# MENTAL HEALTH BUILDINGS EVALUATION

Report
S1

Basic facts
and figures

Sheffield
Development Project
for mentally
handicapped people

DHSS
July 1979

FOREWORD TO MENTAL HEALTH BUILDINGS EVALUATION REPORT SERIES

This report is one of a series evaluating various aspects of particular mental health buildings. There is general agreement that evaluation of buildings is a useful part of the design process, but less agreement as to the most profitable way in which to approach evaluation. The reports in this series are varied in topic and method of evaluation, but all seek to demonstrate ways in which aspects of design affect the delivery of mental health services. This requires at times some description of what service is offered, of how units are run, of operational policies and so on. Experience and reason show that buildings cannot be evaluated except in relation to the service to which they contribute.

Where relevant, reports include recommendations either on possible modifications of the situation described, or in relation to future design; where possible, cost/benefit aspects are included.

The first reports are:

S1. Basic Facts and Figures: Sheffield Development Project for Mentally Handicapped People.

S2. Children's Residential Accommodation. Policy and User Reaction: Sheffield Development Project for Mentally Handicapped People.

S3. Community Reaction to local Buildings. Pilot Study: Sheffield Development Project for Mentally Handicapped People.

Reports with the following provisional titles are planned:

S4. Children's Residential Accommodation. Brief and Design Implications: Sheffield Development Project for Mentally Handicapped People.

S5. Children's and Adult's Units at the Gloucester Centre: Peterborough Development Project for Mentally Handicapped People.

S6. Adult Day Care. Health Service Provision: Sheffield and Peterborough Development Projects for Mentally Handicapped People.

S7. Cost Comparison of Converted and Purpose-built Accommodation for Mentally Handicapped Children: Sheffield Development Project for Mentally Handicapped People.

Various reports on the Worcester Development Project for Mentally Ill People are also envisaged.

Meetings with interested parties to discuss the reports will be arranged from time to time.

Each report represents a considerable offering of time and thought from people who have helped; thanks are extended to them.

THE SHEFFIELD DEVELOPMENT PROJECT FOR MENTALLY HANDICAPPED PEOPLE

Many of the reports in this series deal with buildings in the Sheffield Development Project. This project is described in the Sheffield Feasibility Study (1971). An Evaluation Research Group was set up in 1976 under Professor Heron to evaluate the service provided by the SDP; this did not include evaluation of the buildings. Preliminary work on establishing a programme of building evaluation is described in Sheffield Development Project: Building Evaluation Report and Future Plans (Nov 1978). In November 1978 a single report on the Sheffield buildings was planned, but reports on specific topics will now be published as soon as available, as explained in the foreward. This enables more rapid dissemination of information, greater flexibility in responding to requests for research to be done on particular topics, and the integration of concurrent relevant evaluation work elsewhere (for example, the Peterborough Development Project). This form of presentation has made it possible to concentrate initially on children's residential accommodation.

CHILDREN'S RESIDENTIAL ACCOMMODATION

At present three reports relate to children's provision at Sheffield:

S1. Basic Facts and Figures

S2. Children's Residential Accommodation: Policy and User Reaction.

S4. Children's Residential Accommodation: Design and Briefing Implications (publication September 1979)

Each of these looks at the provision from a particular point of view. Report S1 gives the numbers, dependency and location of children (and adults) with some commentary. Both Report S2 and Report S4 consider the design of Units, Report S2 from the users' perspective in the context of objectives and policies and practices of each building, and Report S4 from an architectural perspective considering design and briefing implications.

Reports S1, S2 and S3 in this series are being forwarded to people from the RHA, AHA(T), Social Services Department, Evaluation Research Group and DHSS who contributed at some stage to be Buildings Evaluation programme; a wider circulation is anticipated. Report S2, 'Children's Residential Accommodation: Policy and User Reaction', was discussed in draft with many of the people participating in the study in order for them to comment prior to publication. The published Report takes into account these comments. The Tables in Reports S1 and S2 were cleared in advance of publication by Dr Alan Martindale of the Sheffield Case Register.

MENTAL HEALTH BUILDINGS EVALUATION

# THE SHEFFIELD DEVELOPMENT PROJECT FOR MENTALLY HANDICAPPED PEOPLE

## REPORT S1. BASIC FACTS AND FIGURES

MARK BAIGENT

MARY DALGLEISH

ROWAN MATTHEWS

GRAPHICS:

PETER COCKBURN ASSOCIATES

BUILDING EVALUATION PROGRAMME ORGANISER:

ROWAN MATTHEWS

DHSS WORKS GROUP
DIRECTORATE OF DEVELOPMENT
BRANCH DEV 3.2
286 EUSTON ROAD
LONDON NW1

LIAISON:

LEN BARTHOLOMEW

JULY 1979

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REPORT S1

# BASIC FACTS AND FIGURES:SHEFFIELD DEVELOPMENT PROJECT FOR MENTALLY HANDICAPPED PEOPLE

## INTRODUCTION

The Sheffield Feasibility Study Report (1971) proposed a comprehensive service for mentally handicapped people in Sheffield. The Sheffield Development Project, which is nearing completion, followed this study to provide the range of residential and day care facilities thought to be required for mentally handicapped people from a catchment area (the County Borough) with a population expected to rise above 500,000 by 1981.

The basic facts and figures for the Project are displayed graphically in this Report. Maps and charts are used for ease of reference and for later building evaluation purposes. Where relevant, basic information presented in this Report will be used in other reports in the series.

The approximate location of provision is shown on a series of maps. A short commentary is included with each map discussing the location and distribution of facilities and the use being made of older existing and new Project facilities. Queries that may occur to readers will be dealt with in detail in subsequent reports.

The tables in this report draw on information made available by the Sheffield Case Register, under Dr Martindale. The sex and age of the residents in each building is shown in the tables. It is because children's provision will be discussed in Report S2 and S4 that dependency data is included in addition in Table 1. Comparable data for adults will be published at a later date.

The numberical information on the maps in this report was obtained in February 1979 by asking staff at each building how many places were currently occupied and currently available. The total number of places planned for each building is given in the FSR. Thus all residents are included in these figures while only residents from Sheffield Metropolitan District are included in the tables.

It is expected that this information will be updated periodically.

REPORT 81

# BASIC FACTS AND FIGURES:SHEFFIELD DEVELOPMENT PROJECT FOR MENTALLY HANDICAPPED PEOPLE

## INTRODUCTION

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**The Sheffield Development Project**

