

**REPORT TO:** Executive Board

**DATE:** 24 September 2009

**REPORTING OFFICER:** Strategic Director Health and Community

**SUBJECT:** Extra Care Housing - Development Options and Resourcing

**WARD(S)** Borough wide.

## **1.0 PURPOSE OF REPORT**

1.1 To inform the Board of progress to date in delivering new schemes as part of the Extra Care Commissioning Strategy and to seek delegated authority in the use of housing capital resources to support the development of future schemes as necessary.

## **2.0 RECOMMENDED: That the Board:**

**(1) agrees to reserve the uncommitted capital in the 2009/10 housing programme to support the development of extra care housing by Registered Social Landlords;**

**(2) acknowledges that due to the development timescales involved, much of the expenditure will not be committed during 2009/10, and any uncommitted capital be carried forward to 2010/11;**

**(3) grant delegated authority to the Strategic Director Health and Community, in consultation with the Operational Director Financial Services and the Executive Board Member for Community, to determine appropriate levels of financial support on a scheme by scheme basis.**

## **3.0 SUPPORTING INFORMATION**

3.1 In February 2008 'Lifetime Homes, Lifetime Neighbourhoods: A National Strategy for Housing in an Ageing Society' set out the Government's vision for housing within an ageing society, describing a range of housing provision that will be necessary to accommodate future growth, including extra care housing. Nationally, by 2026 older people will account for 48% of forecast household growth resulting in 2.4 million extra older person households than currently.

3.2 In Halton the impact over the next ten years is a dramatic rise in the over 60's (27%) and over 75's (19%). This, combined with older people's desire to live independently for longer, means that Halton has a significant shortfall in current and projected extra care provision.

3.3 In comparing Halton with a sample of local authorities in the North West, Halton has a similar number of units in proportion to the older population as Blackpool, but a significantly lower number than Warrington, Blackburn and St Helens.

Authority	Extra Care Units	Population (65+)	Population (all)	% of people 65+	% of all people
Warrington	475	29,700	193,000	1.60%	0.25%
Blackpool	59	27,400	145,000	0.22%	0.04%
Blackburn	220	18,000	142,000	1.22%	0.15%
St Helens	318	29,300	177,000	1.09%	0.18%
<b>Halton</b>	40	16,500	118,900	0.24%	<b>0.03%</b>

3.4 There is currently only one 40 unit extra care scheme in the Borough and the 'Commissioning Strategy for Extra Care – May 2008', produced on behalf of the Council by Tribal Consultants, identifies an immediate need for 137 additional units of extra care housing (including 11 units for Adults with Learning Difficulties) and a further 59 units by 2017 (including another 11 units for ALD), a total need for 196 units.

3.5 Development to meet these needs will involve partnership working with Registered Social landlord (RSLs) and the PCT but, as a first step, potential sites to accommodate these developments have to be identified (notwithstanding that some provision may be met by remodelling existing sheltered schemes).

3.6 In recent years Halton has faced some difficulty identifying sites suitable for this type of scheme but as a result of a piece of work recently undertaken, a number of sites have been identified which represent possibilities for development. These include:

- Boardwalk, Widnes - which is the former concrete works;
- Beechwood, Runcorn - land owned by English Partnerships;
- Hargreaves House/Court, Widnes – remodelling the existing scheme;
- Madeline McKenna House, Widnes – remodelling the existing residential care home;
- Castlefields, Runcorn – a number of sites are potentially available in and around the local Centre.

Other potential sites are being considered in the medium to longer term but the above offer the best options at this current time.

3.7 All extra care housing developments will be reliant on financial support from the Homes and Communities Agency (HCA) and a number of previous bids to both the Dept of Health and the Housing Corporation (HCAs predecessor) failed due to high unit grant requirements. HCA grant rates reflect average unit build costs, but with extra care there is a higher than normal level of communal space provided which makes it difficult to achieve a viable cost model. This is normally overcome

through additional subsidy in the form of either land provided at nil or low cost by the LA, or financial support from LAs or PCTs.

- 3.8 Financial support from the Council would improve the competitiveness of any funding bids as this reduces the unit grant cost to the HCA, and allows the HCA to maximise the number of dwellings delivered within the available grant. This is an important consideration for them given the Government's housing growth agenda.
- 3.9 At a time when Castlefields continues to benefit from significant HCA investment, securing a high level of additional resources in to the Borough for extra care housing will be difficult, and anything the Council can do to make RSL bids more competitive will be helpful.
- 3.10 Due to this year's unexpectedly large capital settlement, there is currently £1.329m uncommitted in the housing capital programme. This offers an opportunity (which may not be repeated as pressure mounts to curb public spending) to directly support the development of extra care housing, and the Board is asked to agree that the bulk of this sum of uncommitted capital be reserved for this purpose, and to acknowledge that due to the long lead in time for such developments, much of the expenditure will not be committed until 2010/11.
- 3.11 It is further proposed that delegated authority be granted to the Strategic Director Health and Community, in consultation with the Operational Director Financial Services and the Executive Board Member for Community, to determine appropriate levels of financial support on a scheme by scheme basis.

#### **4.0 POLICY IMPLICATIONS**

- 4.1 The development of extra care housing to meet the demographic change facing the Borough features as a high priority in both the Housing and Supporting People Strategies, and the proposals in this report will help to deliver this policy initiative.

#### **5.0 OTHER FINANCIAL IMPLICATIONS**

- 5.1 Revenue costs will be funded through a range of funding streams including the Council's Community Care budget, Supporting People budget, Housing Benefits, and through income from services users.

#### **6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

##### **6.1 Children and Young People in Halton**

None identified.

##### **6.2 Employment, Learning and Skills in Halton**

None identified.

### 6.3 **A Healthy Halton**

Extra Care Services provide a combination of health, care and support which will improve the health and well being of older people through:

- The prevention or minimisation of hospital admissions
- Enabling people to continue to live independently obviating the need to move to residential care
- Providing a medication monitoring services
- Adoption of falls prevention policy and practice
- Provision of support and care with shopping, cooking and catering facilities to enable residents to access healthy eating options
- Offering healthy living options including exercise, gardening, leisure activities
- Provision of flexible personal care to enable continuation of independent living
- Continued independence and activity as a means of maintaining mobility and daily functions (Extra-care residents improve more than people in traditional forms of care: they show an average mobility improvement of more than 35%; a 20% improvement in daily living functions; a 10% increase in sensory ability; and a 25% reduction in medication use.)
- Availability of a responsive on site team of carers to address care needs immediately preventing escalation.

### 6.4 **A Safer Halton**

Extra care services support the Councils objective to achieve a safer Halton by:

- Reducing anxiety through the reassurance provided by having people on site and available should the need arise.
- Adopting Health and Safety policy and procedures and physical design of the buildings to minimise risks to occupants
- Making links with the wider community to provide connections with the wider community and to provide opportunities for people living in the scheme to contribute
- Reducing social isolation through involvement in social events, clubs and activities to maximise opportunities for socialising and companionship

### 6.5 **Halton's Urban Renewal**

The provision of extra care housing improves the quality and range of housing options available to meet the needs of Halton's aging population.

## 7.0 **RISK ANALYSIS**

7.1 The needs highlighted in the Commissioning Strategy are likely to remain unmet unless future bids to the HCA are successful, the likely impact of this being increased demand and increased costs for Social Care and Health Care. If future extra care housing bids are to be successful, the unit cost will have to be reduced. This can only be achieved through the provision of a capital subsidy.

**8.0 EQUALITY AND DIVERSITY ISSUES**

8.1 None.

**9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

None