

KANTAR PUBLIC



Department for Levelling Up,
Housing & Communities

Social Housing Quality Resident Panel – Disability Support and Social Housing

Panel Member Report – Wave 2 Focus Groups

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Introduction and summary of findings

Background to the Social Housing Quality Resident Panel

The Social Housing Quality programme seeks to make long-lasting change to the social housing sector and improve the lives of social housing residents in England.

The Department for Levelling Up, Housing and Communities (DLUHC) has established the Social Housing Quality Resident Panel. This panel brings together around 250 social housing residents from across England to share their views with the Government and ministers on improving the quality of social housing.

DLUHC is committed to listening to social housing residents, making sure residents have their voices heard, with policy makers reflecting and acting on what they hear. Kantar Public are running three waves of engagement with members of the Social Housing Quality Resident Panel. Each wave of engagement involves an online community and a series of focus groups.

Background to the focus groups

This report summarises the main findings of the second wave focus groups. These focus groups explored disabled panel members experiences of social housing.

Two focus group workshops took place on Saturday 15 and Tuesday 18 July 2023. They were conducted online via Zoom. The focus group workshops lasted 2 hours and in total 53 panel members attended.

Panel members that have a disability that impacts their experience of social housing were invited to the focus group workshops. Panel members that care for a disabled person in their household and whose care is impacted by living in social housing were also invited to take part.

Each focus group workshop involved 3-6 smaller break-out groups of up to 7 panel members. Each group was facilitated by a Kantar Public moderator. Officials from DLUHC attended the workshops to observe the sessions. For further information about the focus groups and the demographic breakdown of panel members, please refer to Appendix 1.

Summary of findings

A total of 53 panel members attended the focus groups. Panel members who attended either were disabled or were carers for a disabled social housing resident. This section is a summary of the main insights from their contribution.

Panel members described the importance of social housing being designed to meet the needs of disabled residents, and of additional support and adaptations being available to disabled residents. They said this had significant positive impacts to their lives by improving their wellbeing, health, safety and independence.

However, many panel members said that their homes were not suitably accessible and as a result, did not meet their needs. In some circumstances panel members felt their homes could be unsafe. Panel members said unsuitable social housing had impacted their:

- ability to move around easily in their homes
- ability to go outside their home easily to travel to shops and socialise
- ability to carry out essential tasks in their homes, such as cooking and personal care
- emotional wellbeing and mental health
- physical health
- finances, through having to pay for home adaptations

There was mixed awareness about the disability support they were entitled to receive in their homes from their landlords and others. There was also mixed awareness about how to access support.

Some panel members had good experiences accessing support and getting adaptations made to their home from their landlord and others

(such as healthcare services). They said it had been easy to organise, quick to implement, and they were happy with the quality of the work.

However, many panel members reported fewer positive experiences of accessing support. These experiences included:

- landlords and local authorities providing unclear and incorrect information on support available and the process for requesting it
- requests for support being difficult and time consuming to make due to complicated bureaucracy
- difficulties communicating with landlords about support due to long telephone wait times and lack of staff training on the needs of residents with disabilities
- long wait times to process requests for support and start the necessary works
- unsatisfactory support received, such as poor-quality home adaptations and building materials being left in and around properties causing potential hazards
- not receiving the requested support or home adaptations
- needing to relocate to access support where adaptations could not be made to current homes, causing emotional upset to residents who had lived in their homes for a long time

Panel members described ways they thought social housing could be improved:

- housing provider staff to have improved training on disability
- more resident consultation and engagement
- greater funding for social housing to ensure disabled residents' needs are met
- housing providers to focus more on residents' needs and wellbeing
- clearer communication between landlords and residents' groups
- improved design of social housing properties
- reduced repair wait times and prioritising repairs for disabled residents (as their health and wellbeing may rely heavily on the repairs being made)
- simplified processes and systems for accessing support

- improved awareness and training amongst social housing contractors on disability to help them understand the needs of disabled residents when they access their homes to undertake work

The importance of disability support for social housing residents

Importance of disability support

The panel members who attended the focus groups had a range of disabilities; many had multiple disabilities. These disabilities included:

- physical disabilities and mobility impairments
- long term health conditions
- sensory impairments, such as visual and hearing impairments
- learning disabilities and neurodiversity
- neurocognitive disorders and mental health conditions

Many panel members had homes that were suited to their needs, where support was being received and physical adaptations had been made.

