

Accommodation Strategy For adults with care and support needs 2022-27

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This strategy refers throughout to adults with care and support needs. This is a deliberate attempt to move away from referring specific conditions, diagnoses or terms such as 'vulnerable adults' which have been used in the past.

The terminology used deliberately links to the language and definitions in the Care Act 2014.

This strategy is designed to encompass all people between the ages of 18 and 65 who have assessed care and support needs as defined in the Care Act.

Specific customer groups are referred to only where this is relevant.

1. Foreword

Central Bedfordshire Council sees the transformation of the life options available to people with care and support needs as a key priority. This transformation is likely to take many forms. Whilst the Council sees itself as having a leadership role in its delivery it knows that success will be dependent on the active involvement of organisations across the public, voluntary and private sectors.

The socio-economic context of Central Bedfordshire presents important opportunities and some key challenges. The significant housing growth and the development of the Oxford-to-Cambridge Arc through the area will provide opportunities for new housing, employment and leisure and it will be important that resulting new communities and extensions of existing ones are designed from the outset to include people with care and support needs.

The Accommodation Strategy sets out in detail our intentions and aspirations. It has been developed with input from people with lived experience and their families as well as organisations that deliver services and represent the views of people they support.

In seeking out new and improved solutions for people we have a number of key principles which we believe should be integral to the direction of travel for all organisations and service offers. These are:

- Making sure that universal services are accessible for all.
- Progression towards greater independence being at the heart of all interventions.
- Support should aim to maximise choice and control for recipients by facilitating appropriate risk-taking whilst safeguarding people from abuse.

 Services should deliver good value for money both for the recipient and the public purse and those who fund their own support.

Services often focus on basic personal care and support but for a good quality of life we know that this is not enough. We know that many people also need help to access training and employment, leisure activities and social activities.

We are committed to delivering the transformation that we have set out in this document, but we understand that this is the start of the conversation, not the end of it. We are looking forward to working with you over the coming months and years to deliver a real transformation of the lives and opportunities of people with care and support needs.



Julie Ogley Director of Social Care, Health & Housing Councillor Carole Hegley Executive Member for Adult Social Care

2. Introduction

In recent decades UK policy has encouraged a shift away from institutionalised settings for adults with care and support needs towards housing models that enhance independence and choice, and support people in their local communities through a strengthsbased approach.

Strengths-based practice is a collaborative process between the person being supported and those supporting, working together to determine an outcome that draws on strengths and abilities.

Despite the successes of the past, there remains recognised deficits of appropriate and accessible housing for people with learning disabilities, autism, physical disabilities and people with mental health needs.

This Accommodation Strategy sets out local aspirations and current provision along with demand for services. It also shows how these factors along with the expected growth of the population will affect the Council's commissioning priorities.

Central Bedfordshire Council is committed to working alongside people and their families to develop and enhance the quality of local services. This strategy is based, in part on the **Learning Disability Commissioning Plan** that was developed with people with lived experience of learning disabilities and their families. The plan (which covers all aspects of commissioned services, not just accommodation) forms Appendix 1 to this strategy.

The intentions and aspirations set out in the Accommodation Strategy will be further refined in the delivery process. Feedback from people with lived experience and their family carers has been used to inform and shape this Accommodation Strategy and it will be an important element of the delivery process, too. In considering this the Council will incorporate the feedback from people with lived experience about how best to engage, involve and listen to them. A good example of this the **Emotional Well-being Goals** which have been developed by people with personal experience of mental health services. This forms Appendix 2 to this strategy.

The 'I statements' captured below are examples of what people have told us are important to them in relation to how and where they live:

- I would like a house of my own with a garden.
- I would like to be close to a town so that I can catch a bus or walk to the local shops.
- I would like a pet dog.
- I would like somewhere to keep my bike.
- I need to know my son is safe, especially when I am no longer here.
- My daughter's mobility is not very good so she will need something on the ground floor.
- I want to live near my family and best friend so that I can go and visit them, and they can visit me.
- I want to live near where I work as I am not able to drive.
- I want to live near a park so that I can go for long walks when I am feeling anxious.
- My daughter loves pink and would like to decorate her home to her taste.
- To use my wheelchair everywhere in my home.

ACCOMMODATION STRATEGY FOR ADULTS WITH CARE AND SUPPORT NEEDS

• I want to watch what I like on the television.

The Council is keen to work with the market to develop innovative projects that provide a homely environment and actively encourage inclusion in our towns and villages. This Accommodation Strategy incorporates good design principles which should be used flexibly and in partnership with people who know the customer group. This forms Appendix 3 to this strategy.

Whilst there is a small number of adults with care and support needs who require long term residential or nursing care, the Council is moving away from this type of accommodation towards designing homes which enable people to exercise their rights as tenants within their local communities.

The information contained in this Accommodation Strategy will be used to develop an Investment Prospectus for Accommodation for Adults. This document will set out to investors, care providers and housing providers the Council's commissioning intentions and opportunities for new developments.

3. Forecast Populations

In the period from April 2016 to March 2020, there has been an increase in the number of adults with care and support needs known to the Council across all areas of need.

During this period the Council has saw an increase of 237 people with learning disabilities, an additional 74 people with a primary mental health need and an additional 131 people with a physical disability, that relates to. This represented an increase of 53% of people known to the Council.

The population of Central Bedfordshire is forecast to grow steadily over the next 20 years (see graph below). Between 2020 and 2040 it is predicted that there will be an additional 729 people with a primary mental health need, 742 people with a physical disability, 116 people with autism and 278 people with a learning disability, although not all will require social care services or support.

This represents an increase of around 7% over the 20-year period. This is attributable to general population increased and increasing life expectancy.

In addition to the population-driven increases in demand, there is emerging evidence that this will be compounded by an increase in care needs as people with learning disabilities get older.

At the other end of the age range are young people defined as those with Special Educational Needs and Disability (SEND) who will move from childhood to adulthood.

Preparing for adulthood through good transition planning is particularly critical for this group of people. The Council works with young people from the age of 14 years to support with transition and to inform its commissioning priorities.

Graph 1: population in Central Bedfordshire with a primary need relating to Learning Disability, Autism, Physical Disability or Mental Health



Data source Projecting Adult Need and Service Information (PANSI)

The graph below shows the number of young people turning 18 by year and broken down by primary area of need. Currently, the year 2023/24 is showing the highest number of young people expecting to turn 18 in that year, while 2024/25 is showing the lowest number. This is likely to increase as we move closer to that year and the more data is obtained.

Graph 2: shows the number of young people turning 18 by primary need and financial year



Not all young people turning 18 will be eligible for social care services and early preventative support could reduce or delay the need for services for some. The graph below indicates the number of young people expected to require ongoing social care in 2021/22. This shows that of the 101 young people turning 18 in 2021/22, only 46 (46%) are expected to require long term social care as adults.

It is expected that a similar proportion of young people is likely to require services in future years.

Graph 3: shows the total number of young people expected to transition to Adult Social Care



4. Future Accommodation

In recent years UK policy has encouraged a shift away from institutionalised settings for adults in need of care and support towards housing models that enhance independence and choice, and support people in their local communities. It is the Council's ambition to increase the supply of accessible, purpose-built homes for people with care and support needs, ensuring there is sufficient accommodation of different types.

Although there is not one definition of supported living, it is commonly understood that it means a person who needs support to live in the way that they want within a community. Supported living allows people to have their own tenancy and can choose their own support. There is a need for a variety of accommodation that consists of individual homes and multi-occupancy housing with shared communal space. People presenting with more complex conditions, living independently is possible through access to the right care, location and physical environment.

Design Specification for Adults with Care and Support Needs

Typologies of supported living differ across the country, there is not one model that fits all. Some people prefer to live in shared accommodation while others prefer to live alone or with their family. There are various models that respond to all age groups and needs, from individual home adaptations to large scale housing projects. It is recognised how important it is to develop inclusive design processes as well as getting the physical environment right for people for whom it is intended for. The aim for any future development should be to create a noninstitutional environment with a homely, domestic feel whilst considering the specific requirements of adults with care and support needs. A well-designed and maintained environment can both contribute positively to the well-being of the people living in it and reduce the amount of care and support that people require. Designs should be assessable to include people who have restricted mobility and to provide sustainable homes for people that can be adapted as people get older and their needs change.

The **Design Specification for Adults with Care and Support Needs** is attached as Appendix 3 to this strategy.

Use of Technology

In the last decade the digital revolution has changed significantly and the vision for the use of Technology Enabled Care (TEC) is currently being developed for Central Bedfordshire and will aim to create sustainable communities where people can live as independently as possible, feel safe and secure and participate in their local community. The Council would like to integrate the right technical products and solutions into all elements of social care and health where appropriate, that will enable people with care and support needs to meet their goals and aspirations.

The Council encourages the market to actively consider the use of TEC and how it is incorporated into any new development responding to the accommodation needs of people with care and support needs.

5. The Local Picture

The following section sets out relevant local strategies, policy, and projects and describes local provision.

