthy, environmentally-friendly materials were requested to be used in the construction. There was consideration of the sources of supply for the materials used and what procurement measures might be taken to ensure they came from ethical sources. There were requests to avoid plastics & oil-based materials wherever possible.
16	The reduction of waste and the avoidance of the bad practice associated with the conventional construction industry were emphasised.
17	The use of very well-insulated timber framed construction was discussed. This could be clad in a rendered finish rather than natural stone or brick.
18	Triple-glazed rather than double glazed windows were discussed. A preference was made for deep windowsills to allow ornaments to be displayed.
19	The need to avoiding having to reach over worktops - particularly over kitchen sinks - to open windows was mentioned.
20	Devices that allow the contents of wall-mounted cupboards to be easily & safely accessed were discussed.

Source: Duncan Roberts, Architect. Belford.

It was clear that people enjoyed the opportunity to take part in small group discussions with an Architect and the session provided further insight into people's design priorities. These were not too dissimilar to the extensive body of 'best practice' design literature to support lifetime home development.

Figure 22 - Discussing housing design with the Architect

The components of the model and display materials will be retained for use in further discussions of a site-specific nature. If the feasibility study develops further, and more detailed models can be produced to allow the interiors of the proposed houses to be discussed in future sessions.
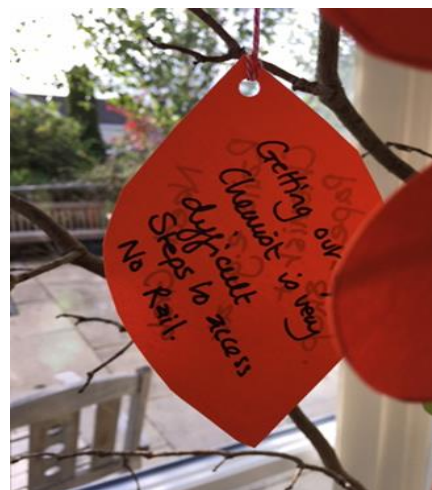
Feedback from the 'Suggestion Tree'

Participants were shown some of the key components of an 'age-friendly' community (Figure 87) and were asked to add their own ideas by adding a 'leaf' to the suggestions tree. The comments are listed in table 19.

Figure 23 - Components of an age-friendly neighbourhood

The suggestions described problems with the built environment and the need to improve access around the village. Access to transport was another area identified for improvement. Uneven and pavements, a lack of dropped kerbs, grab-rails, seating points and stepped access into local shops, including the local chemist, were identified as problem areas. People said that they were less likely to venture into the village if their mobility changes and they do not feel safe. Fear of falling was cited more than once as a reason not to go out.

'the pavements are terrible I walk with a stick and I'm terrified of falling'

(Respondent, aged 84)

Table 20 - Feedback from the 'Suggestion Tree'

What makes Belford a good place to grow old?	What could be improved?
'a wonderful Belford community'	'Pavements are terrible'
'We have a good range of services, 3 pubs, GP, Chemist, Newsagents, the Bell View Resource Centre'	'Can be isolating' 'Poor links to hospitals'
'Bell View Day Care Service'	'Poor transport links' Public Transport'
'Bell View – everything they do is excellent, they offer a tremendous amount'	'Lack of support housing and residential or nursing home care'
'Can get a bus to Alnwick and Berwick''	'Loss of Community Hall, no community venue to hold larger community events'
Bell View, we're so lucky to have it, a wonderful resource'	'Lack of community spirit'
'Bell View is good for the whole community'	'Could do with a 'Welcome Pack' for new residents'
'We have a supermarket'	'Not a lot of places to go'
'The Community Shop is a great asset and raises money for the community'	'Need grab rails to improve access to local shops such as chemist and paper-shop'
'Bell View is a great asset. Affordable housing for the elderly is a way forward'	'Miss the dances at the Community Club'
'Our medical services are excellent'	'Smaller buses to get to local towns such as Wooler'
'Good sense of community'	'I like to cycle but am put off by the lack of safe paths and dedicated cycle paths'
'Plenty of interesting things to become involved in'	

The suggestions described problems with the built environment and the need to improve access around the village. Access to transport was another area identified for improvement. Uneven and pavements, a lack of dropped kerbs, grab-rails, seating points and stepped access into local shops, including the local chemist, were identified as problem areas. People said that they were less likely to venture into the village if their mobility changes and they do not feel safe. Fear of falling was cited more than once as a reason not to go out.

