



Kent Adult Accommodation Strategy: Evidence Base

Interpretation of the report to Kent County Council, Social Care, Health and Wellbeing by the Health and Housing Partnership

2014

The Accommodation Strategy and Evidence Base was developed when the County Council structure included the directorate Families and Social Care (FSC). From 1 April 2014, the County Council realigned its directorates introducing Social Care, Health and Wellbeing. Families and Social Care are part of this directorate

EVIDENCE BASE PRODUCED IN NOVEMBER 2013 BY



1. Introduction

Context

1. Kent County Council (KCC) Families and Social Care (FSC) has a statutory duty to financially support vulnerable adults who meet the Council's eligibility criteria.
2. The care market is a growing area in Kent and over recent years has seen a consistent stream of planning applications for new care homes, business changes in existing homes and re-modelling or new build housing schemes for all vulnerable groups.
3. In recent years, KCC FSC has been led by the market on funding. KCC FSC needs to develop a clear strategic direction on care funding in order to have clarity and control on its revenue finance and to provide Market Position Statements on how and what services will be commissioned in future years. This can only be done with clear evidence and this report analyses the data available to provide a needs assessment for vulnerable people in Kent.
4. KCC is not a strategic housing authority. This role is undertaken by the 12 district and borough councils in Kent and therefore any reference to housing growth for vulnerable people has been fully discussed and agreed with them. Housing with care and care homes attract people with statutory needs and where the model of care is not in line with KCC FSC's strategic direction, voids occur or people are brought in from outside of the County. This puts additional pressure on all statutory agencies in Kent.
5. This report is to support Phase One of the Accommodation Strategy and is the needs analysis. The Strategy that sits above this document includes the key strategic messages, definitions, strategic intent and direction and conclusions. The data from this evidence base will be used as a tool to commence dialogue between all relevant partners and produce an agreed set of local district data, a District Profile. The District Profiles will be in two parts, a contextual element to set the scene at local level by district, a comprehensive narrative about local provision and gap analysis. The second element of the District Profile is the data set, forecasting data for each of the adult social care clients groups to 2021 and longer term 2031.
6. Phases Two and Three will involve the 'how' part of the strategy, where project areas are defined, sequenced and prioritised and delivery will include a range of partners.

Objectives

7. The purpose of this study is to develop evidence to support the Kent Adult Accommodation Strategy and the Physical and Sensory Disability Protocol and help to shape the approach to the provision of housing and care homes within Kent. Specifically, the report:
 - Estimates the *need* for accommodation for people with physical disabilities, sensory disabilities, learning difficulties, autism and people who use mental health services within Kent.

- Understand what these needs are now and how these might change in the future.
 - Understand how these vary across the County.
 - Forecast the likely need for accommodation
 - Estimate the *availability* of accommodation for these client groups.
 - Identify the gaps in accommodation available now and how this might change in the future.
 - Identify how the supply of accommodation and gaps in provision varies across the County.
 - Demonstrate the need for accommodation for older people in the County and the supply available, drawing on existing studies. Specifically, distinguishing between the need for mainstream housing and care homes to accommodate older people for the long and short term.
8. This report presents evidence on the above clients groups and the stock of accommodation within Kent to meet their needs. It is focused on the need for accommodation for these clients and does not attempt to investigate their care needs. However, the two are inherently interdependent. Those with significant care needs may be more likely to need to be supported within a care home setting rather than within their own home. Ultimately, the balance between the need for care home type accommodation versus mainstream housing is a function of the severity of care needs, the approach to care including the resources available and the cost to the public purse.
9. It is important to set out that this study deals with the client groups that Families and Social Care is responsible for (eligible for services against FACS (Fair Access to Care Services) – Learning Disability/Physical Disability/Sensory) and fall within the remit of the adult accommodation strategy. Although this includes those with accommodation requirements because of mental health needs it does not include those that are supported by the Supporting People team or Kent Drug and Alcohol Team – typically those with problems of addiction. FSC and Supporting People regularly use the same accommodation facilities to house clients with different mental health needs.
10. As the evidence in Section 3 shows, there is a much wider population of people in each client group than the number receiving a service from FSC KCC. Those with mild learning difficulties are unlikely to need care or accommodation, although they might receive support from families or other organisations to live independently. Similarly, the vast majority of those with physical disabilities live within mainstream housing. The majority work. They may have care or specific accommodation needs but the majority are able to arrange these themselves, using their own resources or financial support provided by Disability Living Allowance (or similar benefits).
11. Similarly, there is a wider population of older people who have care or accommodation needs that are met by their family or perhaps by other organisation eg charities. A further group of older people with care and/or accommodation needs arrange their own care within the private sector and are not currently under the care of FSC. This might take a number of forms:

- Adapting their own property in minor ways to make life easier as mobility problems increase eg adding hand rails, replacing bathrooms, adding ramps to external doorways.
- Arranging for extra support to help with everyday tasks eg cleaning, shopping etc or carers provided by private organisations to help with dressing, bathing etc.
- Arranging and paying for care and accommodation within a residential or nursing care home.

12. The data presented represents a snapshot of need in October 2013. The number of people receiving care a service from FSC KCC is constantly changing, although the figures present a fair indication of the scale of current needs.

13. The rest of this report is structured as follows:

- Section 2 presents evidence on the current scale of need across Kent from the client groups based on information on those who currently receive services from Families and Social Care in Kent County Council. This section also analyses data on where clients originate from and where they are accommodated at the District level.
- Section 3 considers future demand for accommodation by setting out evidence on the size of the client groups in the population as a whole and how the overall population is likely to grow.
- Section 4 sets out evidence on the stock of existing accommodation for the different client groups and the pipeline of accommodation in the planning system.
- Section 5 brings together the evidence to draw some broad conclusions on the accommodation needs of vulnerable people in Kent.

2. Characteristics of those in need

Current needs

1. This section presents evidence on the number of people in each client group who are currently living in Kent. Where data is available, evidence is presented on:
 - The estimated population of people in each client group.
 - The number of people who receive a service from Kent County Council, including:
 - i. The number of people who have their accommodation funded by KCC (those living in care homes or supported accommodation).
 - ii. The number of people live in their own homes but with support from KCC.
2. The data is broken down by local authority or the sub-region relating to the Kent Area Team. We consider the following client groups:
 - People with learning disabilities including autism spectrum disorder.
 - People with mental health needs.
 - People with physical disabilities including sensory impairments.
 - Older people.
3. In each client group there are individuals with multiple needs. For example, people with learning disabilities who also have physical disabilities or mental health needs. They are included in the data and analysis in terms of their primary need or the first need which qualified for care.

People with Learning Disabilities

Prevalence in the Population

4. National research suggests that the incidence of people with learning disabilities in the population as a whole is around 3% but this includes those with difficulties ranging from low, moderate to severe. If 3% of Kent population has a learning disability this would amount to around 44,000 people in 2011.
5. Kent GP data records around 0.3% of the population with learning disabilities, but it is likely only severe disabilities are recorded and the majority of people live without support in terms of care or accommodation. Around 4,500 people with learning disabilities currently receive services from FSC and this corresponds with the number of people who are recorded as having severe learning disabilities in the County by GP records and probably around 10% of all those with learning disabilities in Kent.

6. A large proportion of people with learning disabilities have autistic spectrum disorder. National research suggests this could be as high as one third of those with learning disabilities. In the population as a whole, around 1% of people have some form of autism. If this proportion holds true within Kent, this equates to 14,700 in 2011 (including children and adults).
7. The draft Kent Housing Issues for Autism report presents evidence from national studies that suggest that half of people with autism have average to above average IQs and are known as 'higher functioning'. This would amount to around 7,000 people in Kent. They do not have a learning disability and are often not known to health or social care services and may not have been formally diagnosed.
8. The draft report claims that there is an overwhelming need for supported housing for people with autism in Kent and particularly in West Kent. It also highlights the issue that most supported housing schemes are not specifically designed for people with autism. People with autism are accommodated in supported schemes which are not always ideal for their needs.

Kent County Council Caseload

9. There are 4,447 people with learning disabilities in Kent who receive a service from Families and Social Care at Kent County Council. This figure includes people who receive residential services, respite care and community services (eg domiciliary care, meals and day care). It also includes 'direct payment' customers – those who have been assessed as needing help from social services but who arrange their care or accommodation themselves. Of these people:
 - 1,220 (25%) are cared for in residential and nursing homes, arranged by KCC. The majority of these people are in residential care homes. Across Kent there are 13 people in nursing care homes.
 - 840 (17%) live in supported accommodation and a further 110 (2%) in an adult placement (akin to foster care for vulnerable people)
 - A further 1,720 (35%) receive a community service, which could include community care, day care, domiciliary care and/or meals. These people are not living in a care home and are living in mainstream housing either accommodated in their own homes, living with family or in some form of supported accommodation.
 - 1,120 people with learning disabilities arrange their own care and may receive a direct payment from FSC KCC. They do not live in accommodation arranged by KCC.
10. Taken together, the services provided to all of these clients add to just over 5,000. However, it is important to note that there is some double counting of clients under the community service and direct payment categories because some clients receive more than one service. Whilst this needs to be borne in mind when interpreting the data it nevertheless reflects a true picture of the demand for different services – the fact that some individuals receive more than one service is part of the overall demand.

Type of Accommodation

11. The majority of people with learning disabilities (over 70%) who receive a service from FSC do not live in a care home. However, the proportion of people living in care homes does appear to be higher than the rate in England as a whole. A report by the Centre for Disability Research (CeDR) on people with learning disabilities in England found that 15% of those with learning disabilities were accommodated in care homes. A further 2% were in NHS accommodation, 10% in supported accommodation and the remainder (74%) in mainstream housing. These figures refer to the population of people with learning disabilities as a whole and include those with mild or moderate disabilities. However, the proportion of those with severe or profound learning disabilities living in care homes is 15% and 19% respectively at the national level. In Kent, 27% of people with learning disabilities who receive a service from KCC live in care homes. Even if we assume that the people receiving a service from KCC have severe or profound learning difficulties the proportion living in care homes appears high compared to the national level.
12. The highest numbers of people in care homes with learning disabilities live in Canterbury, Dover, Shepway and Thanet (Figure 2.1). This does not reflect the location that need arises; rather where they are currently resident or have been placed. The pattern typically reflects the availability of accommodation for this group. There is a legacy of residential accommodation for people with learning disabilities in the east of the County where it has been cheaper to build due to relatively lower land prices. There are very few people in nursing care (13 across Kent) but they are predominately located in Canterbury and Dover.

Figure 2.1: People with Learning Disabilities Accommodated in Care Homes

District	Residential	Total (including 13 in nursing care)	Per 1,000 population
Ashford	55	55	0.5
Canterbury	171	175	1.2
Dartford	30	30	0.3
Dover	184	187	1.7
Gravesham	40	41	0.4
Maidstone	66	68	0.4
Sevenoaks	29	29	0.1
Shepway	186	186	1.6
Swale	80	80	0.7
Thanet	102	102	0.8
Tonbridge & Malling	30	31	0.2
Tunbridge Wells	83	83	0.7
Not known	155	157	
Kent	1,210	1,220	0.8

Source: Kent County Council * Total rounded to nearest 10

13. Figure 2.2 presents data on the number of people (around 3,790) who are receiving a service from FSC and likely to be living in their own home. A significant proportion of those receiving community services receive care to allow them to live in their own home or an independent setting and prevent them from needing to enter care home accommodation. 840 people with learning disabilities live in supported accommodation. This provides independent accommodation but is specialist housing and not part of the mainstream housing stock.

