



**ARGYLL & BUTE COUNCIL**

**Housing Need & Demand Assessment Technical Supporting Paper 11**

**Core Output 4: Wheelchair Users & Disabled Persons Housing Needs**

**(April 2021)**

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## 1.0 Introduction

To achieve “robust and credible” status, a Housing Need and Demand Assessment (HNDA) must satisfy all core outputs and processes as set out in the guidance published by the Centre for Housing Market Analysis in 2020. The CHMA require local authorities to address specialist provision one of which is wheelchair housing.

The aim of this paper is to provide a clear, evidence-based understanding of

- The prevalence of disabled people and specifically wheelchair users within Argyll and Bute.
- The demographic profile of both disabled people and wheelchair users and outline the likely future profile.
- The housing needs of both disabled people and wheelchair users.
- The types of homes disabled people and specifically wheelchair users are demanding in terms of tenure, type and size of homes.
- The available wheelchair housing by tenure, type and size of homes as well as identifying the turnover of wheelchair housing.
- The unmet housing needs of disabled and wheelchair users.

The key findings from this analysis will be used to inform the Local Housing Strategy.

Primarily this paper will outline the consultation and research methodology and this will be followed by;

- a summary of the relevant legislative requirements and national guidance relating to wheelchair users and their housing needs. This will be followed by a summary of key local policies relating to the housing needs of wheelchair users (in Section 3);
- an exploration of the current special housing provision and particularly wheelchair housing provision. This will entail outlining the availability of specialist and wheelchair housing stock, the turnover of this stock and the level and suitability of adaptations (in Section 4);
- using a wide range of datasets to ascertain the number of disabled people in Argyll and Bute (section 5);
- using a range of models to extrapolate or estimate the number of current wheelchair users and future users (in Section 6);
- identifying the unmet housing need experienced by current and future wheelchair users in Argyll and Bute (in Section 7) ; and
- a list of key recommendations for the Local Housing Strategy (LHS) (in Section 8).

## 2.0 Methodology - consultation

This paper collates the most current data available from a variety of national reports. However, local research has also been incorporated to provide a more granular local picture.

A picture of the wheelchair users housing needs has been constructed from a blend of qualitative and quantitative data. Qualitative data was obtained through:

- holding local consultation workshops and focus groups with wheelchair users in Oban, Helensburgh<sup>1</sup>, Rothesay, Dunoon, Lochgilphead and Campbeltown. These sessions, in 2020, allowed wheelchair users to be interviewed in depth to ascertain their housing needs and express general views;
- interviewing health and housing professionals, including Argyll and Bute's Housing Occupational Therapist to identify the key housing issues within Argyll and Bute for this client group and to identify the number of wheelchair users who have unmet housing needs;
- utilising information from Argyll & Bute Public Health Information paper "Health and Care and Housing Needs Assessment", produced jointly with Council Housing Services in 2018, and the summary "What is the need for specialist housing provision in Argyll and Bute for those accessing health and social care?"; and
- using data from the Argyll and Bute Health and Social Care Partnership's "Joint Strategic Needs Assessment" 2019

The 'Making the Connection user guide to specialist housing' 2015 by the Joint Improvement Team (JIT) provides practitioners with advice and identifies sources to assist in developing a robust evidence base to determine the housing needs and demands of disabled and older people. The approach and sources recommended in the guide have been utilised throughout this paper. The guide however was written in 2015 and some of the data it recommends using are at this time problematic for example:

- The 2011 census data is now 10 years old and hence does not provide an up-to-date evidence base.
- The benefits data that the report recommends using are out of date with some benefits being obsolete for those under 65 years old such as the Disability Living Allowance (DLA). Previous recipients of the payment have been reassessed and if still eligible for support would transition to the Personal Independence Payment (PIP).

To update the evidence base this paper also gleaned information from the following national sources:

- Capability Scotland -Housing Options Guide for Disabled People in Scotland 2013
- Horizon Housing- Still minding the step? 2018
- Horizon Housing – Mind the step 2012
- Scottish Borders Council – Space to live 2020

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<sup>1</sup> Unfortunately, we were unable to interview anyone from Helensburgh as wheelchair users did not attend the event. The invitation to attend the events also included an option for those who could not attend to respond and undertake a telephone interview. We did not have any wheelchair users from the Helensburgh area who came forward for a telephone interview.

- Scottish Government – National Planning Framework 4- Analysis of responses to the call for ideas August 2020
  - Scottish Government – A fairer Scotland for disabled people” 2016
  - Nuffield Trust- Shifting the balance of care March 2017.
  - Scotland’s disabled people’s summit – Our place our space 2016
  - Scottish Government Scotland’s wellbeing – Measuring the National Outcome for Disabled People July 2019
  - Scottish Government -Homes Fit for the 21<sup>st</sup> Century.
- A full list of documents referenced in this paper are recorded in Appendix 1.

The quantitative data was assembled from an assortment of local research. Local data was sourced from the following:

- Sending questionnaires to all wheelchair users on the HOMEArgyll waiting list, in the spring of 2020, asking them about their housing needs, aspirations and barriers to obtaining a suitable home.
- Argyll & Bute Housing Needs and Demands Assessment (HNDA) Household Survey, Research Resource, 2019; and the Helensburgh & Lomond HNDA Study, North Star, 2018.
- Annual Statistical Returns from Registered Social Landlords (RSLs)
- HOMEArgyll waiting list statistics.
- Housing Occupational Therapist’s assessment of the individuals on the HOMEArgyll waiting list who need wheelchair housing irrespective of whether the applicant has ticked the wheelchair housing box or not.

A full list of data sources referenced in this paper are documented in Appendix 1.

### **3. Legalisation, National Policies and actions undertaken to assist wheelchair users.**

#### **3.1 The National policy context**

There have been several legislative and policy documents devised by the Scottish Government concerning the provision of wheelchair housing, the key ones are outlined below.

##### **3.1.1 Housing for Varying Needs**

Housing for Varying Needs (1998) has been used as the design benchmark for affordable housing since 1999. Housing for Varying Needs (HfVNs) sets out design standards for mainstream housing to achieve “barrier free” design, which aims to ensure a home is flexible enough to meet the existing and changing needs of most households, including those with temporary or permanent physical disabilities. The guide also recommends how mainstream housing provision can continue to accommodate the changing needs of occupants as they age. Additional sections of the HfVNs set out the design standards for ambulant disabled people and for wheelchair users.

Building Regulations took account of HfVNs and hence aimed to bring “barrier free” standards to new housing in all tenures. This has included aspects such as level access and space on the ground floor to convert a WC into a shower area. However, barrier free provision does not provide the additional space

required by wheelchair users and hence a new specific policy direction was required.

The Government has given a commitment to the Scottish Parliament to review the Housing for Varying Needs Standard stating:

“The housing for varying needs standards is a bit old now—they are nearly 20 years old. I commit to reviewing those standards in the near future, so that we will continue to build and deliver housing that is fit for purpose not only for folk with special needs today, but also for tomorrow”. Meeting of the Scottish Parliament 27 March 2019.

### **3.1.2 United Nations Convention the rights of persons with disabilities**

In 2006 the UK signed the United Nations Convention- ‘the Rights of Persons with Disabilities’ and this formed the overarching policy.

Article 9 of the convention states

*“To enable persons with disabilities to live independently and participate fully in all aspects of life, States /Parties shall take appropriate measures to ensure to persons with disabilities, access on an equal basis with others.... These measures, which shall include the identification and elimination of obstacles and barriers to accessibility, shall apply to, inter alia: Buildings, roads, transportation and other indoor and outdoor facilities, including schools, housing.....”*

This article therefore commits signatories to eliminate the obstacles and barriers disabled peoples face when attempting to access housing.

Article 19 of the convention states:

*a) Persons with disabilities have the opportunity to choose their place of residence and where and with whom they live, on an equal basis with others and are not obliged to live in a particular living arrangement;*

*b) Persons with disabilities have access to a range of in-home, residential and other community support services, including personal assistance necessary to support living and inclusion in the community, and to prevent isolation or segregation from the community;*

This article commits the UK Government to ensure that a disabled person has the right to independent living and has a choice of where they live.

In Article 28 the convention states that disabled persons have the right to access public housing programmes and have the right to accessible, affordable and suitable housing.

### **3.1.3 A Fairer Scotland for Disabled People**

These commitments were fleshed out by the Scottish Government in ‘A Fairer Scotland for Disabled People’ in 2016. The plan documents a range of actions to reduce barriers and tackle inequalities encountered by disabled people. The plan has five overarching ambitions. Ambition 3 states that housing must be

“Fully accessible to enable disabled people to participate as full and equal citizens”.

The plan also commits the Scottish Government to work with councils to make sure that their housing plan and Strategic Housing Investment Programme (SHIP) includes wheelchair accessible housing.

The Fairer Scotland action plan required the Scottish Government to set timescales for housing and care providers to install housing adaptations for disabled residents.

### **3.1.4 Our Place, Our Space**

“Our place, our space” was the report published in 2017 following the Disabled People’s Housing Summit. It specified that 10% of all new homes should be built to wheelchair housing space standards distinguishing this from the requirement of all new homes to be built to inclusive design standards outlined in Lifetime Homes (Habinteg, 2010) or Housing for Varying Needs (1998).

### **3.1.5 “Guidance for setting of Local Housing Strategy target to support the Delivery of more wheelchair accessible housing”.**

The guidance, published in March 2019, required local authorities to set a “local wheelchair target” to support the delivery of more wheelchair accessible housing across all tenures. The Government specified that the target set by each local authority had to be evidence based and it should be a realistic and a meaningful target in the local context. Setting a wheelchair target ensured that a greater focus and commitment was placed on delivering wheelchair housing across all tenures.

Section 3 of the guidance states:

“Often terms such as Wheelchair Accessibility or Wheelchair Liveability are used to refer to properties that are suitable for wheelchair users to live in and to distinguish them from properties that may be accessible for wheelchair users to visit and / or capable of being adapted for wheelchair users.”

Wheelchair Accessible homes “should as a minimum comply with the design criteria indicated as a ‘basic’ requirement for wheelchair users, as outlined in Housing for Varying Needs (HfVN). Local authorities are strongly encouraged to include the design criteria indicated as ‘desirable’ wherever possible.

### **3.1.6 Adjustments to Common Parts Regulations**

This legislation was laid before Parliament on the 6<sup>th</sup> of December 2019 and came into force on 24th February 2020. The new regulations will improve equality for people living with disabilities by giving them the right to make communal areas around their home more accessible. Disabled people will be given the right to remove barriers to access by creating ramps, widening paths and installing handrails in common areas. Under current legislation, a disabled person is unable to make minor accessibility changes to shared areas unless all owners give their consent.

### 3.1.7 Other relevant national policies include:

- **“Homes Fit for the 21st Century”** to ensure housing met the needs of diverse communities including wheelchair users.
- **“Age, Home and Community”** recommended measures to support independent living for older people who often have mobility needs. It concluded that housing was a key requirement to realising this aspiration.
- **The Planning (Scotland) Act 2019**, which secured Royal Assent on the 25 July, and requires the planning system to place increasingly greater emphasis on addressing the needs of disabled people. National Planning Framework 4’s “key objective is to improve policy so that the housing needs of older and disabled people are better accounted for in the planning system”.
- **Launching the national “scheme of assistance”** which paid 8,655 grants to householders in 2018-19. The majority of these grants (5,458) were for disabled adaptations, worth £21.8 million in total.

The Scottish Government has sought to support the delivery of wheelchair accessible housing by committing to ensuring additional grant subsidy for specialist housing such as wheelchair accessible homes.

The Scottish Government has supported the Glasgow Centre for Inclusive Living to develop a national register of properties suitable for disabled people called Homes2Fit.

## 3.2 The local policy context

Argyll and Bute Council have developed an evidenced based wheelchair target in 2020:

“Our recommendation is that the SHIP target remains at 10% for all specialist provision and within this target half, i.e., 5% of all new builds, should be specifically for wheelchair housing as defined by Scottish Government i.e. built as a minimum to the relevant wheelchair section of the HfVN standards, and where possible built to the “desirable” standard set out in that section of the guidance.

Regarding private sector new builds, the Local Housing Strategy (LHS) should promote and encourage developers to deliver similar levels of wheelchair housing, i.e., 5%, (in schemes of more than a specified number of units – to be determined by planners in consultation with the Strategic Housing Forum and the Health & Social Care Partnership)”.

Argyll and Bute Council in partnership with RSLs have appointed a Housing Occupational Therapist with a key role in reviewing and identifying the specific housing needs of those on the HOMEArgyll waiting list. The Housing OT has regular meetings with Housing Officers to fast track those individuals who

have scored 200 due to their housing needs being acutely impacted by their health.

#### 4.0 Issues with wheelchair housing stock

There are a range of issues regarding wheelchair housing. These are:

- various national research has indicated that there is a shortage of wheelchair stock;
- only a small percentage of new builds are suitable for wheelchair users to live in.
- housing suitable for wheelchair users is not equally distributed across the housing market and there are large disparities between locations and tenures; and
- adapting the users' current home may improve access but will not necessarily meet all the wheelchair user's needs hence some wheelchair users have unmet housing needs.

Each of the above issues will be interrogated in the remainder of this paper.

#### 4.1 Accessible /barrier free homes verses wheelchair liveable homes

Housing for varying needs (HfVN) sets out design standards for mainstream housing to achieve "barrier free" design (Appendix 2). These standards, aims to ensure a home is flexible enough to meet the existing and changing needs of most households, including those with temporary or permanent physical disabilities, especially as the occupants age. Building Regulations have sought to bring "barrier free" standards to new housing in all tenures. As a result, more mainstream homes have these accessibility standards in fact the English Housing Survey, 2018/19 found that 66% of mainstream homes had one of the accessibility standards and 9% of mainstream homes in England met all four barrier free standards.

**Table 4.1: Percentage of non-specialist homes in England which have the following accessibility features in 2018.**

Feature	Percentage of homes
WC at entrance level	66%
Sufficiently wide doorways and circulation space	32%
Flush thresholds/ main entrance free of obstruction	27%
Level access	19%
Homes with all 4 features	9%

Source: Ministry of Housing Communities and Local Government – English Housing Survey 2018-19

However, according to the Papworth Trust, (an organisation that supports disabled people), the four accessibility features outlined below only meet the need of wheelchair users visiting a property rather than living in the home. A "barrier free" home, while offering choice for some people with disabilities, will not provide the ease of access required or the additional space required by wheelchair users.



Wheelchair liveable homes go beyond barrier free or accessible standards and will have:

- space in each room for a wheelchair to circulate;
- hallways wide enough to facilitate a wheelchair;
- doors wide enough to allow a wheelchair to pass through ensuring access to all rooms in the home;
- kitchen and bathrooms with appliances and controls within reach.

To meet the needs of wheelchair users these wheelchair standards are not confined to the interior of the home but requires wheelchair standards also to be in place in the exterior of the property. Such as:

- parking spaces wide enough for the wheelchair to pass;
- gradient suitable for wheelchair use
- step free access to the property.
- pavements need to have drop curbs
- street furniture must allow a wheelchair to manoeuvre.

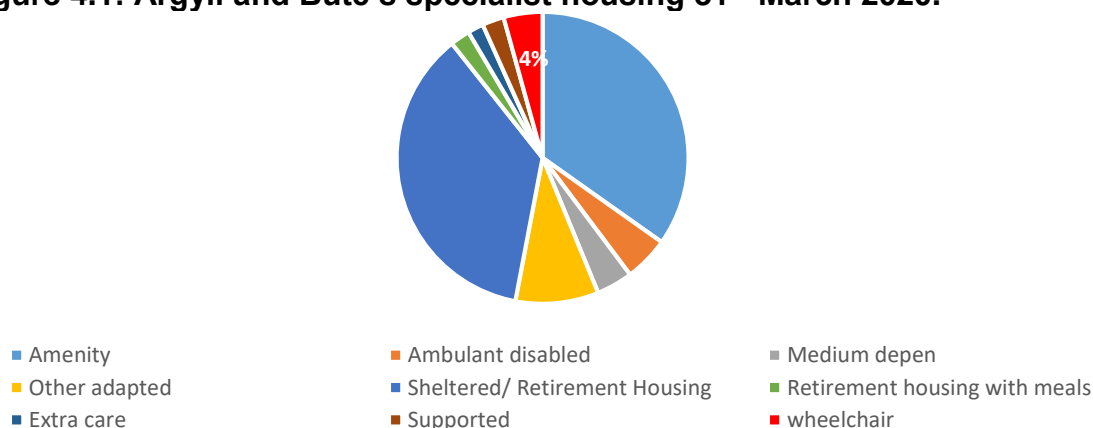
Therefore, properties designated as wheelchair housing meet this higher standard.

#### 4.2 Wheelchair housing stock

A report following the ‘Independent Living in Scotland’ conference, in 2017, stated that only 0.7% of Local Authority housing stock and 1.5% of housing managed by RSLs, in Scotland, are suitable for wheelchair users. A higher ratio of wheelchair properties are being provided through new build programmes. Notwithstanding the progress made Horizon Housing estimate that in the last 10 years only 1.07% of local authority and 3.4% of RSL new build completions meet wheelchair standards.

Only 4% of specialist stock, in Argyll and Bute, is designated as wheelchair liveable. In addition, according to the RSL annual returns only 1% of total stock in this authority is suitable for wheelchair users to live in, thus falling below the council’s target of 5 percent.

**Figure 4.1: Argyll and Bute’s specialist housing 31<sup>st</sup> March 2020.**

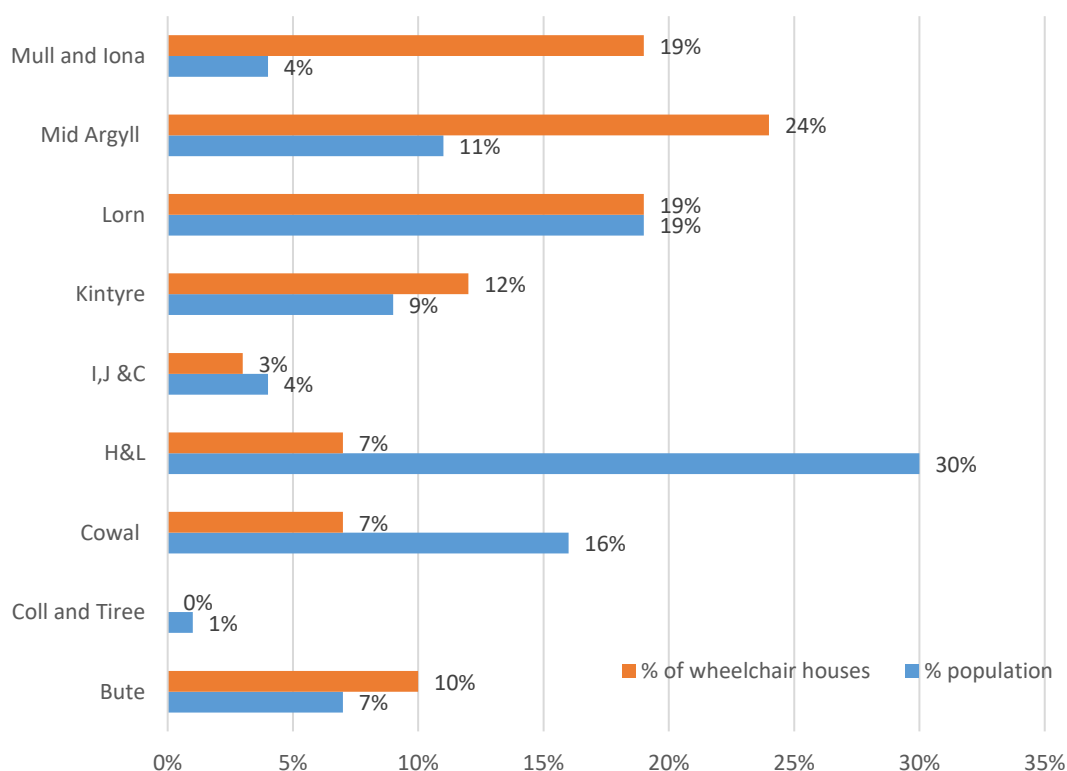


Source: RSL Annual Statistical Return, 2020.