Facilities existing or planned before the project


Map 1

MAP 1

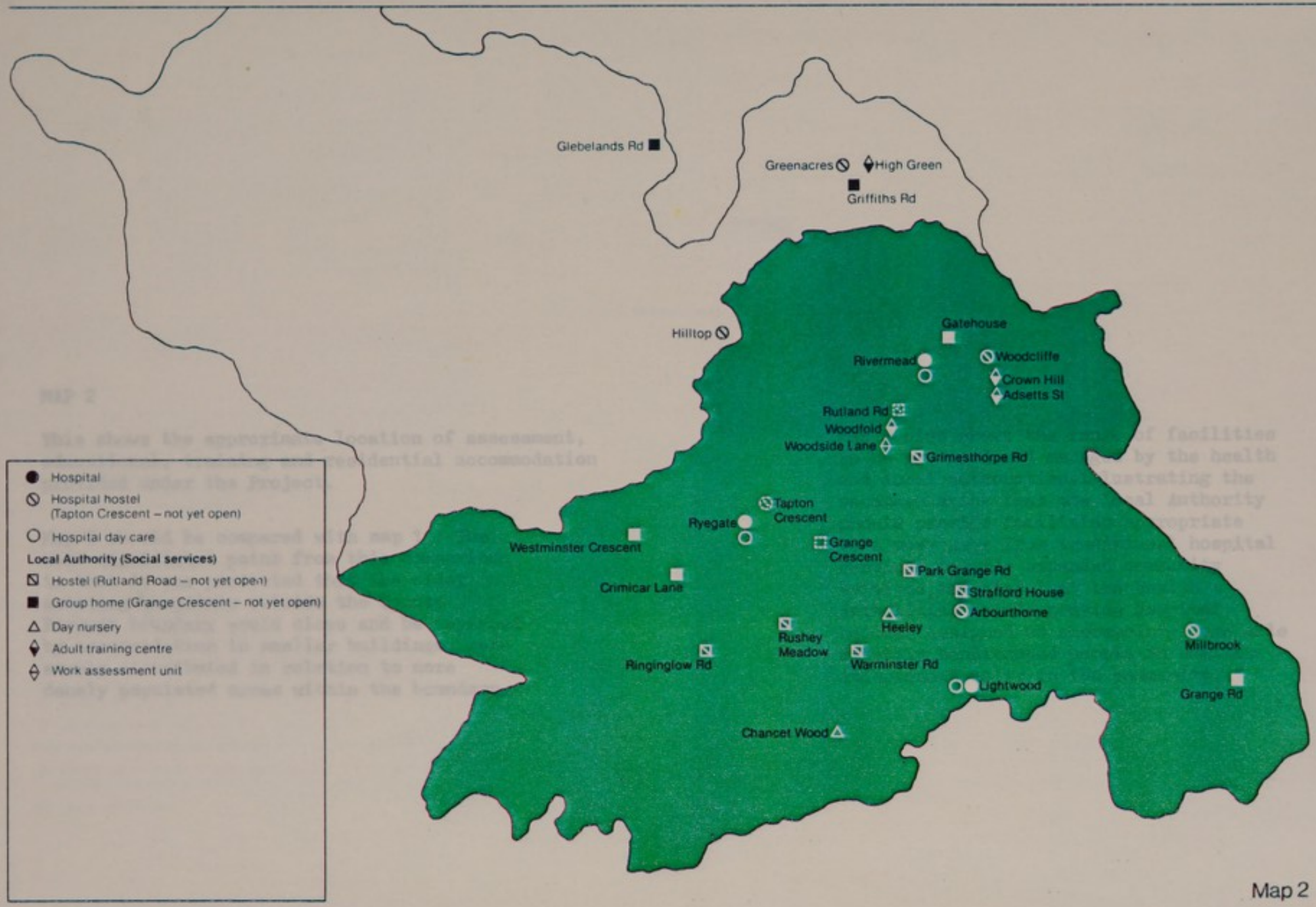
This shows the range of buildings used for mentally handicapped people before the Feasibility Study recommendations were implemented. Some of these buildings have been used for many years but Oakwood and Leighton View were acquired only just before the Sheffield Development Project commenced.

The Feasibility Study Team asked the Regional Hospital Board (now Regional Health Authority) to curtail planning activities during the study period. The Team decided to take account of only the local authority's plans and to recommend additional facilities where it was felt that supplementary or innovatary services were necessary eg. WOODSIDE LANE (Adolescent Work Assessment Unit).

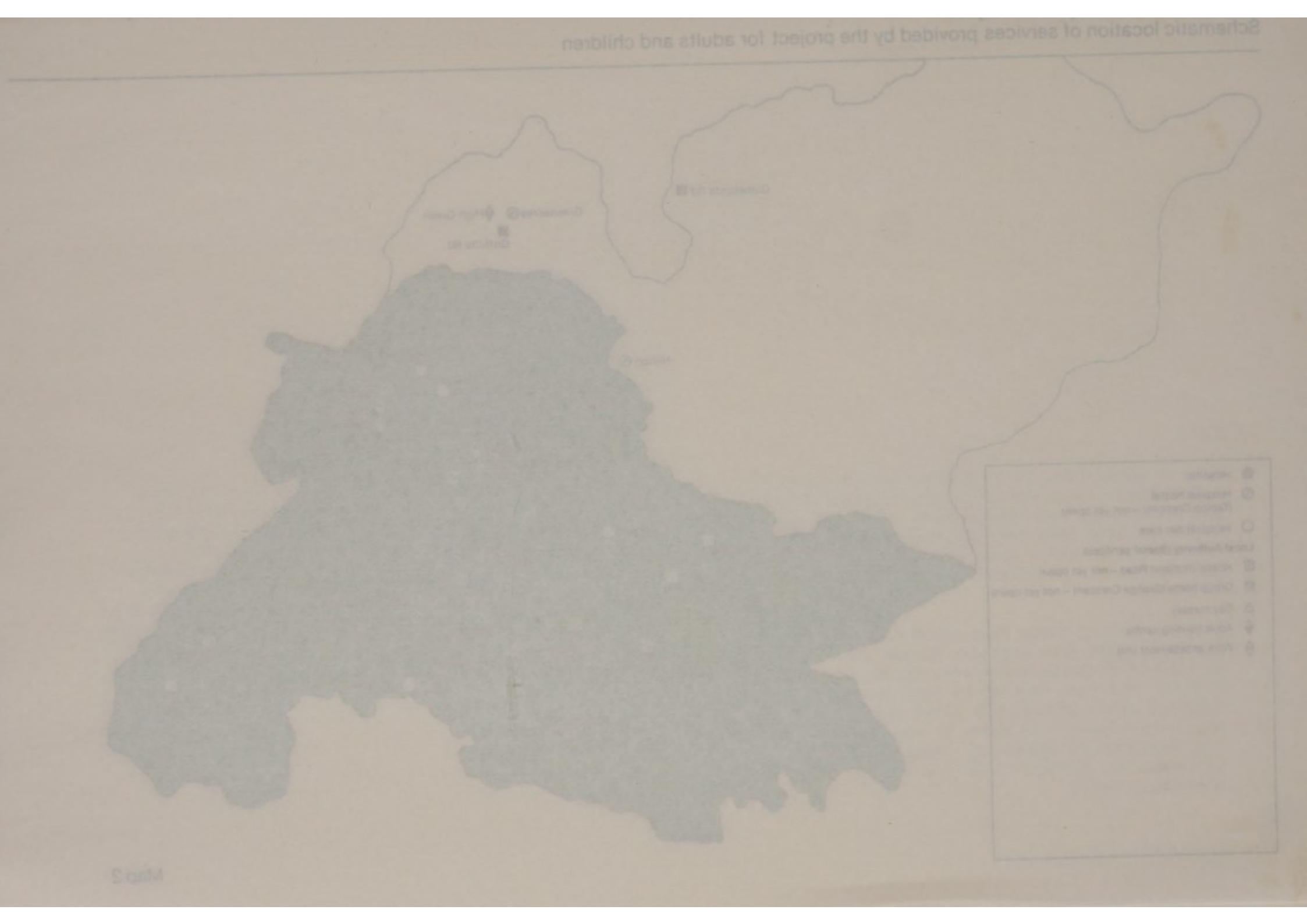
It can be seen from Map 1 that existing services in Sheffield followed the traditional solution where hospital services for mentally handicapped people were located away from the town centre, in this case generally outside the County Borough boundary, and that the local authority services, which had until recently been limited mainly to day care, were provided within the boundary and in more densly populated areas unrelated to hospital provision.

