



# Cabinet

Thursday, 16 May 2024 at 4.00 p.m.

Council Chamber - Town Hall, Whitechapel

## Supplementary Agenda 1 – Housing with Care Strategy

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**7. ANY OTHER UNRESTRICTED BUSINESS CONSIDERED TO BE URGENT**

<p><b>7.1 Housing with Care Strategy 2024-2034</b></p>	<p><b>3 - 34</b></p>
<p><b>Report Summary:</b>            To adopt the Housing with Care Strategy that sets out the high-quality housing with care options that the Council needs to deliver over the next ten years to meet the future care and support needs of residents whilst continuing to promote their independence and wellbeing.</p> <p><b>Wards:</b> All Wards  <b>Lead Member:</b> Cabinet Member for Health, Wellbeing and Social Care  <b>Corporate Priority:</b> A council that works for you and listens to you</p>	



<p><b>Cabinet</b></p> <p>16 May 2024</p>	 <p><b>TOWER HAMLETS</b></p>
<p><b>Report of:</b> Somen Banerjee, Acting Corporate Director of Health and Adults Social Care</p>	<p><b>Classification:</b> Unrestricted</p>
<p><b>Housing with Care Strategy 2024-2034</b></p>	

**Special Circumstances Justifying Urgent Consideration/ ‘Reasons for Urgency’**

This report was published after the statutory publication deadline due to delays with internal consultation. Due to the unavoidable rearranging of the Cabinet meeting, administrative processes had to be shortened and it did not prove possible to complete for this report in time for the initial agenda publication. It is important that this report is considered at this Cabinet meeting due to the need to progress the issues swiftly to meet key administration priorities.

<b>Lead Member</b>	<b>Councillor Gulam Kibria Choudhury, Cabinet Member for Health, Wellbeing and Social Care</b>
<b>Originating Officer(s)</b>	Juliet Alilionwu Deputy Director Ageing Well, Integrated Commissioning, Hibo Mohamed, Senior Commissioning Manager-Housing with Care
<b>Wards affected</b>	All wards
<b>Key Decision?</b>	Yes
<b>Reason for Key Decision</b>	Significant impact on wards
<b>Forward Plan Notice Published</b>	15/12/2023
<b>Exempt information</b>	N/A
<b>Strategic Plan Priority / Outcome</b>	The Housing with Care Strategy supports the following strategic plan priority 2: providing homes for the future by providing accommodation to residents where they can access the care and support, they need to maintain their independence. Priority 5: Invest in public services through the local development of modern high quality specialist housing options that ensure vulnerable adults receiving social care are supported to maintain their independence and achieve their goals.

## **Executive Summary**

This report sets out the background behind the London Borough of Tower Hamlets Housing with Care Strategy 2024-2034. The strategy provides a robust model for the mix of Care settings required to support the growth in population size and evolving complexity of need to meet the increase in demand for Adult Social Care. It sets out the areas where further development and investment is needed to be able to provide high quality housing with care options to the most vulnerable residents. In addition, it seeks permission to formally adopt the strategy and further develop and approve the annual delivery plan.

### **Recommendations:**

The Mayor in Cabinet is recommended to:

1. Agree and approve the proposed Strategy.
2. Agree that options for additional housing with care settings are developed as part of the delivery plan for the proposed Strategy and that these come back to the Council's Cabinet meeting at a future date.

## **1 REASONS FOR THE DECISIONS**

- 1.1 This report proposes a Tower Hamlets Housing with Care Strategy.
- 1.2 Tower Hamlets is in the process of transforming the delivery of Adult Social Care and have established a bold new vision and strategy– “Improving Care Together”. Our “own home is best” position is supported by a wealth of evidence that the vast majority of people prefer to be in their own home wherever possible.
- 1.3 A primary aim of this strategy is to support people to stay in their own homes as far as possible but when this is no longer achievable to ensure there is a range of high-quality housing with care options for those residents who need them.
- 1.4 As well as the need to address the housing, care and support needs of vulnerable residents, housing with care can provide an alternative to expensive domiciliary and residential care placements which are not always the most suitable or cost-effective way to meet needs and promote residents’ health and wellbeing.
- 1.5 This is particularly evident given the significant growth in population of those 65 and over, rising service demands and budgetary constraints.
- 1.6 The Housing and Care strategy provides the foundation from which to further develop detailed plans. Once the strategy is adopted Officers will develop and agree an annual delivery plan. As such this strategy will support the future procurement and delivery of a range of housing and care options including

Extra Care Housing, Nursing Care, Shared Lives, Supported Living and Residential Care.