Local Strategy and Policy

Central Bedfordshire Council Housing Strategy 2016 – 2021

The Housing Strategy identified what the key challenges for housing are over a 5-year period and what the Council and its partners are planning to do to overcome them.

There is a focus on meeting the housing needs of vulnerable people within the strategy and sets out several key objectives, these include:

- a) Delivering housing and providing support for the most vulnerable and those with specialist needs
- b) Prevent and respond to homelessness
- c) Improve the quality and access to affordable housing and private rented housing for vulnerable people
- d) Support residents experiencing long term unemployment to overcome barriers and move towards employment
- e) Work with housing partners on meeting the requirements of the Care Act 2014 to help provide integrated care, support and prevention services

The Council understands that many of our most vulnerable residents require higher levels of support to live comfortably and with the level of independence they desire. This Accommodation Strategy supports the delivery of the key objectives set out in the Housing Strategy in identifying the need to deliver suitable accommodation, that promotes mixed communities, and moves Central Bedfordshire closer to the point where everyone will be able to live in a home which is suitable for them at different stages of their life.

The Vision and Values of Central Bedfordshire Council

Articulating a vision of how services should develop is not complex. The overwhelming evidence from people with care and support needs is that they have the same aspirations as everyone else: a nice place to live, gainful employment, rewarding relationships, a place in their local community and freedom to choose how they live their lives.

Of course, just like the rest of the population, different people will prioritise different aspects of these key components of a good life and those priorities will likely change during a person's lifetime.

People with care and support needs also have the same rights as everyone else – rights to healthcare, rights to be protected from abuse and exploitation and the right to make choices, even if those choices may not be what others would make.

The **Vision for Community Assessment Services** within Adult Social Care is – 'To enable you and your potential, our passion is to make a difference. We aim to achieve this by supporting you in your journey to achieve what matters to you. Achieving our vision means always staying true to our values and working together as a team with you, your family, your carers, your community and our partners.'

The vision and values for the Council highlight two key themes that covers a whole range of services provided for people and their carers:

Progression towards greater independence being at the heart of all interventions

All services should enable people to progress towards greater autonomy and independence even if a person's capacity to develop is limited. Progression should focus on the areas where a person is most keen to develop or in areas which will be most beneficial for the person in the future.

Promoting well-being

Supporting and encouraging people and their carers to look after their health and well-being so they can avoid or delay the need for support services through Adult Social Care.

To achieve these aspirations, there is a third theme:

An effective workforce

Create a more productive, competent and confident workforce across the care sector, assessing support, training and information that is needed to provide high quality care and support to the people they support.

Working with Health Partners

In addition to the Council's strategies, the approach of health partners is equally important in delivering the range of support that people need. The Council works with neighbouring local authorities and NHS commissioners on a number of important initiatives.

Bedfordshire, Luton & Milton Keynes (BLMK) Transforming Care Partnership (TCP)

The NHS England Long Term Plan (LTP) commitments for People with a Learning Disability and Autism has been set out in the Bedfordshire Luton and Milton Keynes (BLMK) Transforming Care Partnership (TCP) 3-year delivery plan (2021/22 – 2023/24). One of the key long-term commitments is to ensure people with a learning disability and / or autism are not staying in specialist hospitals longer than is necessary, and for local systems to work collaboratively and commission skilled and high-quality community providers that can support people who present with complex needs and / or present with risky behaviours.

This will be supported by the engagement with new Provider Collaboratives in their development of discharge pathways and community alternatives to inpatient provision, taking a collaborative approach to transferring resources from specialised inpatient care provision into the community.

The delivery plan has been allocated investment to support delivery of the commitments over the 3-year period.

Bedfordshire, Luton & Milton Keynes (BLMK) Mental Health and Wellbeing Delivery Plan 2021/22

The overall aim of the delivery plan is to prevent our residents across BLMK from becoming unwell and to provide a whole person approach to promote good mental health and to support people living with mental illness to recover and live well. This delivery plan brings together several key documents, these include:

- 1. The NHS Mental Health Implementation Plan 2019/20 2023/24
- 2. The BLMK Advancing Mental Health Equalities Strategy
- 3. National Suicide Prevention Strategy

The system plays a vital role to ensure the right support is available in the community to protect and improve our mental health and this has been highlighted with COVID-19 and the need to prevent and manage ill health in groups that experience inequalities.

Building a holistic approach is needed to support people's resilience and recovery, social support, employment, and housing are wider determinants and should be considered when looking at the layers that can support a person's mental health need.

You can find out more about the approach of BLMK here: https://www.blmkpartnership.co.uk/

Housing-Focussed Projects

In 2019 the **Stock Conditions Survey** project was launched, reviewing all accommodation provided in Central Bedfordshire offering residential care and supported living support services. The objectives of the project were to:

- Survey all accommodation offering support services for adults in need of care and support
- Assess each property on quality, accessibility and suitability for the customer group residing there
- Evaluate a medium and long term plan for re-providing accommodation that is not future proof for its intended use

The survey focused on six key areas, these included:

- 2. Accessibility
- 3. Location
- 4. Ensuite facilities (multi-occupancy) & self-contained
- 5. Overall space (internal and external)
- 6. Other contributing factors

Each service was individually assessed against each criterion and those that scored low were identified as a high priority to replace within the next five years.

A total of 57 sites were reviewed, there was a mix of Council owned properties, properties owned by Registered Providers of social housing (RP's) and the independent market. Of these, 7 schemes with a total of 43 units of accommodation were identified as needing to be replaced within the next five years, with a further 7 schemes with a total of 60 units of accommodation needing to be replaced within the next ten years.

The Housing Team within the Council is running a **Media Campaign** that is aimed at 'breaking the stigma' around homelessness. This campaign is being used to encourage residents who are facing housing issues and who are at risk of eviction to contact the Council at the earliest opportunity so that support can be offered to reduce to the risk of people losing their homes.

The Housing Team is also working towards delivering **Next Step Accommodation** offering four properties that provide support to the people living there through an allocated support worker. This service will work collaboratively with specialist services, for example drug & alcohol and / or mental health services, to ensure people who are eligible, have a pathway in place that enables timely access to specialist support.

1. Quality

6. Current Accommodation and Forecast Demand

Accommodation Types

There are various types of accommodation provided as **Supported Living**. These can compromise of multi-occupancy properties where people live together in a shared house, a housing project offering multiple one bed self-contained units within a scheme and one & two bed single properties. Compatibility is key, particularly with shared multi occupancy properties, if the mix of tenants is not right, it can adversely affect the quality and viability of the scheme.

Long term voids are often seen in the smaller shared properties, this is normally due to concerns around people sharing and compatibility. The demand is often for one bed self-contained homes that are positioned within a scheme and preferable, with communal space so that people have a safe space to come together and socialise.

No matter what an individual's levels of ability or disability are, the services they receive should aim to maximise the person's ability to control their environment and make decisions on both a day-to-day basis and in terms of life choices. To fully achieve this the services themselves should be designed to be flexible, and to change as the needs and aspirations of people change.

Other accommodation models include:

• **General Needs Housing** – includes private renting and housing provided by the Council and other Registered Social Landlords.

People will have an opportunity to access support through a personal budget, domiciliary care or outreach support.

- Shared Lives The Shared Lives scheme supports people who are eligible from the age of 16 years who need support to live in the community. The scheme provides accommodation and support within a family environment for either a short or long term stay with an approved Shared Lives carer. The aim of the scheme is to match a person who needs care and support with a compatible Shared Lives carer.
- Independent Living (extra care housing) This arrangement is for people who are 55 years and above who have care and support needs and want to live independently within the local community.
- Residential Care This is a registered service with CQC offering 24-hour care within a shared environment. Long term residential care would only be considered for people with very complex needs where other independent living options have been considered and ruled out. This type of provision is also used to provide for short breaks for people who normally live with family carers.
- Nursing Care This is the same type of service and environment as residential care with the addition of providing nursing care staff to meet the health needs of the people living there.

Current Provision

This section highlights existing services offering accommodationbased care and support provision across the four locality areas of Central Bedfordshire, focussing on Supported Living and Residential and Nursing Care. This section also covers any new services and developments that are being planned for up to 2023/24.

Localities in Central Bedfordshire

Leighton Buzzard has the least amount of service provision and therefore the lowest number of placements being offered, with only two supported living schemes being provided. There are currently no known developments or services being planned for, and it is not entirely clear why there is a low supply of this type of provision. This may be because of property prices and land availability, however the Council is keen to work with the market to identify and understand any challenges so that new supply can be provided for people in the Leighton Buzzard area.

Chiltern Vale has the highest number of placements with a lower number of services in comparison to Ivel Valley and West Mid Beds, indicating that the schemes in Chiltern Vale are bigger in size. There is currently a total of 13 accommodation-based care and support services, these consist of 10 supported living schemes and 3 residential care homes. Chiltern Vale has seen the most amount of activity with two supported living schemes opening in the last six months offering a total of 19 placements and a further three schemes planned for up to 2023/24 offering an additional 34 placements. Central Bedfordshire Council provides a total of 4 beds within its short breaks unit that is collocated with a residential care home for people with profound and multiple learning disabilities.

