

# Healthwatch Coventry

## Overview Housing with care report Winter 2025



# Introduction and Background



## What is housing with Care

Housing with care is a term that reflects Coventry City Council Adult Social Care and Housing Providers delivery of housing for vulnerable people who need additional support. "In a housing with care setting "you Housing with Care offers residents their own home alongside on-site care and support.

Our Enter & View visits aimed to understand:

- How residents experience day-to-day life in their schemes
- What is working well
- Where improvements could be made
- How care, support, activities and communication contribute to resident wellbeing



Themes presented here are high-level and non-identifiable. Full findings will be published after provider responses are received.

# Introduction and Background cont

## Background

We visited housing with care schemes in Autumn 2024, to speak to people about their experiences of NHS services, their GP, dentists and community care, we were aware that we weren't speaking to residents about their views and opinions of care received within the scheme, we were also aware that we hadn't explored the views of people using Adult social care to find out what they felt and how they benefited or not, from their care. The Steering Group earlier in 2025 agreed that we could carry out an enter and view to housing with care, so we briefed our Authorised Representatives accordingly.

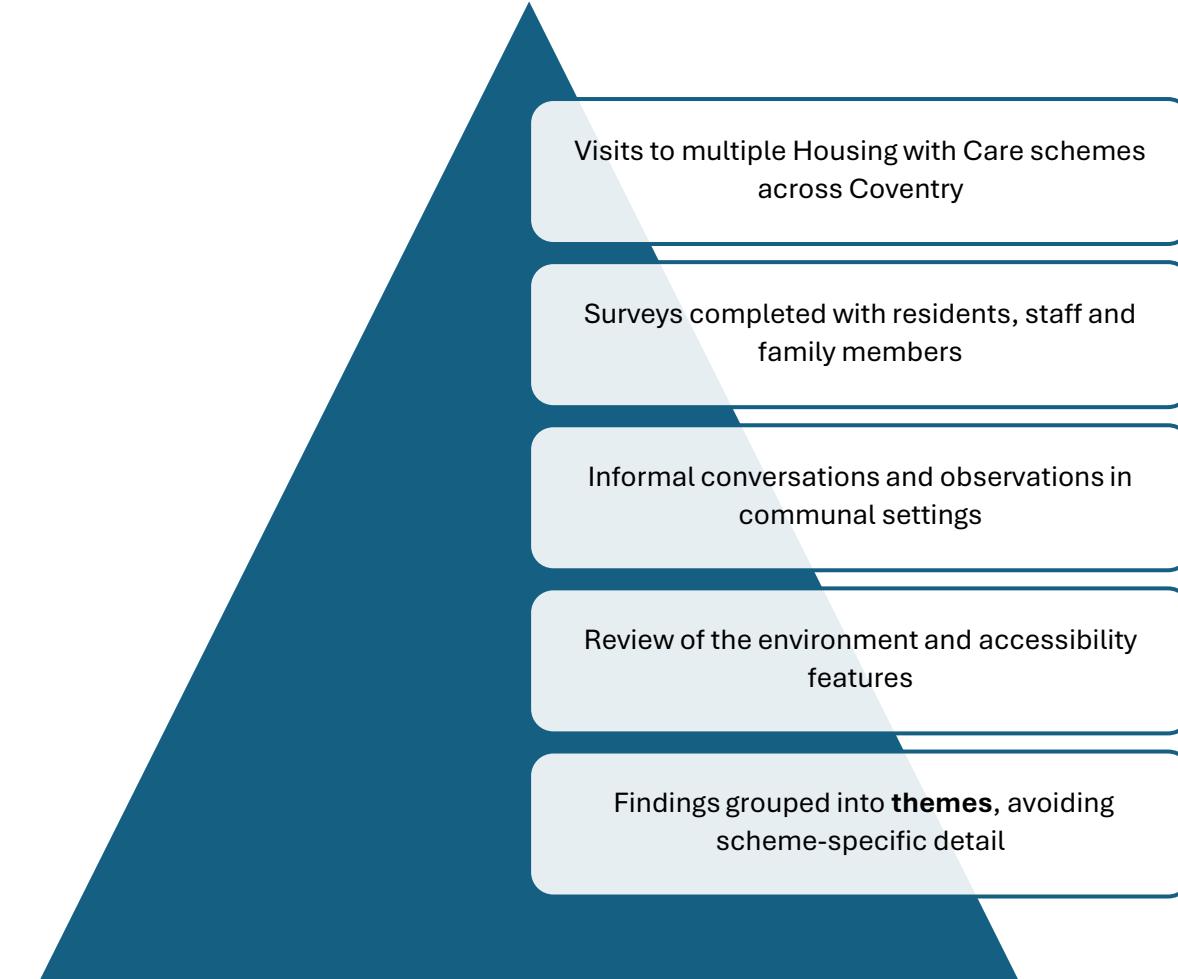
We were interested in how people experienced their care, and how it met their needs. We were also interested to understand more about Adult Social Care and how it works for the people of Coventry who need additional support and care.



