Penny Southern

Director for Disabled Children, Adults Learning Disability and Mental Health

Kent County Council

Kent Social Care Accommodation Strategy

Better Homes: Greater Choice

July 2015

Kent Housing Group
The Voice of Housing in Kent

NHS

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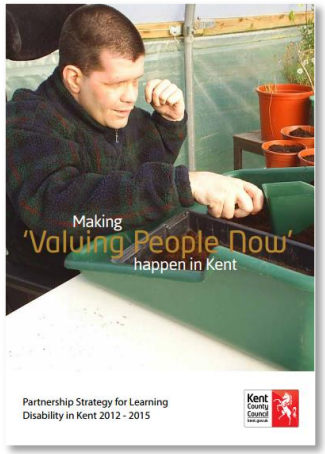
Welcome and Agenda

Agenda:

- Kent County Council Vision
- Accommodation Strategy
- Alternative Models of Care Project
- Next Steps

Kent County Council's Vision



The Vision from the Partnership Strategy for Learning Disability in Kent 2012 – 2015

- **Citizenship:** Being treated as an equal citizen in society and supported to enact your rights and fulfil your responsibilities
- **What You Do:** Having a fulfilling life of your own, including opportunities to work, study, enjoy leisure and social activities and to have relationships and friendship
- **Where You Live:** Real choice over where you live and with whom
- **Health:** Mainstream health services providing you with good, accessible health care
- **Bold Steps:** Partnership working to induce innovation and improve efficiency by giving people new power to influence the areas above *(now replaced by facing the challenge)*

The key messages are:

- People with learning disabilities have the ***same rights*** & are entitled to the ***same opportunities*** in their communities as anyone else
- It's more important than ever that services are providing ***value for money***
- We need ***transformation*** in the way services are delivered to the public
- We will deliver **quality, personalised services** so that each individual gets the support they need
- Emphasis on ***alternative ways of providing housing*** that people want and need
- Opportunities to achieve efficiency through ***different approaches to strategic tendering***
- Care Act legislation regarding Ordinary Residence

Intent has been set to look at alternative models of care to support journey for the individual at best value for money

"Our intention is to commission fewer residential placements over the next three years and give people living in residential care the opportunity to move into other models of care"

Christy Holden

Head of Commissioning (Accommodation)

Kent County Council

July 2015

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Why we need an Accommodation Strategy

- KCC spends £180m on residential and nursing care
- The right type of accommodation in the right place
- Stimulate the market or directly intervene
- Inform planning applications
- Secure better outcomes and make savings
- Quality and safeguarding

Development of the Strategy

- Joint KCC, NHS and KHG document supported by KPOG and the DH Housing LIN
- Analysis of KCC case load, placement patterns, availability of services
- Engaged with local teams, CCG's, District Councils in its development
- Formal approval and launch in July 2014

Accommodation Strategy Overview

- Dynamic strategy
- On-line with links
- Evidence Base
- Case studies
- Maps
- Design Principles
- District Profiles
- Key findings by user group
- Financial Impact
- District aligned with CCG Consideration

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Accommodation Strategy for Adult Social Care

Better Homes: Greater Choice

This Strategy identifies how the provision, demand and aspiration for housing, care and support services will be met for adult social care clients should they need to move to access care. KCC's vision is that people should live independently in their own home receiving the right care and support. However, if that option is no longer suitable, the right accommodation solutions have to be in the right places across the county, and they have to be the right type, tenure and size. This vision is coupled with improved commissioning of services across each of the six adult social care client groups.

Kent County Council has a statutory responsibility to fund people who are eligible for care services and it has become essential to agree a strategic direction and provide clear market positions statements to all providers who want to work and develop in Kent.

Social Care, along with Health, is experiencing unprecedented change and will face many challenges in future. The foundation of this strategy is the necessity to form partnerships and work coherently to ensure that the current and future needs of the clients eligible for services are met, providing clients with greater choice and access to high quality housing and care home accommodation.

The development of this Accommodation Strategy will compliment district and borough housing strategies and will ensure that all future provision delivered is co-ordinated, mapped and sustainable.

Read our strategy

Kent Social Care Accommodation Strategy (PDF, 2.7 MB)

Supporting documents

Accommodation Strategy equality analysis impact assessment (PDF, 287.5 KB)

Accommodation Strategy health impact *assessment (PDF, 1.3 MB)*

Draft district profiles (PDF, 434.2 KB)

Kent district profiles (XLS, 113.0 KB)

Adult accommodation evidence – final report (PDF, 1.2 MB)

Draft care home standards (PDF, 213.2 KB)

Final extracare design principles (PDF, 266.5 KB)

Draft learning disability care home design principles (PDF, 144.2 KB)

Draft older people's care home design principles (PDF, 225.4 KB)

