

Accessible Housing Assessment

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1. Introduction:

The purpose of this report is to provide evidence to support the approach taken by Tower Hamlets' council, in its new draft Local Plan, to the delivery of wheelchair accessible dwellings, further to the response received from the GLA to its Regulation 19 consultation exercise.

London Plan 2016 paragraph 3.48 (supporting text to Policy 3.8) states that 'LDF policy departures from the requirements of policy 3.8 must be justified by authoritative evidence from local needs assessments'. This work has therefore been undertaken to fulfil that requirement and justify a departure from the London Plan policy.

The report seeks to demonstrate that:

- where wheelchair accessible units are located above ground, it is essential that they are served by two lifts;
- there are no known lift companies that will/can guarantee that a lift will be repaired within 12 hours; and
- where there are 'exceptional circumstances' where it is unreasonable (not viable) to require the provision of wheelchair accessible units on site, payments in lieu towards the council's Project 120 provide a reasonable and sufficient alternative, delivering more appropriate Housing Choices to families with disabled members in the borough.

Tower Hamlets context

The 2004 housing needs survey found 15,385 people in Tower Hamlets have a 'special need' (For example, a physical disability or they are frail and elderly); at the time this represented about 15 per cent of Tower Hamlets population, higher than the national average of 11-13 per cent. Seventy-nine per cent were housed in the social rented sector.

Poplar had the highest concentration of special needs households at 21% of all special needs households.

In August 2008 there were 397 households on the Accessible Housing Register (AHR) living in inadequate housing and waiting to be re-housed. The requirement for fully and partially accessible homes has remained constant, a likely reason for this is the current lack of new supply or suitable re-let homes becoming available.

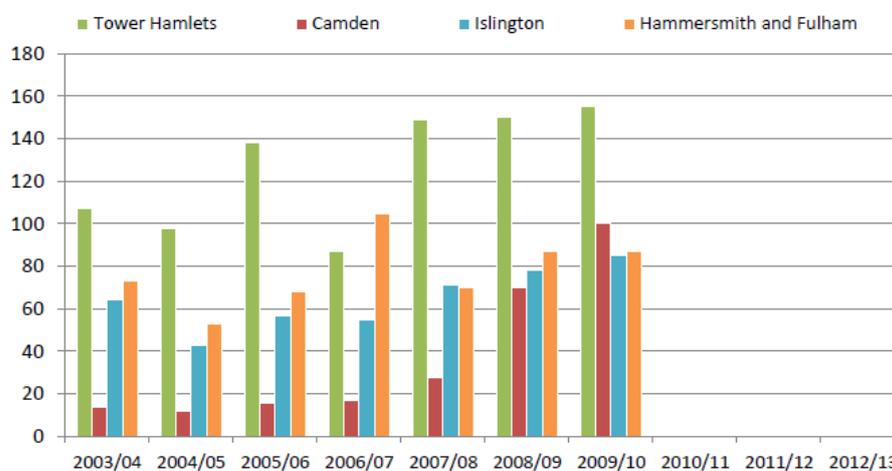
There is a 43 per cent need for accessible family-sized housing (within Tower Hamlets). Focusing on people requiring full/partial wheelchair accessible homes there is a 53 per cent need. Latest data shows us 43% of all households on the Accessible Housing Register (within Tower Hamlets) were overcrowded and need accessible family sized housing.

Source: Tower Hamlets Inclusive Design Advice: Housing. Tower Hamlets Council's Communications Unit. June 2012¹

¹ <https://www.towerhamlets.gov.uk/Documents/Planning-and-building-control/Development-control/IncluDesignHousing.pdf>

Tower Hamlets’ 2014 Strategic Housing Market Assessment (SHMA)² found that, whilst the number of people with limiting long term illness³ are similar to those in comparator boroughs (Camden, Islington and Hammersmith and Fulham), the number of applications for Disabled Facilities Grants (necessary to adapt existing properties to meet the needs of their disabled tenants) is almost double those in the comparator boroughs; suggesting that the existing stock frequently fails to meet individual needs.

Figure 82: Trends in applications for Disabled Facilities Grants (Source: HSSA to 2010/11 and Local Authority records onwards)



Source: London Borough of Tower Hamlets Strategic Housing Market Assessment 2014 Report of Findings. Opinion Research Services. May 2015

Tower Hamlets’ Housing Evidence Base 2016⁴ states: Analysis of the council housing waiting list shows that there are 130 households in need of Category A & B wheelchair accommodation on the accessible housing register. 70 of these households require larger three bedroom plus homes and 30% of households have children with disabilities.

Source: Housing Evidence Base Tower Hamlets November 2016

² https://www.towerhamlets.gov.uk/Documents/Planning-and-building-control/Strategic-Planning/Local-Plan/Strategic_Housing_Market_Assessment_2015.pdf

³ See Appendix for definition – page 21

⁴ https://www.towerhamlets.gov.uk/Documents/Housing/Appendix_5_Council_16_12_05_Evidence_base.pdf

Tower Hamlets' Housing Delivery

The council's Annual Monitoring Reports⁵ provide information on the delivery of wheelchair accessible units. All units delivered to date were approved before March 2016 when Minor Amendments to the London Plan were adopted requiring that all London boroughs implement its revised policy 3.8 (that 10% of new housing should meet Building Regulation requirement M4 (3) 'wheelchair user dwellings', i.e. designed to be wheelchair accessible – where the local authority has nomination rights - or easily adaptable for residents who are wheelchair users). Before March 2016 developers had the option (and took it) of building to the lesser easily-adaptable standard, which would generally require additional work, in the shape of fixtures and fittings, to meet the needs of prospective tenants.

