








## Residents' views of a Continuing Care Retirement Community

Hartrigg Oaks, in York, is the UK's first Continuing Care Retirement Community. Developed by the Joseph Rowntree Housing Trust and opened in 1998, it is intended to support an active and independent retirement by offering high quality accommodation and communal facilities, alongside extensive care and support services. Services are provided using a financial model unique in the UK, pooling residents' fees to create a shared resource to fund care and support. A three-year study of residents' views of Hartrigg Oaks, by researchers at the Centre for Housing Policy, University of York, found that:

-  Many residents had chosen Hartrigg Oaks because they felt it offered a housing solution that gave them the independence that they wanted, with the security and peace of mind offered by extensive onsite care services.
-  Many residents had made a 'preparatory' move to Hartrigg Oaks while still largely, or wholly, independent. Alongside the care services, they were attracted by bungalows with high space standards, the onsite facilities and the active social life.
-  The pooled financial model - offering the option of a clear and fixed fee that would not rise (apart from increases linked to inflation) even if they needed permanent residence in the onsite registered care home - also appealed to many residents.
-  Most residents felt that Hartrigg Oaks functioned as a community, both in the sense of its encouragement of, and facilities for, a wide range of resident-led activities and also in the sense of general 'good neighbourliness' between residents.
-  Overall satisfaction with Hartrigg Oaks was high, with many residents feeling it had delivered on its promises. In 2002, 83 per cent were 'very satisfied' or 'quite satisfied', with less than 5 per cent expressing overall dissatisfaction.
-  Overall satisfaction levels appeared to be highest among those who led active lives both within and outside Hartrigg Oaks. Some less active residents - often older and frailer - had lower overall levels of satisfaction. Some aspects of bungalow design were also quite widely criticised.
-  Care and support services were universally praised by those who had used them. Some initial problems with care planning had been quickly overcome. However, some issues remained in relation to the onsite management of dementia-type illnesses.

## Background

Hartrigg Oaks in New Earswick, York, is the first example in the UK of a Continuing Care Retirement Community (CCRC). This non-profit-making community, developed without government subsidy and run by the Joseph Rowntree Housing Trust, has a financing system unique in the UK. Capital payments and annual fees from each resident are pooled to fund care and support services for all the residents. This allows Hartrigg Oaks to charge a flat rate, inflation-linked fee, that will not rise even if a resident needs permanent residential care. (Residents can opt to pay for care as needed.) The objective is to achieve a balance between those residents who need care and support and those who do not make many demands on its care services. Hartrigg Oaks must therefore try to ensure that it has the right 'balance' of residents and appeals to the 'young-old' who anticipate living independently for some years to come. All potential residents undergo a health check.

The scheme consists of 152 bungalows, built to Lifetime Homes standards, clustered around a central complex housing communal amenities - a café, restaurant, library, arts and crafts rooms, and a fitness suite - and a 42-bed residential care home, 'The Oaks'. Hartrigg Oaks offers a range of support to residents, including domestic help, personal care, and temporary, short stay and permanent residence in the onsite care home. Box 1 summarises a separate monitoring report prepared by the Joseph Rowntree Housing Trust, showing the use of services since 1999.

## Reasons for moving to Hartrigg Oaks

**"It's what so many of us want ... You can come and go as you please, you have complete independence, and yet there are communal activities if you want friendship, and there is this eventual promise of care until you die." (Resident)**

Residents were attracted by a setting in which they could live as they wanted, but with care and support

available when needed. Hartrigg Oaks also offered various amenities, social activities, high quality bungalows and an attractive location.

Many residents had made a 'preparatory' move to Hartrigg Oaks because they wished to control how their future care needs would be met while they were still fully independent. For some, this was in part so that others could not 'take over' the management of their lives, should they become less independent, and in part for their own peace of mind. Some had been keen to lessen potential pressure on children and other relatives, should their health start to fail.

Many residents were influenced by the Rowntree reputation. Quaker residents trusted the organisation: others knew of its innovative work in supported and social housing and its financial viability. Some residents expressed distrust towards private sector providers of housing for older people because of their focus on profit.