Ivel Valley has the highest number of schemes overall, there have been two new supported living schemes opened since January 2021 offering up to 9 placements and a further scheme is planned for in 2023/24 offering an additional 10 placements.



Map 1: Accommodation across the localities of Central Bedfordshire

ACCOMMODATION STRATEGY FOR ADULTS WITH CARE AND SUPPORT NEEDS

There are 16 supported living schemes and 5 residential care homes, making a total of 21 services in Ivel Valley.

West Mid Beds has the highest number of residential care homes compared to the other areas. A new purpose-built short breaks unit supporting people with learning and physical disabilities is being planned for 2023/24. This new build is going to offer a total of 8 x units, integrated within a wider development in Flitwick. There is a total of 22 accommodation-based care and support services, these consist of 11 residential care homes and 11 supported living schemes.

Graph 4 below shows the total number of placements provided across each of the four locality areas and the number of vacancies that were available as of May 2021. Although overall vacancies are very low, Ivel Valley has the highest number of vacancies across the supported living schemes - 11% of the overall capacity was identified as vacant. This is likely to be because of smaller schemes offering a shared living environment where compatibility needs to be carefully considered. Long term voids are rarely seen in 1 x bed, selfcontained accommodation. This type of accommodation is preferred and there is often a waiting list for people who would prefer to live in their own home rather than sharing with others.



Graph 4: Service Provision and Vacancies – May 2021

Table 1: Service Provision and Vacancies – May 2021

Locality	Service Type	Number of Vacancies	Total No. of Places
Chiltern Vale	Residential	6	161
	Supported Living	0	34
Ivel Valley	Residential	12	137
	Supported Living	1	43
Leighton Buzzard	Residential	0	0
	Supported Living	1	10
West Mid Beds	Residential	3	106
	Supported Living	2	63
Total		22	414

Forecast Demand

Demand for accommodation has grown significantly in the last five years and this growth is forecast to continue in the next five years. This forecast is set out in the tables below in terms of both the types of accommodation required and the primary needs of those needing accommodation.

Although it is considered that the overall demand forecast is robust, the Council's strategy is to promote the use of supported living in preference to residential or nursing care so it is likely that in practice there use of residential and nursing care will stay stable or even reduce slightly, whilst supported living will increase to compensate.

Supported Year Residential Nursing Short Total Living Breaks (Apr.) Care Care 2021 185 29 178 48 440 2022 46 455 193 32 184 2023 201 34 190 44 469 2024 37 484 209 196 42 2025 39 202 41 499 217 42 207 39 512 2026 224

Table 2: Forecast Demand for Accommodation by Type

Graph 5: Forecast Demand for Accommodation by Type



Table 3: Forecast Demand for Accommodation by Primary Need

Year (Apr.)	Learning Disability	Physical Disability	Mental Health	Total
2021	332	46	48	426
2022	333	50	54	437
2023	335	55	59	449
2024	336	60	64	460
2025	337	64	70	471
2026	341	68	74	483

Graph 6: Forecast Demand for Accommodation by Primary Need



Developing the 'core & cluster' model

The term 'Core and Cluster' is widely recognised in relation to accommodation models for people who have an assessed need

under the Care Act 2014. The 'Core' generally offers highdependency accommodation with 24/7 care and support on site, while cluster accommodation can consist of satellite accommodation in and around the same area creating a housing pathway.

More often, core and cluster models evolve over time as properties become available that are well placed and purchased to create this type of arrangement. The Council is keen to create accessible and purpose-built core and cluster models across larger developments where a supported living scheme is built, offering up to 14 one bed self-contained units, including staff facilities and multi-purpose space that would become the core. The cluster accommodation can follow and ideally be built within a one-mile radius to the core, creating clusters of up to 6 one bed units.

This model creates a pathway for people with care and support needs and enables people to move confidently into independent living with better use of TEC to continue to promote further independence within their home where they feel safe. This approach creates a sustainable model for the care market that enables providers to respond positively, creating a financially sustainable model that delivers economies of scale by increasing commissioning activity within a highly concentrated area.

Feedback from providers highlighted the challenge with delivering low levels of care and support to people, where carers travel time far exceeded the time, they delivered support to people, making this an unsustainable model. Delivering economies of scale enables providers to deliver low level support in a flexible, responsive and creative way as they have high commissioning activity that operates in a targeted area.

7. Financial Information

To better understand the costs across the market, in 2017 the Council commissioned an independent review. Valuing Care (VC) were commissioned to undertake an exercise and review the cost of delivering supported living and residential care services for adults with learning disabilities in Central Bedfordshire. The Council is keen to ensure that it has a balanced and sustainable market for schemebased services, whilst ensuring that rates paid represent value for money (VFM).

The purpose of the cost survey is to provide the Council with greater understanding of the general health of the local market, and usual cost of delivering each type of care.

The Council was provided with the necessary intelligence to develop a range of actions that supported a sustainable market going forward. One of these actions recommended 'value for money' rates, providing a fair and reasonable basis for determining local service rates. To ensure these 'value for money' rates continued to reflect the actual cost of providing services, the rates have been uplifted on an annual basis, responding to inflation.

Service reviews are currently being carried out to ensure creative, personalised and high-quality care and support is being delivered to people with assessed needs. The aim of a service review is to review all care packages within the scheme and ensure people are being supported to reach their ambitions through innovative approaches that achieves positive outcomes for people and value for money. So far, approximately £120,000 has been achieved through efficiencies.

The table below sets out the annual spend against service areas between March 2016 and March 2021. The total number of

customers known to services has increased between 2016 and 2021 and the spend has reflected this and increased. The highest area of investment is for learning disabilities who also have the highest number of customers.

Table 2: shows the full year effect cost and total number of customers

Primary area of need	Total number of customers as of March 2016	Total Cost as of March 2016 (£M)	Total number of customers as of March 2021	Total Cost as of March 2021 (£M)
Learning Disability	594	17.2	831	23.4
Physical Disability	202	3.2	333	6.1
Mental Health	35	0.9	109	2.5

8. Strategic Priorities

This section outlines how the information presented in this strategy informs the strategic priorities, captures the feedback from people who use our services and the vision for Adult Social Care.

The principles have been developed through extensive engagement with the local market, people with lived experience and family carers. These have been aligned to the Council's 2050 Vision:

A place to call home - A home of your own where people are offered choice and control as to where they live and who they live with. For those with the means and the aspiration, home ownership should be an option.

A great place to live and work - Provide attractive, accessible & purpose-built homes across Central Bedfordshire that have been designed to meet the accommodation needs of people for whom it is intended for, in a flexible and adaptative way that ensures new developments are future proof whilst delivering high quality accommodation.

A place to prosper - Support people to live fulfilling & meaningful lives by identifying individual strengths, skills, and interests and enable people to develop these within their local community by ensuring easy connectivity to local services, amenities, and local transport links.

A place to be proud of - Create a housing pathway that enables and encourages people to live as **independently** as possible by offering a diverse range of accommodation, care, and support options, providing economies of scale for local providers that creates a **sustainable and active market** in Central Bedfordshire. A prosperous & innovative economy - Build in a Technology Enabled Care (TEC) model that offers an alternative to traditional approaches to care and support that promotes a holistic, innovative, and digital offer, promoting people's independence and quality of life.

It is acknowledged, and shown in the data, that over the next 20 years, the population will grow and with that the number of people with care and support needs will increase and so will those with complex care needs. The Strategic Priorities are now set to give a broader more encompassing perspective for all adults with care and support needs. While these priorities cover Central Bedfordshire, there are geographical differences across the four locality areas. To understand these better, an Investment Prospectus, based on this strategy will detail this further.

accessible, purpose-built buildings that are

Strategic Priorities 2022/27

,			
Strategic Priority 1	Increase supply of accessible and purpose- built homes by 20% over the next five years		sustainable and future proof, designed to meet the accommodation needs for the people who live there.
	 Increase the supply of supported living accommodation across Central Bedfordshire that can respond and meet a diverse range of needs. Continue to promote the development of one bed, self-contained homes that host a communal, multi-purpose space reducing the risk of social isolation. Ensure greater use of Technology Enabled Care is built into any new development. Carefully designed accommodation that is tailored to meet the needs of people with autism and complex needs. Continue to improve the quality of 	Strategic Priority 3	 Work with the market to foster continual improvement in the quality of accommodation-based care and support services Increase fit for purpose, sustainable homes and reduce older converted care home provision. Through the PAMMS (Provider Assessment & Market Management) framework, continue to improve the quality of care and support being delivered. Improve the use and uptake of Technology Enabled Care across the market.
	community services across social care and health, to support people to live independently.	Strategic Priority 4	 Increase capacity for building based short break units Provide sufficient and suitable building
Strategic Priority 2	 Replace existing accommodation that is poor quality Increase the supply of suitable accommodation that can replace existing buildings that have been assessed as unsuitable. Work with local providers to plan for 		 based short breaks that meets current and predicted need. Provide services across Central Bedfordshire that offers people the choice and control as to the services they would like to access.
	accommodation to be replaced with		

Strategic Priority 5	 Make greater use of Technology Enabled Care (TEC) Promote use of digital technologies across all service provision Improve awareness and understanding by all stakeholders including carers, customers nd the wider population.
Strategic Priority 6	Adopt a creative housing model that facilitates progression and independence
	 Create a housing pathway that will support progression and enable people to move onto greater independence. Provide economies of scale that delivers a sustainable housing model and an efficient commissioning process that will achieve value for money. Develop a housing model that facilitates and enables move on that is safe and flexible to respond to individual needs. Identify potential opportunities in the availability of land for development that could respond to the strategic priorities contained within this Strategy.

