BALANCED RETIREMENT COMMUNITIES?

a case study of Westbury Fields

FINAL REPORT
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April 2007
THANKS ARE DUE TO THE FOLLOWING FOR THEIR VALUABLE CONTRIBUTION TOWARDS THIS RESEARCH STUDY:

• All of the residents and staff who gave up their time to take part in the research
• The St Monica Trust for funding the research
• James Nichol, University of the West of England, for his help with the data collection
• Members of the project advisory group for their invaluable support
• James Nichol, University of the West of England, Bristol

“I think it’s a great idea because you do feel like a person and you don’t feel as if you’re on your own, trying to cope on your own and that’s a great thing.”

VERY SHELTERED HOUSING RESIDENT, WESTBURY FIELDS
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Although the concept of retirement villages has existed in the UK for at least 15 years, Westbury Fields was the first retirement community to provide a flexible choice of tenures, resulting in the village being available to a range of older people. The scheme has been a success, attracting many visitors including the UK’s minister responsible for social care. It is not only the flexible model of tenure which has attracted attention; the use of capital receipts from the lease purchase accommodation to fund the capital cost of building the entire development has also been of particular interest.

Traditionally, the St Monica Trust only engaged with rented accommodation. However, as the UK faces a significant growth in its older population in the coming years, creative and innovative solutions are essential. Consequently the Trust now offers residents the opportunity to acquire retirement housing on a lease purchase basis. This choice will become an increasingly important concept among the retired population, as it is now estimated that home-owners outnumber tenants for the first time – and the figure is likely to rise to 75% of the population aged 65 years or over being owner-occupiers by 2010.

Westbury Fields is home to around 230 people with an age range from 55 to 102 years. On the site there is a 60 bed care home which includes a specialist dementia unit and a short-term care service. Further, the village has 149 one, two and three bedroom retirement apartments and a range of positive communal facilities, which offer the possibility of a positive lifestyle. Apartments are available to lease purchase, to rent at social housing levels, and to part rent/part purchase (shared equity). This flexible model of tenure has ensured that Westbury Fields is available to older people from a wide socio-economic group. The renting of apartments at Westbury Fields is operated in conjunction with Bristol City Council who have the right of nomination for vacancies. This close working partnership has proven positive for all concerned.

Whilst the research has identified a range of issues at Westbury Fields, our findings also indicate a significant degree of customer satisfaction. In particular, residents were pleased with the flexibility of support offered and the control they maintained in relation to their living arrangements. The commissioning of Westbury Fields was a brave and imaginative step for the Charity, much has been gained and much has been learnt. The service continues to evolve and has, not only informed the development of our other services, but has been of significance in the wider field of services for older people.
Comment
Robert Bernays, President

The St Monica Trust prides itself on being a learning organisation and this research has helped us to make some changes to the environment at Westbury Fields and to focus our staff, our residents and ourselves on ways of improving the way the community helps people to live independent, dignified and fulfilled lives. It has also influenced the planning of our subsequent retirement communities.

We remain convinced that retirement communities are stronger if they have a range of dependencies and tenures. In an ideal world, they would also be an integral part of the local community, giving a wide range of age, occupation and need. However, a balance is required to give the older and frailer residents the security and the variety of services which maximise independence - shown by this report to be the most highly valued feature at Westbury Fields.

Since this report was presented, the Trust has completed Monica Wills House, a development of 121 very sheltered apartments in an urban regeneration scheme in south Bristol and the Charity is planning a further retirement village in North Somerset.

At Monica Wills House, the whole development was opened at the same time and the rented, shared equity and lease purchase flats were scattered through the building with no outward sign of which was which. The communal facilities and activities are positioned to be equally accessible to all. Although the apartment block is secure (porter controlled with CCTV etc) the shops, buses, young people, family housing etc are just outside the door. This is very popular with people who have lived all their lives in the bustle of the city.

Since this report was presented, the Trust has completed Monica Wills House, a development of 121 very sheltered apartments in an urban regeneration scheme in south Bristol and the Charity is planning a further retirement village in North Somerset.

The Trust is keen to provide a range of options for its residents and, in due course, the North Somerset development will provide an environment for those who are used to a more rural and quieter way of life.

When studying retirement communities it is important to remember the restrictions of the planning process and the shortage of affordable land. At Westbury Fields, the planners required a high quality cricket pitch on the site, which adds greatly to the amenity of the area, but which meant that the layout could not accommodate equal access to all the facilities from all parts of the site. At Monica Wills House there is little outside space and, although the Trust has constructed a large and pleasant roof garden, the ideal layout could not be achieved.

Until society is prepared to allocate adequate land for the use of the elderly and disabled (as it does, through the planning system, for schools etc) we will have to accept compromises in design. At least we are now understanding much more (as a result of this report and others) about the vital characteristics of retirement communities. This is important because the St Monica Trust believes that these communities are likely to become more widespread.
Executive summary

Retirement communities first appeared in the UK in the 1950s as groups of privately owned residences for retired older people in relatively good health who were able to live independently. More recently the nature of retirement communities has broadened and they now include extra-care housing schemes, continuing care retirement communities, and purpose-built retirement villages. Westbury Fields, built in Bristol by the St Monica Trust in 2003, is one of the first to combine social rented housing, apartments owned through a variety of lease purchase arrangements and a care home with short term care and dementia care provision within a privately funded retirement village complex. The aim of this community for more than 200 residents is to encourage a lively, balanced community ranging from active, independent residents to those requiring a high degree of support. The University of the West of England, Bristol, was commissioned by the St Monica Trust to carry out an exploratory evaluation of the village, which was undertaken between October 2004 and March 2006.
The study
The overall aim of the study was to explore the extent to which residents with a wide range of housing and care histories and from different socio-economic backgrounds can be integrated into a single retirement community. Specific research objectives included developing a profile of residents in terms of their backgrounds and dependency levels prior to moving to Westbury Fields, exploring social networks within and beyond the village, and examining the impact of social background and dependency levels on interaction between residents. Research methods included in-depth interviews with 37 residents and eight staff, a housing questionnaire to 34 residents and the use of routinely collected data to profile the living arrangements and health/social care needs of residents.

Findings
The overall approach adopted by this study was exploratory in nature and aimed to draw out key issues rather than provide definitive answers. In considering the findings it is important to bear in mind wider issues of what makes a community and the potential elements of balance that this can include. Overall, village residents reported high levels of satisfaction. Four aspects of life at Westbury Fields were particularly important to this: independence; choice; the role of the staff; and the philosophy of care. Staff experiences of working at Westbury Fields were also positive, with great value being attributed to team working and quality of care.

A range of factors were highlighted by residents as important to maximising independence. These included flexible care and support; the role of staff; the existence of good facilities; the provision of a range of social activities; the location of the village; the availability of transport; feeling safe; and financial security. Residents expressed mixed views concerning the extent to which Westbury Fields worked as a community. There was evidence that a number of neighbourhoods had developed within the village, corresponding to the different types of housing. Many residents and staff felt that it was early days for the village in terms of being a community but that things were slowly moving in that direction. The research identified four key factors that impacted on the process of the development of a community: the physical design; the social experience; quality of life and independence; and the philosophy of care. Most residents embraced the concept of mixed tenure and dependency within the village, but for a minority such diversity was a barrier to the development of a community.

Conclusions
• Westbury Fields is an imaginative attempt to offer housing options within a retirement village that incorporate a wide range of residents with different health/social care needs and socio-economic backgrounds.
• Maximising the independence of residents is central to promoting choice, quality of life and development of a community. A range of factors are important to this process, including design and location; quality and philosophy of care; support and staff; the range of facilities and activities; and good operational practice.
• Careful attention to village layout can promote social interaction, particularly for residents with impaired mobility. In addition, the accessibility of comfortable communal areas is crucial to the development of social networks.
• The location within the village of a wide range of facilities and activities encourages shared ownership and access by residents.
• The good design of buildings and individual apartments can maximise accessibility and independence for all residents within a community.
• Careful consideration needs to be given to the impact of phased opening of accommodation on community development.
• While it is recognised that some residents appreciate the security that gates and fences provide, these can also be perceived as a barrier, particularly in relation to interfaces with the wider community.
• Facilitating residents in accessing social networks and services in the wider community requires careful consideration. The provision of appropriate transport appears to be of particular importance.
• Residents value care provision that is flexible, person-centred and inclusive, provided by well trained and fully supported staff. This can enable them to maintain their independence and interact with the community.

Westbury Fields retirement village illustrates the ways in which a number of these factors impact on the development of a ‘balanced’ community. For example, the location and layout of the village on a level site within established local communities promotes broad social integration and inclusion; the provision of a wide range of accessible facilities and activities, including a pub, a restaurant, a gym, communal lounges and computer rooms, supports independence and social networking. Customer views are integrated into service development on an ongoing basis. For example, a circular walking route was recently built around the cricket pitch in response to the suggestion of residents and lessons learnt from Westbury Fields have been incorporated in subsequent Trust developments, including a new complex in south Bristol.
Purpose built villages and other retirement communities have existed in North America, Australia and New Zealand for over 50 years, where they have proved to be very popular. For example, it is estimated that five percent of older Americans live in purpose built retirement communities and three percent of older Australians (Streib, 2002). More stringent planning regulations and a lack of space mean that most UK retirement villages are considerably smaller than their US equivalents. They also differ in terms of their focus: in the US they tend to be medically-driven and have been perceived by some as institutional (Hanson, 2001), while the focus so far in the UK has been on ‘community’ and ‘independence’. Despite the lack of detailed statistics, they are now becoming increasingly popular in the UK in response to a range of drivers, including the ageing population, the concept of ageing in place, the development of new lifestyles in older age and a general recognition of the need for greater choice and flexibility in housing options for older people (Heywood et al, 2001). There is also some evidence that retirement villages can provide a cheaper alternative to conventional residential care (Local Government News, 2003).
Retirement communities in the UK tend to focus on ‘community’ and ‘independence’. The croquet lawn at Westbury Fields has proved to be an extremely important part of life for many residents.
Retirement communities first appeared in the UK in the 1950s as groups of privately owned residences for retired older people in relatively good health who were able to live independently. However, the nature of retirement communities has broadened and they now include extra-care housing schemes, continuing care retirement communities, and purpose-built retirement villages. The first continuing care retirement village in the UK, Hartrigg Oaks, was opened by the Joseph Rowntree Housing Trust in 1998 and many more have since followed, operating on a similar model. They commonly incorporate a range of facilities together with social and recreational activities. Some communities now make provision for a broader age range and include those who are still in employment. Flexible care is typically available including home help, personal care, health care, home maintenance, eating facilities and transport. In marketing terms, retirement communities sell an image of a positive lifestyle for older people which incorporates successful ageing and the concept of active retirement. They also aim to offer the possibility of companionship, privacy, and a relatively worry free environment.

More recently social rented housing has been developed based on the retirement village model at Bradeley in Staffordshire, aiming to provide flexible accommodation and amenities for ‘active older people’. Westbury Fields is unusual in that it offers both social rented housing and lease purchase apartments within a privately funded retirement village complex. This model seems likely to increase in popularity especially since Westbury Fields has been highlighted by two recent government papers as an example of innovation because of how it offers varying tenure housing options in one scheme (Department of Health, 2006; Office of the Deputy Prime Minister, 2006). For example, one proposed mixed tenure development in Harehlee has received financial support from the Government Very Sheltered Housing Fund and will be used by the local Primary Care Trust as a base for delivering a range of services, including health promotion and management for people with long term health conditions.

As a relatively new phenomenon, there has been little research into UK retirement villages. The few studies that have taken place reported high levels of satisfaction among residents and the potential to deliver significant improvements to the quality of life for older people (Croucher et al, 2003; Bernard et al, 2004; Joseph Rowntree Foundation, 2006). Critics of retirement villages have characterised them as ‘elderly ghettos’ that encourage segregation and lead to social exclusion (Forrest & Leather, 1998).

The St Monica Trust and the development of Westbury Fields

The St Monica Trust was founded by the Wills tobacco family in 1919 and was originally established as a home of rest and a gift/grant-giving body. The Charity presently provides retirement/sheltered housing and care home accommodation for over 200 residents on its original 23 acre site in Cote Lane, north Bristol. The Trust then expanded its operations on a new site close to Cote Lane through the development of Westbury Fields. The Trust has recently opened a new complex in Bedminster, south Bristol, and other planned developments include the expansion of domiciliary care to people living in their own homes in the Bristol area and recognition of the need to increase specialist provision for people with dementia.

Westbury Fields is underpinned by a strong partnership with Bristol City Council in terms of making a significant contribution to the local authority initiative to provide 600 units of very sheltered housing in the city over a five-year period. This commitment emerged from a consultation exercise undertaken by the local authority in 1999 which showed that the elderly population of Bristol wanted to live independently for as long as possible. As a result, the council decided to develop very sheltered housing flats across the city in collaboration with a range of housing associations and charitable trusts. This coincided with a decision by the St Monica Trust to expand their care and accommodation services beyond the original site and begin to work in partnership with the local authority for the first time and resulted in the proposal to build Westbury Fields on a site which straddles the communities of Southmead and Westbury-on- Trym in north-west Bristol. A central concept of the village is that there should be a mix of dependency levels and housing tenures, contributing to a ‘balanced community’.

In order to achieve this, the village combines several types of housing in a single development by providing very sheltered housing for rent and lease purchase apartments, together with a care home incorporating facilities for short term care and a specialist dementia service.

The site on which Westbury Fields is built incorporates a large plot of land that was sold to the Charity by the Merchant Ventures of Bristol and some additional land owned by Bristol City Council. Before building work started in 2003 the site was mostly derelict and housed a disused elderly people’s home and children’s home.
There had been two cricket pitches on the site but both were no longer used and the land was often the site of several burnt out cars.

Previous planning applications for other purposes on this site had been refused, but the St Monica Trust retirement village proposal was considered to better suit the needs of the local community. Planning permission conditions included the provision of various community facilities as planning gain, including a refurbished cricket pitch, modifications to the road junction and improvements in the local park. The latter included building football changing facilities, rebuilding and refurbishing a bowls pavilion and upgrading tennis courts. The Trust also donated £20,000 to a local play scheme. A pedestrian way/cycle track running along one side of the site was also part of the requirement. A further restriction to the layout of the village was that the very sheltered housing had to be built on an area of land owned by Bristol City Council in the south-east corner of the site. The care home, John Wills House, was the first element of the village to open in July 2003, followed by the leasehold apartments in several phases from August 2003 and the very sheltered housing in April the following year.