**The Sheffield Development Project**

Schematic location of services provided by the project for adults and children




Map 2



MAP 2

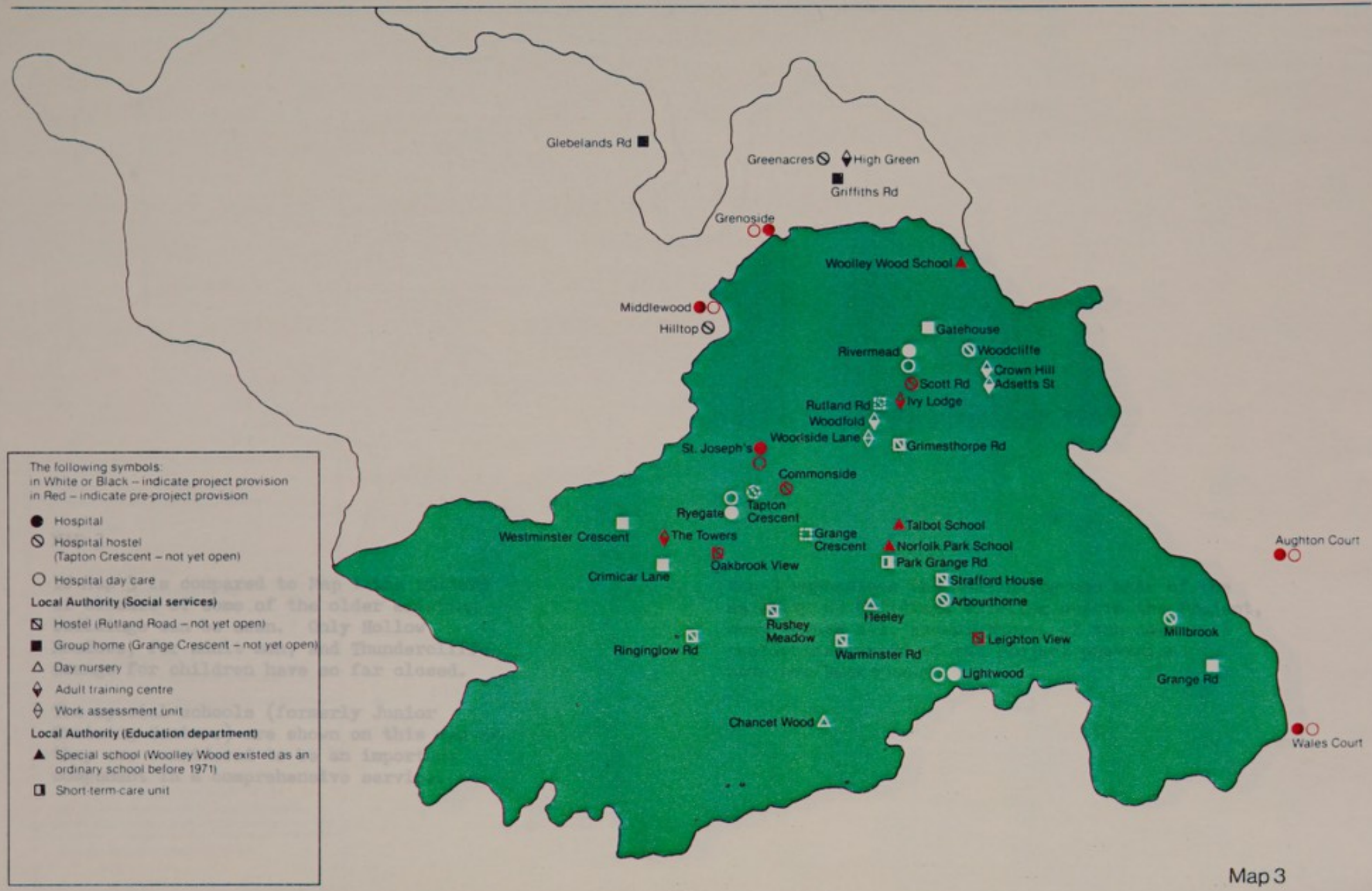
This shows the approximate location of assessment, educational, training and residential accommodation provided under the Project.

Map 2 should be compared with map 1. The most significant point from this comparison is that it was predicted that the older existing hospitals outside the County Borough boundary would close and be replaced by accommodation in smaller buildings, more evenly distributed in relation to more densly populated areas within the boundary.

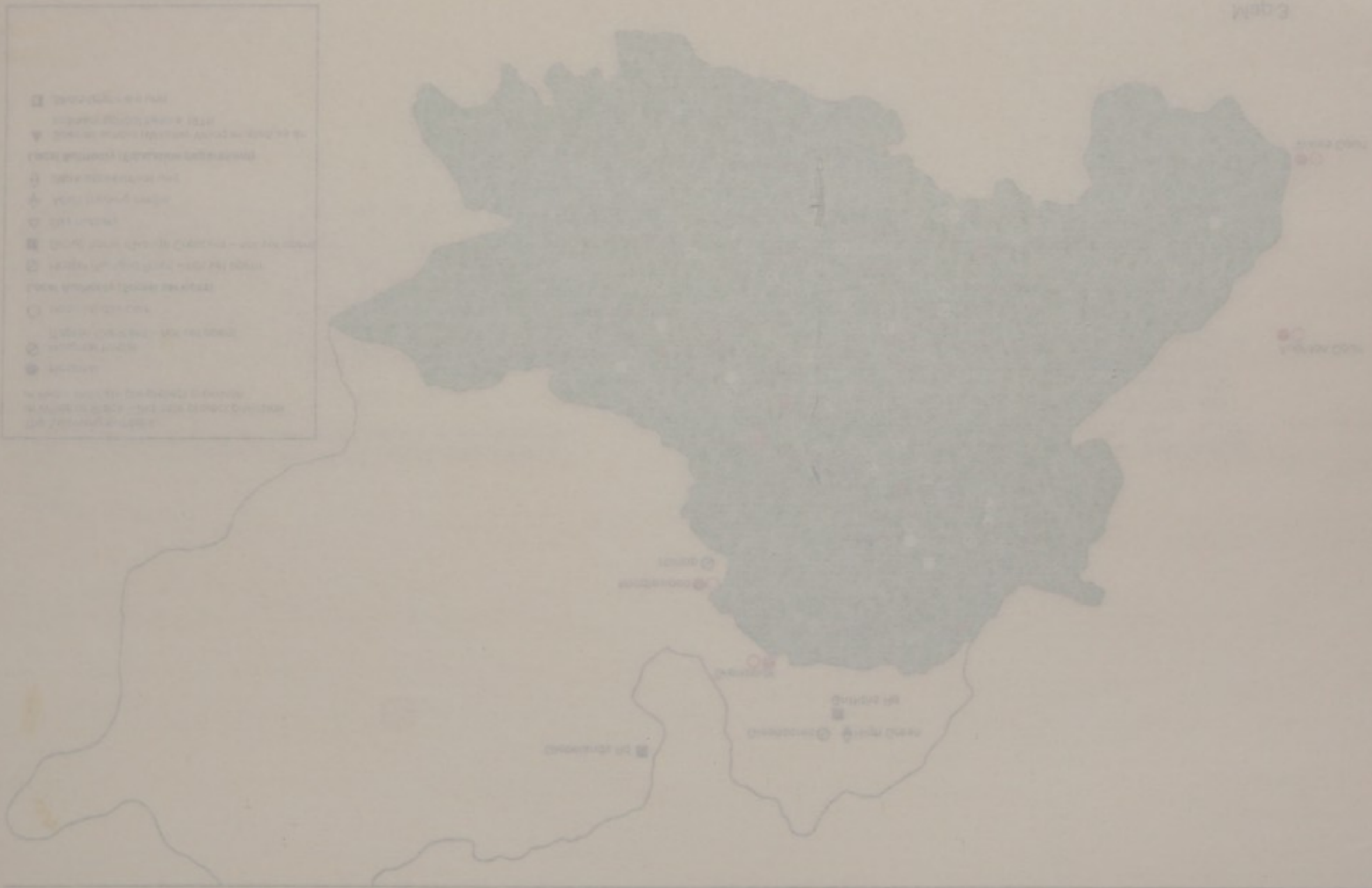
Map 2 also shows the range of facilities to be provided and managed by the health and local authorities,illustrating the recommendation that the Local Authority should provide facilities appropriate to a move away from traditional hospital services towards expanded community services,and also that the Health Authorities should provide hospital hostels designed to accommodate more able mentally handicapped people in smaller independent units in the community.