Accommodation Strategy maps

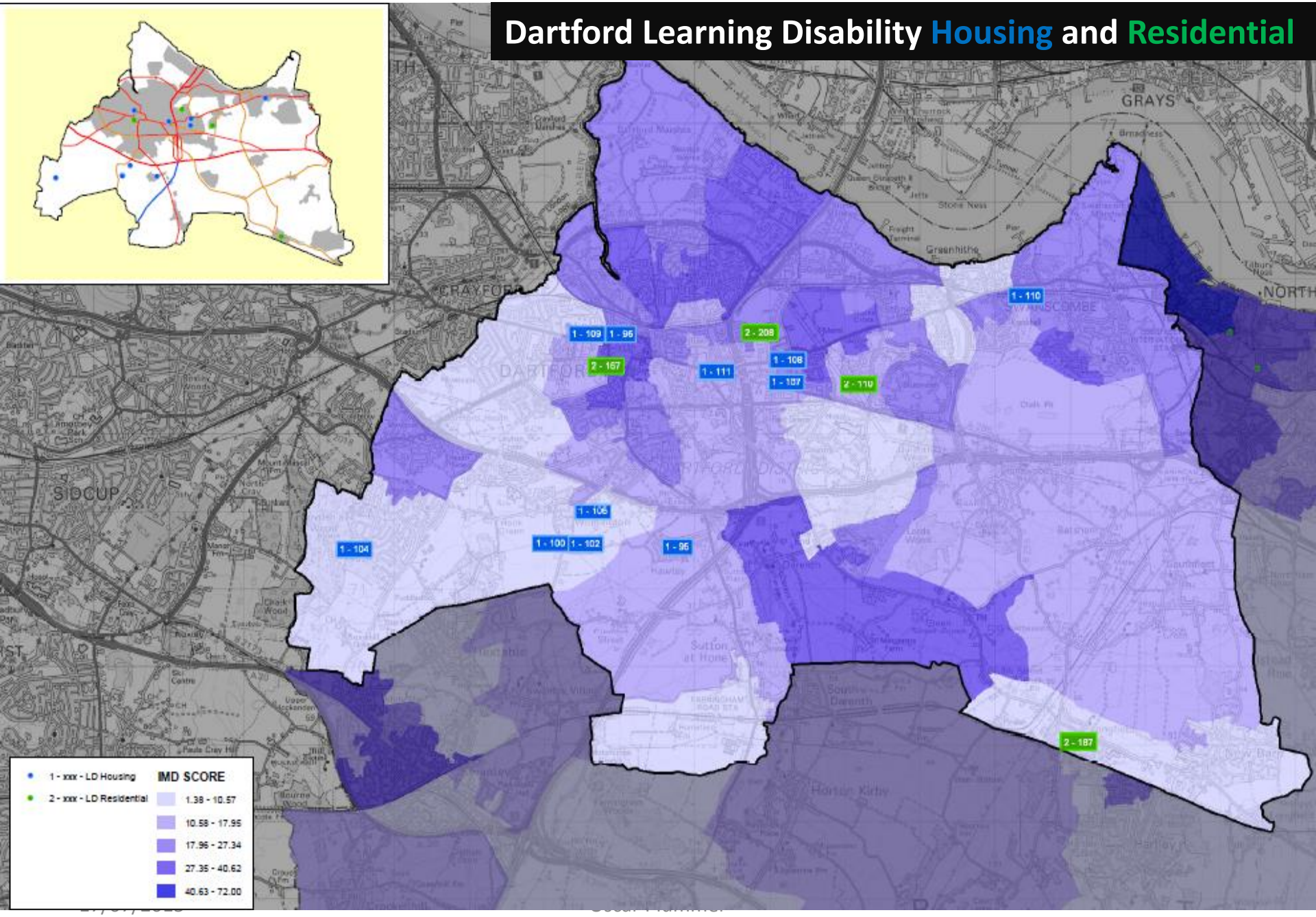
Learning disability

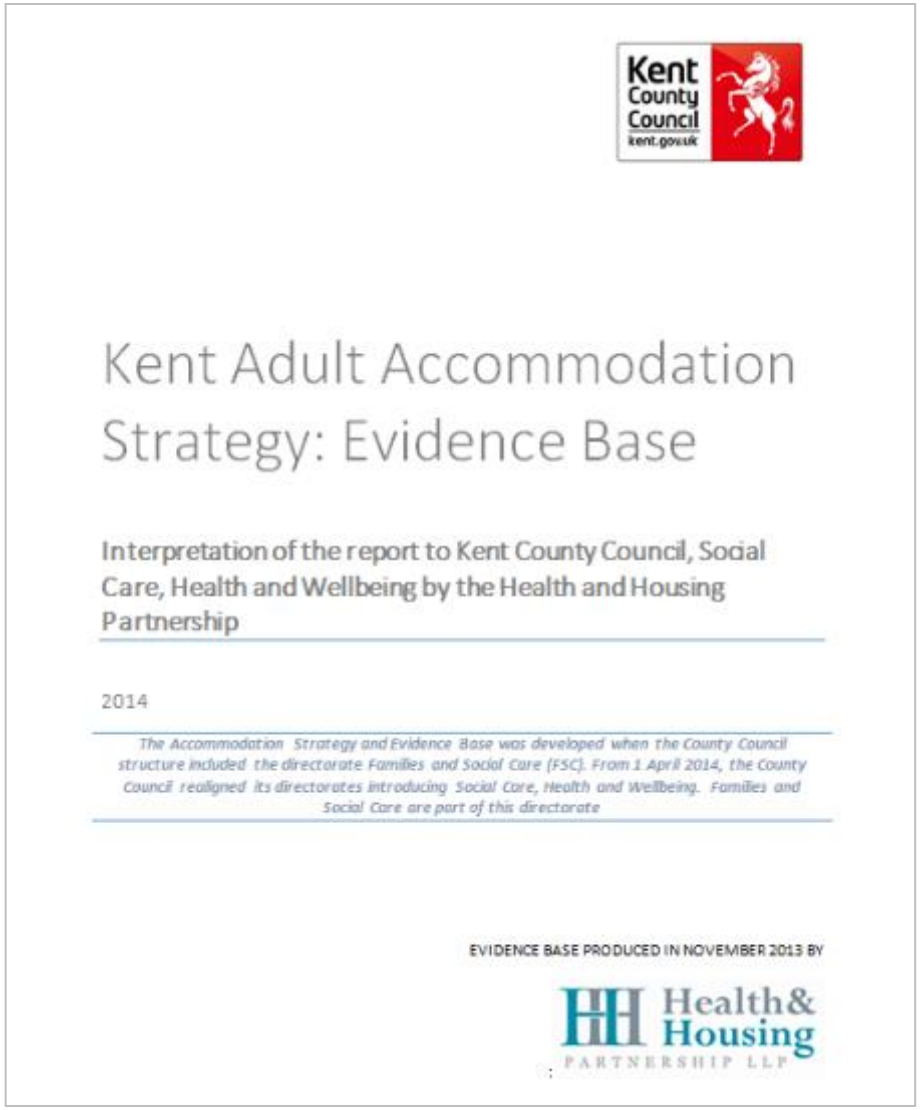
Mental health

Older people

- Learning disability map - Kent (PDF, 3.9 MB)
- Learning disability map - Ashford (PDF, 1.0 MB)
- Learning disability map - Canterbury (PDF, 889.3 KB)
- Learning disability map - Dartford (PDF, 1.4 MB)
- Learning disability map - Dover (PDF, 908.6 KB)
- Learning disability map - Gravesham (PDF, 1.2 MB)
- Learning disability map - Maidstone (PDF, 910.0 KB)
- Learning disability map - Sevenoaks (PDF, 969.4 KB)
- Learning disability map - Shepway (PDF, 889.0 KB)
- Learning disability map - Swale (PDF, 939.6 KB)

Dartford Learning Disability Housing and Residential





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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

Health& Housing PARTNERSHIP LLP

Evidence base

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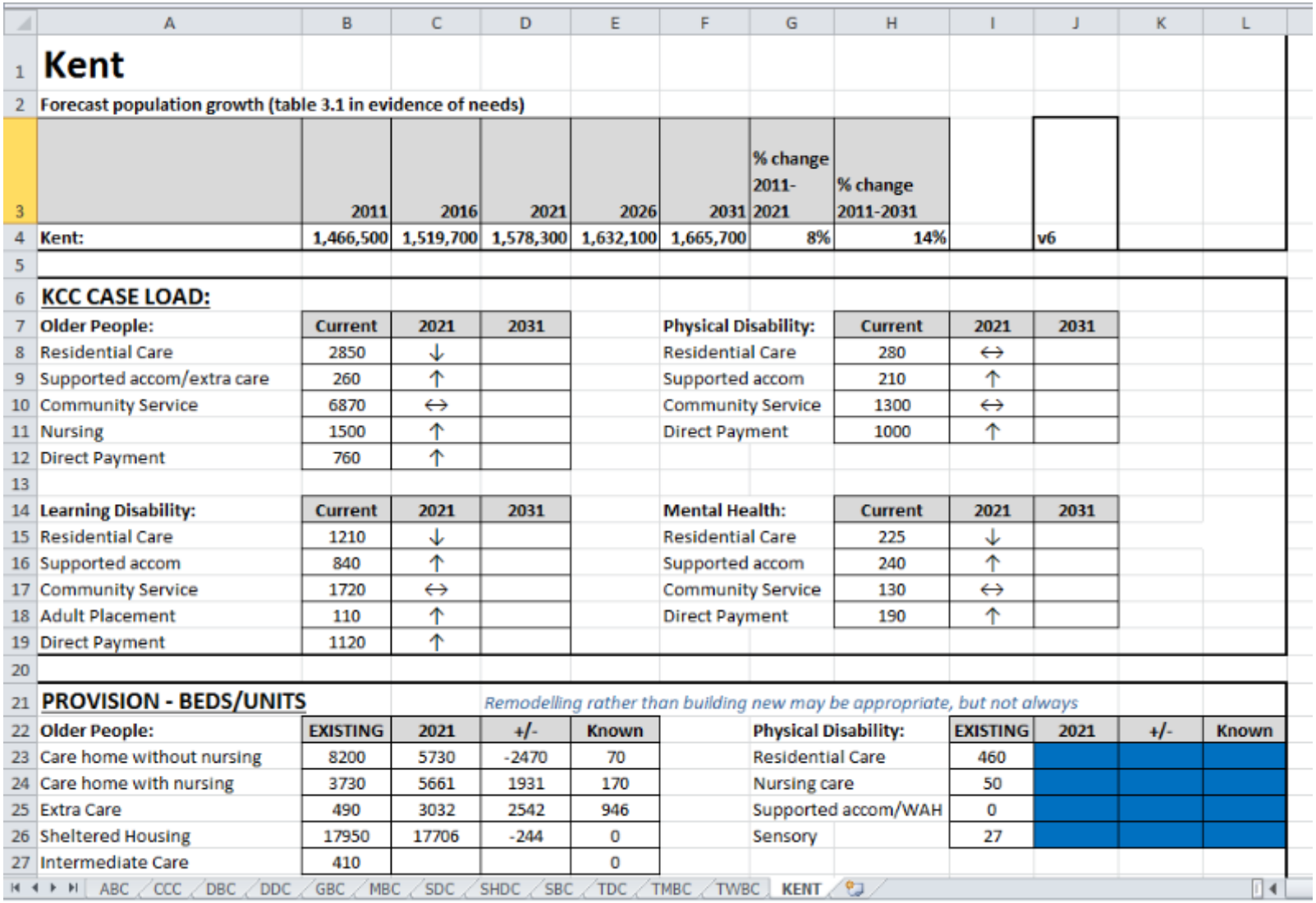

Kent

Forecast population growth (table 3.1 in evidence of needs)

	2011	2016	2021	2026	2031	% change 2011-2021	% change 2011-2031		
Kent:	1,466,500	1,519,700	1,578,300	1,632,100	1,665,700	8%	14%		v6

KCC CASE LOAD:

Older People:	Current	2021	2031
Residential Care	2850	↓	
Supported accom/extra care	260	↑	
Community Service	6870	↔	
Nursing	1500	↑	
Direct Payment	760	↑	

Physical Disability:	Current	2021	2031
Residential Care	280	↔	
Supported accom	210	↑	
Community Service	1300	↔	
Direct Payment	1000	↑	

Learning Disability:	Current	2021	2031
Residential Care	1210	↓	
Supported accom	840	↑	
Community Service	1720	↔	
Adult Placement	110	↑	
Direct Payment	1120	↑	

Mental Health:	Current	2021	2031
Residential Care	225	↓	
Supported accom	240	↑	
Community Service	130	↔	
Direct Payment	190	↑	

PROVISION - BEDS/UNITS

Remodelling rather than building new may be appropriate, but not always

Older People:	EXISTING	2021	+/-	Known
Care home without nursing	8200	5730	-2470	70
Care home with nursing	3730	5661	1931	170
Extra Care	490	3032	2542	946
Sheltered Housing	17950	17706	-244	0
Intermediate Care	410			0

Physical Disability:	EXISTING	2021	+/-	Known
Residential Care	460			
Nursing care	50			
Supported accom/WAH	0			
Sensory	27			

ABC | CCC | DBC | DDC | GBC | MBC | SDC | SHDC | SBC | TDC | TMBC | TWBC | KENT

District Profiles

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Accommodation Strategy

Better Homes: Greater Choice

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Learning Disability Home Design Principles

(March 2014)

KCC will not be commissioning any new residential care homes for those with a learning disability and would strongly discourage any provider from opening a new care home in Kent. However, in instances where residential care is required for someone with a learning disability, this document outlines the design principles that should be taken into account.

KCC appreciates the opportunity to engage with any developer of residential care for those with a learning disability at an early stage.