So, as a result, whilst the council has been delivering in the region of 9% of new homes to wheelchair accessible standards, few provide the essential facilities required by families (with a wheelchair using member) on the council's housing waiting list. Consequently, families are waiting, sometimes for years, for more suitable accommodation.

Year	Affordable housing units delivered	Number of accessible and easily adaptable units delivered	Percentage
2014-2015	635	79	12.4
2013-2014	581	45	7.7
2012-2013	569	35	6
Total	1785	159	8.9

London Plan (2016) Policy 3.8

It is the Mayor's policy that Londoners should have a genuine choice of homes that they can afford and which meet their requirements for different sizes and types of dwellings in the highest quality environments.

Boroughs should work with the Mayor and local communities to identify the range of needs likely to arise within their areas and ensure that:

- new developments offer a range of housing choices, in terms of the mix of housing sizes and types, taking account of the housing requirements of different groups and the changing roles of different sectors in meeting these
- ten per cent of new housing meets Building Regulation requirement M4 (3) 'wheelchair user dwellings', i.e. is designed to be wheelchair accessible, or easily adaptable for residents who are wheelchair users
- account is taken of the needs of particular communities with large families

⁵

https://www.towerhamlets.gov.uk/lgnl/planning_and_building_control/planning_policy_guidance/monitoring_and_programme_rep.aspx

Tower Hamlets proposed Accessible Housing Policy D.H3 Housing standards and quality (part 1) (draft for submission reflecting minor modifications in response to Regulation 19 consultation responses)

Following advice from the borough's housing and occupational therapy teams regarding their experience housing wheelchair users within the borough, the policy approach is to require the provision of 2 lifts for any accessible housing above the ground floor. Recognising that this is not always feasible, the policy enables contributions-in-lieu which will be used to support the borough's 'Project 120' programme which matches suitable accessible housing to residents with complex and specific accessible housing needs.

This approach is laid out in Policy D.H3: Housing standards and quality (part 1):

'1. Development is required to demonstrate that, as a minimum, it meets with the most up-to-date London Plan space and accessibility standards; in particular:

- a. it provides a minimum of 2.5 metres floor-to-ceiling heights; and
- b. at least 10% of dwellings are built to the 'wheelchair user dwellings' accessible housing standard M4 (3) and the remainder of dwellings are built to the 'accessible and adaptable dwellings' accessible housing standard M4 (2) both contained within Part M (volume 1) of the building regulations.
 - i. Where units which meet the wheelchair user dwellings standards M4 (3) (2) (b) are to be delivered above the ground floor, access to a second lift must be provided.
 - ii. In exceptional circumstances, where units which meet the user dwellings standards M4 (3) (2) (b) cannot be accommodated on site, contributions in-lieu will be accepted.

'Supporting text:

'4.41 Part 1 (a and b) seeks to ensure all housing development provides adequate internal space to meet relevant space, accessibility and amenity standards and provide an appropriate living environment. It requires development to comply, as a minimum, with the space and accessibility standards set out in the London Plan (GLA, 2016) and the Housing Supplementary Planning Guidance (GLA, 2016), whilst having regard to the particular needs of residents in the borough as well as the increasingly dense character of the built form. If the GLA's space and accessibility standards are updated, we may seek to implement these changes, so long as they are locally suitable. We strongly urge developers/applicants to provide evidence of how the scheme will achieve high quality design in line with the Home Quality Mark standards.

'4.42 In order to implement part 1 (b) and meet standards in the Housing Supplementary Planning Guidance (GLA, 2016), 10% of all new units across all tenures should be wheelchair user dwellings, but this may be varied to at least 10% of habitable rooms where a better outcome is provided in terms of delivery of larger units. All 'wheelchair user dwellings' (the M4 (3) standard) in the affordable rented tenure should meet the M4 (3) (2) (b) standards 'to meet the needs of occupants who use wheelchairs'. It is expected that units which meet the wheelchair user dwellings standards M4 (3) (2) (b) above the ground floor will be provided with access to a second lift for use when the primary lift is not functioning. We have a preference for units, which meet the accessible user dwellings standards M4 (3) (2) (b), to be provided below the fifth floor due to difficulties allocating wheelchair accessible units on higher floors. In some circumstances, site constraints (such as the inability to secure sufficient accessible parking, lack of lift circulation space and restrictions on ground floor residential uses) could lead to applicants arguing that units which meet the wheelchair user dwellings standards M4(3) (2) (b) may not be able to be delivered on site. In these circumstances, we may accept payments in lieu of the provision of units which meet the wheelchair user dwellings standards M4 (3) (2) (b) through the 'Project-120' scheme'

This approach differs to that of the London Plan(policy 3.8 Housing Choice) and concerns have been raised that this approach may limit the location of wheelchair accessible units to the ground floor, reducing housing choice and exposing occupiers to disproportionate impacts of crime. The recognition of exceptional circumstances and resulting use of contributions in-lieu is considered by the GLA to be a departure from Policy 3.8.

Tower Hamlets' Project 120

The proposed Accessible Housing policy has been designed to support the Council's 'Project 120'. The project was born out of an awareness of the number of long standing applicants on the Accessible Housing Register (AHR) requiring wheelchair accessible homes, and there being insufficient suitable properties available to re-house them.