#### 4.1 Distribution of wheelchair housing within Argyll and Bute

Argyll and Bute’s population is not evenly distributed across the council’s HMAs and hence it is unsurprising that the authority’s wheelchair housing would also be unevenly distributed, to match the population, share of each area. However, except for Lorn where the HMA has 19% of the Local Authority’s population and the same percentage of Argyll and Bute’s wheelchair houses it is not the case that population and wheelchair housing provision matches up. The most marked mismatch is in Mid Argyll which only has 11% of the council’s population but has almost a quarter of the council’s wheelchair housing. Helensburgh and Lomond has the reverse situation, having 30% of the Argyll and Bute population but only 7% of the council’s wheelchair houses. Therefore, it is likely that some areas will experience higher rates of unmet housing need than others.

**Figure 4.2: Distribution of wheelchair housing compared to distribution of population by percentage (Argyll and Bute 2020).**



**Source:** Annual Statistical RSL Return, 2020 and IS small area population projections, July 2020

#### 4.2 Wheelchair housing as a proportion of new build housing

According to the Scottish Government’s ‘Affordable housing supply programme out-turn report’ there were 9286 new build houses, in Scotland, funded by the ‘Affordable Housing Supply Programme’ (AHSP) in 2019-2020. Of these affordable homes 339 were wheelchair houses. This equates to 4% of new build housing, funded by AHSP, being wheelchair standard. This is in line with Argyll and Bute’s wheelchair housing target of 5%. Although the percentage of

wheelchair homes funded by AHSP has increased from 1.7% in 2017/18 to 3.7% in 2019/20, this is considerably lower than the 10% suggested by the Scottish Government.

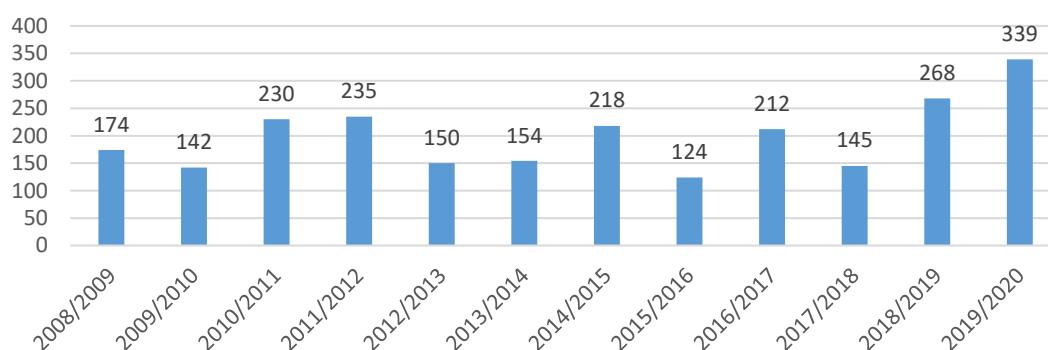
**Table 4.2: Number of AHSP funded wheelchair completions in Scotland and percentage of the total completions 2016-2020**

Year	Wheelchair Total	Total Completions	% Wheelchair
2019/2020	339	9286	3.65%
2018/2019	268	9554	2.81%
2017/2018	145	8534	1.70%
2016/2017	212	7336	2.89%

Source: Affordable Housing Supply Programme Out-turn Reports 2016-2020

Hence, the number of wheelchair housing units funded by the AHSP programme reached a record high of 339 in Scotland in 2019/20. This increase has not been a consistent rise year on year but rather the numbers have fluctuated. The lowest number of wheelchair houses provided by the programme was in 2015/16 when only 124 wheelchair homes were completed through AHSP.

**Figure 4.3: Wheelchair Housing units completed in Scotland through AHSP 2009-2020**



Source: Affordable Housing Supply Programme Out-turn Reports 2016-2020

#### 4.2.1 New build wheelchair housing by tenure

The vast majority (96%) of new build wheelchair housing provided through the AHSP is for social rent, equating to 325 wheelchair units in Scotland in 2019/20. There were also 6 units funded in the same year by the AHSP for affordable home ownership.

**Table 4.3: Number of wheelchair housing funded by AHSP 2019-2020**

	Social Rent	Other Affordable rent	Affordable home ownership
Number of total completions Scotland 2019-20	6952	967	1367
Number of wheelchair Completions Scotland 2019-20	325	8	6
% of wheelchair housing by tenure	96%	2%	2%

Source: Affordable Housing Supply Programme Out-turn Report 2019-2020

### 4.3 Turnover of wheelchair houses within the social rented sector in Argyll and Bute

In 2019/20 HOMEArgyll landlords allocated 849 homes, of which around 7.4% (63) were specialist housing units. However, over the last 4 years only 24 wheelchair lets were provided by HOMEArgyll, and only 5 wheelchair homes were lets between April 2018 and March 2020. At this level of turnover, even a small waiting list of disabled people waiting for a wheelchair home could take years to clear backlog need. Therefore, wheelchair users can be subjects to long term unmet housing need. Wheelchair users potentially having to wait for a considerable time to be housed is not unique to Argyll and Bute but rather is an all too common national position. ‘The housing experiences of disabled people in Britain’<sup>2</sup> report 2018, by the Equalities and Human Rights Commission (EHRC), stated that one lady was told she would have to wait 10 years for a wheelchair accessible property in her area.

**Table 4.4: HOMEArgyll lets by property type 2016-2020**

HOMEArgyll Lets by Property Type, 2016/17 - 2019/20					
House Type	2016/17	2017/18	2018/19	2019/20	4 Year Totals
All Types	1,019	884	928	849	3,680
Amenity for Elderly	32	30	30	37	129
Housing with Support	3	3	2	2	10
Sheltered Housing	32	38	43	22	135
Wheelchair	14	5	3	2	24
General Needs	919	806	847	786	3,358
Gypsy/Traveller Site	4	2	2	0	8
Other (General Needs)	15	0	1	0	16

Source: Annual Statistical RSL Return, 2020.

### 4.4 Adaptations

According to an Ipsos MORI national poll, 50% of people requiring specialist provision said they would most favour staying in their current home with some adaptations to allow them to live independently rather than moving. In addition, local intelligence from HNDA Household Surveys and RSL waiting list analysis suggests this preference also holds true in Argyll & Bute. Low levels of stock and little turnover coupled with half of wheelchair users wishing to stay in their current home results in wheelchair users seeking adaptations.

Housing for Varying Needs report echoes this view and states “although one-fifth of the population has traditionally been regarded as having 'special needs', in practice comparatively few require purpose built accommodation, the majority being able to live in 'ordinary' housing which tends to be their preference”.

<sup>2</sup> Equality and Human Rights Commission Research Report 114 ‘The housing experiences of disabled people in Britain’ March 2018.

#### **4.4.1 Adaptations and equipment**

According to research undertaken by the Housing and Communities Department, in 2018, the number of wheelchair users living in adapted homes rose from 383,000 to 465,000. Thus in 2018, 57% of wheelchair users lived in an adapted property.

To convert a mainstream home to a barrier free or accessible home often requires the following adaptations or equipment:

- Access
  - door widening;
  - level access/ramps/removing a door threshold;
  - external wheelchair lift; or
  - provision of a new room if access is not possible.
- Moving around and between floors:
  - stair lift or through-floor wheelchair lift;
  - ensuring sufficient turning-circle for a wheelchair;
  - flush thresholds inside the home;
  - hoists
- Adapted bathrooms:
  - raised toilets,
  - space in bathroom for wheelchair to manoeuvre
  - wet-room or wheelchair accessible shower and wash basin
- Adapted kitchens:
  - wheelchair accessible kitchen facilities
- Adapted heating or lighting controls

It is also important to ensure that there is space to store a wheelchair which is only used outside of the home. However, only around two thirds of wheelchair users in 2018 had a home which had space to store their wheelchair.

In England in 2018, 2.3 million homes had at least one adaption for a person with a disability. To put this research into context locally the English proportions for each adaption types have been applied to current population figures for Argyll Bute. However, it is acknowledged that the results are purely indicative estimates and the picture in reality could be different. Using this methodology around 3100 homes in Argyll and Bute would have an adapted bathroom and 1100 an adapted kitchen.

#### **4.4.2 Homes in Argyll and Bute which are not suitable for adaption**

However, some homes cannot be adapted to meet the wheelchair user's needs. To get a glimpse of the local picture in Argyll and Bute a questionnaire was sent to all wheelchair users on the HOMEArgyll waiting list in March 2020. Responses were also obtained from a range of consultation events about wheelchair housing held in Argyll and Bute in February and March 2020. The findings from this small sample highlighted that the majority of wheelchair users (57%) considered that their current home was not suitable for the adaptations they required to meet their needs. This is ten times higher than a larger national study. Local intelligence and professional knowledge

across Housing, Health & Social Care sectors in Argyll & Bute, all tend to support this finding.

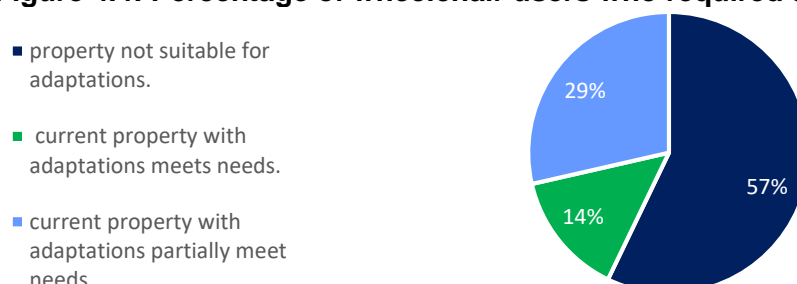
At the time of the survey all the wheelchair users had unmet housing needs and 86% would require to move home to ensure their needs were fully met.

**Table 4.5: Adaptations by type in England and Argyll and Bute in 2018**

Type of adaption	Number English homes adapted	% of English Households	Extrapolated figures for Argyll and Bute
Adapted bathrooms	1,700,000	7%	3118
Adapted kitchens	634,000	3%	1163
Grab rails	1,800,000	8%	3302
Electrical modifications e.g. bed and chair riser	410,000	2%	752
Hoists	108,000	0%	198
Stair lifts	505,000	2%	926
Ramps	413,000	2%	758

Source: Ministry of Housing Communities and Local Government – English Housing Survey 2018-19

**Figure 4.4: Percentage of wheelchair users who required adaptations 2020.**



Source: Questionnaire of wheelchair users on the HOMEArgyll waiting list 2020.

#### 4.4.3 All adaptations in Argyll and Bute

According to RSL Scottish Government returns around 3% (237) units received some form of adaption in 2019/20. Despite this as according to the Scottish House Condition Survey (SHCS) published in 2018<sup>3</sup>, 2% of households equating to around 1,000 households in Argyll and Bute consider that an adaptation is required.

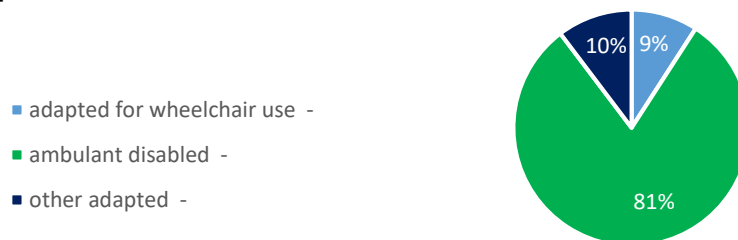
The reasons for adapting the homes of older people are more wide ranging as many older people may have an adaption to fit an alarm, or have a wet room installed to reduce the risk of falls. The Scottish Government data in 2019 demonstrates that wheelchair adaptations make up a smaller proportion of adaptations (4%) of all adaptations for older people. In comparison disabled

<sup>3</sup> SHCS reports published in 2019 and 2020 did not have data published on the amount of people requiring adaptations in Argyll and Bute.

people were twice (9%) as likely as older people to require an adaption to enable wheelchair use.

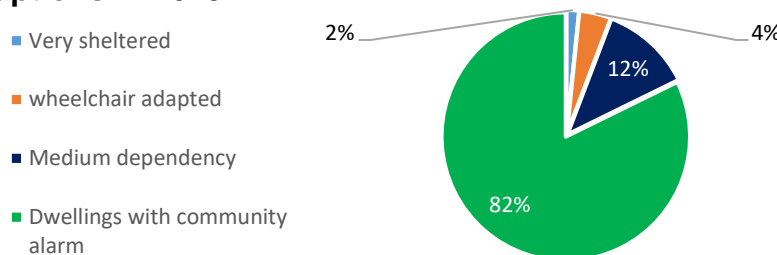
Most years the number of adaptations to enable disabled people to use a wheelchair in their home equated to between 60 and 70 adaptations per year. However, the number of adaptations rose sharply in 2003 to 345 and remained elevated until it fell sharply in 2007. The reason for substantially higher numbers of adaptations between 2003-2006 is not clear but it could be linked to the new requirements for disabled children resulting from the implementation of the Children Act 2000 as well as the adoption of the Community Care (Delayed Discharges) Act 2003.

**Figure 4.5: Disabled people living in socially rented property who had adaptations in 2019.**



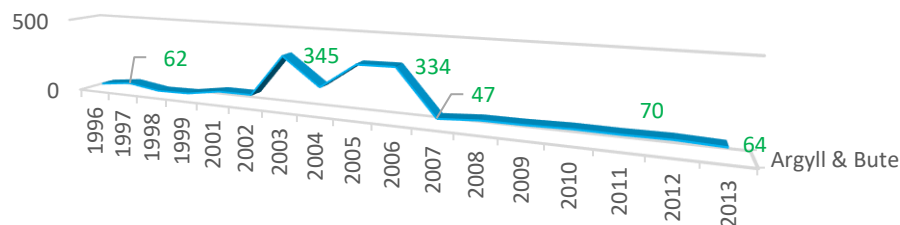
Source: S1B returns submitted by local authorities to the Scottish Government 2019

**Figure 4.6 Older people living in socially rented property who had adaptations in 2019.**



Source: S1B returns submitted by local authorities to the Scottish Government 2019

**Figure 4.7: People with physical disabilities who required their home adapted for wheelchair use 2003-2013<sup>4</sup>**



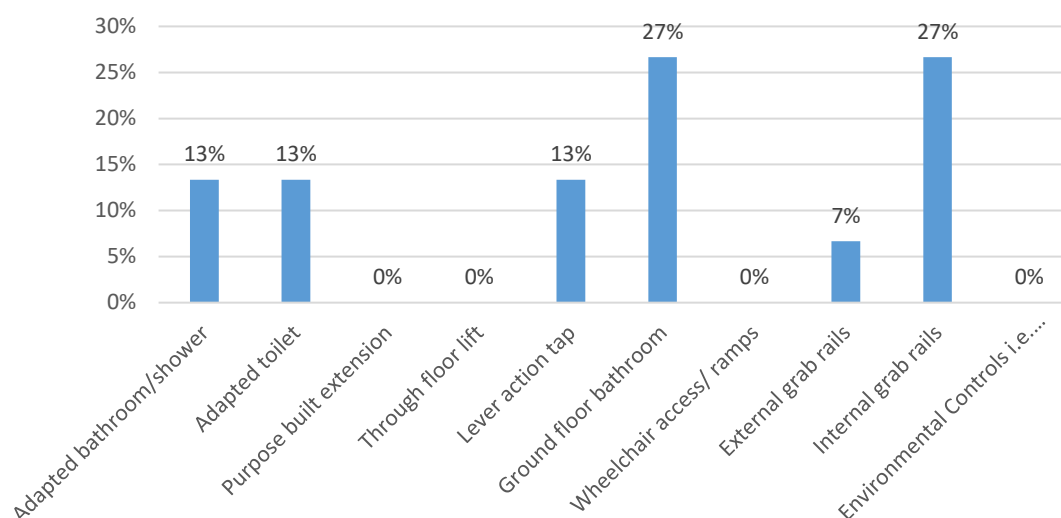
Source: S1B returns submitted by local authorities to the Scottish Government

<sup>4</sup> Data is not available at Local Authority Level after 2013

#### 4.4.4 Types of adaptations wheelchair users in Argyll and Bute have had implemented.

The Argyll and Bute Wheelchair Users' survey in 2020 found that all respondents had already had at least one adaptation to their property. The most prevalent adaptations were the creation of a ground floor bathroom with 27% of respondents having this adaptation, while 13% had adapted bathrooms. This is in line with the adaptation pattern, of the larger dataset, outlined in table 4.5.

**Figure 4.8: Type of adaptations wheelchair users in Argyll and Bute have had implemented in their home.**



Source: Questionnaire of wheelchair users on the HOMEArgyll waiting list 2020

#### 5.0 Prevalence of disability/ long-term limiting condition

A Scottish Government publication called 'Scotland's Wellbeing - Measuring the National Outcomes for Disabled People' published in July 2019 stated:

*"In Scotland, disability is often measured in large-scale surveys using a two-part definition. The first part asks participants if they have a long-term illness or health condition that is expected to last more than 12 months. Second, participants are asked whether this condition limits their day-to-day activity, either by 'a lot' or 'a little'. In 2017, the Scottish Health Survey (SHeS) estimated that 45% of adults (and 17% of children) had a long-term condition or illness, and that 32% of adults (and 10% of children) had long-term conditions that were also limiting. In this context, 32% of the adult population would be considered 'disabled', while 68% would be considered 'not disabled'".*

Based on these findings 32% of Scotland's adult population have a disability i.e., 1:3.

This rate is higher than other surveys which place the ratio of people with a limiting long-term condition to be 1:4 or 1:5. The 2011 Census places the prevalence in the lower end of the scale with only 20% of people living in Scotland had a long-term limiting condition. Similarly, 'A fairer Scotland for disabled people' published in 2016, claimed that there were over a million disabled people in Scotland equating to around 1:5.