Done

Unknown Zone | Protected Mode: Off

Design principles and standards

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J] Older People

In common with national trends Kent has an ageing population with people generally living longer and remaining healthy, fit and active for far longer than previous

L] Dementia

The Alzheimer's Society predicts that the current number of people with dementia in the UK, 800,000, is expected to rise to 1 million by 2021. In Kent over 15,900 people

M] People with a learning disability

In 2001 the Government set out its vision and expectation for people with learning disabilities in the Valuing People Now document, the vision that 'people with learning

N] People with mental health needs

Supported housing forms an important part of the mental health care continuum. The focus within supported housing for mental health clients is generally to support and

O] People with a physical and/or sensory disability

Meeting the needs of people with a physical and/or sensory disability is a challenge for both KCC and its stakeholders. Broad and diverse needs across this client group will

P] People with Autistic Spectrum Conditions

Autism is a spectrum condition, a lifelong development disability that can affect sufferers in different ways, mainly affecting how a person communicates and relates to

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It's about people

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About the Council

Strategies and Policies

Adult Social Care Policies

Accommodation Strategy

www.kent.gov.uk/accommodationstrategy

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Accommodation for People with Learning Disabilities Analysis

- Prevalence of LD
- Population forecast
- Impact of promoting independence
- Placement patterns
- Market appraisal
- NHS, other local authorities

Numbers are indicative and will be used to target priority areas. Numbers will need to be periodically reviewed and adjusted in line with the performance of promoting independence and market delivery

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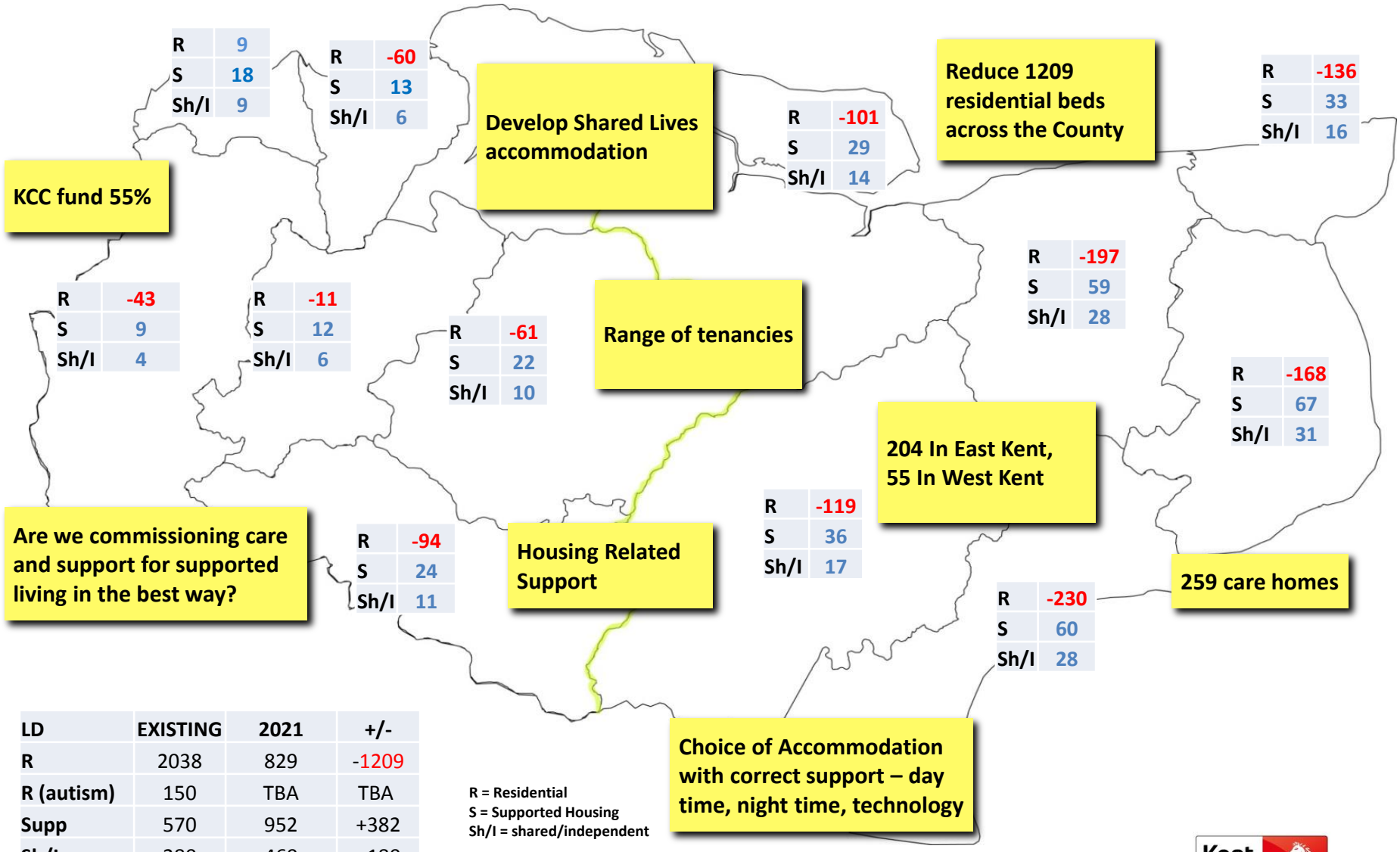
People with Learning Disabilities Summary



LD	EXISTING	2021	+/-
R	2038	829	-1209
R (autism)	150	TBA	TBA
Supp	570	952	+382
Sh/I	280	460	+180

R = Residential
S = Supported Housing
Sh/I = shared/independent

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Paula Watson

Commissioning Manager (Accommodation)

Kent County Council

July 2015

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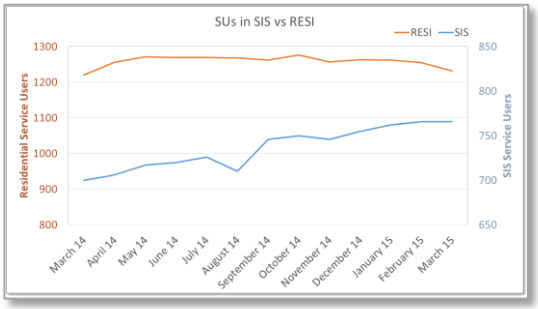
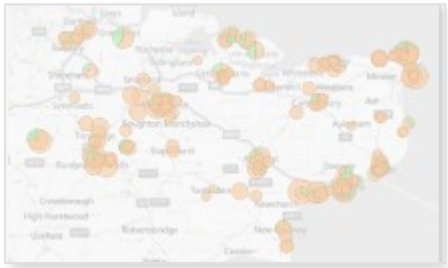
Alternative Models of Care - Approach

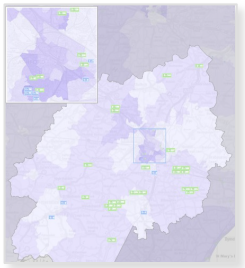
Current State - Service User Care



- Vision for Adult Learning Disabilities
- Kent Accommodation Strategy

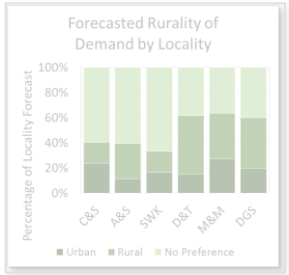
Current Supported Living Capacity





- Current Supported Living Capacity
- Location, type and availability

Forecasted Supported Living Demand



- Accommodation demand by locality
- Rurality and sharing preference

Filling the 'Gap'

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Marketplace Event – Adult LD

- Communicating the demand and 'gap'
- Working together with providers

Supported Living Options

Residential Home

- Multiple service users residing in single care home
- Care available 24/7
- Specialist facilities

Supported Living

- Individual, self-contained, tenancies (flats) clustered around communal spaces and facilities
- Sharing of support hours and night support

Shared House

- Shared property between multiple service users
- Individual bedrooms and shared living spaces
- Sharing of support hours and night support

Independent Living

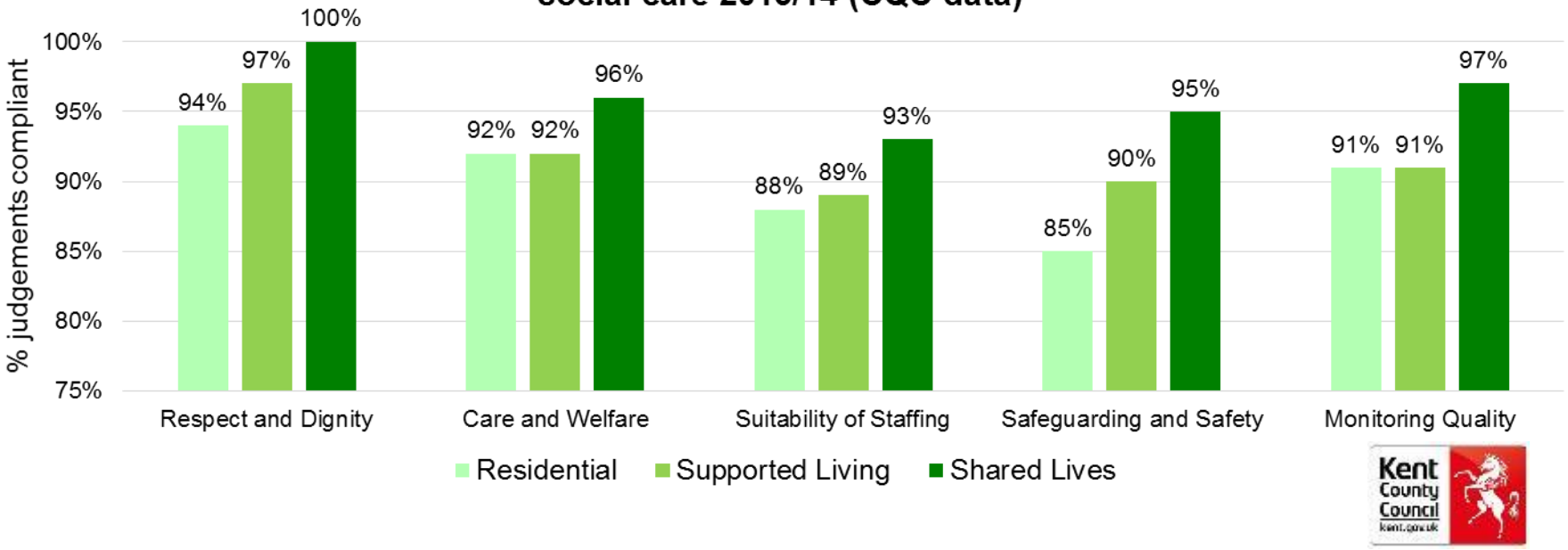
- Individual tenancies
- Service Users embedded in communities promoting independence
- Support tailored to the individual's requirements

