

Adult Care and Well Being Overview and Scrutiny Panel

Wednesday, 24 June 2015, County Hall, Worcester - 10.00 am

		Minutes
Present:		Mr T A L Wells (Chairman), Mr C J Bloore, Mr A Fry, Mr P Grove, Mrs A T Hingley, Mr C G Holt and Mr J W Parish
Also attended:		Mrs S L Blagg, Cabinet Member for Adult Social Care Jo Ringshall, Healthwatch Worcestershire Suzanne O'Leary (Democratic Governance and Scrutiny Manager), Emma James (Overview and Scrutiny Officer) and Elaine Carolan (Lead Commissioner)
Available Papers		The members had before them: A. The Agenda papers (previously circulated); B. Presentation handouts for Item 5 (circulated at the Meeting) C. The Minutes of the Meeting held on 12 May 2015 (previously circulated). (Copies of documents A and B will be attached to the signed Minutes).
191	Apologies and Welcome	The Chairman welcomed everyone to the meeting, including Jo Ringshall, from Healthwatch Worcestershire, who was invited to join the table.
192	Declarations of Interest	None.
193	Public Participation	None.
194	Confirmation of the Minutes of the Previous Meeting	The Minutes of the meeting on 12 May 2015 were confirmed as a correct record and signed by the Chairman.
195	Review of Supported	The Council's Integrated Commissioning Unit had been invited to provide an update on projects providing housing with support (Supported Living / Extra Care),

Living and Extra Care Projects

which was part of the Panel's 2015 work programme.

Elaine Carolan, Lead Commissioner for services for people with Learning Disabilities and Autism, Carers, and Housing provided further information through a presentation, including the aims of housing with support, the target audience, Worcestershire's provision, delivery approach, the costs and key facts.

Supported living and extra care developments provided accommodation and support to adults with a physical disability, learning disability, mental health challenge, dementia and individuals experiencing increasing frailty. The aim was to support individuals to continue to live independently, whilst having access to 24 hour wrap around care if needed. Whilst models of delivery were similar for both types of provision, extra care typically catered for older people, aged 50+, whereas supported living typically catered for adults of varying ages with physical or learning disabilities.

Some further information was circulated: Worcestershire County Council's leaflet 'Extra Care Housing in Worcestershire' provided a useful summary, which panel members were encouraged to circulate to constituents.

'Worcestershire's Housing and Support Commissioning Plan 2014/15 to 2016/17' set out the Council's commissioning intentions.

The Worcestershire Extra Care Housing Strategy 2012-2026 had also been made available via the agenda papers, which set out what needed to be achieved district by district.

The aims of housing with support were to enable people to achieve:

- **Independence** – live their life how they wanted to live it in their own apartment
- **Control** – come and go as they pleased and have full control over finances
- **Choice** – rent, buy or part own their home, from the wide range available in Worcestershire
- **Privacy** – live in their own home with their own front door
- **Support** – with help always on hand for everyday tasks
- **Flexibility** – support tailored to suit, that could be changed with needs
- **Stability** – people would not have to move if their

needs increased

- **Sense of community** – able to socialize with other tenants
- **Security** – an important benefit, providing buzzer entry and a locked front door.

The Council only worked with providers whose housing models gave the right balance of care and gave access to people's life-long needs, which meant that they would not have to move out should their care needs increase – this was an important difference between extra care and sheltered housing.

People with a wide range of needs may be eligible for housing with support and the configuration of one, two and three-bed apartments enabled couples, families and friends to stay together. For example, someone in their 50s with learning disabilities would be able to share a two bedroom apartment with their elderly parents, and remain at the same setting, or perhaps move to a one bedroom apartment within the same setting, when their parents passed away, with access to appropriate support.

Supported living played an important part in preventing the need for people with complex learning disabilities having to be placed out of area, which was a key outcome of the Winterbourne Review. Worcestershire now had very few such people living away and one example of provision was a model being developed with provision for 8, catering for very complex individuals, whose care required two/three carers. The model would reduce weekly care costs from around £4,500 to around £2,500 and bring these individuals closer to their families, which enabled family members to offer the support they wanted to.

Panel members were supplied with three case studies of people who had been able to move out of residential care into extra care or supported living settings.

Greater capacity of supported living provision was particularly important, to cater for greatly increasing numbers of younger adults coming through with challenging needs.

Research had indicated that older people moving into extra care, compared with residential care, would live on average three times longer. It was absolutely clear that people moving into housing with support became more independent, gained confidence, and that the social opportunities lifted their mood – all of which led to a

reduction in their care needs.

The challenge of extra care provision for older people was considerable, particularly for dementia. The Council needed to promote the option of housing with support to those who may be interested and encourage conversations early on, rather than at the crisis point where people may need residential care, which was more costly, in many cases avoidable and could make a massive difference to someone's life. Encouraging people to plan ahead could also avoid sequences of events where an individual ended up in hospital, with no suitable environment to be discharged into, which was a big part of delayed discharges.

Worcestershire attracted interest from providers wanting to build housing with support.

There was also a lot of work to be done with the district councils to highlight the need for appropriate accommodation.