Figure 2.2: People with Learning Disabilities, Receiving a Service from KCC, Living in their Own Home

	Supported accommodation	Adult placement	Community Service (domiciliary, meals, day care) **	Direct payment **	Total **
Ashford	70	10	180	80	340
Canterbury	80	10	180	90	360
Dartford	30	*	80	60	180
Dover	60	10	130	120	310
Gravesham	10	*	100	70	180
Maidstone	100	10	150	140	390
Sevenoaks	50	*	90	40	170
Shepway	120	20	210	120	470
Swale	80	10	210	80	380
Thanet	100	30	160	170	460
Tonbridge and Malling	90	*	110	60	270
Tunbridge Wells	60	*	100	70	230
Not known	10	*	30	10	50
Total	840	110	1,720	1,120	3,790

Source: FSC, Kent County Council. Figures rounded to nearest 10 and figures below 5 suppressed *

**Some clients receive more than one service and so may be counted more than once under these categories

14. Placement patterns of current residents are presented in Figure 2.11 and give an indication of the extent to which people with learning disabilities have been placed locally and the extent to which they may have been placed at some distance from their origin. The learning disability teams that arrange placements into care homes are not always confined to a single district – Dartford and Gravesham operate as one team, Maidstone and Malling are grouped together and the South West Kent team cover Sevenoaks, Tonbridge and Tunbridge Wells.
15. It is worth noting that there is an element of cross border placing with all teams and some of these placements will only involve short travel distances to neighbouring authorities. On average across Kent, 38% of people with learning disabilities are placed in care homes in their home authority. A further 30% are placed in a care home in a neighbouring authority. However, 32% are placed in a non-neighbouring authority and are therefore likely to have been required to move some distance from their place of origin.

16. It is worth highlighting movements to and from individual authorities since these reflect the availability of accommodation in different parts of the County.

- The majority of people with learning disabilities originating in Canterbury, Dover, Shepway and Thanet and needing residential care are placed in their own local authority area. In Canterbury only 5% of people are placed in non-neighbouring authorities. The figure is 14% for Dover, 12% for Shepway and 20% for Thanet.
- The majority of people with learning disabilities living in Dartford, Gravesham, Maidstone, Sevenoaks, Tonbridge and Malling and Tunbridge Wells (North and West Kent) are placed outside of their home local authorities.
- A reasonable proportion (23%) of those placed from Ashford are accommodated in neighbouring Shepway. However, 7% have been placed in Dover, at some distance from their place of origin.
- One third of those placed from Maidstone and Malling are accommodated in the East Kent authorities of Canterbury, Dover and Shepway. None of these local authorities neighbour Maidstone or Malling so it is reasonable to assume that these people have been placed at some distance from their place of origin because of the lack of availability of accommodation locally for the type of care they need.
- 10% of those placed from Dartford and Gravesham are accommodated in Swale. Again, this is likely to reflect the availability of accommodation.
- Those placed from South West Kent (Sevenoaks, Tunbridge Wells and Tonbridge) appear to be relatively dispersed throughout Kent and with a significant proportion placed elsewhere (likely to be outside the County).

17. Data on those placed over the last year, built up from data at the Lower Super Output Area level, reveals that 48 people with learning disabilities were placed in care homes in Kent. A further 6 were placed outside of the County. As these numbers are small they need to be treated with caution. Although it is not possible to track individual movements, the balance of placements at the District level gives an indication of where people move to and from. The highest numbers of people being placed originate from Dover, Thanet and Shepway. Similarly, the highest number of people are placed into Dover, Thanet, Shepway and Swale. This suggests there is a certain amount of 'churn' in these areas – existing residents moving around. It also reflects the larger population of people with learning disabilities as a result of the accommodation available in these areas. There is net movement out of people with learning disabilities from Dartford, Sevenoaks and Tonbridge and Malling which might indicate lack of accommodation in these Districts. There are net movements into Dover, Maidstone, Swale and Tunbridge Wells which suggests some capacity, though the numbers are single figures and may vary from year to year.

18. Across the Kent authorities there are 670 people with learning disabilities on local authority waiting lists to access housing – 3% of all applicants. The largest numbers of people are on the

waiting lists for Dover, Shepway and Swale – each with over 100 people with learning disabilities registered. A high proportion of applicants on Dartford, Shepway and Thanet's lists have a learning disability (from 7-11% of all applicants). However, the overall number of applicants on local authority waiting lists varies widely depending on how frequently lists are reviewed and updated and individual local authority approaches to managing applications. The extent to which those with learning disabilities actively register their needs also varies between authorities. These figures do not, therefore, represent an accurate representation of the housing needs of those with learning disabilities. However, they do provide an illustration of the scale of need for housing from those with learning disabilities and the demand for mainstream housing within this client group.

People with Mental Health Needs

Prevalence in the Population

19. Evidence at the national level suggests that the prevalence of mental illness within the population as a whole is 0.7%.¹ Mental illness is defined as schizophrenia, bipolar disorder and other psychoses. A further 8.1% are estimated to have depression.
20. When these proportions are applied to the population in Kent in 2011 this suggests 10,400 people have a serious mental illness in 2011.
21. The Kent Joint Strategic Needs Assessment estimated that around 133,760 people in the County have a 'common mental illness'. This figure is broadly comparable with the number and proportion of people in the population estimated to have depression. The vast majority are unlikely to need care and accommodation provided by KCC.
22. The JSNA also estimates that 5,000 people in the County have 'major' mental health problems. This is around half the level of those that might be expected to have one of the serious mental illnesses, if the national prevalence rates are applied to Kent.
23. At present, around 3,500 people are receiving a service from KCC for their mental health needs which represents 70% of the population expected to have serious mental illness. The national prevalence rates and the JSNA figures indicate the potential for higher levels of demand for care and accommodation from those with serious mental illnesses if circumstances change to make it more difficult for these people to live independently.

Kent County Council Caseload

24. There are around 3,500 people with mental health needs that receive a service from Kent County Council. This figure includes people who receive residential services, respite care and community services (eg domiciliary care). It also includes 'direct payment' customers – those who arrange their own care. There are a large number of people (the majority) who receive

¹ Figure for England from the UK Health Statistics 2010 from GP practice data 2009-10 9 (ONS)

support from KCC under adult protection and social work but it has not been possible to break these down by District. Of this client group (3,500 people):

- Only a small proportion (6% or 230 people) are currently resident in care homes.
- A similar proportion (7% or 240 people) live in supported accommodation – typically small clusters of flats or shared accommodation with a live in or visiting carer (Figure 2.4).
- 130 people (4%) receive a community service to enable them to live independently. As with clients with learning disabilities, it is possible that some clients receive more than one service and may be counted more than once under this category. However, this numbers is likely to be small.
- The remaining group -just under 3,000 people with mental health needs –receive social work support. It has not been possible to break this figure down by District in Figure 2.4. They do not live in accommodation provided by or arranged by KCC but it is assumed that, by and large, they live in the mainstream housing stock.

Type of Accommodation

25. Those accommodated in care homes are most likely to be living in Canterbury, Shepway or Thanet. Again, this reflects the nature of the stock of accommodation in East Kent.

Figure 2.3: People with Mental Health Needs Living in Care Homes

District	Residential	Total	Per 1,000
Ashford	2	2	0.0
Canterbury	59	59	0.4
Dartford	0	0	0.0
Dover	8	8	0.1
Gravesham	8	8	0.1
Maidstone	9	9	0.1
Sevenoaks	0	0	0.0
Shepway	35	35	0.3
Swale	8	8	0.1
Thanet	57	57	0.4
Tonbridge & Malling	0	0	0.0
Tunbridge Wells	15	15	0.1
Not known	24	24	
Kent	230	230	0.2

Source: Swift, FSC Kent County Council

Figure 2.4: People with Mental Health Needs, Receiving a Service from KCC, Living in their Own Home

	Supported accommodation (includes 5 adult placements)	Community Service (domiciliary, meals, day care)**	Direct payment**	Total **
Ashford	20	10	10	40
Canterbury	50	0	20	60
Dartford	0	*	*	10
Dover	20	10	30	50
Gravesham	0	*	0	*
Maidstone	10	10	20	50
Sevenoaks	*	10	10	20
Shepway	10	10	20	50
Swale	10	*	10	20
Thanet	110	10	30	150
Tonbridge and Malling	10	10	10	30
Tunbridge Wells	*	50	30	70
No known	10	*	10	20
Total	240	130	190	560

Source: Kent County Council. Rounded to nearest 10 and *figures lower than 5 suppressed **Some clients receive more than one service and so may be counted more than once under these categories

26. Figure 2.12 presents data on the origin and location of current care home residents with mental health needs. Across Kent, the majority of people with mental health needs living in care homes have been placed within their home local authority or neighbouring authority area. However one quarter of people have been placed in non-neighbouring authorities, implying that they are required to move significant distances to access a suitable care home. The extent to which people are able to be placed locally varies across Kent, though some caution needs to be used in interpreting this data since the number of people involved at the local authority level is small in some cases.
27. Figure 2.12 shows that those living in East Kent are likely to be placed in the District where they live or within the geography covered by the placement team. Broadly, the majority of people with mental health needs originating from Ashford and Shepway, Canterbury and Swale, Thanet and Dover are placed in the local area. In contrast, the majority of people with mental health needs originating in Maidstone, Dartford and Gravesham and the authorities of South West Kent are placed in non-neighbouring authority areas – that is, they are placed outside of their home authority or a neighbouring authority area.
28. This reflects the availability of accommodation for people with mental health needs. In East Kent there are more places in residential care homes for people with mental health needs than in the rest of Kent. There is also more supported accommodation, which to some extent reflects the

nature of accommodation in these coastal towns with large and relatively cheap properties that lend themselves to subdivision into self-contained flats or shared properties (HMOs).

29. Data is available on placements of people in the last year but the numbers are too small to use for reliable analysis of movements between Districts to access care and accommodation.

People with Physical Disabilities

Prevalence in the Population

30. This analysis refers to those with physical disabilities who are aged 18-65. People with physical disabilities over the age of 65 are included in the older people client group.

31. One indication of the level of disability within the population is the number of people claiming Disability Living Allowance (Figure 2.5). Almost 44,000 working age people claimed DLA in February 2013 in Kent as a whole, with absolute numbers highest in Thanet.

32. Rates of disability amongst the general population are substantial and not reflected in the number of people who receive a service from KCC. The vast majority of those with physical disabilities live without care or accommodation provided by KCC:

- There are around 44,000 working age people who claim disability living allowance (for working age people this is being preplaced by PIP). These benefits are paid to those with disabilities to recognise the extra costs involved. They are not income or work related. They give some indication of the number of people in the population with a disability that is significant enough to affect their everyday lives and cost of living.
- Disability is strongly linked to age. Around 1 in 5 of the working age population has a disability, compared to half over those at pensionable age.² A further 16,750 older people claim DLA in February 2013 (which has gradually replaced attendance allowance).
- This does not mean that they need care or accommodation provided by KCC but provides evidence of the wider population of disabled people.

Figure 2.5: Disability Living Allowance Claimants of Working Age (18-64)

District	2003	2013	Change 2003-2013	% change	Annual average
Ashford	2,190	3,380	1,190	54%	5%
Canterbury	3,140	4,530	1,390	44%	4%
Dartford	1,590	2,410	820	52%	5%
Dover	2,910	3,990	1,080	37%	4%
Gravesham	1,950	2,880	930	48%	5%
Maidstone	2,310	3,840	1,530	66%	7%

² Family Resource Survey 2010/11

Sevenoaks	1,660	2,300	640	39%	4%
Shepway	2,860	4,240	1,380	48%	5%
Swale	3,230	5,020	1,790	55%	6%
Thanet	4,160	6,080	1,920	46%	5%
Tonbridge and Malling	1,580	2,700	1,120	71%	7%
Tunbridge Wells	1,590	2,460	870	55%	5%
Kent	29,170	43,840	14,670	50%	5%

Source: DWP (Nomis)

33. The data suggests that the number of people claiming DLA has increased by 50% across Kent over the last decade, an annual average rate of 5%. This rate of increase far exceeds the level of population growth as a whole over the 10 year period.