This mismatch between supply and demand has arisen because, before March 2016 when Minor Amendments to the London Plan were adopted requiring that all London boroughs implement its revised policy 3.8 (that 10% of new housing should meet Building Regulation requirement M4 (3) and to be fully fitted where the local authority has nomination rights) developers had the option (and took it) of building all 10% to the lesser easily-adaptable standard. As a consequence, the units currently being handed over are not fitted out (with, for example, wet rooms, hoists or through the floor lifts) to meet the needs of the tenants on the AHR. And, whilst Disabled Facilities Grants exist, and are available to enable that work, they are only available to existing tenants and cannot be deployed ahead of a new tenant taking up residence, meaning that individuals and families with members with complex needs remain inadequately housed, sometimes for years.

The proposed payments in lieu will support this valuable work; supporting the Borough's development partners to ensure that the historic stock of 'easily adaptable' new homes can be fitted out to meet the needs of families on the AHR. As a result of Project 120's work families in housing need are spending less time on the waiting list; there is a reduced rate of refusal, fewer 'wheelchair accessible units' are being re-designated to the general needs pool and tenant satisfaction has improved

2. The number and allocation of wheelchair accessible units delivered in Tower Hamlets

Tower Hamlets' Core Strategy Development Plan Document 2010 and Managing Development Document 2013 have required, since 2012 and in line with London Plan Policy 3.8, that 'development will be required to comply with the most up to date standards set out in the 'Lifetime Homes design criteria' and GLA's 'Wheelchair Accessible Housing Best Practice Guidance'. The London Plan requires that 10% of new housing is designed to be accessible or 'easily adaptable' for residents who are wheelchair users. Tower Hamlets has a particular need for wheelchair accessible family sized homes in the affordable tenures.

Easily adaptable homes are defined⁶ as those that are: suitably sized as defined in the GLA's "Wheelchair Accessible Housing Guidance" and walls are strengthened for the installation of additional mobility aids.

Those dwellings have been delivered but they have proved hard-to-let. According to the council's specialist occupational therapy team, a survey of those on the housing waiting list and interviews detailed in Section 4 of this report, this is because:

- Families with a member who is a wheelchair user are reluctant to accept a property above ground floor level where there is only one lift and no guarantee that the lift would be repaired within a 24 hour period, in case of mechanical breakdown/vandalism.
- Nominally wheelchair accessible properties, approved before March 2016, only delivered the spatial requirements of an accessible home; there was no provision for the installation of essential fixtures and fitting or any bespoke specialist equipment. Whilst Disabled Facilities Grants exist, and are available to enable that work, they are only available to existing tenants and cannot be deployed ahead of a new tenant taking up residence. Families are therefore understandably reluctant to take up a tenancy, in the knowledge that it may be many months before the home functions properly. Since March 2016 new wheelchair accessible homes (to which the local

⁶ <https://www.towerhamlets.gov.uk/Documents/Planning-and-building-control/Strategic-Planning/Neighbourhood-Planning/Managing-Development-Document-April-2013.pdf>

authority has allocation rights) have been fully fitted to a generic standard but it remains the case that an individual's particular (perhaps unique) needs cannot be financed before they take up residence.

- Families, however poorly housed at present, are reluctant to take up a new tenancy (where the space and circulation are better) if the move would result in them losing a conveniently located parking place.

All completions to date were approved prior to the March 2016 London Plan policy changes. As a result Tower Hamlets have been in the position of having to release some properties to families who do not have a wheelchair using member, whilst their list of wheelchair users' families, who are waiting for more appropriate accommodation, grows.

Completion year	Accessible and easily adaptable units to which LA has allocation rights	Allocated to wheelchair users
2014/15	92	28
2015/16	106	34
2016/17	90	31
Total	288	93
Wheelchair accessible units not let to wheelchair users = 195		

The provision of no more than one lift to serve wheelchair accessible units located above the ground floor accounts for 44 failures to allocate

Source: Affordable Housing Team data 2014-15 to 2017-18

3. Wheelchair accessible units (above ground floor) built to accessible/easily adaptable standards served by 1 or 2 lifts

The following table shows those developments that have been completed within the last 3 years; those with 1 lift, those with 2 and the number (as a proportion of the total approved wheelchair accessible and easily adaptable units available to families on the council's waiting list) that have been successfully allocated to wheelchair users.

It shows that there have been almost twice as many acceptances for units within blocks with two lifts (19%) as there have been for those with just one (12%).

Completion year	1 lift	2 lifts	Successfully allocated accessible/easily adaptable units
2014/15		Bow Cross	2 out of 18 15 of the units above ground floor – All adaptable
	Gladstone		0 out of 4 All the units on 2 nd and 3 rd floors.

	Fulneck		2 out of 9 All the units all on 2 nd and 3 rd floors.
		Mildmay	5 out of 5 All the units on the 1 st to 4 th floors
	Holland		0 out of 14 All the units on the 1 st to 4 th floors
		Tweed	0 out of 9
		Island Gardens Estate	4 out of 9
2015/16	Devons Rd		3 out of 6
		Indecon –phase 2	0 out of 32 All the units on the 2 nd to 21 st floors All adaptable
		Cotall Street	4 out of 6
		New Union Wharf	0 out of 9
	Providence Wharf		2 out of 13
	Sotherby Lodge		0 out of 3 All adaptable
2016/17	Devons Wharf		0 out of 3 All adaptable
		Yabsley Street	0 out of 2
		Goodman’s Fields	5 out of 6
		Hancock Road	0 out of 5
	Aberfeldy		0 out of 3 All adaptable
	Three Colts Lane		0 out of 4
		Aldgate Place	0 out of 12 All the units on the 5 th -16 th floors

4. Housing choices, as expressed by Tower Hamlets families.

A telephone survey of 56 families, currently waiting for re-housing to a wheelchair accessible unit, was undertaken in January 2018 to explore, systematically, their reasons for refusal and priorities when seeking a home that will meet their needs.