'the pavements are terrible I walk with a stick and I'm terrified of falling'

(Respondent, aged 84)

There was a contrast between those more active residents who felt very satisfied with facilities and services on offer in the village and some of the older and physically frailer older respondents who used the Bell View Day Care service. Amongst this latter group more people identified the potential to feel isolated and cut-off from community activities. This reinforced the need to take a broad community-based approach to creating an age-friendly neighbourhood. As one participant put it, you can '*feel very lonely in a crowd'* if you don't know anyone or you have move into the village leaving friendship networks behind in order to access services and support. Bell View was cited as an important resource for helping people to maintain and sustain important social networks.

The suggestion tree findings were very similar to the findings from the 'Community Asset' study completed by Bell View in 2017 and the findings from the Qualitative Research undertaken by LQR rural Northumberland in 2013[50] about the important themes of **Accessibility**, **Affordability**, **and Community Connectedness** in supporting people to age well.

Other issues raised

Increasing cost and burden of homeownership

The maintenance, financial burden and high cost of home maintenance in later life were highlighted as a major problem by one homeowner looking to move from an outlying settlement into a bungalow in Belford and change tenure from homeownership to renting.

The need to provide information about housing options and how people could move from ownership to renting was discussed.

The cost of new-build bungalows in Belford was highlighted as being out of reach for some households, including one participant who had compromised by purchasing a house with stairs in order to in the village and installed a stair-lift and made bathroom adaptations to enable them to manage.

Emergency response availability

A Community Occupational Therapist who attended the event discussed a problem with installing community alarms for people who did not have family or neighbours who could act as key-holders in an emergency. They highlighted the need to develop a community-based solution so that people did were not left without help or taking to hospital when they could have been supported locally. The issue of emergency access to support for people living on

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[50] LQR Associates (2013)' Older people's housing needs and aspirations – a qualitative study' for Northumberland County Council.

their own raised as an issue in the focus group discussion. The options for developing a 24-hour face-to-face response service is an area for further research.

Summary

The community consultation event confirmed that people are very aware of the likely problems and risks of growing older in more isolated rural settlements. As housing consumers, people are very interested in practical design considerations and environmentally friendly design in housing. Discussions at the consultation event confirmed that people would be interested in finding out more about the potential for technology to support them to live safely and independently, *if* these technologies and design features are user-friendly and unobtrusive. The community event confirmed the survey findings that 2-bedroom bungalows were the preferred housing choice and there appears to be support for a new scheme of affordable and supported community housing. The choice of a central location for the site for any proposed housing scheme was raised by participants but was not one that could be resolved at this stage in the consultation.

Feedback from the Focus Groups

To supplement the quantitative data gathered from the housing needs survey, two focus group discussions were held at the Bell View Resource centre. The first group included three older people who had: i) moved home in retirement, ii) were thinking of moving home or iii) who had decided to 'stay put' despite increasing care and support needs. The second group included interviews with 3 adult children who had moved older parents into Belford in the last 12 months. The Focus group discussions were facilitated by the Consultant. Duncan Roberts (local Architect) attended the morning session as an observer. The focus group discussions were supplemented by one face-to-face interview with a participant who could not attend the first group due to ill-health. A further telephone interview was conducted with a family member who could not attend the day. The Focus Group findings were supplemented further by data gathered in the face to face discussions with older people attending the consultation day.

