

**CABINET – 6 NOVEMBER 2002**

**EXTRA CARE SHELTERED HOUSING**

**1 INTRODUCTION**

- 1.1 This report seeks to gain agreement to enter into a partnership with Hampshire County Council Social Services to provide extra care provision for tenants living in New Forest DC sheltered housing schemes.
- 1.2 Sheltered Housing traditionally straddles the boundary between housing and care provision, with its origins and development rooted in a housing framework.
- 1.3 Extra Care in Sheltered Housing is seen as being the vehicle for the future provision of care services to tenants in Sheltered Housing. It will enable tenants to retain their independence without having to move home.
- 1.4 Other Registered Social Landlords and District Council's both locally and nationally are taking similar steps and providing extra care in Sheltered Housing. They are also involved in intermediate care, which is helping to ease the problems within hospitals due to long stay wards/beds.
- 1.5 So that we can offer the best services for our tenants it is vital that our services are on a par with other service providers.

**2. BACKGROUND**

- 2.1 It was originally envisaged that Sheltered Housing would be allocated to independent active older people, who would move onto residential care when they could no longer remain living independently.
- 2.2 Sheltered Housing was initially divided into two specific types, category 1 and category 2. There is a clear distinction between the designs of the different categories.
- 2.3 In the early 1980's "very sheltered" or category 2.5 Sheltered Housing schemes were developed. These were designed to cope with the increasing frailty of the tenants, with the concept being to enable older people to remain in their own home, rather than having to "move on" to residential care.
- 2.4 New Forest District Council has two category 2.5 schemes, Winfrid House, Totton, built in 1982 and Gore Grange, New Milton, built in 1987. Both schemes were originally joint financed, between the Health Authority, Hampshire County Council and New Forest District Council. Over the years the funding has been reduced and the additional care removed. New Forest District Council now fully finance both schemes, with the funding coming via the tenants service charge.
- 2.5 Allocation of tenants to a specific category has become impractical and unacceptable.

- 2.6 Category 2.5 schemes have not addressed the problem of increasing frailty in other schemes, for example Category 2. It is considered to be unfair for elderly tenants to have to “move on” to a 2.5 scheme so that they can receive additional care.
- 2.7 With the promotion of supported care and independent living there is now a movement away from residential care. Extra Care Sheltered Housing would provide an alternative to residential care.
- 2.8 A recent Department of Health circular, “Building Capacity and Partnership in Care” stated that local authorities should increase the use of partners in the development of care for older people.
- 2.9 The Office of the Deputy Prime Minister (ODPM) guidance on housing strategies for older people “Quality and Choice for Older Peoples Housing”, makes it clear that extra care housing should be an option as a choice of accommodation for elderly persons in need of support and care.
- 2.10 A Social Services Inspectorate report recommends that the department may find it beneficial to pilot an alternative approach in partnership with a District Council.

### **3. CURRENT SITUATION**

- 3.1 There are currently over half a million sheltered housing units of accommodation nationally. Approximately 7% of older people in England live in Sheltered Housing, with approx 5.5% living in residential or nursing homes.
- 3.2 In 2001 there were over one million people over the age of 85, representing 13% of all older people.
- 3.3 Most older people live independently but with increased likelihood of disabilities, dependency of some kind is identified with advancing age.
- 3.4 At a local level there is an anticipated growth of 42% in over 85's within the New Forest over the next 10 years, from a base which is already 20% higher than any other districts in Hampshire.
- 3.5 The number of residential care homes is reducing due to a variety of factors.
- 3.6 Evidence suggests that in the future it will be increasingly difficult to recruit carers wanting to work in the community.
- 3.7 Discussions about future care provisions for older people have taken place between New Forest District Council, New Forest Primary Care Trust and Hampshire Social Services and an analysis of the situation currently within five New Forest District Council Sheltered Housing schemes is shown at Appendix 1.

#### **4. PROPOSAL**

- 4.1 “Extra Care” as recommended, is providing the best of both worlds. This provides a level of support normally only available in residential care with the older person being able to retain their independence by remaining a tenant with their own front door.
- 4.2 Tenants would be identified by Social Services as requiring “extra care” and would have their own care package, which would be designed to meet their individual needs and wishes. Nominated and separately employed care staff would provide this extra care.
- 4.3 Initially it is proposed that care would be provided 2 hours a day each for 10 people, within 2 Sheltered Housing schemes, Gore Grange and Winfrid House, with another 3 schemes being introduced in 2003/2004.
- 4.4 The care would be provided by a chosen care provider between 7am and 10pm.
- 4.5 The support element would continue to be provided by the warden service. The warden would also act as an advocate for the tenant ensuring the “care and support” was provided according to the package of care.
- 4.6 There would be no loss of accommodation for existing Sheltered Housing residents. However, in the future it may be necessary to identify specific accommodation for tenants requiring extra care.
- 4.7 To ease the problems of early discharge from hospital, New Forest District Council have also been asked to provide 2 units of accommodation at each scheme as intermediate care. Details of these proposals will be the subject of a separate report to Cabinet.
- 4.8 New Forest District Council Warden Services have also been asked to consider becoming domiciliary care providers. This would include a need to register with Social Services as a provider of these services. Additional resources would be required to provide the care levels indicated and agreed by Social Services. However, these additional costs would be met by Social Services with the exception of the costs of registration.