The findings breakdown as follows:

Question	Answer
Floor level of present accommodation	The majority (38 of 56) presently live in houses or ground floor flats. 2 live on the 1 st floor, 7 on the 2 nd floor, 4 on the 3 rd floor, 2 on the 4 th floor, and 1 on the 5 th floor, 6 th floor and 8 th floor.
How many lifts serve the accommodation	Blocks with no lift: 3 families live on the second and 2 on the third floor Blocks with access to 2 lifts: 6 families: a family living on

	<p>the 1st floor; two families on the 2nd floor; another on the 3rd; another on the 4th; and a family living on the 8th floor.</p>
<p>Lift breakdown is a reason for requesting rehousing</p>	<p>14 of the 18 families living above ground level cited lift breakdown as a reason for seeking re-housing.</p> <p>Reasons/impacts included:</p> <ul style="list-style-type: none"> • The difficulty of carrying growing children and equipment up/down stairs • Being trapped on the 3rd floor for weeks at a time or risking injury to wheelchair user or carer by lifting or bumping down steps; in any event a loss of dignity and independence. • Missed appointments/work/schooling • Fear, anxiety and distress re all of the above <p>4 respondents reported that the lift in their block broke down at least once a week. 2 said at least once a month. Another 2 said at least once a year.</p>
<p>Floor level preference for new home</p>	<p>All but one of the 56 respondents would only consider ground floor accommodation where there is only one lift in a block because:</p> <ul style="list-style-type: none"> • Lift breakdown and time taken to repair • Fire escape • Direct access to open space • Personal safety in a lift • Children and pets (access to open space) • Lifts are too small for stretchers <p>One said that s/he would only consider accommodation above the ground floor if the landlord could guarantee repairs within 24 hours.</p>
<p>Critical features informing choice/refusal of housing options</p>	<ul style="list-style-type: none"> • 9 cited 'pets permitted'. • 22 a 'garden' • 9 'rent levels' • 25 'parking' • 6 'transport links' • 36 'access needs' • 29 'proximity to essential amenities' and • 28 their 'local family/support network'

This survey was followed up by 4 in depth interviews that revealed the following:

Case Study 1

Ms A has 3 adult sons; one has a neurological condition that manifests itself in involuntary movements (spasms) which means, among other things, that he uses a wheelchair. They live on the 3rd floor of a residential block; there are 2 lifts but each serves alternate floors so that each floor (other than the 12th) is served by just one lift.

The lift breaks down on a regular basis, often for 10+ days at a time. The last time it broke the family were on holiday. While they were away Ms A's sister persistently rang the repairs team, anxious to ensure the lift was fixed before the family's return – it was not. As a result, Ms A's son (who is 23, 6' tall and weighing 12 stone+) had to be manually lifted up three flights of stairs to their home. He was then 'trapped'; unable to attend appointments, spend time with friends, go to the gym etc.

The experience is felt not only as a practical inconvenience but also as an emotional/psychological trauma. The indignity of being manhandled, the loss of independence and isolation are all hard to handle; the frustration only serves to exacerbate his condition.

The sense that the family are 'trapped' by the inadequacy of the lift service is made worse by the fact that there are problems on the floor with difficult neighbours. The fact that Ms A cannot get away or take a break has undermined her mental health and has resulted in her seeking counselling support, just to cope.

Another 'trapping'/independence-limiting feature of their home is the weight of the common entrance door. Ms A's son cannot open it independently to get in or out.

Also, the family are, since the Grenfell disaster, worried more than ever about their safety in case of an emergency and have even bought their own 'evac' chair.

The whole family feel that peace of mind will only be achieved when they have their own front door to the street that would enable direct and easy access to open space. Ms A never thought she would find herself saying that; ground floor accommodation has always seemed vulnerable to her until now when she would do anything for that freedom.

The family home was not purpose built but they have been there since Ms A's son was an infant. Now a young adult, he cannot get into the kitchen, he cannot manoeuvre his electric chair around the flat (he has to be assisted by a family member in a manual chair or office chair (on casters) and depends on his mother, the rest of the family and a range of carers to meet his everyday needs. Some adaptations have been made but they are insufficient to the task. Storage space is also a huge problem; there is so much equipment and general

'stuff' that they need to facilitate Ms A's son's independence (hoists etc) that presently clutters the home and undermines its accessibility.

At present the family appreciate the weather protected, off road parking facility they have for their mobility vehicle (fitted with ramps for their son's wheelchair). In any new home they would require a parking facility (their son is unable to use public transport; much is inaccessible and bus travel is fraught with conflict and embarrassment) but that could as well be on street, if within a reasonable (say 50m) distance of the home.

Case Study 2

Ms B moved into her purpose built accommodation in 2013. She lives alone and came to this accommodation from local student accommodation.

She was forced to make the move because student accommodation is only provided for the first year of study, so she had little time and few options.

The flat she occupies is purpose built and she is glad to have self contained accommodation (she does not have to share a kitchen or living room) and is delighted by the thermal performance of her home (great insulation, double glazing etc). She really feels the cold but now only has to turn the heating on for an hour a day to feel comfortable throughout.

Her flat is on the second floor and is served by two lifts; she had been led to believe that they operated independently but it seems that they are interdependent, when one breaks down both are taken out of service. In the first year in residence the lift broke down on a regular basis, once for more than 2 weeks; she was dependent on neighbours and carers to shop for her and was unable to attend college, medical or social appointments. She was stuck and lonely!