9. Implementation & planned developments

The Council will continue to work with key partners and providers to consider opportunities where there is a potential to increase or remodel existing provision to deliver new purpose-built accommodation. This may include working with partners across the Bedfordshire, Luton and Milton Keynes footprint to deliver more specialist accommodation that responds to complex needs.

There are several projects started and are on track to deliver by 2023/24, these are described in the table below:

Table 3: Current planned developments of accommodation

Area	Type of provision	Total number of units
Quarry Walk, Dunstable	Specialist Supported Living for people with profound and multiple learning disabilities	20 (mix of one bed and multi occupancy)
New Road, Sandy	Specialist Supported Living for people with care and support needs	10 (one bed self- contained homes)
Vernon Place, Dunstable	Integrated & Accessible Specialist Supported Housing for people with care and support needs	12 (one bed self- contained homes)

Steppingley Road,	Building based short	8 units
Flitwick	breaks for people	
	with learning and	
	physical disabilities	

The Council is keen to work with providers who share and contribute towards the vision and ambitions for Central Bedfordshire that supports people with care and support needs to live fulfilling and meaningful lives.

The Council expects developers and landlords to:

- Preferentially develop new accommodation in locations where there is a current or forecast shortage.
- Offer accommodation at **rent levels** that are appropriate for the location.
- Develop new accommodation of types and in locations that support a core and cluster approach.
- Follow the Design Specification: Accommodation for Adults in Need of Care and Support unless other constraints prevent this.

The Council expects care providers to:

- Embed a culture of dignity and respect throughout all services and teams.
- Promote independence choice and control for people who use their services and work with people and their families to understand people's strengths and capabilities that will support individuals to reach their goals and aspirations.

ACCOMMODATION STRATEGY FOR ADULTS WITH CARE AND SUPPORT NEEDS

- Work proactively to quality assure their services, listening to the views of people and families, ensuring a co-productive approach to any service change or improvement.
- Work in partnership with all agencies across social care, health and the voluntary / community sector to continuously improve the quality of service provision and continue to develop innovative ways of working as a whole system whilst achieving value for money.
- Invest in the development and training of their workforce and encourages the workforce to deliver support with skill and imagination. The workforce and people using services are **empowered** to take **positive risks** and be creative in their thinking.
- Focuses on preventing, delaying and reducing the need for care and support.
- Work closely with the community to form strong partnerships with local services and businesses to create meaningful opportunities for work experience, training and employment.
- Consider the use of Technology Enabled Care (TEC) to increase a safe environment for positive risk taking when supporting people in the community.

The Council hosts provider forums and the purpose of the forum is to facilitate honest, open discussions between providers, and health and social care commissioners. The aim is providing an opportunity to share good practice, identify local challenges, training opportunities and shape the local market that will meet the future needs of the local population. The Council is keen to work collaboratively with providers who provide services within Central Bedfordshire to continue to raise the quality to improve the outcomes for people who use the services and their families.

10. Contact information

If you want to find out more or discuss any aspect of meeting the accommodation, care and support needs for people, please get in touch. You can:

Email us at: strategic.commissioning@centralbedfordshire.gov.uk

Call us on: 0300 300 5585

Write to us at: Strategic Commissioning Adult Social Care, Priory House, Monks Walk, Chicksands, Shefford, Bedfordshire, SG17 5TQ

ACCOMMODATION STRATEGY FOR ADULTS WITH CARE AND SUPPORT NEEDS

11. Appendices

Appendix 1: Easy Read Learning Disability Commissioning Plan

Appendix 2: Emotional Well-being Goals Coproducing Commissioning

Appendix 3: Design Specification: Accommodation for Adults With Care and Support Needs.



About this document:			
What is a Commissioning Pla	What is a Commissioning Plan?		
Plan	This document tells people what the future commissioning plan is for people with a learning disability.		
	Commissioning means planning, developing and buying services.		
5 Ypars 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 22 24 25 26 27 28 29 30 31 14 15 16 17 18 19 20 21	The plan is for the next 5 years.		
Central Bedfordshire Bedfordshire Clinical Commissioning Group	It is a joint plan between Central Bedfordshire Council and Bedfordshire Clinical Commissioning Group (BCCG).		
Council	The Council plans for social care. This means the care and support services people receive.		





Co-Production and Engagement

Council	The Council and the BCCG are working together to jointly commission services which will ensure better outcomes for people.
	We wanted to work with people with learning disabilities to help co-produce this document.
	In 2019, Right Track supported the Council to start the engagement with local people.
I think	Right Track collected the views of people with a learning disability on how they felt about current services.
Report	They put these views into a report for the Council which have been used to help shape this document.

Population

The current situation:		
	In 2019 it was estimated there were 284,000 people living within Central Bedfordshire.	
2020 2020	In 2020, it is estimated that about 4,200 adults with learning disabilities, aged 18 to 64 years, live in Central Bedfordshire.	
	This number is expected to rise to about 4,500 by 2040.	
2040	This will mean an extra 3 00 people aged 18 to 64 years, living in Central Bedfordshire.	



	In 2020, it is estimated that about 1,100 adults with learning disabilities, aged 65 years and over , live in Central Bedfordshire.
	This number is expected to rise to about 1,600 by 2040.
2040	This will mean an extra 500 people aged 65 years and over, living in Central Bedfordshire.
	This will mean, over time, there will be more people living in Central Bedfordshire.
	This will result in more demand for services.
	Therefore, we need to ensure there are enough services available to meet current and future demand.

Accommodation

The current situation:

My House	In Central Bedfordshire, there is a range of accommodation- based care and support for people with learning disabilities.
	 Residential care – this means people who have personal care needs, living in a care home
	 Nursing care – this means people who have nursing care needs, living in a care home which have qualified nurses on site
	 Supported living – this helps people with care and support needs to live in their own home, within their local community in a safe and secure environment
	• Independent Living – this is where people live in their own home and may have low level support to help maintain their home life
Shared lives plus	 Shared lives – A carer shares their home and family life with a person who needs support to live everyday life.

Care Quality Commission	These accommodation types are all regulated by the Care Quality Commission (CQC).
Contract	These different types of accommodation-based care and support can have different contract types.
	These are: • Spot purchased placements – this is when a service is brought by the council or the BCCG on behalf of someone
	 Block contracts – this is where the commissioning authority buys more than one service over a set period of time
Council	 In-house services – these are services run by the council
	The cost for each accommodation type is not the same for everyone.

	This means people can pay different prices for receiving the same or a similar service.
Bucks	Sometimes the Council can only find suitable accommodation for people outside of Central Bedfordshire.
	The Council does not like having to move people away from family, friends and what they know.
The use Moving Company Bucks Herts	When this happens, the Council will try to move people back to their local area if they can.

Preparing for Adulthood (PfA) and Life <u>Transitions</u>

The current situation:



	Moving from childrens to adult support services is a different experience for everyone.
	It is important everyone is aware of the options available to them in all stages of life.
Booklet	The Council produced a document which explains the options available for people moving from childrens to adult services.
	This document was produced with the help of young people with a disability.
Central Bedfordshire	The document is called A Guide to Your Journey.
	It is available to view on the Council's website:
<u>https://www.centralbedfordshire.gov.uk/info/15/special_educational_needs_and_disability_</u> local_offer/125/preparing_for_adulthood_%E2%80%93_how_we_can_support/2	
<u>iocar oner/125/preparing for additional /022/080/035 now we can support/2</u>	



	They work with local services to identify new ways they can support young people with a disability.
	Social workers provide support to adults at other stages of their life when needed.
Day opp	ortunities
The current situation:	
Day Centre	Day opportunities gives people with a learning disability the chance to take part in activities away from their home.
	There are three day centres for adults with a learning disability in Central Bedfordshire run by the Council.
	The Council commissions 47 other organisations to provide day care.
Day Centre	Of these there are 16 providing services in Central Bedfordshire.
Council	The Council are working to improve the services available to people at these centres.
	The Council have worked with day centre customers to
	1
----------------------	--
	produce a document which explains the day offer.
Booklet	The document is called: Making Day Services About You – What is the Day Offer?
esy read esy read	It is split into the key components and principles of the day offer.
Checklist	By components we mean what the Council want to do, which include:
	 Making sure people are being looked after
	 Making sure people's needs are met
endiana	 Giving people time to see friends and meet new people
	 Helping people to keep fit and healthy
	By principles we mean how the Council want to do it, which include:
	 Working with people on the day offer



	 Giving people the choice of what they do
	 Helping people learn new things
	 Making use of local facilities such as leisure centres and libraries
Employme	ent Support

The current situation:



Employment support is helping people to gain paid or voluntary work, education or training.