## **2 ALTERNATIVE OPTIONS**

- 2.1 Do Nothing – this will not enable the Council to meet the increased demand of a significantly growing ageing population, with higher complexity of needs and improve outcomes for the most vulnerable residents within the current challenging financial climate. The single most notable trend would be the need to continue to procure significantly more Residential Care beds, over 115 within 10 years. This situation is unlikely to be acceptable to residents or the Council. It is also unlikely to be affordable in the future.

## **3 DETAILS OF THE REPORT**

- 3.1 As part of the wider transformation of Adult Social Care- “Improving Care Together” delivery, Council Officers conducted a service review and needs analysis of the different housing with care options settings. The outcome of the analysis highlighted an increase in demand due to the substantial population growth, particularly in those aged over 65, resulting in the need for more specialist housing accommodation for vulnerable residents.
- 3.2 There are projected to be significant population increases in Tower Hamlets over the next 10 years with a 15% increase by 2033 in the 18- 64 population and more significantly a 54% increase by 2033 in the over 65 population.
- 3.3 In line with the national direction, there is an imperative to join up planning to make ‘every decision about care also a decision about housing’ as stated in the Government’s People at the Heart of Care: Adult Social Care Reform White Paper.
- 3.4 Housing with care is accommodation which has been adapted or built to facilitate the care and support needs that a resident may have or develop in the future, this includes Extra Care Housing, Nursing Homes, Shared Lives, Supported Living and Residential Care.
- 3.5 Tower Hamlets has 6 extra care housing schemes, 2 care homes, 12 residents being supported in Shared Lives arrangements, 23 supported living settings and 6 residential care homes in the borough.
- 3.6 The Council currently have limited in-Borough provision to meet existing demand with significant numbers of people currently being placed Out of Borough. There is also an historic over-reliance on the use of Residential Care as a Care setting within the Borough - particularly for the 65+ population where nearly half (44%) of the population utilising bed-based care are in Residential Care settings.

- 3.7 Currently nearly 45% of adults with Learning Disabilities and over 20% of adults with Mental Health support needs aged 18 to 64 in Housing with Care settings are in Residential Care.
- 3.8 The intention of this strategy is to extend the offer of 'housing with care' to a wider range of vulnerable adults. This includes building upon the current offer to people with learning disabilities, people with physical disabilities and people with mental health conditions.
- 3.9 The Strategy aims to mitigate the financial risk and eventually result in long term considerable savings for the Council in meeting this increased demand by providing residents requiring care and support with the preferable specialised housing in the community, as opposed to inappropriate costly residential care homes.
- 3.10 It is important that the Council now adopts a strategic and structured approach to addressing this challenge. A key starting point is to improve the alignment of support to needs and settings.
- 3.11 This Strategy will:
- Continue to enhance the overall provision of housing with care enhancing its appeal as an attractive offer for residents.
  - Increase resident choice and extend the offer to a wider range of vulnerable adults with complex needs.
  - Substantially expand the capacity of Extra Care Housing and Shared Lives arrangements and consequently in turn reduce the use of out of borough residential placements.
  - Develop and design modern housing with care provision that integrates and utilises advanced assistive technology.
  - Work in collaboration with investors and developers to better understand and respond to future need and demand.
- 3.12 To deliver the required changes represents a major and significant cross-service transformation effort within and beyond Adult Social Care and requires closer working with Housing, Planning and Capital Development services in Tower Hamlets.
- 3.13 The reviews considered the future needs of Older People (65+) and those with Learning Disabilities (LD) and Mental Health (MH) needs. These groups represent the vast majority (circa 90%) of demand for bed-based care in Tower Hamlets.