More recently, the difficulty she has experienced has been with the common entrance; she wishes there was a reception/concierge (it was her understanding on moving in that such a service would be provided). The entrance doors are immensely heavy to open but are (in theory) automated but more often than not the fob does not work so Ms B must wait outside and prevail upon a neighbour to let her into her own home.

Ms B does not have a car but for her, proximity to her college and to local bus services is essential.

Case Study 3

Ms C moved to her present 'purpose built accommodation' from short term rehabilitation accommodation following a spinal injury; that short term accommodation was time limited to 6 months (or thereabouts) but that limit was extended to 3 years because Tower Hamlets were unable to find suitable property sooner. The only other option that was presented was 'assisted living' that would have attracted extra costs and yet would not have met her basic day-to-day needs.

Ms C experiences numerous problems with this accommodation from the inaccessibility of the small balcony to the lack of a concierge and the failings of the lift repair system. She had wanted to live on the ground floor but had been told that those properties were reserved for families (Ms C lives alone). The common entrance gives rise to concern; the doors are heavy and so are automated (fob controlled) but are more often than not broken, leaving the block insecure.

Ms C hates living on the 4th floor, when for a period the lifts were breaking down every other week for a period of 5 days or more; she had been led to believe that they operated independently but it seems that when one broke down both were taken out of service. Ms C resorted to communications with her MP; it is not clear whether that made a difference but it seems that maintenance has improved and breakdown is less frequent.

There are other issues within the apartment that undermine Ms C's quality of life and sense of wellbeing: she has no access to open space and yet is troubled by noise from the enclosed/cavernous 'communal garden' 4 floors below; her condition means that she is very heat sensitive but she has no control over the temperature of her home or the costs of heating it to that level; flooring choices make life difficult in terms of mobility; there is no storage space so she is surrounded by boxes (it doesn't feel like home); in the kitchen it is clear that a general needs kitchen has been adapted at minimal cost (there are still surfaces and facilities that she cannot reach); and rubbish disposal is a nightmare (she has to carry it down to the ground floor and attempt to use an entirely inaccessible refuse store and paladin bins).

Ms C expressed feelings of real desperation; feeling so isolated, not least because there are no facilities/amenities in the area that she can reach independently to make any sort of human connection.

Case Study 4

Mr D is the father of a 3.5 year old daughter with multiple and profound disabilities. They live in a 2nd floor flat that is not purpose built and has no lift access. The daughter is a

wheelchair user but cannot use her chair in the flat because the circulation spaces and door widths are insufficient. Also, the lack of a wet-room/shower means that Mr D has to lift his daughter in and out of the bath and bend over to bathe her, which is becoming increasingly difficult.

The family have been waiting to be re-housed for more than 2 years, during which time Mr D has had to carry his growing daughter up and down the stairs and then leave her in order to retrieve her clinical and mobility aids/equipment that weigh in excess of 50kg. This he has to do two or three times a week, simply to get her to essential medical and therapeutic appointments.

The impacts on Mr D are considerable; he is unable to take up paid work (because he is needed daily to lift and transport his daughter to her appointments) and so has accrued debts amounting to tens of thousands of pounds, he is constantly exhausted and worried for his daughter's development and future prospects, not least because he does not have the time or space to support her therapeutic regime at home. His daughter has no access to open space (they have been advised that they would wait more than 10 years for a home with a garden) and the hoist that would enable her to get out of her seat for essential exercise cannot be installed within their present accommodation.

The family have now been offered a 2nd floor flat that is served by 2 lifts and where they would have access to a balcony and a parking space for their mobility vehicle (public transport remains inaccessible to this family); this is far from ideal (without access to a garden that would benefit the daughter's physical and cognitive development and located further from critical amenities) but is a marked improvement on what they have now. However, it is still under construction and it is likely to be another 8 or 9 months before they are even able to view the property.

Mr D thinks that if it were possible to adapt an existing ground floor void, to meet this family's needs, his daughter might enjoy a greater degree of independence, reach her potential and enable him to take up paid employment.

5. Technological solutions

In light of allocations data and survey responses reported above, it is clear that a fear of lift breakdown and the absence of any back up is a large component in the acceptance or refusal of upper floor wheelchair accessible units.

The argument may be made that better lift specification, maintenance and repair contracts (rather than requiring two lifts) could ensure repairs are swift, causing only minor inconvenience to families whose homes are located above the ground floor.

To test that claim a range of lift companies were contacted to clarify the guarantees they are able to give.

Lift company	Repair contract details
<p>Otis Lifts 07773203799 rahul.kedia@otis.com</p>	<p>Response times:</p> <ul style="list-style-type: none"> - 4 hours guaranteed - For emergency callouts and ‘trap in’ situations we aim to arrive within an hour of the initial call being taken dependant on local conditions <p>The service operates 24/7, 365 days of the year</p> <p>No guarantee can be given that a repair can be completed and the lift brought back into working order within a specified time limit. A control panel could take 12 weeks to arrive.</p> <p>Influencing factors include:</p> <ul style="list-style-type: none"> • Quality/suitability of the original specification • Maintenance regime • British built from British parts that can be readily obtained/kept on site • Generic parts vs. imported sealed units
<p>RJ Lift Services Ltd 0800 999 1177</p> <p>Stephen@rjlifts.co.uk (contract provided)</p>	<p>Contracts are standard, intermediate or comprehensive.</p> <p>Response times:</p> <ul style="list-style-type: none"> - 1 Hour typical - 3 hours guaranteed - For emergency callouts and ‘trap in’ situations we aim to arrive within 30 minutes to 1 hour of the initial call being taken dependant on local conditions <p>The service operates 24/7, 365 days of the year</p> <p>Comprehensive and intermediate contracts and warranties: Exclusions from Contractors obligations</p> <ol style="list-style-type: none"> a) Replacement of obsolete parts and equipment. However, basic repairs are included if possible. b) Callouts where the cause is accidental damage, abuse, misuse, power failure or/and cases when equipment working on arrival. c) Parts and equipment in a poor condition as identified by RJ LIFT SERVICES during inspections up to and including the first full service d) Upgrades required due to changes in legislation and regulations. e) Total replacement of rams, main drive/gearbox, motors, controller, load ropes, sheaves and all decorative finishes. However basic repairs are included if possible. <p>No guarantee can be given that a repair can be completed and the lift brought back into working order within a specified time limit.</p>