For example, panel members had:

- wet rooms and ramps
- additional kitchen equipment
- support from staff to help them live independently
- gardeners to help maintain outside space
- widened doorways
- stairlifts
- mental health buddies

Panel members described the importance of social housing being accessible, and of additional support and adaptations being available to disabled residents. They said this had significant positive impacts to their lives by improving their wellbeing, health, safety and independence.

“ I know this bungalow is not perfect, but the fact that we were put into a bungalow and a situation that was more suitable, I can't be more thankful. It's totally changed mine and my wife's lifestyle and our ability to cope. Having a bungalow and a wet room in it is great.

- Panel Member

However, many panel members said that their homes were not suitably accessible and as a result, did not meet their individual needs. In some circumstances, panel members felt their homes were not safe. Panel members said inaccessible social housing had impacted them in the following ways:

1. Their ability to move around easily in their home and to leave their home to travel to shops and socialise

This was primarily mentioned by residents with mobility disabilities, such as those in wheelchairs.

Panel members described:

- not being able to easily access their home when lifts are not working because mobility conditions impacted their ability to use stairs
- not having rooms and corridors that can be easily used with a wheelchair, where larger open plan kitchen living areas and wide corridors would be helpful
- having to struggle to open and close heavy communal fire doors because they use a wheelchair or have mobility impairments
- not being able to easily leave their home while waiting to have wheelchair ramps fitted

“ I can only manage the stairs because they've got a lift and if that lift was to break down, I dread to think. I couldn't cope.

– Panel Member

“ For a long time I felt trapped within my home because I couldn't get out [due to heavy fire doors].

- Panel Member

2. Their ability to carry out basic home tasks and personal care

Panel members described:

- not being able to wash up because kitchen sinks were positioned in the corner of kitchens and therefore inaccessible to a wheelchair user
- not being able to easily wash themselves because homes do not have wet rooms which are needed for those with certain disabilities
- not being able to easily plug things in and turn lights on/ off when using a wheelchair where plug sockets are too low and switches are too high on walls

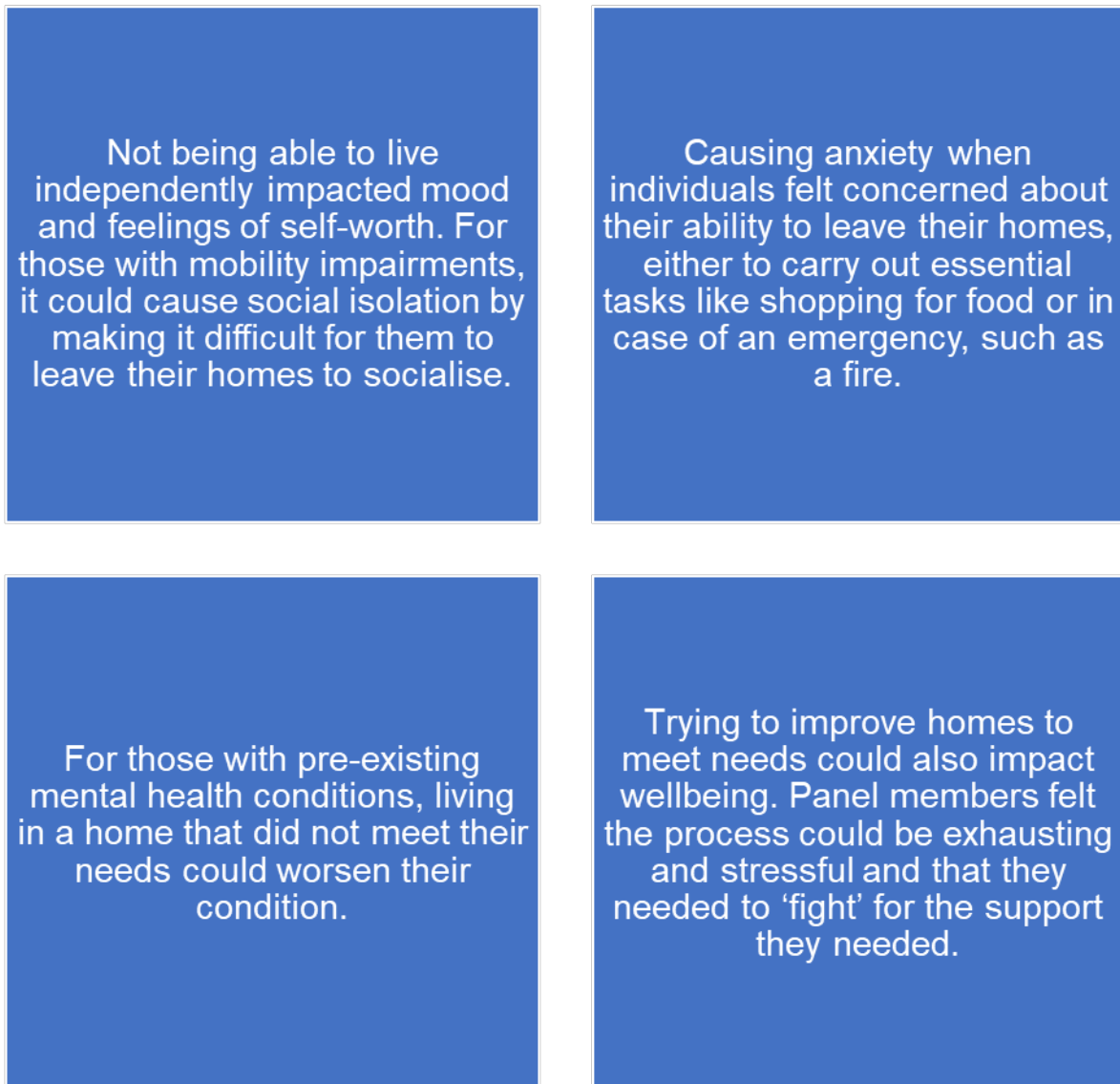
3. Their emotional wellbeing and mental health

