



June 2012

POLICY BRIEFING

Extra Care Housing: Sample analysis of the care hours ratio distribution across the UK

Background

This analysis for the Housing Learning and Improvement Network (LIN) was undertaken by Bristol City Council's (BCC) Health and Social Care Department (HSC) as part of a wider review of its Extra Care Housing Provision (ECH). It provides a useful overview of the commissioned care hours' ratio across a number of commissioned ECH schemes in England and may be helpful in assessing what ratio works best in your locality.

Introduction

Bristol has been providing ECH to its residents since 1999 and it currently has on offer 11 ECH schemes consisting of 567 one or two bedroom units (flats) available for social rent with 33 for shared ownership. In order to inform Bristol's vision for the future, commissioners are reviewing the care and support ratios operating across its schemes.

Bristol's initial vision was to have tenants with a mix of support needs and some with no needs to ensure that schemes were sustainable and vibrant communities where some residents were able to offer support to others. It was also intended that schemes would be open and welcoming to the local community. More recently, it has been felt that Bristol's schemes could offer an alternative to residential care for more people if they could increase the number of people they take with higher levels of care needs. Commissioners have considered moving to a 40/40/20 ratio with 40% high care needs (10-20 hrs per week), 40% medium care needs (5-10 hrs per week) and 20% of the tenants with low care needs (0-5 hrs per week). However, at present, data available to Bristol suggests that provision is around 23% high care needs, 12% medium, 35% low and 30% with no care needs (just community alarm present in all schemes). In order to inform Bristol's local review, the Housing LIN was approached for help in determining the ratios used by other local authorities.

Findings

Following the call for information to other local authorities through the Housing LIN, approximately 80 responses were received, some of them accompanied by useful explanatory comments regarding the history of operating models in some local authorities, their rationale behind their local ratios, their difficulties in adhering to particular ratios. They have kindly provided helpful information for Bristol. A quick review of the responses highlights the following:

- The first and most interesting find resulting from the data analysis was that a significant majority of the local authorities regard ECH as “a good value for money alternative for residential accommodation” and they had a significant provision of ECH as part of a range of housing with care options for older people in their localities
- In addition, a vast majority of LAs reported that they were considering or were in the process of expanding their ECH provision. In some cases, LAs were in the process of doubling their existing stock of ECH. Interestingly, private providers of ECH regarded it as a future-proof model of providing care and accommodation and were looking to expand their stock too. All respondents showed an interest in the findings of this call for information and expressed a wish to access the findings.
- The third finding of relevance to Bristol was that the future direction is that many LAs appeared to operate schemes of similar sizes to Bristol’s current schemes i.e. ranging from 50 – 60 units of single or double bedroom units. The exercise did not explore in detail the rationale behind the size of these schemes but it is believed that the sizes were dictated by local land and finance availability as well as the need to achieve a financially sustainable formula.
- In terms of the actual care and support ratios used by the LAs, the most interesting finding was that there was not a single ratio adopted by authorities as the optimum solution. Indeed, the exercise revealed over a dozen different formulae and ratios in operation across the country.
- Amidst this variety of ratios adopted by LAs, we encountered 50/50, 33/33/33, 40/40/20, 80/20, 25/25/25/25, 20/60/20. Of these, a couple of ratio options stood out; namely, the 33/33/33 (12 LAs) and the 40/40/20 (9 LAs) ratio. The explanation given by the respondents using these options reflected a similar vision to Bristol’s - the desire to ensure well balanced, sustainable and mutually supportive schemes.
- Interestingly, even where the care and support ratio appeared to be similar between LAs, they varied considerably between the number of hours provided under each bracket. As such, the lower care bracket in one authority corresponded to a medium care bracket in another authority. Similarly, a medium care bracket in some authorities corresponded to a high care bracket in other authorities.
- Also, little information was gleaned on the self-funder market although this was recognised as a business driver as ECH begins to reflect local tenure patterns and the swell of older homeowners looking for an equity stake in their accommodation in later life.
- Finally, all respondents who were prepared to expand on the provision of care ratios in their authorities intimated that whilst for the purpose of our analysis, they were quoting us the official figure, in reality the allocation of service users to their schemes took place based on a far more flexible approach with the boundaries between the various brackets being often blurred.

Summary

Whilst most of the LAs considered expanding their provision, very few of them operated a standard care ratio or were considering adhering to one. Furthermore, none of them chose their ratio based on a scientific or technical formula, rather their ratios were chosen based on their local experience, word of mouth and or simple estimates. Questions need to be asked about whether the sector would benefit from greater standardisation of care or remain flexible to take account of a more flexible delivery of care that is tailored to meet the needs and aspirations of ECH residents in a personalised way.

Their recommendation and one supported by this paper is that rather than seeking to apply a formula adopted by some or other LAs, Bristol could choose its own local way of operating its ECH based on local social care, health and housing data and adapt to local market drivers and circumstances to respond to evidence of what works on the ground. We will be working on this in the coming months and provide feedback to the Housing LIN as part of its on-going look into capital and revenue funding in ECH and the forthcoming refresh of its Technical Brief No1, Care in Extra Care Housing, later this year.

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About the Housing LIN

For further information about the Housing LIN and to access its comprehensive list of on-line resources on housing with care for older people and people with a long term condition, visit www.housinglin.org.uk

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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