

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.



Extra Care Strategic Developments in East Sussex

Study of some of the key issues involved in partnership-based strategic planning for extra care in East Sussex. Two recent schemes are described: a small conversion from sheltered housing and a larger, new scheme catering for a range of needs. Different management models are briefly discussed.

STRATEGIC PLANNING IN PARTNERSHIP FOR EXTRA-CARE HOUSING

EAST SUSSEX EXTRA CARE HOUSING STRATEGY 2003-8

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Key partners in the Strategic Forum/Commissioning Body: Heads of Housing, Chief Executives of PCT's, Director and Assistant Director of Social Services

Purpose of the Strategy: The East Sussex Strategic Forum/Commissioning Body, a senior level group representing all agencies, commissioned an extra care housing strategy in January 2002 from the County Extra Care Housing Group. This drew on a report jointly commissioned from Peter Fletcher Associates in May 2000 and published in November 2000. The decision to develop an extra care housing strategy demonstrated through pilot projects was a key recommendation of this report.

Local service context: East Sussex has the highest proportion of people over 75 years in England and Wales. The numbers of those aged 85+ are projected to increase by 29% by 2011. One fifth of all households are pensioners living alone. The largely rural nature of the County presents difficulties with service delivery, access and costs. Poor cross sector relationships and a low resource/service base form a backdrop to the extra care strategy. A Joint Audit Commission/SSI Review in the Autumn of 2001 found that Social Services had come late to a Commissioning role and to implementing Care Management for older people. Over-reliance on residential homes combines with an historical legacy of inappropriate or premature institutional placements, low levels of home-based care, low levels of supported housing and poor hospital discharge practice. The County is working hard to change these patterns and to prioritise and fundamentally reshape older people's services.

Key strategic issues: Health, Housing and Social Services to “establish a framework for the development of a unified county strategy for the place of housing services for older people within the whole service system which would meet the changing needs and aspirations of older people”.(Peter Fletcher report)

Aims and objectives: To achieve a minimum 10% shift away from residential care provision towards extra care housing (Fletcher recommendation). Further work to analyse demand for extra care housing.

Development of cross-boundary schemes for rural provision and for people with dementia.

Refurbishment of existing sheltered housing stock.

Specific outcomes:

Extra care pilot projects: Hastings - The Marlborough (complete)
Eastbourne - Gwent Court (complete)
Wealden - Polegate (in process)
Potential developments in Rother

Whole system approaches:

A partnership approach at both a strategic and operational level is being taken to the development of extra care housing across the county. Extra care is being considered increasingly as one of a range of options in the ongoing commissioning and development of older people’s services. Commissioning is taking place with key partners on a locality basis (PCT based). There are good links in place with the Supporting People team. The ongoing development of extra care housing is being overseen by key multi-agency fora across the county in line with the development plan and the action plan contained in the extra care housing strategy.

Resources:

Capital costs for the Marlborough came from the following sources:

- * Single regeneration budget (administered through the Hastings regeneration partnership)
- * Carisbrooke Medical Centres (for the health centre)
- * SHUTE (Sussex Housing Trust for the Elderly)
- * Social Housing Grant (part local authority, part Housing Corp.)
- * Hyde HA
- * CDHA (Chichester Diocesan HA)

Capital costs for Gwent Court conversion came from Eastbourne Borough Council Housing Investment Programme - £800,000

Challenges:

- Ways of involving older people more fully into the rolling out of the extra care strategy.
- Harnessing political support for an extra care project developed jointly by agencies at county and district level with widely differing cultures, structures and basis in law.
- Convincing the respective players about how extra care housing fits the agendas of each different agency with relevance to targets in housing and in health.
- Reconciling widely varying departmental practices - eg. in allocations, weighing social services definitions of 'need' against housing need, local connections, etc.
- A dearth of national RSLs in the county and the lack of RSLs with the requisite experience to combine housing management with care management.
- Providing chargeable social care and non-chargeable intermediate care in the same setting.