Panel members said that living in housing that was not adapted to meet their needs, or where they did not receive suitable support, impacted wellbeing and mental health.

“ I felt very isolated, even from the other people that live here. We have a fantastic community, they have conversations in the hallways, and I wasn't able to be involved in those. I could hear them in the hallway, but I couldn't get out there. At one point it made me feel worthless as a tenant.

- Panel Member

Figure 1: The impact of unsuitable homes on disabled residents' wellbeing and mental health



4. Their physical health

Some panel members who lived in housing they felt was unsuitable for their needs said that their health conditions had worsened as a result. One panel member described how living in a damp flat had worsened their respiratory conditions. Another described how the damp and mould in their home had impacted their child's eczema and their own joint condition.

5. Their finances

Some panel members had self-funded home adaptations. This was either due to their homes not being adapted to their needs; or due to their lack of awareness of the support they were eligible for.

One panel member had paid to make their garden and driveway accessible for their disabled partner; and another paid to have a wet room fitted. They had self-funded these home adaptations because their landlord had said it was not possible to make the home adaptation or they were ineligible for financial support to undertake the works.

Another panel member said they paid to have an area in front of their home gravelled because their landlord had not maintained the grass to enable wheelchair use.

Experiences of accessing disability support

Awareness of support

Housing disability support can include a range of things, such as access to supported homes; home adaptations (e.g. grab rails, wheelchair ramps and wet rooms); and personal emergency evacuation plans.

There was mixed awareness amongst panel members of the disability support they were entitled to receive in their homes from their landlords and others. There was also mixed awareness about how to access support.

Members of landlord resident panels or disability groups tended to have better knowledge of what they were entitled to. Those who had been living with a disability in social housing for a long time also had better knowledge of available support.

Regardless of awareness, panel members felt it was difficult to understand what disability support they are entitled to and how to access it.

They understood that multiple organisations work to provide support (including housing providers, local authorities, the NHS, social care services and the Department of Work and Pensions through the Personal Independence Payment). Panel members felt this complicated the system and there was a lack of clarity over who was responsible for funding different types of support.

Additionally, some panel members felt housing providers and local authorities did not always effectively communicate information about available support to residents. Where information was provided, it could be unclear and incomplete. Staff working for housing providers could also lack knowledge and be unhelpful when residents contacted their housing provider for assistance.

Positive experiences of accessing support

Some panel members had good experiences accessing support and getting adaptations made to their home.

They said it had been easy to organise, quick to implement, and they were happy with the quality of the work.

“ My quality of life has been enhanced by the fact when I've asked for help I've got it. I haven't had to battle for it. ”

- Panel Member

In some circumstances, support had been proactively provided by housing providers without residents needing to ask for it, which was greatly valued by residents.