An 'Appreciative Inquiry' approach guided the design of the focus group discussions and interviews. The aim of this qualitative method was to add depth to the quantitative data by listening to the 'life-story' accounts of participants and to identify key themes emerging from these. A Topic guide was used to organise the discussion and with the permission of the participants, the interviews were recorded for later thematic analysis. Verbatim quotes are used to highlight key themes emerging from the discussions. The outcomes of the discussion under each topic heading are summarised below:

Topic 1

Perceptions of Retirement/Sheltered Housing

The group were asked to express their immediate thoughts and reactions to the term 'Sheltered or Retirement Housing'. A key finding that emerged from these discussions was that this type of housing was perceived as being an option more suited to frailer older people, rather than an aspirational housing choice that appealed to younger or fitter retirees. Some people thought that a move to retirement could be isolating:

'Flats for elderly people can be very isolating, everybody gets behind closed doors and you never seen anyone'

Another family member described their experience of this:

….I tried to persuade her (Mum) to move into some kind of assisted living but Mum adamant that 'she was not ready for that'.

However, and attractive appearance and good design of retirement housing could help to overcome this. When asked directly, 'Do you think there's a stigma around moving to sheltered housing?' participants were more positive:

'I think there can be but with McCarthy and Stone, yes still a stigma of how expensive they are, but if they look nice then no'

While people thought that having a safe environment with an emergency alarm system was generally a good idea for people living in sheltered housing, there was less enthusiasm for '*dangling cords'* or obtrusive adaptations. However, the presence of a member of staff to monitor the health and wellbeing of residents was seen as a positive feature of sheltered housing, conversely, the trend for remote monitoring was not. As one participant described:

'At one time Sheltered Housing meant that you had a warden, this was the biggest mistake ever, they knew everyone intimately and could spot immediately when something went wrong'.

Participants expressed concern about 'rules and regulations' that they thought would apply to retirement or sheltered housing and the lack of parking spaces, a loss of privacy or their ability to take pets into rented schemes. There was a general lack of understanding about the different terms applied to age-designated housing such as 'Sheltered', versus 'Independent Living' or 'Extra-Care'. Participants identified the need for more information about the types of housing options available and the advantages and disadvantages of moving from one tenure to another, even it meant equity could be released. For example:

'I always think, well what would happen if you rent a place and you run out of money, but I suppose if you sold a place, it would take you quite a long time [to use that money]. I have no idea, because I've never really rented a home and I have no idea how much renting is, I really haven't'

Living on a fixed income and going into a housing situation where service charges are unpredictable was not seen as an attractive option. Nobody had knowledge or experience of schemes such as 'Shared Ownership'. The lack of choice and information means that many older households are not operating from a position of strength when making housing decisions because they don't have the information to make an informed choice.

People were asked whether they wanted to live in age-designated or mixed age neighbourhoods. The value of having supportive neighbours was emphasised and most people said that they didn't mind having children around. There was a view that people were not necessarily looking for age-segregated housing but rather age-appropriate and fully accessible homes. Housing located in a mixed-age neighbourhood was generally viewed positively, it was the design and quality of the housing that was more important.

Topic 2

Making the decision to move or stay put

Participants in both focus groups were asked to describe: i) the factors that influenced their decisions to move or stay put and ii) how easy it was to find appropriate housing in Belford.

Predictably, there were mixed experiences depending on previous housing and household circumstances. Housing market conditions are a major influence on this. For example, one homeowner described the problems they encountered in selling an existing property. The delay in finding a buyer meant that they had lost the chance to buy the bungalow that they wanted in a nearby market town where such housing was at a premium. The process of buying and selling property was widely seen as stressful. This participant had given up on the idea of moving as a result, preferring to stay put and 'hope for the best' in their current home.