Shared Lives

shared experiences, shared homes
Shared Lives

- Shared Lives is a service for adults where the host family opens up their home.
- It offers long term, short breaks, day support and transition.
- The main benefits of Shared Lives are:
  - **Quality of Life**, giving SUs a “real” life
  - **Social Inclusion**, giving SUs a family network
  - **Support**, giving SUs 24/7 personalised care

Performance against quality standards for different services within community social care 2013/14 (CQC data)



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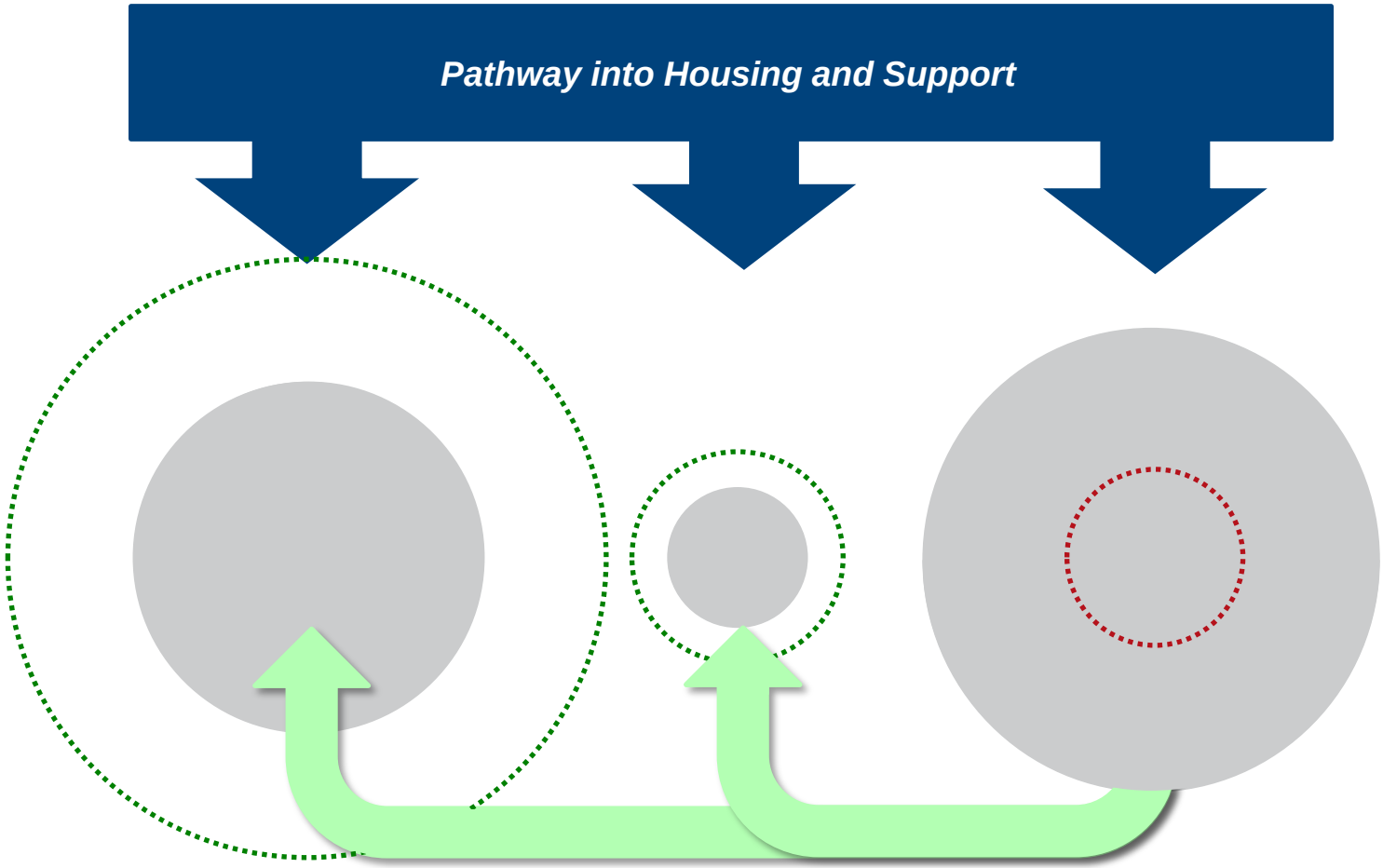
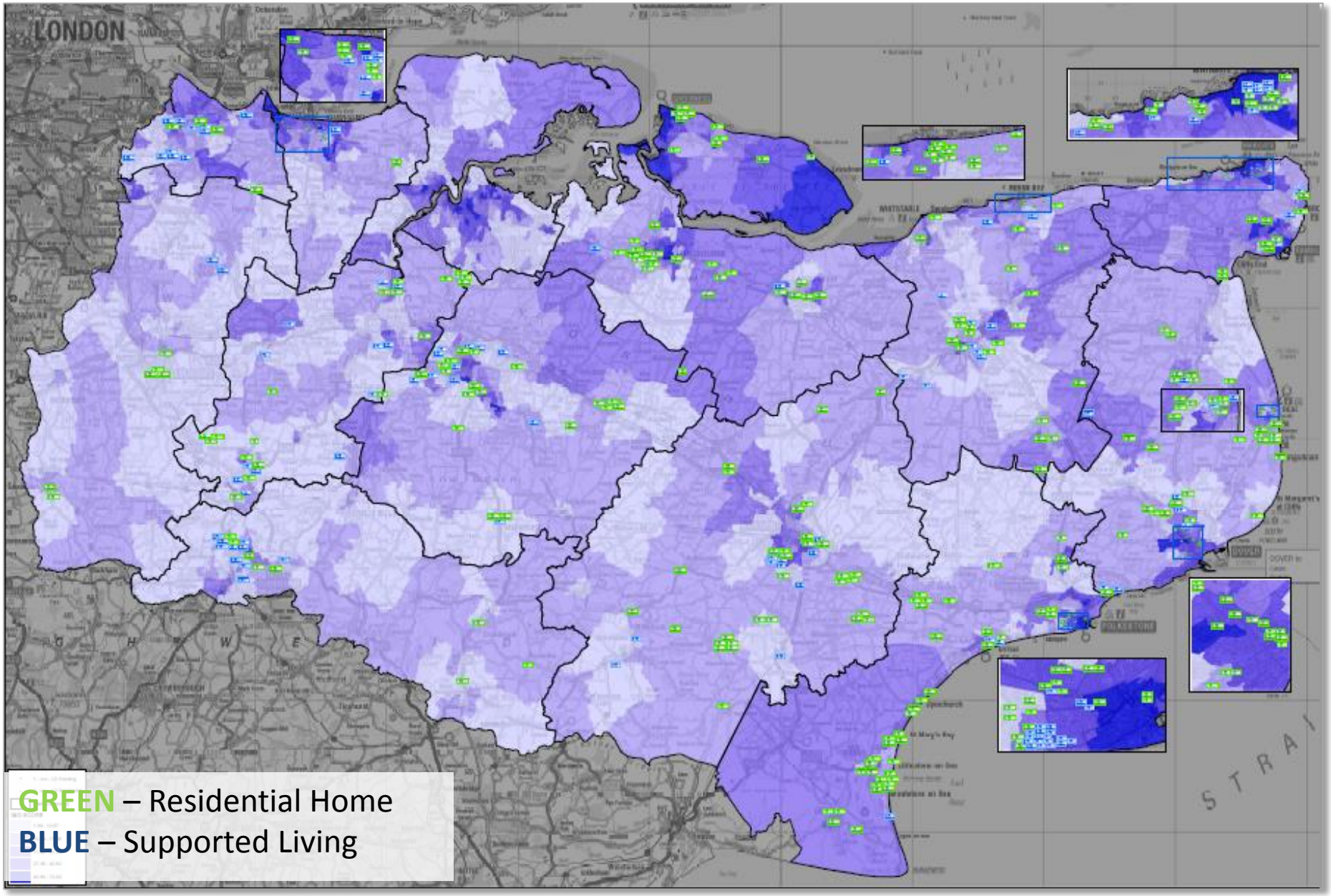
Alternative Models of Care