#### **5. FINANCIAL IMPLICATIONS**

- 5.1 There would be no additional costs to New Forest District Council. However, if, as suggested New Forest DC were to become a registered domiciliary care provider there would be a need to register. The cost of this registration would be £1,500 and this sum could be met from existing budget provision.
- 5.2 The costs of the proposed extra care service would be approximately £70,000 per annum. These costs would be fully funded by Hampshire County Council Social Services. The costs would be funded whether the extra care service was provided by an external domiciliary care provider or by NFDC employees providing the care.

## **6. ENVIRONMENTAL IMPLICATIONS**

6.1 There are no direct environmental implications arising from this report.

## **7. CRIME AND DISORDER IMPLICATIONS**

7.1 There are no direct crime and disorder implications arising from this report.

## **8. PORTFOLIO HOLDER'S COMMENTS**

8.1 The Housing Portfolio Holder welcomes the new approach to providing care to the elderly whilst allowing them to remain in their own homes to avoid the need for tenants to move into residential care.

## **8. RECOMMENDATIONS**

8.1 That extra care services be provided in partnership with Hampshire County Council Social Service initially in two New Forest sheltered housing schemes for 10 tenants but with further schemes developing in 2003/2004.

8.2 That New Forest District Council's warden service seeks registration as a domiciliary carer provider.

### **Further information:**

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### **Background Papers**

Building Capacity and Partnership in  
Care – Department of Health circular.  
ODPM guidance on housing  
strategies for older people – Quality  
and Choice for Older peoples  
Housing.

## CARE SURVEY

## GORE GRANGE

No of tenants receiving services	Service	Provider	Hours per week
6	Bathing	Private Company	3
1	Cleaner	Social Services	1
6	Cleaner	Private Company	6
4	Home Care	Social Services	32
1	Housework	Social Services	1 ½
3	Housework	Private Company	3
3	Shopping	Social Services	3

## WINFRID HOUSE

No of tenants receiving services	Service	Provider	Hours per week
4	Bathing	Social Services	16.5
7	Carer	Social Services	38.75
4	Cleaner	Private Company	6
1	Cleaner	Social Services	1
5	Day Centre	Social Services	7 days
1	Housework	Social Services	3
3	Laundry	Social Services	3
3	Shopper	Social Services	4

## WILSON COURT

No of tenants receiving services	Service	Provider	Hours per week
1	Home Care	Social Service	17.5
3	Housework	Private Company	3.5

## MANOR CLOSE

No of tenants receiving services	Service	Provider	Hours per week
2	Bathing	Private Company	1
2	Home Care	Social Services	31.5
5	Housework	Private Company	10

## ALBION ROAD

No of tenants receiving services	Service	Provider	Hours per week
1	Home Care	Social Services	17.5
2	Housework	Private Company	3
1	Food	Private Company	Every 2 weeks

**BARFIELDS COURT 1**

No of tenants receiving services	Service	Provider	Hours per week
9	Cleaner	Private Company	9
1	Help from Mencap	Private Company	2 pr week
2	Homecare	?	7 days + 1hr
1	Bathing	?	1
1	Shopping	?	1

**BARFIELDS COURT 2**

No of tenants receiving services	Service	Provider	Hours per week
5	Housework	Private Company	9.5
1	Shopping	Private Company	2
1	Shopping	Family	2
1	Home Care	Social Services	0.5

**CARLTON HOUSE**

No of tenants receiving services	Service	Provider	Hours per week
2	Home Care	Social Services	1.25
1	Home Care	Private Company	0.50
2	Housework	Private Company	4
2	Shopping	Private Company	2

**EWART COURT**

No of tenants receiving services	Service	Provider	Hours per week
5	Carer	Social Services	43
3	Sitting Service	Social Services	?
10	Cleaner	Private Company	10
4	Home Care	Social Services	31
1	Home Care	Private Company	14

**BRINTON LANE**

No of tenants receiving services	Service	Provider	Hours per week
1	Home Care	Social Services	3