Some panel members had experienced housing provider staff that could be highly knowledgeable about disability and disability support. These staff were able to provide expert advice on what support residents were eligible for and how to apply for it.

Positive experiences were attributed to having housing providers who:

- cared about residents' wellbeing
- did not appear to be understaffed
- had “good” contractors to carry out the necessary support

Some residents felt local authorities were better at providing support and home adaptations compared to housing associations. They thought local authorities could be held more accountable and were not driven by profit.

Panel members felt that having landlord resident panels and boards - where housing providers actively engaged with and listened to residents - led to better outcomes for disabled residents.

“ I must say that the Housing Association have a very, very positive approach to tenant involvement and really does work hard at reaching out and encouraging panels for tenants to get together to discuss their issues. ”

- Panel Member

Less positive experiences of accessing support

However, many panel members had not had positive experiences of accessing support.

1. Unclear and incorrect information

Some panel members said that housing provider staff could be unhelpful and have poor or mixed understanding of disability support. Panel members felt staff expressed a lack of interest in, and empathy towards disabled residents.

Panel members also said that information on local authority and government webpages about disability support and home adaptations could be difficult to understand and was often incomplete.

“ It depends on who you talk to [at my housing provider]. You can get completely different information...I'm constantly shocked when I ask people who are being paid large salaries to know this stuff and they don't actually know. For example, one person told me that I had to pay for all my support out of my PIP money [Personal Independence Payment] which is not correct.

- Panel Member

“ It's that lack of understanding about how people with different illnesses process different things and how differently it affects people...a lack of an awareness [from staff] that I find makes barriers.

- Panel Member

2. Requests for support being difficult and time consuming

Panel members described needing to “fight” and “jump through hoops” to receive support. As a result, requesting support often felt tiring, time consuming, and demoralising.

“ It's exhausting if you're unwell or disabled. It's really quite difficult to get the help and support you need.

- Panel Member

Many panel members spoke about the various paperwork, forms and processes they needed to complete and submit to get support. They mentioned referrals from social services, occupational therapists' reports and paperwork evidencing disability, such as health records. Panel members said that organising these appointments, completing paperwork, and submitting evidence was difficult and time consuming.

Some panel members said their requests for support and home adaptations could also be "pushed from pillar to post". They said requests would be passed between the housing provider, local authority and local health services, and between different members of staff, without much apparent progress. They felt they needed to regularly phone to check on requests and ensure that they were not "lost" in organisations' systems.

“ You just always feel like a constant fight even to do the simplest of things. Shouldn't have to fight. ”
- Panel Member

3. Having difficulties communicating about support and adaptations

Panel members reported that getting in contact with housing providers to talk about disability support and home adaptations could be difficult. There could be long telephone wait times and no direct phone numbers for relevant departments.

It was also rare for residents to have a single point of contact within their housing provider. This meant that residents often had to deal with multiple contacts who were not familiar with their disability, circumstances or needs. This meant they had to explain their circumstance multiple times to different staff. Housing officers were often perceived to be overloaded with work and were unable to offer personalised support.

Some panel members said that housing providers increasingly seem to be moving communication online (to websites, apps and resident portals) and away from telephone helplines. This was causing issues for some who struggled with online communication, such as those who are neurodivergent.

Panel members often felt that staff at housing providers had little training on disability and there was no specialised team working on disabled residents' welfare. This meant it could be difficult to communicate individual needs and requirements to staff.

“ I have autism. And I also have severe mental health. I'm in a wheelchair, and all the rest of it. But I find that with housing associations it doesn't matter which one you go with, none of them are trained for that. There's nobody all trained in mental health.

- Panel Member

4. Long wait times to access support

Panel members said it could take weeks and months after a request is made until support and home adaptations are provided.

5. Not receiving the support needed

Some panel members said they had not received the support or home adaptations they had requested.

Panel members with disabilities that are not immediately obvious to others (hidden disabilities) described requests being dismissed by housing provider staff because staff did not understand their disabilities and why support was required.

Those with degenerative conditions had made requests to have home adaptations made to pre-empt degeneration; but some had found these requests were not always actioned.

“ Like the bathroom, the neighbourhood officer just thought I wanted a new bathroom, but I said to her I'm having trouble getting into the bath... When I ask for things, I don't feel like I'm being taken seriously by my officer...Better training is needed for frontline staff [about hidden disabilities].