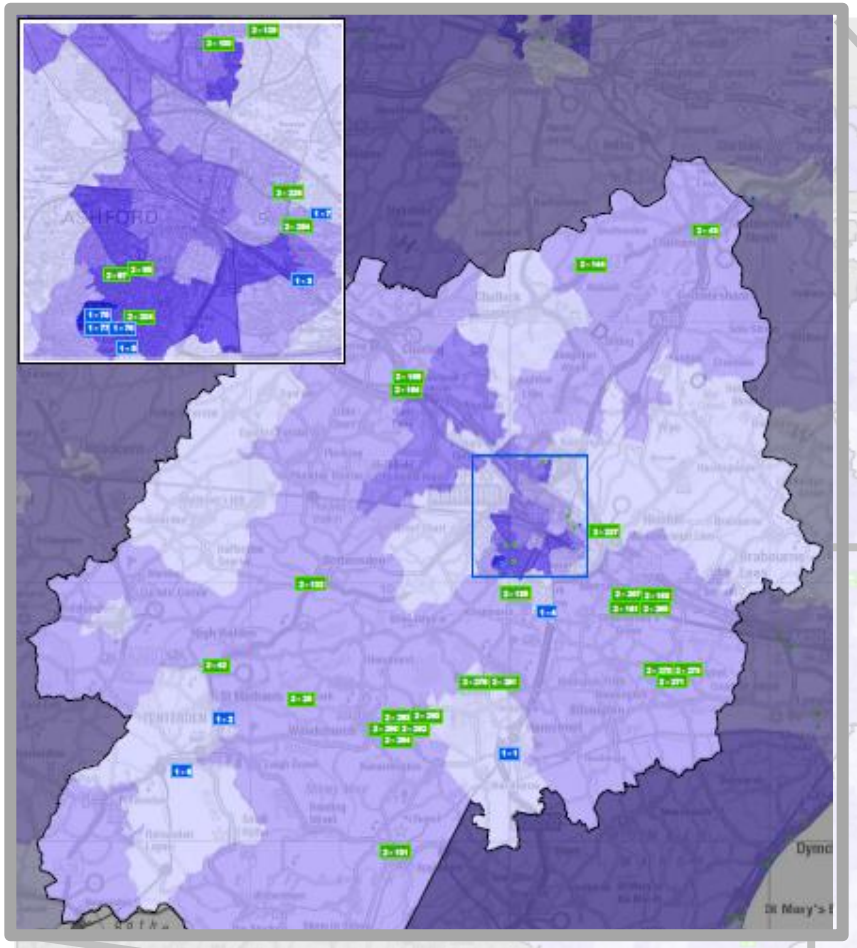


The Alternative Models of Care project has found evidence that 330 to 550 KCC service users currently in residential care could have their outcomes met in supported living

Current Adult LD Accommodation

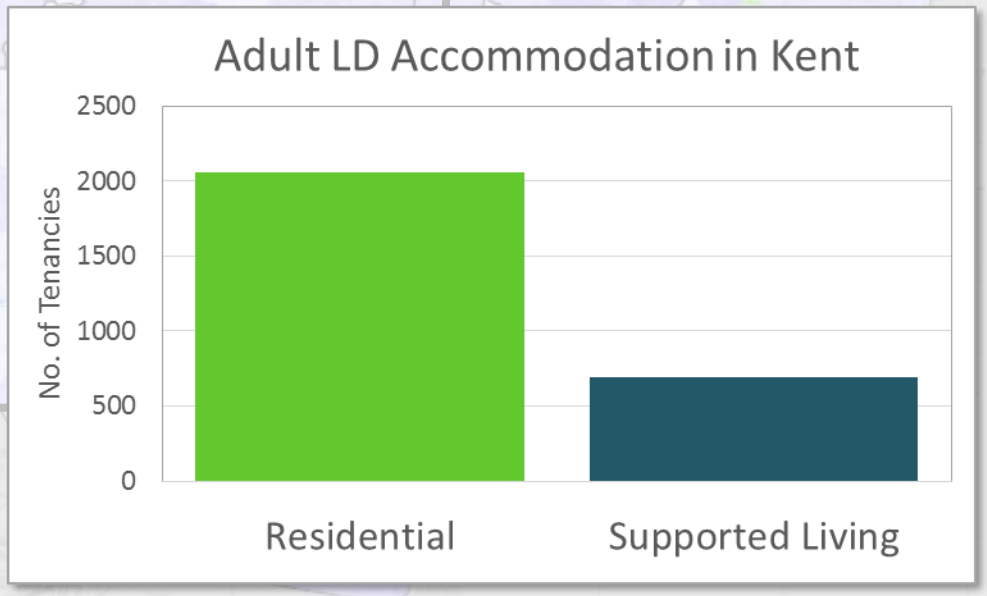


Current Adult LD Accommodation



County wide; there are currently 45% more adults in Residential care that Supported Living.

Capacity of Residential care is 130% more than SL.



GREEN – Residential Home
BLUE – Supported Living

Adult LD Accommodation – Recent Successes

Different approaches are viable in achieving the required accommodation

‘Core and cluster’ schemes

- Individual flats with shared support and communal spaces
- Less void issues and natural exit route for general need

Holly Lodge

5 self-contained flats and staff space

Care Home Remodelling

- Land is scarce
- Quicker Developments
- Shared support
- Satisfies demand for shared accommodation
- Shared housing with own facilities (e.g. specialist equipment in en-suites)

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Alternative Models of Care - Approach

Current State - Service User Care

- Vision for Adult Learning Disabilities
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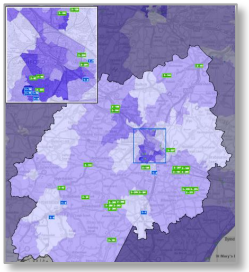
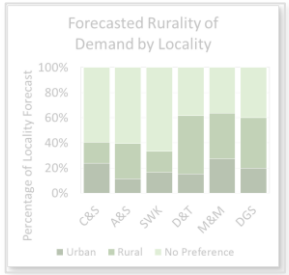
Current Supported Living Capacity



- Current Supported Living Capacity
- Location, type and availability

Forecasted Supported Living Demand



- Accommodation demand by locality
- Rurality and sharing preference

Filling the 'Gap'

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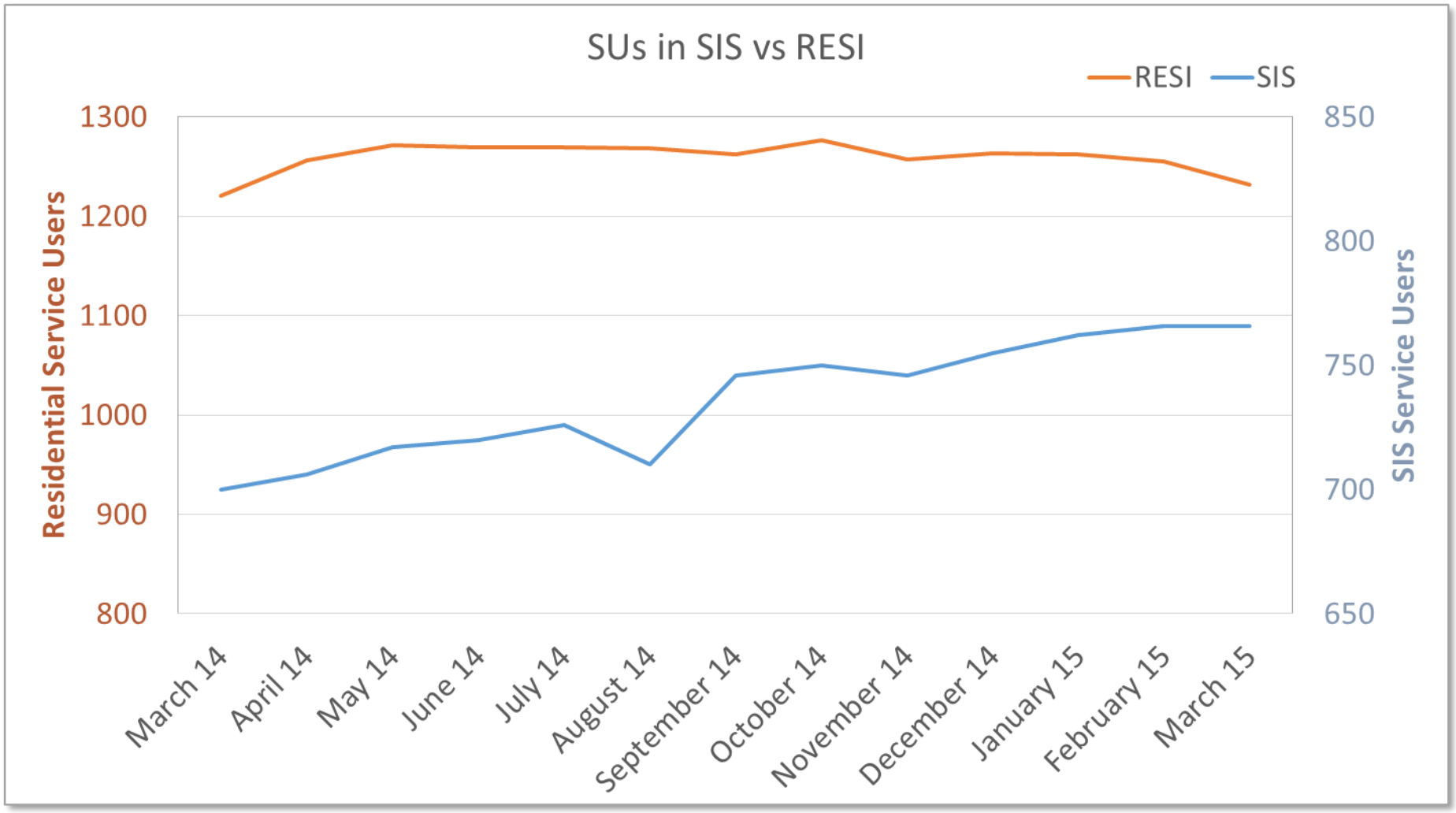
Marketplace Event – Adult LD

- Communicating the demand and 'gap'
- Working together with providers

Adult LD Accommodation – Current State



The number of SUs in supported living is increasing while residential stays constant. With total numbers of SUs increasing, this shows a shift in demand to supported living.

