

Housing with Care Strategy: Needs Analysis

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Introduction

This Housing with Care Needs Analysis brings together information on current provision, future demand and best practice to inform the strategic development of Housing with Care in Bromley.

National Policy context

Developing high quality Housing with Care options, that provide a desirable living environment with a range of social opportunities and new technology is recognised as a national priority to respond to a growth in a range of vulnerable resident groups. This includes being part of a preventative model to the response to the growth for the aging population, people with a Learning Disability and delivering against national priorities to support people to recover from mental ill health. An effective housing with care model is shown to reduce and mitigate the pace of growth in high-cost residential care sector, as well as provide the best possible outcomes for vulnerable residents.

National legislation is complimenting existing legal responsibilities of local authorities to drive forward the Housing with Care Agenda.

The Care Act 2014 requires local authorities to have regard to the Think Local Act Personal partnership agreement that describes how shaping markets to meet people's needs and aspirations, including housing options, can promote choice and control. Alongside the suitability of living accommodation in Section 1 of the Act, Local authorities should consider how they can encourage the development of accommodation options that can support choice and control and promote wellbeing¹. The Care Act 2014 also strengthened the rights of people with learning disabilities and their family carers. It promoted fairer, more personalised care and shifted the focus of local authorities from providing services for specific groups, to supporting individuals to achieve the outcomes that mattered to them. As a result, support offered by local authorities has more widely become 'person-centred' and 'strengths-based' aiming to help individuals live with as much independence and choice as possible.

The responsibilities in the Care Act have been further enhanced by the two White Papers published in 2022 marking the beginning of a new phase in the national development of adult social care services. People at the Heart of Care and the Integration White Paper Joining Up Care for People, Places and Populations both advocate joined up working across health, housing and social care to mitigate the impact of the growing needs of an increasingly aging population and vulnerable groups.

The People at the Heart of Care White Paper highlights the significant importance of ensuring access to the right housing to help people live independently in the community. It sets out an ambition for providing more choice in local communities and creating the local conditions to increase the supply of specialist and supported housing.

¹ [Care and support statutory guidance - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/guidance/care-and-support-statutory-guidance)

The People at the Heart of Care white paper states: 'Every decision about care is a decision about housing'. Initially this housing commitment was backed by additional government funding and the promise of new investment from central Government to integrate housing into local health and care strategies. Although national funding has subsequently been reduced, there is an ongoing commitment from Government to work with local government partners on developing more housing with care.

The projected demand for supported and specialist housing nationally is estimated to increase in England by 125,000 by 2030. The National Planning Policy Framework (NPPF) requires local authorities to plan for a mix of housing to meet the needs of different groups in the community, including for older people, people with learning disabilities and those with mental health needs. To implement this strategic commitment, new local investment will need to focus on boosting the supply of specialist housing for residents. The Levelling Up White Paper² also places the emphasis on local authorities to provide housing with care and support and ensure that there is a diverse range of homes, including genuinely affordable housing and specific provision for older people with care and support needs.

The development and implementation of a local Housing with Care Strategy will support the delivery of statutory responsibilities laid out in the Care Act 2014³ as well as having regard to the wider national policy legislation and guidance underpinning the Governments approach to delivering a care and support system with suitable accommodation and housing at the heart of its policy. It builds on and compliments work locally which has developed a range of early intervention and prevention services and effective care and support options to support people to remain in their own home as long as possible. The main focus of the strategy however, is to fulfil the Making Bromley Even Better⁴ objective to make Bromley 'a *fantastic place to live and work, where everyone can lead healthy, safe and independent lives.*'

Current Housing with Care provision

The development of Housing with Care in Bromley builds upon a long history of developing housing with care locally. There are a range of existing provisions, or new provision that is under development and aligns to the strategic direction of travel.

Extra Care housing (ECH)

Provision

- Six ECH schemes within Bromley for adults over the age of 55
- 271 permanent units plus 15 Step Down Assessment units.

² [Levelling Up the United Kingdom: Executive Summary \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/671447/levelling-up-the-united-kingdom-executive-summary.pdf)

³ [Care Act 2014 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/2014/23/contents)

⁴ [Making Bromley Even Better \(corporate strategy\) London Borough of Bromley – London Borough of Bromley](https://www.bromley.gov.uk/media/1000000/making-bromley-even-better-corporate-strategy-london-borough-of-bromley-london-borough-of-bromley.pdf)

- The accommodation is provided by four Registered Social Landlords (RSLs) – A2Dominion, Clarion Housing, Anchor Hanover Group, and Housing21
- The resident is the legal tenant, and the council retains sole nomination rights into these properties for Bromley residents
- Referrals are received solely from adult social care at present.
- There is a mixed of high-quality, purpose-built provision and some older units that would benefit from modernisation.