**We wanted to explore the services on offer to help schemes to understand the issues and improve them.**



# Methodology (how we carried out the Enter & View)



Visits to multiple Housing with Care schemes across Coventry

Surveys completed with residents, staff and family members

Informal conversations and observations in communal settings

Review of the environment and accessibility features

Findings grouped into **themes**, avoiding scheme-specific detail

# In a nutshell

We spoke to 109 residents

We spoke to 36 staff and 5 family or friends

We visited 11 housing with care schemes

Age of residents we spoke to was between 49 and 104 years

We focused on the following areas: -

Personalisation  
dignity &  
respect

Care and  
support

Activities,  
Mental Health  
and isolation

Food and  
nutrition

Building and  
environment

## Housing with care scheme we visited.

We visited multiple Housing with Care schemes across Coventry, delivered by a range of providers.

Specific scheme names and details are not included at this stage in line with the 20-day provider response period

\*\* Full disclosure in main report\*\*

The range of people with different physical and mental ability, means it is difficult to organise activities, services and communication that meet everybody's needs all of the time.

## Residents generally reported:

- Feeling able to maintain independence
- Having their own routines and preferences respected
- Feeling that their flat is "their home"
- Positive relationships with staff and other residents

Some residents expressed a desire for more flexibility in day-to-day arrangements

Good Practice displayed – Personal care plans are in place i.e. people have their plans on boards at an accessible height in their rooms.

\*\* Full disclosure in main report\*\*



**Freedom to do what you want, go out. I come down for company if and when wanted. I have my own home in the flat."**



## What the residents told us about their experiences of care and support as individuals



**“The whole idea of Housing with Care is the reason why it is good.  
I still get to keep my independence.  
Staff get to know us, and it is wonderful being listened to”**



Many residents spoke of the schemes as being “their home” and the staff and some of the other residents are like family. Important in terms of connection and mental wellness. These relationships are positive parts of resident’s lives, but some feel that some of the practices prevent them being independent, for example the locking up of medications, and having to ask staff to get them, when they were self-medicating before.



**Freedom to do what you want, go out. I come down for company if and when wanted. I have my own home in the flat.”**



- \*\* Full disclosure in main report \*\*

### Staff commonly described:

- Commitment to supporting residents' wellbeing
- Enjoying helping people maintain independence
- Challenges linked to increasing complexity of needs
- Limited time for meaningful conversations due to workload

### When asked what they most liked about their role staff members said:



"Being able to help people live a productive happy life where they feel supported and safe."



**All staff were clear about their role to support tenants and make sure they were looked after.**

- \*\* Full disclosure in main report\*\*

## Our observation included

- **Warm and respectful interactions between staff and residents**
- **Staff focusing on residents' preferences and interests**
- **Variation between schemes in communal spaces and activity levels**
- **Different approaches to displaying or sharing information**

Observations are reported at a thematic level only



# Care and Support

## Residents generally described:

- Feeling safe
- Receiving help with personal care, medication, or daily tasks when needed
- Appreciation for consistent and supportive staff

Most felt their care needs were met, though a few noted concerns around communication or unfamiliar staff

## Some residents expressed:

- Anxiety when supported by staff they did not know
- Hesitation to raise concerns
- Difficulty communicating preferences at times

These themes were not linked to specific schemes

\*\* Full disclosure in main report\*\*

## Care and Support cont.

Reflecting the positive impact of living in the housing with care scheme, not all reflections were positive, and people had concerns about staff they did not know or some of their feelings were negative. **Some of these less positive comments are:**



**"Some carers are ok and some are not. Want to have happy, cheery people. Sometimes it feels like they don't want to be here."**

Some of the issues identified, were not knowing some of their care support workers, especially at night and, finding it difficult to communicate with carers. There is a juxtaposition between what residents want and their concerns/ reticence/reluctance about how they can communicate it with carers to ensure that they have their care needs met in the way they want.

**\*\* Full disclosure in main report\*\***



# Activities

## Isolation, and Mental Health

Over **75 %** said they do take part in activities, although it can depend on their availability or whether the activities were of interest to them.