For some owner occupiers who had moved to north Northumberland from more expensive housing market areas elsewhere, the move was an opportunity to upgrade to larger and more modern housing *and* release to equity at the same time. For other homeowners, with less valuable properties to sell, the price of bungalows in the village put them out of reach. One such participant aged 80+ had been widowed and had moved to be closer to family members. They described how they had been forced to compromise by buying a house, then privately purchasing a stair-lift and making bathroom adaptations in order to secure a

property in the centre of the village. They said that they would have considered moving into rented retirement housing if a bungalow had been available.

Participants who had experience of looking for social housing bungalows in Belford described the long waiting lists as being '*like waiting for dead-men's shoes'*, with one person waiting over 10 years for a bungalow that they had first applied for in their 70's when caring for an older spouse who couldn't manage the stairs in their previous house. The lack of predictability around the timing of a housing offer was seen as a major barrier to moving.

The adaptability of the property when health and mobility changed was a key feature influencing the decision to stay-put or move. For example, one participant who had moved from owning a small house with steep stairs to a rented bungalow described how:

> *'I couldn't manage the stairs and we had nowhere to put a toilet downstairs. If I could have done that I would still have been there'.*

While another single owner-occupier had moved themselves downstairs in a larger property with a downstairs bathroom so that the stair-climbing was not an issue. Although they no longer used the upstairs rooms in their home, they enjoyed the view from the property and were quite content to live alone.

The loss of driving ability was identified as a major factor that would influence a housing move, especially for people who were living outside the centre of the village:

> *' I know I can have things sent in' I think loss of driving would influence my decision to move if I couldn't get to see friends or my daughter in X'*

The complex negotiations that take place between spouses/partners and with other family members about whether people should move to a more accessible property closer to family members and or facilities was a recurring theme in all the qualitative discussions. As one participant explained with regard to discussions with their spouse:

> *'I'm ready for a move – he's not and therein lies the problem!'*

Another relative described how:

> *'I moved 4 years ago in early retirement and a bought larger house with idea that Mum would move in … but Mum did not want this, felt she wanted to remain independent'.*

Relatives who had had the direct experience of supporting an older parent to move closer to them in Belford described the high level of stress and work involved in planning the move and helping their parent to settle into a new community:

> *'When you have to move someone very suddenly and there's nothing in place, it's an absolute nightmare'*

They described how this experience had made them think about the importance of forward planning and the need to think about their own future housing needs and aspirations:

> *All of this has made us acutely aware, you know, of how we have to plan for the future' …. but also, things like Power of Attorney, Making Wills, funeral arrangements, you have sort things out, you have to decide….it was always sort of a taboo subject, but you have to think ahead'*

Having described the decision making that had informed their housing decisions and those of family members, participants were asked to describe the design features and type of housing they would want if they had to power to influence it.

Topic 3

Designing the ideal retirement housing

Participants were asked 'If you could design the ideal retirement home – what the features that would be important to you?' the responses are summarised below:

Size and accessibility
- The need for the accommodation to be fully wheelchair
- Plenty of space for storage, especially close to the main entrance for equipment
- Parking for at least one car (but preferably two to accommodate visitors)
- Covered parking close to the house with a charging point for a mobility scooter
- Outdoor storage space/shed
- A decent sized wet-room that you can get a wheelchair in and out easily
- Room for a dining table (could include folding furniture) to sit down and eat and host a meal with family and friends
- Minimum of two bedrooms
- Space for a computer/printer (not necessarily an office) but a space in an alcove
- A garden that had room for a table and two chairs or a small bench and some pots (not too large to manage) that could be easily seen and accessed from the house

Desirable features
- Having a view – being able to see people coming and going
- A Fireplace is seen as very important as the focal point of the room
- A large walk-in-shower or wet-room
- Ovens fridges at eye-level not under the counter (which makes them hard to access)
- At least one height-adjustable work-surface in the kitchen
- Good lighting with plenty of plug sockets that are easy to reach
- Movement sensors to trigger low-level lighting to show the way to the bathroom and main entrance a good idea
- Warm, energy efficient and affordable to heat
- Solar panels and green energy features
- Good wifi-access
- Pet-friendly