34. Data from the Kent Sensory Disability Joint Needs Assessment provides evidence of the incidence of sensory impairments (blindness and deafness) within the Kent population. These figures are based on people in this client group registered with Kent County Council as certified blind or partially sighted or with a hearing impairment. Registration is optional so is unlikely to capture the whole population but does give an indication of the scale of need:

- In 2011, there were 3,740 people registered as blind within Kent. The majority were aged over 65 but 880 were aged 18-64. Of this group, 120 have additional disabilities – mainly learning disabilities. It is relevant to note that adults with learning disabilities are ten times more likely to be blind or partially sighted than the general population.
- A further 730 18-64 year olds were partially sighted, of which 80 have additional disabilities.
- 1,900 people aged 18-64 have a registered hearing impairment.

Kent County Council Caseload

35. Almost 6,000 people with physical disabilities currently receive a service from KCC. This figure includes people who receive residential services, respite care and community services (eg domiciliary care) It also includes 'direct payment' customers – those who arrange their own care or accommodation. There are a large number of people (around 3,000) who receive other services eg social work and equipment and adaptations but it has not been possible to break these figures down by District. Overall, Kent County Council provide a service to around 14% of all working age disabled people in the County. The vast majority of those with physical disabilities live without care or accommodation provided by KCC. Of this client group (6,000 people):

- Only a small proportion (6% or 280 people) are currently resident in care homes. This excludes respite care.
- A small proportion (4% or 210 people) live in supported accommodation – typically small clusters of flats or shared accommodation with a live in or visiting carer (Figure 2.7).

- A further 1,300 people (22%) receive a community service which could include day care, community care, domiciliary care or meals. They are likely to be living in their own home in the mainstream housing stock. Some of these clients may receive more than one service and may therefore be counted more than once under this category. Whilst this needs to be borne in mind when interpreting the data it nevertheless reflects a true picture of the demand for different services – the fact that some individuals receive more than one service is part of the overall demand.
- The remaining group – just over 4,000 people with physical disabilities do not live in accommodation arranged by KCC. It is assumed they live in the mainstream housing stock, though some may have arranged their own care and accommodation in a care home.

Type of Accommodation

36. The largest number of people with physical disabilities in residential or nursing care homes are located in Canterbury, Shepway and Thanet, though the overall numbers are small and will be swayed by the presence of a single care home.

37. Most people with physical disabilities, receiving a service from FSC KCC do not live in a care home. The largest group receive a form of community care eg domiciliary care or meals etc. 210 people live in supported accommodation which is specialist accommodation although providing independent living arrangements. Excluding supported accommodation, around 2,300 people with physical disabilities and supported by KCC are likely to live in the mainstream housing stock. In these cases it is likely that properties are adapted to meet their needs or that care is provided to allow them to live in their own home.

Figure 2.6: People with Physical Disabilities Living in Care Homes

District	Residential	Nursing	Total	Per 1,000
Ashford	7	2	9	0.1
Canterbury	30	11	41	0.3
Dartford	1	4	5	0.1
Dover	11	6	17	0.2
Gravesham	1	2	3	0.0
Maidstone	12	5	17	0.1
Sevenoaks	8	4	12	0.0
Shepway	32	6	38	0.3
Swale	20	5	25	0.2
Thanet	37	2	39	0.3
Tonbridge & Malling	9	7	16	0.1
Tunbridge Wells	11	3	14	0.1
Not known	32	14	46	
Kent	210	70	280	0.2

Source: Kent County Council

Figure 2.7: People with Physical Disabilities, Receiving a Service from KCC, Living in their Own Homes

District	Supported accommodation (including 11 adult placements)	Community Service**	Direct Payment**	Total**
Ashford	20	100	100	210
Canterbury	20	120	110	250
Dartford	10	70	50	120
Dover	20	110	70	200
Gravesham	*	100	70	170
Maidstone	20	120	90	240
Sevenoaks	20	80	50	150
Shepway	40	140	130	300
Swale	*	140	50	200
Thanet	20	130	100	240
Tonbridge and Malling	10	90	80	180
Tunbridge Wells	30	100	110	240
Not known	10	10	10	20
Total	210	1,300	1,000	2,510

Source: FSC, Kent County Council. 10 adult placements combined with supported accommodation to suppress small figures. Figures rounded to nearest 10 and figures * below 5 suppressed **Some clients receive more than one service and so may be counted more than once under these categories

38. There are 260 applicants on local authority waiting lists across Kent that need a home which is wheel chair accessible. This represents about 1% of all applicant households. However, there are many more applicants with physical disabilities on waiting lists but do not necessarily need wheelchair accessible properties and their specific needs will be varied. The majority of those needing wheelchair accessible properties are existing housing association or local authority tenants (59%). A further 25% live in the private rented sector and 12% are owner occupiers.
39. Information from local authorities and housing associations in Kent suggests there are around 4,000 properties in the affordable housing stock which are wheel chair accessible. A further 8,000 have been adapted for people with physical disabilities. These figures are minimum estimates based on data returned from some of the Kent authorities and registered providers. Not all keep records on adaptations and so it is difficult to establish the full scale of properties which have been adapted. Adaptations in many cases will be specific to the needs of the individual and so it is not as straightforward as re-letting them to other people with physical disabilities when they are available for re-let.
40. Figure 2.13 shows where people with physical disabilities living in care homes have been placed within Kent. The data should be treated with caution as the numbers are small in some cases. Under half of these people are placed within their home local authority area and a further 24%

in a neighbouring local authority. Almost one third are placed in non-neighbouring authority areas. This could indicate that people have had to move long distances to access care, though in some cases it will reflect willing moves to access specialist care for specific disabilities. The majority of those originating from East Kent and Ashford are placed in their home local authority. The majority of those originating from Dartford, Gravesham and the West Kent authorities are placed outside of their home local authority. Those majority of originating from Dartford are placed in non-neighbouring authority areas and are likely to have moved some distance from their local authority of origin to access suitable care and accommodation.

Older People

41. It is important to note that there is no formal definition of old age. Individual experience varies widely according to health, work and social circumstances. However, the prevalence of specific conditions including physical disabilities, sensory impairments and dementia increases with age and these health problems tend to trigger the need for care and accommodation and other forms of support. As historically the retirement age has been 65 years, many national data sets have used this as the threshold for considering the needs of older people. KCC caseload for older people is determined at 65 years, whereas the eligible age for extra care and other types of older persons designated housing is 55 years.
42. In 2011, there 262,300 people aged over 65 living in Kent - 18% of the Kent population. The proportion of older people in the population varies between Districts, with Shepway and Thanet having more than one fifth of the population aged 65+ and Dartford and Gravesham having just 14% and 16% of their population in the older age groups (Figure 2.8).
43. The proportion of the population in more advanced age groups (75+ and 85+) appears to even out across the Districts but with highest absolute numbers in Canterbury, Dover, Maidstone, Shepway and Thanet.

Figure 2.8: Proportion of Population Aged 65+ in 2011

	65+	75+	85+	% 65+	% 75+	% 85+
Ashford	20,000	9,200	2,700	17%	8%	2%
Canterbury	28,400	14,100	4,600	19%	9%	3%
Dartford	14,000	6,900	1,900	14%	7%	2%
Dover	22,500	10,600	3,200	20%	9%	3%
Gravesham	16,300	7,800	2,000	16%	8%	2%
Maidstone	26,500	12,200	3,500	17%	8%	2%
Sevenoaks	21,700	10,400	2,900	19%	9%	3%
Shepway	22,400	10,800	3,400	21%	10%	3%
Swale	22,600	9,900	2,700	17%	7%	2%
Thanet	28,400	14,100	4,500	21%	11%	3%
Tonbridge & Malling	20,400	9,400	2,400	17%	8%	2%
Tunbridge Wells	19,100	9,400	2,900	17%	8%	3%
Kent	262,300	124,800	36,800	18%	9%	3%

Source: Kent County Council Research and Intelligence Strategy Forecasts November 2012

Kent County Council Caseload

44. There are around 20,700 older people who have a service provided by Kent County Council. This is around 8% of the population aged 65 and over. In practice, most of those receiving a service are in the older age groups – 75+ and 85+. The proportion of people in these older age groups receiving a service is likely to be much higher and approaching 50% for those aged 85 and over. This figure includes people who receive residential services, respite care, community services (eg domiciliary care). It also includes ‘direct payment’ customers – those who arrange their own care. There is a large number of additional people (approaching 9,000 people) who receive social work support and help with equipment and adaptations but it has not been possible to break these figures down by District. Of these 20,700 people:

- 4,400 (21%) of these people are accommodated in care homes, arranged by Kent County Council. 2,850 live in residential care homes and a further 1,500 live in nursing care homes (Figure 2.9).
- A small proportion (1% or 260 people) live in supported accommodation – typically small clusters of flats or shared accommodation with a live in or visiting carer (Figure 2.10).
- 6,900 (33%) people receive some form of community service – primarily domiciliary care – which enables them to live independently in their own home. Some of these clients may receive more than one service and may be counted more than once in this category. Whilst this needs to be borne in mind when interpreting the data it nevertheless reflects a true picture of the demand for different services – the fact that some individuals receive more than one service is part of the overall demand.
- The remainder (over 9,000 people) do not live in accommodation arranged by KCC but do receive some form of service from the County Council. It is likely that they live in their own homes (which could include sheltered accommodation) but some people receive direct payments to arrange their own care and it is unclear whether all of these people live in mainstream housing.

45. Those living in their own homes includes older people living in sheltered and extra care accommodation since they are either owned or rented by the individual and care is, by and large, provided in the same way as to those living in the mainstream housing stock. However, the definition of extra care in particular is often the subject of debate and there may be some fluidity in the recording of the type of accommodation individuals live in.

46. There are also a number of older people who stay in intermediate care services on a short term basis. Intermediate care services are considered in Section 4.

Type of Accommodation

Figure 2.9: Older People Living in Care Homes (arranged by KCC)

District	Residential	Nursing	Total	Per 1,000
Ashford	134	166	300	15.0
Canterbury	327	122	449	15.8
Dartford	145	102	247	17.7
Dover	349	99	448	19.9
Gravesham	129	101	230	14.1
Maidstone	219	259	478	18.0
Sevenoaks	120	77	197	5.3
Shepway	320	96	416	19.2
Swale	236	90	326	14.5
Thanet	477	122	599	26.5
Tonbridge & Malling	84	38	122	4.3
Tunbridge Wells	171	132	303	14.8
Not known	136	98	234	
Kent	2,850	1,500	4,350	16.6

Source: Kent County Council

47. Figure 2.9 shows that there are higher concentrations of older people in care homes in the east of the County – Dover, Shepway and Thanet. In these Districts there are over 19 people per 1,000 of the older population in a care home, compared to 16.6 in Kent as a whole. This measure controls for the size of the older population. In contrast, there are very few people whose care is arranged by KCC living in Sevenoaks and Tonbridge and Malling, both in absolute terms and in relative to the size of the older population in those authority areas.
48. At any one time there are also a number of older people staying temporarily in intermediate care services. Intermediate care is a range of integrated services to promote faster recovery from illness and to maximise independent living. It provides short term rather than permanent care and accommodation. Analysis of the use of intermediate care beds in Kent over the year to August 2013 suggests there are around 220 beds being used by KCC for intermediate care at any one time.³ Given that stays in intermediate care are for up to 6 weeks this means that approaching 2,000 people are accommodated and cared for in these beds over the year.