	<p>Influencing factors include:</p> <ul style="list-style-type: none"> • Quality/suitability of the original specification • Maintenance regime • British built from British parts that can be readily obtained
<p>Liftec 01322 273 966 Chris.foley@liftec.co.uk</p>	<p>Contracts are basic, standard, or comprehensive.</p> <p>Response times:</p> <ul style="list-style-type: none"> - 4 hours guaranteed - For emergency callouts and 'trap in' situations we aim to arrive within an hour of the initial call being taken dependant on local conditions <p>The service operates 24/7, 365 days of the year</p> <p>No guarantee can be given that a repair can be completed and the lift brought back into working order within a specified time limit.</p> <p>Influencing factors include:</p> <ul style="list-style-type: none"> • Quality/suitability of the original specification • Maintenance regime • British built from British parts that can be readily obtained <p>This company can build bespoke lifts for specific locations and will keep spares to hand</p>
<p>PIP Lift Maintenance 01708 373 999 Palfremanb@piplifts.co.uk</p>	<p>Response times:</p> <ul style="list-style-type: none"> - 4 hours guaranteed - For emergency callouts and 'trap in' situations we aim to arrive within an hour of the initial call being taken dependant on local conditions <p>The service operates 24/7, 365 days of the year</p> <p>No guarantee can be given that a repair can be completed and the lift brought back into working order within a specified time limit. A control panel could take 12 weeks to arrive.</p> <p>Influencing factors include:</p> <ul style="list-style-type: none"> • Quality/suitability of the original specification • Maintenance regime • British built from British parts that can be readily obtained/kept on site • Generic parts vs. imported sealed units

<p>Langham Lifts 0208 920 0808 frank@langham-lifts.co.uk (contract provided)</p>	<p>Response times:</p> <ul style="list-style-type: none"> - 4 hours guaranteed - For emergency callouts and ‘trap in’ situations we aim to arrive within an hour of the initial call being taken dependant on local conditions <p>The service operates 24/7, 365 days of the year</p> <p>No guarantee can be given that a repair can be completed and the lift brought back into working order within a specified time limit. A control panel could take 12 weeks to arrive.</p> <p>Influencing factors include:</p> <ul style="list-style-type: none"> • Quality/suitability of the original specification • Maintenance regime • British built from British parts that can be readily obtained/kept on site • Generic parts vs. imported sealed units
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Tower Hamlets has published recommended quality standards for the Affordable housing delivered by way of S106 agreement and in light of these findings is prepared to review those standards.⁷

Source: Standards for New Homes Tower Hamlets Housing Forum December 2017

Nonetheless, without a guarantee that a lift can be brought back into working order within a few hours (which is, as illustrated above, beyond the ability of any known lift company) it is demonstrably extremely unlikely that any family with a wheelchair using member (however unsatisfactory their present accommodation) would consider an offer of housing above ground floor level.

6. Equivalence – a genuine choice of homes

Tower Hamlets is committed to the principle of Housing Choice as set out in LPP3.8 but in practice has found that an unquestioning application of the policy has delivered a stock that has been hard to let. The reason being that, before the 2016 amendments to the London Plan Policy 3.8, Tower Hamlets was only able to require that wheelchair accessible units be constructed to ‘easily-adaptable’ standards; sufficient space was provided but none of the fixtures or fittings that a prospective tenant might need.

Also, since 2016, despite the implementation of the fuller provisions of M4 (3) (2) (b) it has not always been possible to require that a developer installs two lifts to serve wheelchair accessible units above the ground floor. There are circumstances where the overall scale of

⁷ https://www.towerhamlets.gov.uk/Documents/Planning-and-building-control/Building-control/Application-processing/SECTION_106_DESIGN_GUIDE_finished_doc.pdf

the development, or its footprint, is insufficient to accommodate two lifts and remain viable.

This might be compared to the GLA's own position on the provision of step free access to M4(2) Category 2 properties in blocks of four storeys or less:

*3.48A As set out in Approved Document M of the Building Regulations - Volume 1: Dwellings, to comply with requirement M4 (2), step free access must be provided. Generally this will require a lift where a dwelling is accessed above or below the entrance storey. The application of requirement M4 (2) has particular implications for blocks of four storeys or less, where historically the London Plan has not required lifts. Boroughs should seek to ensure that dwellings accessed above or below the entrance storey in buildings of four storeys or less have step-free access. However, for these types of buildings this requirement may be subject to **development-specific viability assessments and consideration should be given to the implication of ongoing maintenance costs on the affordability of service charges for residents**. Where such assessments demonstrate that the inclusion of a lift would make the scheme unviable or mean that service charges are not affordable for intended residents, the units above or below the ground floor that cannot provide step free access would only need to satisfy the requirements of M4(1) of the Building Regulations.*

In order to deliver Housing Choice in line with the local communities' needs and preferences, a more contextual/site specific approach is proposed. This will ensure that any M4 (3)(2)(b) units approved can properly meet the needs of families on the council's accessible housing waiting list and that, in exceptional circumstances where this is not possible, the development will deliver a financial resource that will enable the council to fit-out the hitherto, arguably, wasted stock of pre-2016 wheelchair accessible units. The resource would be deployed by way of the existing Project 120 that was established to meet the needs of wheelchair users in critical, long standing housing need.