Westbury Fields is now home to over 200 older people who occupy a variety of different types of accommodation and who have a wide range of support needs. It is a private, gated development, situated in a residential area in north Bristol and borders the neighbourhoods of Southmead, Brentry and Westbury-on-Trym. The village is located within walking distance of Westbury-on-Trym with its many shops, library, restaurants and other amenities. Two entrances to the landscaped site have security gates, and CCTV together with 24-hour security is also in operation. As previously described, the village is arranged around a large cricket pitch, which is used by a local cricket club for the summer months.

What is community?
The St Monica Trust made a brave decision to establish a retirement community which would not only meet a wide range of dependency needs but also provide a range of tenure options designed to appeal to older people with a background in both owner occupation and renting. In terms of their own brochure on Westbury Fields, the St Monica Trust talked of their new retirement community as aiming ‘to encourage a lively balanced community ranging from active independent residents to those requiring a high degree of support’.

However, the Trust recognised that they needed research feedback on how Westbury Fields worked in practice. This was in order to inform both the subsequent management of this retirement community and also the development of new schemes which the Charity would be developing in the future.

At the heart of all of this are at least two critical questions:
1. What does it mean to live in a ‘community’ like Westbury Fields?
2. What does ‘balance’ mean in terms of one scheme covering both a range of dependency levels and a range of tenures?

Hence, it was agreed that the title of the commissioned research would be ‘Balanced Retirement Communities? A Case Study of Westbury Fields’; the most critical element of this title being of course the question mark. In posing this question, there is a recognition of the contested nature of both the word ‘community’ and the word ‘balance’. The rest of this section offers some initial reflections on what might be meant by both ‘community’ and ‘balance’.

In his classic exploration of the power of language, Williams (1976) identified ‘community’ as a keyword in the development of culture and society. He argues that for hundreds of years ‘community’ has been used to lament the passing of what are in effect a series of mythical Golden Ages. The apparent social cohesion of an ‘idyllic’ village past is compared to the tensions and fragmentation of the industrial or urban present. What Williams is suggesting is that communities never have been and never can be completely cohesive. Having said this, there is a long tradition of community studies which have explored how neighbourhoods work and how neighbours interact (Bell and Newby, 1972). In terms of older people, community studies have often been concerned with explaining how social relationships with neighbours relate to and interact with kinship and family networks (Philipson et al, 2001).

However, in recent times there has been a recognition that people’s sense of ‘community’ is becoming less connected to the neighbourhoods and communities in which they live (Gilleard and Higgs, 2005). Some have linked this to the growth in owner occupation with an argument that those who own are likely to focus their energy on their houses rather than their neighbourhood, while those who rent are likely to place a greater emphasis upon interacting with neighbours (Saunders, 1990). However, this argument has been expanded into a recognition that...
more and more people identify themselves through social relationships linked to their interests, pastimes and hobbies. Sometimes these are pursued in formal clubs but often they are not. Gardening, photography, reading, pressure group politics and football supporting are all examples of an almost endless list. Increasingly, the academic literature refers to these as ‘communities of interest’ (Benwell and Stokoe, 2006).

The practical point in terms of our research question is that a sophisticated view of community is needed from the outset. A successful retirement community should not be defined as a completely harmonious entity. Friendships and networks will vary and not everyone will get to know or even to like everyone else. Such differences may be influenced by tenure but also by personal enthusiasms: that is by ‘communities of interest’. Some people will establish these communities of interest through their new retirement community and some through retaining links and connections built up well before their move.

Finally, we need to address what might be meant by ‘balance’. Certainly, Westbury Fields is a fascinating development in terms of the inclusion of a range of tenures and a spectrum of dependency levels. The danger of the word ‘balance’ is that it implies that the research should seek for some kind of equilibrium. This is not what was meant, but rather the intention was to draw attention to the fact that Westbury Fields has a wide range of residents. The question is thus whether Westbury Fields is more like ‘real’ life than most retirement communities with an acceptance that real communities are not completely harmonious by the very fact of their diversity.

The research
The overall aim of this study was to explore the extent to which residents from a wide range of housing and care histories, dependency levels and socio-economic backgrounds can be integrated into a single retirement village community. To achieve this aim, specific objectives were to:

- Provide a clear descriptive profile of residents across all the available housing/care options in terms of their backgrounds and dependency levels prior to moving to Westbury Fields.
- Clarify how residents and staff understand the ideas of ‘community’, ‘balanced community’ and ‘village’ in the context of Westbury Fields.
- Explore how Westbury Fields as a ‘community’ relates to the surrounding neighbourhoods of Southmead and Westbury-on-Trym, as well as the communities of interest (leisure pursuits, past social networks etc) which many residents bring with them.
- Profile how residents with a background in ownership do or do not interact with residents with a background in renting.
- Explore how interaction between residents is influenced by dependency levels.

This study followed a case study methodology and relied on three main sources of data: in-depth interviews; routinely collected data; and a questionnaire survey.

1. ROUTINELY COLLECTED DATA
The St Monica Trust routinely collect a range of data, which can be used to develop a profile of the residents of Westbury Fields. This includes information on age, gender, levels of dependency and current living arrangements. This data was provided by the Trust in aggregated and/or anonymised form and enabled the profiling of residents across housing types and care settings. Included in this were data from EASY-Care (University of Sheffield), an international standard for assessing the health and social care needs of older people.

2. IN-DEPTH INTERVIEWS
All residents of Westbury Fields were invited to be interviewed as part of the research, with the exception of those who lived in The Orchards, a specialist and self-contained service within John Wills House for 15 people with dementia. While recognising that it is both possible and important to consult people with dementia about their experiences and opinions (Evans, 2005), to do so in a rigorous and sensitive way requires resources beyond those available for this evaluation. A description of the research project was presented to a meeting of residents, following which written invitations to take part were distributed. The aim was to carry out interviews with residents across the three main types of tenure within the village: very sheltered housing; lease/purchase apartments; and the care home. Ten members of staff were identified to represent the range of the employee group and invited to take part in individual interviews. The interview schedules for both staff and residents can be found in appendix 1. All interviews with staff and residents were carried out during the winter of 2004/2005.
3. QUESTIONNAIRE

All residents who agreed to be interviewed were also offered the opportunity to complete the How is your home? questionnaire, an adaptation of the Housing Options for Older People (HOOP) appraisal assessment tool used by the Elderly Accommodation Counsel (Heywood et al, 1999). This tool was chosen because of its status as an established, validated measure which covers aspects of housing that have been found to be important to older people. It was completed in the presence of each respondent by a researcher, who asked each question and clarified the meaning as necessary. This questionnaire asks respondents to indicate the acceptability of their current accommodation in relation to a range of criteria. These are: size and space; independence; cost (affordability); condition of property; comfort and design; security/safety; location; managing; and quality of life. Respondents can also indicate whether they feel any of these issues are causing them stress or affecting their health. A full version of the questionnaire is included in appendix 2 of this report. A summary of data collection is presented in table 1 opposite.

In terms of data analysis, quantitative data was entered into the SPSS software package (version 12) and analysed for descriptive and comparative statistics. Interview transcripts were analysed for thematic content by a process of allocating codes to quotations and sorting these into categories, themes and sub-themes. This process was carried out through the use of a computer assisted qualitative data analysis software package.

This research was reviewed by the Research Ethics Committee at the University of the West of England, Bristol. Research participants were invited to join in the research via letter. An information sheet provided a summary of the aims and rationale of the research. Before the interview candidates were asked for their written consent to take part. They were also informed that they may terminate the interview at any stage and throughout the process there was an emphasis upon informed consent, voluntary participation and confidentiality.

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Table 1: Data collection summary
Chapter 2

In this chapter we describe the physical layout of the village and explore the accommodation, services, facilities and activities provided. We analyse the health and social care needs of those who live there, where they lived previously, their reasons for moving and why they chose Westbury Fields. Finally, we focus on those who work in the village and the nature of their work.
Chapter 2

The accommodation

1. VERY SHELTERED HOUSING
(SOMETIMES KNOWN AS ‘EXTRA CARE HOUSING’)

The largest building in the village is Sommerville, which is arranged over three storeys within a large glazed atrium that covers a street scene, with café style tables and chairs, lamp posts and indoor facilities for chess, boules, bowling and snooker. Sommerville offers very sheltered housing in 51 one and two bedroom flats for rent. Half of these are available for residents who access the service through Bristol City Council’s Housing and Adult Services department. These residents have been assessed by adult community care as requiring continuous care, and this is provided by the on-site care and support team, or other providers if preferred. The remaining flats are allocated to people from the housing register who do not have care needs at the time of assessment. Although the council have nomination rights, the St Monica Trust has the final say on who is accepted. Flats are all self contained, with en-suite facilities and fitted kitchens. When the research was carried out rents were between £66 and £74 per week. One of two restaurants is located in Sommerville, which provides meals for occupants of the village. A home delivery food service is also available.

2. RETIREMENT FLATS

A further 98 one, two and three bedroom retirement apartments are situated around the village. They are all fully self contained and many have individual gardens or balconies. Most of those on the first floor have either lifts or a stair lift. Purchase of the lease is at 90% of market value, with the remaining 10% on a peppercorn rent. All the equity from the original investment is returned to the resident or their estate by the Trust on departure, with no added interest or re-valuation subject to satisfactory re-instatement. The Trust also has total right of pre-emption, whereby all apartments are returned to the Charity for resale within a prescribed timescale following notice or the death of a resident. Services from the Trust’s care and support team can be purchased by residents as and when required.

3. THE CARE HOME

John Wills House is situated in the heart of the site and offers 30 beds for permanent nursing residents, 15 rooms in a pre-booked short term care unit and 15 places in The Orchards, a specialist residential wing for people with dementia. The home is staffed by registered nurses and care assistants and is supervised by the care home manager. Individual bedrooms have en-suite bathrooms, a telephone line and television. The short term care unit, which is subject to a maximum stay of six weeks, has been designed to meet the needs of three different groups. The first of these is people who need intermediate and postoperative care. The second group is those who need respite care and the third is those in need of a safe haven in emergency situations. Six short-term beds are block booked by local councils, two by Bristol for programmed care/respite care and four by South Gloucestershire as rapid response beds for their patients from 8.00 am to 8.00 pm, subject to the beds being free. The maximum stay in these beds is also six weeks, with an average of ten days. The Trust can also operate a 70% private/30% local authority funded bed ratio in the long term nursing unit and the residential dementia care unit.

Care home residents can access on-site physiotherapy and hydrotherapy is available at the Trust’s Cote Lane site nearby. John Wills House has an enclosed garden which features a circular walkway dotted with benches and this can be used by all village residents along with the Cricketers: a modern pub/restaurant, which is attached to the care home.

VILLAGE SERVICES

Residents pay a community fee/service charge which varies as to whether they lease or rent their property. The charge covers an emergency call system to the care and support team, on-site security, buildings insurance and external maintenance, CCTV, access to a range of on-site facilities such as the computer suite, gym/spa and the opportunity to take part in regular activities/events. It does not cover bills such as food, gas, electricity and water. There is also preferential, but not guaranteed, access to the on-site care home. For those residents who occupy on the lease purchase option, the community fee also covers annual boiler checks and one hour of domestic help each week.

CARE AND SUPPORT SERVICES

Domiciliary care provision is available to all village residents via the on-site care and support team for a separate fee. The service provides a range of support, including personal care, light domestic duties, picking up pensions, shopping and clothes washing. The care and support team comprises a care and support manager, two senior care and support workers and 20 care and support workers. The care and support team also provides a service to approximately 100 clients who live in their own homes in the surrounding area through the Help at Home service, which the
Charity took over from the Abbeyfield Trust in January 2004. Residents are able to purchase care from external providers if they prefer and can also access a range of assessed services through the community including physiotherapy, speech therapy and occupational therapy.

**FACILITIES AND ACTIVITIES**

Village facilities and activities are available to all residents across the complex. The cricket pitch lies between the north and south parts of the village, which are joined by a 100 metre long path. The Trust has two multi-person vehicles that are primarily used for trips and outings, but can also be used by residents who request help to get to activities and facilities around the site. On-site facilities include a gym with spa pool, a croquet lawn, a library, carpet bowls, a residents’ lounge, two computer rooms, two hairdressing salons, a pub and two restaurants.

An activities co-ordinator arranges a programme of events and activities to cater for a wide range of tastes. These mostly take place at Sommerville and include:

- Art and language classes.
- A luncheon club.
- Aromatherapy.
- Reflexology.
- Chinese exercise.
- Concerts.
- Multi-faith acts of worship.
- Recall sessions.
- Shopping and other trips.
- Bingo.
- Coffee mornings.
- A range of on-site courses organised by the University of the Third Age.

Some activities have to be paid for by residents, although the Trust often covers the cost of starter sessions in order to generate initial interest.

**RESIDENT INVOLVEMENT**

The Trust is keen to encourage resident participation in village affairs, both through the ‘open door’ policy of managers and through a number of forums. The Residents’ Inclusive Forum, which includes representatives from village residents and managers, invites discussion about all aspects of village life. They meet regularly to discuss any issues that arise and are able to take some spending decisions. There is a separate forum for tenants of the very sheltered housing. A monthly tea afternoon at which issues are discussed is run by residents and is often attended by the operations manager.

The residents of Westbury Fields

In April 2005 there were 205 people resident at Westbury Fields, living across four types of accommodation. One hundred and four were living in lease/purchase apartments, 58 in the very sheltered housing (Sommerville) and 43 in long term beds at John Wills House, the on-site care home which includes The Orchards, a 15 bed specialist dementia-care service. In addition, there were 15 short-term beds in the care home for which data was not included in this research. One hundred and fifty six residents were female and 48 were male. Table below charts 1 and 2 over summarise this demographic data. Forty residents were living as couples; 28 (14 couples) in lease/purchase apartments and 12 (six couples) in very sheltered housing. The average age of residents was 82 years, with oldest being 96 and the youngest 53.