Work Place	In 2018/19, the national average of people with a learning disability aged 18-64, known to local Councils, who were employed was 6 %.
Council	People with a learning disability known to the Central

	Bedfordshire Council who are employed is 8 %.
1 %	This is 2 % higher than the national average.
Work Place	In 2018/19, for Central Bedfordshire, the gap in the employment rate between those aged 18-64 with a learning disability in employment and the overall employment rate was 73% In CBC unemployment is at 3% unemployed among people with an LD is 98%.
Council	The Council employ staff to support young people with special educational needs through the transition from education to employment.



 Access training to develop skills
 Build skills to apply for jobs such as CV writing and interview support
 Access paid employment
 Access on the job training

Short Breaks and Shared Lives

The current situation:



Short breaks help carers have time away from their caring responsibilities.

Council	The Council has a small amount of in-house short break options.
	The remaining demand is met by independent providers.
	The number of providers offering short breaks has fallen by 67% since 2017/18.
Plan	The Council want to develop a plan to meet the need for short breaks.



	to choose and pay for the care and support, they need.
	Examples of the type of short break you may use Direct Payments for are: • Going on a supported holiday
shared lives plus	 Using the Shared Lives Scheme
shared lives plus	The Shared Lives Scheme has carers offering short-term breaks for people aged 16 and above in Central Bedfordshire.

Carers	
The current situation:	
	A family carer provides unpaid support to a family member who cannot live independently.

	This can be stressful and cause the carer health problems.
	There are 760 people with a learning disability known to the Council's Adult Social Care Teams.
40%	40% of those 760 people live with family members.
Council	Support for family carers is a high priority in the Council.

	There is a designated lead social worker available to help family carers.
Plan	This helps families make plans for the future.

Council

	The Council are reviewing the current offer for carers within Central Bedfordshire.
<image/>	 The aim of this review is to: Help carers to be able to care for people better Help improve the wellbeing of carers Help carers access a wider range of information, advice and guidance Raise awareness of the opportunities for support carers have
BEDFORMS	The Council currently commission Carers in Bedfordshire to provide support to local carers in Central Bedfordshire.

Technology Enabled Care (TEC)

The current situation:



This is when technology is used to help with someone's care or support needs.

It can also be used to help someone: • Improve their wellbeing
 Increase their independence Feel safe and secure
The Council wants to promote the options that are available to people.
This will help people to improve their quality of life.

Health and Wellbeing	
The current situation:	
	Health and Wellbeing groups help someone with a learning disability to live better.
	When thinking about the needs of people with a learning disability, the BCCG and the

	Council have to consider government legislation.
	There are various pieces of legislation that helps to improve the lives of people with a learning disability.
	These include:
	• The Care Act 2014
Care Act 2014	 The Children and Families Act 2014
think local act personal	 Think Local Act Personal Group (TLAP)
BLMK Transforming Care Partnership	 Transforming Care Partnership (TCP)
Learning Disabilities Mortality Review (LeDeR) Programme	 Learning Disability Mortality Review Programme (LeDeR)





	Keynes (BLMK) offering all age support.
	Each scheme has developed a plan to make improvements within health and social care.
	The TCP looks at improving health and care services so that more people can live in the community with the support they need.
	LeDeR looks at the reasons why people die to be able to make improvements to health and care services.
	These changes will make a difference to the quality of a person's life.
BLMK Transforming Care Partnership	The BLMK TCP Delivery Group reports into the BLMK TCP Board.
	The BLMK TCP Delivery Group look after 6 different work areas.
Learning Disabilities Mortality Review_ (LeDeR) Programme	These are:



	LeDeR Programme Steering Group
	 Health Outcomes and Inequalities
	 Care Education Treatment Review (CETR) Improvement Plan
	 Market Shaping
	Workforce Planning
	Autism and Neurodiversity
East London NHS Foundation Trust	The BCCG and the Council commission East London Foundation Trust (ELFT) to provide specialist learning disability services across Central Bedfordshire.
My area	This includes offering a wide range of:
	community services



	and • services to those staying in hospital while receiving treatment
March 2022	The current contract with ELFT ends in March 2022. When this contract comes to an end, a new one will be procured.
Contract	Procurement is the process undertaken for new contracts of goods and services.

<u>The future plan</u>	
Council	The Council would like the future plan to be created with the help from people with a learning disability.
Plan	The Council have used the information collected in previous engagement and what we know about the current situation to help create the future plan.



	The Council will continue to include people with a learning disability in delivering the future plan.
I think	The future plan will help us:
	 Be clear on what people want in the future
E E E	 Ensure money is spent on the right things
	 Provide the best support possible for people with a learning disability

Plan	To make sure we achieve this we have broken the plan down into 9 different areas to focus on.
	The 9 areas of the future plan are: • Shaping the market

 Preparing for Adulthood and Life Transitions
 Day opportunities and
employment
 Shared Lives
 Short breaks





Interfuture plan: Image: Star planning for: Image: Star planning for:

My area	What people told us about the current situation:
	 It's not just about the type of home, it is the location and what is nearby
Rigdesude Shefed Sugistan: Bucares Consult	 There isn't somewhere suitable for my needs in the area I want
editr Melghbourhood	 We need the right people supporting us with our housing needs
	 We want to feel safe in our home





housing suitable for people's needs
 Commission providers to offer high quality and safe services
 Commission providers to offer support to people in a creative way that will provide positive outcomes.
This will be done by looking at people's strengths, as well as the community and social networks available to them.



Preparing for Adulthood (PfA) and Life <u>Transitions</u>

The future plan:		
	This includes planning for all	
	stages of a person's life such as:	
	Child to teenager	
	 Teenager to young adult Adult to an older adult 	
- 222	What people told us about the current situation:	
	 We should be at the centre of any approaches taken 	
	 This affects all stages of our lives – not just leaving school! 	
Constant of the second s	 We don't always know what the options are 	
	 Talk to us before making changes to a service we use 	





 Adults moving out of their family home
 Older people who have care needs that are changing



 There aren't any options for the evening or weekends
 It is not just about what we do it is the relationships we make
 Peer support should be promoted more
 Working makes me feel like everyone else

	 Employment doesn't just mean being paid
	The plan for the future:
	 Continue to deliver the key components and principles from the Making Day Services About You – What is the Day Offer? document described in the current situation.
EEE	 Ensure options are affordable



	 Increase the number of young people and adults with learning disabilities to gain paid employment by providing support and training
--	---





 Promote the benefits of people with a learning disability being in the workplace
 Commission support for people in a wide range of employment settings





 Increase the number of carers involved in the scheme
 Provide short-term and long-term placements
 Expand the service to: support people from the age of 16



 It means different things to everyone
 Understand who needs it and why
 Breaks need to be away from the family home





 Ensure options are affordable
 Provide information and advice on the range of options available





 Provide information and advice on the range of options available
 Ensure carers look after their own wellbeing
 Create opportunities for carers to be able to do the things that are important to them



The future plan:



	<u>The plan for the future:</u>
Info	 Provide information and advice on the range of options available
	 Promote the benefits of using Technology Enabled Care to everyone
	 Ensure new building developments have Technology Enabled Care throughout so they can be personalised



	 Raise awareness with providers about the Technology Enabled Care available for the people they support
--	--





What people told us about the current situation:

- NHS services are not always joined up
- People with the right skills are needed to provide care and support

	 There is not enough specialist equipment to support people
Training Room	• There is not enough training for families and carers to help them provide care and support
	The plan for the future for:
	Annual health checks:BCCG want to increase the number of people
GP Surgery	identified as having a learning disability with GPs



 BCCG want to increase the number of people being offered and having annual health checks
The Transforming Care Programme (TCP):
 Continue to deliver on the work plan that is monitored by the TCP board

	 Work with people with a learning disability and autism, and their families, on delivering this plan
	 Work with partners to deliver change and increase services in the local community that will reduce inpatient admissions
	• Ensure there are specialist services available in the community that can meet the needs of everyone
plan	Learning Disability Morality Reviews (LeDeR):

 Support the delivery of this work plan
 Supporting the completion of the reviews
 Make sure improvements are identified





 Identifying gaps in local services
 Reviewing the outcomes set out in the contract

How this benefits you

	The Council will continue to work with people with learning disabilities on these future plans so they will:
??	 Increase your choice and control
	 Support you to identify your own strengths and capabilities
	 Help you to identify the support available to you within the local community and your social networks



	 Help you to achieve your goals and ambitions from having more independence
--	--





	 Offer a more flexible approach to meet your needs
--	---

<u>Contact Us</u>	
	If you have any questions on the information within this document, then please let us know.
Model of Market	You can contact us by: Phone on: 0300 300 5585
	Email at: strategic.commissioning @centralbedfordshire.gov.uk
	Post to: Kaysie Conroy Strategic Commissioning Team
Adult Social Care Central Bedfordshire Council Priory House Monks Walk Chicksands	

Shefford SG17 5TQ	



Emotional Well-being Goals Co-producing Commissioning

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An organic plan - developed by people with lived emotional well-being experience, that shows what people need and want, to support good emotional well-being throughout their lives.