As these research findings are a bit dated, they were compared to the more recent Family Resources Survey carried out in 2018/19 (by the Department of Work and Pensions (DWP)). This study found that there were 14.1 Million people (21%) in the UK with a disability. This UK wide figure is in line with the Scottish statistics published in the ‘Disability facts and figures report’ in 2018 by the Papworth Trust, which stated that 22% of the Scottish population were disabled. Therefore, all studies conclude that around 1:5 or 1:4.5 people in Scotland are disabled. The reason why these incidence rates are lower than the 1:3 prevalence recorded by the 2019 Scottish Government publication is that the later has cited a prevalence rate for adults and not the population as a whole. This is discussed in detail later in the paper.

**Table 5.1: Percentage of disabled people by area 2018**

Administrative Area	Percentage of disabled people
Wales	26%
Scotland	22%
Northern Ireland	21%
North East and the North West	25%
Yorkshire and Humber	20%
South East	19%
London	14%
East of England	20%

Source: Papworth-trust-disability-facts-and-figures-2018

### 5.0.1 Disability and Limiting long- term conditions in Argyll and Bute.

The local picture is outlined most completely by the 2011 Census which reported that 7,842 people in Argyll and Bute had a condition that limits their day-to-day activity “a lot” and a further 9,954 are living with conditions which limit their day-to-day activities “a little”. More recent research such as the 2017 ‘Scottish Housing Condition Survey’ (SHCS), concluded that those living with a long-term condition in Argyll and Bute is akin to the national picture with 26% in Argyll and Bute and 28% in Scotland in 2017 living with a long-term condition.

**Table 5.2: Percentage of people with a long-term condition in Scotland and Argyll and Bute 2017**

Long term condition	Argyll and Bute	Scotland
With Long term condition	26%	28%
With no long-term condition	74%	72%

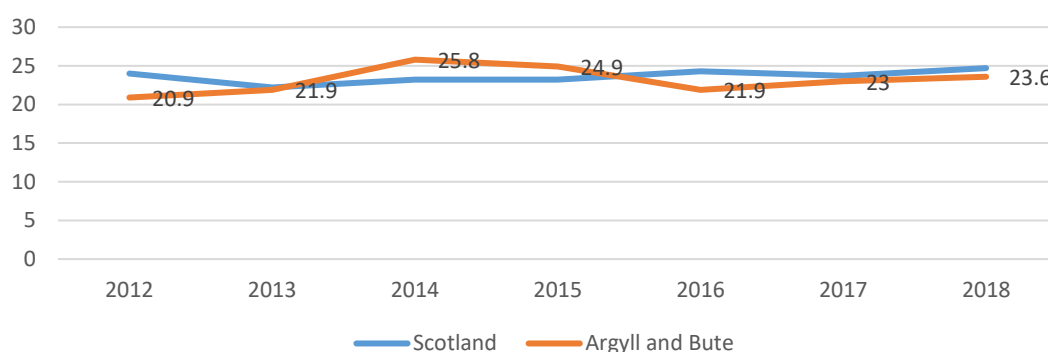
Source: Scottish Housing Condition Survey 2018.

The prevalence for Scotland reported by the SHCS 2018 is higher than the Papworth Trust and other studies in mentioned above. The incidence that the SHCS reports for Argyll and Bute is also higher that the incidence reported for Argyll and Bute by the ‘Scottish Core questions disability data cube’. The later study reported the incidence of 23.6% of people in Argyll and Bute with a limiting long-term condition in 2018.

The data cube survey plots the incidence of limiting long term conditions over time. In general, over the decade Argyll and Bute has similar rates of people with limiting long term conditions as Scotland as a whole. At both the beginning and the end of the last decade the proportion of Argyll and Bute's population who are living with a limiting long-term condition is lower than the national average. However, from 2013-2015 Argyll and Bute had a higher prevalence than the country as a whole.

Over the decade the proportion of Argyll and Bute's population who had a limiting long-term condition varied with 2016 witnessing the lowest share of the council's population living with a long-term condition (20.9%) but this rate had increased to 23.6% in 2018, equating to an incidence of between 1:5 and 1:4.5 people in Argyll and Bute had a limiting long-term condition between 2012-2018.

**Figure 5.1: Prevalence of the Argyll and Bute population compared to the Scottish population who have a limiting long-term condition 2012-2018.**

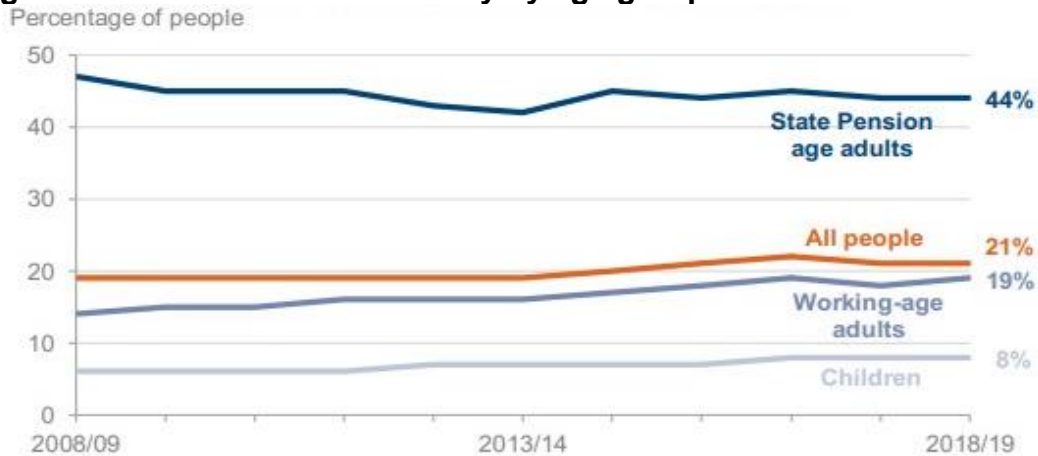


Source: Scottish Core questions: disability data cube

In 2019 the Argyll and Bute HNDA Household Survey found that a quarter of respondents 25% said that someone in their household has a long-term illness, health condition or disability which limits their daily activities or the work they can do which is higher than the data cube survey but is in line with the findings of the SHCS 2017 equating to a prevalence of 1:4 people with a limiting long-term condition.

The 2018/19 UK wide Family Resources Survey indicates that between 2008-2019 there has been an increase in the portion of people of working age who are disabled, from 14% to 19%. However, one possible reason for this apparent swelling of numbers of working aged people with limiting long term conditions is that during that time frame the retirement age for women has increased. The 1995 Pensions Act to increase the female state pension age from 60 to 65 years old and the changes were phased in between 2010 and 2020. This theory is further strengthened when the percentage of retired people with a disability had fallen 3% from 47% to 44%

**Figure 5.2: Prevalence of disability by age group 2008-2019 in UK.**



Source: UK Government -Family Resources Survey 2018/19

### 5.0 Disability by age

It can be concluded from the previous section that disability prevalence varies from 1:5 to 1:3 depending on in part whether disability prevalence is being cited for adults of the entire population. The age group selected has a huge impact on the ratio. The reasons for this are laid out by the Argyll and Bute Health and Social Care partnership’s “Joint Strategic Needs Assessment” published in 2019:

- Disability prevalence increases with age.
- Disability is more likely to affect adults over the State Pension age as nearly 80% of adults aged 85 or more are disabled.
- Fewer than 20% were born with disability.

These statements highlight that there is an important relationship between age and disability. This view is echoed in the ‘Making the Connections user guide to specialist housing’ published by the Joint Improvement Team which state that disability prevalence rates vary dramatically by age. This is demonstrated by only 4% of children aged 0-4 years will have a disability which is in stark contrast to people who are over 80 years old where 59% have a disability.

Table 5.3: Disability prevalence for UK by age and gender in the UK in 2012-2013<sup>5</sup>

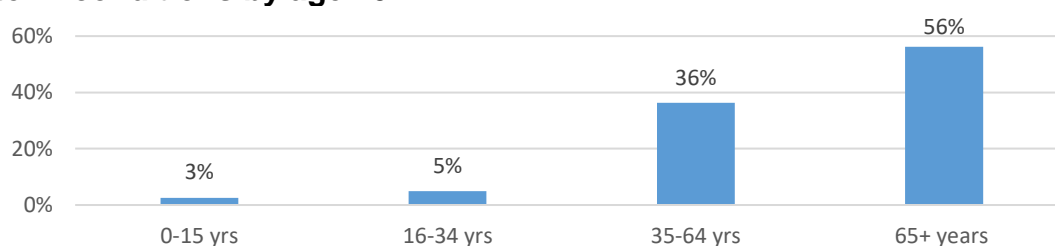
Age	Gender				All persons	
	Disabled male individuals (%)	Sample size (=100%)	Disabled female individuals (%)	Sample size (=100%)	All disabled individuals (%)	Sample size (=100%)
0-4	5	1,645	3	1,578	4	3,223
5-9	9	1,626	6	1,534	7	3,160
10-14	12	1,514	7	1,421	9	2,935
15-19	8	1,348	8	1,283	8	2,631
20-24	8	1,039	9	1,158	8	2,197
25-29	10	1,154	11	1,422	10	2,576
30-34	10	1,291	12	1,629	11	2,920
35-39	12	1,306	12	1,552	12	2,858
40-44	16	1,607	19	1,762	18	3,369
45-49	16	1,551	20	1,666	18	3,217
50-54	20	1,456	25	1,527	22	2,983
55-59	25	1,371	31	1,496	28	2,867
60-64	30	1,359	32	1,482	31	2,841
65-69	30	1,372	34	1,517	32	2,889
70-74	40	995	42	1,088	41	2,083
75-79	45	806	50	937	48	1,743
80+	56	887	61	1,092	59	1,979
All	18	22,327	21	24,144	19	46,471

Source: Making the connection user guide to specialist housing, 2015, JIT

### 5.1.1 Disability by age in Argyll and Bute

Argyll and Bute portrayed a similar picture to that shown nationally in 2011, with more than half (56%) of disabled people being over 65 years old. Hence, verifying that disability increases with age.

Figure 5.3: Percentage of those in Argyll and Bute with limiting long term conditions by age 2011.



Source: Census 2011

<sup>5</sup> The method of determining the prevalence of disability changed in 2012-2013 and so prevalence rates were not produced in this way after 2013.

Although the overall national trends were apparent in Argyll and Bute there was a lower incidence of disability in the authority, in 2011 than ‘Making a connection’ reported for Scotland as a whole in 2015. In Argyll and Bute in 2011 only 3% of under 15-year-olds and 5% of 16–34-year-olds had a limiting long-term condition.

The Census was some time ago and when more recent surveys are analysed it appears that there has been a significant increase in 16–34-year-olds who have a limiting long-term condition. According to the Scottish Core questions data, this rose from 5% in the 2011 Census to 17% in 2018. This pattern is reversed when 35–64-year-olds are analysed with 36% having a limiting long-term condition in 2011 and only 16.3% reporting a limiting long-term condition in 2018. The reasons for this large variation in rate are unclear. One possible explanation is that in 2011 the younger age bands had low levels of disability and obviously people have aged so many will have moved into a higher age band. In addition, an increase in the number of younger people with disabilities maybe due to older women having children, combined with medical advances and better medical treatments have increased survival rates of some babies and young children with limiting long term conditions.

**Table 5.4 Percentage of a particular age group in Argyll & Bute and Scotland with limiting condition which impact on day-to-day living (2018).**

	16-34yrs		35-64 yrs.		Over 65 yrs.	
	Limiting condition	No limiting condition	Limiting condition	No limiting condition	Limiting condition	No limiting condition
Scotland	13.7	86.3	23.4	76.6	41.5	58.5
Argyll and Bute	16.9	83.1	16.3	83.7	40.1	59.9

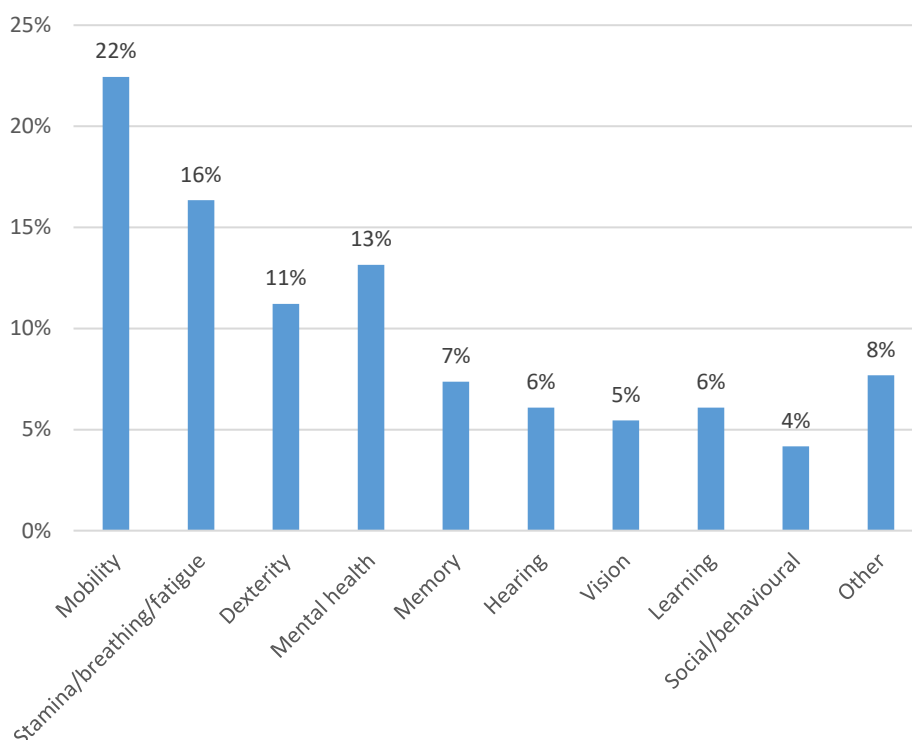
Source: Scottish Core questions: disability data cube 2018

Argyll and Bute’s prevalence of the over 65-year-olds living with a limiting long-term condition is akin to the national average with 40.1% and 41.5% respectively. These findings are in line with Argyll and Bute’s HNDA Household Survey, 2019, which found 38% households with people aged 75 years and over had an occupant with an illness or health issue. Although all the above surveys have a lower incidence than was reported in the 2011 Census.

## 5.2 Disability by condition

Disability is not a homogeneous category as not all disabilities have the same impact on an individual’s ability to access housing, employment and other services. Nor are all types of disabilities experienced equally in the population with some being more prevalent than others. In addition, some disabilities disproportionately affect particular age groups. Between 2017/18 the most prevalent disability in the UK was mobility impairment with 6.5 million people afflicted by this condition this impairment continued to be the most common impairment in 2019/20.

**Table 5.4: Disability by type in Scotland 2019-2020**



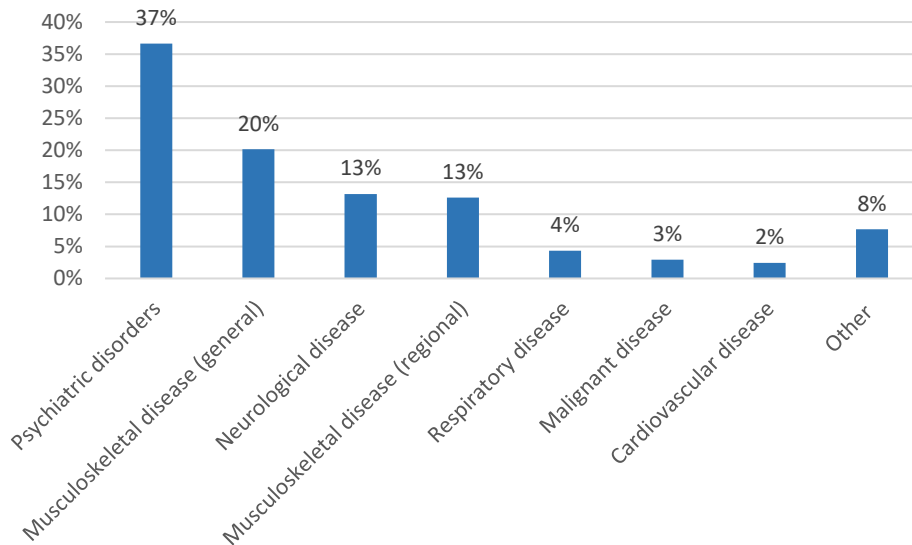
Source: Family Resources Survey: financial year 2019-2020 <sup>6</sup>

Most of the surveys rely on people self-reporting whether they have a limiting long-term condition and knowing what category their condition falls into, however, to obtain Personal Independence Payment (PIP) an independent assessment is carried out. According to PIP (January 2021) the most prevalent type of impairment receiving PIP is psychiatric disorders (37%). This appears higher than the FRS, but it encompasses more than one of the categories used by the Family Resources Survey. In addition, PIP can only be applied for if the claimant is under 65 years of age although if someone is receiving PIP, they may continue to receive PIP payments beyond retirement age. Therefore, the PIP data does not provide a full picture for those over 65 years old. The second most prevalent condition receiving PIP is musculoskeletal conditions (33%). A proportion of people with musculoskeletal conditions will have mobility issues.

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<sup>6</sup> [Family Resources Survey: financial year 2019 to 2020 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/statistics/family-resources-survey-2019-2020)

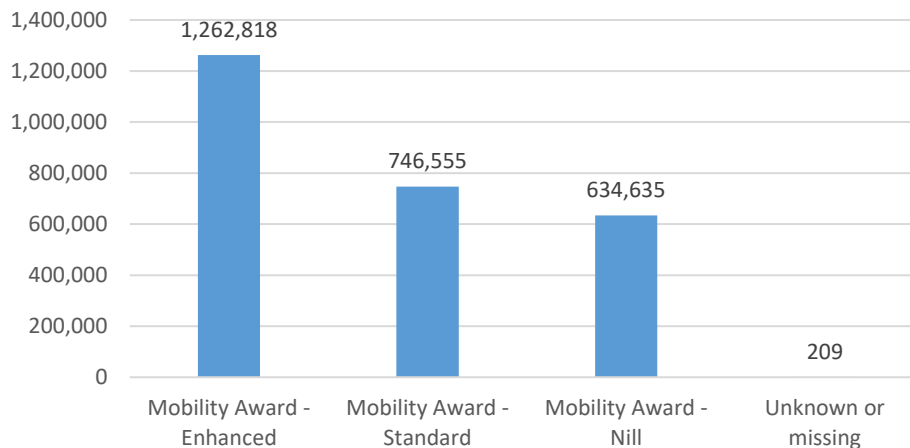
**Figure 5.5: PIP cases load in UK in January 2021 by condition**



Source: PIP caseload January 2021 DWP<sup>7</sup>

There are 1,262,818 people in the UK receiving the enhanced mobility award through PIP. To obtain this payment a recipient must be unable to walk more than 20 meters. Forty eight percent of the PIP caseload received this pay the vast majority of these people will either require a wheelchair or mobility device when they are travelling outside of their home and some will need to use this type of equipment inside their home.