<table>
<thead>
<tr>
<th>Housing Type</th>
<th>Total Residents</th>
<th>Female Residents</th>
<th>Male Residents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lease purchase</td>
<td>104</td>
<td>78</td>
<td>26</td>
</tr>
<tr>
<td>Very sheltered</td>
<td>58</td>
<td>45</td>
<td>13</td>
</tr>
<tr>
<td>Care home</td>
<td>29</td>
<td>23</td>
<td>6</td>
</tr>
<tr>
<td>Dementia service</td>
<td>14</td>
<td>12</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>205</td>
<td>158</td>
<td>47</td>
</tr>
</tbody>
</table>

Table 2:
Number of residents by housing type

The St Monica Trust is committed to promoting diversity at Westbury Fields by, for example, supporting activities from a range of cultures, although at the time of the research only one village resident was from a black or ethnic minority group, compared with 8% of the overall population of Bristol.
THE HEALTH CARE NEEDS OF RESIDENTS

Information on the health and social care needs of residents was obtained from analysis of completed EASY-Care forms. EASY-Care is a widely used tool for the assessment of a service user’s physical, mental and social well-being. It has been designed to give a broad picture of older people’s strengths, abilities and needs from the viewpoint of the service user. The version used in this study asks respondents to rate their own abilities across a range of domains including activities of daily living, personal care and health status. It also incorporates a range of short validated assessment instruments, including the Mini Mental State Exam (MMSE) and the Geriatric Depression Scale (GDS). EASY-Care provides a single summary record which meets Department of Health criteria for single assessment domains, and has been adopted by many councils in England as the main data collection tool for the Single Assessment Process (SAP). The EASY-Care forms analysed as part of this study were completed by residents at the time they moved into the village.

As shown in Table 1, just over half of the EASY-Care data came from residents of the very sheltered housing, with the remainder coming from those living in lease purchase apartments and the care home. The data collection methods used meant that it was not possible to distinguish between lease purchase and rented residents. Therefore, some aspects of the following health and social care profile are weighted towards very sheltered housing residents. Data from the care home was identifiable and a separate analysis of this is included below. As previously discussed, data from residents of the dementia service were not included in this study.

Thirty eight percent of respondents rated their own health as excellent, very good or good at the time of moving into Westbury Fields. Forty four gave themselves a health rating of fair and 18% rated their health as poor. Figures 1, 2 and 3 opposite provide data on self reported health problems and health-related behaviours. These suggest fairly high levels of sensory impairment with 30% indicating hearing problems (with hearing aid if worn) and 24% having some level of visual impairment (with glasses if worn). The figure for speech problems was lower at 6.5%. Incidence of feet problems was high at just over 50%, while 44% reported having skin problems. Thirty two percent had some level of incontinence and 37% had lost weight during the previous six months. Residents were also asked about their health related behaviours. Fifteen percent were smokers and 36% drank regularly. Thirty percent of residents took regular exercise, 53% had been for cancer screening and 17% had their blood pressure checked regularly. Thirty five percent reported having one or more falls during the previous six months.
The village, its residents and its staff

Figure 1:
Percentage of residents with sensory impairments

Figure 2:
Self-reported health problems of residents

Figure 3:
Health related behaviours as reported by residents
Table 3 below provides an indication of the level of mobility of residents. The majority of residents indicated some mobility needs, with 73% either unable to manage stairs or needing help to do so and 59% who could only walk outside with help. Interviews with residents highlighted a range of specific health conditions, including heart problems and arthritis.

<table>
<thead>
<tr>
<th>Can you ....</th>
<th>Yes</th>
<th>With help</th>
<th>With wheelchair</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Walk outside?</td>
<td>41</td>
<td>46</td>
<td>n/a</td>
<td>13</td>
</tr>
<tr>
<td>Get around indoors?</td>
<td>77</td>
<td>18</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>Manage stairs?</td>
<td>26</td>
<td>23</td>
<td>n/a</td>
<td>51</td>
</tr>
<tr>
<td>Move from bed to chair?</td>
<td>90</td>
<td>8</td>
<td>n/a</td>
<td>2</td>
</tr>
</tbody>
</table>

Table 3: Mobility capacity of residents (percent)

**THE SOCIAL CARE NEEDS OF RESIDENTS**

Overall, 54% of the sample had some personal care needs. Table 4 below shows the results for each question that made up the overall score. The greatest levels of need were with help using the bath or shower and dressing, with 51% needing help bathing and 24% with dressing.

<table>
<thead>
<tr>
<th>Can you ...</th>
<th>Yes</th>
<th>With help</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do your own housework?</td>
<td>22</td>
<td>62</td>
<td>16</td>
</tr>
<tr>
<td>Prepare you own meals?</td>
<td>43</td>
<td>43</td>
<td>14</td>
</tr>
<tr>
<td>Go shopping?</td>
<td>26</td>
<td>40</td>
<td>34</td>
</tr>
<tr>
<td>Use the telephone?</td>
<td>86</td>
<td>8</td>
<td>6</td>
</tr>
</tbody>
</table>

Table 5: Personal care needs of residents (percent)

A score was calculated using a validated six-item test for orientation, memory and concentration which is used in EASY-Care. This indicated that 90% of respondents were in the range of normal to mild impairment while 10% had moderate to severe impairment.

Finally, an overall "abilities" score was calculated from 17 questions in EASY-Care covering domestic tasks, managing money and medicines, getting around, personal care and continence (see figure 4 below). This gave a possible total of 100 points, where 0 indicates the lowest level of ability and 100 indicates the highest. The mean score was 75.5 while only 4% of scores were below 50. This suggests that most residents have relatively low levels of dependency and that the provision of care services is therefore likely to focus on a limited number of residents. The anonymised nature of the data analysed for the research meant that it was not possible to compare scores across different types of housing, with the exception of the care home.

Domestic abilities were calculated from responses to the four questions in table 5. Overall, 82% of respondents indicated the need for some level of help with domestic tasks. Sixty-two percent needed help with housework and 34% felt unable to go shopping even with help.

Figure 4: Ability scores for residents
The EASY-Care assessment tool uses the following eight questions to measure social well-being:

1. In general, do you feel able to enjoy life to the full?
2. How much bodily pain have you had over the past 4 weeks?
3. Are you basically satisfied with life?
4. Do you feel your life is empty?
5. Are you afraid something bad is going to happen to you?
6. Do you feel happy most of the time?
7. Do you feel lonely?
8. Have you had trouble sleeping over the past month?

Figure 5 above suggests that residents’ levels of well-being are generally high. Seventy four percent are generally satisfied with life and 86% feel happy most of the time. Questions 3 to 6 above together form a short version of the Geriatric Depression Scale, according to which a score of 1 or more indicates the possible presence of depression. Thirty eight percent of our respondents scored 1 or more. It should also be noted that 53% had moderate or severe bodily pain over the previous four weeks and 44% had trouble sleeping over the same period.

A final measure of the level of need is provided by figure 6 above. This shows the percentage of residents receiving a range of services at the time they moved into Westbury Fields. Figures of particular note are 53% in receipt of home care, 30% having meals delivered and 40% with adaptations or improvements to their previous accommodation. In contrast, relatively small proportions were receiving physiotherapy or occupational therapy and only two residents were receiving speech and language therapy.

The social care needs of long term care home residents were generally higher than for those living in the rest of the village. This trend was particularly strong for ability to use the toilet, to feed oneself and to use the telephone. It is interesting to note that average levels of reported pain were lower for care home residents, while there was little difference in scores for social well-being and depression. Care home residents were also in receipt of a higher level of services at the time of moving in than were other village residents, particularly in terms of home care and nursing care.
Overall, these data characterise a population with a range of health and care needs, particularly in terms of levels of sensory impairment, feet and skin problems and incontinence. Mobility data indicate fairly high levels of need for support in getting around, both indoors and outdoors. As one would predict, further analysis reveals a higher level of health and care needs for long term care home residents than for those living in other parts of the village. This trend was particularly noticeable for speech problems, skin problems, weight loss, incontinence and falls. Mobility and exercise levels were also much lower for care home residents than for other village residents. This overall trend was reversed for sight and hearing problems, where slightly higher levels were reported by other village residents than by care home residents. Also, surprisingly, no care home residents rated their own health as “poor” compared with 18% who did so in the rest of the village. There was little difference between the two groups in levels of social well-being and depression.

PREVIOUS ACCOMMODATION AND REASONS FOR MOVING

Many residents interviewed told us about where they lived before moving to Westbury Fields. They had come from various accommodation types, including houses, flats, retirement apartments and sheltered housing. Some had moved from rural areas, although the majority came from Bristol and other urban areas. Distances that people had moved ranged from very local to other parts of the country, including:

- Five who had lived locally, within a ten minute walk.
- Eight who had lived in a different area of Bristol.
- Two who came from towns or villages just outside Bristol.
- Ten who came from other parts of the country, including Kent, Norfolk, Southampton and Birmingham.
- Three who had moved to Westbury Fields directly from a stay in hospital.

Note: not all residents interviewed provided information about their previous accommodation.

Interviews also explored residents' reasons for moving from their previous accommodation and why they chose to come to Westbury Fields. The reasons given by respondents for leaving their previous accommodation fell into eight main categories, as shown in table 6.

<table>
<thead>
<tr>
<th>Reason given</th>
<th>No giving reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>Own health needs</td>
<td>20</td>
</tr>
<tr>
<td>To be near family members</td>
<td>8</td>
</tr>
<tr>
<td>Partner's health needs</td>
<td>7</td>
</tr>
<tr>
<td>Difficulty managing house and/or garden</td>
<td>5</td>
</tr>
<tr>
<td>Feelings of isolation and/or loneliness</td>
<td>5</td>
</tr>
<tr>
<td>Pressure from family/friends/professionals</td>
<td>3</td>
</tr>
<tr>
<td>Not wanting to be a burden on family</td>
<td>3</td>
</tr>
<tr>
<td>Restricted mobility</td>
<td>3</td>
</tr>
</tbody>
</table>

Table 6: Reasons given for moving from previous accommodation
Note: the numbers reflect the fact that many interviewees gave more than one reason.

Residents' own health needs was by far the most common reason given for moving out of their previous accommodation, as reflected in the following quote:

Where I was living I had quite a few stairs to climb and my health was getting worse gradually because I've got adhesions and that and climbing stairs and everything - I've had about 18 operations on the same thing, so climbing stairs was getting to me.

R05; very sheltered housing

This demonstrates how it is often a combination of someone's deteriorating health and the physical characteristics of their housing that leads to a decision to move. A desire to be nearer to family members was also a common reason for moving. Here again, the quote below demonstrates that it is often a combination of factors that lead to the decision to move to a specific location:

Then I had this dreadful fall and nobody can explain, I just fell, crack, like that flat on my face ... so I thought I had better come back to Bristol because then you're not a nuisance to anybody, you hope. I mean, I was 200 miles away from them (family members), it wasn't practical.

R29; lease purchase

WHY WESTBURY FIELDS?

Several residents described specific reasons for choosing Westbury Fields as opposed to other accommodation options. For some it was the care facilities on offer, including both the on-site care home and the dementia care service, as described in the following quote:
I didn’t seek out sheltered housing for myself but because my wife is a dementia sufferer and had a chance of a place in the Orchards here, I seized on the opportunity of getting a flat and staying on campus, because I had been visiting her from our flat in Clifton for two or three months and that was not a satisfactory arrangement really.

R18; lease purchase

Others felt it would provide opportunities for social contact that might not be so readily available in the wider community.

I liked the idea that you aren’t completely on your own. If I’d moved to a flat in Bristol somewhere else, I would have found it even more difficult to make friends whereas here I have made quite a few friends and I do things with people, which is much better than just being isolated.

R16; lease purchase

The design of the village was another reason given for choosing Westbury Fields in particular. One resident expressed this in the following terms:

In such a beautiful site were these palatial buildings and wonderful grounds to be able to go out and around and a real community of very diverse people to mix with.

R32; care home
Chapter 2

The staff of Westbury Fields

The range of staff working at Westbury Fields is summarised in figures 7 and 8 above and opposite. The operations manager, who is part of the Trust’s senior management team, has overall responsibility for running the village and manages the care and support team: the care and support manager; the care home manager; and the porters/security team leader. The care and support manager supervises two senior care and support workers who in turn supervise a team of 20 care and support workers. They operate a key worker system for residents who are funded by adult community care and those purchasing care privately. This provides a range of personal care, including light domestic duties, picking up pensions, shopping and clothes washing, both to residents in their homes and to clients in the wider community. An important feature of the care and support service is the availability of an emergency on call service during the night.

The care home manager is responsible for the day-to-day running of the care home, which includes a 30-bed nursing unit, a 15-bed residential dementia service and a 15-bed short term care unit. This role includes assessing people for admission, either in hospital or in their homes. A team of nurses and senior nursing care assistants supervise a team of care assistants, prepare individual care plans and also carry out care duties, which include personal care, feeding, dressing and support with mobility. Care is provided 24 hours a day by nursing care assistants across three shifts.

An activities co-ordinator organises a wide and increasing range of activities in the village, which are available to residents and to people from the wider community. Members of the porter/security team are responsible for entry/access to the village. They also provide back-up to the night time care and support staff, for example if a resident has a fall, and provide a range of additional support such as helping residents get around the village and doing ‘odd jobs’. A part time pastoral co-ordinator offers spiritual support to residents.

Staff from the facilities function are managed from the Trust’s other site and provide catering, housekeeping, maintenance, gardening and other services, as outlined in figure 8 opposite.
The philosophy of care

The contribution of staff at the St Monica Trust is based on a vision and values statement, which was developed in consultation with all staff groups in 2004. This document, which can be found in the appendix, focuses on promoting five core values: respect, honesty, caring, dignity and trust, together with the vision of “people living independent, dignified and fulfilled lives”. The Trust’s philosophy is echoed in the Investors in People accreditation which the Trust received in 2005.

The Trust’s vision and values are supported by a comprehensive programme of induction, training and support for staff. This incorporates training and development policies and plans, performance standards, regular staff supervision, continuing professional development, reward and recognition policies, a professional practice group and staff consultation groups. A recently introduced competency framework promotes staff performance across a range of factors, including communication, technical ability, working with others and customer focus.

The Trust has developed numerous courses related to the provision of care services and also offers a range of NVQs. The organisation’s approach to staff training and support is summarised in the following quote from the head of human resources:

The key to the work of the St Monica Trust is the quality of the relationship that our people develop with service users, i.e. a relationship of respect and valuing people who are diverse individuals, treating them with dignity, respecting wishes and preferences where possible, providing personalised packages of care.

Conclusion

This chapter has described how Westbury Fields aims to support a diverse population, from different socio-economic backgrounds, across a variety of housing tenures and care options, ranging from active independent residents to those requiring a high degree of support. We have seen that the health and social care needs of residents varied considerably, including a small group with high levels of sensory impairment, personal care needs and restricted mobility. We reported high levels of satisfaction among residents with their health and quality of life. Residents moved to Westbury Fields from a range of accommodation types, both locally and from other parts of the UK. Most moved due to their own health needs, those of their spouse or to be nearer to family members. The main reasons for choosing Westbury Fields were the flexible care packages available, opportunities for social contact and the design of the village.
This chapter examines the impact of different social backgrounds and levels of dependency on interaction between the residents of Westbury Fields by exploring the social experience, the physical environment and overall quality of life. First there is a focus on the social environment, including the role of social activities, the development of social networks and the importance of independence to the quality of life of residents. Second, the chapter explores a range of design issues and their impact on village life. Finally it draws out how the social and physical environment impacts upon the independence and overall quality of life of residents.
For many residents the special environment and friendships were important elements of living at Westbury Fields; there was certainly considerable evidence of friendships having developed among residents.
The social experience
Earlier in this report we noted that, overall, residents scored highly for social well-being in the needs assessment carried out at the time of moving into Westbury Fields. Responses to the How is your home? questionnaire, which was administered during the research, indicated that the majority of residents felt social factors to be more important to them than physical ones in terms of overall levels of satisfaction with where they lived. In this section we consider the social lives of residents including friendship, family contact and independence.