Safety and security
Participants thought that the ability to summon help in an emergency was a very important, consideration, although none of the participants taking part in the discussions who lived alone had a care-alarm system. The issue of who holds the keys and who can get into your home when emergency access is needed was discussed. Participants gave examples of their experience of other friends or relatives leaving their keys in their locks so that the door couldn't be opened in an emergency. Participants felt that a key-less door entry system could overcome this. They also liked the idea of having a camera-door-entry system where they could either use their television screen or a mobile phone to see who was at the door. The importance of having security features such as 'spy-holes' at the right height was mentioned.

The importance of having good neighbours was highlighted as a very important feature for retirement housing schemes. Participants also felt that a mobile 'pop and check service' would be a good thing, especially if someone was isolated or ill, lived with dementia, or was just discharged from hospital and there no staff on site.

Communal areas

The issue of communal areas and or a shared courtyard or garden was discussed. People had mixed views on this with the typical comment being it '*Depends on the neighbours!*'

People thought that ability to maintain a garden changes over time and that the advantage of a shared space was that:

>*'Those who want to garden can, those who don't can watch!'*

Generally, the idea of being part of a community where you could see and talk to your neighbours but also have a private outdoor seating area was the preferred option.

Summary

Although the qualitative participants were a small group, they represented a broad range of tenures and housing experiences. The quality and depth of the discussion provided valuable insight into the housing support needs and accommodation priorities for older people and their families. The qualitative research also highlighted the dilemmas and barriers that older households people face in accessing timely information and appropriate housing and the uncertainties people face in knowing how best to finance their retirement, including their future care and support needs.

These findings are not unique to this study and have been cited in national reviews of older people's housing and in more local, focussed research in Northumberland undertaken by Bell View, LQR Associates, Glendale Gateway Trust and others. The challenge is how to move beyond listing familiar problems and obstacles towards providing practical, affordable and innovative solutions. These must be of an appropriate scale with access to community-based support and local amenities to better meet the needs of a dispersed and rapidly ageing rural population.

Discussion and next steps

The issue of housing and where people live in retirement is central to social policy planning for an ageing population. There is growing acceptance that poor housing has a detrimental impact on health and wellbeing and may increase demand for health and social care services. This study has largely confirmed the findings of the Strategic Housing Market Assessment. Namely, that there has been a failure of local housing markets to adapt to the needs of the ageing population in north Northumberland.

Housing needs surveys can only provide a snapshot of people's stated intentions and aspirations at a given moment in time. By using a mixed method approach this study has attempted to overcome some of the methodological problems within a very constrained timescale and with the limited resources available to fund it. There are many reasons why housing intentions may not translate into actual housing moves in later life. These might include but not be limited to; difficulty in finding the right accommodation at the right time, affordability issues, difficulty selling existing property, competition for popular housing schemes and long-waiting lists for social housing, plus unexpected changes in health and personal circumstances.

This study has provided in-depth insight into the type of homes that people want to live in (whether through buying or renting) as their needs change as they grow older. It has highlighted some of the barriers that households face in accessing appropriate housing. The stated preference for most people is for two-bedroom bungalows with adequate covered parking. Space is important, as people are looking for wheelchair accessible interiors that incorporate the best-practice, age-friendly design principles advocated by the Happi Standards reports[51]. There is a strong desire amongst study participants to maintain their independence and to live close to services, shops and amenities around the main service centres and Belford is a popular choice of location.