**Figure 5.6: Number of PIP recipients in UK in January 2021 by mobility status**



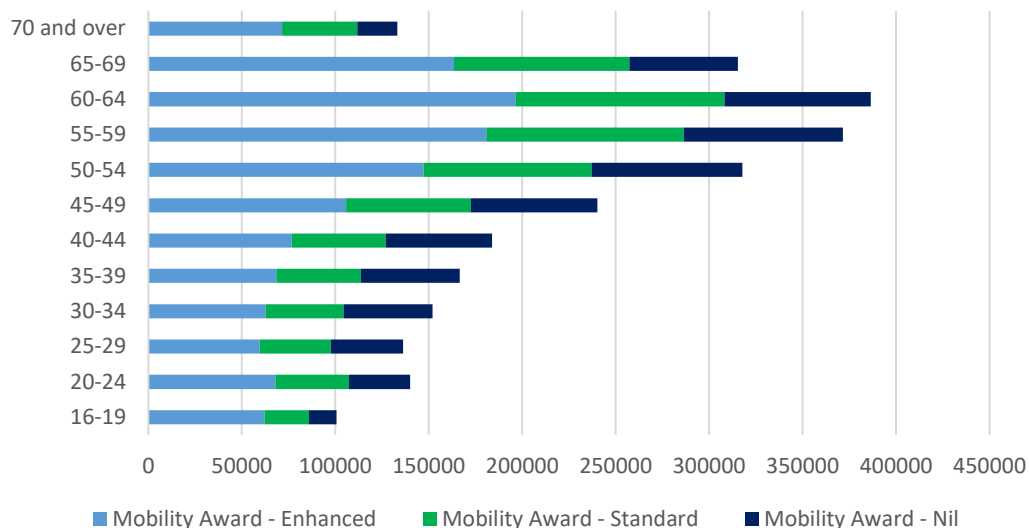
Source: PIP caseload January 2021 DWP<sup>8</sup>

<sup>7</sup> <https://stat-xplore.dwp.gov.uk/webapi/jsf/login.xhtml>

<sup>8</sup> <https://stat-xplore.dwp.gov.uk/webapi/jsf/login.xhtml>

The mobility status of PIP recipients varies by age with 60- to 64-year-olds being the group receiving the highest leave of enhanced and standard mobility payments. As outlined above the PIP is not available for a large proportion of over 65 years old.

**Figure 5.7: PIP recipients in UK in January 2021 varied by mobility and age.**



Source: PIP caseload January 2021 DWP<sup>9</sup>

The ‘Disabled people and labour market in Scotland’ study carried out by the Scottish Government in 2018 categorises disabilities differently from the categories used in the previous examples. In Scotland, in 2018 there were 71,000 people with long term back and neck conditions and 65,000 people had disabilities relating to the legs and feet. Some people in both these categories will be wheelchair users.

**Table 5.5: Number of people in Scotland with particular disabilities in relation to work in 2018.**

	Total number of people (000s)	In work (000s)	Out of work (000s)	% Out of Work
Back or neck	71	39	32	54.6%
Legs or feet	65	35	30	54.1%

Source: Scottish Government -Disabled people and labour market in Scotland 2018 <sup>10</sup>

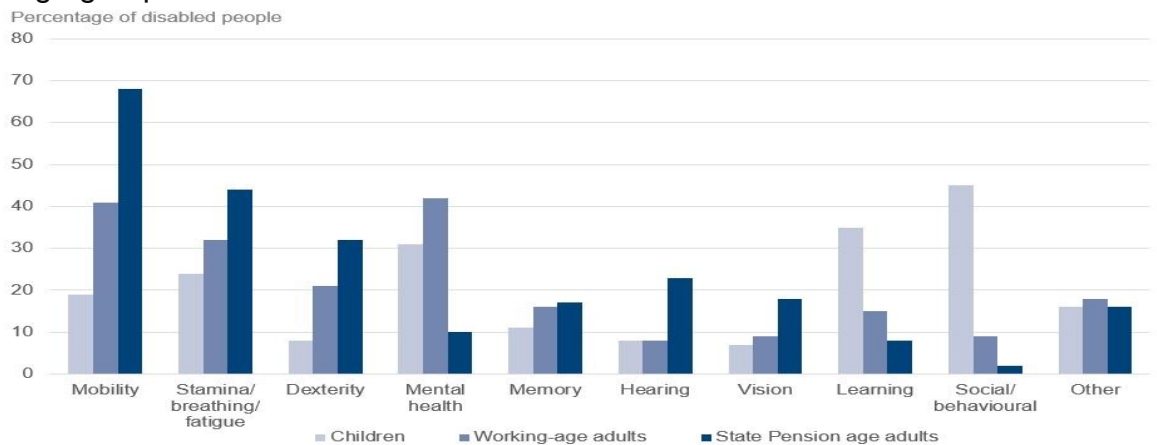
<sup>9</sup> <https://stat-xplore.dwp.gov.uk/webapi/jsf/login.xhtml>

<sup>10</sup> The Papworth Trust 2016 [Disability+Infographic+16-64+Final+Version+-+PDF.pdf \(www.gov.scot\)](http://www.gov.scot/Disability+Infographic+16-64+Final+Version+-+PDF.pdf)



The Papworth Trust found that 7% of children were disabled and the Family Resources Survey 2019-2020 found that social or behavioural impairments were the most common category, applying to 45% of disabled children. Learning impairment was the second most prevalent impairment for children, with 35%. Mobility disabilities were cited as an impairment for almost 1 in 5 disabled children (19%). Stamina, breathing and fatigue disabilities were experienced by almost 1 in 4 children with disabilities (24%). Some of the children in these categories may require a wheelchair.

Figure 5.8: Impairments reported by disabled people in the UK in 2020 varied by age group.



Source: Family Resources Survey: financial year 2019-2020 <sup>11</sup>

### 5.2.1 The fastest rising impairments

It is not only important to identify the most prevalent disabilities but also to identify the fastest growing impairments. The number of people suffering from a mobility impairment rose by 7% between 2017-2020. Despite the increase in mobility cases these are not the fastest growing impairments as mental health impairments rose by 17% in 2017-2020. In addition, memory and behavioural impairments have also growing faster than mobility impairments.

### 5.2.2 Argyll and Bute disability by condition

The HNDA survey also found that the most prevalent disability or long-term condition in Argyll and Bute was mobility and physical health problems with 15% of the population in the authority having such a condition. People with mobility issues could require a wheelchair however according to the Housing OT even if a wheelchair is not required the housing needs of those who use a walking frame are similar to wheelchair space standards. As these users who require wide doors and large turning spaces.

The majority of those with mobility and physical health needs are over 75 years old (37%). For the 65–74-year-olds, in Argyll and Bute, 20% of them had mobility issues or physical health problems. Whereas only 5% of 18–34-year-olds had mobility or physical health needs, and 6% of working aged

<sup>11</sup> [Family Resources Survey: financial year 2019 to 2020 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/statistics/family-resources-survey-2019-2020)

people 35 years old and over had a mobility need. Therefore, although a higher percentage of retired aged people have mobility issues there are around 5% of working aged people who have mobility needs.

**Table 5.6: Number of disabled people in UK 2017-2020 by impairment type.**

Impairment type	Millions of disabled people by Year			% increase
	2017/18	2018/19	2019/20	2017-2020
Mobility	6.5	6.8	7.0	7%
Stamina/breathing/fatigue	4.9	5.1	5.1	4%
Dexterity	3.5	3.7	3.5	0%
Mental health	3.4	3.8	4.1	17%
Memory	2.1	2.3	2.3	9%
Hearing	1.8	1.8	1.9	5%
Vision	1.6	1.7	1.7	6%
Learning	1.8	1.9	1.9	5%
Social/behavioural	1.2	1.3	1.3	8%
Other	2.3	2.6	2.4	4%

Source: Family Resources Survey: financial year 2019-2020 <sup>12</sup>

**Table 5.7: Prevalence of conditions in Argyll and Bute 2019<sup>13</sup>.**

	Percentage of respondents
No long-term condition	71.3%
Do not know or refused to answer	2.8%
<b>Type of impairment/s that respondents reported</b>	
Mobility/Physical health problem	14.8%
Being frail due to age	4.7%
Chronic disease (such as Cancer, HIV, Diabetes, Heart Disease or Epilepsy)	3.5%
Difficulty hearing	3.3%
Mental ill health	2.5%
Difficulties with sight	1.6%
Learning difficulties	1.1%
Dementia	1.0%
Developmental disorder	0.5%
Drug and Alcohol dependency	0.0%
Other	0.4%

Source: Argyll and Bute HNDA Household Survey, 2019.

<sup>12</sup> [Family Resources Survey: financial year 2019 to 2020 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/statistics/family-resources-survey-financial-year-2019-to-2020)

<sup>13</sup> Table 12 shows 71% of the respondents reported that they did not suffer from a long-term condition and 3% did not know or refused to answer the question. The remaining 26% of respondents did have one or more long term conditions. Some of these respondents have identified more than one long term condition and hence the total percentage of people specifying a condition equates to 33.4%

**Table 5.8: Percentage of people in Argyll and Bute varied by age who have one or more long term condition.**

Type of impairment/s that respondents reported	18-24	25-34	35-54	55-64	65-74	75+
Mental ill health	6.3%	2.4%	4.0%	3.3%	1.1%	0.2%
Mobility/Physical health problem	3.6%	1.4%	5.9%	12.9%	19.9%	36.9%
Learning difficulties		1.4%	2.3%	0.8%	0.3%	0.4%
Developmental disorder		0.3%	1.1%	0.3%	0.1%	0.5%
Difficulties with sight			0.8%	0.2%	2.4%	5.5%
Difficulty hearing			0.8%	1.0%	6.2%	8.9%
Dementia			0.7%	0.5%	1.0%	3.0%
Being frail due to age			0.7%	1.7%	4.5%	21.1%
Drug and Alcohol dependency					0.1%	
Chronic disease (such as Cancer, HIV, Diabetes, Heart Disease or Epilepsy)		0.3%	0.9%	1.9%	7.3%	6.9%
Other		0.1%	0.1%	0.3%	0.6%	1.1%

Source: Argyll and Bute HNDA Household Survey 2019

### 5.2.3 Disabilities by condition by HMA

The Argyll and Bute Survey (2019) highlights that mobility issues do not impact people equally across the local authority. HMAs in island communities have higher than average numbers of people with mobility and physical health problems. In Coll and Tiree 19.5% had mobility issues while 23.8% had these issues in Islay, Jura and Colonsay, and 23% in Mull and Iona. Conversely, the only island which had lower than average respondents claiming that they had mobility and physical health problems was Bute with only 12.6% of respondents making this claim. The only mainland area with above average number of respondents claiming to have mobility and physical health problems was Cowal with 20.8%. Areas such as Lorn only had 7.7% of respondents stating they had mobility or physical health conditions.

### 5.3 Disabled people by housing tenure

Various research asserts that disabled people are less likely to be homeowners than non-disabled people. The Annual Population Survey verifies the assertion that disabled people are less likely to be homeowners than not disabled people with only 40% and 56% of respectively being homeowners.

The Annual Population Survey verifies disabled people are more likely to rent (44%) than non-disabled people (33%) but despite this home ownership is the most prevalent tenure type for disabled people with 40% owning their home;

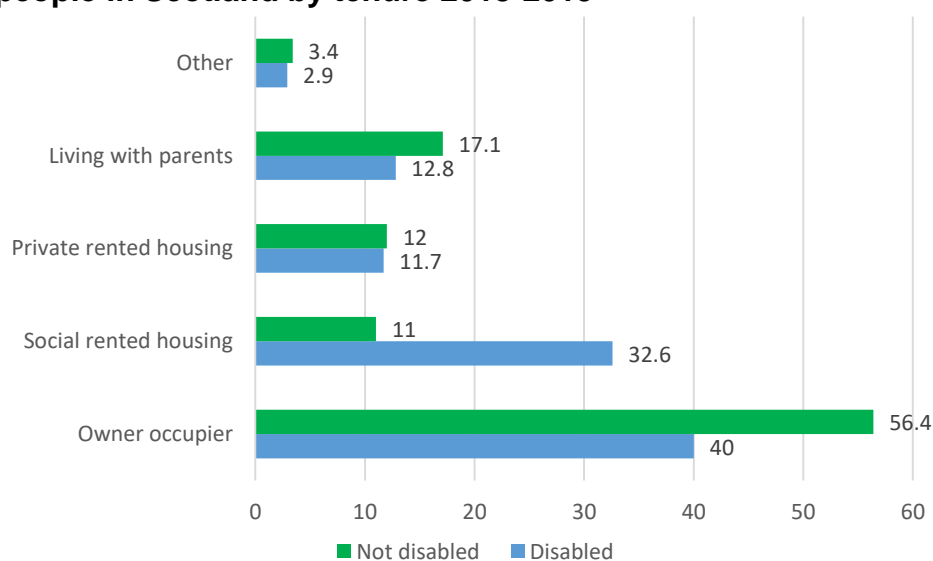
33% renting in the social rented sector; and 12% living in the private rented sector.

**Table 5.8: Percentage of people in HMAs with particular disabilities and long-term conditions 2019**

Type of impairment/s that respondents reported	Bute	Coll & Tiree	Cowal	IJC	Kintyre	Mid Argyll	M&I	Lorn	H&L
No impairment	82.8%	73.0%	66.0%	59.1%	71.0%	77.2%	61.0%	72.0%	85.1%
Do not know or refuse to answer	1.7%	3.3%	2.3%	4.3%	2.1%	3.1%	4.1%	3.5%	1.3%
Mental ill health	0.6%	1.1%	3.4%	2.4%	3.9%	1.1%	1.0%	3.1%	0.2%
Mobility/Physical health problem	12.6%	19.5%	20.8%	23.8%	11.8%	14.0%	23.0%	7.7%	10.6%
Learning difficulties	0.3%	-	2.1%	0.3%	0.6%	-	0.3%	1.9%	0.6%
Developmental disorder	-	-	0.8%	0.8%	0.3%	-	1.1%	0.8%	-
Difficulties with sight	0.3%	0.8%	3.2%	4.0%	0.6%	0.3%	2.6%	1.6%	0.4%
Difficulty hearing	0.9%	3.1%	2.4%	4.7%	4.9%	2.6%	2.4%	5.1%	1.5%
Dementia									
Being frail due to age	0.6%	7.0%	4.8%	13.6%	4.9%	2.0%	16.3%	3.5%	1.2%
Drug and Alcohol dependency				0.3%					
Chronic disease (such as Cancer, HIV, Diabetes, Heart Disease or Epilepsy)	0.6%	4.5%	2.4%	6.8%	4.3%	2.3%	5.8%	5.4%	
Other	-	0.8%	0.8%	1.0%	-	0.3%	0.6%	0.3%	1.1%

Source: Argyll and Bute HNDA Household Survey 2019 and Helensburgh and Lomond Housing Market Study 2018

**Figure 5.9: percentage of disabled people compared to non-disabled people in Scotland by tenure 2018-2019**

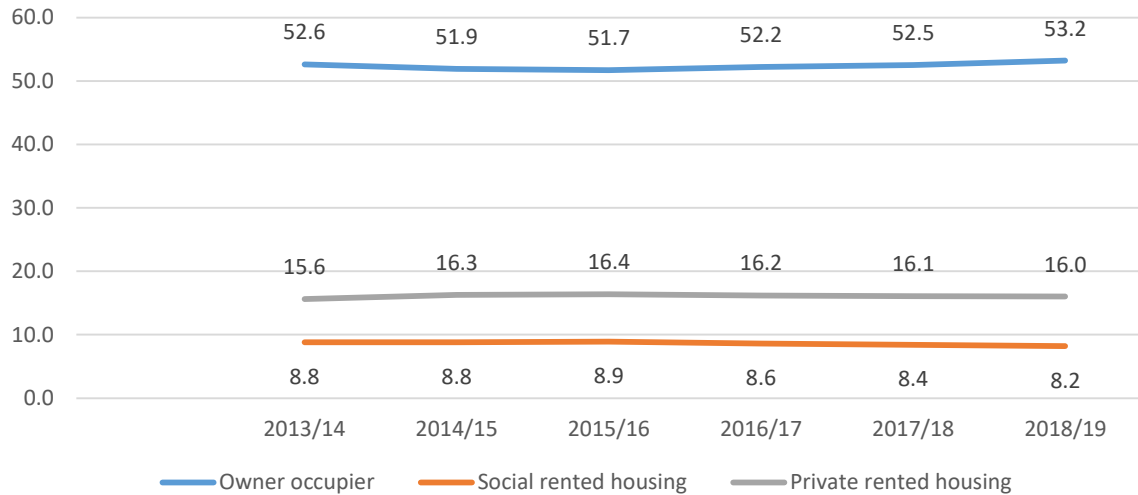


Source: ONS- Annual population survey 2018-19

### 5.3.1 Disabled people by tenure type through time

When tenure data for disabled people is assessed over time it is apparent that disabled peoples' level of home ownership is decreasing from 43.6% in 2013/14 to 42.4% in 2018/2019. This contrary to trend of increasing home ownership for non-disabled people; rising from 52.6% to 53.2%. Hence, suggesting that disabled people will account for a diminishing proportion of homeowners if this trend continues.

**Figure 5.10: Housing tenure of non-disabled people in Scotland 2013-2019<sup>14</sup>:**



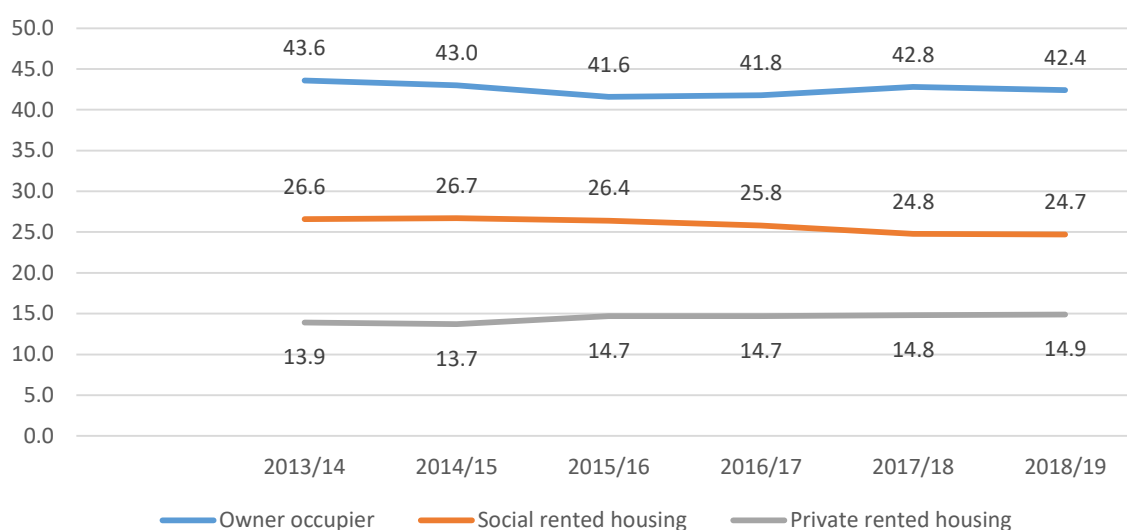
Source: ONS Annual population survey 2019

In 2018/19 the percentage of disabled people living in social rented housing is three times higher than non-disabled people. Although when the picture is examined over a five-year period (2013/14 to 2018/19) the percentage of disabled people living in social rented accommodation is decreasing while the percentage living in private rented is increasing.