**The Sheffield Development Project**

Schematic location of services now in use for adults and children




Map 3



MAP 3

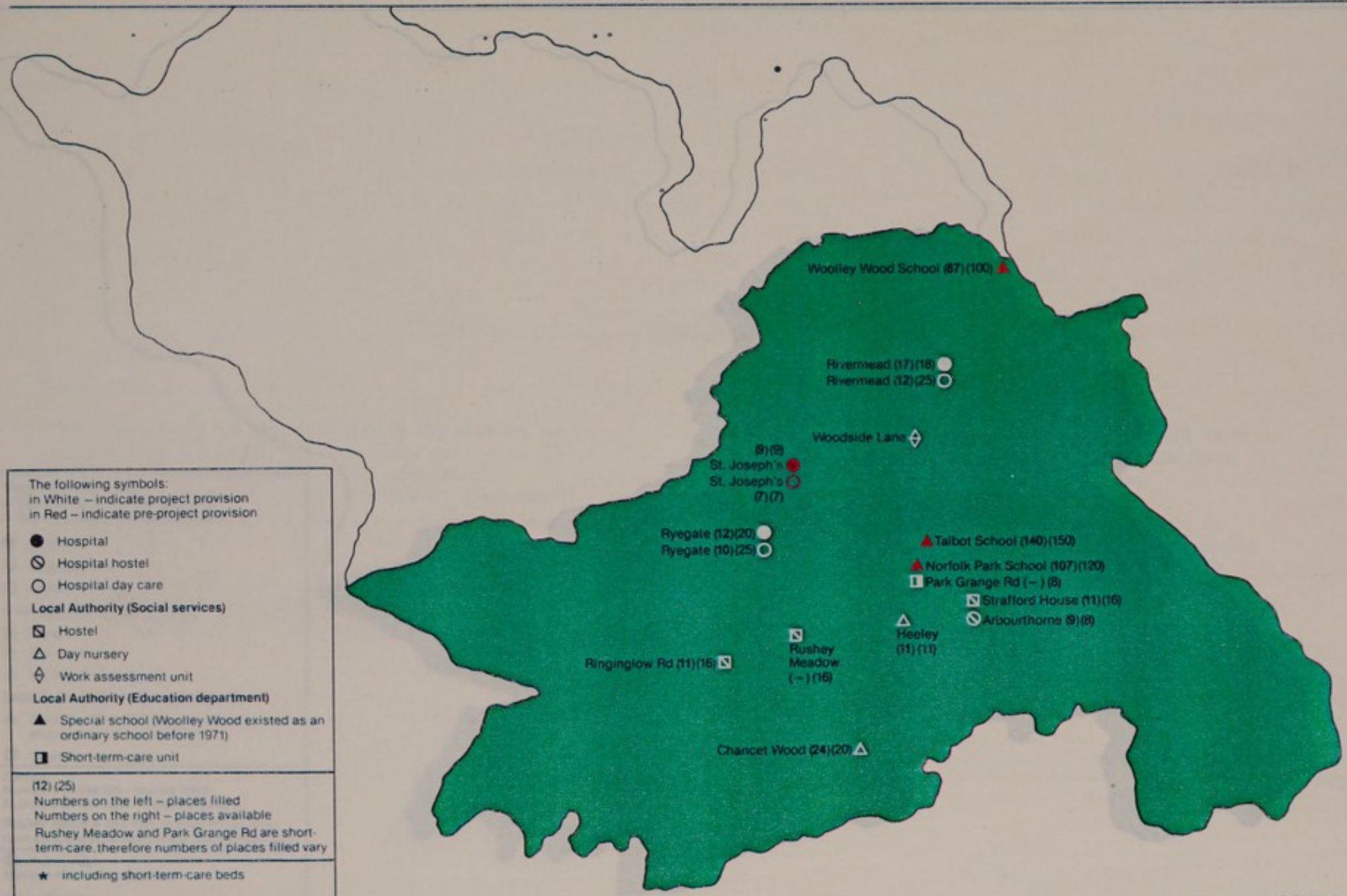
If Map 3 is compared to Map 1 the pattern of closure of some of the older existing buildings can be seen. Only Hollow Meadows, for adult men, and Thundercliffe Grange for children have so far closed.

The special schools (formerly Junior Training Centres) are shown on this map as they are considered to be an important component in a comprehensive service.

Map 3 emphasises the continuing use made of the majority of buildings existing before the Project, even though all, except three, of the new small residential units of the Project provision have now been opened.

**The Sheffield Development Project**

Number of places occupied and total number of places* currently available for children at February 1979




The following symbols:
in White – indicate project provision
in Red – indicate pre-project provision

- Hospital
- Hospital hostel
- Hospital day care

**Local Authority (Social services)**

- Hostel
- Day nursery
- Work assessment unit

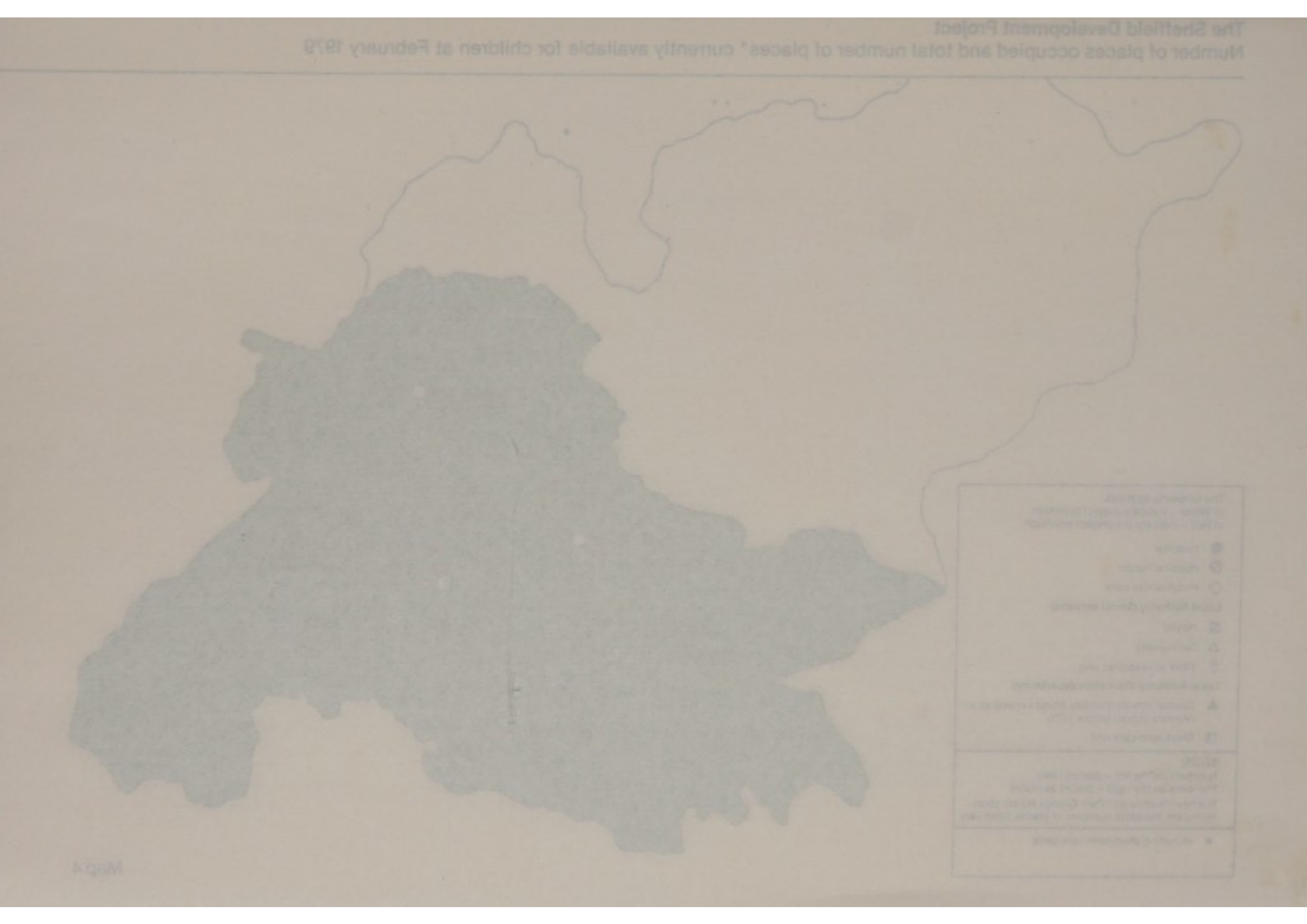
**Local Authority (Education department)**