Care and Support Provision

- LBB currently block contracts 36,960 hours per annum across the six schemes.
- The care and support provides domiciliary care to residents as well as delivering a range of onsite activities for residents, with some settings providing a hot meal daily.
- There are two care and support providers: Mears Extra Care LTD and Creative Support
- Care Management for Extra Care Housing residents is spread across multiple Care Management Teams with a small dedicated ECH Care Management Team managing some of the clients moving through the step-down assessment units.

Supported Living for people with Learning Disabilities

- 25 contracted supported living properties for 122 adults with a learning disability over the age of 18 delivered through 12 providers, 6 of which operate under a block contract.
- A number of spot purchased community and supported living services for a further 108 adults.
- The accommodation is provided by a wide range of Registered Social Landlords with some overlap with ECH schemes.
- The client is the legal tenant, and the council retains sole nomination rights into the contracted properties for Bromley residents only.
- For spot purchased services other Local Authorities may refer into these but this is rare.
- Referrals are received solely from Bromley adult social care.
- Services support a wide range of needs beyond learning disability – for example autism, mental health, physical disability and post forensic needs.

- 1 supported living service is funded entirely through Direct Payments.
- Care management for all supported living services is managed through LBB's Community Learning Disability Team
- An accommodation based review of LD services is underway, this will directly feed into, and be driven by, the Housing with Care Strategy.

[Accommodation based care for people with mental Health conditions](#)

- 61 units of accommodation-based support, across 6 residential and 3 supported living services provided by Ambient Support.
- These services are part of the adult mental health recovery and rehabilitation pathway to support individuals to step-down and move on from high support settings towards more independent living in the community.
- LBB and SELICB have commenced a program of transformation to reconfigure the existing residential care provision and move towards a supported housing model across the nine properties. Details of which are laid out as part of the Bromley Mental Health and Emotional Wellbeing Strategy 2020-2025, and directly align with the Housing with Care vision.

[Shared Lives](#)

- Shared Lives Service currently supports 31 people with learning disabilities who are unable to live on their own.
- The scheme matches someone who needs care with an approved carer who shares their life with the individual. Some people move in with their shared lives carer, while others are regular daytime visitors. Some combine daytime and overnight visits.
- This service can support more people with learning disabilities and has plans to expand to support Older People also. The expansion of the Shared Lives is a key offer for the council in developing a vibrant menu of Housing with Care options.

[Benchmarking Housing with Care and National Best Practice](#)

Ten local authorities in and outside of London were contacted as part of the Housing with care review to investigate and benchmark their models with the local offer and inform the strategic development. The purpose of the benchmarking exercise was to give the Council an opportunity to explore different models of housing with care, compare financial modelling and identify best practice which could be adapted and used in Bromley.

The benchmarking highlighted a wide range of schemes being developed in other boroughs as opposed to stand-alone provision specifically for older adults. Key findings identified that some innovative boroughs were providing mixed tenure and mixed dependency schemes

effectively managed through an appropriate built environment and the delivery of integrated models of care with a suitable range of engagement activities.

A key feature of best practice was local authorities ensuring schemes delivered 'dementia friendly communities' and included dementia friendly designs which had a significant positive impact on reducing care needs of individuals and improving outcomes. The HAPPI framework⁵, or as used in Hillingdon the 'Stirling University's gold standard for dementia design'⁶ both provide a model for ensuring the built environment supports the needs of different client groups and can be adapted over time. Both frameworks provide evidence of how the right built environment can improve outcomes, delay and prevent the effects of deterioration and reduce dependency on care and support.

Best practice collated from Merton and Richmond councils showed their schemes are aimed at older people (usually defined as 55 or 60 years and above). Merton and Richmond are both moving towards extra care villages and offering more social and leisure 'lifestyle' activities to move to a culture of a desired place to live.

Leicester City Council is recognised for best practice and has a good range of schemes aimed at residents with a learning disability with 56 of their 112 schemes providing accommodation for this client group. Leicester also has a range of schemes focused on vulnerable working age cohorts from 18 years old to 65 years old to encourage mixed communities.

Hillingdon Council is another council highlighted as best practice providing a range of specialist schemes including a focus on reablement and specialist dementia units.