³ Data from BOXI Residential Monitoring Report August 2012-2013

Figure 2.10: Older People Receiving a Service from KCC, Living in their Own Home

	Supported accommodation (1 adult placement)	Community Service**	Direct Payment**	Total**
Ashford	30	460	40	530
Canterbury	40	670	90	800
Dartford	30	470	30	530
Dover	30	610	60	690
Gravesham	*	480	80	560
Maidstone	30	590	60	680
Sevenoaks	10	500	50	550
Shepway	50	550	120	710
Swale	0	680	30	700
Thanet	40	740	80	860
Tonbridge and Malling	*	490	60	560
Tunbridge Wells	10	530	80	610
Not known	*	100	10	110
Total	260	6,870	760	7,890

Source: Kent County Council. Figures rounded to nearest 10 and figures * below 5 suppressed

**Some clients receive more than one service and so may be counted more than once under these categories

49. The majority of older people placed in residential care homes in Kent have been placed in their home authority (72%) (Figure 2.14). A further 20% have been placed in a neighbouring authority. Only 7% have been placed in non-neighbouring authority areas, though this varies between individual districts. In Sevenoaks and Tonbridge and Malling, the majority of older people placed in residential care homes have not been placed in their home authority and a significant proportion have been placed in residential care homes in non-neighbouring authority areas.
50. Again, the majority of older people placed in nursing care have been accommodated in their home authority (65%) or a neighbouring authority (23%). 11% of older people placed in care homes have been placed in non-neighbouring authorities and this implies they have moved a significant distance from their place of origin. This is particularly true in Sevenoaks and Tunbridge Wells, where one quarter of those placed in nursing care homes have been placed in a non-neighbouring authority.
51. Data on placements in the last year reveals that 1,240 people were placed in residential care in Kent and a further 70 outside of Kent. A further 840 were placed in nursing care in Kent and there do not appear to have been any placements outside of Kent. Overall, the highest numbers of placements were made **from** Canterbury, Maidstone, Shepway and Thanet and this broadly corresponds to the larger populations of older people living in these authority areas. Similarly, the highest numbers of people were place **in** the same Districts. This might indicate greater capacity in these authority areas to accommodate older people in care homes.

Figure 2.11: Placement Patterns for People with Learning Disabilities

District	Ashford	Canterbury	Dartford, Gravesham, Swanley	Dover	Maidstone & Malling	Sevenoaks, Tonbridge & Tunbridge Wells	Shepway	Swale	Thanet	Kent
Ashford	23%	1%	4%	4%	5%	1%	7%	3%	1%	
Canterbury	2%	64%	1%	8%	8%	4%	7%	9%	11%	
Dartford	0%	0%	15%	1%	0%	2%	0%	0%	0%	
Dover	7%	9%	4%	70%	11%	3%	10%	9%	16%	
Gravesham	0%	0%	23%	0%	1%	1%	0%	0%	0%	
Maidstone	3%	2%	2%	2%	22%	4%	3%	3%	1%	
Sevenoaks	0%	0%	3%	1%	1%	11%	0%	0%	0%	
Shepway	46%	9%	8%	7%	12%	7%	64%	11%	10%	
Swale	1%	6%	10%	1%	3%	5%	1%	36%	0%	
Thanet	1%	6%	3%	1%	1%	1%	0%	6%	54%	
Tonbridge & Malling	0%	0%	1%	0%	5%	10%	0%	1%	0%	
Tunbridge Wells	3%	0%	2%	0%	11%	25%	1%	6%	1%	
<i>Medway</i>	<i>1%</i>	<i>0%</i>	<i>6%</i>	<i>1%</i>	<i>2%</i>	<i>2%</i>	<i>0%</i>	<i>7%</i>	<i>1%</i>	
<i>Not known</i>	<i>13%</i>	<i>3%</i>	<i>18%</i>	<i>4%</i>	<i>19%</i>	<i>25%</i>	<i>7%</i>	<i>9%</i>	<i>5%</i>	
Total	100%	100%	100%	100%	100%	100%	100%	100%	100%	
Placed in District or local area	23%	64%	15%*	70%	22%	46%*	64%	36%	54%	38%
Placed in neighbouring District	55%	32%	32%	16%	26%	4%	23%	22%	27%	30%
Non neighbouring	22%	5%	52%	14%	52%	50%	12%	41%	20%	32%

Source: Kent County Council *Total includes sum of three Districts covered by area team

Figure 2.12: Placement Patterns for People with Mental Health Needs

District in which Placed	Placement Team (Kent Area Team)						
	Ashford & Shepway	Canterbury & Swale	Dartford, Gravesham, Swanley	Maidstone & Maidstone & Malling	Sevenoaks, Tonbridge & Tunbridge Wells	Thanet & Dover	Total
Ashford	0%	0%	8%	0%	0%	0%	1%
Canterbury	13%	59%	4%	8%	0%	17%	24%
Dartford	0%	0%	0%	0%	0%	0%	0%
Dover	0%	10%	0%	12%	4%	15%	9%
Gravesham	0%	0%	33%	0%	0%	0%	3%
Maidstone	0%	0%	4%	23%	7%	0%	4%
Sevenoaks	0%	0%	0%	0%	0%	0%	0%
Shepway	65%	4%	8%	23%	4%	4%	14%
Swale	0%	6%	4%	8%	0%	1%	3%
Thanet	13%	13%	4%	4%	4%	58%	23%
Tonbridge & Malling	0%	0%	0%	0%	0%	0%	0%
Tunbridge Wells	3%	1%	4%	4%	32%	3%	6%
Not known	6%	3%	13%	8%	50%	1%	10%
Medway	0%	3%	17%	12%	0%	0%	4%
Total	100%	100%	100%	100%	100%	100%	100%
Placed in District or local area	65%	65%	33%	23%	32%	73%	56%
Placed in neighbouring District	16%	31%	17%	12%	7%	21%	20%
Placed in non neighbouring	19%	4%	50%	65%	61%	6%	24%

Source: Kent County Council

Figure 2.13: Placement Patterns for People with Physical Disabilities

	Placing Team (Kent Area Team)												
District	Ashford	Canterbury	Dartford	Dover	Gravesham	Maidstone	Shepway	Swale	Sevenoaks	Tonbridge & Malling	Tunbridge Wells	Thanet	Total
Ashford	22%	0%	0%	0%	0%	0%	0%	8%	0%	0%	4%	0%	3%
Canterbury	15%	52%	22%	15%	0%	0%	5%	23%	6%	5%	4%	8%	14%
Dartford	0%	0%	11%	0%	0%	0%	0%	0%	17%	0%	0%	0%	2%
Dover	0%	6%	0%	50%	8%	0%	5%	0%	0%	0%	0%	6%	6%
Gravesham	0%	0%	0%	0%	17%	0%	0%	0%	6%	0%	0%	0%	1%
Maidstone	7%	0%	0%	0%	0%	29%	0%	4%	0%	18%	13%	4%	6%
Sevenoaks	4%	0%	17%	0%	8%	6%	0%	0%	22%	9%	0%	0%	4%
Shepway	41%	6%	6%	10%	0%	12%	80%	0%	0%	5%	0%	6%	13%
Swale	0%	10%	11%	0%	17%	18%	0%	46%	6%	5%	0%	2%	9%
Thanet	0%	3%	17%	5%	8%	6%	5%	8%	0%	0%	0%	56%	14%
Tonbridge & Malling	0%	3%	6%	0%	17%	18%	0%	0%	11%	27%	4%	0%	6%
Tunbridge Wells	4%	0%	0%	0%	0%	0%	0%	0%	6%	9%	42%	0%	5%
Not known	7%	19%	11%	20%	8%	12%	5%	12%	17%	18%	33%	19%	16%
Medway	0%	0%	0%	0%	17%	0%	0%	0%	11%	5%	0%	0%	2%
Total	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Placed in District	56%	52%	11%	50%	17%	29%	80%	46%	22%	27%	42%	56%	44%
Placed in neighbouring District	26%	19%	17%	30%	42%	35%	10%	35%	39%	32%	21%	13%	24%
Non neighbouring	19%	29%	72%	20%	42%	35%	10%	19%	39%	41%	38%	31%	31%

Source: Kent County Council

Figure 2.14: Placement Patterns for Older People to Residential Care Homes

District	Ashford	Canterbury	Dartford	Dover	Gravesham	Maidstone	Sevenoaks	Shepway	Swale	Thanet	Tonbridge & Malling	Tunbridge Wells	Total
Ashford	41%	1%	0%	0%	1%	3%	1%	2%	0%	0%	0%	3%	5%
Canterbury	1%	79%	1%	3%	0%	2%	0%	2%	7%	3%	1%	0%	11%
Dartford	0%	1%	53%	0%	24%	0%	19%	0%	0%	0%	1%	0%	5%
Dover	2%	1%	0%	91%	0%	2%	1%	5%	1%	5%	1%	1%	12%
Gravesham	0%	0%	19%	0%	63%	0%	3%	0%	0%	0%	0%	0%	5%
Maidstone	2%	1%	1%	0%	1%	78%	5%	0%	1%	0%	29%	5%	8%
Sevenoaks	0%	0%	17%	0%	5%	0%	47%	0%	0%	0%	6%	3%	4%
Shepway	42%	1%	1%	2%	0%	1%	0%	84%	0%	0%	0%	1%	11%
Swale	1%	10%	1%	0%	1%	2%	0%	1%	86%	0%	0%	0%	8%
Thanet	1%	4%	3%	2%	0%	0%	1%	1%	1%	89%	0%	0%	17%
Tonbridge & Malling	0%	0%	1%	0%	3%	8%	6%	0%	0%	0%	33%	2%	3%
Tunbridge Wells	1%	0%	0%	0%	0%	0%	10%	0%	0%	0%	20%	68%	6%
Not known	7%	3%	4%	2%	3%	5%	8%	4%	3%	3%	9%	17%	5%
Medway	0%	0%	1%	0%	0%	2%	0%	0%	0%	0%	1%	0%	0%
Total	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Placed in District/ locally	41%	79%	53%	91%	63%	78%	47%	84%	86%	89%	33%	68%	72%
Placed in neighbouring	48%	17%	36%	7%	33%	12%	37%	8%	9%	8%	55%	13%	20%
Non neighbouring	11%	4%	11%	2%	4%	10%	15%	8%	5%	3%	12%	19%	7%

Figure 2.15: Placement Patterns for Older People in Nursing Care Homes

District	Ashford	Canterbury	Dartford	Dover	Gravesham	Maidstone	Sevenoaks	Shepway	Swale	Thanet	Tonbridge & Malling	Tunbridge Wells	Total
Ashford	76%	1%	1%	1%	0%	3%	1%	12%	1%	0%	1%	1%	11%
Canterbury	2%	72%	0%	5%	0%	0%	0%	2%	12%	4%	0%	0%	8%
Dartford	0%	1%	60%	0%	15%	1%	17%	0%	1%	0%	3%	0%	7%
Dover	2%	2%	1%	87%	0%	0%	0%	13%	0%	1%	1%	0%	7%
Gravesham	0%	0%	19%	0%	66%	0%	9%	0%	0%	0%	0%	0%	7%
Maidstone	7%	1%	3%	0%	4%	90%	8%	2%	9%	2%	38%	10%	17%
Sevenoaks	0%	0%	8%	0%	10%	0%	36%	0%	0%	0%	6%	1%	5%
Shepway	9%	0%	0%	2%	0%	1%	1%	63%	0%	0%	0%	0%	6%
Swale	1%	13%	0%	0%	1%	1%	0%	0%	69%	0%	0%	0%	6%
Thanet	0%	6%	1%	5%	0%	0%	0%	3%	0%	91%	1%	0%	8%
Tonbridge & Malling	0%	0%	1%	0%	1%	2%	3%	1%	2%	0%	17%	1%	3%
Tunbridge Wells	1%	0%	0%	0%	1%	0%	11%	0%	0%	0%	20%	62%	9%
Not known	3%	4%	4%	0%	1%	1%	15%	5%	3%	3%	11%	23%	6%
Medway	0%	0%	1%	0%	2%	1%	1%	0%	3%	0%	1%	1%	1%
Total	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Placed in District/ locally	76%	72%	60%	87%	66%	90%	36%	63%	69%	91%	17%	62%	65%
Placed in neighbouring	19%	23%	27%	12%	28%	6%	40%	18%	25%	4%	66%	13%	23%
Non neighbouring	6%	5%	13%	1%	6%	4%	24%	19%	6%	4%	17%	24%	11%

3. Future Needs

1. This section considers how the population in the different client groups is expected to grow in the future and how this might impact on the need for accommodation in Kent.
2. This section considers in very simple terms what the impact of population growth might be on demand for accommodation in each client group. In practice, whether population growth translates into increased demand for certain types of accommodation will also depend on other factors including the prevalence of different groups in the population, **Kent County Council's and partners' approaches to service delivery and demand management**.
3. This section presents three estimates:
 - The prevalence of the client group in the population based on population growth as a whole. Not all of these people will need support for KCC but this gives an indication of the scale of the wider population that could need support.
 - KCC's caseload for the client group, based on population growth as a whole. Not all of these people will need accommodation provided by KCC and the extent to which different accommodation is used to provide care will depend on KCC's strategy for service delivery.
 - The number of people needing care home accommodation, based on population growth as a whole and, conversely, the numbers likely to be living in their own home.
4. These estimates are **not designed to 'predict and provide' accommodation**. They will be used as a tool for discussion with Districts and partners on the strategy for accommodating different groups.
5. This section also presents specific forecasts for the accommodation requirements of older people, using the SHOP model developed by the Housing Learning and Improvement Network (Housing LIN) and comments on forecasts used for other client groups where these are available.