### Residents told us:

- Many take part in activities and enjoy them
- Activities help reduce loneliness and support mental health
- Some would like more choice or more frequent activities

Isolation was a concern for those who struggle to leave their flats.

### Insights included:

- Some activities were well-attended and enjoyed
- Residents valued opportunities to socialise
- A small number said the activity programme didn't meet their personal interests

### We observed:

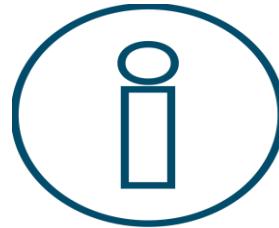
- Engaged residents participating in communal activities
- Differences in how frequently activities were offered
- Residents expressing interest in more structured or varied options
- Staff wanting more time or resources to support activities

# Communication and Inclusion

**Majority of residents said they received enough information, which is positive, however for some communications are not always effective and with small improvements they could make a difference to the information people have access to.**

Not all residents receive information or are able to access it easily e.g. if it is on a noticeboard pinned too high to read, if you are on a scooter or wheelchair. Residents also told us more about

- "Sometimes staff tell me what is happening and sometimes they don't" showing communication can for some people be hit and miss.
- "I don't get anything in large print, which would help.
  
- \*\*Full comments in main report\*\*



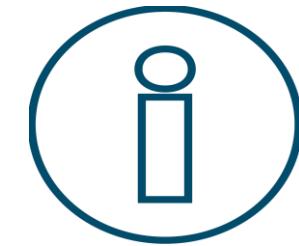
## Language and translation



A small number of residents with limited English relied on carers or family for communication. This sometimes affected:

Their understanding of what was happening in the scheme

Their ability to raise concerns.



## Resident's meetings

Residents who participate in their residents' meetings, have a greater knowledge of what is happening in the scheme and notes/minutes of these meetings are displayed on the wall if anyone wishes to read them.

# Health Care and Independence

Residents reported mixed understanding of:

What support staff could provide in relation to healthcare

Processes for first aid, falls, or emergency responses

Some felt these could be explained more clearly

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**“One person said, “if I fall, they will come and pick me up.”**

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\*\* Full disclosure in main report\*\*

# Food and Nutrition

Healthy food and nutrition are essential for mental and physical health -our findings showed a wide variation in people's experiences of the food provided in the schemes which might impact on their mental health.

<https://www.mind.org.uk/information-support/tips-for-everyday-living/food-and-mental-health/>

<https://www.nutrition.org.uk/nutrition-for/food-and-the-brain/>

A high percentage of residents said that they eat or have eaten in the past in the restaurant, but not everyone eats there all the time unless they pay for it as part of their package.

There is a variety of different experiences of the food served and also it has an impact on the benefits or money people have in order to purchase it.

## The eatwell plate

The eatwell plate shows the recommended balance of foods in the diet.



© Food - a fact of life 2008

## What residents say about their food

- "Cafe is expensive and food not always good."
- "Only have access to cafe on Tuesday and Friday now - due to chef being off, was meant to be back in September, still not back".
- "Use microwave in flat to make meals, not allowed to use the oven. Brother helps with meals sometimes".
- "My relative brings food in for me, and the carers heat it up".
- Pay all week for meals, too expensive, they changed what I ordered, not telling me."
  
- \*\*Full comments in main report\*\*



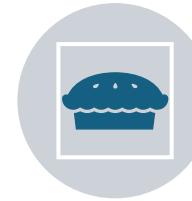
## We observed



We observed at one scheme home cooked lamb curry and rice, they also made homemade biscuits and cakes. The prices looked a bit expensive.



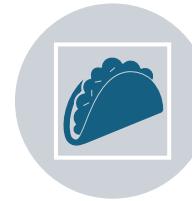
Some residents pay for their food at the canteen through their package.



We observed residents having pie, mash, and vegetables. One scheme had fish, chips, and mushy peas.



We observed a client asking for support from staff to help cut up their food. We saw staff check on clients to see if they needed any help.



The residents seemed to be enjoying eating their food.



To observe at lunch time was a good opportunity to watch staff members interacting with the residents and the residents with each other as they ate their food, on two occasions this was fun and light-hearted, remembering past songs and memories. In others it was a quiet time where residents focused on their food, and staff did not interact. Dinner times varied in different schemes and were a mix of quiet time and other schemes had music from a radio or cassette – that sparked conversations.



There was a range of different experiences of food, for some schemes they seemed successful, while others were more challenging.