It was important to the group to refer only to emotional and physical well-being instead of mental and physical health. Ingrained historical negativities in society around "mental health" create stigma and division, and this small change in terminology could have an important impact on creating parity of esteem between emotional and physical well-being, which are equally important to an individual's overall health and well-being.



Soil / Roots – shows what is required at the core (roots).

Flowers – represent people. Everybody needs different levels of care & attention to grow, survive, flourish & thrive.

Sky – These are what people need to maintain good mental wellbeing, otherwise known as wellbeing wishes.

Sun – what keeps people well and prevents a person's mental wellbeing deteriorating.

Circle – represents whole lifetime, holistic approach.

Acceptance – by people, professionals and society as a whole that everyone has emotional well-being which is just as important as looking after our physical well-being. Acceptance that change in care, support and behaviours is required to address stigma and support people in a holistic way. People accepting when their own emotional well-being is poor or deteriorating, and for some, diagnosis, understanding and accepting the root cause.

Clear, concise communication	Freedom of Choice	No Stigma	Supportive Services	Defined Simple Pathway
 "I want simple information about what is available. Who, what, when, how" Simplify the complexity. Provide clear and concise information that is accessible and informative. Family carers to be involved & fully informed about what they can expect, how they can best support the people they care for & access support themselves No jargon and accessible information that is available in different languages. Choice in the method of communication, consideration given to different needs, age groups and abilities. Information available that shows all the services & options available in one place & informs who can access them, how and when. Information overload – to much information when you are unwell can be stressful. Real life experiences that people can relate to so they don't feel alone. Use of video clips so people don't have to read (which can be exhausting). Professionals to be sensitive and considerate when communicating significant decisions / aspects regarding us and our support, such as discharge from a service. Provide clear and meaningful information about what is available to people and their carers when they leave a service . 	<text><text><text><text><text></text></text></text></text></text>	 "I want empathy & understanding. I don't want to be labelled" Raising awareness of emotional well-being within local communities through community groups, VSC, businesses and employers, providers and carers. Importance of language & terminology. Move away from referring to mental health and recovery, and refer to lifetime well-being. Information & Incentives for employers to provide good emotional wellbeing support, ie Emotional Well-being first aiders / emotional well-being first aiders / emotional well-being support, ie Emotional well-being support, ie Emotional well-being support, ie Emotional well-being first aiders / emotional well-being support, ie Emotional well-being san invisible illness within local communities and organisations Share real life experiences that people can relate to. Provide facts, statistics and information to raise awareness of different disorders, such as bipolar, schizophrenia etc 	 "I want consistency, to not have to keep retelling my story" Services that are joined up to support us and each other. Support people to access another service at the same time, or to move from one service to another. Services that are informed and talk to each other. A single point of contact with someone who knows my information and is able to offer support and guidance holistically to me and my family carers, this may include supporting me to access other services. Offered support to access other service areas that are joined up so that I don't have to keep telling my story, for example housing, employment, prevention, medication, finances, legal, drop-in, alternative therapies, crisis, isolation, physical well-being, addictions, post natal, carers, peer support. Someone with emotional well-being experience to provide advocacy support for significant areas of life such as financial matters, legal, housing. Support from specialist services or alternative therapies. especially where medication is not an option, including support for people with disabilities, such as learning disability. Approachable staff within comfortable and welcoming environments where people can feel relaxed, safe and at ease. 	<text><text><text><text></text></text></text></text>

Positive Awareness – Prevention – Independence – Non-judgement – Structure – Good physical well-being – Activity / Work – Home – Easy Access – Patience & understanding – Social connections – Consistency – Purpose – Safe environment

Acceptance – by people, professionals and society as a whole that everyone has emotional well-being which is just as important as looking after our physical well-being. Acceptance that change in care, support and behaviours is required to address stigma and support people in a holistic way. People accepting when their own emotional well-being is poor or deteriorating, and for some, diagnosis, understanding and accepting the root cause.



Positive Awareness – Prevention – Independence – Non-judgement – Structure – Good physical well-being – Activity / Work – Home – Easy Access – Patience & understanding – Social connections - Consistency – Purpose – Safe environment

I-statements

"I want consistency – seeing the same person for support"

"I want time, not to feel rushed"

"I want choice and involvement around medication and alternative options"

"I want simple information about what is available"

"I want a diagnosis, that gives me an understanding of how I am feeling and a justification for feeling the way I am"

"I want to know who I can turn to"

"I want education for all, schools, parents, carers, hospitals, support staff"











"I want to feel safe and trust who I'm talking to"

"I want to be involved and communicated with in the way I prefer"

"I want to be able to access support easily"

"I want a place to just be, without outside pressures"

This plan has been co-produced by a group of people from Central Bedfordshire who have different lived experiences of living with poor emotional well-being. Everyone involved shared their personal experiences, knowledge and skills, together designing something that also considered the view from younger people preparing for adulthood, older people and family carers. The group wanted to produce a simple yet visual document that is meaningful and will be used to support the commissioning of new services. Although there was a focus from an adults perspective, from the outset, the importance of prevention and good emotional well-being support for children and young people was acknowledged, along with the need for parity of esteem between physical and emotional well-being.

Members of this group gave up their time to develop this excellent approach that will enable commissioning authorities to apply the '*Emotional Well-being Goals*' to any new commissioned service and ensure co-production is at the earliest stages of design. Co-production within commissioning will ensure there is a clear focus for providers to deliver sustainable and high quality services that respond to what people have told us are important to them. As a Council we aim to recognise co-production within all areas as a critical approach in our plans and agree meaningful ways to ensure people are co-producing and designing with us until it becomes a natural way of working. We believe that diversity brings strength and that we can all learn and grow by knowing one another.

"It has made me realise that whilst it's hard to reach out, I'm not on my own"

"I am intrigued as to how this is going to take affect and how and what steps will be taken to use the work we have done to get this far" "I enjoy our meetings it really helps me to understand and hits home that I am not alone - people accept you"

"I really enjoyed our last meeting where there was lots of positivity and progression"

"We now need this emotional well-being support more than ever, and I hope that this can act as a way forward for everyone's benefit"

"I believe strongly in co-production"

The Journey Continues

Members of this group are keen to continue to work with the Council and service providers in a co-productive way, to commission and shape future services in accordance with these Emotional Well-being Goals. This may include, for example, the development of new services, quality checks of services and participation at Board.



With thanks to the people who produced this insightful document:

Charlie McKenna,

Andy Jacobs,

Cathrine Jones, Bob Cazley, Andre Faehndrich, Claire Langford



Central Bedfordshire in contact

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Design Specification

Accommodation for Adults with Care and Support Needs

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24. Introduction

In recent years UK policy has encouraged a shift away from institutionalised settings for adults in need of care and support towards housing models that enhance independence and choice, and support people in their local communities through a strengths-based approach. However, there is a recognised deficit of appropriate and accessible housing for people with learning disabilities, autism, physical disabilities and / or mental health issues.

The number of adults in need of care and support is rising, as is the need for housing that will provide an accessible, safe and dignified environment. Mencap's report, 'Funding Supported Housing for All-report on Specialised Supported Housing for people with a learning disability', stated:

"Specialised Supported Housing (SSH) is one of those mechanisms which Mencap believes can deliver genuine housing choice. It is a way that living independently in the community can be made available to even those with the most complex needs. And as a result, we believe it must be part of the offer to people with a learning disability and others who need it".

Although progress has been made, housing options for people with complex needs are still being overlooked.

The Council is keen to develop innovative projects that provide people with a home environment that can support people to live independently and to actively encourage inclusion in our towns and villages. The purpose of this specification is to provide developers with guidance on how to make homes safe and accessible for people who present with a diverse range of needs.

This specification incorporates good design principles but should be used flexibly and in partnership with people who know the customer group. The Council is moving away from traditional residential care models towards designing homes which enable people to exercise their rights as tenants within their local communities.

Setting the Context

As referenced in the 'Governments Planning Guidance on Housing for Older and Disabled People' in 2019, "good design can help to create buildings and places that are for everyone. It can help break down unnecessary physical and psychological barriers and exclusions caused by poor design of buildings and places".