Forecast population growth

6. Figure 3.1 shows the growth in the population anticipated by KCC's Research and Intelligence team's policy based forecasts. These forecasts assume a certain level of housing supply, based on the targets in each District's local plan. In these forecasts population growth is constrained by the housing supply provided for in current plans which means in some Districts (eg Sevenoaks and Tunbridge Wells) very limited population growth is forecast. Significant population growth is forecast in Ashford and Dartford in line with growth plans.
7. In contrast, the ONS subnational population projections are based on past trends projected forward and anticipate much higher levels of population growth in the west Kent Districts than the supply based forecasts (Figure 3.2). Similarly, they do not take account of the significant housing growth planned in Ashford. It is not the role of this report to review the merits of the

two different approaches to estimating the future population. However, it is important to present both approaches since they have different implications for the demand for public services, including care and accommodation.

8. Even those authority areas that are forecast to have limited net population growth in the next 10-20 years, the size of the elderly population is forecast to grow significantly (Figure 3.3).

Figure 3.1: Forecast Population Growth in Kent, by District

	2011	2016	2021	2026	2031	% change 2011-2021	% change 2011-2031
Ashford	118,400	133,700	149,700	165,600	170,100	26%	44%
Canterbury	150,600	158,000	162,600	168,100	173,700	8%	15%
Dartford	97,600	107,500	120,500	130,400	135,800	23%	39%
Dover	111,700	117,800	125,900	134,000	134,700	13%	21%
Gravesham	101,800	103,300	105,100	107,100	108,200	3%	6%
Maidstone	155,800	159,200	161,100	162,700	167,800	3%	8%
Sevenoaks	115,400	115,000	115,500	115,400	115,800	0%	0%
Shepway	108,200	109,800	112,100	114,100	116,100	4%	7%
Swale	136,300	140,100	144,200	148,000	151,700	6%	11%
Thanet	134,400	136,800	139,000	140,400	141,700	3%	5%
Tonbridge & Malling	121,100	123,900	127,200	130,300	133,500	5%	10%
Tunbridge Wells	115,200	114,300	115,500	116,000	116,600	0%	1%
Kent	1,466,500	1,519,700	1,578,300	1,632,100	1,665,700	8%	14%

Source: Kent County Council Research and Intelligence Strategy Forecasts November 2012

Figure 3.2: Population Projections by ONS Based on Past Trends

District	Thousands			Change 2011-2021	
	2011	2016	2021	Number	%
Ashford	118.4	126.9	134.9	16500	14%
Canterbury	150.6	158.6	164.5	13900	9%
Dartford	97.6	103.6	109.8	12200	13%
Dover	111.7	114	116.9	5200	5%
Gravesham	101.8	106.4	111.1	9300	9%
Maidstone	155.8	166.4	176.6	20800	13%
Sevenoaks	115.4	120	125.7	10300	9%
Shepway	108.2	110.2	113	4800	4%
Swale	136.3	146	155.6	19300	14%
Thanet	134.4	139.9	145.9	11500	9%
Tonbridge and Malling	121.1	129.3	137.7	16600	14%
Tunbridge Wells	115.2	121.5	128.4	13200	11%
Kent	1,466.5	1,542.7	1,620.2	153,700	10%

Source: ONS Subnational Population Projections – 2011 based

Older People

9. In 2011, 18% of the Kent population was aged 65 or over. The proportion of people in the older age groups is projected to increase across Kent over the next 20 years, with most Districts expected to have more than one quarter of their population aged 65 or over by 2031 (Figure 3.3).

Figure 3.3: Proportion of Population Aged 65+ in 2011 and Projected to 2031, KCC Forecasts

	2011	2016	2021	2026	2031
Ashford	17%	18%	19%	20%	22%
Canterbury	19%	21%	22%	24%	26%
Dartford	14%	15%	15%	16%	17%
Dover	20%	23%	24%	26%	29%
Gravesham	16%	18%	18%	20%	21%
Maidstone	17%	20%	21%	23%	25%
Sevenoaks	19%	22%	23%	25%	27%
Shepway	21%	24%	25%	27%	30%
Swale	17%	19%	20%	22%	24%
Thanet	21%	23%	24%	26%	28%
Tonbridge & Malling	17%	19%	20%	22%	24%
Tunbridge Wells	17%	19%	20%	22%	25%
Kent	18%	20%	21%	23%	25%

Source: Kent County Council Research and Intelligence Strategy Forecasts November 2012

Figure 3.4: Projected Growth in Older Population (People Aged 65+)

	2011	2016	2021	2026	2031	% change 2011-2021	% change 2011-2031
Canterbury	28,670	32,870	36,000	39,690	44,510	26%	55%
Ashford	20,190	24,710	28,240	32,560	37,190	40%	84%
Dartford	14,060	16,100	18,010	20,390	23,370	28%	66%
Dover	22,720	27,000	30,570	34,770	39,050	35%	72%
Gravesham	16,440	18,200	19,350	20,950	23,090	18%	40%
Maidstone	26,850	31,160	33,860	37,160	41,790	26%	56%
Sevenoaks	21,890	24,900	26,450	28,360	31,010	21%	42%
Shepway	22,710	25,990	28,130	31,120	34,680	24%	53%
Swale	22,870	26,700	29,170	32,240	36,370	28%	59%
Thanet	28,590	31,510	33,630	36,350	40,000	18%	40%
Tonbridge & Malling	20,680	23,750	25,790	28,560	31,990	25%	55%
Tunbridge Wells	19,260	21,720	23,360	25,660	28,920	21%	50%
Kent	264,930	304,640	332,530	367,800	411,960	26%	55%

Source: Kent County Council Research and Intelligence Strategy Forecasts November 2012

10. In percentage terms, significant growth of the older population is expected over the next 10-20 years (Figure 3.4). If this growth leads to a corresponding increase in the need for support, there could be significant additional demand for care and accommodation services provided by Kent County Council.
11. Figure 3.5 makes a simple projection of the number of older people needing support in the future. It is based on the forecast population of older people in those years and the current proportion of older people who receive support. Estimates are also provided for the numbers who might need care home accommodation provided by KCC. This is not a forecast for the total number of care home beds required since some older people arrange their own care and accommodation. Rather, it is an estimate of the demand that might fall on KCC **should no fundamental review of services or care pathways be undertaken.**
12. It is important to stress that this does not necessarily imply the need to build lots of additional care homes because there may already be capacity in existing homes and there are also other ways to meet demand eg by enabling older people to live independently for longer. Nevertheless, it emphasises the scale of the challenge for KCC over the next 10-20 years in meeting increasing care needs of the older population.
13. These estimates suggest:
 - An additional 17,300 older people receiving a service from KCC in 2031 (from 20,700 in 2011).
 - An additional 3,670 older people living in care homes arranged by KCC in 2031 – almost doubling the current number of people in care homes. However, this figure will depend on KCC's strategy for service delivery and activities to manage demand and could be significantly reduced.
14. Figure 3.5 uses KCC population forecasts. If the ONS populations projections were used the scale of growth for Kent as a whole would be significantly higher and projections for the individual Districts would differ with higher levels of growth in the West Kent authorities.
15. Forecasts presented in the Sensory Disability JNA (draft October 2013) using data from CeDR also estimate the growth in the number of older people with sensory impairments. The prevalence of sensory impairment is strongly linked to age and as the population ages the number of people with sensory impairments is expected to increase. The forecasts presented in the JNA suggest:
 - An increase from 24,600 people to 38,000 people with sensory impairments (blind or partially sighted) from 2010 to 2030 – an increase of 54% over the period.
 - An increase of around 60% of older people with profound hearing impairments from just over 3,000 in 2012 to around 4,800 in 2030. The number of older people with moderate or

severe hearing impairments in 2012 is over 100,000 and likely to experience a similar growth rate over the period.

- An increase in the number of people with severe dual sensory impairment (sight and hearing loss) from around 3,000 in 2010 to 5,800 in 2030.

16. It is also important to note that growth in demand for care and accommodation is likely to be driven by the increase in population in the oldest age groups, particularly 85+, rather than general growth in the population aged 65 and over. KCC forecasts suggest the population of those aged 85 and over will increase by over one third (34.8%) over the next decade (2011-2021) and will double by 2031. This suggests that a projected increase of 50% in the demand for services by 2031 could be an underestimate and the true figure may lie somewhere between 50 and 100%. **An important note is that KCC are transforming adult services and any prediction based on past activity does not reflect the changes in commissioning required to reduce the reliance on long term services.**

17. The SHOP toolkit developed by Housing LIN provides a more sophisticated set of forecasts on the requirement for older people accommodation over the next 10-20 years. These forecasts estimate the wider need for accommodation rather than the demand that will necessarily arise for KCC's accommodation services. The SHOP forecasts are based on a number of assumptions:

- ONS sub-national population projections. As noted previously, these are different to the KCC forecasts as they are based on past trends. The overall outcome for Kent is a higher level of growth and forecasts for individual Districts are affected.
- The model assumes current levels of life expectancy. Further improvements to life expectancy would increase demand for accommodation on the figures presented in Figure 3.7.
- The model assumes service ratios for different types of older person accommodation (based on the 'More Choice, Greater Voice' report⁴) to determine how much accommodation is needed. These ratios are:
 - 125 sheltered units per 1,000 population aged 75+
 - 45 extra care units per 1,000 population aged 75+ (ratios for enhanced sheltered have been included with extra care)
 - 65 residential care units per 1,000 population aged 75+
 - 45 nursing care units per 1,000 population aged 75+

18. Based on these service ratios, the model estimates a current shortfall of accommodation across Kent, with the greatest shortfall being for extra care accommodation. Whilst the model identifies

⁴ Toolkit to support the Government's National Strategy for an Ageing Society

a shortfall of sheltered accommodation, this is less straightforward to quantify since in the housing market sheltered accommodation could be substituted for properties in the mainstream housing stock. Sheltered accommodation does not provide care for older people and in many ways should not be seen as specialist housing for older people. Furthermore, data provided by KCC on the number of sheltered units in Kent suggests the service ratios are actually significantly higher than the SHOP model assumes and on this basis there is a 'surplus' of sheltered accommodation in the County. **It is important to note that whilst the data shows significant shortfalls, this is not reflected in the day to day service provision at this point in time.**

19. There are 'surpluses' for residential and nursing care homes in some Districts based on the service ratios applied. For example, Dover and Thanet appear to have an excess of residential care home accommodation whilst Maidstone, Shepway, Sevenoaks and Tunbridge Wells have excess nursing home accommodation. However, this excess capacity is relatively limited and the 'over supply' situation is quickly reversed in future years as the population grows.