Belford is in a unique situation compared to other rural villages in Northumberland because of the Bell View project. The charity offers a wide range of services and support to enable people to live well, be socially connected and to remain in their own homes for as long as possible that is not always available elsewhere. However, while the community support is highly valued, the study has revealed a shortage of well-designed affordable housing close to the centre of the village. If retirement housing options are not fully developed, people may become trapped in inappropriate or costly housing and face increased risks to their health and wellbeing. For some, it may mean an unwanted or crisis move away from familiar surroundings and into residential care outside the village. There is a need to think about ways in which assistive technology and mobile housing related support services can provide additional reassurance and early interventions when things start to go wrong. This applies across all housing tenures and there is a need to publicise these types of services and technologies to older people and their families.

This study has reinforced the need to provide timely information and advice about the range of housing options that people may require at different stages of their retirement. This includes advice and information on equipment, home adaptations, help with repairs and maintenance and housing related support, and financing retirement. There is some evidence that people may be more inclined to move to appropriate housing if there was more support

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[51] For details go to: https://www.housinglin.org.uk/Topics/browse/Design-building/HAPPI/ (accessed 26/10/2019).

available to reduce the 'stress and hassle factor' and this 'help to move' support is a potential service development idea for Bell View that warrants further investigation.

The Community Housing Fund offers a new opportunity to bid for capital funding to develop a small-scale affordable housing project in Belford. There is support from the County Council and The Communities CCAN project to make this happen. However, finding an appropriate site in the centre of the village is central to realising this vision. As with any new venture, a move into a new service venture is not without its risks. Although Bell View has accessed social finance to establish their two social enterprises (Help at Home, and Bell View Care). The Charity is also used to working in regulatory framework as a domiciliary care provided.

If the Bell View Charity were to become a provider of rented housing, the properties would be an important long-term asset for the charity. If the financial assessment is positive, the rental income from the properties could provide an important source of regular income for the Charity, reducing the reliance on short-term time-limited grant funding. The next step will be for the trustees to decide whether to pursue their funding application for the next stage of the Feasibility Study so that they can make a fully informed cost-benefit assessment. This would include a detailed site identification investigation and a planning and financial viability assessment.

Finally, in relation to the housing design and future service planning, it is important that housing is not considered in isolation. A life-time neighbourhood approach is required that fully recognises that **accessibility, affordability, security** and **proximity to services** and amenities that are the main priorities for older households. It is important the Belford Parish Council acknowledge the needs of older residents within the local Neighbourhood Plan and that the wider community are involved in making Belford a Lifetime Neighbourhood where people can live well, and age safely with dignity and independence.

END.

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References and Bibliography

AgeUK (2015), 'The Future of Transport in an Ageing Society', Download from: < http://bit.ly/2NAYvqT >. (accessed 03/11/2019).

AgeUK (2018), 'New analysis shows number of older people with unmet care needs soars to record high'. Download from: < http://bit.ly/2qf9bDA > (published 09 July 2018 12:00 AM).

AgeUK (2019), Later Life in the United Kingdom (2019). Download from: < http://bit.ly/34vh1HR>. (accessed 31/10/2019).

APPG (2018), Rural Housing for an Ageing Population: Preserving Independence (HAPPI 4). Download from: < http://bit.ly/2WG0VZf>. (accessed 03/11/2019).

Beach (2016), 'Generation Stuck, Exploring the Reality of Downsizing in Later Life', report for the International Longevity Centre.

Beach (2018), 'Stronger Foundations - International Lessons for the Housing-with-Care Sector in the UK', report for the International Longevity Centre.

Cottall, J. and Harding, C. (2018), Older People's Care Survey. Report for Coram Family and Childcare. Download from: https://www.familyandchildcaretrust.org/older-people's-care-survey-2018>. (accessed 03/11/2019).

Crawford, R. (2018), 'The Use of Housing Wealth at Older Ages', Briefing Note BN239. The Institute of Fiscal Studies.

Dreyer, K., Steventon, A., Fisher, R. *et al.* (2018),'The association between living alone and health care utilisation in older adults: a retrospective cohort study of electronic health records from a London general practice'. *BMC Geriatrics* **18,** 269 (2018) doi:10.1186/s12877-018-0939-4.