- Panel Member

Some panel members had simply not requested the support they needed, because they felt that requesting support could be complicated,

time consuming and mentally and/or physically tiring. As a result, they were less likely to want to, or be able to make requests.

“ When you're not well and suffering, and they're arrogant and unresponsive [housing providers] you just give up in the end [asking for support].
- Panel Member ”

6. Unsatisfactory support

When support was given, panel members said it was not always of good quality and / or did not always fully meet their requirements.

They described the behaviour of contractors. For example, leaving building materials and other mess around properties causing potential hazards; arriving at inconvenient times (or unannounced); playing loud music; and not listening to residents and therefore carrying out incorrect home adaptations.

“ It seems that people in social housing don't get work done to a standard that people in ordinary housing do. That's quite upsetting. Everybody here pays rent.
- Panel Member ”

7. Needing to relocate to access support

Some panel members needed significant adaptations that could not be accommodated for in their existing property (such as stair lifts, wider doorways and ramps). They had been told by their housing provider that they would need to move to a different property to access these adaptations.

This caused emotional upset for some panel members who had lived in their home for a long time and were a part of their local community.

“ My wife now needs an easy access bath or a wet room and all they keep saying is they will have to move us, but we've been in this house so long and we don't want to move.
- Panel Member ”

Getting it right for disabled social housing residents

Suggestions for improvement

Panel members described ways they thought social housing could be improved for residents.

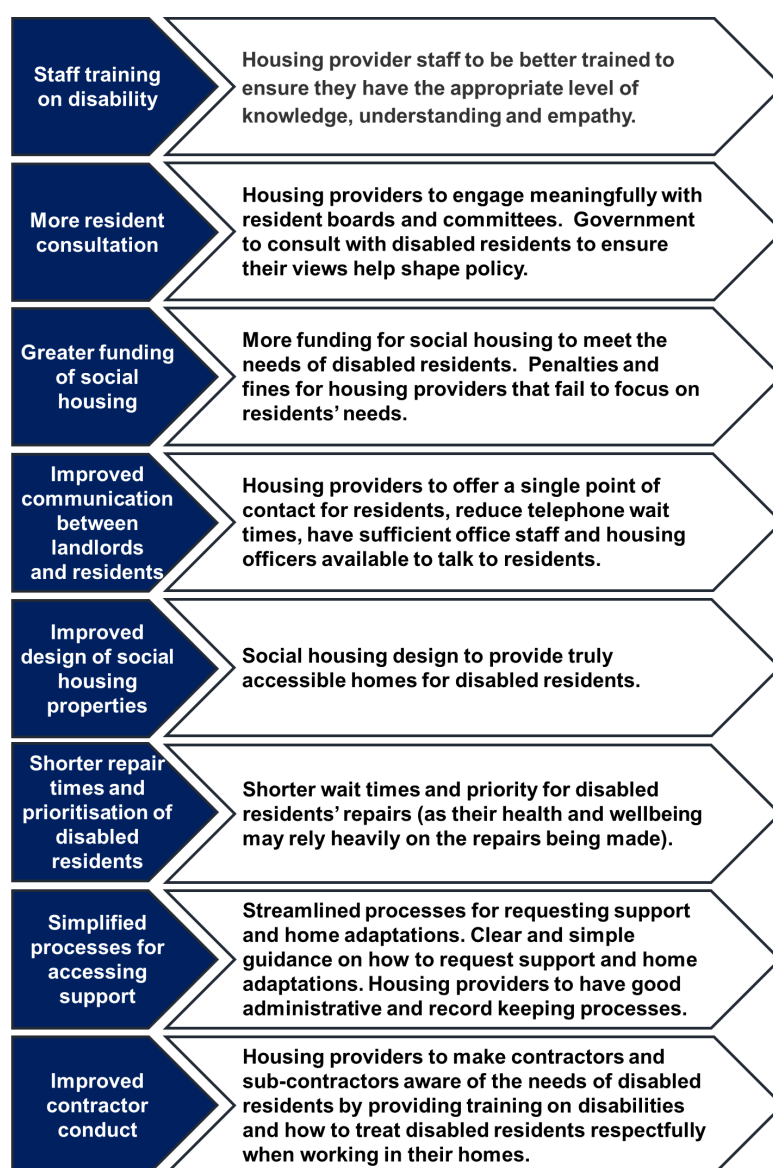


Figure 2: Panel members suggestions for how to improve social housing for disabled residents