Figure 3.5: Estimate of Older People Caseload (2011-2031)

	Population Aged 65+	Growth from 2011				Receiving a Service from KCC (District figures <u>exclude</u> social work, adult protection and adaptations)				
	2011	2016	2021	2026	2031	2011	2016	2021	2026	2031
Ashford	20,190	22%	40%	61%	84%	830	1,010	1,230	1,580	2,160
Canterbury	28,660	15%	26%	38%	55%	1,250	1,430	1,610	1,870	2,280
Dartford	14,060	14%	28%	45%	66%	780	890	1,030	1,240	1,600
Dover	22,720	19%	35%	53%	72%	1,140	1,350	1,610	1,990	2,570
Gravesham	16,440	11%	18%	27%	40%	790	880	950	1,050	1,210
Maidstone	26,850	16%	26%	38%	56%	1,150	1,340	1,500	1,730	2,120
Sevenoaks	21,890	14%	21%	30%	42%	750	850	930	1,030	1,180
Shepway	22,710	14%	24%	37%	53%	1,130	1,290	1,440	1,660	2,010
Swale	22,870	17%	28%	41%	59%	1,030	1,200	1,360	1,590	1,970
Thanet	28,590	10%	18%	27%	40%	1,460	1,610	1,740	1,930	2,230
Tonbridge & Malling	20,680	15%	25%	38%	55%	680	790	880	1,020	1,240
Tunbridge Wells	19,260	13%	21%	33%	50%	910	1,030	1,130	1,290	1,560
Kent	264,930	15%	26%	39%	55%	20,770	23,880	26,860	31,200	38,080

Source: thhp using KCC Research & Intelligence population forecasts 2012

Note: Kent total for those receiving a service from KCC is larger than sum of the Districts because it includes people receiving social work, adult protection and equipment and adaptation services. It was not possible to obtain these figures for the Districts. The District figures may include some double counting of clients as clients can receive more than one service

Figure 3.6: SHOP Forecasts of Additional Units Required Compared to 2012

	2015		2020		2030	
District	Extra Care	Nursing	Extra Care	Nursing	Extra Care	Nursing
Ashford	42	35	130	130	359	359
Canterbury	36	36	131	131	405	405
Dartford	18	18	54	54	180	180
Dover	36	36	117	117	356	356
Gravesham	22	22	72	72	198	198
Maidstone	59	109	171	221	468	518
Sevenoaks	27	27	94	94	253	283
Shepway	41	41	113	113	328	328
Swale	36	36	135	135	373	373
Thanet	22	22	90	90	328	328
Tonbridge & Malling	35	35	121	121	319	319
Tunbridge Wells	36	36	99	99	293	293
Kent	410	450	1,330	1,380	3,860	3,940

Source: SHOP@ model, Housing LIN

In order to achieve the additional units required, remodelling may be required. There will be a shift in commissioning intentions away from standard residential care into more tailored accommodation options and it is recognised that there will be individual workshops set for areas of over/under provision of services. The District Profiles will estimate more accurate forecasts and should be referred to as they will be updated more frequently

Figure 3.7: People with Learning Disabilities Estimate of Caseload

	Population					Prevalence of LD in Population (3%)					Receiving a Service from KCC (District figures <u>exclude</u> social work, adult protection and equipment and adaptations)				
	2011	2016	2021	2026	2031	2011	2016	2021	2026	2031	2011	2016	2021	2026	2031
Ashford	118,400	13%	26%	40%	44%	3,550	4,010	4,490	4,970	5,100	380	430	480	530	550
Canterbury	150,600	5%	8%	12%	15%	4,520	4,740	4,880	5,040	5,210	530	550	570	590	610
Dartford	97,600	10%	23%	34%	39%	2,930	3,230	3,620	3,910	4,070	200	220	250	270	280
Dover	111,700	5%	13%	20%	21%	3,350	3,530	3,780	4,020	4,040	490	510	550	580	590
Gravesham	101,800	1%	3%	5%	6%	3,050	3,100	3,150	3,210	3,250	220	230	230	240	240
Maidstone	155,800	2%	3%	4%	8%	4,670	4,780	4,830	4,880	5,030	450	460	470	470	490
Sevenoaks	115,400	0%	0%	0%	0%	3,460	3,450	3,470	3,460	3,470	200	200	200	200	200
Shepway	108,200	1%	4%	5%	7%	3,250	3,290	3,360	3,420	3,480	630	640	660	670	680
Swale	136,300	3%	6%	9%	11%	4,090	4,200	4,330	4,440	4,550	450	460	480	490	500
Thanet	134,400	2%	3%	4%	5%	4,030	4,100	4,170	4,210	4,250	530	540	550	560	560
Tonbridge & Malling	121,100	2%	5%	8%	10%	3,630	3,720	3,820	3,910	4,010	290	300	310	320	320
Tunbridge Wells	115,200	-1%	0%	1%	1%	3,460	3,430	3,470	3,480	3,500	310	310	310	320	320
Kent	1,466,500	4%	8%	11%	14%	44,000	45,590	47,500	49,000	50,000	4,540	4,610	4,790	4,950	5,050

Source: thhp using KCC Research & Intelligence Population Forecasts 2012

Note: Kent total for those receiving a service from KCC is larger than sum of the Districts because it includes people receiving social work, adult protection and equipment and adaptation services. It was not possible to obtain these figures for the Districts. The District figures may include some double counting of clients since clients can receive more than one service.

Figure 3.8: People with Mental Health Needs Estimate of Caseload

	Population					Prevalence of MH in Population (0.7%)					Receiving a Service from KCC (District figures <u>exclude</u> social work, adult protection and equipment and adaptations)				
	2011	2016	2021	2026	2031	2011	2016	2021	2026	2031	2011	2016	2021	2026	2031
Ashford	118,400	13%	26%	40%	44%	830	940	1,050	1,160	1,190	40	40	50	50	60
Canterbury	150,600	5%	8%	12%	15%	1,050	1,110	1,140	1,180	1,220	120	130	130	140	140
Dartford	97,600	10%	23%	34%	39%	680	750	840	910	950	5	10	10	10	10
Dover	111,700	5%	13%	20%	21%	780	830	880	940	940	60	70	70	70	80
Gravesham	101,800	1%	3%	5%	6%	710	720	740	750	760	10	10	10	10	10
Maidstone	155,800	2%	3%	4%	8%	1,090	1,110	1,130	1,140	1,180	60	60	60	60	60
Sevenoaks	115,400	0%	0%	0%	0%	810	810	810	810	810	20	20	20	20	20
Shepway	108,200	1%	4%	5%	7%	760	770	790	800	810	80	80	80	80	90
Swale	136,300	3%	6%	9%	11%	950	980	1,010	1,040	1,060	20	30	30	30	30
Thanet	134,400	2%	3%	4%	5%	940	960	970	980	990	200	210	210	210	210
Tonbridge & Malling	121,100	2%	5%	8%	10%	850	870	890	910	940	30	30	30	30	30
Tunbridge Wells	115,200	-1%	0%	1%	1%	810	800	810	810	820	90	90	90	90	90
Kent	1,466,500	4%	8%	11%	14%	10,270	10,640	11,050	11,430	11,660	3,550	3,680	3,820	3,950	4,030

Source: thhp using KCC Research & Intelligence Population Forecasts 2012. Figures rounded to nearest 10 and figures below 5 suppressed *

Note: Kent total for those receiving a service from KCC is larger than sum of the Districts because it includes people receiving social work, adult protection and equipment and adaptation services. It was not possible to obtain these figures for the Districts. The District figures may include some double counting of clients since clients can receive more than one service.

Figure 3.9: People with Physical Disabilities Estimate of Caseload

	Population aged 16-64					Prevalence of PD in Population (3%)					Receiving a Service from KCC (District figures exclude social work, adult protection and equipment and adaptations)				
	2011	2016	2021	2026	2031	2011	2016	2021	2026	2031	2011	2016	2021	2026	2031
Ashford	73,630	10%	21%	31%	32%	3,460	3,810	4,180	4,550	4,560	220	240	270	310	320
Canterbury	96,720	3%	3%	5%	7%	4,550	4,660	4,690	4,780	4,840	290	300	300	300	310
Dartford	63,530	9%	21%	30%	33%	2,990	3,260	3,630	3,870	3,960	130	140	150	170	180
Dover	68,800	1%	5%	8%	5%	3,230	3,270	3,380	3,500	3,390	220	220	230	240	230
Gravesham	64,630	-1%	-1%	0%	0%	3,040	3,000	3,010	3,040	3,020	170	170	170	170	170
Maidstone	99,100	-1%	-2%	-3%	-1%	4,660	4,610	4,560	4,530	4,590	250	250	250	250	250
Sevenoaks	70,980	-5%	-8%	-10%	-11%	3,340	3,160	3,080	3,010	2,960	160	150	150	150	140
Shepway	66,300	-3%	-4%	-6%	-7%	3,120	3,030	2,990	2,940	2,910	340	330	330	320	320
Swale	86,090	-1%	-1%	0%	0%	4,050	4,010	4,020	4,050	4,060	220	220	220	220	220
Thanet	80,110	-1%	-3%	-4%	-5%	3,770	3,710	3,660	3,630	3,590	280	270	270	270	270
Tonbridge & Malling	75,470	-1%	0%	1%	0%	3,550	3,520	3,550	3,570	3,560	190	190	190	200	200
Tunbridge Wells	72,450	-5%	-7%	-8%	-9%	3,410	3,230	3,180	3,130	3,110	250	240	240	230	230
Kent	917,810	0%	2%	3%	3%	44,000	43,300	43,900	44,600	44,600	5,940	5,960	6,050	6,150	6,140

Source: thhp using KCC Research & Intelligence Population Forecasts 2012. Figures rounded to nearest 10 and small figures (lower than 5) suppressed *

Note: Kent total for those receiving a service from KCC is larger than sum of the Districts because it includes people receiving social work, adult protection and equipment and adaptation services. It was not possible to obtain these figures for the Districts. The District figures may include some double counting of clients since clients can receive more than one service.

People with Learning Disabilities

20. Figure 3.7 makes a simple projection of the number of people with learning disabilities needing support in the future. It is based on the forecast population of people with learning disabilities in those years and the current proportion of people who receive support. This estimate suggests:
- Based on population growth, there is likely to be an additional 6,000 people with learning disabilities in Kent in 2031.
 - There will be an additional 600 people receiving a service from KCC
21. Estimates do not reflect efforts to reduce the number of people living in care home accommodation. In the last 3 years, the number of people with learning disabilities placed in care homes in Kent has fallen despite growth in the population as a whole.
22. These estimates also do not take into account potential increases in the prevalence of learning disabilities in the population. The Centre for Disability Research's 2008 report argues that three factors will lead to an increase in prevalence rates for adults with learning disabilities:
- An increase in the number of younger adults in south Asian ethnic population – with higher rates of learning disabilities
 - Increased survival rates for young people with complex and severe disabilities
 - Reduced mortality among adults with learning disabilities.
23. Figure 3.7 uses KCC population forecasts. If the ONS populations projections were used the scale of growth for Kent as a whole would be significantly higher and projections for the individual Districts would differ with higher levels of growth in the West Kent authorities.
24. A large proportion of people with learning disabilities have autistic spectrum disorder. National research suggests this could be as high one third of those with learning disabilities. In the population as a whole, around 1% of people have some form of autism. If this proportion holds true within Kent, this equates to 14,700 in 2011 (including children and adults). It is likely to expand to 15,800 in 2021 and 16,700 in 2031 if the population of people with autism grows in line with the population as a whole.

People with Mental Health Needs

25. Figure 3.8 makes a simple projection of the number of people with mental health needs requiring support in the future. It is based on the forecast population of people with mental health needs in those years and the current proportion of people who receive support. Evidence at the national level suggests that the prevalence of mental illness within the population as a

whole is 0.7%.⁵ Mental illness is defined as schizophrenia, bipolar disorder and other psychoses. This rate is used to project the future population of people with mental health needs.