SOCIAL NETWORKS IN THE VILLAGE
We saw in chapter 2 that for one resident the perceived opportunities for making friends were a major factor in her decision to move to Westbury Fields. For many other residents too the social environment and friendships were an important element of living at Westbury Fields; there was certainly considerable evidence of friendships having developed among residents. For example, one lease purchase resident commented:

People are so friendly. Not over-friendly, prepared to be friendly, prepared to meet people halfway. Really charming. It’s been a pleasure to meet so many of them.

R23; lease purchase

Most respondents reported finding it easy to make friends. One male resident, despite describing himself as being “not very sociable” had made some friends and commented that “it’s nice to have half a dozen or so who are quite close”. Some residents suggested that they found it easier to make friends at Westbury Fields than they might do elsewhere, as highlighted in this quote:

That has been a wonderful bonus, to have all these people on the spot. You don’t go out of your door without someone saying hello, now the way we’ve all lived in towns, you don’t see neighbours now. So this, this is very good.

R22; lease purchase

There was a recognition that at Westbury Fields, as in any community, not everyone will become friends. For example, one lease purchase resident said:

We’ve got to know people who are compatible; you can’t be compatible with everyone, so that’s okay.

R19; lease purchase

There was a common feeling that making new friends was bound to take time, particularly for older people. This was referred to by a man living in a lease purchase apartment, who said, “Yes, in so far as at this stage one does form new friendships”. The same resident reflected on the fact that Westbury Fields had only been open for about a year and friendships can take a long time to develop. Other residents echoed this theme, as the following quote demonstrates:

There hasn’t been time for them to grow the kind of roots that friendship implies. It derives so much from working together or shared experience, which is slowly developing here.

R18; lease purchase

A range of degrees of friendship were evident from interviews with residents. One resident talked about “friendly acquaintances” while another referred to “sociable relationships”. Other residents had formed much closer friendships, such as that described in the following quote:

One lady who I’m quite friendly with, she’s in a wheelchair and I go out with her to do the shopping and when we got to the theatre, obviously if you’re in a wheelchair, you need a bit of help, don’t you?

R07; lease purchase

However, this emphasis on the friendliness of the village was not stressed by all of the residents interviewed. Two residents told us that they found it difficult to develop friendships, including a care home resident who said:

I mean the others go by, “hello D”. and that’s it. Nobody stops and comes in. Maybe they don’t think I would want them to come in, don’t know.

R36; care home

Others were clear that they weren’t looking for friendship and were happy with their own company. For example, one female resident living in a lease purchase apartment enjoyed the occasional company of other residents in the restaurant but hadn’t developed any particular friendships. She told us that “some people just have to have someone to talk to. I don’t”.
The majority of residents interviewed had made several friends and some of these spanned different types of accommodation across the village. One woman living in the care home had friends in the very sheltered housing and the lease purchase apartments, as well as a close friend in the care home. She commented: “you could spend all day in different parts of this site talking to people”. Another female resident living in a lease purchase apartment described her interactions with some residents in the very sheltered housing as follows:

I know about four or five people's names of the people who are in Sommerville and join the activities in the lounge and they are starting to come down to us occasionally as well, which is nice.

However, most had made friends with people living in the same area of the village as themselves. This was partly because of a perception that people in council and privately owned housing were different in some fundamental way, as the next quote suggests:

I think that there's obviously an automatic, not barrier, but wall between the council people and the people who bought theirs, it's different. I mean, it wasn't cheap to buy here and obviously you're in a different, well, not social position, but financial position to them and that is always a bit of a barrier to communication.

SOCIAL ACTIVITIES AND FRIENDSHIP

Most friendships that had developed seemed to focus on communal areas of the village rather than each others' homes. One resident had made a lot of friends but said that “socially I don't go to their houses very much, they don't come to mine”. This makes the provision of facilities and activities particularly important to social interaction, as suggested by the following quote:

If I'd moved to a flat in Bristol somewhere else, I would have found it even more difficult to make friends whereas here I have made quite a few friends and I do things with people, which is much better than just being isolated. An awful lot goes on here, which I think is excellent.

For residents of the lease purchase apartments, the croquet club, which had about twenty core members, had taken on a particular significance as a focus for social interaction. This quote from a male lease purchase resident says a lot about the role of the croquet club in village life for some residents:

This croquet club got everybody to know one another. We were all strangers, but we soon knew one another's christian names, so were soon chatting together. And we got into a little group and all through the summer, by the time the end of the summer come and that stopped, we were into sort of having coffee with one another, drinks, and things like that. We gelled together. And that's gone on from that now and it's a good social unit, really. Very nice people. I couldn't wish for a better place to live in really. I'm much better than if I'd been living at home.

The croquet club had become an important part of their social lives even for some people who didn't play the game. As one female resident commented:

I can't play but I can sit out there and I'm accepted as one of them and that group of people have made quite a nice little friendly group and we meet as a group.

The same resident compared this with her previous accommodation, where “I knew one or two people who lived in the flats but that was all, there was no mixing in that way”.

A wide range of organised activities were held in the communal areas of the very sheltered housing at Sommerville and these also provided opportunities for residents to meet each other. The wide range of activities and events arranged by the Trust therefore play a valuable role in promoting social inclusion and independence. This may be particularly true in the early stages of village life as people slowly get to know each other. Many residents described the importance of social activities in terms of helping them to stay fit, active and independent. One aspect of independence is having the choice of how to spend one's time and whether to socialise or not. The opportunity to take part in social activities is an important part of this choice, as voiced by a woman living in very sheltered housing:

What I like about it is that you can stay inside your front door, don't need to go out anywhere, you don't need to join in, you don't need to see anybody if you don't want to. But if you do, you have got a
good choice and I don't know whether you know any of the activities that go on here? I've even joined the gym.

R08; very sheltered housing

Another resident contrasted the range of activities available with other older housing environments for older people, referring to their role in keeping residents motivated:

There's always something going on if you wish, it's there. They have one thing that a lot of places don't have and that's motivation and so many old people sit around. I've seen so much of it, I don't know if you have? You go in there and you think, why do you go on living? You just sit there hoping something's going to go on. Well, that's not going to happen to me.

R37; very sheltered housing

Less formal activities were also important, as suggested by the following quote:

I do go out, I make a point of going out, yes. I play Scrabble once a fortnight. We take turns going to each other's houses.

R31; very sheltered housing

Certain village facilities were highlighted by the research as being important venues where residents could meet and get to know each other. Both eating venues (the Cricketers Arms and the restaurant in the very sheltered housing) filled this role and the following quote shows how residents who might otherwise have become isolated can benefit from such facilities:

I haven't been able to walk . . . but now I make myself go every day to get the exercise and, going there (the restaurant) I meet the other residents. I sit at a table and the next three people in come and sit with me and I have met delightful people here. That is one of the bonuses. They're lovely.

R22; lease purchase

The communal lounges in the very sheltered housing were highlighted, some residents were reluctant to use communal facilities precisely because they didn't know anyone. This highlights the potential difficulty of developing friendships for residents when they first move into an established retirement community. The research uncovered only one example of tension between residents. This appeared to be due to a clash of personalities and ended with two residents being “not enemies, but we ignore each other”.

Westbury Fields appeared to be important as a source of social interaction for residents who had few connections with the wider community of Bristol. This was particularly the case for those who had no family nearby, including this lease purchase occupant:

You've got someone to talk to and that is very precious when you are getting old, especially if your own family has dwindled so much. You see, I've no family now, I'm the last of the line. But having no family here now, you see, they've all gone, I've outlived them all, I have to rely on friends and that isn't as easy as it sounds because they've all got their lives and commitments.

R10; lease purchase

We now go on to explore the nature of the links residents had with the wider community beyond Westbury Fields retirement village.

SOCIAL NETWORKS AND OTHER LINKS WITH THE WIDER COMMUNITY

Many residents maintained broad links with the wider community through family, friends and organisations. For example, one resident who had previously lived nearby describes in the following quote a very busy and varied social life which focused on the church and her long-standing friends:

Well, I still go once a month, because friends pick me up to go to St Mary's Church in Stoke Bishop and I do go to a friend's house once, that's usually once a month. I do go down to my friend's occasionally. As I say, people more often come to me.

R12; lease purchase

Just over half of the residents interviewed were in regular contact with family members living locally. For example, one female resident enjoyed regular contact with her two daughters, both of who lived locally:
Oh yes, I go to one Sunday and the other one the next Sunday. I've done that ever since I've been here. They always include me in family activities.

R11; lease purchase

Several residents had much less frequent contact with their families because they lived further away, as illustrated below by a long term resident of the care home:

Unfortunately my daughter's living a three and a half hour journey away in (name of city) so I don't see her very often, you know, every seven months or so.

R33; care home

Many of the fifteen residents interviewed who had previously lived in the Bristol area enjoyed frequent contact with friends and organisations beyond the village. For example, the following quote from a woman living in a lease purchase apartment suggests a high level of contact with friends outside and makes a distinction between these friends and her new acquaintances in the village:

I keep up by telephone, by letter and actually I still go on holiday with some of them, so I have kept up with them and, as I say, in a village you kind of know everybody but your actual friends are getting fewer and fewer, the sort of people you do things with.

R21; lease purchase

These contacts with the wider community also seemed to be particularly important for residents who had developed few close friendships at Westbury Fields. A resident of the very sheltered housing who had previously lived locally told us:

I didn't know a great deal of people here but all my friends are around here, which was really good.

R05; very sheltered housing

Local contacts were also important for some residents who had no remaining family. A couple living in lease purchase accommodation told us:

We lived in the city for 50 years. We've got a lot of friends from many generations in the area and so we don't miss that.

R23; lease purchase

Another resident told us that she was "the last of the line, so I have one good friend who comes when she can". For other residents maintaining contact with friends in the local area was more difficult. One care home resident, whose daughter visited infrequently due to the distance involved, explained:

I have friends mainly in the Clifton, Cotham area where I used to live. Unfortunately they are as disabled as much or more than I am and can't do the journey very often or at all, so I do rather miss my local friends, yes.

R33; care home

Residents mentioned links with a range of local organisations including churches, a natural history society and the Townswomen's Guild. Many also used local facilities such as shops and banks and increasing numbers of people from the surrounding area were visiting the village in order to use the facilities and take part in activities.

The physical environment

DESIGN FACTORS

Design is a crucial feature of Westbury Fields that impacts considerably on the quality of life of those who live and work there in a number of ways. Design factors can be considered at three levels: the layout of the village as a whole; the design of buildings within the village; and the design of individual homes within those buildings.

VILLAGE LAYOUT

The arrangement of accommodation and facilities around the village has implications for the opportunities for residents to meet each other and the design of individual apartments can affect the ability of residents to remain independent. Some residents were appreciative of the overall design of W estbury Fields and its "palatial buildings and wonderful grounds". The biggest issue in terms of layout was the cricket pitch which is sited in the middle of the village, with the very sheltered housing to the south-east of it and most of the lease purchase apartments to the north-west, along with the care home. Some residents felt that this created a barrier between different parts of the village. One resident commented:

I think it's in two distinct sections which is a pity. We are very cut off from the other side and it would be easy to become "we" and "they".

R22; lease purchase
This seemed particularly problematic for residents with impaired mobility. Village staff were also very aware of this design feature as a potential barrier and one person referred to the path that runs along one side of the pitch as “the yellow brick road”. Transport across the site was provided as one way of overcoming this. It is important to re-iterate here the point made in chapter 2 that retention of the cricket pitch at the centre of the village was imposed on the Trust by the planning authorities.

Another criticism of the site as a whole was the lack of a convenient circular route to walk along for exercise purposes. This could be particularly important for older people with specific health needs, as demonstrated in the following quote:

I think my biggest grumble about this place is there’s not enough room to walk. I’ve had a new heart bypass and I need to walk. I’d like a path around the cricket pitch, that is my biggest grumble. It’s most important for people in wheelchairs that they can go all the way around. We’re rather restricted. You can’t walk on the wet grass if you’re not particularly able, can you?

However, since the research interviews were carried out, the Trust has responded to the views of residents by installing a circular route around the cricket pitch, which provides residents with a convenient walking facility.

BUILDING DESIGN
There was widespread approval of the design of the buildings that make up Westbury Fields among both residents and staff. The most striking and modernistic building in the village is Sommerville, the very sheltered housing complex. This building is very much the focal point of village life. As well as providing 51 apartments, it includes the main village reception area, a restaurant, a lounge and the gym. Visually it is dominated by a large glass atrium that runs along the length of its front, creating the feeling of an indoor street with café style tables and chairs, lamp posts and facilities for activities such as chess, boules, bowling and snooker. This design was valued by many residents for being “light, bright and airy” and providing a sheltered venue for meeting other people and taking part in social activities. It was also appreciated by staff as a good working environment. One resident appreciated it in the summer but felt that in the winter it could get too cold to sit around in because of heat loss through the large areas of glass, although it was never the intention of the Trust to heat this area.

ACCOMMODATION DESIGN
It can be argued that for village residents the greatest exposure to design comes from their own personal living space. The design of individual flats and apartments therefore has a crucial impact on residents’ daily lives and forms the foundations of how they experience the vision of a balanced community. Indeed, the greatest number of comments concerning design related to individual living spaces. Overall, there was considerable praise for these, particularly in terms of the amount of space. The following quote is a good example of the glowing appreciation that many residents expressed for the size and number of rooms.

One of the things that attracted me to this flat was the fact that the kitchen is big enough for eating, which means you don’t have to set and clear a table in the living room and, in fact, it’s got a very good en suite bathroom and the last thing that attracted me was that it’s got a second toilet, which can be used by visitors and the living room’s quite big. The bedroom’s the biggest we’ve ever had. The kitchen’s the biggest we’ve had and the spare bedroom, as we call it, is bigger than the smallest bedroom I had in my semi in [name of city].