Emerging good practice suggests that mixed community schemes with smaller units and bedsit type accommodation for higher needs users such as people with learning disabilities, can bridge the gap between traditional extra care and residential placements, and provide a more independent and economically viable approach. An important feature and recurrent theme of the benchmarking was that all local authorities were focused on delivering schemes of balanced communities with older people, ranging from active, independent residents to those requiring a higher degree of care.

[Demographic context in Bromley](#)

Older Adults

Analysis undertaken in 2020 reports that the population in Bromley aged 65 and over was estimated at 58,488, reaching 77,101 a 32% increase by 2040. Those aged 75 years plus, and 85 years plus is estimated to grow by 41%. In 2040, Bromley will have 21% of the population aged 65 and over (increase of 4%) and 4% over 85 years (increase of 1% of population).

⁵ [HAPPI - Design - Topics - Resources - Housing LIN](#)

⁶ [Microsoft Word - DSDCThe Stirling standards for dementia 120430 \(1\).docx \(dementiaaction.org.uk\)](#)

Life expectancy is expected to continue to rise for both men and women reaching 81 and 85 years of age respectively. By 2040, 40% of those aged 75 and over in the borough will be unable to manage at least one domestic task on their own and 37% unable to manage at least one self-care activity on their own. Also, 58% aged 75 and over will be living with a limiting long-term illness raising to 70% in those aged 85 and over.

A significant change is expected in the minority ethnic population within Bromley which is currently 21% of the total population and notably less within the older population. The growth in the minority ethnic groups within the older population is expected to raise exponentially at 190% increase between 2020 and 2040 for the 65 plus age group and 239% in those aged 85 years plus. Housing with Care developments should therefore ensure focus is placed on ensuring any new provision meets the language, cultural and religious beliefs of potential future residents.

Predictions from the Housing Learning and Improvement Network (LIN) which is recognised by government and the Housing with Care sector as a leading 'knowledge hub' on specialist housing, has predicted, based on population projections, Bromley should aim over 1,000 units of ECH by 2040.

Table 1: Models estimating future demand of Extra Care Housing		2020	2025	2030	2035	2040
Care home one-third (aged 65 and above)	Cohort	514	548	600	649	686
	% change base 2020		7%	17%	26%	33%
Care home two-thirds (aged 65 and above)	Cohort	1,028	1,097	1,199	1,298	1,372
	% change base 2020		7%	17%	26%	33%
LIN: 25 units per 1,000 population (aged 75 plus)	Cohort	711	802	863	897	1,002
	% change base 2020		13%	21%	26%	41%
Bromley ASC clients: linear projected estimates (aged 65 and above)	Cohort	200	163	173	189	202
	% change base 2020		-19%	-14%	-6%	1%

Ensuring a range of high-quality accommodation-based care and support options will mitigate the potential rate of growth within the residential care market and provide housing with support that better promotes residents' choice, control and independence.

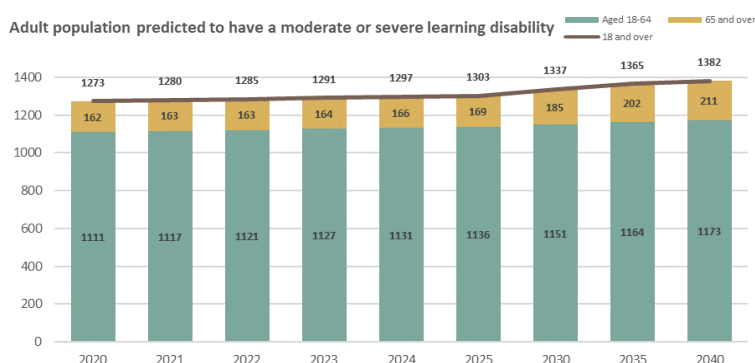
Adults with Learning Disabilities

The Demand Management Programme 2022/23, 'Learning disabilities adult social care caseload and the provision of housing with care needs' report notes the predicted growth in people with learning disabilities in the borough and placed a key recommendation on 'Housing with Care needing to be designed, to shift demand pressures in lower end support rather than current trend.'

The report highlights a range of points to inform the Housing with Care strategy.

The Institute of Public Care Projecting Population Information (POPPI & PANSI) estimates only those who have moderate or severe needs are likely to need adult social care support.

By 2040 it expected that 1400 adults in Bromley will have moderate or severe learning disabilities. The vast majority, 1200 will be aged 18 to 64.



As observed (2020-2023) the rate of growth in client numbers is 1.9% a year. Assuming projecting forward at this current rate the 2040 estimate relates to 93% of those forecasted to have a moderate or severe need. This projects a 64% growth 2023-40, more than 500 additional LD clients.

In 2022, Bromley reported 77.6% of supported working age adults with learning disabilities living in settled accommodation. This is improving and is in line with London and national.