If disabled people are increasingly selecting accommodation in the PRS it will be important to ensure that the private rented sector provides suitable accommodation for disabled people, to avoid increases in disabled people with unmet housing need.

<sup>14</sup>This figure only shows the percentage that live in social rented, private rented, and owner-occupied sector. It excludes those in other tenure types or who live with their parents hence the total shown in the figure will not add up to a hundred percent.

**Table 5:11 Housing tenure of disabled people in Scotland 2013-2019<sup>15</sup>:**



Source: ONS Annual population survey 2019

#### 5.4 Disabled people in the UK varied by age and housing tenure.

As previously stated, disabled people are not a homogenous group, and the age profile of disabled people influences their tenure. Over 60% of disabled people aged 60-64 are homeowners and although the trend over time is declining it is still the most prevalent tenure for disabled people of this age. This is markedly different to young disabled people where in 2018/19 only 2.6% of disabled people aged 16-24 years old were homeowners. Home ownership rose to around 30% for 30-34 years olds but it is not until disabled people are in their 50's that more than 50% own their own home.

Disabled young people (25-29 years old) are more likely to live in private rented accommodation (27%) and the proportion in this tenure has increased over the five-year period. In 2017/18 equal proportions of 30–34-year-olds lived in social rented and private rented housing and hence the 2018/19 figures show a decline in those living in social rented housing.

Almost half disabled people in their 40's are homeowner however if they do rent then they are far more likely to be tenants in the socially rented sector (30%) compared to 18% in the private sector (in 2018/19).

<sup>15</sup>This figure only shows the percentage that live in social rented, private rented, and owner-occupied sector. It excludes those in other tenure types or who live with their parents hence the total shown in the figure will not add up to a hundred percent.

**Figure 5:12: Percentage of disabled people by age and tenure 2013-2019**

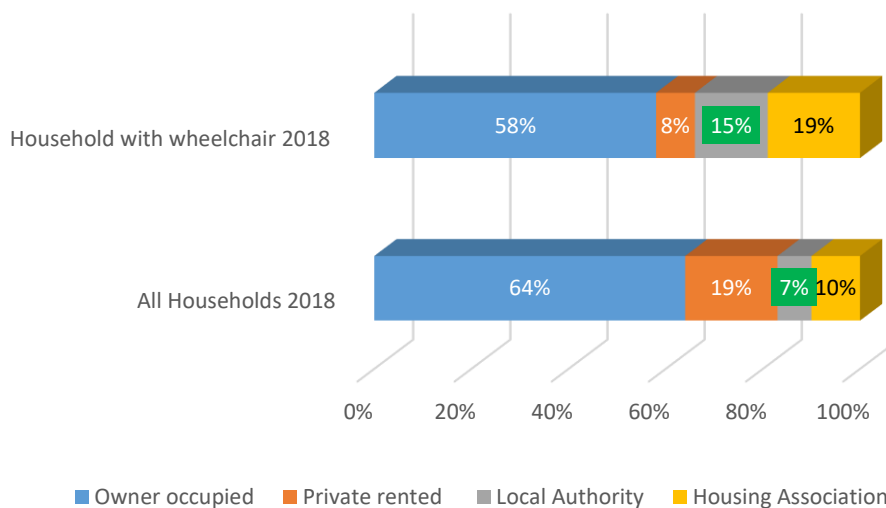


Source: ONS Annual Population Survey December 2019.

### 5.4.1 Tenure by types of disability

Published statistics often presented disability as a single category and rarely distinguish between different forms of disability. Definitional issues and major data gaps also make it extremely difficult to produce reliable estimates for wheelchair user households and other mobility limited households, even at the Scotland wide level for instance, the Census does not ask about wheelchair use. One survey conducted in England did research wheelchair users most prevalent tenure. Unfortunately, there was not a comparable study undertaken in Scotland. The EHS concluded that wheelchair users were twice as likely to live in the socially rent sector as non-wheelchair users. Fifteen percent of wheelchair users reside in local authority housing compared to 7% of non-wheelchair users. Nineteen percent of wheelchair users live in housing association homes compared to 10% of non-wheelchair users.

**Figure 5.13: Housing tenure of wheelchair households compared to all households.**



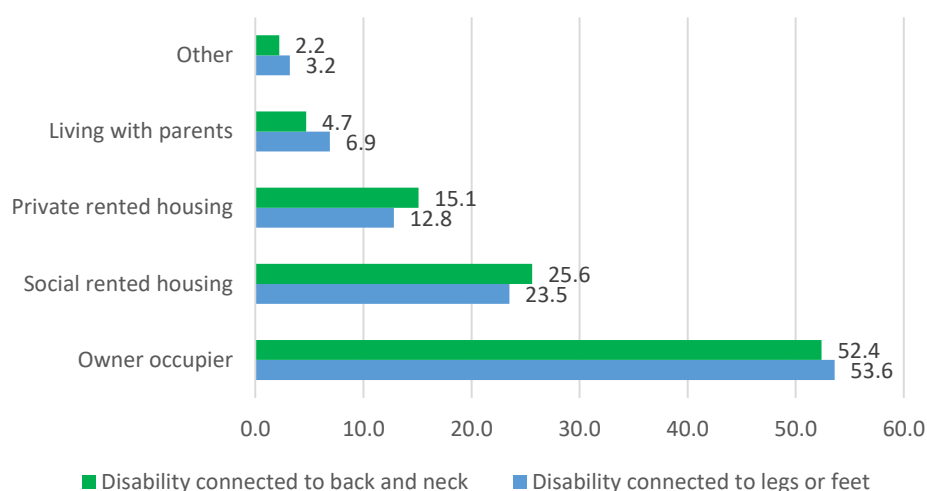
Source: Ministry of Housing Communities and Local Government – English Housing Survey 2018-19

The tenure split of those people with legs and feet conditions and people with back and neck conditions were interrogated as these are conditions which are most likely to require the person to use a wheelchair. Both these conditions have remarkably similar tenure splits and have a higher level of home ownership 52% (back and neck impairments) and 54% (feet and leg impairments) compared to disabled people generally (40%).

The reasons for this could be that back & neck and feet & leg impairments become more prevalent with age and as outlined above home ownership is more prevalent in older disabled people. It is also noticeable that people with both these disabilities are twice as likely to reside in social rented housing rather than rent in private rented sector.



**Figure 5:14: Housing tenure by disability type in Scotland 2018-2019**



Source: ONS- Annual population survey 2018-19

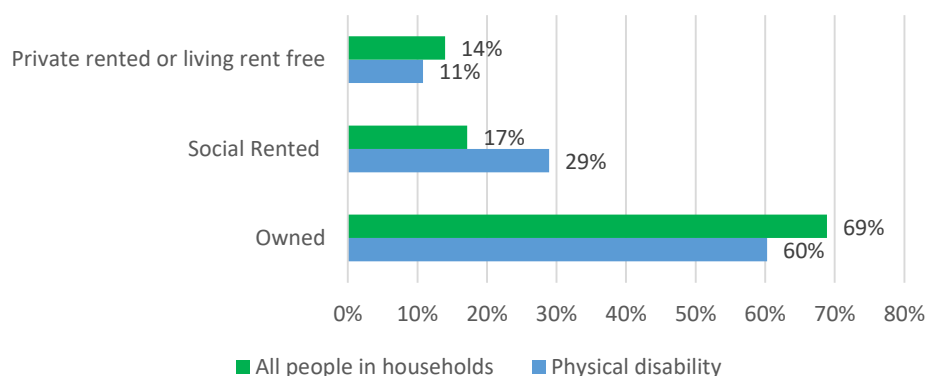
#### **5.4.2 Disabled people by tenure in Argyll and Bute**

According to the 2011 census home ownership was the most prevalent tenure for disabled people living in Argyll and Bute with 60% being homeowners although home ownership was lower than would be found in the wider population (69%). This dataset also shows that almost three times as many disabled people live in social rented accommodation equating to 29% rather than living in the private rented sector (11%). Like other datasets discussed in previous sections disabled people who rent are more likely to be social renters rather than private renters.

More recent data from the Argyll and Bute Survey 2019 found that 80% of private rented tenants stated that no one in their household suffered from illness or health issues which is in line with the Census data. Surprisingly, the survey found that 74% of homeowners reported that no one in their household had an illness or health issues which appears to contradict the Census and other datasets findings. The survey also found that 40% of respondents in socially rented accommodation reported that someone in their household had an illness or health issue, this was higher than other data sources would suggest.

The most common health issue in Argyll and Bute across all tenures was mobility and physical health problems, which is consistent with national findings. Fourteen percent of owner-occupiers had a mobility or physical health problem, while only 11% in private rented sector and 20% of the social rented sector had this impairment.

**Figure 5.15: Percentage of disabled people in Argyll and Bute in 2011 by tenure**



Source Census 2011

**Table 5.9: Percentage of people, Argyll and Bute, who had health conditions in 2019 by tenure.**

Type of impairment/s that respondents reported	Owner occupier	PRS	RSL
No impairment	73.3%	79.9%	60.3%
Do not know or refuse to answer	3.2%	2.1%	1.9%
Mental ill health	0.8%	2.2%	8.3%
Mobility/Physical health problem	13.9%	10.7%	20.0%
Learning difficulties	1.0%	0.8%	1.4%
Developmental disorder	0.3%	1.8%	0.5%
Difficulties with sight	1.8%	1.2%	1.5%
Difficulty hearing	3.4%	2.6%	3.4%
Dementia	1.0%	0.3%	1.2%
Being frail due to age	4.9%	2.9%	4.9%
Drug and Alcohol dependency	-	0.1%	-
Chronic disease (such as Cancer, HIV, Diabetes, Heart Disease or Epilepsy)	3.3%	3.1%	4.7%
Other	0.5%	0.3%	0.0%

Source: Argyll and Bute HNDA Household Survey 2019

## 6.0 Wheelchair users

'Making the connections' guide identified a range of issues when trying to build a robust wheelchair evidence base. These challenges resulted from:

- The 2011 Census not asking a question about wheelchair use. Instead, it asked respondents to self-report and categorise their disability into several predetermined categories.
- Surveys often have a physical disability category and although a proportion of people with physical disabilities will use a wheelchair, it is difficult to accurately identify the wheelchair prevalence rates.
- The Scottish Household Survey asked if someone in the household used a self-propelled or powered wheelchair. However, the sample is small and not statistically valid when it is broken down to local authority level.

In 2018, 'Still Minding the Step' was published by Horizon Housing this report reviewed and updated the original 'Mind the Step' report published in 2012. The revised report states:

*“A key problem with the calculation of need for wheelchair users in Scotland is that there is no one definitive source of the number of wheelchair users”.*

Despite the challenges outlined above this paper utilises a range of national datasets, to determine a range of wheelchair prevalence rates for Scotland. This data is then extrapolated to obtain a prevalence figure for Argyll and Bute although, it is recognised that the local picture may in fact be different.

## 6.1 Estimating wheelchair prevalence in Argyll and Bute.

According to St Andrews University’s ‘Facts about Disability’ web resource, wheelchair users equate to 8% of disabled people. This figure is verified by data from Disability Sport who state that less than 8% of disabilities require the use of a wheelchair. As stated in the previous section, the DWP believe that there were 14.1 million people in the UK, in 2018/19, with a disability. Using the 8% prevalence rate this would equate to 1.2 million wheelchair users in the UK in 2018/19. This figure is verified by the NHS, who state that a *“wheelchair is used by an estimated 1.2 people in the UK.”*<sup>16</sup>

Instead of looking at wheelchair use across the population ‘Still Minding the Step’ attempts to quantify wheelchair prevalence as a proportion of households. The authors of ‘Still Minding the Step’ have extrapolated data from the English Housing Survey (EHS) and applied it to Scotland concluding that 3.6% of Scottish households have at least one member who uses a wheelchair, equating to 87,340 wheelchair households. A variety of other national studies have been undertaken to determine the prevalence of wheelchair use. The prevalence rate for each of these studies ranges from 3.6% to 4.2% of households.

**Table 6.1: Percentage of households who have a wheelchair user.**

Name of study	% households using a wheelchair
North Star study	3.6%
Family Resources Survey (FRS) derived	4.2%
SHS revised (indoor and outdoor figures)	3.9%

Source: ‘Space to live’ 2020 Scottish Borders Council.

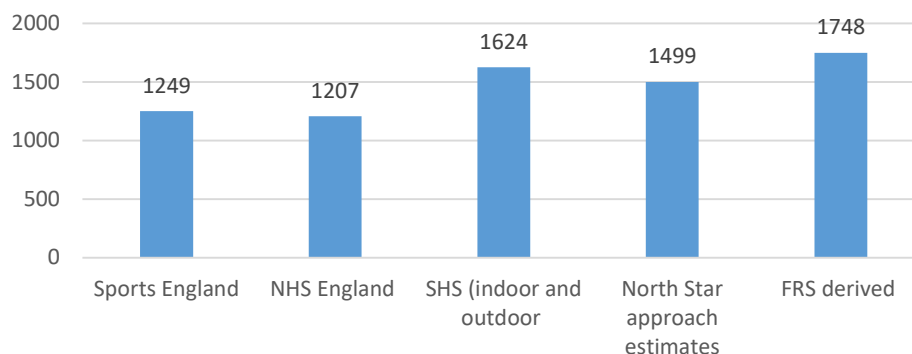
### 6.1.1 Wheelchair prevalence in Argyll and Bute

NHS Highland’s Public Health team for Argyll and Bute and Argyll and Bute Council in 2018 produced a joint report ‘Housing and Health and Care Needs’. This report stated that over 1300 people in Argyll and Bute have wheelchairs on issue. This is slightly lower than the DWP’s wheelchair prevalence rate which estimates that Argyll and Bute has 1561 wheelchair users.

<sup>16</sup> [NHS England » Improving Wheelchair Services](#)

When households are examined the number of households in Argyll and Bute which have wheelchair users in them equates to between 1,207 households and 1,748 households depending on which study is referenced.

**Figure 6.1: Number of wheelchair households in Argyll and Bute based on extrapolations of national figures.**



Source: Calculation made for Argyll and Bute using the same methodology used in ‘Space to live’, Scottish Borders Council, 2020.

**Table 6.2: Number of wheelchair households in Argyll and Bute and Scotland in 2014/15 and 2019/20**

	Scotland	Argyll and Bute
2014/15	87,340	1,471
Projected 2019/20	114,150	1,922

Source: Still minding the step 2018 and 2018 Housing Estimates

### 6.1.2 Number and types of wheelchair issued in Argyll and Bute.

The ‘Housing and Health and Care Needs’ report 2020 stated that:

*“NHS funded wheelchairs are provided to people in Argyll and Bute by West MARC. The number of chairs issued each year is shown below. Manual chairs are the most common issued. Note that people may have more than one chair on issue and they may require replacement chairs as their needs change. Therefore, these numbers do not necessarily represent the number of new wheelchair users each year”.*

The ‘Housing and Health and Care Needs’ report 2020 stated that:

*“1815 chairs were issued to 1428 people with 281 people (20%) issued with more than one chair over these 5 years. From these figures, it can be estimated that no more than 280 people a year are new wheelchair users”.*

## 6.2 Types of wheelchair

The 'Housing and Health and Care Needs' report identified the number and types of wheelchairs provided by West MARC to Argyll and Bute residents the vast majority (1625) of wheelchairs provided between 2012-2017 were manual chairs.

**Table 6.3: Number of wheelchairs issued in Argyll and Bute from 2012-2017<sup>17</sup>**

Financial Year	Buggies	Manual	Powered	Total
2012-2013	4	353	42	399
2013-2014	4	314	29	347
2014-2015	5	314	31	350
2015-2016	1	323	38	362
2016-2017	3	321	33	357
Total	17	1625	173	1815

Source: 'Housing and Health and Care Needs', 2019, NHS Highland's public Health team for Argyll and Bute and Argyll and Bute Council

### 6.2.1 Use profiles of wheelchair users

The Ministry for Housing and Communities, in England, undertook a study in 2018/19 which found that 74% of wheelchair users only require a wheelchair outside of their home. This equates to 1:4 wheelchair users who require a wheelchair within their home.

The English Health Survey (EHS) identified, that 0.4% (84,000) of households had a wheelchair user, who require to use their wheelchair inside their home. If the English Health Survey ratio is applied to Argyll and Bute, then the authority would have 167 households with a wheelchair user who solely used a wheelchair inside and 375 households who used a wheelchair all the time. Making a total of 542 households who had a household member who used a wheelchair inside their home. This equates to around a third of wheelchair users who use a wheelchair inside their home which is slightly higher than Ministry for housing and communities' study which found around a quarter used their wheelchair inside their home. However, both studies concluded that the majority of wheelchair users only use a wheelchair outside their home. It would be reasonable to assume that if a half to three quarters of wheelchair users did not use a wheelchair in their homes, then they would not require a fully habitable wheelchair house, however this is not necessarily the case as discussed in the next section.

Argyll and Bute Council Housing Service's bespoke wheelchair questionnaire in 2019/20 found that 50% of respondents used a wheelchair inside their home, which is considerably higher than the wider studies outlined above.

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<sup>17</sup> Despite requesting more recent data from WestMARC, it has not been possible to obtain data beyond 2017.

**Table 6.4: Number and percentage of wheelchair users in England in 2015 variable by type of wheelchair use**

	Number of households	% of total households
uses wheelchair all the time	210,000	0.9
uses wheelchair indoors	84,000	0.4
uses wheelchair outdoors only	521,000	2.3

Source: EHS 2014/2015: <https://www.gov.uk/government/statistics/english-housing-survey2014-to-2015-adaptations-and-accessibility-of-homes-report>

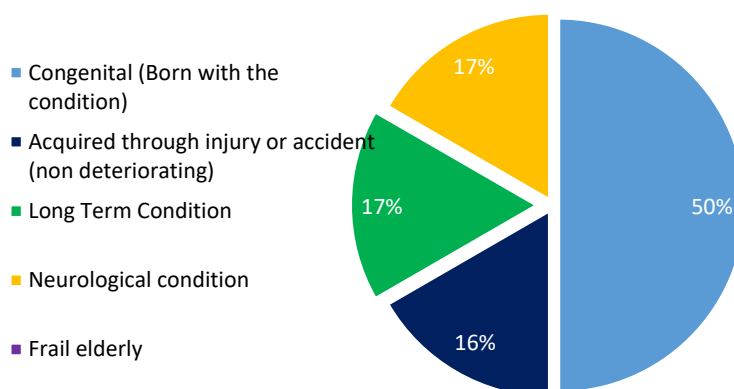
### 6.2.2 Use of mobility devices

According to Horizon housings' report many of those who use mobility devices will require a house designed to wheelchair space standards. This point was reiterated by Argyll and Bute's Housing Occupational Therapist (OT) who highlighted that wheeled walking frame users have similar space needs as a wheelchair user. Currently, 24% of over 65-year-olds use a walking frame if they require the same space standards as wheelchair users then this could dramatically increase the demand for wheelchair housing. In future this trend is likely to continue to escalate as the use of walking frames is on an upward trajectory having doubled since 2004. This should be closely monitored in future HNDA updates.