High levels of satisfaction with design were confirmed by responses to the How is your Home? questionnaire. All three of the categories in this questionnaire that relate to design received high ratings: “comfort and design”, “size and space” and “condition of property” were ranked 2nd, 3rd and 4th respectively by residents. In terms of individual questionnaire items, “number of rooms”, “warmth” and “furnishings” received particularly high scores.

Interviews with residents indicated two main areas where they felt that the design of their apartments could have been improved. First, several residents felt that some aspects of the design presented accessibility problems. Accessibility is important to the quality of life of residents because of its impact on their ability to perform activities of daily living and achieve maximum independence. The resident quoted below felt that some fixtures were hard to use:

There are several things they didn’t really think about for elderly people. If you’re on the ground floor, the windows in the bedroom open from the bottom. That isn’t really very practical if you live on your own at night. I know they’re restricted on space, but I’m fairly...
short and it does mean I have to climb up to reach cupboards because obviously a lot of them are higher.
R12; lease purchase

This was echoed by a female lease purchase resident who had been a keen cook but felt unable to make full use of the kitchen because of its design:

The cooking facilities in the kitchen are ridiculous because they’ve put ovens in there that you can’t reach. Unless you’re tall and straight, you can’t see the dials because they’re too high. I have been trained in cooking, it was my subject, all my life. I’ve never used that oven yet.
R15; lease purchase

This emphasises the importance of accessible design in supporting independence, particularly for residents with physical impairments, encouraging access to the community and therefore contributing towards balance. In relation to this point it should also be noted that Westbury Fields provides alternative facilities for residents who find it difficult to use kitchen equipment in the form of on-site restaurants. These can help enable individuals to remain in their own accommodation rather than move into residential care.

The second area concerned a wide range of snagging problems which occurred when the village first opened, particularly concerning plumbing and heating systems. Many of these were exacerbated by the fact that the original builders went bankrupt before completion and alternative arrangements had to be made. However, there was a recognition that the staff worked hard under difficult circumstances to get all of these teething problems sorted out as quickly as possible.

VILLAGE FACILITIES

We have already seen how the residents of Westbury Fields have access to a wide range of facilities including a gym with spa pool, croquet, a library, carpet bowls, a residents’ lounge/dining room, a laundry, two computer rooms, two hairdressing salons, two restaurants and guest accommodation. The restaurants situated in the very sheltered housing and the village pub were widely used by residents and most praised the quality of these facilities. As well as providing daily meals they were also useful as somewhere to take visitors for a meal. Several residents commented on the pleasant environment the pub provided, as highlighted in the following quote:

I’ve used the one upstairs once and the one at The Cricketers once and I find the food’s very, very nice. And the one at The Cricketers is very pleasant and everything, so it’s just like a restaurant.
R05; very sheltered housing

One resident hadn’t used the restaurant because she didn’t know anyone else who went.

I actually don’t use a restaurant, no. Whether it’s because I don’t really know anyone who goes over there to go with or, I don’t know, I’ve always been so used to cooking for myself that I just, I did think I would before I came here but I haven’t used the restaurants at all.
R16; lease purchase

This quotation suggests the use of facilities as a venue for meeting other residents and making friends is not straightforward for some residents, something that will be discussed further in the section on the social experience of living at Westbury Fields.

The very sheltered housing complex includes a large lounge with a piano, a television and comfortable seating. This is open to all residents and can also be used to entertain visitors. The location of some facilities and the main lounge in particular was raised as an issue by various residents. Although the facilities in the very sheltered housing are available to all village residents, several of those living in the lease purchase apartments felt that some amenities should be more conveniently located for their needs:

Well, I think we didn’t quite realise how far the facilities were going to be, up on this side. It’s all right on a nice sunny day, but on a cold Winter’s day, it’s quite a little walk down to get to Sommerville. If you ring up, they will try and get somebody to come and pick you up but I’m quite capable of walking normally, but there are times when I probably don’t feel like it.
R12; lease purchase

After some negotiation with the operations manager it was agreed that residents could also use a lounge in the care home as a social facility. Some facilities are located at the Trust’s other site at Cote Lane a few miles away, including hydrotherapy and a swimming pool. Some residents appeared to find it difficult to get to these. For example, one resident was unable to use the plunge pool at Westbury Fields because it didn’t have a hoist; she was hoping to use the off-site swimming pool instead but found it difficult to arrange for her daughter to take her there.
The original plan for the village included an on-site shop but it had proved impossible to find a retailer willing to commit to this facility. Several residents missed having this facility. For example:

If you run short of papers, or its pouring down with rain, or you want a loaf of bread or a pint of milk, you could have gone there and got it.

As an alternative, the Trust organises regular shopping trips to supermarkets and local shopping malls. This facility is used and appreciated by many residents as a vital link to external services and facilities. However, for those with impaired mobility it can be problematic. One resident commented:

Getting on the mini-bus in my state is very difficult and painful and the mini-bus has to pull up way back behind the shop, so we have a walk before we start, and I can only walk if I'm using a pusher sort of Zimmer. I've got a trolley that I can push and sit on when I'm desperately tired, but I manage, but only just.

Some residents made use of the on-site gym, which has been designed specifically for older people. In particular they appreciated the services of the specialist gym instructor, who has a national qualification in meeting the needs of older people. The gym facility was not widely used by the residents who were interviewed during the research. Several said that they didn’t think it was suitable for their health needs. For example, one resident commented:

I've seen the gym over at Sommerville, it's very comprehensive, but to me, the instruments, the articles that you work on are too heavy-going for our age group.

The St Monica Trust provides a range of services to residents, covered by the general service charge/community fee that is paid. These include: the emergency call system to the care and support team; on-site security and portering; transport; buildings insurance; and external maintenance. For those residents who occupy lease purchase accommodation the community fee also covers annual boiler checks and one hour of domestic help each week. The porters provide a crucial service in terms of keeping regular contact with residents, along with care assistants and other staff, as well as helping out with small tasks. The resident in the following quote felt reassured by this:

I have the porters call in the morning. Some people think that's an intrusion, to me it's my secure line that every morning when I get up I know I'm going to hear one of the porters buzz and ask if I’m all right.

W hile some residents made relatively little use of village facilities and went out into the wider community to access services, for others they were an important lifeline and provided a major source of interest, contact and support, as summed up by the following quote:

I use the restaurant pretty regularly. I have used the computer service, a tutorial. I've used the library and helped to organise it. I've looked at the gym with great respect. I have had every intention to go and talk to the chap there and see if there is anything I ought to be doing, as it were, but I get exercise by walking down to Westbury and doing some shopping there. I use the shopping bus on Monday mornings to go to Waitrose and, of course, in umpteen ways the porters are enormously helpful.

Having explored the experiences of those living and working at Westbury Fields in terms of the design, facilities and services, and how important these are to many residents, we now go on to look at the social side of life in the village.

The provision of appropriate facilities can also play a part in promoting independence by enabling residents to look after themselves. The restaurants at Westbury Fields were particularly important in this respect by providing meals for residents who wanted to cook for themselves but do not feel able to do so all the time. A lease purchase resident described how important this was to her when she said:

I've decided now that, for my own sake and my own self-respect, I've got to do cooking, you know. I cook about - 50% I go over there, 50% I cater at home.
For one woman living in the very sheltered housing this facility allowed her to provide guests with a meal, even though she didn't feel able to cook for them herself:

I have a choice. I can cook my own, which I mostly do, but if I go down to the restaurant I go to the little place called The Cricketers Arms. I do that sometimes when I have visitors but mostly I cook my own. I intend to do so as long as I can.

The lack of on-site shopping facilities could be seen as a potential barrier to independence for residents. Despite the regular shopping trips arranged by the Trust, some residents felt that the lack of a nearby shop was a problem, as reflected in the following quote by a resident who couldn't walk far:

I do most of my own cooking, I am more or less self-sufficient really but it's getting out to the shops.

We noted in chapter 3 that some residents identified features within their apartments which they felt were not completely accessible. One resident, although a keen cook, hadn't used the cooker because she couldn't reach the controls easily. A care home resident recounted how she could “walk around my room and the bathroom but not the length of the corridor to the dining room”. The Trust had gone to considerable lengths to adapt kitchens to meet the needs of individual residents, and it may not be possible to make all equipment suitable for everyone. However, these two examples demonstrate how design can impact on residents’ independence by making them less able to look after themselves and more reliant on other sources of support.

MOBILITY: GETTING AROUND THE VILLAGE AND BEYOND

The ability to get around, both within the village and beyond it, appeared to be an important promoter of independence. We have already highlighted the central role of social activities within the village and the fact that many of these take place in the very sheltered housing complex. This was raised as an issue by some residents, particularly for those with impaired mobility; the distance involved appeared to deter some residents from attending. In order to improve access a bookable transport service across the village had recently been introduced by the Trust. At the time of the research it was too early to reach any conclusions as to its effectiveness.

Being able to access the community beyond the village is also important, as illustrated by one resident who said: “I've got my interests, I still have, as long as I can get out, getting out is the main problem with me because my legs are so bad”. Several residents had their own car and valued it greatly, as illustrated in this quote from a woman living with her husband:

If we didn’t have a car, or if I couldn’t drive it, I really would feel restricted. The car is a lifeline, you know.

Having a car enabled residents to visit friends and access a range of external facilities, including shops, the theatre and the cinema.

Residents without a car have to rely on walking, public transport and the village minibus when they want to go into the wider community. The village bus is provided for a range of activities including shopping, outings to the theatre and taking residents to visit friends or attend appointments. This service is widely appreciated and seemed to promote independence by enabling residents to do their own shopping. One resident said:

Oh yes, that’s lovely, Monday, Wednesday, Friday, there’s a little bus, picks us up here 10 am and he goes down to Sommerville and picks up people there, and that’s an enormous help and it’s free, which is very nice.

An important feature of this service was its flexibility and the consideration shown by the driver, who “is very good, he really is, he’ll pick you up and take you wherever you want to go, a couple of times I’ve been walking down the street thinking I’ve missed him, he’s just pulled up and picked me up and taken me”.

For one resident transport wasn’t as freely available as he had expected and he had recently cancelled a medical appointment due to lack of transport. He also felt restricted by the fact that there was only room for two or three wheelchairs on the minibus and concluded that “it has been a bit trying on the transport side, I’m afraid”. However, other residents recounted more positive experiences of this service, with one saying: “No, I’ve never wanted to go to something and not been able to”. A further criticism of the minibus concerned the level of comfort. One resident commented...
“we can’t go too far because the mini-bus isn’t that comfortable”, while another said: “Trips I don’t do in that minibus because that’s no good for my back”.

In terms of public transport there were three bus routes that passed near to the village at the time of the research, but one of these was due to be discontinued. One resident commented “it’s a long walk round to the bus” while another felt that “Sunday buses are ridiculous, otherwise the bus service here is quite good”.

**THE IMPORTANCE OF LOCATION**

The location of retirement accommodation is another factor that can impact on the ability of residents to maximise independence. The position of Westbury Fields in a large city gives residents access to a wide range of facilities. Overall, interviewees were positive about the location, as reflected in the following quote:

> I think Westbury Fields is ideally situated. I mean, we’ve got, luckily we’ve got a car, but we’ve got 10 minutes up to Cribbs Causeway, we’ve got 10, 15 minutes into town, we’ve got Westbury, we’ve got – I think it’s very ideally suited.

However, “location” received low ratings in the How is your home? questionnaire, coming 8th out of nine categories. Three items in the “location” category received the lowest ratings; these were (i) “close to friends”, (ii) “close to family”, and (iii) “close to shops”. One possible interpretation of these two apparently conflicting pieces of evidence is that access to social networks may be the most important aspect of location for residents. This would make the availability of public and transport particularly important to residents without their own car. It may also reflect the situation of residents who had no family and friends living nearby and might therefore have experienced difficulty maintaining contact.

**QUALITY OF LIFE AND INDEPENDENCE**

Responses to the How is your home? questionnaire suggest that independence is the most important element of quality of life at Westbury Fields. It can therefore be argued that the extent to which the village promotes and supports independence will greatly influence the degree to which residents feel part of a community. The ability of residents to move independently around the village and beyond impacts on the development of social networks.

Residents rated “independence” above “security/safety” and “comfort and design”. The research interviews supported this finding, with many residents emphasising how much they valued their independence. One female resident who had lived in one of the lease purchase flats for just over a year described it as “a little bit of heaven for me to be here and do what I want, independent”.

Independence can of course mean different things to different people. For one resident, who had moved to Westbury Fields because of his wife’s physical care needs, independence meant “a lot of freedom here”. Several residents identified the continued ability to look after themselves as central to independence. This included a wide range of domestic activities. For example, one male resident told us that he and his wife:

> Do all our own cooking, all our own washing and other things that you would do in a normal house, you know, so we’re quite independent.

Other residents highlighted choice as being central to independence. The following quote suggests a balance between choosing to spend time alone and having the option of social interaction and activities when desired:

> What I like about it is that you can stay in your front door, don’t need to go out anywhere, you don’t need to join in, you don’t need to see anybody if you don’t want to but it’s all there. But if you do, you have got a good choice.

Other residents expressed this in terms of the enjoyment of privacy as an option:

> But I do like the fact that we’ve got our own front door and you can shut, if you want to, you can shut it and that’s it.

This is equally important in the care home setting, where much of daily life centres on communal activities. One long term resident of the care home appreciated having “a door that can be shut and they have to knock”.
Quality of life is a broad concept that can be defined in a variety of ways. It is widely viewed as a composite of physical, mental and social well-being and includes aspects such as independence, social relations and security. “Quality of life” was rated 7th out of nine categories in the How is your home? questionnaire, although one of its components, “enough human contact”, was rated second highest of all questionnaire items. In this section we have seen how much the residents of Westbury Fields value their independence and that some features of the physical and social environment can help or hinder their ability to live independently. The importance of getting this right is captured by the words of one lease purchase resident who was managing to live independently with some help, despite her impaired mobility. She was concerned about how long this could continue and said:

I want to keep independent and I don’t want to have to go over there (the care home), however kind they are. So I shall do all I can to stay here. But having no family here now, you see, they’ve all gone, I’ve outlived them all, I have to rely on friends and that isn’t as easy as it sounds because they’ve all got their lives and commitments, so I’m managing, but what I’ll do if I can’t do that, I don’t know. I’ll have to meet that when it comes.

R10; lease purchase

Some residents mentioned the overall quality of life they were able to enjoy. This is captured in the following quote from a very sheltered housing resident who had been in hospital with heart problems and had been told that he needed to live somewhere with 24-hour care available:

To me, it’s been a new lease of life, since I come out of hospital. Here we got everything we want, we got entertainment every afternoon, we can go there, we’ve got calls for the phone to get emergency help if we want. To me, it’s quite peaceful – you’ve got your neighbours, everybody knows one another. Like I said, we meet. If we don’t want to cook we can always buy a meal down in the canteen. Everything you want is here. As you see, the flat is fully equipped, so all you need is just your own furniture and that’s it. But to me, I wouldn’t live anywhere else.