Learning points:

Time needs to be allocated for 'visioning' and thinking through before you hit the problems.

Clarity is needed between strategic and operational roles and tasks need to be clearly allocated. Extra care schemes should be developed on a project management basis and should have a dedicated project manager or project management roles should be invested in each of the participating agencies. The project management process needs resourcing.

A shared understanding of the concepts, policies and terminologies of the different agencies has to be reached through a learning process and needs to be allowed for.

Extra care has the potential to serve as a resource base for rural areas in providing a hub for service delivery for a significant catchment area.

Partnership working asks for each agency to cede ground and control, not necessarily in favour of the other but in respect of setting up something new. The joint planning process is in itself educative for those involved from different agencies but there may need to be extra training input for council members at county and district level to fully grasp the concepts involved.

Where outdated sheltered housing is refurbished into extra care accommodation jointly by social services and housing departments, a question arises as whether existing housing management models are adequate to an intensive care setting. How does a combination of a sheltered housing manager answerable to the housing department alongside agency care workers under contract to social services compare with a dedicated scheme manager post where management and care responsibilities are integrated and accountable to one agency? Evaluation of whether the latter provides a markedly more seamless and flexible system for service users would be helpful. Skill levels and pay parity issues between and within the separate agencies may produce some anomalies. The practice examples described below, a small and a large extra care scheme, demonstrate the two management models.

First Specific Practice example:

Gwent Court

This is an attractive refurbishment of an existing sheltered scheme owned by Eastbourne Borough Council. 28 bed sits were transformed to 13 one bedroom extra care flats and a guest flat and Gwent Court was opened in early 2003. There is a large common room opening out onto the garden. Some of the previous tenants, decanted to other accommodation temporarily, have returned to the refurbished building. The scheme is managed by a non-residential Court Manager, employed by the housing department on a standard housing management pay scale, and the department also employs a housekeeper/cleaner. Tenants have access to a local handy person service for tenants of Council retirement housing. Apart from some tenant self-funding, Supporting People grant and Social Services finance the care and support services, which are provided under a social services contract to a private agency, Care U.K. Social services agree individual care plans and monitor the contract. Meals, where wanted, will be brought in by the WRVS from a neighbouring scheme, or tenants can go there to eat. An early learning exercise in partnership between the County and the Borough, the scheme represents a compromise on the social services department's preferred option for a single contract integrating care and management. The scheme will be monitored and evaluated through Supporting People after a period still under discussion. Social services will also seek user feedback on this scheme after a short period.

Second Specific Practice example:

The Marlborough

A new building in St.Leonards-on-Sea, Hastings, this 40 unit extra care scheme opened in June 2003. It was developed by the social services department, the housing department and the PCT with the Hyde Housing Association. It caters for a mix of care levels. This mix was based on an initial caution with respect to ensuring a balanced community. The scheme is owned and run by the Hyde Housing Association through a scheme manager post which combines housing management with management of care and support and, although starting with agency care workers, will eventually be directly staffed. The building has a large cafeteria and kitchen, two communal lounges and a roof terrace, a launderette, a computer room, a library, a hair dressing salon and an assisted bathing facility. The cafeteria caters for tenants and will also be available on a controlled basis to external users. The ground floor houses a G.P. surgery and a pharmacy. Social services will seek user feedback on this scheme after a short period.

see illustrations on page 5



The Marlborough: cafeteria



The Marlborough: lounge

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Other Housing LIN publications available in this format:

Factsheet no.1: Extra Care Housing - What is it? *This factsheet gives essential basic information, explains the various forms extra care housing takes, and describes key ingredients and central principles (28.07.2003)*

Factsheet no.2: Commissioning and Funding Extra Care Housing *Summary of essential facts about commissioning extra care and other housing based solutions for care. Most important facts about funding, what is involved, who is involved, who has to be involved and how long projects can take.(28.07.2003)*

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)*

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