26. When these proportions are applied to the population in Kent in 2011 and projected population over the next 20 years this suggests:

- 10,400 people have a serious mental illness in 2011
- 11,000 people in 2021 will have a serious mental illness, a rise of 700 people from 2011
- 11,700 people in 2031 will have a serious mental illness, a rise of 1,400 people from 2011

27. Estimates are also provided for the demand that might fall on KCC. This estimate suggests:

- Based on population growth, there is likely to be an additional 1,400 people with mental health needs in Kent in 2031.
- There will be an 550 additional people receiving a service from KCC

28. Based on the current proportion of the population that receive mental health services from KCC, there is likely to be limited absolute growth in demand from people with mental health needs over the next 10-20 years (Figure 3.8). Again, this distribution of demand between the local authority areas reflects the current pattern of accommodation rather than where needs arise.

⁵ Figure for England from the UK Health Statistics 2010 from GP practice data 2009-10 9 (ONS)

People with Physical Disabilities and Sensory Impairments

29. Figure 3.9 makes a simple projection of the number of people with physical disabilities needing support in the future. It is based on the forecast population of the working age population, prevalence of disability in this group and the current proportion of people who receive services from KCC. We have assumed that the prevalence of disability within the working age population will not change over the next 20 years.
30. Estimates are also provided for the demand that might fall on KCC. This estimate suggests:
- Based on population growth, there is likely to be an additional 600 people with physical disabilities in Kent in 2031.
 - There will be 200 additional people receiving a service from KCC.
 - Overall, these modest numbers reflect declines in the working age population in many of the Districts over the period and the knock on effect this has on the number of people of working age with a physical disability.
14. Based on the current proportion of the population that have physical disability service with KCC, there is likely to be limited absolute growth in demand from people with physical disabilities over the next 10-20 years. However, these projections do not take account of changes in the prevalence of physical disability in the working age population.

4. Accommodation within Kent

Existing stock

1. This section sets out evidence on the stock of existing accommodation for the different client groups. It focuses on specialist accommodation, primarily care homes, which are identified and provided for specific client groups. However, it is relevant to note that the majority of people in each client group live in the mainstream housing stock and their care needs are met in their own homes.

Accommodation for People with Learning Disabilities

Figure 4.1: Care Home Accommodation for People with Learning Disabilities

District	Learning Disability		Autism & Challenging Behaviours		Learning & Physical Disability		Total		
	Care Homes	Beds	Care Homes	Beds	Care Homes	Beds	Care Homes	Beds	Per 1,000 population
Ashford	19	119	3	22			22	141	1.2
Canterbury	28	296	1	21	1	9	30	326	2.2
Dartford	2	17	1	12			3	29	0.3
Dover	24	245	1	5			25	250	2.2
Gravesham	10	87	1	3			11	90	0.9
Maidstone	16	111	2	24			18	135	0.9
Sevenoaks	6	55					6	55	0.2
Shepway	50	342	2	7			52	349	3.0
Swale	23	201	4	50	1	64	28	315	2.9
Thanet	21	214	2	6			23	220	1.6
Tunbridge Wells	11	157					11	157	1.2
Tonbridge & Malling	8	66					8	66	0.5
Kent Total	220	1,910	20	150	2	70	240	2,130	1.5

Source: Kent County Council. Total rounded to nearest 10

2. There are 240 care homes providing 2,130 beds in Kent for people with learning disabilities (Figure 4.1). **Through data quality and a large number of CQC registrations, this number has dramatically increased since the work was undertaken in November 2013. The current count of care homes for people with a learning disability is approximately 300 which is far in excess of what is and will be required in Kent. A strategy for people with a Learning Disability is being developed which will see a dramatic reduction of people receiving a service in residential care in the future.** Based on the table above, on average across the County there are 1.5 beds for every 1,000 people in the population as a whole. However, Canterbury, Dover, Shepway and Swale have above average supply and Dartford, Sevenoaks and Tonbridge and Malling have very limited supply compared to the Kent average. There is a broad pattern of higher numbers of care homes and beds in the east of the county and fewer in the west.

3. The number of beds in care homes in Kent (2,130) outweighs the number of people with learning disabilities placed in care homes by KCC (1,220). There are a number of reasons for this:

- Some care homes in the County may have spare beds and may be operating below their capacity.
- Care homes may be occupied by people who are placed from outside of the County by other local authorities.
- Care home beds may be occupied by some people or their families who have sought and funded their own care and accommodation.
- The NHS fund people in residential care.

Figure 4.1b: Supported Accommodation for People with Learning Disabilities

District	Supported Housing Units
Ashford	27
Canterbury	38
Dartford	52
Dover	39
Gravesham	35
Maidstone	83
Sevenoaks	13
Shepway	55
Swale	7
Thanet	73
Tonbridge & Malling	54
Tunbridge Wells	94
Kent	570

Source: Kent County Council

4. Section 2 found that there were 840 people with learning disabilities living in supported accommodation. This is typically either a single dwelling or a small cluster of apartments. Clients are often supported by a live in or visiting carer. Section 2 also presents data on how supported accommodation is used by the different area teams. However, Figure 4.1b above suggests that there are 570 supported housing units for people with learning disabilities within Kent. The discrepancy between the figures might be explained by the way units are classified in the data – with some units not being classified as supported housing even though the individual receives a supported housing service. In some cases, the units may not have been designed for a supported housing purpose. There might also be some placements of people outside of the County to access supported accommodation in the same way that those accessing care homes may be placed outside of the County. It would be useful for FSC, Kent County Council to review the way supported housing is recorded on its systems in the future to develop a clear picture of the demand for and supply of supported accommodation. This is particularly important if the

strategy aims to reduce reliance on care home accommodation for this group and expand supported housing over time.

Accommodation for People with Mental Health Needs

5. There are 34 care homes providing 520 beds within Kent for people with mental health needs. The largest number of beds are located in Thanet, Canterbury and Shepway. 30% of all care home beds for people with mental health needs are located within Thanet. There is no provision in Dartford, Sevenoaks or Tonbridge and Malling, although people with mental health needs are placed in supported accommodation in these areas.

Figure 4.2: Care Home Accommodation for People with Mental Health Needs

District	Care Homes	Beds	Per 1,000	Supported Accommodation	Units
Ashford	1	5	0.04	3	20
Canterbury	4	90	0.60	6	38
Dartford			0.00	6	35
Dover	2	40	0.36	1	7
Gravesham	2	19	0.19	6	33
Maidstone	1	13	0.08	7	38
Sevenoaks			0.00	7	50
Shepway	4	51	0.47	5	41
Swale	1	26	0.19	7	38
Thanet	9	156	1.16	6	94
Tunbridge Wells	3	28	0.23	2	37
Tonbridge & Malling			0.00	3	16
Out of County	7	89			
Kent Total	34	517	0.35	59	447

Source: Kent County Council

6. The stock of beds in care homes (520 beds) outweighs the number of people with mental health needs placed in care homes by KCC (225 people). There are a number of reasons for this:
 - Some care homes in the County may have spare beds and may be operating below their capacity.
 - Accommodation may be occupied by people who are placed from outside of the County by other local authorities.
 - Care home beds may be occupied by some people or their families who have sought and funded their own care and accommodation.
 - The NHS fund some people in residential care.
7. A further 230 people with mental health needs are accommodated in supported accommodation. Section 2 presents data on how supported accommodation is used by the different area teams but does not indicate the location of that supported accommodation. It is

important to keep in mind that the mental health teams often place clients in other local authority districts to access suitable accommodation.

Accommodation for Older People

8. There are over 17,900 sheltered units for older people in Kent. This housing is specialist accommodation for older people and not part of the mainstream housing stock in the respect that occupancy is restricted to older people. However, sheltered housing does not usually include any onsite care provision, beyond a visiting or live in warden, and so in many respects it is no different to mainstream housing. There are 144 sheltered units per 1,000 of the population aged 75 and over. This ratio exceeds the ratio of 125 sheltered units per 1,000 in 'More Choice, Greater Voice'.

Figure 4.3: Sheltered Accommodation for Older People (including 'enhanced')

District	Total	Per 1,000 population 75+
Ashford	1,530	167
Canterbury	1,810	128
Dartford	580	85
Dover	1,380	130
Gravesham	950	123
Maidstone	1,780	145
Sevenoaks	1,680	103
Shepway	2,160	208
Swale	1,820	168
Thanet	1,980	199
Tunbridge Wells	1,040	74
Tonbridge & Malling	1,240	133
Kent Total	17,900	144

Source: Kent County Council

9. Evidence on lettings within the sheltered stock owned and managed by local authorities and housing associations in the County suggests that there is an issue with the popularity of some schemes leading to voids and consequently the letting of these properties to younger and sometimes vulnerable people with problems of addiction. In 2013, over one third of sheltered lettings were to people under the age of 65. A small number were let to people aged 45-55.
10. Overall, the availability of sheltered accommodation to those on local authority waiting lists is much better than for mainstream properties and there is a bias towards sheltered lettings in annual re-lets within the social rented stock.⁶ This gives an indication of the relatively availability of sheltered accommodation compared to other types of housing.

⁶ Kent Home Choice data from October 2013 based on lettings in two years previously

11. Beds in Extra Care facilities are less numerous, with just under 400 currently in Kent with nominations agreements accessible to local authorities (Figure 4.4) and a further 100 under development (see below for further detail).

Figure 4.4: Extra Care Accommodation for Older People

District	Schemes	Units	Per 1,000 75+
Ashford	1	40	4.37
Canterbury	1	40	1.41
Dartford	1	20	2.87
Dover	1	40	1.78
Gravesham	1	58	3.56
Maidstone	2	97	3.66
Sevenoaks		20	0.00
Shepway	1	40	1.85
Swale			0.00
Thanet	1	40	1.77
Tunbridge Wells			0.00
Tonbridge & Malling			0.00
Kent Total	9	395	1.51

Source: Kent County Council

12. There are also a range of intermediate care beds in the County (Figure 4.5) which are used for short term care and accommodation to promote recovery from illness and to maximise independent living. Intermediate Care is commissioned jointly by the seven Clinical Commissioning Groups in Kent and KCC.
13. There are around 770 short term beds across Kent, with the highest number in East Kent. Of these, 520 are used for intermediate care and enablement only. Figure 4.6 suggests that only 2 of the 7 CCG areas in Kent have a supply of intermediate beds that is below the national benchmark of 26 beds per 100,000 population.⁷ There are plans to review the community hospital provision, commissioned activity and review the intermediate care service to make sure it is working at optimum capacity. It is widely recognised that the effectiveness of intermediate care is not about the availability of the bed but about the team around the person. The targeted time for an intermediate care bed is 6 weeks, however there are many instances where people far outstay this period. If a service frequently has an individual staying in a bed for 13 weeks at a time, it can only accommodate 4 people a year. However, if the average stay is 4 week, 13 people will move through that service within a year.

⁷ NHS Benchmarking National Audit of Intermediate Care 2012/13

Figure 4.5: Short Term Accommodation in Kent

Type	Number	Beds	East Kent	North Kent	West Kent	Predominant Use
Community Hospital	12	315	79	113	123	Step down from hospitals
KCC In House	6	144	70	47	27	Short term respite and assessment
Integrated Care Centres	3	200	120	80	0	Intermediate care, respite & assessment – short term
KCC Commissioned in Private Homes	9	33	7**	7	19***	Respite to prevent hospital admissions
Secondary Care Beds	5	74	50*	2	22	
Intermediate Care	1	2	2	0	0	
Total	36	768	328	249	191	

Source: Kent County Council

*Includes 10 in tender process

**Contract for all 7 ends in December 2013

***Contract for 4 beds ends in December 2013

Figure 4.6: Short Term Beds by Clinical Commissioning Group Area

CCG Area	Intermediate Care Beds	Enablement Beds	Respite /Short Term	Short term beds not accessible by KCC (NHS)	Total Intermediate and Enablement	All 'short term' beds (respite, enabling & intermediate)	Population (2012 Mid Year Estimate)	Intermediate Care Beds Per 100,000 population	Beds shortfall/surplus
Ashford	30	20	30		50	80	120,100	41.6	18
Canterbury & Coastal	53	10	28		63	91	200,300	31.5	10
Dartford, Gravesham & Swanley	49	7	62	20	56	138	249,200	22.5	-9
South Kent Coast	48	35	15		83	98	203,000	40.9	30
Swale	64	0	47		64	111	108,200	59.1	35
Thanet	30	0	30		30	60	135,700	22.1	-6
West Kent	123	51	0	17	174	191	463,700	37.5	52
Kent	397	123	212	37	520	769	1,748,400	29.7	59
England								26.3	

Source: KCC, NHS

14. There are over 8,200 beds in residential care homes for older people in Kent and a further 3,730 beds in nursing homes – almost 12,000 beds in care homes in total. This amounts to 66 residential care home beds per 1,000 of the 75+ population and 30 nursing care beds per 1,000 of the 75+ population. Around 4,370 beds in these residential and nursing care homes offer specialist dementia care (Figure 4.9).
15. Figure 4.7 presents data on the number of residential care homes and beds within these. These homes also include residential care homes that provide some nursing care, though residential is their primary function. Residential care homes are concentrated in Canterbury, Dover, Shepway, Swale and Thanet which together account for 60% of residential care homes in the County. These five authorities have over 70 beds per 1,000 of 75+ population, compared to 65 in Kent as a whole and below average provision in Dartford, Sevenoaks and Tonbridge and Malling. Overall, there is a strong bias of accommodation in the east of the County.
16. Figure 4.8 shows the number of nursing care homes. These are homes where only nursing care is provided. The number of nursing home beds is more evenly distributed across the County, with each District having between 3-500 beds. Compared to the size of the older population there are relative concentrations in Dartford, Maidstone and Tunbridge Wells.