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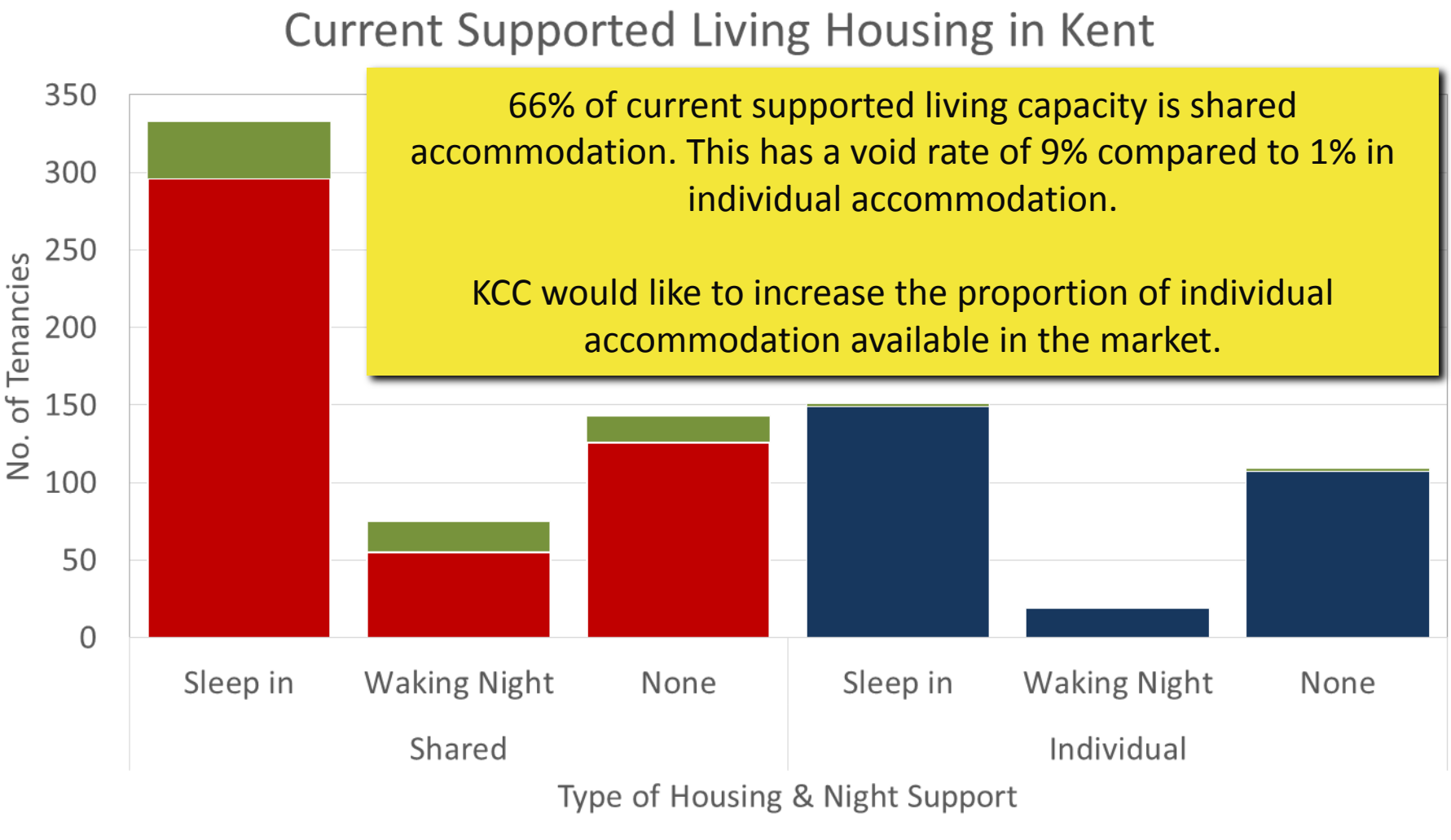
Alternative Models of Care – Capacity Findings



RED – Shared accommodation

BLUE – Individual accommodation

GREEN – Available accommodation

Alternative Models of Care - Approach

Current State - Service User Care

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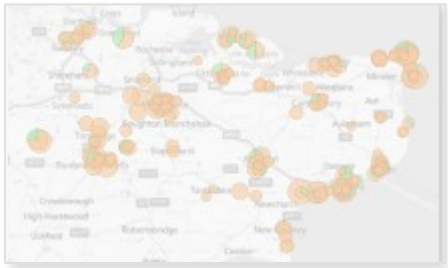
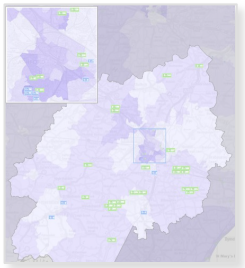
Current Supported Living Capacity





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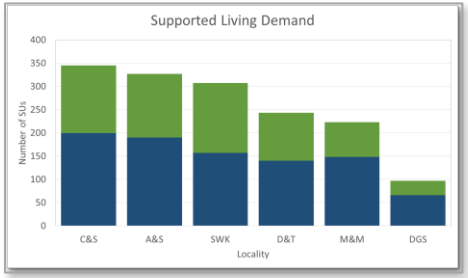
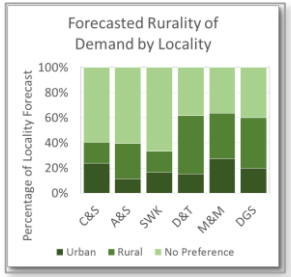
Forecasted Supported Living Demand





- Accommodation demand by locality
- Rurality and sharing preference

Filling the 'Gap'

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Marketplace Event – Adult LD

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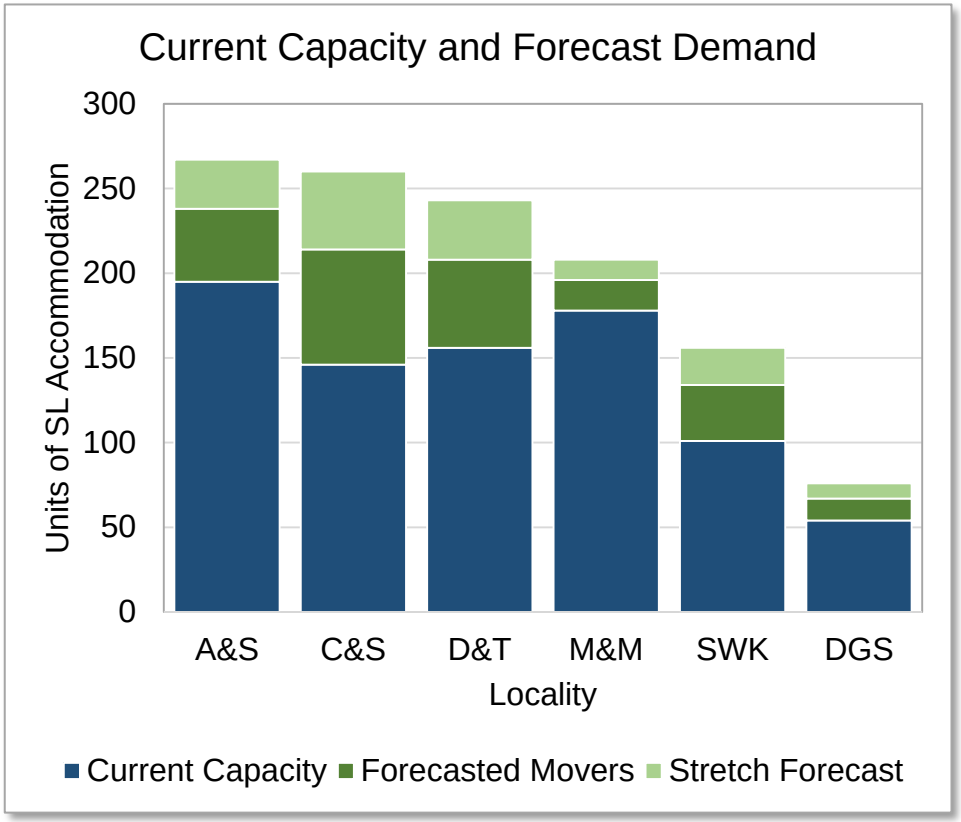
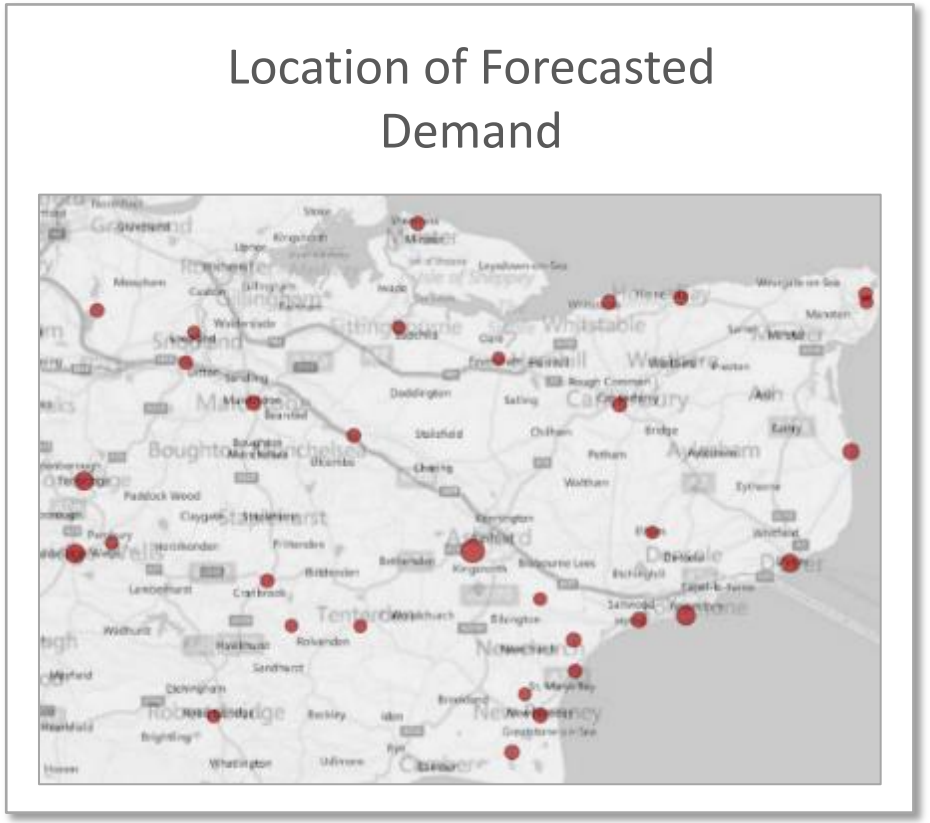
Alternative Models of Care – Demand Findings