### 6.3 Wheelchair use in Argyll and Bute by primary condition.

The Argyll and Bute wheelchair housing questionnaire found that 50% of respondents had been born with a congenital condition that required them to use a wheelchair and hence they have used a wheelchair throughout their life. Although most wheelchair users in Argyll and Bute are over 75 years old none of the questionnaire respondents used a wheelchair as a result of being frail; whereas 17% of respondents were wheelchair users because of an accident or injury, while 34% used a wheelchair due to a neurological condition or another long-term condition.

**Figure 6.2: Reasons for wheelchair use in Argyll and Bute, 2020.**



Source: Argyll and Bute Wheelchair housing questionnaire 2020.

Housing and Health and Care Needs', 2019 provides comprehensive data for conditions experienced by wheelchair users in Argyll and Bute. Cerebrovascular diseases (stroke), decreased or limited mobility and dementia were the most common reasons for wheelchair use. Amputations may be as the result of injury or due to conditions such as diabetes.

**Table 6.5: Number of people in Argyll and Bute with wheelchairs in 2017 by primary diagnosis grouping**

Diagnosis Grouping	People with wheelchairs	
	Number	%
Not recorded	130	10%
Cerebrovascular diseases	130	10%
Decreased or Limited Mobility	110	8%
Dementia	80	6%
Neoplasm	70	5%
Osteoarthritis	60	5%
Multiple Sclerosis	50	4%
Parkinson's Disease	50	4%
Unknown	50	4%
COPD	50	4%
Amputation	50	4%
Arthritis (not osteo or rheumatoid)	40	3%
Rheumatoid Arthritis	20	2%
Osteoporosis	20	2%
Other forms of heart disease	20	2%
Frailty	20	2%
Spinal conditions	20	2%
<b>Total</b>	<b>970</b>	<b>77%<sup>18</sup></b>

Source: 'Housing and Health and Care Needs', 2019, NHS Highland's public Health team for Argyll and Bute and Argyll and Bute Council

The main reasons for wheelchair use vary by age. Only 2% of wheelchair users have a wheelchair due to their age and frailty, 6% have a wheelchair due to dementia which is a condition most experienced by older adults.

Cerebral Palsy is the most common reason for people under 25 years old to use a wheelchair.<sup>19</sup> Disability Sport state that around 1,800 babies in the UK are born with cerebral palsy each year. Hence, it is likely that these wheelchair users will have other medical or support needs and simply providing a wheelchair house without support will not be suitable for these wheelchair users.

<sup>18</sup> Only conditions accounting for 2% or more of wheelchair users are shown.

<sup>19</sup> Argyll and Bute Joint Strategic Needs Assessment 2019

**Table 6.6: Most common primary diagnosis in Argyll and Bute in 2017 by age band**

0-24 (Age)		25-44 (Age)		45-64 (Age)	
Diagnosis Group	%	Diagnosis Group	%	Diagnosis Group	%
Not recorded	18%	Not recorded	23%	Not recorded	17%
unknown	18%	Spinal conditions	10%	Multiple Sclerosis	12%
Cerebral Palsy	11%	unknown	8%	Cerebrovascular diseases	6%
Pervasive developmental disorders	11%	Brain damage or injury	7%	Neoplasm	5%
Disorders of psychological development	8%	Cerebral Palsy	5%	Spinal conditions	5%
Down's Syndrome	6%	Chronic Pain Syndrome	5%	unknown	5%
65-74 (Age)		75-84 (Age)		85+ (Age)	
Diagnosis Group	%	Diagnosis Group	%	Diagnosis Group	%
Not recorded	14%	Cerebrovascular diseases	15%	Decreased or Limited Mobility	16%
Cerebrovascular diseases	11%	Neoplasm	8%	Dementia	11%
Neoplasm	8%	Decreased or Limited Mobility	8%	Cerebrovascular diseases	8%
Multiple Sclerosis	5%	Parkinson's Disease	7%	Osteoarthritis	8%
COPD	5%	Dementia	7%	Arthritis (not osteo or rheumatoid)	5%
Amputation	4%	Amputation	5%	Not recorded	5%

Source: 'Housing and Health and Care Needs', 2019, NHS Highland's public Health team for Argyll and Bute and Argyll and Bute Council

#### 6.4 Age profile of wheelchair users

The age profile of wheelchair users impacts on their housing needs. The 'Housing and Health and Care Needs' report highlights that 72% of wheelchair users are over 60 years old and 55% of people with wheelchairs are over 75 years old<sup>20</sup>. The Scottish Government project that the over 75-year-old population will rise by 71% between 2018 and 2043 and if this comes to pass then it is a fair assumption that there will be an increase in the number of wheelchair users. However, this might not translate into a proportionally greater need for wheelchair housing as some people over 75 years old will desire amenity housing for older people, sheltered or very sheltered housing or choose a care home.

Twenty eight percent of wheelchair users are under 65 years old, with 5% of wheelchair users being aged 25 to 44 years old many of these wheelchair users will have families and hence have children living at home. Therefore, it is important that wheelchair housing is not restricted to smaller units but that there is a range of sizes of homes available for wheelchair users and their families.

<sup>20</sup> Argyll and Bute Joint Strategic Needs Assessment 2019



**Table 6.7: Number and percentage of people in Argyll and Bute in 2017 who have been issued a wheelchair by age.**

Age band	People with wheelchairs issued	
	Number	%
0-15	46	3%
16-24	20	2%
25-44	60	5%
45-64	243	18%
65-74	228	17%
75-84	334	25%
85+	393	30%
<i>Total</i>	<i>1324</i>	<i>100%</i>

Source: 'Housing and Health and Care Needs', 2019, NHS Highland's public Health team for Argyll and Bute and Argyll and Bute Council

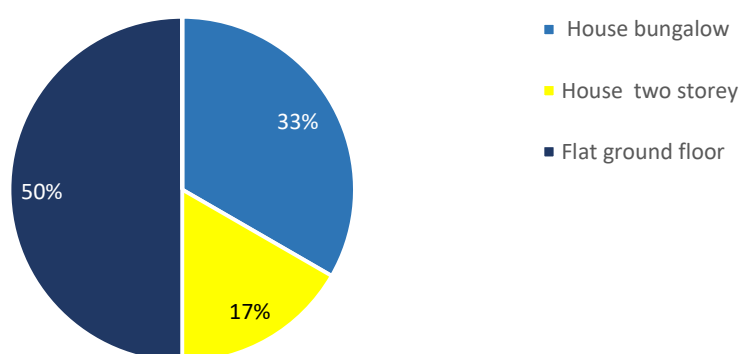
### 6.5 Tenure of wheelchair users in Argyll and Bute

In Argyll and Bute, according to the wheelchair housing questionnaire half of respondents lived in the social rented sector highlighting the importance of this tenure for local wheelchair users.

### 6.6 Wheelchair users by housing type

The wheelchair questionnaire findings found that half of respondents lived in ground floor flats and a third lived in a bungalow, while 17% lived in a two-storey house. It could be assumed that the majority of wheelchair users housing needs would be met by ground floor flats and bungalows however, the following section will discuss why these types of homes in themselves do not necessarily equate to suitable housing for wheelchair users.

**Figure 6.3: Types of homes wheelchair users live in 2020 in Argyll and Bute.**



Source: Argyll and Bute Wheelchair housing questionnaire 2020.

### 6.7 Future wheelchair prevalence in Argyll and Bute

The 'Housing and Health and Care Needs' report published in 2019 has projected wheelchair prevalence in 2027. It states:

*"The oldest age groups are projected to increase in size, it is likely that the number of wheelchairs needed in the future will also rise. This could be 237 additional people needing wheelchairs".*

The report goes on to say:

*“The need for wheelchair housing may be higher than this (237) as there will be new people needing wheelchairs even if the overall number of wheelchair users decreases”.*

‘Still Minding the Step’ report concurs with the Housing and Health and Care needs report stating that the future number of wheelchairs uses could be larger due to *“longer life expectancy of those with disabilities, and the increasing prevalence in Scotland of people with deteriorating neurological conditions, diabetes and obesity”*. The report concludes that people with the aforementioned conditions may require a wheelchair.

**Table 6.8: Number of people with wheelchairs in 2017 and projections of numbers of people with wheelchairs in 2027**

Age band	People with wheelchairs issued 2017		Possible increase by 2027	
	Number	%	%	Number
0-15	46	3%	-7%	-3
16-24	20	2%	-15%	-3
25-44	60	5%	-4%	-2
45-64	243	18%	-14%	-33
65-74	228	17%	2%	5
75-84	334	25%	33%	110
85+	393	30%	42%	164
<b>Total</b>	<b>1324</b>	<b>100%</b>		<b>7</b>

Source: ‘Housing and Health and Care Needs’, 2019, NHS Highland’s public Health team for Argyll and Bute and Argyll and Bute Council

## 7.0 Wheelchair users’ unmet housing needs

According to the Papworth Trust there are 1.8 million disabled people in the UK with unmet housing needs. In Scotland, according to Horizon housing in 2018 there were 17,226 wheelchair households in Scotland with unmet housing needs. In other words, one in five (19%) of wheelchair households had unmet housing needs or put another way 0.7% of all households are made up of wheelchair households with unmet housing needs.

The table shows the estimated amount of unmet housing need in both Scotland and Argyll and Bute<sup>21</sup> in 2014/15, and the predicted levels of need cited by ‘Still minding the step’ for 2019/2020. According to the table, in 2019/20 Argyll and Bute had 376 wheelchair households with unmet housing need.

<sup>21</sup> The Argyll and Bute value was obtained by extrapolating, the number of households the Scottish data to Argyll and Bute. This was achieved by identifying the number of households in Argyll and Bute and multiplying this by 0.7 as this was the ratio of wheelchair households in England with unmet housing need – see pages 28-29 ‘Still Minding the Step’ for full details of the methodology.

**Table 7.1: Estimated number of households with unmet housing needs in Argyll and Bute and Scotland in 2014/15 and 2019/20**

	Scotland	Argyll and Bute
2014/15	17,226	290
2019/20	22,514	376

Source: Still minding the step 2018

As the Argyll and Bute figures above were obtained from extrapolating the national figures, to ensure a robust and credible assessment of need this data was triangulated using a variety of different datasets. For example the HNDA household survey, HOMEArgyll waiting list data, Housing OT data and consultation findings from interviews, questionnaires and consultation workshops. This methodology is detailed in the following paragraphs.

### **7.0.1 Unmet housing needs data from the HOMEArgyll joint housing list**

The HOMEArgyll joint housing register was analysed to identify those who had requested a wheelchair house but had not been allocated one. In 2020 there were 94 active applicants who use a wheelchair; with 29 stating they use their wheelchair all the time and 57 stating only sometimes. In addition, 36 applicants said they use their wheelchair both inside and outside while 42 said they use it outside only. (Sixteen applicants did not complete this section of their application.) However only 58 of these were seeking wheelchair accommodation, and only 24 would not also accept mainstream housing. Seven of these applicants could remain in their current property if it were suitably adapted; therefore, the majority require to be rehoused. Seventy-seven state that their medical condition is affected by their current housing circumstances. This figure is considerably lower (376) than the projected level of unmet need extrapolated from the ‘Still Minding the Step’ methodology.

In terms of household age, 61 of the primary applicants are aged under 60; and 33 are aged 65+ but this may not directly reflect the profile of the wheelchair users themselves if they live in households comprising more than one person. Five of the wheelchair applicants were on the homeless list, 27 were on the transfer list, and the majority, 62, were on the general waiting list.

Just under a third of these applicants would prefer Lorn; while 21% would prefer Helensburgh & Lomond; and 19% prefer Cowal. However, there is a degree of expressed need across all HMAs, albeit actual numbers are often low.

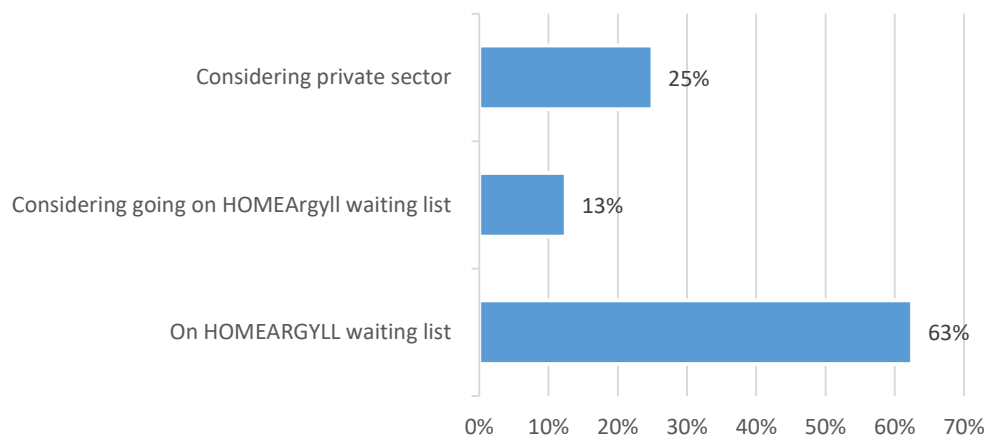
In general, the conclusion is that unmet need for wheelchair housing is not excessive, and that national targets for 10% of all new build, across all tenures, to meet the full wheelchair standards appears disproportionate. A significant proportion of wheelchair users are satisfactorily housed or can have their particular needs met in situ, although a proportion of older properties are not suitable for adaptation. Many households in the private sector can also afford to fund their own housing or support solution without recourse to subsidised new build solutions.

### 7.0.2 Not all wheelchair users with unmet housing needs are on the HOMEArgyll joint housing waiting list.

A significant proportion of need can be addressed by the provision of various adaptations although it is important to note that some wheelchair users with unmet housing need will not be registered on the HOMEArgyll waiting list or seeking social rented homes. For example, one of the interviews carried out during the consultation process demonstrated that the interviewee knew that there were no suitable RSL wheelchair houses in their location and hence they did not join the housing register. The majority (63%) of respondents to the questionnaire were currently on the HOMEArgyll waiting list and hence their unmet housing needs are being captured by the HOMEArgyll data. However more than a third of respondents unmet housing need is not being captured through by HOMEArgyll data.

Adaptions and turnover in existing stock will address some unmet housing need but there is likely to be a requirement for some new, purpose-built provision in the future. A provisional estimate, triangulating available data on wheelchair use, current need and potential demand minus supply and alternative in situ solutions, suggests that between 30-80 households with a wheelchair user could have an unmet housing need that would require a new build solution over the next 5 years.

**Figure 7.1: Percentage of wheelchair users who responded to the questionnaire who are on the HOMEArgyll waiting list 2020.**



Source: Wheelchair Housing Questionnaire 2020

### 7.0.3 Response to whether current housing meets their needs.

Different approaches were required to quantify the number of wheelchair users not on the HOMEArgyll list but nevertheless had unmet housing needs.

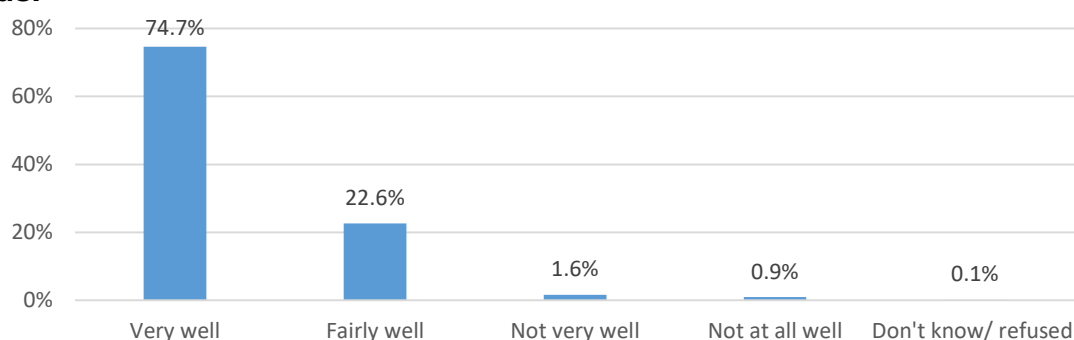
The first approach used to capture wider unmet housing need was to scrutinise the HNDA survey data. Almost all respondents (97%) who have someone in their household who suffer from a health condition believe their current housing needs were met very or fairly well. Only 18 households who responded stated that their housing did not meet their needs suggesting that there was little unmet housing need.

Conversely, all wheelchair users (100%) who completed the wheelchair housing questionnaires or who were interviewed or participated at the workshops considered that their current housing did not meet their need well. Although it is important to note that this sample was small (and potentially self-selecting hence not necessarily representative of the wider wheelchair user community).

#### 7.0.4 Do people with a health condition have unmet housing needs regarding obtaining access to specialist housing.

An additional question was asked in the HNDA Housing Survey 2019 to the 708 households who had someone with a health condition to ascertain if specialist housing provision was required and this need was not being met. The vast majority 97% said they had no unmet specialist housing need and only 0.3% identified an unmet need for a wheelchair house (2 households). Six additional households stated that they had unmet housing needs as they required accommodation without stairs and these respondents could possibly be wheelchair users.

**Figure 7.2: Percentage of respondents in Argyll and Bute in 2019, with a health condition who considered that their current home met their needs.**



Source: Argyll and Bute HNDA Household survey 2019

**Table 7.2: Percentage of people with health condition in Argyll and Bute 2019 who had unmet <sup>22</sup>housing needs by housing type.**

Type of specialist housing required	% of people with a health condition
No unmet housing need	96.8%
Accommodation without stairs	1.0%
Sheltered housing (with warden)	0.9%
Retirement/ older person housing	0.7%
Residential care/ nursing home	0.4%
Accommodation suitable for a wheelchair	0.3%
Very sheltered/ Extra care housing	0.3%

Source: Argyll and Bute HNDA Household survey 2019

<sup>22</sup> This figure does not include Helensburgh and Lomond HMA.

### 7.0.5 Not all wheelchair users use their wheelchair inside their home.

Further work was undertaken by analysing the HOMEArgyll waiting list to ascertain what proportion of Argyll and Bute's wheelchair users required to use their wheelchair inside their home. However, when the data was interrogated, there were several apparent anomalies. For example, some people (33) had requested a wheelchair house, but they also stated that they did not use a wheelchair at all. A further 2 claimed they did not know if they used a wheelchair inside or outside. These anomalies might be attributed to applicants subjectively or inconsistently completing the application form; future-proofing potential changes in circumstances; or hedging their bets against all possible options; or that the applicant used wheeled walking frames and required wheelchair space standards.