House of Commons CLG Committee (2018), Housing for Older People (second report of session 2017-2019). Download from: https://publications.parliament.uk/pa/cm201719/cmselect/cmcomloc/370/370.pdf>. (accessed 03/11/2019).

Kings Fund (2018), A Fork in the Road – Next Steps for Social Care Funding Reform. Download from: < https://www.kingsfund.org.uk/publications/fork-road-social-care-funding-reform.>. (accessed 03/11/2019).

Kingston et.al (2018), 'Projections of multi-morbidity in the older population in England to 2035': estimates from the Population Ageing and Care Simulation (PACSim) model. Age and Ageing, (47), (3) May 2018, 374-380.

Liu et.al (2016), '*SMART homes and home health monitoring technologies. A systematic review.*' International Journal of Medical Informatics, (91), 44-59. http://dx.doi.org/10.1016/j.ijmedinf.2016.04.007.

LQR Associates (2013), 'Ageing Well in Northumberland, Older People's Housing Needs and Aspirations', for Northumberland County Council.

Ministry of Housing and Local Government (2018) 'English Housing Survey 2017-18 – Home Ownership'. Download from: < https://www.gov.uk/government/statistics/english-housing-survey-2017-to-2018-home-ownership>. (accessed 03/11/2019).

NHS Long Term Plan (2019), Download from: <https://www.england.nhs.uk/long-term-plan/>. (accessed 12/10/2019).

Northumberland County Council (2011), 'Local Knowledge, Bamburgh Ward Factsheet'.
Download from:< http://bit.ly/2oJralh>. (accessed 31/10/2019).

Northumberland County Council (2018), 'Extra Care and Support Housing Strategy'.
Download from: < http://bit.ly/2C6Os7x>. (accessed 31/10/2019).

Northumberland Knowledge (2017), Northumberland population, Older people - age profile.
Download from: < http://bit.ly/2JJ5HQM >. (accessed 31/10/2019).

Northumberland Strategic Housing Market Assessment (2015, and updated report 2018).
Download from:< https://www.northumberland.gov.uk/Planning/Reports.aspx. >.
(accessed 31/10/2019).

Office for National Statistics (2013), '2011 Census analysis: Unpaid care in England and
Wales, 2011 and comparison with 2001', Download from:< http://bit.ly/325kYSc>.
(accessed 03/11/2019).

Office for National Statistics (2017), 'Disability-free prevalence rates and disability-free life
expectancy dataset'. Download from: < http://bit.ly/34pETN3>. (accessed
31/10.2019).

Prince, M et.al (2014), 'Dementia UK: Update Second Edition Report' produced by King's
College London and the London School of Economics for the Alzheimer's Society.

PSSRU (2017), Projected Demand for Supported Housing in Great Britain 2015-2030.
Download from: < https://www.pssru.ac.uk/pub/5332.pdf>. (accessed 03/11/2019).

Public Health England (2015), Local Health Report, Bamburgh Ward. Download from: <
http://bit.ly/32dlwFl> (accessed 31/10/2019).

Royal Bank of Scotland, 'The Private Bank of Mum and Dad', Download from:
<https://www.adambank.com/insight-articles/news/2018/the-private-bank-of-mum-
and-dad.html >.(accessed 03/11/2019).

Savills (2017), 'Spotlight on Housing for Older People'. Download from: <
https://www.savills.co.uk/research_articles/229130/217396-0>. (accessed
03/11/2019).

Social Regeneration Consultants (2017), Enabling Affordable Community-Led Housing in
North Yorkshire and East Riding. Download from: < http://bit.ly/2WFMgO4 >.
(accessed 03/11/2019).

Trapeze Consulting (2017), 'Bell View Strengths and Needs Analysis of Catchment Area'.
Executive Summary and Full Report. (Available from Bell View).