R01; very sheltered housing

Some residents mentioned the overall quality of life they were able to enjoy. This is captured in the following quote from a very sheltered housing resident who had been in hospital with heart problems and had been told that he needed to live somewhere with 24-hour care available:

To me, it’s been a new lease of life, since I come out of hospital. Here we got everything we want, we got entertainment every afternoon, we can go there, we’ve got calls for the phone to get emergency help if we want. To me, it’s quite peaceful – you’ve got your neighbours, everybody knows one another. Like I said, we meet. If we don’t want to cook we can always buy a meal down in the canteen. Everything you want is here. As you see, the flat is fully equipped, so all you need is just your own furniture and that’s it. But to me, I wouldn’t live anywhere else.

R01; very sheltered housing

OPPORTUNITIES AND CHALLENGES FOR INDEPENDENCE
Having identified the importance of independence to residents and some aspects of what independence means to residents, we now explore how these might be influenced by the Westbury Fields village environment. What are the potential opportunities and challenges in relation to independence for residents?

FLEXIBLE CARE AND SUPPORT
The flexibility of care and support available through the care team based in the village is one of the main factors in promoting independence for residents. We have seen that the ability to do as much as possible for themselves is an important element of independence for many residents. In their responses to the How is your home? questionnaire residents rated their “ability to manage” 4th out of the nine categories. Many items within this category concerned domestic tasks such as cooking, shopping and housework. The availability of a range of flexible care packages seems important here. For example, one lease purchase resident who lived alone without a care package described how she was able to purchase some help for a few days when she was ill. Without this possibility she may have needed to temporarily move to a different care setting to access support. Another resident had moved to Westbury Fields straight from hospital because he had been told by his doctor that “you’re fit enough to go home and look after yourself but not to your house, you must have somebody who can be there if you want them”. He felt that Westbury Fields offered him a new lease of life compared to his previous house where his health problems had made him “a prisoner in [his] own house”.

The benefits of having access to a wide range of on-site health interventions was highlighted by a resident who attended regular Chinese exercise classes. The positive impact on her opportunities for independence is reflected in the following comment:

Before, my feet used to be dead, I couldn’t move my feet and my toes, I couldn’t move them at all. Now I can just walk like normal, like it was before.

R01; very sheltered housing

The availability of 24-hour care at Westbury Fields had also enabled a couple to continue living independently in their own home as described in the following quote:

I look after my husband 24/7 but I know the carers are out there, I have had need to call them, I have had to ring the emergency, they were here, they picked him up off the floor, no problem.

R08; very sheltered housing
It also meant that when she was ill for a few days the care team were able to provide him with the support she usually provided.

The provision of extra help with housework on a flexible basis was also identified by some residents as a way of enabling them to remain independent despite fluctuations in their physical health. The availability of respite care in the care home was also mentioned by one male resident as providing him with an essential break from looking after his wife in their lease purchase apartment:

*There again, the care is so good. Six months ago I went away for a fortnight, stayed with my married daughter. I had no hesitation in doing that.*

R18; lease purchase

However, not all residents felt that the care and support provided was sufficient. One woman lived in a lease purchase flat with her husband, who had considerable care needs said she was very happy with their accommodation at Westbury Fields but felt that her independence was limited due to the amount of time she spent looking after her husband. She felt that half a day a week respite care and a little support from family members was insufficient to enable her to enter into village life in any meaningful way.

As already described, the service offered by the team of porters at Westbury Fields forms an integral part of the informal support on offer. The extensive list of services they provide includes helping residents get round the site, responding to alarms, doing ‘odd jobs’, helping with equipment problems and regularly checking that residents are all right. This level of ad-hoc help was widely appreciated by residents and helped some to cope with tasks which were often small but could easily threaten their ability to remain living independently. This was summed up by one resident who said:

*You've got those porters there all the time. They don't realise that, they'll call these porters out for anything.*

R07; lease purchase

FEELING SAFE

Security/safety is another aspect of life at Westbury Fields that was included in the How is your home? questionnaire, where it was rated 2nd overall by residents. The statement “feel safe at home” was the highest rated item within this category. Data from the interviews supported this finding, with many residents voicing appreciation of the feeling of security provided by the ability to summon help at any time using the alarm system. As one very sheltered resident put it:

*I feel secure. I've got the call button and that is useful. I have one in the bathroom, there's a cord in the bathroom and on the whole they come fairly quickly. As I say, I feel safe.*

R31; very sheltered housing

There was also widespread reassurance due to the availability of extra support, which seemed to add to the overall feeling of safety and well-being. This was expressed in the following way by a female lease purchase resident living with her husband:

*That's going to happen at some stage, isn't it, you know that the other one who is left is going to get help if needed and that's terribly important. And it adds so much to the confidence in which you live your life if you have that feeling.*

R23; lease purchase

Some residents perceived there to be a threat from the surrounding area and were glad of the village security arrangements, which, as we have seen, include security fencing, gates and CCTV. One very sheltered housing resident commented:

*I think, before the gates got put up we had quite a bit of problems because it's on the border of Southmead, that we had quite a bit of trouble with people coming in and peeping toms and stuff like that. Now we've got the gates up and its being watched all the time with CCTV cameras and everything, I think it is much better.*

R05; very sheltered housing

The peace of mind that many village residents experienced as a result of the security and safety offered at Westbury Fields was well summed up by a man living in very sheltered housing with his wife:

*I'll be honest with you, it's relieved my stress by about 75%, my stress level, because I've got no worries now about security. I've got no worries about leaving her because we've got a little buzzer there and if she has one of her turns, all she's got to do is press the buzzer, so everything's secure, more or less, isn't it?*

R24; very sheltered housing
However, not everybody was happy with the security system. One resident thought that the security gate system was far from fool proof and still felt some level of insecurity. Another objected to the atmosphere created by the security gates, saying:

I feel slightly like an inmate. There's something slightly psychological, almost unsatisfactory, about the security gates. I feel a little hemmed in.

R23; lease purchase

FINANCIAL SECURITY
Feeling able to live within one’s means and fulfill financial responsibilities is another important aspect of quality of life for many people. Most respondents felt that the cost of living at Westbury Fields was reasonable, and the lease purchase residents in general thought that the service charge represented good value for money. For some this meant that they didn’t worry about maintaining their apartments:

As regards the building, I don’t have the responsibility. And if the gutter’s leaking and the water’s rushing down where it’s not supposed to go, that’s not my worry. And it’s relatively cheap, heating and electricity seem to be very reasonable.

R13; lease purchase

There was much appreciation of the commitment, flexibility and dedication of the staff in general, as the following quote illustrates:

The whole attitude of the people who run this, this place, it varies obviously from individual to individual, but it displays a basic recognition of the need for care and the need to make allowances for older people and that impresses me as well.

R26; lease purchase

There was also specific praise for many individuals including the minibus driver, the porters, the care team, the cleaners, the receptionist, the manager, the activities organiser and the hairdresser. There were also a few criticisms of staffing, mainly related to there not being enough staff and some variability in the quality of the cleaning service. For example, one resident commented on the level of response to the call button at certain times of day:

The more people there are, the more demands they’re going to get and if you’ve only got one person, and he’s got both ends of the estate to deal with, then they can’t get to you immediately but you don’t press the button unless you are in an emergency and you want a prompt response.

R15; lease purchase

Conclusion
In this chapter we have focussed on what it is like for residents living at Westbury Fields in terms of the social experience, the physical environment and quality of life. Residents identified a range of factors that impact on their experience, particularly in terms of being part of a community. These include: design; the provision of facilities; and opportunities for social interaction, particularly through arranged activities; and links with the wider community. We have seen that independence is crucial to quality of life for residents and that this is linked to flexible care and support, the role of staff, mobility and transport, feeling safe and the location of the village. In the next chapter we go on to discuss the implications of these findings for the concept of a ‘balanced community’ within the context of Westbury Fields.
As indicated in chapter 1, the brochure produced by the St Monica Trust states that the overarching aim of the Westbury Fields retirement village is “to encourage a lively, balanced community ranging from active independent residents to those requiring a high degree of support”. However, chapter 1 also stressed the contested nature of the term “community” and the growing acceptance that fully cohesive communities rarely if ever exist. In this chapter we examine the views of those who live and work in the village about the extent to which they see Westbury Fields as a successful community.
A range of factors were identified that impacted on the development of a community, including the physical layout of the village, the provision and location of facilities together with activities and the extent to which village residents are able to engage with local neighbourhoods.
The meaning of community to residents

The fact that Westbury Fields has a secure boundary and can only be accessed through security controlled gates makes it feel very distinctive as a place to live. However, detailed analysis of interviews with residents reveals more complex interpretations of the concept of community. When asked whether they thought Westbury Fields was a community, residents were fairly evenly divided in their answers. Some expressed a strong view that the village worked as a community. One care home resident described it as “a real community of very diverse people to mix with”, while another living in very sheltered housing told us how:

... you generally get somebody knock on the door and come in and say, how are things going, are you alright, you know, come in and have a chat. It's like a community, all together.

R01; very sheltered housing

A similar proportion of respondents felt that the village did not feel like a community. For example, one resident said:

It's a failure as far as I'm concerned. I don't really regard myself as being part of a community, simply because I don't know any of the other people here. You don't have to be part of it and I don't think of myself as part of it.

R06; very sheltered housing

However, the majority of residents who were interviewed appeared to identify more easily with the part of the village in which they lived, rather than with the complex overall, as illustrated by one lease purchase resident:

It is quite true that all my friends are either in this Jessop thing or very similar, well, there is another, Goddard, and again they have flats there. They are nearer to each other. Also, the background is very similar. We all have very much in common.

R30; lease purchase

A similar feeling was expressed by some very sheltered residents:

I think this, the sheltered housing this side, has got quite a community spirit going, yes, but I don't think we have a real community spirit with the two sides.

R12; very sheltered housing

Finally, one care home resident echoed this same feeling:

What people are like out there [indicates flats beyond window] I don't know. There's very little communication amongst people from outside, it's all within the building.

R36; care home

This may partly reflect the fact that there are potentially greater challenges to integration for residents of the care home than for those living in other parts of the village, largely due to their health status.

This view of different areas of the village as somehow separate was widely reflected in the language used. For example, in the following quote a very sheltered housing resident uses the term “The village” to describe the lease purchase apartments. “The Cricketers is mainly used by the village, what we call the village”. Another resident described how those living in lease purchase apartments had been described as “that lot up there” and very sheltered residents as “us down here”. There was some evidence that the care home was the least integrated part of the village. There appear to be a number of possible reasons for this. It was the first part of the village to open and had already become established before other parts were occupied. Secondly, in terms of the layout of the village, the care home sits in one corner, near to one of two exits. Thirdly, the care home residents have the highest level of physical impairments, as confirmed by chapter 2, and as such are less able to access other areas of the village without assistance. Finally, the phased opening of different parts of the village may be a factor in the place of the care home in the village community. The care home was the first part of the village to open in June 2003, followed by the lease purchase apartments in August 2003 and the very sheltered housing in March 2004. There were indications that interaction between care home residents and those in the rest of the village was increasing. For example, a group of lease purchase residents had recently started running a library service for care home residents.
While the research found limited but increasing integration between different areas of the village, as reported above, it is important to consider the extent to which this may reflect the situation in any other village community. For example, a recent report found that although mixed tenure and mixed income were not considered to be important by residents of both traditional and purpose built communities, this had not led to the development of personal friendships across tenures (JRF, 2006). It should also be remembered that at the time of the research some parts of Westbury Fields had only been open for a year. Many residents' comments reflected on the fact that a community cannot be created instantly. For example, one man living in a lease purchase apartment said:

> It's a real enough community within its limitations. The elderly people who hadn't previously known each other are not going to bond into a warm, vibrating, active community just like that.
> 
> R18; lease purchase

Another resident acknowledged that it was early days for the village and that a sense of community is often based on shared experiences. For this resident that process was slowly taking place:

> A lot of our community spirit is sort of chuntering to each other about the problems that we've got, comparing notes, that's the thing a lot of us have in common really.
> 
> R12; lease purchase

If integration and community do develop further within the village over time, as suggested by both residents and staff, this raises the question of whether future residents will find it increasingly difficult to join Westbury Fields as newcomers to an existing community.

Social interaction appeared to take place largely in communal areas, rather than residents' homes, and the two village restaurants, the communal lounges and the croquet lawn were particularly important in this respect. Many of the communal village facilities and organised activities are based in the very sheltered housing, partly in an effort by the organisation to encourage interaction between those living in different types of accommodation. However, this has not always achieved the desired effect, partly due to the physical layout of the site as previously discussed. In fact, in some ways it has had the opposite effect by causing feelings of resentment among lease purchase residents, who feel excluded from some facilities. For example, commenting on the fact that the main communal lounge was situated in the very sheltered housing, one lease purchase resident said:

> Well, of course, it does cause a bit of resentment. To put all this lot down here for the council tenants and nothing for us up this end, we've got nowhere to sit down.
> 
> R07; lease purchase

Another resident suggested the need for a centrally located 'village hall' facility that felt as if it belonged to everyone. Some residents felt that the village didn't have a sufficient range of facilities to promote a full sense of community. Despite the attempt by St Monica Trust to provide a shop on site, this had not proven possible and its absence was widely regretted. However, facilities alone may not be sufficient for all residents to feel part of a community, as expressed in this quote by a lease purchase resident:

> We've got the restaurant where we can meet people but otherwise we are rather isolated in our own community and particularly me, up here, I don't see anybody else.
> 
> R15; lease purchase

This situation was compounded by differences in the financial contribution made by residents in the lease purchase apartments and the very sheltered housing. The same resident summed this up in the following way:

Social and physical factors in the development of Westbury Fields as a community

The analysis of interviews with residents and staff suggests that a number of social and physical factors might impact on the extent to which Westbury Fields has developed as a community.

We have seen how a wide range of facilities and social activities were organised by the Trust for the benefit of all village residents and we have discussed how these were widely appreciated. They were also central to community development in terms of providing opportunities for residents to meet and get to know each other.
They do pay something, but it’s nowhere near as much as what we pay and people have always got the feeling that we were subsidising them. You know, they’ve got the same facilities as us with the lighting and the grounds and that, but they were only paying half the price.