Some of the canteens' food is not particularly good and is quite expensive, some are not open all the time, which means that people need to have ready meals or other straightforward way to make dishes.

For most people and their relatives knowing that they or their loved one had extra care and support was reassuring, knowing that they were safe and had help if they needed it.

## One resident said

- "yes, always helpful when I need anything, I am happy, family are happy, I have an alert button on my necklace, to call for help, and they come quicker, in the day than at night, I think there are less staff, but [there is] always help if I need it"

In two of the housing with care schemes, people felt less secure on the ground floor because they had had equipment and people's scooters going missing from the sheds.

For some residents there are policies that don't make sense.

- "There are some policies that seem daft, that is; – can smoke in apartment but cannot have candles and sometimes if they are doing prizes, they have candles."

\*\* Full disclosure in main report \*\*



# Building and Environment

## Residents' views of the building and environment

As seen above over 75% of residents think the building is good or excellent/

Some of the resident we spoke to commented on how much they valued their environment,

- Excellent, clean tidy, I like the layout, it's like my own old place temperature is fine.

\*\* Full disclosure in main report\*\*



# Issues

But there were some issues in terms of the equipment “If there is only one lift and it breaks down people can’t access their apartments” if they are relying on scooters or wheelchairs and they live on the first or second floor.

- “Building is “good, but it only has one lift, if the lift goes down, we are totally stuck, happened one day, we were downstairs, they had to go out and get sandwiches – its design fault”

Residents told us of other issues with the buildings and apartments:

- “They are going to modernise the kitchen. We had a residents meeting and chose the kitchen.”
- “One person said the scheme was “falling to bits”.

\*\* Full disclosure in main report\*\*

# Garden

All the housing with care schemes has outdoor areas that residents, their friends, and families can access. These had seating around tables and benches for people to sit on.

- "I go outside if it is warm and sit outside its nice in the garden, fund for people to put money into to make the garden nice, got daffodil bulbs recently."
- "I will accept any conditions as long as I have got a home. Modest but clean, [I have no] no needs - occasional parking issues nothing that excludes me here."
- \*\* Full disclosure in main report\*\*



We observed residents walking up and down the paths, having chats with friends, or having a cigarette in the garden. There are places in the garden for residents to meet each other, although observed in one garden residents told us they were used in the summer when the weather is warmer and better.



# Fixtures and fittings



General themes:

Variation in condition or usability of fittings and some accessibility challenges linked to layout or height of fixings. But despite this they had homely, warm, and calm feeling to them. We will look at this in more detail in the individual reports for groups of housing with care.

These themes were observed across multiple sites.

**\*\* Full disclosure in main report \*\***

# What staff and management said about Housing with care

Staff reflected on:

Being part of supportive teams, wanting more time for meaningful interaction:

- “Being part of a supportive environment, which contributes to individual's wellbeing.
- “Having more time to communicate with the tenants to give them time to talk.”
- “At times need additional resources, It is a very fast-moving environment.”
- \*\* Full disclosure in main report\*\*

## We Observed

Staff talking together and working well as a team, staff busy at their computers looking at records, staff being very busy, but gave time to talk to us and to residents

# Future

## What staff said

Managers highlighted that there is an increasing number of younger (i.e. in their 50s and 60s men in housing with care, what does this mean for future provision of housing with care services, including activities.

Alongside more younger men, there was concern about people with complex mental health issues, including.

**“Managers don’t listen, more mental health tenants and not trained to deal with it.”**

We spoke to ten people who said that their mental health was the reason that they were in housing with care.



# Conclusion

We heard many positive experiences in housing with care, and many people feeling that their needs are met by the services provided, majority see the services and support as good or excellent, this shows the encouraging views of people using the service.

There is also a sense of pride in their scheme – people feel ownership and familial relationships with the staff and other residents and value the care they receive.

Activities are a positive part of people who want to engage with them, but sometimes there are not enough activities, and due to the changing resident demographics, these may not meet the needs of the people of all who are living in the scheme.

Provide a safe and homely environment where residents feel they are at home but have the safety and security if they need help or support.

Housing with care is able to change to meet people's needs as they get older or their physical needs change – so they are able to transition as part of their care.

# Next Steps & Follow up



We will review progress at three and six months and consider further Enter & View or escalation to commissioners/CQC if significant concerns remain.



We will publish provider responses and a “You Said – We Did” update for residents in accessible formats.



We will send this report and recommendations to scheme owners/providers, requesting a written response within 20 working days.

## For more information

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