Although there is not one definition of supported living, it is commonly understood that it means a person who needs support to live in the way that they want within a community. Supported living allows people to have their own tenancy and have the ability to choose their own support. There is a need for a variety of accommodation that consists of individual homes and multi-occupancy housing with shared communal space. People presenting with more complex conditions, living independently is possible through access to the right care, location and physical environment. This specification considers current guidance for creating the right conditions for people to thrive and how the built environment can enhance or hinder this.

Typologies of specialist supported housing differ across the country, there is not one model that fits all. Some people prefer to live in communal settings while others prefer to live alone or with their family. There are various models of specialised housing projects for all age groups and needs, from individual home adaptations to large scale housing projects. It is recognised how important it is to develop inclusive design processes as well as getting the physical environment right for people with care and support needs.

The ambition of this specification is to have a set of design guidelines that can fit many different tenure typologies whilst still providing high quality housing and choice.

Design Characteristics

The aim should be to create a development that provides a non-institutional environment with a homely, domestic feel whilst taking into account the specific requirements of adults with care and support needs. A well-designed and maintained environment can both contribute positively to the well-being of the people living in it and reduce the amount of care and support they require.

The needs of people living in schemes may result in behaviour that can cause injury to themselves or others and damage to the building and its fixtures, fittings and equipment over and above what would be considered normal 'wear and tear'. This is also the case where people have a disability that requires the use of mobility equipment. Designs need to take this into account whilst retaining a homely feel. This may mean designing and planning for the easy replacement or repair of worn out or damaged items rather than using ones that have a 'heavy duty' or 'industrial' appearance.

The following design principles consider the effect that buildings have on people and their behavioural response to their living environment.

Buildings that avoid complex design help people who experience stress to feel more peaceful and comfortable in their own home. People with autism can find it difficult to identify between separate noises and shapes therefore design which has a sense of calm, clarity and order is easier to use.

Minimal design also requires any equipment to be simple and plain for people to understand and use. Taps with colours for hot and cold rather than words 'Hot and Cold' enable people with additional needs to know which tap to use. Dials with numbers are easier to use and understand compared to digital displays. Electrical equipment, for example showers units, washing machines, microwaves and ovens are easier to use if they only have one or two dials for program settings rather than dials and buttons for many different settings.

Appropriate facilities need to be made available for the workforce supporting the people living within the schemes (or who may need to do so in the future). In schemes that provide 24/7 care and support on site will need to provide facilities for staff member(s) to stay overnight – either awake or asleep. Such space should include a sleeping area, bathroom facilities and desk space. This dedicated space will also enable staff to take a break away from their work tasks. This can reduce the risk of 'burn out', particularly for staff who are supporting people with behaviours that challenge.

Feedback from people and their families have suggested that some people consider living on their own isolating and lonely. Consideration needs to be given in relation to the location of the building and the use of communal and multi-purpose space where people can choose to come together and socialise, particularly if the accommodation is made up of self-contained units. The use of multi-purpose space can be used flexibly and can encourage peer support, natural support and invite the community to participate encouraging inclusion.

It is essential that the ability to employ Technology Enabled Care (TEC), tailored to an individual's needs and responsive to any future changes, is integral in any new developments. This will enable people and the care provider to take positive risks that supports people to live as independently as possible and to remain in their home for as long as possible as they age and their needs change.

Complex Needs – Behaviour that Challenges

Some people with complex needs display behaviour that may put themselves or others at risk of harm. These behaviours may have a significant impact on the person's quality of life and are often not under the control of the person concerned and is mainly due to their differing ability to communicate and understand the world around them.

There may be situations where people's behaviours are triggered, and this will vary from one person to another. Every effort should be made to identify these triggers and the living environment should be designed to minimise these. Behaviours can include aggression, destruction of property, self-injury and other obsessive-compulsive behaviours that could place them and others at risk.

Some people may be more guarded about their own personal space, if there is insufficient space this could trigger behaviours that challenge and create a sense of unrest.

People with behaviours that challenge can be extremely demanding on fixtures and fittings as such care should be taken when sourcing materials. For example, all doors should be solid (not panelled) with robust hinges, preferably not painted to avoid paint chip marks and walls should be painted rather than papered.

Complex Needs – Autism

People who present with behaviours may also have Autism. Autism is a lifelong disability that affects the way a person communicates and relates to people and the world around them. People with Autism can have difficulties with everyday social interaction and communication and are likely to have difficulty in understanding potentially dangerous situations.

People with Autism may also experience sensory sensitivity. This can occur in one or more of the five senses. These include sight, sound, smell, touch and taste where the person's senses are either hypersensitive or hypo sensitive, for example, a person with Autism may find certain noises loud and unbearably. People who are hyposensitive may not feel pain or extreme temperature putting people at risk of serious burns.

Consideration should be given to room sizes as some people will not always want to sit on a sofa next to others, therefore adequate space for individual armchairs and other furniture should be planned for.

People with sensory sensitivity may also find it harder to use their body awareness system. This system tells us where our bodies are, so for those with reduced body awareness, it can be harder to navigate rooms and avoid obstructions so adequate space in buildings to move around is important.

Any bespoke design for people living with autism need to consider '*The National Autistic Society documentation on design*' and '*Kings Trust – Community Housing for Adults with Autism*' for good practice.

https://www.autism.org.uk/professionals/others/architects/building-design.aspx

http://www.kingwood.org.uk/wp-content/uploads/2016/10/living-in-the-community-housingdesign-for-adults-with-autism.pdf

Complex Needs – Profound and Multiple Learning Disabilities

People with Profound and Multiple Learning Disabilities (PMLD) often require the use of specialist mobility equipment, including the use of specialist reclining chairs.

For this reason, access to spaces throughout the scheme should be step free and thresholds and floor-coverings should allow for the use of wheelchairs and other mobility equipment.

The design of corridors and circulation space must facilitate movement into and around a building for people who have physical disabilities or visual impairment. Some people will place their hands on the walls from room to room. Walls without sharp corners but curved further help facilitate this.

People with PMLD generally have specialist equipment to support them and this needs to be safely stored away when not being used. There is a need to factor sufficient storage space for people within the design of buildings that prevents people having to leave specialist equipment in corridors that both causes obstruction and can create an institutional atmosphere.

General Decoration and Furnishings

The design of the building and furnishings should be minimal with no complex visual details to reduce sensory stimulation and enable people to choose how they would like to add decoration and detail to their home.

People with autism can exhibit obsessive behaviours such as picking at details, for example unpicking stitching on sofa's or sealant around a bath and these can be reduced by careful selection of a limited pallet of colours, patterns and materials. However, the environment should still offer a homely feel without resorting to an institutional setting.

Research has found that pink and purple are the most positive colours to contribute to calmness.

Utilities, Heating and Ventilation

Easily accessible mains/ water / gas supply and panels accessed externally will minimise the footfall of people within someone's home environment. This will reduce any anxiety caused by unfamiliar people accessing a person's home to carry out repairs and maintenance.

Any pipe work should be boxed in or recessed.

Ideally under floor heating should be used to create a warm environment without the need for radiators. This minimises the risk of injury or damage being caused to the property. If radiators are being used, then they should have protective guards fitted to them to prevent people from gripping hold of them or falling against them.

Heating and ventilation levels in personal spaces (such as bedrooms) should be individually controllable.

Boilers need to be boxed in and contained within a lockable area.

Modern building standards should be applied as well as energy efficient design to help keep costs as low as possible.

Dwelling Size Standards

The following are the minimum usable floorspace (Gross Internal Area) requirements for:

Туре	Minimum Size Requirement
One/two person-self-contained flat or bungalow	52 m ²
Two/three person-self-contained flat or bungalow	70 m ²
Single person bed sitting room with en-suite bathroom	18 m ²
Single person (PMLD) bed sitting room with en-suite bathroom	21 m ²

Specification

Area		Description	
Location	1.1	 When developing purpose-built specialist accommodation for adults with care and support needs, the location of accommodation should be carefully considered. Developers should consider: Easy access to local shops, services and transport links that will support inclusion and accessibility. Access to green space, especially if the property does not have access to a garden. Ideally the location of the property should be away from busy roads and junctions. Consideration should be given to the location of the property in relation to being overlooked and noise to and from the property. Terraced properties will not usually be suitable for meeting the accommodation needs of people with behaviours that challenge. When developing flats, consideration should be given to the location of the units within the building, for example providing ground floor units for people with a physical disability and potential noise disturbance to and from neighbours if the property is not well insulated. 	
External Space	2.1	Garden areas to have secure boundaries with plant borders to increase privacy that creates a sense of space with a simple layout and minimal obstructions. Lawn areas will minimise risk of injury and hard standing needs to be level access to support people who are wheelchair users. Planting should avoid species with thorns or spikes in areas where they may cause injury. Plants which have parts which can be poisonous if ingested should similarly be avoided.	