In addition, the council's void inspection team is already equipped with a survey tool that enables it to identify much older stock that has the potential for conversion to a properly wheelchair accessible unit.

This financial resource would accrue from S106 contributions charged to the developers of sites where it is shown to be unreasonable to provide two lifts or where the parking/travel and transport provision is insufficient i.e. in exceptional circumstances.

The contribution-in-lieu (of the provision of the full 10% of wheelchair accessible units) might be calculated in line with DCLGs calculation⁸ of the extra costs of building Category 3 homes (i.e. the developers nominal saving when building to Category 2 rather than to Category 3 - accessible) of between £12,500 and £17,250 per unit for 1 or 2 bed apartments – see below. The figures provided by the DCLG do not include sums associated with the

⁸https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/353387/021c_Cost_Report_11th_Sept_2014_FINAL.pdf

costs of building larger apartments to Category 2 or 3 (Tower Hamlets has a particular need for larger family sized dwellings) but it may be assumed that these figures can be extrapolated.

	1B Apartment	2B Apartment	2B Terrace	3B Semi-detached	4B Detached
Cost all dwellings (extra over current industry practice)					
Category 1	–	–	–	–	–
Category 2	£940	£907	£523	£521	£520
Category 3 (Adaptable)	£7,607	£7,891	£9,754	£10,307	£10,568
Category 3 (Accessible)	£7,764	£8,048	£22,238	£22,791	£23,052
Access related space cost summary – cost increase for additional m ²					
Category 2	£722	£722	£1,444	£2,166	£2,166
Category 3	£5,776	£10,108	£15,162	£17,328	£17,328

Source: DCLG, Housing Standards Review: Cost impacts, September 2014

Whilst, it is understood that every adaptation is different and necessarily tailored to individual needs; if generalisation were possible, based on a mean cost of adaptations (from easily adaptable to wheelchair accessible) including the fit-out of kitchen and bathroom, that sum would be in the region of £30,000.

Table of typical installation costs

Wet floor level access shower with seat	£5,000
Wash / dry WC	£5,000
Adjustable height wash hand basin	£800
Fully adapted adjustable height kitchen units	£9,000
Ceiling hoists in two rooms	£6,000
Fees for work management @15%	£3,900
Total cost	£29,700

Source: Tower Hamlets Affordable Housing Team

The council's Planning Obligations SPD will be updated after adoption of the Local Plan to take into account its new policy requirements. This will contain further guidance on a suitable value and calculation methodology for a payment in lieu.

7. Summary and recommendations

London Plan Policy 3.8 asserts that 'Londoners should have a *genuine* choice of homes' (emphasis added) and that boroughs should work with the Mayor to establish the range of needs present and emerging in their areas. To that end Tower Hamlets has conducted desktop and original research on the delivery and allocation of wheelchair accessible properties in the area, residents' experience of that accommodation and their reasons for requesting, and rejecting offers of, new homes.

In the course of that work, it has come to light that it has not been possible to allocate 195 of the 288 (more than 2/3rds) wheelchair accessible and easily adaptable properties (delivered between 2014/15 and 2016/7) to wheelchair users.

Arguably that stock is a wasted opportunity but as important are the families who remain in cramped and inaccessible accommodation rather than accept one of the new purpose built properties. Their reasons are manifold but chief among them is an objection to living above ground floor level, particularly where the accommodation is served by only one lift.

It is therefore Tower Hamlets proposal, in order to offer a genuine choice to these families, to ensure that, wherever wheelchair accessible units are located above the ground floor, they are served by at least 2 lifts.

This local interpretation of the London Plan principle and policy is particularly necessary because the majority of sites in Tower Hamlets have been allocated for large, multi-storey mixed use development often with retail/commercial uses at ground floor level. This is in line with London Plan Policies (LPP) on activating the facade and the provision of natural surveillance to the street. E.g. LPP 4.3 Mixed use development and offices; 7.3 Designing out crime; 7.4 Local character; 7.6 Architecture; and 7.7 Location and design of tall and large buildings.

Also, in light of these research findings, not one lift manufacturer or maintenance/repair service can commit to ensure that a lift that has broken down can be brought back into use within 12 or even 24 hours.

All policies should also be read and interpreted in light of LPP 7.2 An Inclusive Environments which requires that ‘all new development in London achieves the highest standard of accessible and inclusive design and supports the principles of inclusive design which seek to ensure that developments: can be used safely, **easily and with dignity by all**; are convenient and welcoming with no disabling barriers, so everyone can use them independently without undue effort, separation or special treatment; and are **flexible and responsive taking account of what different people say they need and want, so people can use them in different ways**; are realistic, offering more than one solution to help balance everyone’s needs, recognising that **one solution may not work for all**. (emphasis added)

The council’s proposed wording in the draft Local Plan will require that in developments where there are wheelchair units to which it has allocation rights (provided above the ground floor) two lifts are provided that serve every floor. It is also the council’s intention to revise its published Standards for New Homes document to emphasis the following requirements:

- That the two lifts which are provided serve every floor and operate independently, such that when one breaks down the other continues in service
- The original lift specification is sufficiently robust for proposed location/use.
- The lifts are British built and or compatible with British replacement parts
- A comprehensive maintenance contract is in place

However, there are circumstances when such demands would threaten the viability of the development (and its ability to deliver the requisite proportion of affordable housing) as has been acknowledged by the GLA in relation to the provision of step free access to M4(2) Category 2 properties in blocks of four storeys or less, where it has conceded that there may be circumstances within which viability is threatened.