- Special school (Woolley Wood existed as an ordinary school before 1971)
- Short-term-care unit

(12) (25)
Numbers on the left – places filled
Numbers on the right – places available
Rushey Meadow and Park Grange Rd are short-term-care, therefore numbers of places filled vary

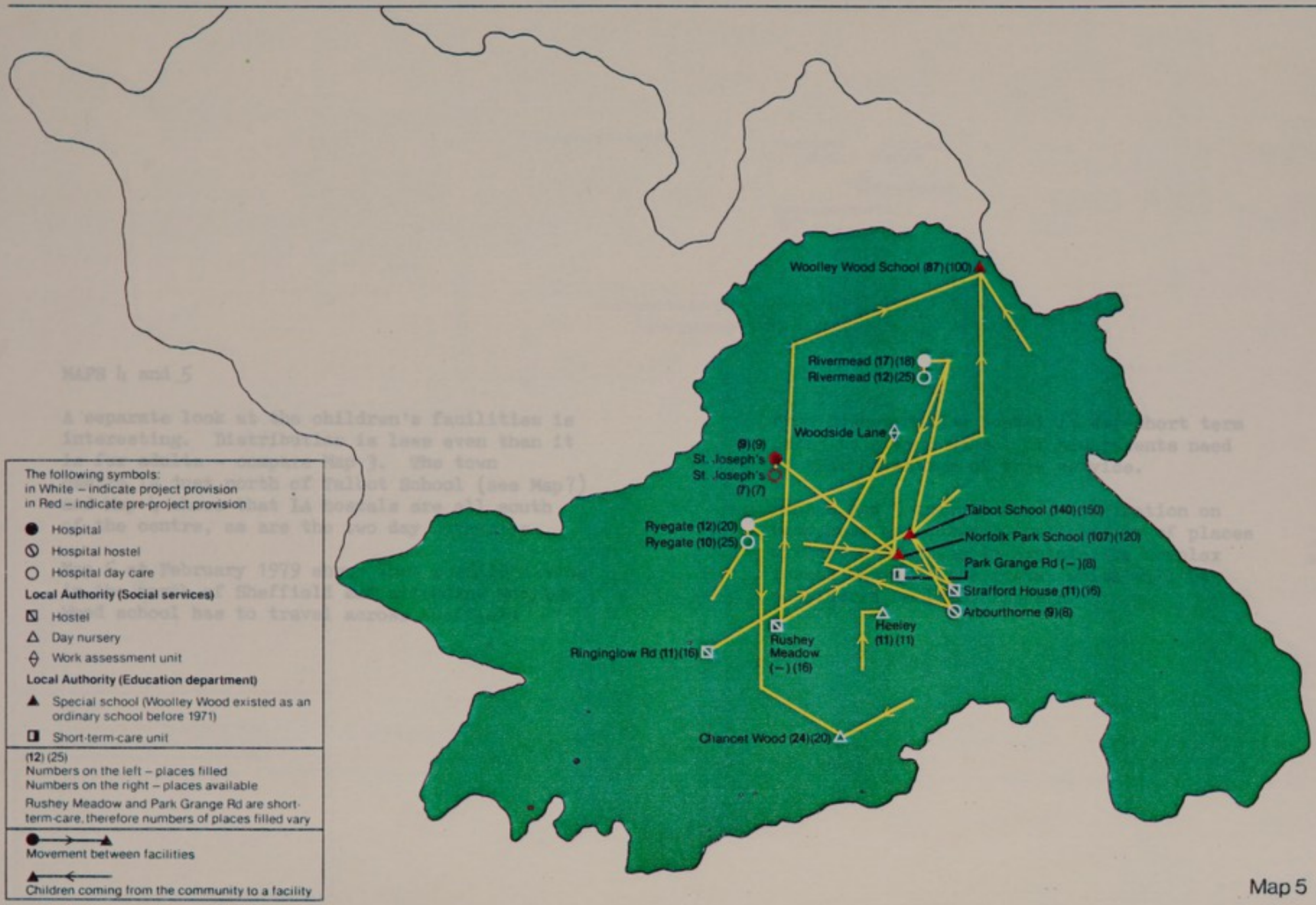
★ including short-term-care beds

Map 4

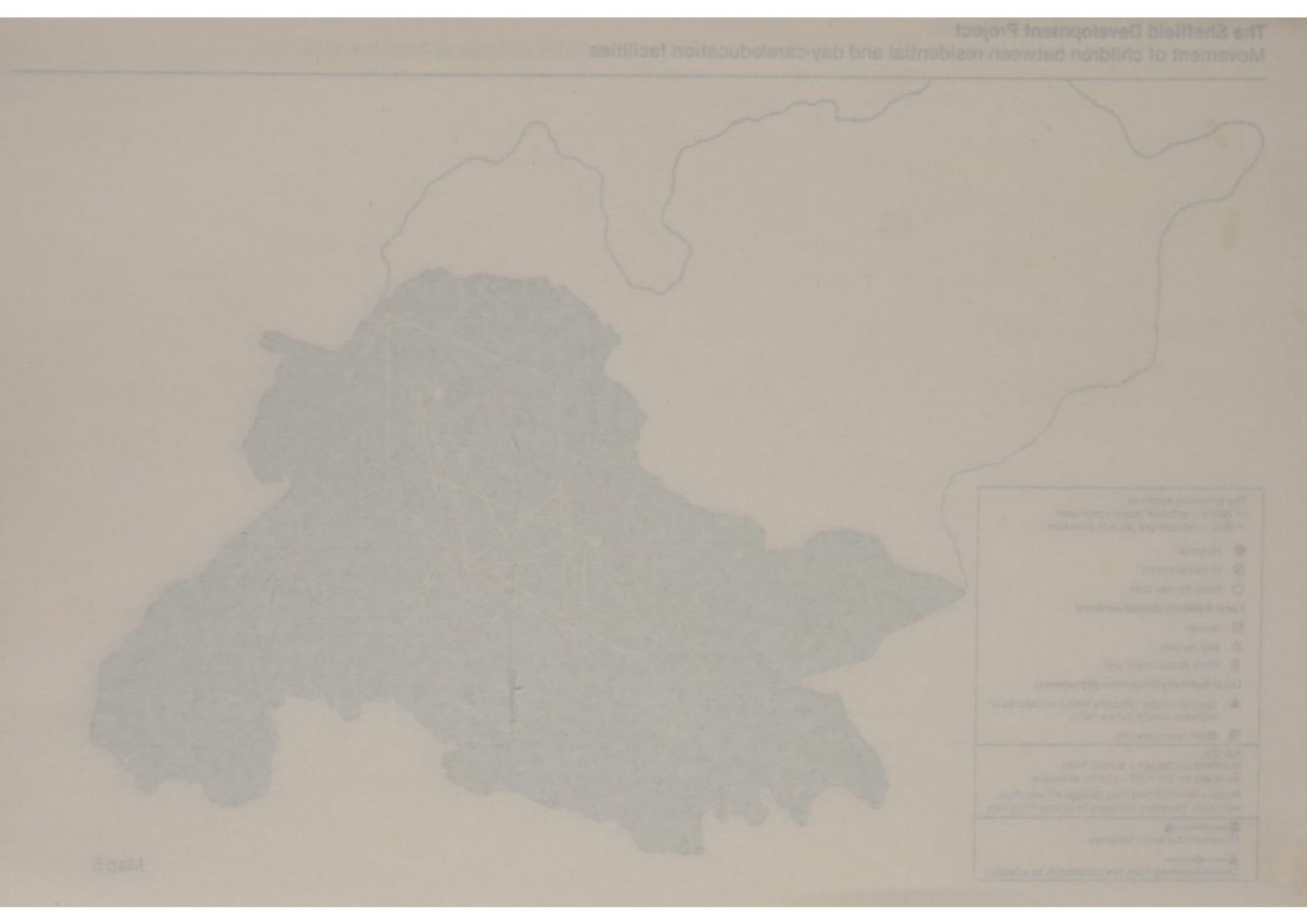


**The Sheffield Development Project**

Movement of children between residential and day-care/education facilities




Map 5



MAPS 4 and 5

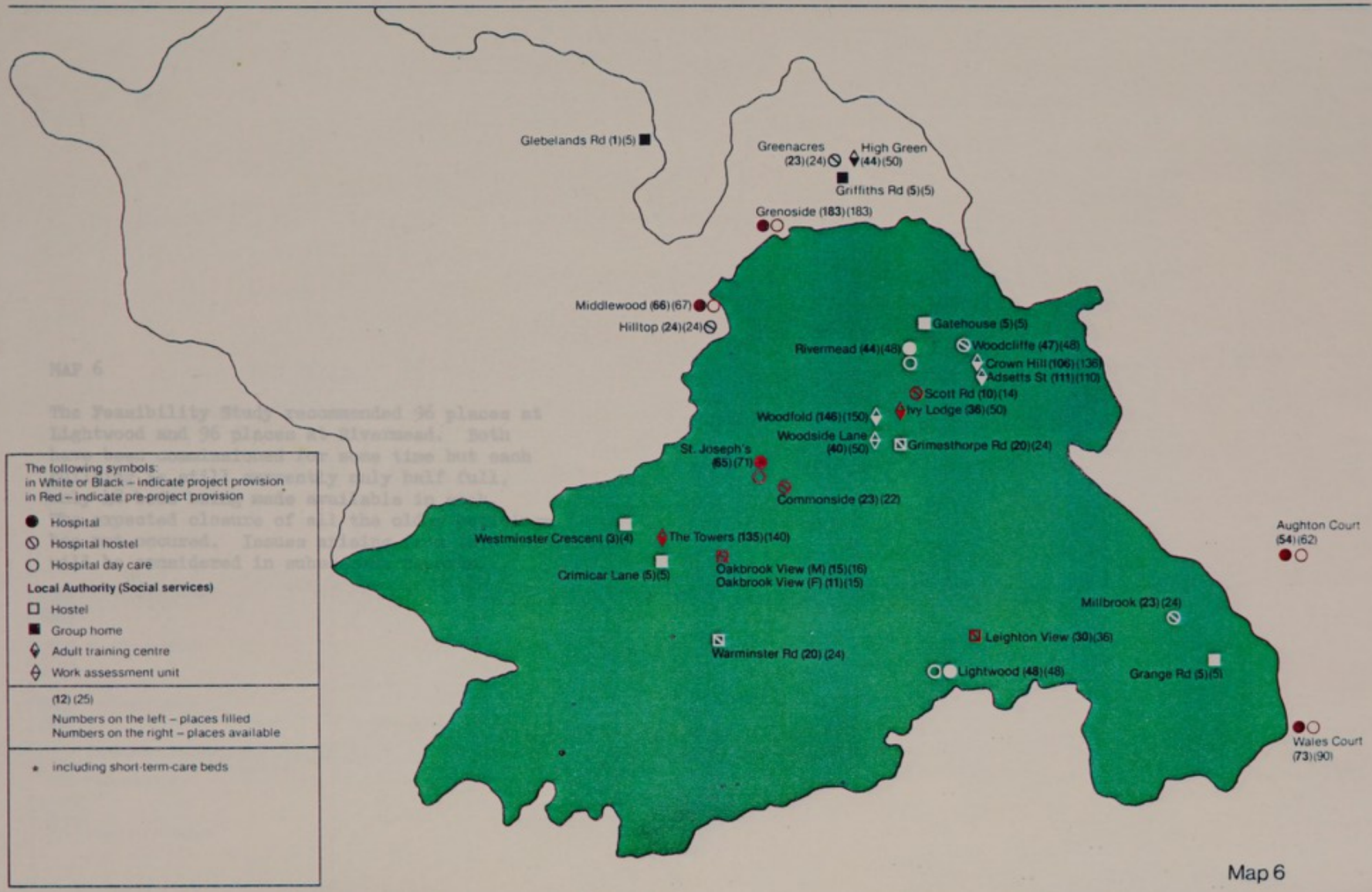