Only 39 applicants who requested a wheelchair house use a wheelchair inside their home, and only 23 of these required a wheelchair all the time. If 39 of the 106 applicants on HOMEArgyll require a wheelchair inside their home, then that is one in every 2.5 wheelchair users a higher ratio than the 1 to 4 found nationally.

**Table 7.3: Number of people on the joint housing register who requested a wheelchair house by type of wheelchair use.**

	Inside use	outside use only	Do not use	Not sure	Total
All the time	23	5	-	-	-
Sometimes	16	27	-	-	-
Do not use	-	-	33	2	-
Total	39	32	33	2	106

Source: HOMEArgyll Waiting List, Abris Report, 2020

In addition, 6 applicants on the HOMEArgyll waiting list stated that they were wheelchair users, but they did not request a wheelchair house. In four of the six cases the data was contradictory and hence clarification was required. A key action arising from the data analysis for this study is that the individual circumstances and needs of applicants require to be assessed and reviewed regularly by professionals such as the dedicated Housing OT; and this has now been implemented.

### 7.0.6 Housing OT's clinical knowledge

Clinical input was required to enable an accurate picture of wheelchair housing need. The Housing Occupational Therapist (Housing OT) analysed people on the waiting list who stated they required a wheelchair house as well as those applicants who had not specified that they required a wheelchair house despite being wheelchair users. Based on clinical judgment the Housing OT concluded that 28 people required a wheelchair house to meet their needs. The remaining 15 wheelchair user needs could be met with a barrier free home.

### 7.0.7 Unsuitable home by tenure

The Argyll and Bute HNDA survey concluded that 10.7% of owner occupiers needed to move home due to illness or disability to ensure that their housing needs were met. The same picture can be seen for social rented tenants with 10.8% needing to move due to illness or disability.

**Table 7.4: The main reason why people in Argyll and Bute would like or need to move at present by tenure**

Reasons	Owner occupied	Private Rented Sector	Social Rented (RSL)
Illness or disability	10.7%	4.0%	10.8%
Better access to health and social care facilities	10.8%	7.2%	4.6%
Need some form of specialist e.g., sheltered or supported accommodation	1.7%	-	2.7%

Source: Argyll and Bute HNDA Household survey 2019

Homeowners were twice as likely to have to move to a new house to enable them to access better health and social care facilities than tenants in RSL properties. This suggests that RSL homes may be located closer to health and care facilities. The importance of location of wheelchair housing will be explored in more depth in the following sections.

### 7.0.8 Unmet housing needs by HMA

Islay, Jura and Colonsay has the largest percentage of unmet specialist housing needs with 6.1% of its population, followed by Mid Argyll (4.1%), then Mull and Iona (3.5%) and then Lorn with 2.1%. Earlier in this paper, the specialist stock sections highlighted that specialist housing provision is very varied depending on location with some HMAs having little or no provision while other areas have high proportions of the authority's specialist provision and hence this will have implications on the level of unmet need.

**Table 7.5: Percentage of the respondents by HMA who require specialist accommodation or support that is not available.**

	Bute	Coll & Tiree	Cowal	IJC	H&L	Kintyre	Mid Argyll	Mull & Iona	Lorn
Percentage households who require specialist accommodation or support that is not available	-	-	-	6.1%	2.1%	-	4.1%	3.5%	2.1%

Source: Argyll and Bute HNDA Household survey 2019

(In question posed in the table above is about specialist accommodation and it is important to note that specialist housing provision includes not only wheelchair housing but also sheltered housing, extra care housing and other

models of provision. In this instance it is not possible to isolate the numbers of households with unmet wheelchair housing needs).

### 7.1 Reasons why housing does not meet wheelchair users needs

In the previous section we have established that there is a wide variation in the number of wheelchair households who have unmet housing needs. This section will specify the most prevalent reasons why the wheelchair users' current property does not meet their needs.

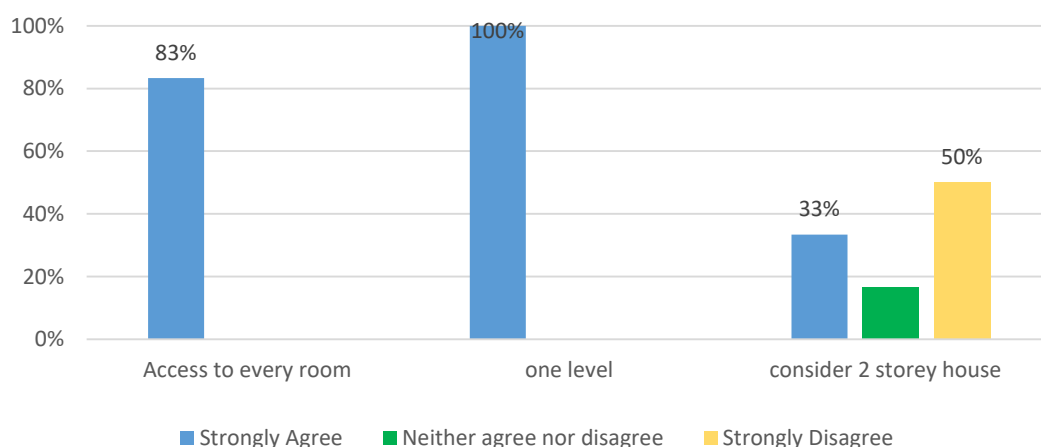
When asked specifically about how important having their home on one floor 100% of respondents to the Wheelchair Users' Survey questionnaire respondents stated that they strongly agreed. As previously outlined only 17% of respondents to the Argyll and Bute Wheelchair housing questionnaire did not live in a bungalow or ground floor flat. Coupled with this according to the HNDA data only 1% of people with a health condition and an unmet housing need lived in a home with stairs. However, a third of respondents stated that they would consider a two-storey home (although a stair lift would be required). All of respondents who answered the question about accessing every room stated that they needed to be able to access every room, (some respondents did not answer this question and hence the total does not add up to 100%).

Having a home on one floor does not solve accessibility issues and the consultation interviews and workshops highlighted other requirements which can be categorised as follows:

- Proximity to care and support from family and friends (33%)
- Adapted kitchen (33%)
- Wet room / bathroom suitable for a wheelchair (83%)
- Level access and wide doors (66%)

The specific comments made by wheelchair users are captured below.

**Figure 7.3: One level verses two level homes for wheelchair users in Argyll and Bute 2020.**



Source: Argyll and Bute wheelchair housing questionnaire 2020



Consultees who attended the workshops concluded that instead of providers developing a limited number of wheelchair housing units they should develop barrier free housing which would be available in all communities and could be used for people with a range of needs. However, they also stressed that it was vital that this barrier free housing can easily be adapted for wheelchair users. All respondents stated that for a home to fully meet their needs it had to be at least barrier free with adapted kitchen and bathroom.

**Table 7.6: Argyll and Bute Wheelchair Users consultation- issues with their current home.**

<p>Kitchen issues</p> <ul style="list-style-type: none"> <li>• The kitchen units and oven and hob were not at a suitable height for a wheelchair, consequently the wheelchair user was unable to make food or hot drinks.</li> <li>• Sockets are too low, upper kitchen units are too high and lower kitchen units are too low.</li> </ul>
<p>Level access/ wider doors</p> <ul style="list-style-type: none"> <li>• The rooms were large and were suitable for a wheelchair to turn but the doors were not wide enough to get the wheelchair through and so wheelchair user could not access these rooms.</li> <li>• Doors are not wide enough for the wheelchair user to get their powered wheelchair into the property and so it has been left outside. The area is not covered and hence it has rotted.</li> <li>• Doorways too narrow for a wheelchair – the user is trapped in the lounge unable to move to another room without being moved around by her partner.</li> </ul>
<p>Bathroom issues</p> <ul style="list-style-type: none"> <li>• The wheelchair user could not access the shower and so had to go to the swimming pool to wash.</li> <li>• The bathroom is too small and hence the wheelchair users cannot have a grab rail or get the wheelchair into the room so cannot use the facilities on their own which has resulted in losing dignity and independence.</li> </ul>
<p>Access to the property</p> <ul style="list-style-type: none"> <li>• The grounds that the house was situated in could not be accessed due to the boggy grass and stairs.</li> <li>• The site for the house is not suitable for a wheelchair user with no way of getting on or off pavements due to high curbs.</li> <li>• Cannot put a ramp outside home due to very steep gradient. Thus, causing the wheelchair user to be housebound.</li> <li>• The wheelchair user cannot go out as the doors have a system where you must hold up the handle and lock it which requires both hands, but this is not possible to get close enough to do in a wheelchair.</li> </ul>
<p>General</p> <ul style="list-style-type: none"> <li>• The house was heated by a coal fire with a back boiler, which heated the water. The wheelchair user could not light or maintain the fire and hence had no heating or hot water.</li> </ul>

Source: Argyll and Bute wheelchair housing questionnaire 2020

The wheelchair consultation findings were verified by the findings of the HNDA survey which concluded that adapted and accessible bathrooms were the most prevalent unmet housing need with 21 households requiring a level

access shower/wet room. The need to have their door widened was responsible for 2 wheelchair users having an unmet housing need and 2 wheelchair users required an adapted kitchen. Other unmet needs are recorded below.

**Table 7.7: Argyll and Butes' wheelchair consultees specified that the following would be required to meet their housing needs.**

<p><u>Kitchen</u></p> <ul style="list-style-type: none"> <li>• The wheelchair can fit in under the kitchen units.</li> <li>• Oven at higher level so both wheelchair user and able bodies people could use it.</li> <li>• Split level kitchen so both the wheelchair user and the rest of the household could use them</li> </ul>
<p><u>Bathroom</u></p> <ul style="list-style-type: none"> <li>• Accessible shower</li> <li>• Space around the toilet for grab rails and perching stool</li> </ul>

Source: Argyll and Bute wheelchair housing questionnaire 2020

## 7.2 Importance of location

The wheelchair housing consultation identified that there was a difference of view on the importance of location, with some wheelchair users not willing to move while others were happy to move if the right house was available. One wheelchair user stated, "I would move anywhere for the right house". This view was shared by some other users who considered that having the right house was more important than location. Sixty seven percent of wheelchair consultees would consider moving out with their community for the right house and only 17% would not consider moving for the right house.

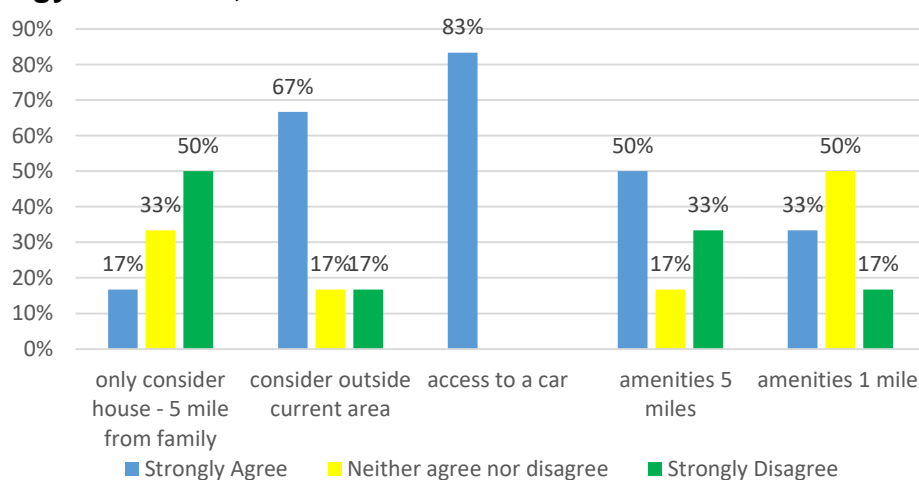
The larger HNDA survey tested whether people with health conditions would be prepared to move if their housing needs could not be met by their current home. These findings are documented below and show that most people do not wish to move. The exceptions to this are people in Coll & Tiree and Cowal, where 71% and 50% of the population respectively would not be prevented from moving. However, in Kintyre and Lorn only 14.3% and 15.3% of residents would be prepared to move. This wider study shows more reluctance to move than the Wheelchair housing questionnaire and consultation.

**Table 7.8: Number and percentage of households with health conditions which require equipment or adaptations in Argyll and Bute 2019<sup>23</sup>**

	% of Argyll and Bute households with a health condition	Number of households
Level access shower	2.9%	21
Handrails	1.5%	11
Bath/shower seat	1.1%	8
Stair lift	0.8%	6
Adapted toilet seat	0.5%	<5
Door widening	0.3%	<5
Ramps	0.3%	<5
Equipment to help get in and out of bed	0.3	<5
Adapted kitchen	0.3	<5
Emergency alarm	0.1	<5
Door entry	0.1	<5
Relocated power points and switches	0.1	<5

Source: Argyll and Bute HNDA Household survey 2019

**Figure 7.4: Location, Priorities and Preferences for wheelchair users in Argyll and Bute, 2020**



Source: Argyll and Bute Wheelchair Housing consultation 2020

Whether wheelchair users are prepared to move to ensure that their housing needs are met seems to be shaped by two key factors. Firstly, if the wheelchair user was active in the community: in these cases, respondents felt they would lose friends and become very isolated, which would have a negative impact on their health and wellbeing. Secondly, it appears whether someone is prepared to move for the right house was dependent upon

<sup>23</sup> Some of the needs outlined in Table 26 will require grant or RSL funding whereas other needs can be met with equipment provided by Telecare or Occupational Therapists once they are assessed.

whether the wheelchair user relied on family or friends for care and support. The HNDA survey analysed how common it was for people to live close to a relative or friend to receive care. Around 0.5% (172) of households would consider it a serious problem if they were not close to family and friends to receive care and three times this number of households would consider it was a slight problem.

**Table 7.9: Percentage of people prepared to move if their housing needs could not be met locally.**

	Bute	Coll & Tiree	Cowal	I,J,C	H&L	Kintyre	Mid Argyll	Mull & Iona	Lorn
Nothing would prevent them from moving	43.8%	71.1%	52.8%	20.9%	-%	14.3%	18.3%	32.4%	15.3%

Source: Argyll and Bute HNDA Household survey 2019 and Helensburgh and Lomond study 2018

Anecdotally it has been reported that some people continue to struggle in housing that is not suitable because they cannot move as this would result in them being too far from their family and friends. Figure 32 highlights that only 17% of respondents would consider a house more than 5 miles from their family.

Other locational considerations of high priority to wheelchair users included being close to hospitals and medical facilities. This was especially the case if the wheelchair user had other health conditions or the reason for being in a wheelchair was because of a progressive condition. Half of respondents said that amenities needed to be within 5 miles of their home while 33% stated that amenities needed to be within 1 mile of their home.

### 7.3 Would adaptations meet wheelchair users needs

The previous section highlighted that the vast majority of HNDA survey respondents stated that they did not wish to move and hence for these respondents with unmet housing need the solution may be adaptations.

Figure 7 (in the housing stock section) highlighted that 14% of those who completed the wheelchair questionnaire considered that adapting the property would fully meet their needs and 29% considered that adaptations would partly meet their needs. Hence adaptations have an important role to play in resolving wheelchair users unmet housing needs.

Section 4.6.5 recorded the types of adaptations which had been installed in their current homes. This section examines what adaptations wheelchair users need but do not have thus resulting in unmet housing need. Figure 34 shows that the most common adaptation required was door widening, with 18% of respondents stating they required this type of adaptation.

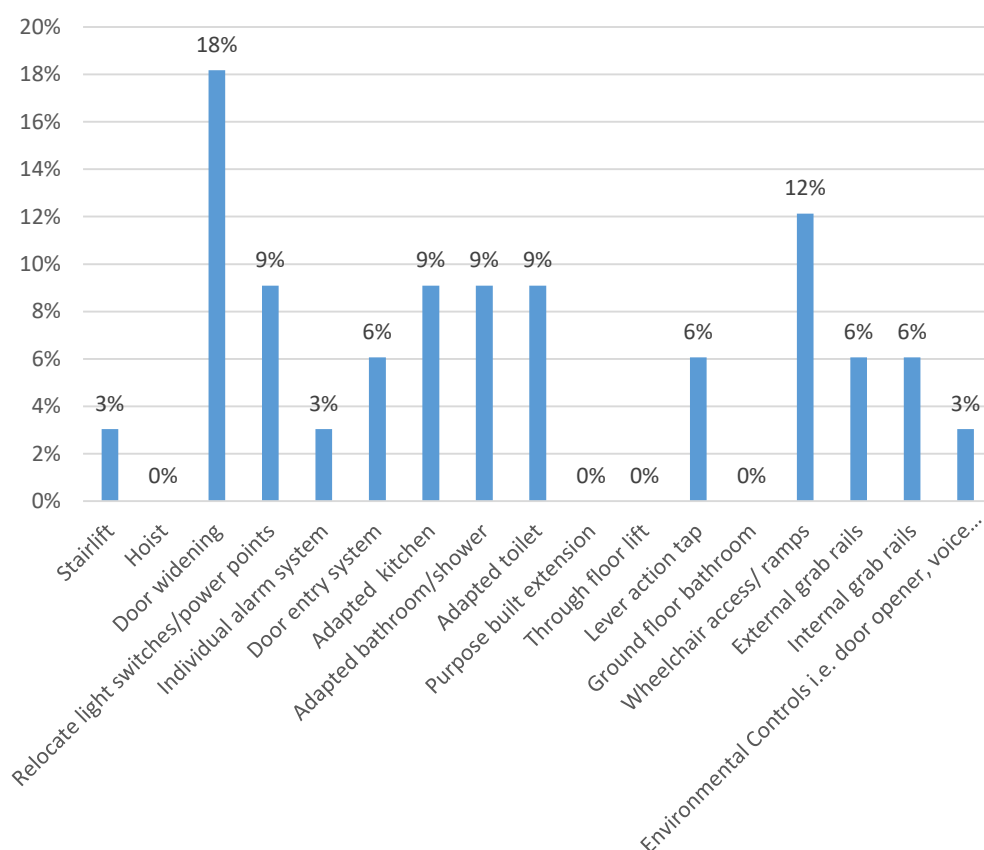
These rates are contrary to the finding from the HNDA survey, as can be seen in figure 35, where for example only 0.3% of households cited that they

required door widening and 0.1% required light switches and sockets to be relocated. This is most probably due to the fact that wheelchair households only account for between 3.6-4.2% of the total number of households.

Level access showers according to HNDA survey accounted for the highest levels of unmet need with 2.9% of all households who need this adaptation but do not have it.

