

# Housing Learning & Improvement Network

The Health and Social Care Change Agent Team (CAT) was created by the DoH to improve discharge from hospital and associated arrangements. The Housing LIN, a section of the CAT, is devoted to housing-based models of care.



## Tenancy Issues Surviving Partners in Extra Care Housing

The development of tenancy agreements for couples in Extra-Care Housing. *(Based on the experience of an Extra-Care project in Southampton.)*

### **TENANCY ISSUES - SURVIVING PARTNERS IN EXTRA CARE**

#### **Southampton City Council**

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#### **Project:**

Extra care housing project, development of tenancy agreement

#### **Contributions:**

Housing LIN members and consultants respond to "What policies do Extra Care providers have to manage the situation of having a surviving partner/spouse, who does not need Extra Care, following the death of their partner/spouse?"

#### **Purpose**

To examine the issues which will influence the development of appropriate tenancy agreements for couples, in Extra Care housing developments.

#### **Aims and objectives**

To ensure that the rights and needs of surviving partners, who do not themselves need Extra-Care, are balanced with the responsibility of providing Extra Care for those in need of it and the requirements of the agencies funding such provision.

#### **Background**

This study has come about because of a situation experienced in Southampton where the City Council (housing and social services) are closely working in partnership with the Primary Care Trust to develop an Extra Care project, based in one of its traditional sheltered housing schemes, to provide an alternative option to residential care for very frail and vulnerable older people and to assist in the reduction of delayed transfers of care.

The vision of Extra Care as extending the choice for older people is one which all the agencies in Southampton aspire to. However the more acute situation of a reducing residential care sector, the pressures and priorities placed on social services and health to reduce delayed transfers of care, increase the number of care packages and the level of personal care to older people in their own homes and the recruitment and retention difficulties of carers generally in the City has significantly influenced the decision to develop an alternative to residential care which will prove financially beneficial to all, including the older person(s).

The project has a target to achieve 15 Extra Care flats in a block of 60 flats, 5 to wheelchair standard on the ground floor, and 10 others on the upper floors. There have been / are a number of challenges:

- waiting for flats to become vacant to adapt and bring into the project
- ensuring the Extra-Care flats are used by older people most in need of Extra Care
- ensuring the principles of 'value for money' and Best Value are met within the constraints of the funding arrangements with both social services and the Supporting People Grant
- issues relating to secure tenancies and the choice of existing and new tenants

The death of a tenant in one of the Extra Care flats presented a dilemma for the project when their partner, who themselves did not need Extra Care, was left occupying one of the few specialised units. The fear is that a situation could develop where most, if not all, of these specialised units could be occupied by surviving partners who did not need Extra Care.

The Housing LIN Discussion Forum was identified as the best way of asking other providers of Extra Care how they approach this type of situation and thus inform the policy approach to be made in Southampton.

The question was posted on the Discussion Forum on 13<sup>th</sup> April 2004 – “What policies do Extra-Care providers have to manage the situation of having a surviving partner/spouse, who does not need Extra Care, following the death of their partner/spouse?”

The response was overwhelming and to date there have been over 30 replies.

**A significant proportion referred to the rights of the tenant with a secure/assured tenancy**

“The remaining partner has a tenancy and has the right to remain in their home in the extra care scheme.

Extra care is about broadening choice and options for older people, based on a quality of life philosophy, not just an alternative to residential care. As such it can be an excellent choice to enable couples to stay together, where one may have needed residential care but the other is active. There are benefits to the care commissioner as well as the older people themselves, since the active member of the couple is able to help with the care for their partner. I have interviewed a number of couples in extra care schemes in

this situation, including a couple I remember very well at a scheme in Leeds. For both of them extra care was a wonderful option, for the reasons given above.

We need to ensure that lettings policies do not just duplicate residential care and couples are a key target audience for extra care schemes. A significant number of the bids for Department of Health extra care funding had a proportion of 2 bedroom units in their designs, in recognition of the potential need and demand from couples.”

**Peter Fletcher Associates**

“As they have a tenancy agreement with the Housing Department we never ask them to leave after a death. Generally both partners need some form of support especially after bereavement. ....”