A separate look at the children's facilities is interesting. Distribution is less even than it is for adults - compare Map 3. The town centre is just north of Talbot School (see Map7) and Map 4 shows that LA hostals are all south of the centre, as are the two day nurseries.

Map 5 at February 1979 shows that a child living in the north of Sheffield and attending Woolley Wood school has to travel across Sheffield from Rushey Meadow hostel (5 day-short term care) to attend school if his parents need to take advantage of this service.

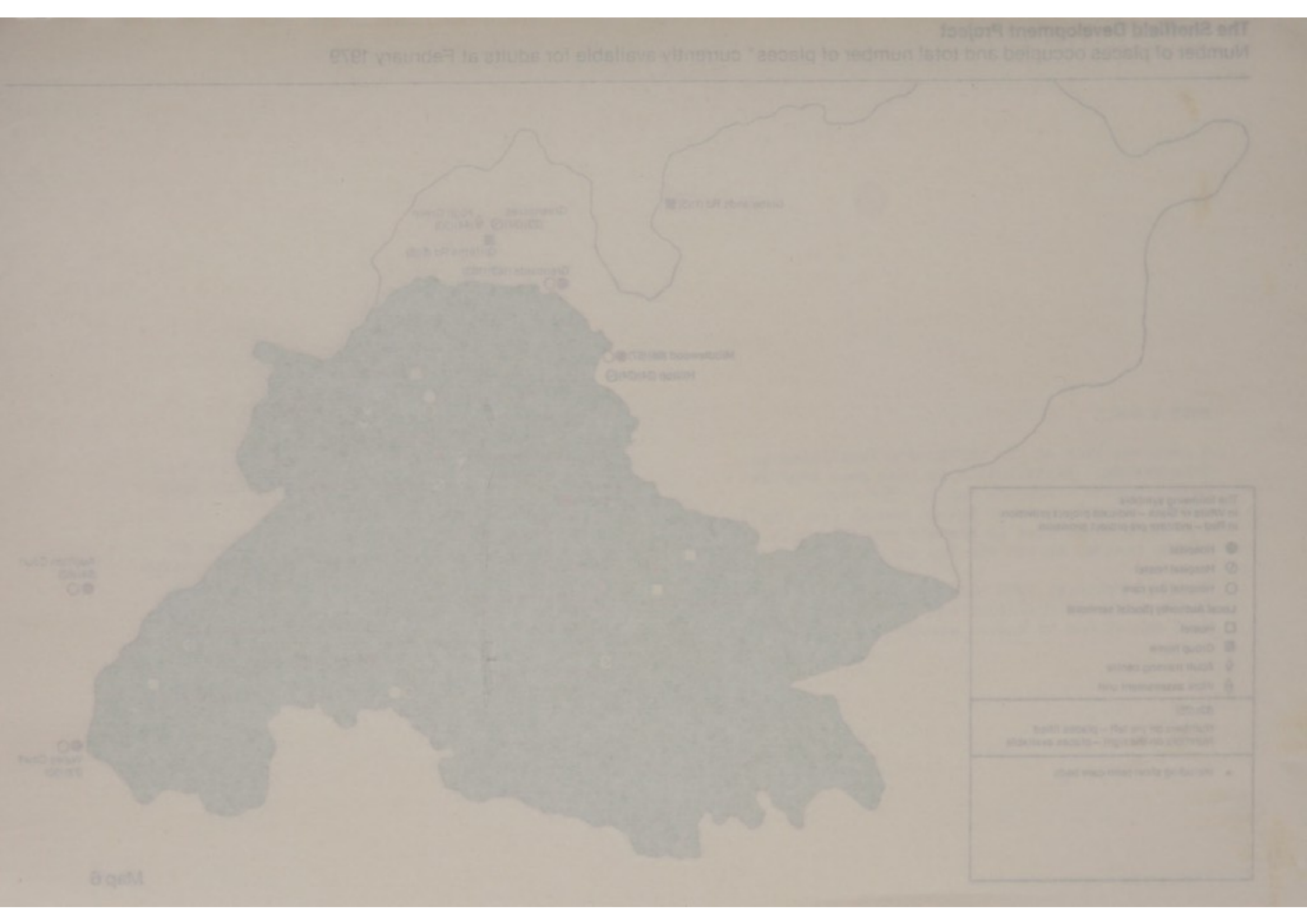
Maps 4 and 5 include basic information on occupancy and current availability of places without attempting to explain the complex issues behind these facts, which will be considered in later reports.