## Life at Hartrigg Oaks

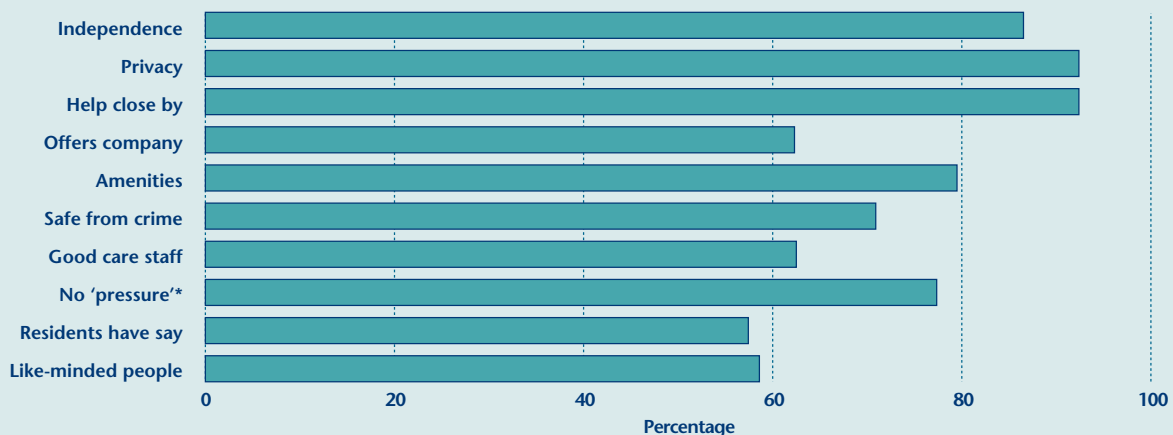
Overall satisfaction levels with Hartrigg Oaks were high. In 2002, 83 per cent of residents were 'very satisfied' or 'quite satisfied'. Less than 5 per cent expressed overall dissatisfaction.

The social life at Hartrigg Oaks, including the high number of resident-led interest groups, was valued. Most residents also praised the catering and other communal facilities. Most had positive views of the design of Hartrigg Oaks as a whole and the spaciousness of the bungalows. Figure 1 summarises what residents reported to be the best aspects of living at Hartrigg Oaks.

For many residents, Hartrigg Oaks offered a housing solution that enabled them to retain control over their lives and to choose the extent to which they became involved with community life. The presence of the onsite care services also gave many residents a sense of security and peace of mind.

**"It did indicate it was a community, but you didn't**

Figure 1: The best aspects of life at Hartrigg Oaks (% of residents)



Source: 2002 Postal Survey (\* No 'pressure' to take part in arranged social activities)

## Box 1: Statistical information

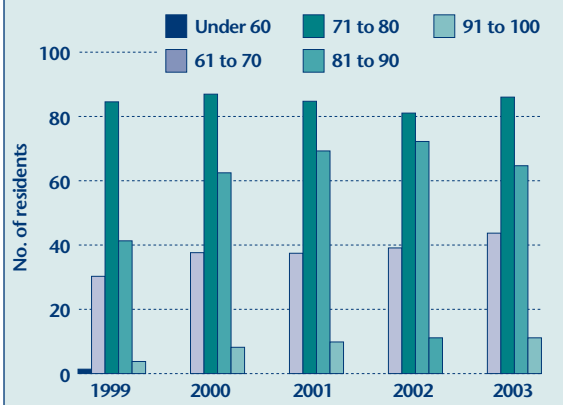
### The residents

Table 1: Number of residents

Year (at 1 Jan)	1999	2000	2001	2002	2003
Total residents	160	195	200	203	205

Hartrigg Oaks was fully occupied during 1999. The small increase in the population since then is due to bungalow residents transferring to the residential home and their previous bungalow being occupied by a new resident.

Figure 2: Age profiles



The ratio of women to men is currently just over 2:1. The average age at 31 December 2002 was 78.5 years, an increase of 2.5 years over 2000-2002. The average age is being held down due to the policy of allocating bungalow vacancies in ascending order of age of applicant (minimum age 60).

### Bungalow services

As expected, the level of care services to residents in bungalows has increased over the past five years. In 2002,

Table 2: Services to bungalow residents

Type of care	Description
Home help	Vacuuming, dusting, washing up, changing beds, mattress turning, laundry of clothing, bed linen and towels. Basic shopping service for food and cleaning materials.
Personal care	Dressing, undressing, bathing, toileting, meal preparation, assistance with medication.
Pop in	Up to 15 minutes. Emotional support, meal delivery and some lower levels of personal care such as toileting or meal preparation.

99 residents received some support during the year: in total this averaged 230 hours per week.

### The Oaks services

The Oaks has 42 rooms. Initially, these were allocated to individuals from outside Hartrigg Oaks, but use by bungalow residents has gradually increased (see Table 3).