Analysis of interviews with residents has shown that the layout of the village has a significant impact on village life. Different types of accommodation are to some extent grouped together in a way that may discourage interaction, although it could be argued that this merely reflects the situation in many villages throughout the UK.

What is clear is that the cricket pitch creates a sense of division for some residents, as the following quotes illustrate:

Well, we are two groups, which I suppose you can’t help really, with a cricket pitch right in the middle.

The pitch is also a physical barrier for some residents, particularly those with impaired mobility, which makes getting across the village difficult. These residents feel it restricts their opportunities to take part in some aspects of village life. In particular, it complicates their access to other residents, facilities and activities based in Sommerville, the very sheltered housing.

It can be argued that to be ‘balanced’ a village community needs to be integrated with the wider community of which it forms a part, in this case the area of Bristol in which it sits. This seems particularly important for residents who are unable to enjoy access to facilities and social interaction in the village, or simply do not wish to do so. The location of the village is an important factor here. Westbury Fields is situated about five miles from the centre of Bristol, a city of about 380,000 people in south-west England with a wide range of facilities including shopping, education, entertainment and other leisure activities. The village is also within walking distance of Westbury-on-Trym which has a range of amenities, including shops, restaurants and a library.

The research found that many residents used the facilities provided locally and across Bristol and some told us how important they were to them, particularly the wide range of shops. We have also seen that over half of the residents interviewed had moved to Westbury Fields from Bristol or the surrounding area and that many maintained contact with family, friends and organisations from these places. The location of Westbury Fields therefore seems to promote integration with the wider community. However, we have seen that for some residents accessing transport to get into the wider community was a problem. The mini-bus service provided by the village was a vital link but some residents with impaired mobility found it to be uncomfortable and difficult to use.

Integration is of course a two way process, which involves making the village feel part of and accessible to the wider community. As part of this process some village facilities were open to non-residents, including a luncheon club, the hairdressers, the gym and some of the regular activities. The number of outside participants visiting the village was fairly low at the time of the research but there were signs that this was increasing as the village became established. Further links existed through the help at home service that the care team provided to people in the local community. This research did not include consultations with people in the community outside Westbury Fields so it cannot provide their views. However, as a visitor to the village it is easy to imagine that the reality of a gated community, while offering some residents a feeling of increased security, might also present a psychological barrier to complete integration with the wider community.

A question of ‘balance’

One of the central aims of Westbury Fields is to provide a balanced (ie. varied) community in terms of social background and levels of dependency. This aspiration led to the unusual mix, for a retirement village, of council-nominated very sheltered housing and privately owned apartments, and has clearly been achieved in terms of the diversity of residents, although this still leaves open what such ‘balance’ means in practice from the perspective of residents.

Research interviews found widespread awareness of the potential differences between residents in different types of accommodation across the village, or, as one resident succinctly put it:

I suppose the only parallel you can have is a council estate next to a private estate, isn’t it?

However, the same resident felt that such variation in social backgrounds would not hinder the ‘success’ of Westbury Fields:
Whatever community you’ve got, people find like to like. You don’t like everybody, you don’t make a friend of somebody that doesn’t gel with you, do you? Its personalities, so it doesn’t matter whether it’s rented, part-rented or leased.

R09; lease purchase

Others felt that what they perceived as the stress of the organisation on integration was unrealistic. One lease purchase resident commented:

They want us to mix all the time but somehow it doesn’t seem to work, because they seem to like to keep themselves to themselves and perhaps we do as well, I don’t know. We don’t seem to mix. I don’t see why we shouldn’t but that’s just a fact of life.

R16; lease purchase

For a small number of lease purchase residents the mix of dependency levels within the village was an issue. One resident expressed this in the following way:

I don’t like being here, I’ll be honest, because I don’t like being surrounded by decrepit old people. With the best will in the world, you talk to some of them and they don’t answer – I’ve given up trying to hold a conversation.

R02; lease purchase

For these residents the high dependency levels of some people in the village was a barrier to social interaction:

Of course, quite a lot of them down there are quite severely disabled. But, we don’t mix all that much. I don’t think we mix socially with them, if you like. We are very much them and us in that respect.

R07; lease purchase

One care home resident also felt that mixing residents with different levels of dependency wasn’t always a good idea. She related this partly to the amount of living space available in the care home environment:

I mean, with all the empathy in the world, I don’t know if that works, especially in a very cramped dining room

R33; care home

Her views were partly based on her experiences of living in the care home, where another resident had “an absolute fixation with coming into my room night and day and she could be quite aggressive and difficult at times”. Some lease purchase residents felt that they had not fully appreciated the mixed nature of the village before moving in. For example, one said:

When we came here we didn’t know that Sommerville (the very sheltered housing) at the bottom was mostly occupied by council tenants.

R07; lease purchase

Many residents welcomed the mix of dependency levels within the village and appreciated the value of mutual support. For example, one resident described how she kept an eye on someone living in the very sheltered housing:

I always look over from my bed to that window over there [indicating external window overlooking flats] and if I see that gentleman in there making a cup of tea I think, oh, he’s all right. There’s nothing wrong there.

R36; care home

Another example of residents with different levels of dependency looking after each other was provided by two residents living in nearby lease purchase apartments. One had taken a role in helping the other with her patio garden because she felt unable to manage. This kind of support was also taking place in a more organised way in the form of the trolley service for library books, which lease purchase residents were providing for bed-bound residents of the care home.

Another factor raised by residents in relation to the concept of a ‘balanced’ community was age. This is of course particularly relevant to retirement communities which are intended to appeal specifically to older people. At the time of the research the ages of residents ranged from 53 to 96 years, with an average age of 82. Some residents felt that the average age of residents was higher than expected and this, combined with the dependency profile, meant that there was a danger of “isolating a particular type of person within a particular age group”. There was, however, a recognition of the inevitability of this situation, because “you don’t really start thinking about sheltered accommodation until you’re older anyway”.

Westbury Fields: a balanced community?
Some residents were clear that the lack of younger people prevented the village from being a community:

It still doesn't feel like a community. It can't, can it, when it's all one age?

_R23; lease purchase_

One resident described how when her grandchildren visited her and played outside, other residents had complained about the noise. For some residents, contact with the wider community compensated for this lack of what one called a “multi-generational society”. Conversely, others saw the relatively limited age profile as a positive feature of the village:

If you're not 100%, you know that the other person isn't 100%, so you can talk about it and tell one another and we don't want to be interspersed with lots of young people who wouldn't understand.

_R10; lease purchase_

The views of staff

As part of the research, eight members of staff with a range of roles were interviewed about their views and experiences of working at Westbury Fields. All staff interviewed felt that Westbury Fields was a good place to work. The following quote from a member of the care team captures the team spirit that was felt to exist:

I think the team, the care support team are superb. We all look after each other and look out for each other and support each other where needed and we are a happy team. I think that means quite a lot, doesn't it?

_R43; staff_

Staff recognised that developing a balanced community presented a challenge and acknowledged that some divisions existed between lease purchase and very sheltered residents. Some felt that this was largely due to misconceptions about the nature of the village and the feeling among some residents living in lease purchase apartments that they were subsidising the very sheltered housing through the service charge.

Staff felt that Westbury Fields was slowly developing as a community, although there was still some way to go. As one manager said: “No, it's not a balanced community at the moment, but we will get there, I am supremely confident we will get there”. Care home staff initially felt separate from the rest of the village, partly because the care home opened before other areas. However, contact with the rest of the village had increased more recently, with other residents offering their help and support to those living in the care home and making use of the garden and other facilities. Providing a broad range of activities and making sure people felt welcome to use them were seen as important ways of promoting integration between different areas of the village. This was taken forward through the appointment of an activities co-ordinator who had developed a comprehensive programme of events. As previously discussed, many of these activities were based in Sommerville, the very sheltered housing complex, and staff recognised that the layout of the village could discourage some residents from attending. In particular, the cricket pitch was again mentioned, as was the long path which ran down one side of and had become known as “the yellow brick road”. However, this was not viewed as a major issue because, as one manager said:

It's just a case of somebody pushing them there, you know, either getting one of the porters to come and collect them or one of the care staff to take them down, it's not usually a problem.

_R41; staff_

While staff acknowledged that there had been too many snagging problems when the village first opened, largely due to the builders going bankrupt, they praised the overall design of Westbury Fields, both as a workplace and a living environment. Overall, staff felt that Westbury Fields was a nice place for the people who lived there, for a range of reasons. These included:

- Living in a safe, worry-free environment with no responsibility for property maintenance and the re-assurance of having a social alarm system.
- The availability of flexible care packages.
- The advantages of continuity of care from a familiar care team.
- The provision of a wide range of facilities and social activities.

Staff also commented on some potential disadvantages of the environment provided by Westbury Fields. These included the challenge of providing privacy, which one member of staff described as “a goldfish bowl syndrome” and the possibility of the village being perceived as a one-dimensional community:
That’s the sort of thing that would put my parents off, because they wouldn’t want to live in an environment where it’s labelled as a retirement village, so it must be for old people.

There was also an acknowledgement that the mix of village facilities could be improved. Several staff agreed that the lack of a village shop was an issue and some remarked that the gym was under-used.

There was a general feeling among staff that residents were treated as individuals and had the opportunity to live as independently as possible. Overall, the environment was seen as stimulating and friendly:

I think, generally, it is a happy home. The visitors and relatives are always made very welcome, including children and dogs, so it’s quite a lively home and a friendly home.

Managers working in the village aimed for an ‘open door’ style, whereby residents were encouraged to raise any issues. There was a feeling that a small minority of residents had been ‘difficult’ but that complaints were dealt with promptly and fairly. This philosophy of good customer service is reflected in the following quote:

I don’t sit behind a desk all the time, I walk around the site. I look, I make sure things are tidied up; people know I’m around and I get things done.

The Trust’s philosophy of care, as described in chapter 2, is widely reflected in the views of staff. For example, one member of the care home team commented:

We try to make this their home and we say that they have come here to live, they haven’t come here to die, they’ve come here to live and we are very anxious here to promote person-centred care. It’s very much they are treated as individuals.

Conclusion

In this chapter we have explored what the term ‘balanced community’ means to the residents and staff of Westbury Fields. The views of residents were mixed and most identified more with the area of the village in which they lived as a community than with the village as a whole, although it was widely acknowledged it takes a long time for an overall sense of ‘community’ to develop and that it was early days for Westbury Fields. A range of factors were identified that impacted on the development of a community, including the physical layout of the village, the provision and location of facilities together with activities and the extent to which village residents are able to engage with local neighbourhoods outside Westbury Fields itself.

Overall, the research suggests that Westbury Fields functions as a community of interest rather than a community of place. In other words, the development and maintenance of mutual interests and activities among groups of residents appears to be more important to a sense of community than does the sharing of common living space. A strong sense of team spirit and job satisfaction was evident among the staff of Westbury Fields. They recognised the challenges of developing a ‘balanced community’ but there was considerable optimism that progress was being made and a strong commitment to providing the best possible quality of life for all residents.
Rather than provide a simple answer to the question, “Is Westbury Fields a balanced community?”, this study has explored whether, in the views of residents from a wide range of backgrounds and care needs, the village is working. In chapter 2 we described the residents who lived across a range of tenures. Their lifestyles ranged from those who were active and independent to those requiring a high level of care and support. Their health and social care needs also varied considerably, including a small minority with high levels of sensory impairment, multiple personal care requirements and restricted mobility.
Many residents embraced the diversity of people in the village and described examples of mutual support.
Interviews with residents and staff indicated high levels of overall satisfaction with Westbury Fields as an environment in which to live and work. In particular, the benefits of village life spanned three themes: the social experience; the physical environment; and quality of life:

- In terms of the social experience, the development of acquaintances, friendships and mutual support systems were valued aspects of life at Westbury Fields. The attitude and commitment of staff was also important.
- Appreciation of the physical environment focused on the design of individual flats and the provision of a wide range of communal facilities. Other factors included the reassurance provided by the social alarm system, the absence of responsibility for property maintenance and the security offered by the gated village environment.
- Quality of life was a recurring theme throughout the research and was seen to be promoted by flexible care and support packages, the role of staff, the existence of good facilities, the provision of a range of social activities, the location of the village, feeling safe, financial security and the availability of transport. Independence was highly valued by residents and enabled them to have choices. These included, crucially, the choice to integrate with the rest of the village or to remain private.

Promoting the development of a community
Residents were divided in terms of how they saw Westbury Fields working as a community. Some felt a definite sense of belonging to a village community, describing interaction between different areas of the village as examples of this. For other residents there was limited interaction across the village; instead, they felt that a number of neighbourhoods had developed, corresponding to the different types of village housing and particular social activities. For example, there was a strong sense of identity among a large group of lease purchase residents who were members of the croquet club. It may be that this is one stage in the development of a wider community across the village or it may be that this is merely a reflection of how people like to form communities of interest as explained in chapter 1. There was certainly widespread agreement among many residents and staff that it takes a long time to develop a sense of overall community and a feeling that Westbury Fields was still in the early stages of development. This research identified three key aspects of village life that impact on this process: the social experience; the physical environment; and quality of life.

THE SOCIAL EXPERIENCE
- The layout of Westbury Fields discourages contact between residents living in different areas of housing. The physical separation between the very sheltered housing and other areas of the village was evident and appeared to contribute to a feeling of ‘us and them’ for some residents. The cricket pitch around which the village is arranged was perceived as an obstacle, particularly for residents with impaired mobility.
- The quality and diversity of social activities organised by the Trust were widely appreciated; such activities provided opportunities for developing friendships and had become an important part of village life for many residents.
- The transport provided by the Trust for residents is an essential link to facilities and social networks both within and beyond Westbury Fields. Some residents with impaired mobility felt that the vehicles used did not always meet their needs.

THE PHYSICAL ENVIRONMENT
- Village design plays a crucial role in maximising independence and quality of life for residents. There was much praise for the design of village buildings and the size and number of rooms within individual apartments. Some residents raised concerns about the accessible design of kitchens and the availability of outside areas in which to exercise.
- Communal facilities and activities are the focus of social networks in the village. In particular, the restaurants and lounges were highly valued as meeting places and venues for entertaining visitors. The lack of a village shop was identified as a gap in facilities by many residents.
- The location of most of the communal facilities and activities in the very sheltered housing was an issue for many lease purchase residents and the cause of some resentment.

QUALITY OF LIFE AND INDEPENDENCE
- Integration of Westbury Fields with the communities that it adjoins is promoted by encouraging local residents to use village facilities and providing a care service to residents in their own homes.
- Social networks in the wider community are an important source of contact and support to many residents. Several residents had previously lived nearby and engaged fully with the local community. Many enjoyed regular contact with family members who lived in the Bristol area.
- The location of Westbury Fields within a large city seemed to be important in terms of providing access to a wide range of facilities.
• The availability of flexible, person-centred care provided by a well-trained and supported staff team is a key element of promoting independence and enabling residents to engage in village life.