Settled Accommodation	Bromley	London	England
2019-20	71.7%	76.2%	77.3%
2020-21	68.9%	77.7%	78.3%
2021-22	77.6%	77.5%	78.8%

Settled Accommodation: Situations included within scope 'living on own or with their family': Owner occupier or shared ownership; Tenant (LA, housing association, private landlord); Settled mainstream housing with friends/family; Supported accommodation / supported lodgings/ group home; Shared lives scheme; Sheltered housing / Extra Care Housing

At March 2023, whilst on a declining trend of 5% from 2020, most of the current housing/accommodation is supported (54%), over half in 'supported accommodation / group home' and a further 30% of the supported accommodation is 'registered care home'. Nearly three quarters of the supported accommodation / group homes are in Bromley, whereas placements in care homes only 13% are in borough.

Current housing/accommodation provision is that 227 (29%) adults with learning disabilities live with family or informal carers.

In estimating future housing need it is reasonable to assume that:

- With the number of adults supported increasing, relatively more supported accommodation will be required.
- If the Council continues with a reduction in residential care places, to increase independence there will need to be an increase in shared lives placements and an increase in supported housing/supported living arrangements provision in borough.
- Currently 29% of adults with learning disabilities live with family and informal carers. As some of those carer's age and/or are no longer able to undertake this caring role for other reasons, then it can be assumed that a proportion of this 29% will require alternative housing.
- Increasing older population, for those living independently as they enter older age, a greater level of supported accommodation will be required.

Utilisation of Extra Care Schemes in Bromley

Analysis shows that from April 2022 to March 2023 there was an average of 191 people residing in Extra Care Housing at any one time. The ECH provision accounts for 19% of the accommodation-based care provision commissioned by Adult Social Care with the remaining 79% being within supported living and residential care.

82% of ECH residents are older adults with 18% under 65 (note the age range for ECH is 55+). The average age across ECH schemes is 81 years and overall, there is a higher ratio of females across schemes with 65% females 35% males.

The table below shows a breakdown of the current cohort of ECH users by Primary Support Reason (PSR) as of March 2023 with the majority, 72% of clients, primary support reason relating to physical support and personal care. 12% have a PSR of mental health issues and 3% Learning Disabilities.

Table 2

Current caseload by Primary Care Need in receipt of ECH services: March 2023	
Physical Support - Personal Care Support	72%
Mental Health Support	12%
Support with Memory and Cognition	6%
Physical Support - Access and Mobility Only	4%
Learning Disability Support	3%
Social Support - Support for Social Isolation / Other	2%
Sensory Support - Support for Visual Impairment	1%

Co-production, User and provider engagement

An in-depth review of extra-care provision was carried out between November 2022 and early February 2023. A consultation and engagement workstream was designed to ensure provider feedback and user voice is used to inform contract management and future strategic development of ECH provision in the borough. The findings from the review and consultation identified several opportunities to modernise and develop the local offer to continue to have a positive impact on the outcomes and promoting independence of residents living within Extra Care Housing schemes.

User engagement

Overall, the residents consulted through focus groups across the schemes were satisfied or very satisfied with the schemes, staff and level of care. There was positive feedback about

the quality of provision in the newer units with residents feeling well supported by the onsite support across all schemes.

Some areas for development were highlighted through the user engagement including:

- Residents wanted there to be more organised activities such as day trips. It was reported that current supported activities had not yet returned to the same level as that before the pandemic lockdown.
- Residents perceived there to be growing numbers of residents with higher care and support needs.
- Specifically at one scheme, residents were concerned about the safety of the building with tripping hazards due to the way the drains impacted on the stability of the floor.

Provider Engagement

- All providers felt that the approach to Extra Housing lettings and allocations process in Bromley could be improved through a nominations panel. This is to be implemented.
- The balance of care and support hours across the schemes require srebasing with further consideration to care requirements needed overnight.
- Providers felt that there has been an increase in residents with higher needs being accommodated with a consequent imbalance across residents and their support needs.
- 3 of the schemes are older buildings and not purpose built. These schemes are not always desirable to potential tenants creating voids

Currently the primary care needs of residents are met through the SEL ICB commissioned Bromleyag Care Practice provided by the Bromley GP Alliance. This commissioning of health-related support sits outside the LA care and support contract. However, whilst engaging with providers it emerged that, due to increasing heath related needs of residents, providers were being requested to undertake a range of activities relating to meeting the health needs of clients.

Best practice for developing future proof housing with care will be ensuring an integrated approach to supporting health and care needs of clients.