Table 3: Use of The Oaks by bungalow residents

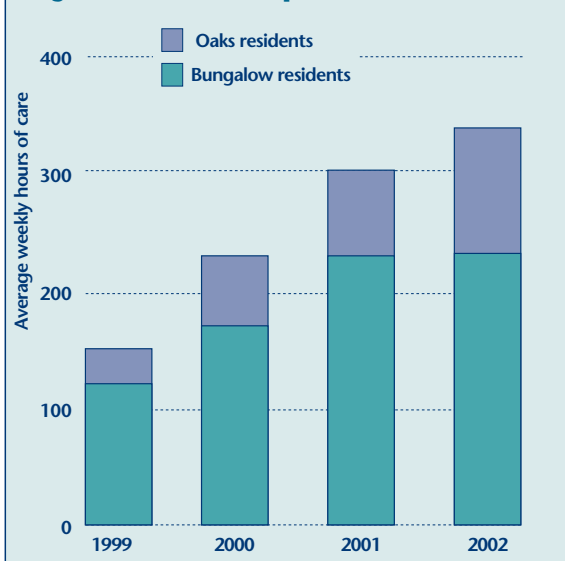
	1999	2000	2001	2002
<b>At beginning of year (1 January)</b>				
	1	2	3	10
Short-term admissions	32	37	27	24
Permanent admissions	1	1	8	7
Return to bungalows	(30)	(34)	(26)	(16)
Death/hospitalisation	(1)	(3)	(2)	(9)
Moved to another care establishment	(1)	0	0	(1)
<b>At end of year (31 December)</b>				
	2	3	10	15

Table 3 highlights the large number of residents who have used a room in The Oaks as a short-term admission, such as for respite and recuperative care. Admissions in 2002 represented a total of 674 'bed nights'.

### Total services

Figure 3 combines the amount of services provided to residents in bungalows and to residents transferring to The Oaks (both permanent and short-term admissions).

Figure 3: Total care provided



**have to be a very active participant if you didn't want to, and that was clear and that was important."**  
(Resident)

Many residents also felt that they had a 'say' in running Hartrigg Oaks, through the Residents Committee and other consultation mechanisms.

Residents criticised some aspects. There were some design faults in the bungalows, notably the bathrooms. In addition, the positive views, while widespread, were not universal. Overall satisfaction appeared to be highest among those who led active lives both within and outside Hartrigg Oaks. Some less active residents, who were often older and frailer, had lower overall levels of satisfaction.

### Fees and finance at Hartrigg Oaks

Residents who opted for a fee (linked to inflation) that would not increase, even if they required full-time residential care, could plan financially for the medium and long term. Financial planning would have been more difficult in ordinary housing, as they would have been uncertain about the extent to which their assets might be depleted by having to pay for personal or residential care.

**"My wife had her mother in a nursing home and we had seen the 'evil', as I put it, of having to pay the capital to stay in a state nursing home, and I'd looked at insuring ourselves, so the financial amounts to come in here weren't so drastic when one realises what it does cost for that type of insurance..."**  
(Resident)

Most residents found Hartrigg 'easy' or 'quite easy' to afford (65 per cent in 2002, with another 14 per cent reporting that they 'did not think' about affordability). However, 20 per cent of residents did report that it was quite or very difficult to afford. Falling interest rates and share values had affected the income of some, with one-third reporting affordability had become more difficult since they moved in.

### Care and support services

The care and support services (see Box 1) were universally praised by those who had used them. Some initial problems with the planning and allocation of care and support, centred on a higher than expected need for domestic help, had quickly been overcome. Residents praised the professionalism and courtesy of the care staff.

**"In my case I've had a lot of ill health whilst I've been here and I have been extremely grateful for the help I've had from the carers and those in charge of the carers ... they're not intrusive, but they're there."**  
(Resident)

At the time the research was concluded, some questions existed about the capacity to care for people with dementia-type illnesses. Although Hartrigg Oaks aimed to offer its residents a 'home for life', a small number of residents had left the community to receive specialist NHS dementia care. The extent to which Hartrigg should care for residents with dementia raises questions over the ambience, management and costs of living at Hartrigg Oaks.

### Conclusion

This research indicates that the CCRC concept clearly appeals to many older people. Most residents felt Hartrigg Oaks had delivered on what had been promised and the researchers conclude that it provides a model from which further CCRCs can be developed. Social rented or shared ownership schemes for older people cannot use an actuarial model like that of Hartrigg Oaks, which is affordable to about one quarter of the UK's older population. However, social landlords can perhaps draw lessons from the ways in which Hartrigg Oaks provided support and care, quality living accommodation, amenities, encouragement of resident-led activities and general operating ethos.

### About the project

The research ran from spring 2000 to late 2002. Quantitative and qualitative methods were employed including: two postal surveys directed to all residents; face-to-face interviews and discussion groups (involving almost 1 in 3 residents); face-to-face interviews and discussion groups with staff and a discussion group with residents from the surrounding village of New Earswick. The separate monitoring report was prepared by Hartrigg Oaks staff.

### How to get further information

The full report, **Living at Hartrigg Oaks: Residents' views of the UK's first continuing care retirement community** by Karen Croucher, Nicholas Pleace and Mark Bevan, is published by the Joseph Rowntree Foundation (ISBN 1 85935 132 8, price £15.95).