It is therefore proposed that the council accepts, in those few cases, a payment in lieu which relates to the developer’s saving due to the non-provision of M4 (3) (2) (b) units. That is likely to amount to between £12,500 and £17,250 per unit for 1 or 2 bed apartments (and proportionately more for larger family sized units) which would be transferred to the Project 120 budget in order to bring ‘easily adaptable properties’ (approved before the 2016 amendment to LPP 3.8) and existing general needs voids (with the potential for adaptation) into effective use for wheelchair users in housing need. The average cost of adaptation of such a property is estimated to be £30,000 to which the developer’s contribution would be substantial.

As a consequence, it is considered that the proposed mechanism will bring back into use a considerable stock of so called ‘wasted’ stock and deliver the independence, dignity and genuine choice that so many local families need and deserve.

It is therefore recommended that:

- Tower Hamlets ensures (by way of Planning Condition) that all those dwellings approved as wheelchair accessible (to which the council has allocation rights) are constructed to meet, in full, all the provisions set out in M4(3) (2) (b) of the Approved Document to Part M of the Building Regulations Volume 1: Dwellings.
- Tower Hamlets additionally requires that wherever it is necessary to locate those units above the ground floor (and where viable) that those units are served by at least 2 lifts; those lifts to be specified and serviced in line with guidance set out in the council's 'Standards for New Homes' that will be updated in line with the recommendations made by lift companies (see Section 5 and Summary above).
- Wherever possible (and consistent with policies on mixed used development and designing out crime) Tower Hamlets prefers that wheelchair accessible dwellings are located below the 5th floor of a development.
- Where it is demonstrated that it is not viable to require 2 lifts (due to the size or scale of the development) and it is not possible to locate the wheelchair accessible units at ground floor level (but in all other respects the application is assessed as delivering real planning/community benefits) no M4 (3) (2) (b) units will be required. Instead, a payment in lieu will be levied (by way of S106) equivalent to the developer's associated saving (see Section 6 above).
- Those payments will be transferred to the council's Project 120 budget for use in:
 - adapting suitable historic voids to meet the needs of wheelchair users and their families on the council's housing waiting list; and
 - fitting out 'easily adaptable' properties (approved pre March 2016) to meet the needs of known wheelchair users on the council's waiting list.

By so doing, the council will increase its stock of properly accessible properties in line with local needs and the intention of London Plan Policy 7.2 An Inclusive Environment and 3.8 Housing Choice.

Appendix 1: Definitions and statistics

Limiting long-term illness

One in five Tower Hamlets residents (22%) has a self-reported long-term illness, condition or disability. Of these, three-quarters (76%) are limited by it, meaning that 17% of all residents have a long-term limiting health problem. It appears that health problems for those who have them are more severe in Tower Hamlets than across Britain as a whole: nationwide, a greater proportion report having a long-term illness (38%), but of these a smaller proportion says it limits their activities (54%). White British residents of Tower Hamlets are more likely than those from Asian or other White backgrounds to report a limiting long-term illness, but this may be due to the higher than average representation of White British people in the oldest age groups. Low socioeconomic status is correlated with increased incidence of limiting long-term illness.

https://www.towerhamlets.gov.uk/Documents/Borough_statistics/Health_and_social_care/Tower-Hamlets-Health&Lifestyle-exec-Summary1.pdf

Housing

- 40% of the population live in social rented accommodation, compared to 24% in London
- Overcrowding varies across the borough, from 23% in Mile End East, to 11% in St Katharine's and Wapping.
- There are over 19000 households on the housing waiting list, of which 7078 (37%) are currently overcrowded.
- 52.3% of households on the housing waiting list are families of Bangladeshi ethnic origin.

Levels of disability in the population

Tower Hamlets has a slightly higher rate of severe disability in its working age population (4.1%) compared to that of London (3.4%) and England (3.6%).

https://www.towerhamlets.gov.uk/Documents/Public-Health/JSNA/JSNA_Summary.pdf

Appendix 2: The author:

Clare Goodridge obtained a BA in Architectural Studies from the University of Newcastle upon Tyne (1986) and a Diploma in Architectural Studies from London Metropolitan University (1990).

She was the access policy officer for RADAR (Royal Association for Disability and Rehabilitation) 1990-94, social policy officer for Citizens Advice London Region (1994-6) and manager of the Access Committee for England (1996-8). Self-employed since 1999, she has worked extensively in the public, private and voluntary sectors, undertaking research, training and design consultancy projects.

Since 2006, Clare has also worked part time as the Inclusive Design Policy Officer for the London Borough of Islington in the Planning Policy team: scrutinizing proposals pre, live and post application; contributing to the development of its Local Plan; and, producing Supplementary Planning Documents on Inclusive Design, the Public Realm and Urban Design.

Clare established her consultancy in 1999, since when relevant commissions have included:

- GLA
 - Production of Illustrated guides to:
 - Accessible London: achieving an inclusive environment
 - Lifetime Homes
 - Evaluation of London Plan Policy on Housing Choice – c/o Savilles
- Disability Rights Commission
 - Drawing a contemporary picture of the housing opportunities available to disabled people, establishing policy priorities
 - Advising policy working groups on the interface between Building Regulations and Part III of the DDA.
- National Housing Federation
 - Research for and production of 'A Level Threshold; towards equality in housing services for disabled people: good practice guide'