		In some cases, particularly for people who may be at risk of harm from having a lack of understanding of the risks around them, a secure boundary will enable people to wander at ease and freely without the need for constant supervision and will allow carers to provide a more relaxed approach that will benefit the person they are supporting. It is more beneficial to observe the movements of someone without them feeling constantly under supervision and therefore the design of outdoor space should take this into consideration and provide a good space that enables this to take place. All paths should be level access or a gradient that does not exceed 1:20 gradient with a minimum of 1200mm in width. Parking near the property with suitable transfer space and dropped kerbs to give level access from the car to the property, this includes any drop off areas. The area should have sufficient lighting.
General	3.1	Ideally schemes should be single storey but where this in
Design and Layout		impractical accommodation on the upper floor(s) should be accessible via a lift. The lift should be designed to be usable in a fire or other emergency evacuation situation.
		It may be appropriate to provide private amenity space in the form of a ground floor patio or upper floor balcony. If so, the design should allow for the risk of falls for any occupant to be managed through the addition of appropriate safeguarding measures.
Kitchen	4.1	Careful consideration needs to be given to the arrangement of the kitchen storage areas, appliances and work surfaces, this will reduce the risk of harm and will promote increasing the level of people's independence by creating easy routines and steps for people to follow.
		Ideally the kitchen will be a separate room with the ability to be closed off if needed with a built-in cooker hob, preferably with an induction hob as it gives a clear indication that the hob is hot. A clear work surface should be available to the non-hinge side of the oven to allow for transfer of hot items. Heat resistant work surfaces allow heavy pans to be slid across rather than lifting them and taken straight from the oven. Round edges and corners need to be planned throughout.
		Cupboards with magnetic release, soft closure mechanism and without handles and dials that are simple to use and understand. Sufficient lockable cupboards and drawer's space to allow storage of kitchen equipment, for example toasters and kettles. All main switches, for example the cooker, to be safely stored in a lockable cupboard.

4.2	Sinks to provide taps that are lever mixer taps with colours that clearly indicate hot and cold water. Accommodation that has been designed for wheelchair users
4.2	6
	should provide height adjustable work surfaces for accessibility.
4.3	Buildings that have been designed for people with complex needs in terms of their behaviours should also consider the use of toughened kitchen sinks with overflow shut off valves and metal kick plates to back of kitchen floor units, induction hobs with lockable metal covers and water supplies to have sensors and shut off valves.
5.1	This space should be attractive and provide a homely and spacious environment. If the property is designed for people with a physical disability, then this space needs to consider turning circles and manoeuvrability for people using standard and specialist reclining chairs.
	Furniture needs to be practical, durable and hard wearing and, in some cases, may need to be strengthened. Seating needs to be waterproof with re-moveable washable covers. Ideally, any tables should be scratch and heat resistant.
5.2	Accommodation that has been designed for people with complex needs around their behaviours should consider any furniture that is liable to be pulled over, jumped or climbed on and brackets should be fixed to them and to the walls or floors to minimise risk of injury.
	The use of a built-in toughened media units should be considered to project equipment and prevent risk of injury to people themselves or others.
6.1	It will vary whether an individual requires a bath or a shower, developers should consult with the commissioning authority to understand the specific requirements for any specialist purpose- built accommodation and the following recommendations are suggested:
	 Wet room (walk in showers) are preferable and future proof, particularly for people with limited mobility. If a fixed screen is required, this should be robust and not liable to shatter. Showers should be thermostatically controlled, and units should be recessed. In some cases, particularly for those people with behaviours that challenge, they should have a fixed head rather than a flexible hose. There should be simple controls with straightforward on/off button controls and colours to indicate hot and cold water.
5	5.2

		 Baths should have a mixer taps with thermostatically controlled mixing valves to control the temperature of the water and lever taps with obvious hot and cold colours. Toilet cistern to be recessed or set into the wall or boxed in. The toilet needs to be robust with a soft closing seat and a push button not a lever to flush the toilet. Soap trays and toilet roll holders need to be set into the wall and recessed. Mirrors need to be toughened and firmly fixed to the wall. Entrance doors should be fitted with anti-entrapment door hinges and pivot hinges that are easily removed in the event of an emergency. The use of door locks that can be unlocked from the outside allows for privacy but also provides the ability for someone else to open the door if a person needs help. Floor coverings should be non-slip and composed of rubber or other soft materials. Hygienic wall coverings.
	6.2	 Accommodation that is being designed for people with PMLD need to also consider the following requirements: People with a physical disability require a clear space under the area of the sink for wheelchair access and need to be at wheelchair height for accessibility. Tilting space needed for people with complex needs, tilt in space chair when reclined is 1800mm length headrest to footplate. Ceiling track hoists to be considered, particularly for communal bathrooms that offer height adjustable baths. Wet room area layout needs to consider facility placement that maximises the space provided. Wash and dry toilets will need to be considered for people with complex needs.
Bedrooms	7.1	The layout of the bedrooms should enable the person to have a view from their window without being overlooked. Consideration is needed for people with a physical disability and ensure the window height or length is adjusted accordingly for people to see out. Wardrobes should be fitted and avoid using glass and / or mirrors in the doors.
	7.2	The design for people with a physical disability and PMLD need to ensure that there is sufficient space to allow a minimum of 1700 – 1800mm relating to either side of a bed that will allow for ample room for carers supporting.

		There needs to be a minimum of 1 metre from the wall to the end of the bed.
		Ceiling track hoists need to be a key consideration for specialist builds.
Flooring	8.1	Flooring should have a domestic appearance and be appropriate to the function of the room.
		Loose floor coverings such as rugs and mats may form an obstacle to people with impaired mobility.
		Hard flooring such as tile and vinyl may be appropriate in 'wet' areas (such as bathrooms, shower rooms, kitchens and laundries). In intermediate areas like hallways and dining rooms wood-effect laminate or wood can be appropriate. In living rooms and bedrooms carpet is usually more appropriate unless the needs and preferences of individual occupants dictate otherwise.
		Some care settings may need to clean and replace floor coverings more often than domestic settings. This should be taken into account when planning cleaning and maintenance.
		All flooring should be plain with no patterns.
		Carpet should be durable and avoid any coarse fabrics that are likely to cause friction burns.
Curtains and Blinds	9.1	Any fitted curtains should not have pull cords and should be opened and closed manually. The fabric used for curtains and / or blinds need to be durable and made of flame-retardant material with black out linings.
		The use of Velcro or magnetic tops is preferable as these will release easily, leaving the pole and wall intact. If blinds are used, then the developer should consult with the commissioning authority to understand the specific requirements for the property.
Wall Coverings	10.1	Washable paints are recommended for all walls that can easily be cleaned, and no wallpaper should be used as this can easily be picked and torn.
Windows,	11.1	Door openings should provide a minimum of 900mm relating to
Doors and Glass		the door opening rather than the door to allow enough room through with large adapted specialist chairs.
Doors and		
Doors and		through with large adapted specialist chairs. Anti-entrapment door hinges and pivot hinges are preferable. Simple door opening system that is not complicated to work with

		If the accommodation is a multi-occupancy home, then doors that are capable of being locked are required. Door frames to be re-enforced to ensure that they withstand damage. All glass including windows, doors, shower screens and mirrors to be 'safety' glass of an appropriate standard. Glass that extends to floor level should have adequate manifestations to avoid the risk of accidents.
	11.2	In situations where people presenting with complex behaviours are at risk of causing injury to themselves or damage to property, narrow, tall windows with sloping sills have been identified as a good design that allows sufficient natural light through and minimises risk. Skylights and 'sun pipes' can also be considered to channel natural light within the home.
Lighting and Acoustics	12.1	A building with high levels of natural light can uplift people's mood and assist in orientation of the home. All light fittings should be flush to the wall or recessed into the ceiling, for example spotlights, pendant lighting can be pulled off easily. Light fittings must provide a soft non-flickering light. These should be used throughout the building as people can experience a range of sensory problems including an aversion to very bright fluorescent lighting, that affects their visual field. Lighting should be dimmable in all living and sleeping areas. Consideration should be given to the inclusion of mood lighting and the use of lighting controlled by movement sensors in appropriate locations (such as bathrooms and hallways).
	12.2	The building should be designed and constructed in a way that minimises sound transmission from room to room and from the external environment to the internal environment (and <i>vice</i> <i>versa</i>). The design and decoration of living rooms and bedrooms should seek to attenuate sound and avoid echo. This can be achieved through noise reduction fabrics and floor coverings.

Conclusion

In conclusion, the following areas need to be considered when designing accommodation for adults in need of care and support who may have a Learning Disability, Autism, Physical Disability and / or Mental Health problems:

- Access: does the location offer easy access to local services, amenities and transport links?
- Community: does the local community offer good opportunities for people in relation to activities, education, training, volunteering and employment?
- Integration: does the accommodation feel like it is part of the local community moving away from the feeling of an institutionalised setting?
- Sensory: does the design of the building respond to the customer group that it is intended for?
- Sustainability: does the building offer flexibility that can respond to people's change in need, especially as people get older and frailer?
- Fabric: does the internal structure, decoration and furnishing respond positively to adults with care and support needs?

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