43 – 72% forecast increase in supported living demand

Demand is spread across the county

The wide spread of demand means that we should be considering supported living for all our service users

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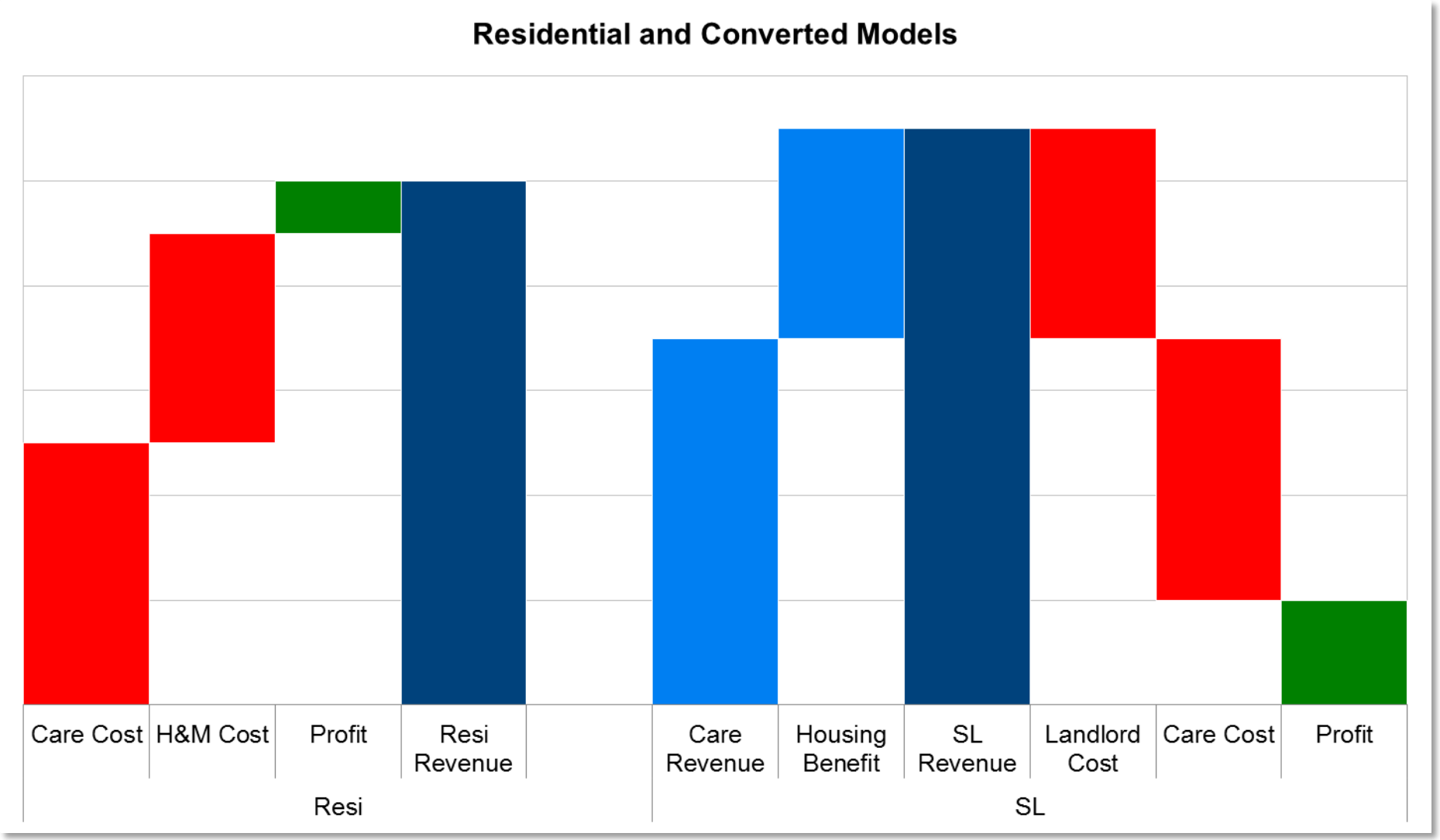
Alternative Models of Care – Conversion Candidates



Properties shortlisted as more profitable set up as supported living will be sent out following this event

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Alternative Models of Care - Approach

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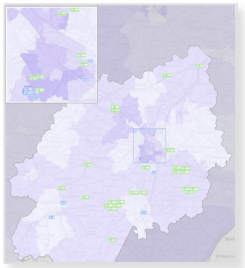
Current Supported Living Capacity



- Current Supported Living Capacity
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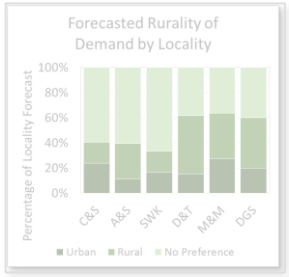
Forecasted Supported Living Demand



- Accommodation demand by locality
- Rurality and sharing preference

Filling the 'Gap'

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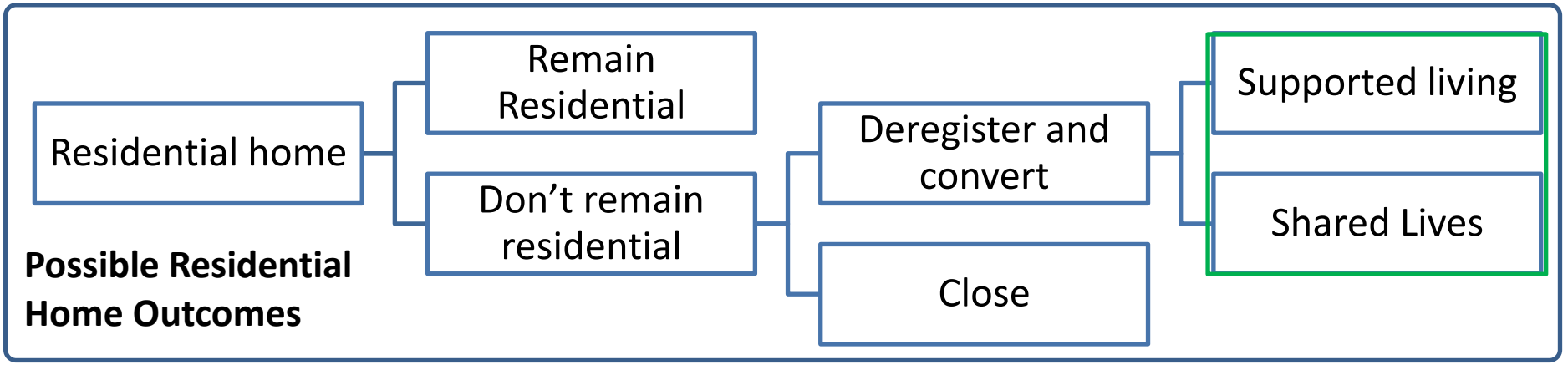
Residential Provider Event – Adult LD