1. Staff training on disability

Panel Members suggested:

- housing provider staff to be better trained to ensure they have the appropriate level of knowledge and skills
- training to include “soft skills” around empathy for example
- standardised national training on disability and disability support, to increase consistency of quality

“ There seems to be a lack of empathy, indifference and disinterest from many social housing landlords. ”
- Panel Member

2. More resident consultation and engagement

Panel members suggested:

- housing providers to engage appropriately with resident boards and committees because this allows housing providers to understand residents’ views and experiences, including those of disabled residents
- government to run more consultations with disabled residents, such as via the Social Housing Quality Resident Panel. This will ensure they consider disability in policy making to ensure residents’ views feed into decision making. Panel members also said that the residents on landlords’ boards and committees contribute valuable suggestions and recommendations to housing providers

“ For the majority of people in positions of power, disability does not enter their heads. ”
- Panel Member

3. Greater funding of social housing and an increased focus on residents' needs

Panel members suggested:

- social housing should receive more funding to adequately address the needs of disabled residents
- social housing providers to focus on the needs of residents rather than profit
- the Regulation of Social Housing to be stronger; with strict fines and penalties for social housing providers who fail to focus on the needs of the residents

“ One of the things I've noticed is that there's an enormous difference between living in local authority housing, and having a [housing association] social landlord, who is maybe more interested, financially, not so interested perhaps in people's wellbeing. ”

- Panel Member

4. Improved communications between landlords and residents

Panel members suggested:

- various communication channels to be offered to suit different disabled residents' needs, such as telephone, online and face-to-face
- face-to-face contact to be offered because it is more personal than online communication and allows landlords to better understand disabled residents' circumstances
- shorter telephone wait times
- having a single point of contact for residents at their housing provider who residents can speak to about support needs
- more housing officers to be employed, who are less overworked and can spend time getting to know residents
- more resident disability support groups to be created to help residents understand what support they were entitled to and get information on how to apply for it from fellow residents

5. Improved designs of social housing properties

Panel member suggested:

- housing to be designed so that it is truly accessible to disabled residents. This is vital considering that there is a high proportion of disabled people living in social housing

Some panel members said the unsuitability of their home was due to poor housing design that did not fully consider the needs of disabled residents. They felt designers often only tried to accommodate disabled people as a “box ticking exercise” to meet necessary housing standards, rather than because they wanted to create truly accessible homes.

6. Shorter repair wait times and prioritisation of disabled residents

Panel members suggested:

- shorter repair wait times and for disabled residents’ repairs to be prioritised

Panel members explained that repairs taking a long time to complete can have particularly negative impacts on disabled residents. This is because their health and wellbeing may rely heavily on the quality of their home. They said there could be a lack of understanding by housing providers of the urgency of repairs to meet the needs of disabled residents.

For example, one wheelchair user had to wait several months to get their wet room fixed. Another reported that broken lifts would take a long time to fixed despite wheelchair users living on the first and second floor of the building.

“ Locally and nationally, I find that nobody in housing seems to understand disability or the vulnerabilities that it brings, especially in the likes of repairs. I’ve just done a review of damp and mould...when you’ve got disabilities...somebody with chronic obstructive pulmonary disease can’t be treated the same as a person that doesn't have it. It has to be fixed straight away, it can’t be left for weeks or months.

- Panel Member

7. Simplified processes and systems for accessing support

Panel members suggested:

- processes for requesting support and home adaptations to be streamlined, such as the information collected as part of applying for the Personal Independence Payment should be shared with housing providers to reduce time and effort or resharing information
- guidance on how to request support and adaptations to be simplified
- housing provider staff to be better trained so they can offer better support to residents
- all housing providers to ensure good administrative systems and record keeping processes to record residents' disabilities on their systems effectively

“ They [housing providers] should make a detailed register of individuals, what their problems are, what they need and cross reference that with where they live, what adaptations they've got, what adaptations they're likely to need in the future, so that you just put in the name and you get all that information straight away.