**The Sheffield Development Project**

Number of places occupied and total number of places* currently available for adults at February 1979




Map 6

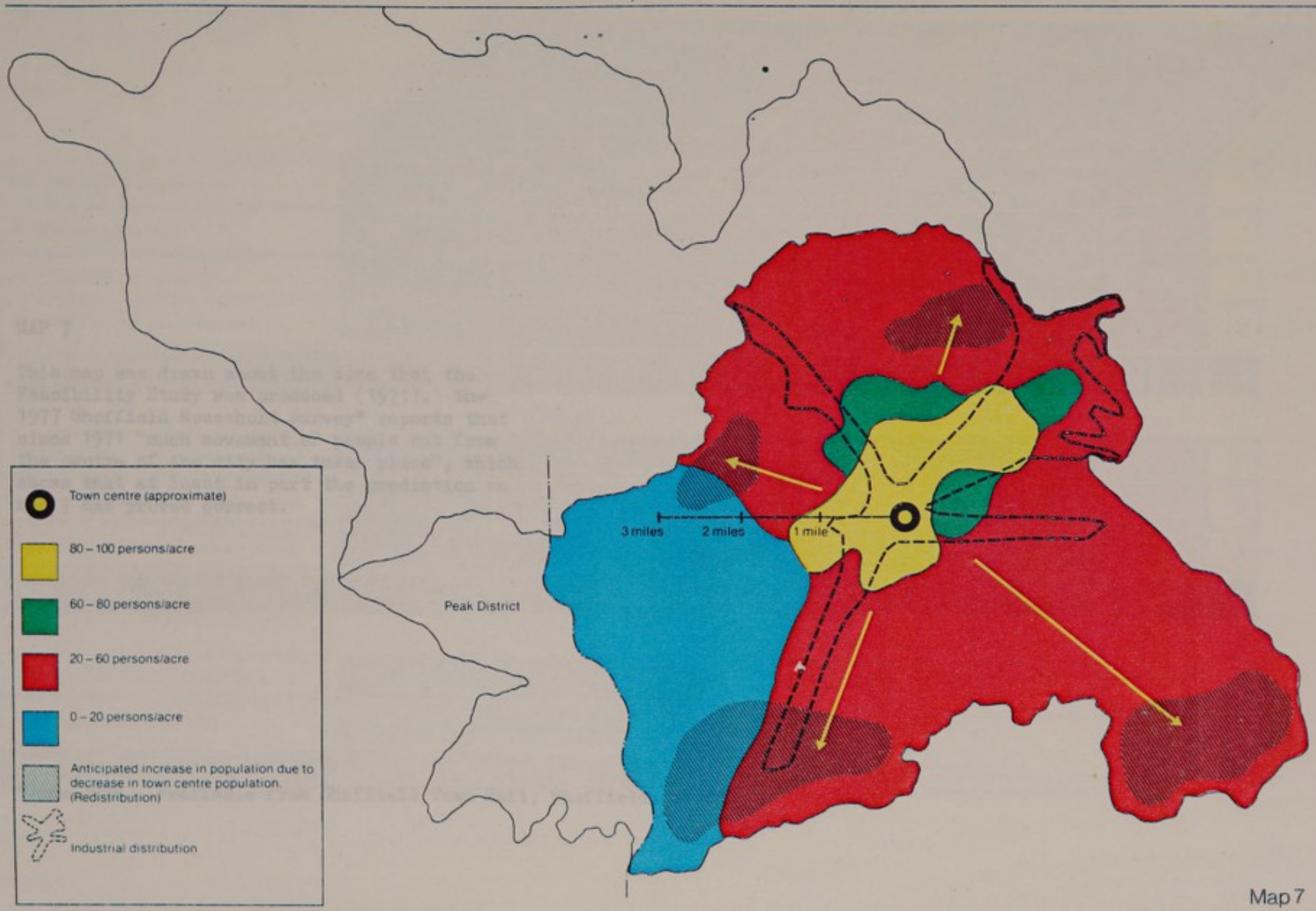


MAP 6

The Feasibility Study recommended 96 places at Lightwood and 96 places at Rivermead. Both have been commissioned for some time but each building is still currently only half full, only 48 beds being made available in each. The expected closure of all the older buildings has not occured. Issues arising from this information will be considered in subsequent reports.

**The Sheffield Development Project**

County Borough: Approximate distribution of housing (densities) and industry




Map 7

MAP 7

This map was drawn about the time that the Feasibility Study was produced (1971). The 1977 Sheffield Household Survey* reports that since 1971 "much movement of people out from the centre of the city has taken place", which shows that at least in part the prediction on map 7 has proved correct.

*June 1978. Available from Sheffield Town Hall, Sheffield, S1 2HH

Mentally handicapped children from Sheffield MD resident in Hospital Authority and Local Authority provision, 1978*

| | Total | Sex: Female | Sex: Male | Age in years: 0–4 | 5–10 | 11–15 | 16–19 | Severe social & physical incapacities: Severe walking problem | Severe behaviour problem and Severe incontinence | Severe behaviour problem only | Severe incontinence only | Mild social & physical incapacities: None of above but mild walking problem | None of above but mild behaviour problem & mild incontinence | None of above but mild behaviour problem only | None of above but mild incontinence only | Problem with feeding, washing or dressing | None of above but unable to speak in sentences | No SPI but problems with self-help and literacy: None of above problems |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| St. Joseph's (Old hospital) | 8 | 5 | 3 | 1† | 1 | 4 | 2 | 3 | 2 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 0 | 0 |
| Ryegate (New hospital) | 10 | 1 | 9 | 1† | 2 | 7 | 0 | 1 | 3 | 1 | 4 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Rivermead (New hospital) | 20 | 6 | 14 | 0 | 4 | 9 | 7 | 2 | 5 | 1 | 11 | 1 | 0 | 0 | 0 | 0 | 0 | 0 |
| Arbourthorne (New hospital hostel) | 7 | 1 | 6 | 0 | 0 | 3 | 4 | 0 | 1 | 1 | 1 | 0 | 0 | 1 | 0 | 1 | 0 | 2 |
| **Total Hospital Authority** | **45** | **13** | **32** | **2** | **7** | **23** | **13** | **6** | **11** | **3** | **16** | **2** | **0** | **1** | **0** | **2** | **0** | **2** |
| Ringinglow Road (L A Hostel for Mentally Handicapped Children) | 9 | 4 | 5 | 0 | 0 | 3 | 6 | 0 | 1 | 6 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 |
| Rushey Meadow (L A Hostel for Mentally Handicapped Children) | 15†† | 8 | 7 | 0 | 6 | 7 | 2 | 0 | 6 | 1 | 3 | 0 | 1 | 1 | 2 | 1 | 0 | 0 |
| Strafford House (L A Hostel for Mentally Handicapped Children) | 10 | 6 | 4 | 0 | 5 | 5 | 0 | 0 | 3 | 2 | 1 | 0 | 0 | 1 | 1 | 1 | 0 | 1 |
| **Total Local Authority** | **34** | **18** | **16** | **0** | **11** | **15** | **8** | **0** | **10** | **9** | **5** | **0** | **1** | **3** | **3** | **2** | **0** | **1** |
| Ordinary children's homes | 7 | 2 | 5 | 0 | 2 | 5 | 0 | | | | | | | | | | | |
| Fostered/boarded out | 17 | 8 | 9 | 2 | 5 | 9 | 1 | | | | | | | | | | | |
| **Total** | **103** | **41** | **62** | **4** | **25** | **52** | **22** | | | | | | | | | | | |