- Communicating the vision
- Working together with providers

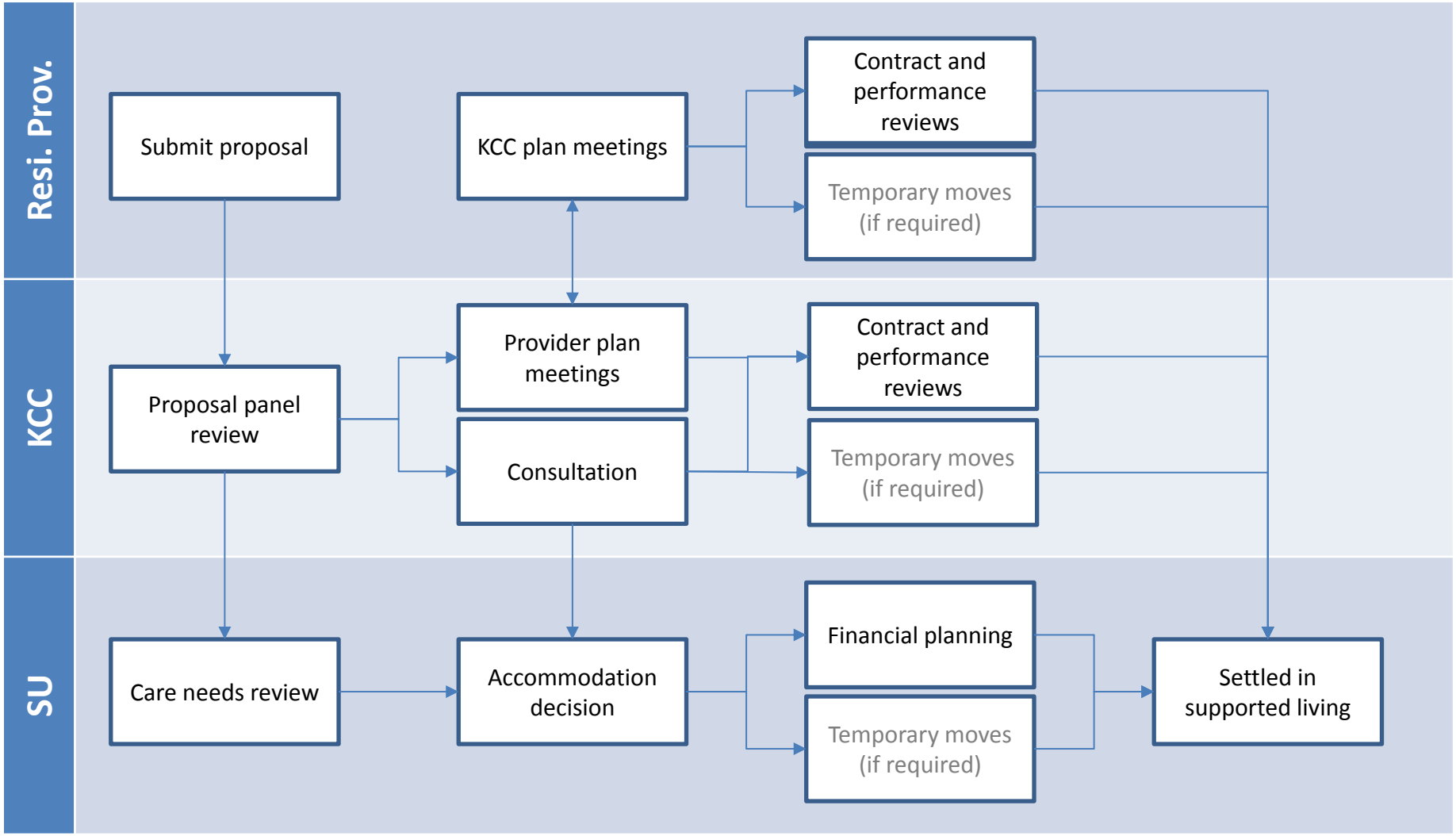
Next Steps – Plan and Home Outcomes

Month	3	6	9	12	15	18+
Deregistering and Converting Homes	Identify Properties	Manage Conversions				
Using Existing Capacity	Identify SUs	Manage Moves				
Setting up the Market	Housing Provider Proposal Mgmt.					
Transfer Management			Engage Homes	SU Review	SU Transfer	



KCC wish to have open communication with any residential home regarding its future. More detail is given on the option of converting to supported living.

Next Steps – Deregistration and Conversion Process



Many decision gates and stages to the process – the key will be an open and regular dialogue between all stakeholders

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Next Steps – Deregistration and Conversion Criteria

	Current Residential	Proposed Supported Living
# SUs	% of KCC SUs	Shared accom. not greater than 6 SUs Individual accom. not greater than 16 SUs
Finances		No net increase in costs for KCC Affordable rent for SUs Organisation already has funding to make the change
Location	Number of other resi beds in area Distance to shops On bus/train lines	Number of other SL beds in area
Care	CQC compliant Organisation already offers SL	
Physical Structure		Meets SL design principles

GREEN – Criteria that must be met
BLUE – Criteria for prioritisation

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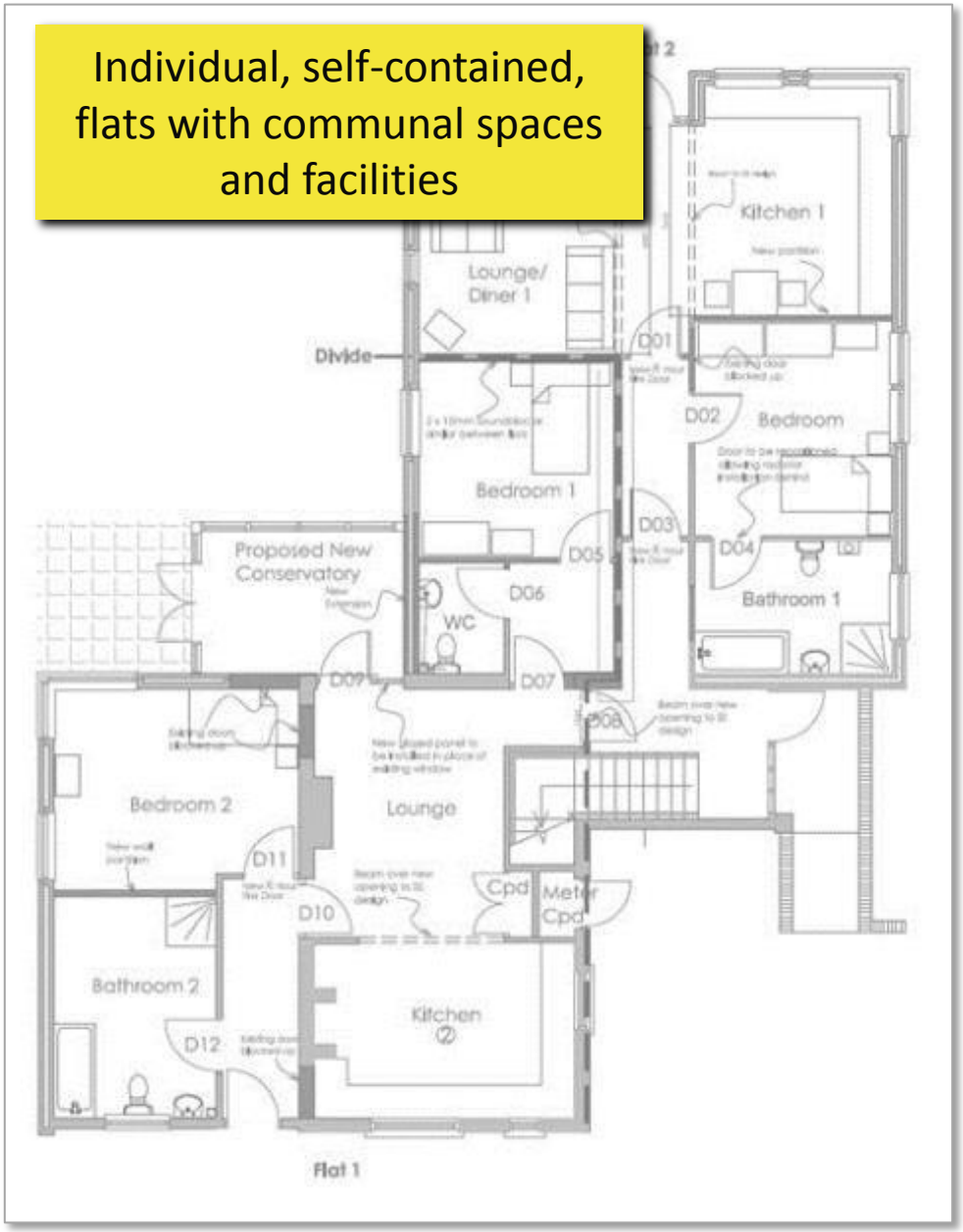
Adult Learning Disabilities – Design Principles

Individual, self-contained, flats with communal spaces and facilities



Design Principles – Adult LD	
Fully Wheel-chair accessible	✓
Doorframes and hallways >800mm wide	✓
Reinforced ceilings for hoists	✓
Wet rooms and level shower access	✓
Maximised use of natural light	✓
Telecare and Telehealth enabled	✓
Soundproofing (walls and ceilings)	✓
Communal areas of domestic character	✓
Visual assistance (e.g. carpets and doorframes)	✓

What We Need From You

1. The barriers you have to providing supported living
2. Your ideas on how we can shape the market together
3. To review the information supplied
4. To consider if you can provide any new supported living schemes
5. To consider if you can deregister and convert a residential home
6. To communicate this to us by filling out this e-form linked here within 1 month

https://kentcc.firmstep.com/default.aspx/RenderForm/?F.Name=rKQehpoYaQr&HideAll=1

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Next Steps for KCC

- Review your responses from the e-form
- Prioritise the proposals based on the criteria given
- Review commissioning arrangements for care, support and housing related support
- Keep communicating with market

John Goldfinch Court, Faversham

Questions

Penny Southern – Kent County Council
Christy Holden – Kent County Council
Paula Watson – Kent County Council
Christopher Kelly – Newton Europe

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