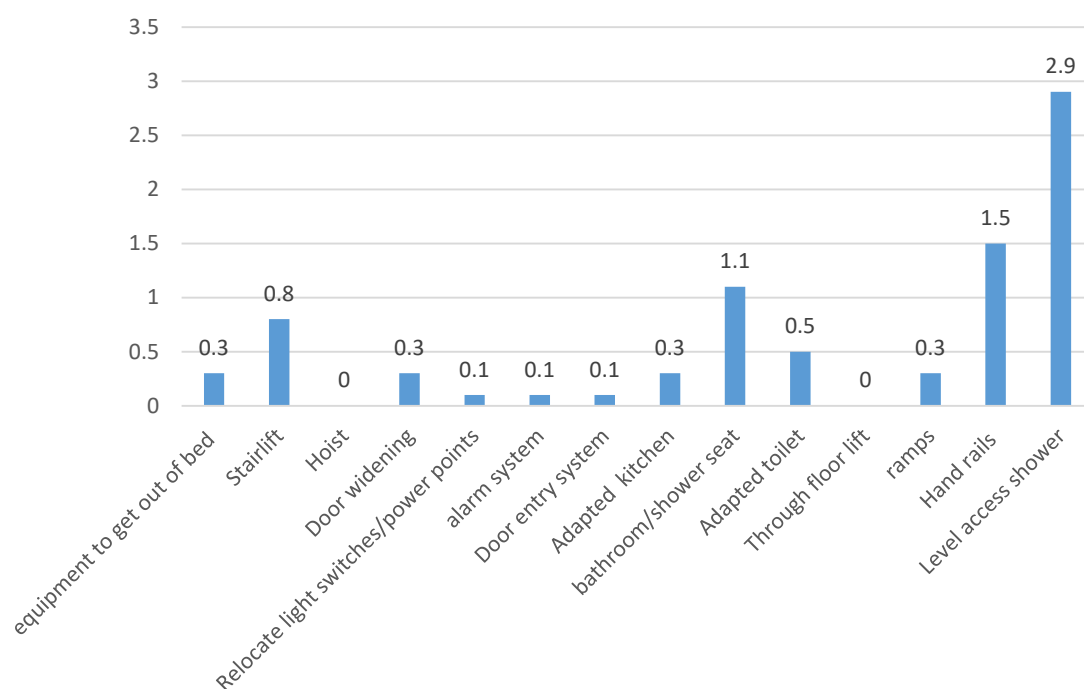
Table 34 shows that the respondees to the HNDA questionnaire have had over 1000 adaptations to their homes while 59 households require an adaptation to meet their housing needs. The table also highlights the number of households which need each adaptation with 21 households needing a level access shower.

**Figure 7.5: Equipment and adaptations that wheelchair users in Argyll and Bute require in 2020.**



Source: Questionnaire of wheelchair users on the waiting list 2020

**Figure 7.6: Percentage of households in Argyll and Bute who require adaptations by type 2019.**



Source Argyll and Bute HNDA Household survey 2019

**Table 7.10: highlights the number of households who have equipment and adaptations and those who need equipment or adaptations but they do not have that equipment or adaptation.**

Equipment or Adaptation	Households who have this equipment or adaptation	Households who need this equipment or adaptation but do not have
Equipment to get out of bed	31	2
Stair lift	21	6
Hoist	12	0
Door widening	16	2
Relocate light switches/power points	8	1
alarm system	72	1
Door entry system	38	1
Adapted kitchen	4	2
bathroom/shower seat	195	8
Adapted toilet	104	4
Through floor lift	5	0
ramps	49	2
Handrails	282	11
Level access shower	210	21
Total	1047	59

Source: Argyll and Bute HNDA Household survey 2019

## 7.4 Future estimates of unmet housing needs

Looking to the future it is estimated by Horizon Housing that the number of wheelchair user households with unmet housing need in Scotland by 2024/25 will equate to 29,424 wheelchair households. Table 35 extrapolates this figure for Argyll and Bute, where it is estimated that by 2024/25 there will be 498 wheelchair users with unmet housing need.

**Table 7.11: Estimated level of unmet housing need in Scotland and Argyll and Bute by 2024/25**

	Scotland	Argyll and Bute
2014/15	17,226	290
Projected 2019/20	22,514	376
Projected 2024/25	29,424	498

Source: Still Minding the Step<sup>24</sup>

However, table 35 estimates that Argyll and Bute will have 376 households with unmet housing needs in 2019/20 but this is around 9 times higher than the Housing OT's estimate of current unmet need in 2020 identified from the HOMEArgyll waiting list where only 43 wheelchair households have unmet housing need. Therefore, the estimate for 2024/25 may be an accurate estimate for Scotland as a whole but is likely to be a significant overestimate of unmet need in Argyll and Bute.

## 8.0 Conclusion and key messages for LHS

First and foremost, wheelchair users are not a homogeneous group. Some wheelchair users live with their family and require large family homes, some wheelchair users are new emerging households moving to their first home and need small starter homes. These wheelchair users will need to be able to access facilities such as schools, employment and other facilities. Other wheelchair users will be older frail people or people with additional needs and in these cases their home needs to be situated in a location where they can access support networks and be in close proximity to those who provide care.

For some wheelchair users supplying a fully liveable wheelchair home will meet their housing needs; while other wheelchair users have other conditions so providing the right house on its own will not meet all their complex needs as they may require a homecare package that is not available in that location or they require supervision and more comprehensive support. Wheelchair users need choice in the tenure, size, and location of their home and so wheelchair housing provision cannot be a one size fits all.

The shortage of suitable properties coupled with the lack of choice in terms of tenure, size and location all contribute to wheelchair users having unmet housing needs. It is estimated that the number of wheelchair users with unmet

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<sup>24</sup> Source: 2007/2008 EHS data was used to calculate an average annual growth rate. This was then applied going forward to 2024/25.

housing need on the HOMEArgyll waiting list is 43 wheelchair users. This is only a ninth of the estimated unmet need outlined by ‘Still minding the step’. There are many reasons for this discrepancy; for example, wheelchair users who only use their wheelchair outside have been omitted from this estimate.

Although they do not use a wheelchair inside, they may still require a wheelchair house as walking frames and other mobility equipment can have the same space requirements. In addition, some wheelchair users with unmet housing need are not on the HOMEArgyll waiting list as they know or believe there are no suitable wheelchair housing options in their area and so their housing needs will not be recorded.

Based on the evidence and analysis set out in this paper the newly arising need, for wheelchair housing will amount to around 70 new homes by 2026. This need would be evenly split across affordable rented properties and open market housing for home ownership. The total number of units required due to backlog need (28 units) as well as the new and emerging need (72 units) would total a 100 units. Table 8.1 outlines the number of units required in each HMA. (It is important to note that this table states that the total number of additional units would be 98 as opposed to the 100 units stated above. This is due to Mid Argyll and Mull & Iona having a larger provision of wheelchair housing relative to the population which means that they currently have an oversupply of wheelchair homes. Therefore this surplus has to be subtracted from the estimated number of new wheelchair units needed over the next 5 years). The bulk of the need would be in Helensburgh and Lomond which would require 31 wheelchair houses from 2021-2026 although Lorn and Cowal require 19 and 16 wheelchair units respectively.

**Table: 8.1: Number of wheelchair housing units needed from 2021-2026.**

HMA	Mismatch between population share and share of wheelchair housing	Backlog need by HMA	Total number wheelchair houses needing to be built
Bute	-3%	-0.2	7
Coll & Tiree	1%	0.0	1
Cowal	9%	0.4	16
Helensburgh & Lomond	23%	0.9	31
Islay, Jura & Colonsay	1%	0.0	4
Kintyre	-3%	-0.5	9
Lorn	0%	0.1	19
Mid Argyll	-13%	-1.8	9
Mull & Iona	-15%	-1.7	2

Source: Calculation of need using data within this paper

It is estimated that there will be demand from 2026 to 2030 for an additional 33 units.



The findings from this paper is that there is a need for 7% of homes to be suitable for wheelchair users. The council's current targets for new build wheelchair accommodation is 5% of all subsidised new build housing delivered via the SHIP and a further 5% will be targeted at other forms of specialist provision, which may also be suitable for wheelchair users as well as other households with other health conditions and particular needs. In addition, the council will identify in-sit solutions of existing stock, as well as encourage mainstream stock to be built in flexible way which allows simple adaptations of the property to make it suitable for wheelchair users. Finally, the LHS should investigate options to provide wheelchair housing through other models and tenure types.

To tackle wheelchair users housing needs the LHS needs to address the following:

**a) Recording the number of wheelchair users and the number with unmet needs**

Given the variation in data about disabled people with prevalence rates ranging from one in five to one in three depending on the definition and data source used. There is a need to undertake further research and to continue to monitor evidence to enable a better understanding of the nature and scope of wheelchair use within Argyll and Bute.

Obtaining accurate data on wheelchair users with unmet housing needs is particularly challenging as some of them are not on the HOMEArgyll waiting list. The reasons for this are either because they know that there are no suitable homes in their area, or they are living with family and hence their housing needs are hidden. Continuing to undertake focused work with Health and Social Care Partnership and the Housing OT could address some of these issues and help to improve the evidence base.

**b) Audit of specialist housing stock to determine if it is fit for purpose.**

This paper has highlighted that many wheelchair users do not consider that their home meets their needs despite their house being categorised as suitable for a wheelchair user. For example, we may consider that a level access ground floor flat is suitable for a wheelchair user however if the wheelchair user has co-morbidities, then this may not necessarily be the case.

In addition, it could be assumed that there is no demand for additional wheelchair housing if some wheelchair housing in the area is void or has been difficult to let. However, it maybe that the unit does not meet the particular needs of the wheelchair users. This was highlighted through the consultation process as some wheelchair users considered that they were allocated a home because it was designated as a wheelchair house and they were in a wheelchair even although the accommodation did not match their specific needs. The LHS should consider recommending that an audit of specialist housing provision is undertaken to assess if it is a fit for purpose in the 21<sup>st</sup> Century. Considerations should be given to how to link into the Home2fit register of private sector specialist housing.

**c) Flexible lifetime homes which meet changing needs:**

The report 'Still minding the step' highlighted the fact that there is a tendency to see wheelchair housing as a specialist provision which is linked to care and support however many wheelchair users do not require care or support. They just require a home that is designed to allow them to function independently.

Building and repurposing properties to accessible standards is not only attractive for those with mobility issues but research has shown that 47% of the public say they would be more likely to consider moving to a property if it had a downstairs bathroom. These mainstream homes could be designed in a way that meets both mainstream expectations but can also be easily adapted for wheelchair users. For example, although the bathroom has a bath fitted, it could incorporate a wet-room floor and be large enough to turn a wheelchair or walking frame, so you simply remove the bath and have a wheelchair accessible shower room. Another example would be to design the structural elements of the house in such a way that it is easy to install a through-floor lift as has been done in the Dunbeg development.

The LHS should investigate if the Local Authority could use the SHIP programme and other possible levers to encourage developers to design mainstream housing not only to accessible homes standards but also to be designed in a way that it can also be easily adapted to wheelchair housing. As people age, they are more likely to require mobility equipment, 15% of Argyll and Bute's population have mobility issues and people with mobility issues often require the same space standards as a wheelchair user. Providing flexible whole-life houses addresses many of the issues that wheelchair users and people with mobility issues face such as not wishing to leave the home they have lived in for many years or the community which they are reliant on for friends and support.

**d) A specialist housing strategy**

Currently specific housing is developed for the following groups:

- wheelchair users,
- older people,
- frail elderly,
- Dementia sufferers and
- people with Autism

However, some of these groups overlap and so the housing provision must be flexible enough to meet the individual's complex needs or is able to be easily adapted to meet these individuals' needs. Further work needs to be done to investigate the role flexible homes could play in meeting unmet housing needs. This investigation should not only consider the bricks and mortar but should assess the opportunities to maximise technology and creative delivery models.

All the above could be addressed by developing a specialist housing strategy. The LHS should consider if this would be appropriate and if so, the strategy should be developed through partnership working with the Health and Social Care partnership, the Housing OT, local umbrella organisations and wheelchair users themselves.

**e) Maximising opportunities for funding for adaptations and ensuring that adaptations are sustainable.**

Wheelchair users may choose to stay in their current home due to the lack of wheelchair homes in their location and in these cases, adaptations are often required. It is, however, important to note that not every home is suitable for adaption. The Housing OT post allows early action to be taken to identify an individual's clinical needs and to assess whether the property could be suitably adapted to fulfil the needs of the wheelchair user. The LHS should consider how to maximise funding for adaptations and should promote partnership work to ensure that these adaptations are sustainable.

**f) Changing age profile emphasises, the importance of more housing provision in the rented sector**

The evidence outlined in this paper suggests that the profile of wheelchair users in Argyll and Bute may be becoming younger. Younger wheelchair users according to research findings have vastly different needs to older people who use wheelchairs. Argyll and Bute has a higher proportion of 16–34-year-olds with a disability than Scotland as a whole. This age group, in general, are less able to afford to buy a home and hence will need to rent. This reliance on rental properties is also evidenced by the fact that home ownership among disabled people is decreasing whereas non-disabled people's rate of home ownership is increasing. The LHS should consider the provision of social rented wheelchair housing but also explore the viability of other tenures.

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Scottish Government, 2017 'Scottish Housing Condition Survey'.

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## Appendix 2: Housing for Varying Needs Design Standards for Wheelchair housing

Most design criteria are a 'basic' requirement, but a few additional design criteria are given as 'desirable', which are of benefit to many people and should be included if possible.

ELEMENT	DESIGN CRITERIA	Basic	Desirable
<b>Access to individual dwellings</b>	• Step-free access from road pavement and parking space to dwelling entrance	•	
	• Access paths at least 1200mm wide	•	
	• All other paths within curtilage 1200mm wide		•
	• All other paths within curtilage 900mm wide with widening to 1200mm at turns	•	
	• Gates of suitable width	•	
	• Step-free entrance	•	
	• Platform of suitable size at the door	•	
	• Clear space beyond the handle edge of the door	•	
	• Doorbell/entry phone at suitable height	•	
	• External light at entrance	•	
	• Canopy or porch	•	
	• Covered car space in-curtilage or within 15 metres of entrance	•	
• Charging space for electric wheelchair	•		
<b>Access to blocks of flats</b>	• Step-free access from road pavement and parking space to entrance	•	
	• All paths at least 1200mm wide	•	
	• Step-free entrance	•	
	• Steps in addition to ramp where steeper than 1:15 or rising more than 400mm	•	
	• Platform of suitable size at the door	•	
	• Clear space of at least 550mm beyond the handle edge of the door	•	
	• Ramp and/or steps of suitable design	•	
	• Doorbell/entry phone at suitable height and position	•	
	• External light at entrance	•	
	• Canopy or porch at entrance	•	
	• Car space within 15 metres of entrance	•	
• Covered car space within 15 metres of entrance		•	
<b>Communal Access areas, stairs and lifts</b>	• All doors with clear opening width of at least 840mm	•	
	• Level threshold	•	
	• Door ironmongery of suitable design	•	

	•Door closers of the adjustable delayed action type	•	
	•Area inside the entrance door and circulation areas allow for wheelchair turning and manoeuvre	•	
	•Entrance door positioned with space of at least 550mm beyond the handle edge	•	
	•Handrails on both sides of circulation area	•	
	•Handrails of suitable design	•	
	•Any lift is fully usable by disabled people	•	
	•Lift with internal dimensions of 1400 x 1600mm		•
	•Communal areas with features to help those with visual impairment	•	
	•Signage suited to people with visual impairment	•	
<b>Entrance doors to individual houses or flats</b>	•All entrance doors with clear opening width of at least 840mm	•	
	•Level threshold	•	
	•Allowance for recessed doormat	•	
	•Door ironmongery of suitable design	•	
	•Any door closer has adjustable delayed action	•	
	•Area inside the entrance door and circulation areas allows for wheelchair turning and manoeuvre	•	
	•Entrance door positioned with a return of at least 300mm beyond the handle edge	•	
	•Entrance door positioned with a return of at least 550mm beyond the handle edge		•
	•Letter box or bag behind the letter plate	•	
	•Shelf beside the door	•	
	•Any lobby is of sufficient size	•	
<b>Circulation spaces and internal doors</b>	•Passages of sufficient width	•	
	•Doors positioned and hinged to assist circulation	•	
	•Doors positioned with a return of at least 300mm beyond the handle edge	•	
	•Doors positioned with a return of at least 550mm beyond the handle edge		•
	•Pass doors with clear opening width of at least 800mm	•	
	•Pass doors without threshold plates	•	
	•Doors opening beyond 90°	•	



	•Door construction allows pull handles to be fixed at different heights	•	
	•Door ironmongery of suitable design	•	
<b>Living and sleeping areas</b>	•Space for wheelchair turning in all apartments	•	
	•Living room and dining space of a size that allows for notional furniture and circulation 'path'	•	
	•Bedroom(s) of a size that allows for notional furniture and circulation 'path'	•	
	•Beds for wheelchair user can be accessed on three sides	•	
	•Double bedrooms allow for twin beds	•	
	•Built-in clothes hanging space		•
<b>Storage</b>	•Provision is made for adequate and accessible general storage	•	
	•Storage space is allowed for special equipment	•	
<b>Kitchen</b>	•Layout with continuous sequence of worktop-sink- worktop-cooker/hob-worktop	•	
	•Space in front of fittings and appliances to turn a wheelchair	•	
	•Worktops are of suitable design	•	
	•Adequate and convenient storage	•	
	•Kitchen fittings are of suitable design	•	
	•Sink of suitable design	•	
	•Adequate space is allowed for cooking and other appliances	•	
	•Splash back to worktops and sinks	•	
	•Slip-resistant floor finish	•	
	•Windows	•	
	•Taps	•	
	•Electrical services	•	
	•Laundry/utility area		•
<b>Bathroom</b>	•Size and layout allow for full use by a person in a wheelchair	•	
	•Outward opening door	•	
	•Allowance for a ceiling mounted hoist	•	
	•Fittings of suitable design	•	
	•Floor gulley	•	
	•Allowance for fixing grab and support rails to walls	•	
	•Walls with adequate area of impermeable finish	•	
	•Slip-resistant and sealed floor finish	•	

<b>Additional WC</b>	• Provided in dwellings for four or more people	•	
	• Accessible in a wheelchair	•	
	• With transfer space beside WC		•
<b>Finishes</b>	• Plastered exterior corners to walls reinforced or splayed	•	
	• Slip-resistant floor finish in kitchen, bathroom and any WC compartment	•	
<b>Windows</b>	• Design allows view from seated position		•
	• Controls are easily and safely accessed, reached and operated	•	
<b>Heating and water services</b>	• Suitable heating system	•	
	• Heating and ventilating controls easily accessed, reached and operated	•	
	• Exposed hot water pipes lagged	•	
	• Lever taps	•	
<b>Power and communication</b>	• Allowance for additional future wiring	•	
	• Sockets, switches and controls of suitable design and at suitable location and height	•	
	• Where provided and form of alarm call points located where they can best be reached	•	
<b>External areas</b>	• Paved sitting out area	•	
	• Raised planting bed		•
	• External clothes drying has adjustable line		•
	• Refuse storage of suitable design	•	