* August 1978 for Local Authority – October 1978 for Hospital Authority. A few additional children from outside Sheffield MD were resident in some of the units and have not been included in the figures.

† These children, both 2 years of age, are not included in the dependency data.

†† Regular attenders.

For details about the dependency ratings see:
Kushlick, A; Blunden, R; & Cox, G: A Method of Rating Behaviour Chafacteristics for use in Large Scale Surveys of Mental Handicap. **Psychological Medicine** 3 466-478, 1973.

Table 1

Mentally handicapped adults from Sheffield MD resident in Hospital Authority provision, October 1978*

| | Total | Sex: Female | Sex: Male | Age in years: 16 – 19 | 20 – 30 | 31 – 44 | 45 – 64 | 65 + |
|---|---|---|---|---|---|---|---|---|
| St. Joseph's<br>Aughton Court<br>Wales court (Old hospitals)**<br>Grenoside<br>Middlewood | 263† | 98 | 122 | 2 | 30 | 25 | 85 | 78 |
| Commonside (Old hospital hostel) †† | 22 | 0 | 22 | 0 | 5 | 11 | 4 | 2 |
| Scott Road (Old hospital hostel) †† | 16 | 16 | 0 | 0 | 2 | 6 | 8 | 0 |
| **Total-old hospital provision** | **301†** | **114** | **144** | **2** | **37** | **42** | **97** | **80** |
| Lightwood (New hospital) | 36 | 6 | 30 | 7††† | 12 | 9 | 7 | 1 |
| Rivermead (New hospital) | 30 | 28 | 2 | 0 | 7 | 11 | 9 | 3 |
| Millbrook (New hospital hostel) | 21 | 14 | 7 | 1 | 10 | 6 | 4 | 0 |
| Hilltop (New hospital hostel) | 23 | 9 | 14 | 1 | 9 | 6 | 4 | 3 |
| Greenacres (New hospital hostel) | 12 | 5 | 7 | 0 | 3 | 3 | 6 | 0 |
| Woodcliffe (New hospital hostel) | 27 | 6 | 21 | 0 | 8 | 1 | 18 | 0 |
| **Total-new hospital provision** | **149** | **68** | **81** | **9†††** | **49** | **36** | **48** | **7** |
| **Total hospital provision** | **450†** | **182** | **225** | **11†††** | **86** | **78** | **145** | **87** |

* Around 270 additional adults from outside Sheffield MD were resident in some units and these have not been included in the figures.

** Numbers of adults remaining in old hospital provision are estimated from the 1976 Case Register Report 3 totals.

† Includes 43 people for whom no further information is available

†† Includes people in satellite houses.

††† Includes one 15 year old boy

Table 2a

Mentally handicapped adults from Sheffield MD resident in Local Authority provision, August 1978*†

| | Total | Sex: Female | Sex: Male | Age in years: 16 – 19 | 20 – 30 | 31 – 44 | 45 – 64 | 65 + |
|---|---|---|---|---|---|---|---|---|
| Warminster Road Hostel | 19 | 10 | 9 | 3 | 8 | 5 | 3 | 0 |
| Leighton View Hostel | 34 | 18 | 16 | 0 | 6 | 10 | 17 | 1 |
| Oakbrook View Hostel (men) | 15 | 0 | 15 | 0 | 3 | 8 | 4 | 0 |
| Oakbrook View Hostel (women) | 11 | 11 | 0 | 0 | 1 | 3 | 7 | 0 |
| Grimesthorpe Hostel | 22 | 11 | 11 | 5 | 8 | 4 | 5 | 0 |
| Group homes | 23 | 18†† | 5 | 0 | 3 | 4 | 12 | 1 |
| **Total in Local Authority Provision** | **124** | **68††** | **56** | **8** | **29** | **34** | **48** | **2** |

* A few additional adults from outside Sheffield MD were resident in group homes and these are not included in the figures

† These figures include short-term-care cases

†† Including 3 women for whom no further information is available

Table 2b

COMMENT

There is of course a limit to what can be shown on small scale maps when they are used to present basic facts and figures. However, they do show that more than twenty specially designed new buildings have been provided (Map 2) to replace and augment the existing facilities (Map 1). At present services are being provided in both old and new facilities (Map 3 and Tables 1 and 2) and there are unexpected discrepancies between the number of places currently available and the number of places built (Maps 4 and 6). Maps 5 and 6 raise doubts about whether these new buildings are appropriately located and also about the size of each facility; are they too large or too small and are there too many or not enough?

Collectively this series of maps raise other issues and queries e.g. do the facilities shown on Map 2 or Map 3 provide people in Sheffield with a better service than elsewhere, have resources been put into buildings rather than the service, what is the local people's reaction to having buildings for mentally handicapped people in the same street, and so on?

Map 2 shows the full range of services planned for mentally handicapped people through the Sheffield Development Project. It is already clear that many people feel that the planners have given too much attention to providing new purpose built accommodation and too little thought to the needs of the people receiving and providing the service. It is perhaps easier to obtain a commitment to invest in buildings for mentally handicapped people than it is to deal with the more complex issues implied in a decision to provide them with community based services "...enabling the mentally handicapped person to live as much a part of the community as his disabilities allow...." (FSR page 3). However, having made this investment, ways must be found to understand whether it was worthwhile and whether or not the provision of specially designed buildings aids or inhibits service aims, which of course adjust continually.

Rowan Matthews' background is in psychology (University of Sheffield) moral sciences (University of Cambridge) and environmental psychology (University of Surrey).

She has worked on environmental psychology research programmes at Surrey University, for the Fire Research station, and for the DHSS. Her recent work with architectural teams at the DHSS has included research on the design of secure buildings, design preferences of senile dementia patients, and the development and assessment of reminiscence aids for the elderly.

She also teaches architectural students, at present at Portsmouth Architecture School.

She has developed and is organising the programme of evaluation of the buildings in two recent major attempts to provide new services in the field of mental health - the Sheffield Development Project for the mentally handicapped and the Worcester Development Project for the mentally ill.

Mary Dalgleish studied psychology at Bristol University. From 1973 to 1976 she was engaged in detailed observational and experimental research to clarify factors affecting the acquisition of motor skills in young children, for which she received a Ph.D from Sheffield University. Subsequently, she worked on an SSRC-funded research project to investigate the role of fantasy play in the development of social and intellectual skills in disadvantaged pre-school children.

In November 1978 she joined the Building Evaluation Team as their research worker based in Sheffield.

Mark Baigent studied Architecture and landscape Architecture at the Bartlett School, University College, London. He has worked on various housing projects and received special commendation for his building study of student's accommodation at Keble College Oxford. His special interest in mental handicap developed after spending 9 months with the DHSS Mental health Group as a student placement in 1977. He rejoined the group in 1978 to help with the development of the Building Evaluation Programme at Sheffield and Worcester.