Summary
The mix of council-nominated very sheltered housing and privately owned apartments within one retirement village reflects the aim of the St Monica Trust to develop a community which is balanced in terms of social background and levels of dependency. A number of conclusions can be drawn from the research about the extent to which this has been achieved:

• Many residents embraced the diversity of residents in the village and described examples of mutual support. Others felt that this was unlikely to lead to the integration of residents from different social backgrounds since this failed to occur in most village communities.

• A small number of residents expressed intolerance of those with physical frailty and perceived it as a barrier to the development of a community. These views may change as more of the initial residents in the retirement and the very sheltered housing flats start to make more use of the care home facilities as their own health declines.

• For some residents, the age profile of the village was a positive feature of Westbury Fields and one of the reasons for living there. However, others highlighted the importance of inter-generational contacts and felt that the limited age range was a barrier to Westbury Fields feeling like a ‘real’ community.

Our view is that Westbury Fields is a much more ‘real’ community than most retirement villages. It contains a variety of older people in terms of tenure and health status and it offers genuine options in relation to how people want to use and understand their village as a community. The future success of retirement communities depends upon grasping the subtleties of both communities of interest and communities of place rather than aiming for an idealised and outdated vision of rural village life. Perhaps the aim should be to create lively and diverse communities rather than balanced ones?

Recommendations
This report ends with recommendations for the development of retirement communities based on the findings of this research. Independence is crucial to quality of life for the residents of retirement communities and enables them to make lifestyle choices. Central to this is the provision of care and support that is flexible, of a high quality and provided by well trained staff. A range of other factors are important to maximising independence and the development of a balanced community, including design and layout, the provision of facilities, social activities, the location of the village and the availability of transport.

THE SOCIAL EXPERIENCE
• A wide and imaginative range of activities are needed to support independence and the development of social networks. At Westbury Fields an activities co-ordinator has developed a broad programme of social events and learning opportunities.

• Phased opening of different parts of the community can hinder the development of social networks across the village and should therefore be avoided where possible.

• Residents should be encouraged to understand and support differences in social background and dependency levels. At Westbury Fields this process has been helped by providing residents with comprehensive information about the village set up, including how services are provided and funded.

THE PHYSICAL ENVIRONMENT
• Village layout should be planned to promote interaction between different areas of housing. Planning and other restrictions at Westbury Fields constrained the positioning of the very sheltered housing and meant that the village had to be arranged around a central cricket pitch. This has acted as a barrier for some residents, particularly those with impaired mobility. This issue has been taken on board in the design of the Trust’s latest development in south Bristol.

• Facilities are best located where they can be easily accessed by residents from all areas of the village and have a feeling of shared ownership. Some residents at Westbury Fields suggested that a centrally located village hall would serve this function.

• Careful consideration should be given to interfaces with the wider community. Gates and fences, while providing some residents with a feeling of security, can also be perceived as a barrier. A conscious
decision was taken at Westbury Fields to offer a high level of security while also taking a range of steps to encourage the local community to come onto the site.

- The accessibility of facilities and social networks in the wider community is an important factor in the location of retirement communities, along with the provision of appropriate transport. Westbury Fields is well-sited in relation to local facilities and these are well used by village residents.

QUALITY OF LIFE AND INDEPENDENCE

- Care provision should be flexible and person-centred and delivered in order to maximise quality of life and independence for residents. This is delivered at Westbury Fields by staff who are well trained and fully supported within an organisation with a considered philosophy of care.
- There are many aspects of diversity that cannot be explored through analysis of the data collected in this study. However, the authors believe that there is a need to consider how retirement communities in general can support diversity and meet the needs of residents from black and minority ethnic groups, people living in same sex relationships and those from a range of religious and cultural backgrounds.
References


University of Sheffield. www.shef.ac.uk/sisa/EASY-Care

Williams, R. (1976) Keywords, Glasgow: Fontana.


W Illiams, R. (1976) Keywords, Glasgow: Fontana.
## Appendix 1
Interview schedules

**WESTBURY FIELDS RESIDENTS**

1) Tell me about your accommodation at Westbury Fields.

2) Where were you living before you moved here?
   a) Have you kept in touch with family and old neighbours since moving in?

3) How did you come to move in here?
   a) What did you think it would be like?
   b) How does it compare with your expectations?

4) What, if any, types of care do you receive here?

5) Do you mix with other residents and how do you get on with them?
   a) Within your accommodation area?
   b) With people in other parts of Westbury Fields?

6) What sort of social activities do you take part in?
   a) At Westbury Fields?
   b) Outside Westbury Fields?

7) What facilities do you use here?

8) What do you feel about the design of Westbury Fields, both your own accommodation and the village as a whole?

9) Is there anything else you would like to say about living in Westbury Fields?

**ST MONICA TRUST STAFF**

1) What is your role at Westbury Fields/ST Monica Trust?
   a) Formal designation?
   b) Focus of the job?

2) Were you involved in the setting up of Westbury Fields?
   If yes:
   a) What can you tell me about the history of Westbury Fields?
   b) What different types of accommodation and care are provided at Westbury Fields?

3) What are the strengths and weaknesses of the mixture of accommodation and care provided at Westbury Fields?

4) How is the area you work in organised?
   a) What are the management structures?
   b) How are services delivered?

5) How does the area you work in link with other areas of Westbury Fields/the Trust?

6) Are you involved in the recruitment of residents?
   a) If yes, how does this work?

7) Do you have any comments about the design of Westbury Fields?

8) What facilities are provided for the residents you are responsible for and how well are they used?

9) Do you feel that Westbury Fields functions as a balanced community?

10) What do you think life is like for residents living at Westbury Fields?

11) Is there anything else you would like to say about working at Westbury Fields/the Trust?
Appendix 2
How is Your Home?

Please tick or cross the boxes in each section to say whether each item is acceptable or not. Put a tick \(\checkmark\) for good and a cross \(\times\) for bad. Then give the section an overall score out of 10. (10 = Perfect; 1 = Terrible)

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<td>Garden size</td>
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<td>Parking space</td>
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<td></td>
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<tr>
<td>Able to keep pets</td>
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<tr>
<td>Independence from your family</td>
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<tr>
<td>Happy to be responsible for home</td>
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<tr>
<td>House insurance</td>
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<td></td>
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<tr>
<td>Heating/Hot water</td>
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<tr>
<td>Council Tax</td>
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<td></td>
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<tr>
<td>Water</td>
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<tr>
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<td>Help in your home</td>
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<td>TV licence</td>
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<tr>
<td>Wiring</td>
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<tr>
<td>Gas fittings</td>
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<td>Plumbing/drains</td>
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<td>Water supply</td>
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<tr>
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<td>Light and sunny</td>
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<tr>
<td>House secure if out</td>
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<tr>
<td>Feel safe</td>
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<tr>
<td>Fire precautions</td>
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<tr>
<td>Score out of 10 for Safety</td>
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### LOCATION
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<td>Quiet/stress free</td>
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<td>Buses, etc</td>
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<td>Close to family</td>
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<td>Like the area</td>
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<td>Close to friends</td>
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<tr>
<td>Feel safe</td>
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<td>Close to help</td>
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<td>Good neighbours</td>
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<tr>
<td>Other facilities</td>
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<td>Pleasant/healthy</td>
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<td>Score out of 10 for Location</td>
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### MANAGING
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<td>Bathing</td>
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<tr>
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<tr>
<td>Changing light bulbs</td>
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### QUALITY OF LIFE
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<tr>
<td>Able to pursue your interests</td>
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<tr>
<td>Enough human contact</td>
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<tr>
<td>Peace of mind</td>
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<td>Are any of these issues causing you stress</td>
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<tr>
<td>Score out of 10 for Quality of Life</td>
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Enter scores here and tick any factors that are especially important to you.

### FACTOR | 3 | SCORE
| Size and Space |     |       |
| Independence   |     |       |
| Cost (affordability) |     |       |
| Condition of Property |     |       |
| Comfort and Design |     |       |
| Security       |     |       |
| Location       |     |       |
| Managing       |     |       |
| Quality of Life |     |       |
| TOTAL          |     |       |

### Factual Information About your Home
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<tr>
<td>If other please describe</td>
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How many people?   
How many bedrooms?  
Garden: Yes | No
Rented: Yes | No
Private: Council | Other
Owner: Yes | No
Occupied: Freehold | Leasehold |
Mortgaged: Paid for |       |
How many pets?
Appendix 3
List of Advisory Group members

Carmel Brogan, Strategic Services, Bristol City Council
David Cottam, Service Manager, Social Services, Bristol City Council
Simon Evans, Faculty of Health and Social Care, UWE
Lorraine Howell, Resident, Westbury Fields
Jeanette Iles, Care and Support Manager, Westbury Fields
Professor Robin Means, Faculty of Health and Social Care, UWE
Dr Ian Michael, Resident, Westbury Fields
Dr Alisoun Milne, School of Social Policy, Sociology and Social Research, University of Kent
Rachel Plues, Head of Marketing and Information, St Monica Trust (Chair)
Zara Ross, Head of Human Resources, St Monica Trust
Geoff Thomas, Operations Manager, Westbury Fields
Appendix 4
The Trust vision and values statement for staff

**THE VISION OF OUR STAFF FOR THE SERVICES WE OFFER IS:**

People living independent, dignified and fulfilled lives.

This statement sums up what the organisation is aiming to achieve for all its service users (and staff) and it makes a positive difference to how you do your job. When you first start working here your manager will talk to you about real-life examples of how this applies in the setting where you work. This vision statement can also be applied to you and your immediate colleagues.

There are many important values which underpin the work we do. In 2004 St Monica Trust staff teams voted the following their top five values:

- Respect
- Honesty
- Caring
- Dignity
- Trust

When you start work at St Monica Trust these values will be discussed during your induction. As an employer, St Monica Trust strives to ensure that these values will be lived out in action by the organisation in how it deals with service users, carers, staff, professional partners.

You can make a real difference to the lives of others.

**Respect**

This means that St Monica Trust will:

1. Welcome the diversity of cultures and backgrounds held by its service users and staff.
2. Promote an inclusive culture of equal opportunities which recognises the value and worth of every individual.
3. Address intimidation, bullying and lack of respect for service users, staff or others associated with our services.

This means you will be expected to:

1. Treat each person as an individual respecting diversity, different cultures and values.
2. Respect and promote the views and wishes of individuals (and where appropriate, their carers).
3. Respect the organisation, and adhere to its policies and procedures.

**FOR EXAMPLE:**

We try to respect the choices service users make – what name they want to be called, when they want to get up, what they prefer to eat, how they want to be supported and whom they want to visit them.

**Honesty**

This means that St Monica Trust will:

1. Provide appropriate information to support you to undertake your role.
2. Offer opportunities for you to learn, develop and receive honest feedback about your performance at work.
3. Support appropriate and consistent three-way communication between all staff, service users and managers.

This means you will be expected to:

1. Be honest, truthful and accountable.
2. Communicate and work in an appropriate, accurate and straightforward way.
3. Declare issues that might create conflicts of interest and make sure that they do not influence your judgement or practice.

**FOR EXAMPLE:**

St Monica Trust regularly asks service users/carers to give honest feedback (eg., completing questionnaires) about the services they receive. We listen to what is said and try to address issues one by one.

**Caring**

This means that St Monica Trust will:

1. Provide opportunities to enable social care workers to strengthen and develop their skills and knowledge.
2. Prepare staff for new and changing care roles and responsibilities in order to meet changing needs.
3. Respond appropriately to staff who seek assistance to carry out any aspects of social care work.

This means you will be expected to:

1. Promote independence, quality of life and potential in people.
2. Inform the appropriate manager where the practice of colleagues may be unsafe or adversely affect standards of care.
3. Recognise and use responsibly the power that comes from your work with service users, carers, colleagues and others.
Appendix 4
The Trust vision and values statement for staff

FOR EXAMPLE:
We try to be creative and flexible in enabling service users to have as full and interesting lives as possible – some of our care home residents have grown their own vegetables, and really enjoyed eating them!

Dignity
This means that St Monica Trust will:
1. Give service users the information and support they need to lead dignified and fulfilled lives.
2. Support staff to meet regulatory requirements, and not require them to do anything that would put such compliance at risk.
3. Treat staff with value, courtesy and dignity throughout their employment in the organisation.

This means you will be expected to:
1. Maintain dignity and privacy by working in a professional, confidential manner with service users, carers and colleagues.
2. Encourage service users to lead fulfilled lives and assist them to understand and exercise their rights.
3. Follow procedures designed to keep others and yourself safe from violent or abusive behaviour at work.

FOR EXAMPLE:
When service users who may be confused forget they have asked staff the same question many times, we will try to maintain their dignity, by not embarrassing them, or losing our patience!

Trust
This means that St Monica Trust will:
1. Work openly with service users and staff, providing them with appropriate information and feedback about the organisation’s changing services.
2. Listen to feedback from service users and staff about how services can be improved and try to implement positive ideas.
3. Recognise and respect the roles and expertise of workers from other agencies and promote trust and partnership with them.

This means you will be expected to:
1. Be trustworthy, reliable and dependable.
2. Honour work commitments, agreements and arrangements and when it is not possible to do so explain why to managers, service users, colleagues and carers.
3. Declare issues that might create conflicts of interest and ensure that they do not influence your judgement or practice.

FOR EXAMPLE:
When service users share confidential information about themselves, their family, their past, we will not gossip about this information amongst colleagues or with people outside of the organisation.
“I think it’s a great idea because you do feel like a person and you don’t feel as if you’re on your own, trying to cope on your own and that’s a great thing.”

VERY SHELTERED HOUSING RESIDENT, WESTBURY FIELDS.
Retirement communities first appeared in the UK in the 1950s as groups of privately owned residences for retired older people in relatively good health who were able to live independently. More recently the nature of retirement communities has broadened and they now include extra-care housing schemes, continuing care retirement communities, and purpose-built retirement villages. Westbury Fields, built in Bristol by the St Monica Trust in 2003, is one of the first to combine social rented housing, apartments owned through a variety of lease purchase arrangements and care home with short term care and dementia care provision within a privately funded retirement village complex. The aim of this community for more than 200 residents is to encourage a lively, balanced community ranging from active, independent residents to those requiring a high degree of support. The University of the West of England, Bristol, was commissioned by the St Monica Trust to carry out an exploratory evaluation of the village, which was undertaken between October 2004 and March 2006.