**London Borough of Croydon**

**A number of replies referred to the need to ‘adjusting the balance of care needs within a scheme**

“They remain in the tenancy until such time as they need care themselves or they voluntarily leave the scheme. Most of our extra care schemes have people who need little or no care in them, and the spouse will fall into that category.”

**Warrington Borough Council**

“The policy we will apply in Durham is that the surviving spouse will be allowed to stay if that is his/her wish, but will be required to pay the required amount for care and support.”

**Durham County Council**

The response from Sheffield was from a commissioner rather than a provider and spoke about their expectations – “I would expect the situation to be overseen and managed by the scheme panel of representatives from SSD, health, housing and the providers and this would be done by adjusting the balance of care needs in the scheme when the next vacancy arose. For example if a person with high care needs was the one who died we would replace that person with another who had high care needs when the next vacancy came along. There might be a period of time when the care provision and level of need would be imbalanced but in my view we would live with it .... and look to readjust it at the next possible opportunity.”

**Sheffield City Council**

### **A number of replies said they had similar concerns**

The response from Norfolk said that this was a real problem for them, and cited 2 examples.

One was about a surviving daughter with a learning disability who was reluctant to move to another property. The other was of a spouse left living in accommodation which had been specifically designed for people in wheelchairs who has refused to move to another property within the scheme.

Additionally they have concerns about the funding implications – “we are converting at the moment from sheltered accommodation to Very Sheltered accommodation. Some of our tenants are not requiring the 4 hours of care hours social services have now said they will only fund those assessed by them as needing it. This has huge implication on staffing.”

**Norfolk County Council**

### **LEARNING POINTS**

The discussion prompted by the question was hugely informative and identified the diverse views and approaches of providers and commissioners.

An analysis of the views combined with the local situation and circumstances has identified a number of key issues needing to be considered when developing appropriate tenancy agreements for Extra Care schemes:

- What is the purpose of the Extra Care scheme? Is it to form part of the approach to extend the range of choice for older people, to provide a home for life and as an opportunity to provide a real alternative to residential care? Or, is it more as an alternative to residential care?
- Is the scheme a new build or a converted/adapted existing scheme with secure tenants in-situ? If it is a conversion what choice is available to the existing secure tenants? Are all the units designated as Extra Care? If not, how has the funding been secured and are there any restrictions which may impact upon staffing issues?
- Is the number of Extra Care units limited and have they been especially designed or modified to meet the required specification with the funding particularly targeted to those properties alone?

The role of Extra Care in the promotion of continued independence is now well documented. However, there are many challenges facing providers and commissioners to implement the ‘home for life’ agenda. There is a climate of constrained budgets which are focussed on meeting acute needs, some areas have very limited land available and Extra Care

developers experience direct competition with other developers and the conversion of existing provision is not as straight forward as it would first appear.

In conclusion, the discussion has been very useful and the responses will help inform the approach that Southampton will take in developing appropriate tenancy agreements for Extra Care provision.

In an ideal world an Extra Care scheme would be one where all the flats meet the same high specification and the Extra Care is focussed on individuals rather than the tenants of particular flats and as such this dilemma would not have been experienced!

Prepared for the Housing LIN by **Heather Christiansen**

## Other Housing LIN publications available in this format:

Case study no.1: **Extra Care Strategic Developments in North Yorkshire** *A snapshot view of partnership-based strategic planning for extra care in North Yorkshire, highlighting the variety of issues that need consideration in a large and mostly rural area. One recent scheme and one in progress are described.(01.09.03)*

Case study no.2: **Extra Care Strategic Developments in East Sussex** *Some of the key issues involved in partnership-based strategic planning for extra care in East Sussex. A small conversion from sheltered housing and a larger new scheme catering for a range of use. Different management models are briefly discussed.(01.09.03)*

Case study no.3: **'Least-use' Assistive Technology in Dementia Extra Care** *Rowan Court, Eastleigh, Hampshire - An example of provision of extra care facility for older people with dementia, based on a philosophy of promoting and maximising independence.(02.02.04)*

The Housing LIN welcomes contributions on a range of issues pertinent to Extra Care housing. If there is a subject that you feel should be addressed, please contact us.

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