Current provision and plans

For extra care housing, there were 5 existing schemes giving 50 additional units for the Council's clients – Redditch (2), Bromsgrove, Kidderminster and Evesham

New schemes would provide 250 additional units, with 3 schemes opened (Evesham, Worcester, Malvern), 3 schemes in development (Worcester, Redditch and Kidderminster) and 2 potential schemes (Pershore and Broadway).

Upgrading of existing sheltered housing would provide 100 additional units.

A dementia care home which had been remodelled into an extra care facility, was viewed as a national leader.

For supported living housing, there were development plans for 200-240 units for Council clients, which included developments of self-contained flats, shared housing and other options, for example where care needs necessitated closer staff presence.

Self-contained flats would be a mix of new build and conversion of existing buildings. Shared housing was an option which worked financially, since often people moving out of residential care would be able to claim housing benefit, which contributed to reducing overall costs to the Council. There were other options the

Council wished to grow, such as the shared lives scheme, which had similarities to fostering, but for adults.

The Directorate was actively working with around 200 service users currently in residential care, who may be suitable to move to supported living, as well as younger people coming through the transitional period from children to adult services.

Delivery approach

For extra care, new build projects were delivered by housing association partners. Upgrading of sheltered housing was delivered through capital funding tenders.

Supported living projects were delivered through capital funding tenders, with external partners developing self-contained flats and some remodelling of shared housing.

A lot of work had been devoted to developing fit for purpose models, and the majority of providers were very forward thinking. The Council was very careful about where it invested, and the Cabinet Member advised that while there had been some criticism that investment of the allocated capital fund had been slow, she was keen to ensure that funds were used for projects which would have maximum take-up and long-term use – this had required taking time to collect relevant data. Each case needed to be financially viable and planning restrictions had also impacted, however developments were now being tailored to demand and it was expected that by next year, half of the £5,000,000 fund would have been spent.

Costs – and the bottom line

The three costs in housing with support were housing (cost of renting, buying or shared ownership), service charges (maintenance, utilities costs and communal facilities) and care and support costs (for background support and individual care needs).

It was important that people were aware of the service charges and what they included, which varied considerably; a five star model with cinema etc. would cost more. Typically private facilities were more expensive.

Rent for a one bed flat in an extra care scheme typically started from approximately £90 per week, with weekly service charges ranging from approximately £40 to £100.

Some people may be eligible for help with meeting some of the costs of living in extra care housing. Depending on the individual's finances, they may qualify for housing benefit towards meeting the cost of renting an apartment and its service charge.

Often people liked the fact that should the family home be sold, they retained an investment through purchase of an extra care or supported living apartment, and may also release equity.

Main discussion points

- Several panel members expressed very positive views and experiences of extra care/supported living provision, and praised the volume of activities available and the boost to morale of residents
- Panel members felt that take-up of housing with support would increase with awareness, and were encouraged to spread the message
- Ownership and sale of housing with support units was outlined for the Panel, which would vary across providers, and was something which was important to make clear at the outset to potential clients; some providers would buy back the unit (possibly with a guaranteed rate of return). Properties could not be rented out and there were restrictions on the age of people who could live there
- A panel member involved in support for people with learning disabilities pointed out that money was a big issue for this sector, and also that within a supported living set-up, it was important that staff mentality moved towards more of a support, rather than a care role
- There was flexibility around whether an individual moved into an extra care or supported living set-up, depending on their needs
- It was possible that demand would outstrip current supply, as there was a 2-3 year cycle for developments
- So far, benefit changes had not impacted on the financial viability of housing with support, as housing benefit had remained unchanged, although this would be monitored. The Directorate was keen to be clear with people about the financial and other implications involved
- The Commissioner worked closely with district planning departments and had met them to explain

the overall aims and benefits of housing with support. Each district had signed up to Worcestershire's Extra Care Housing Strategy 2012-26

- Planning permission remained an issue, though it worked very well in some districts, particularly Wyre Forest. Green belt land could be an issue, although one which could be overcome
- It was also important to work with the providers on their applications and building design, to try and preempt any planning issues from the outset
- The Lead Commissioner pointed out that extra care could provide a more long-term housing option, compared to costly home adaptations, especially if care needs increased to the point where the individual could no longer remain in their home
- It was confirmed that as part of the local plan, districts had targets for housing with support, against which progress was regularly reviewed with the commissioner. Wychavon had added pressures, as the district with the greatest number of older people, followed by Malvern – therefore a location between the two would be ideal for an extra care facility
- Use of technology meant that even complex needs such as dementia could be facilitated within an extra care setting, and it was reiterated that the Council only worked with providers whose model gave life-long care provision
- The University of Worcester had a training facility for health and social care staff, to demonstrate use of technology within a home environment
- The Website 'Your Life, Your Choice' included information about devices such as personal trackers, although it was important to consider someone's overall care needs, rather than one-off equipment purchases.

The Panel expressed support for extra care and supported living, as something which local councils should embrace – the Lead Commissioner and Cabinet member encouraged panel members to feed back this message to their district areas.

The Chairman thanked everyone for their attendance.

The meeting ended at 11.30 am

Chairman