- Panel Member

8. Improved contractor conduct

Panel members suggested:

- contractors to be better trained on disability and how to treat disabled residents respectfully
- housing providers to make contractors aware of the needs of disabled residents to help ensure they behave in an appropriate and sensitive way when dealing with disabled residents

Thank you

Further information

If you have further questions, you can get in touch with us at:

DLUHC

Email: residentpanel@levellingup.gov.uk

Kantar Public

Website: <https://www.kantar.com/uki/contact>



Appendix 1: Methodology and further information

Recruitment and method

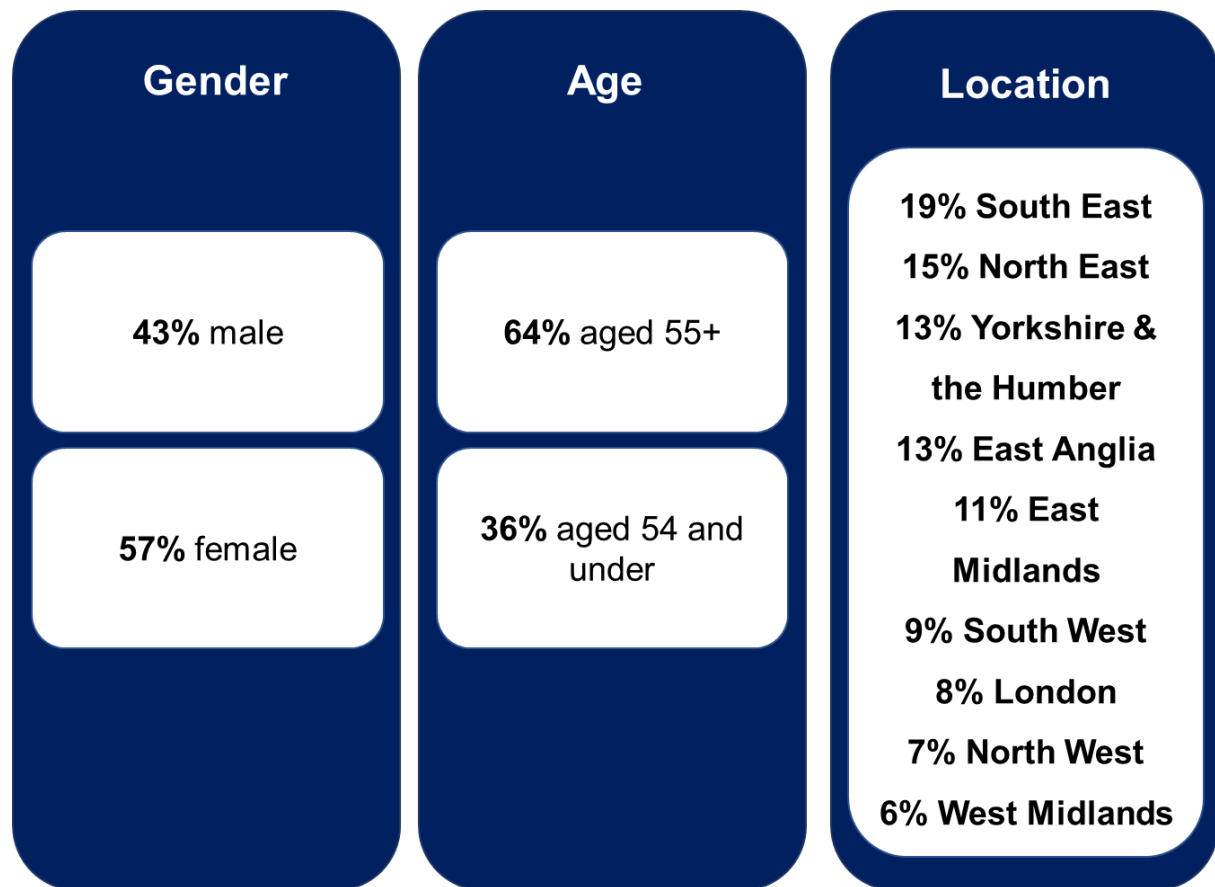
The focus group workshops sought to understand:

- disabled social housing residents overall experiences of living in social housing as disabled residents
- how being disabled impacts experiences of social housing and everyday life
- how disabled residents have found accessing support and the impact of this support
- what panel members think is currently working well for disabled residents living in social housing
- how panel members think experiences of social housing could be improved for disabled residents

Sample composition and segmentations

This section summarises the demographic sample of all 53 panel members who attended focus group workshops.

Figure 3: Demographic information of panel members who attended the focus group workshops



Q. Please tell us your gender

Q. What is your age group?

Q. Where do you live?

Base: All panel members that attended the focus group workshops (53) Note: This data was collected at recruitment stage for the panel