Figure 4.7: Residential Care Homes for Older People

District	Care Homes	Beds	Per 1,000 65+	Per 1,000 75+
Ashford	16	590	29.7	64.7
Canterbury	37	1,090	38.4	77.4
Dartford	9	320	22.9	46.7
Dover	28	830	36.9	78.4
Gravesham	14	440	27.3	57.1
Maidstone	21	670	25.2	54.5
Sevenoaks	13	440	20.1	41.9
Shepway	33	840	37.7	78.0
Swale	19	730	32.4	73.7
Thanet	41	1,250	44.0	88.6
Tunbridge Wells	17	550	26.8	58.3
Tonbridge & Malling	12	450	23.5	47.5
Kent Total	260	8,200	31.3	65.7

Source: Kent County Council

Figure 4.8: Nursing Homes for Older People

District	Care Homes	Beds	Per 1,000 65+	Per 1,000 75+
Ashford	4	220	11	24
Canterbury	9	380	13	27
Dartford	7	470	34	68
Dover	5	210	9	20
Gravesham	4	250	15	32
Maidstone	8	480	18	39
Sevenoaks	6	290	13	28
Shepway	8	280	12	26
Swale	3	190	8	19
Thanet	7	270	10	19
Tunbridge Wells	8	400	20	43
Tonbridge & Malling	5	290	15	31
Kent Total	74	3,730	14	30

Source: Kent County Council

Figure 4.9: Care Homes for Dementia Care

District	Care Homes	Beds	Per 1,000 65+	Per 1,000 75+
Ashford	4	290	14.3	31.1
Canterbury	19	570	20.0	40.4
Dartford	7	410	29.1	59.2
Dover	15	460	20.3	43.1
Gravesham	8	280	17.4	36.5
Maidstone	15	540	20.2	43.8
Sevenoaks	5	290	13.2	27.5
Shepway	11	310	13.8	28.6
Swale	9	420	18.6	42.4
Thanet	9	450	15.7	31.7
Tunbridge Wells	6	190	9.5	20.7
Tonbridge & Malling	6	170	9.1	18.4
Kent Total	114	4,370	16.7	35.0

Source: Kent County Council

17. Overall, there are around 20,700 older people receiving a service from KCC. This compares to around 12,000 beds in care homes and a further 17,900 units in specialist accommodation for older people. It is important to note:

- Many older people will meet their own needs for care and accommodation and so the stock, particularly sheltered accommodation, will be occupied by people in the private sector as well as those receiving support from KCC.
- There are moves into Kent from outside of the County, particularly to care homes in the coastal areas.

- Some accommodation is not operating at full capacity and there is a concern that some is unsuitable for older people today.
- The stock of specialist accommodation for older people is overwhelmingly biased towards sheltered accommodation and care homes.
- The supply of short term beds is often used reactively to relieve hospital pressures rather than proactively to prevent crisis and manage an individual's care in an integrated way.

Accommodation for People with Physical Disabilities

18. Figure 4.10 shows that there are 23 care homes for people with physical disabilities, of which 7 provide specialist care for those with sensory impairments. There are 520 beds available in these home, of which 110 specialise in care for those with sensory impairments.

Figure 4.10: Care Homes for People with Physical Disabilities

	PD		PD & LD		PD Nursing		PD Sensory		Total	
	Homes	Beds	Homes	Beds	Homes	Beds	Homes	Beds	Homes	Beds
Ashford	1	45							1	45
Canterbury	5	100	1	9			1	27	7	136
Dartford					1	26			1	26
Dover									0	0
Gravesham									0	0
Maidstone	1	21							1	21
Sevenoaks	1	22							1	22
Shepway	2	54			1	24			3	78
Swale			1	64					1	64
Thanet							6	82	6	82
Tunbridge Wells	1	32							1	32
Tonbridge & Malling	1	10							1	10
Out of County									0	0
Kent	12	284	2	73	2	50	7	109	23	516

Source: Kent County Council

Pipeline

19. At the time of writing, there are almost 1,600 beds in schemes attracting FSC clients with planning permission in Kent. A large proportion (28%) are planned in Ashford. Almost half are residential care homes (47%), with a further 23% sheltered housing, 16% nursing care homes, 6% extra care and 3% supported accommodation. A further 840 beds are in the pipeline awaiting decision, including over 300 extra care beds.

20. This suggests that the development pipeline broadly reflects the existing patterns of development in the County although there are a number of extra care schemes awaiting a planning decision.

Figure 4.11: Pipeline of Schemes with Planning Permission (by Type)

Type	Total
Residential Care Beds	752
Sheltered	371
Nursing Care Beds	246
Extra Care (including Dementia) Beds	96
Supported Living Beds	50

Source: Kent County Council

Figure 4.12: Pipeline of Schemes with Planning Permission (Number of Beds)

District	Total
Ashford	439
Canterbury	129
Dartford	35
Dover	124
Maidstone	117
Shepway	246
Sevenoaks	83
Swale	153
Thanet	57
Tonbridge and Malling	33
Tunbridge Wells	169
Kent	1,585

Source: Kent County Council

Developers are urged to discuss any plans early with Kent County Council FSC. Strategic Commissioning officers are already working with a number of developers across the County in supporting planning applications for accommodation with care. Where FSC has not been involved, it may be that the application would not be supported as there are planned developments very close by and an additional scheme is not required in that area.

5. Summary

Comparison of Need and Stock

- Figure 5.1 provides a headline summary of the number of people receiving a service from KCC and the accommodation for different client groups and the projected number of people needing accommodation in future years.

Figure 5.1: Summary Table, Kent

2013	Learning Disabilities	Mental Health	Physical Disabilities	Older People
Population (estimated)	44,000	10,400	43,100	262,300
Service from KCC	4,450	3,500	6,000	20,700
<i>In residential care</i>	1,210	225	210	2,850
<i>In nursing care</i>	10		70	1,500
<i>supported accommodation</i>	840	240	180	260
<i>mainstream housing</i>	2,390	3,040	5,540	16,090
2021	Learning Disabilities	Mental Health	Physical Disabilities	Older People
Population (estimated)	47,300	11,000	43,900	333,800
Service from KCC	4,790	3,820	6,000	26,900
2031	Learning Disabilities	Mental Health	Physical Disabilities	Older People
Population (estimated)	50,000	11,660	44,600	406,570
Service from KCC	5,050	4,030	6,140	38,080

Source: thhp summary of previous tables, rounded to nearest 10

- Figure 5.2 provides an overview of the specialist accommodation currently available for the different client groups within Kent.

Figure 5.2: Accommodation Overview (Number of Beds), Kent

2013	Learning Disabilities	Mental Health	Physical Disabilities (including sensory)	Older People
Residential care home	2,130	510	390	8,200
Nursing care home	-	-	50	3,700
Extra care	-	-	-	400
Intermediate Care*				770
Sheltered housing	-	-	-	17,900
Supported housing**	570	240	180	260
Adapted properties in mainstream housing	16,600 adapted properties (minimum estimate) 1,400 Life Time Homes standard new build properties (minimum estimate)			

Source: Kent County Council *Intermediate care beds allocated to older people but these are also used by client groups to a lesser extent **Estimated stock by number of people living in supported. Actual stock may be higher.

3. The following observations can be made:

- a. Across all client groups, the majority of people are accommodated in mainstream housing – their own homes. This is true for those that receive a service of some kind from FSC as well as the wider population for each client group. There is also clearly demand from people in these client groups for mainstream housing:
 - i. Across the Kent authorities there are 670 people with learning disabilities on local authority housing waiting lists – 3% of all applicants. The largest numbers of people are on the waiting lists for Dover, Shepway and Swale – each with over 100 people with learning disabilities registered. This is by no means an accurate representation of the need for mainstream housing from those with learning disabilities but gives an indication of the scale of demand.
 - ii. There are 260 applicants on local authority housing waiting lists across Kent that need a home which is wheel chair accessible. This represents about 1% of all applicant households. However, there are many more applicants with physical disabilities on waiting lists but do not necessarily need wheelchair accessible properties and their specific needs will be varied.
 - iii. There are 3,500 older people on local authority housing waiting lists across Kent – accounting for 14% of all applicants. They are more likely than other households to offered housing in the social rented stock because of the supply of sheltered accommodation. But anecdotal evidence suggests some schemes are not popular with older people and as a result have been let to younger and sometimes vulnerable households.
- b. Across all client groups there are more beds in care homes than people accommodated in care homes by FSC KCC. Care home beds are used by those arranging their own care and accommodation privately, particularly amongst older people who do not qualify or financial support. They are also used by local authorities outside of Kent to place vulnerable people.
- c. With the exception of those with mental health needs, more people are accommodated in care homes than in supported housing. There is very little supported housing in the development pipeline with planning permission. It is also very difficult to obtain a clear picture of the scale of supported housing supply and this might be improved by reviewing how supported housing is recorded on KCC's systems.
- d. The distribution of care home accommodation is biased towards the east of the county and this has an effect on where people are placed when they need specialist accommodation.
 - i. There are higher concentrations of older people in care homes in the east of the County – Dover, Shepway and Thanet. In these Districts there are over 19 people

per 1,000 of the older population in a care home, compared to 16.6 in Kent as a whole.

- e. Placements of people with learning disabilities, mental health needs and physical disabilities who need care home accommodation are often in non neighbouring authority areas, implying that they have to move some distance from their home to access suitable care and accommodation.
 - i. On average across Kent, 38% of people with learning disabilities are placed in care homes in their home authority. A further 30% are placed in a care home in a neighbouring authority. However, 32% are placed in a non-neighbouring authority and are therefore likely to have been required to move some distance from their place of origin.
 - ii. Under half of these people with physical disabilities are placed within care homes in their home local authority area and a further 24% in a neighbouring local authority. Almost one third are placed in non-neighbouring authority areas. Some of these placements will reflect the location of specialist care facilities.
 - iii. The majority of older people who have been placed in residential and nursing homes in Kent have been placed within their home authority, with the exception of Sevenoaks and Tonbridge and Malling. Overall, the highest numbers of placements last year were made **from** Canterbury, Maidstone, Shepway and Thanet and this broadly corresponds to the larger populations of older people living in these authority areas. Similarly, the highest numbers of people were place **in** the same Districts. This might indicate greater capacity in these authority areas to accommodate older people in care homes.
- f. There is a heavy bias towards sheltered accommodation in the stock of specialist housing for older people but this does not meet the care needs of older people. Extra care has the potential to provide accommodation and care but the number of developments are limited at present and there remains a bias towards sheltered rather than extra care in the development pipeline.