3.14 The table below shows the unit cost for each Care setting and population cohort. This information has been derived from Unit Costs information provided by the Finance team based on 2021/22 average costs.

	LD	MH	Elderly
Nursing	£890	£740	£1,100
Residential	£1,800	£956	£950
Extra Care	£640	£560	£500
Supported Living	£ 1,015	£740	£750
Shared Lives	£580	£580	£580

3.15 To be able to meet the projected increased demand the Council will need to change its current purchasing pattern for bed-based care. The analysis has enabled us to model the mix of Care settings that could be required to support each of these populations in the future and point to the areas where further, future investment maybe required.

3.16 The modelling shows the need for considerable extra bed capacity over the coming years – for and Extra-Care and Nursing beds.

			Nursing	Residential	Extra Care	Supported Living	Shared Lives	Total	
Learning disability	18-64	Current		83	24	80	4	<b>191</b>	
		Future		22	65	108	22	<b>217</b>	
	65+	Current	1	18	5	4		<b>28</b>	
		Future	2	10	17	8	4	<b>41</b>	
Mental Health	18-64	Current	5	77	18	246		<b>346</b>	
		Future	0	79	79	196	39	<b>393</b>	
	65+	Current	20	69	43	18		<b>150</b>	
		Future	0	56	100	45	22	<b>223</b>	
Physical & Sensory Impairment	65+	Current	69	106	65	3		<b>243</b>	
		Future	108	58	162	18	18	<b>364</b>	
<b>TOTAL (all ages)</b>			<b>Current</b>	<b>95</b>	<b>353</b>	<b>155</b>	<b>351</b>	<b>4</b>	<b>958</b>
<b>TOTAL (all ages)</b>			<b>Future</b>	<b>110</b>	<b>225</b>	<b>423</b>	<b>375</b>	<b>105</b>	<b>1238</b>

3.17 There are already some new Supported Living schemes in the pipeline for people with Learning Disabilities.

3.18 The analysis suggests that, if this approach is taken, there are significant opportunities available through the further development of the different Council

owned Housing with Care settings. There are likely to be significant benefits arising from this development, including:

- more choice and control for individuals receiving Care;
- increased independence; and
- better value for money.

### 3.19 **Extra Care Housing:**

3.20 To be able to deliver the purchasing pattern required to address the increase in demand extra care housing will be the key alternative to the current residential care. The modelling indicates that an additional 240 beds in Extra Care are needed by 2034.

3.21 This equates to 2 to 4 additional schemes at 60 to 120 beds each. Achieving the development of new Extra-Care facilities and delivering them within the context of a new, better and more flexible Extra-Care model is the key solution to deliver on the new ASC strategy – Improving Care Together.

### 3.22 **Nursing Care:**

3.23 Population increases, the complexity of people's needs, and healthcare requirements means that more nursing beds are required. The modelling completed to support the "optimum" arrangements indicates that 20 to 25 new nursing beds will be needed by 2034.

3.24 New Nursing Homes tend to be very high specification and usually charge a significant premium. Use of any new capacity needs to be closely planned with providers and neighbouring Boroughs to avoid an imbalance of 'importing' people from other placing authorities.

### 3.25 **Shared Lives:**

3.26 The Tower Hamlets Adult Social Care Strategy cites the ambition to grow the existing Shared Lives scheme. The scheme is currently small scale, focuses on people with Learning Disabilities and has just four live in arrangements.

3.27 Shared Lives arrangements are the highest rated form of care by CQC and can deliver great outcomes for individuals as well as their host Carers.

3.28 The modelling suggests that 110 live-in Shared Lives arrangements would be needed by 2034 to align with an ambition of 10% of people aged 18-64 and 5% of people over 65 who need housing with care making use of Shared Lives.

### 3.29 **Supported Living:**

3.30 There are already several successful Supported Living schemes in Tower Hamlets for people with Learning Disabilities and people with Mental Health support needs.



3.31 The modelling work based on the optimised bed-mix suggests that current Supported Living capacity will need to be marginally increased by 25 beds to meet demand over the next 10 years.

3.32 **Residential Care:**

3.33 A central objective of the strategy is to reduce the proportion of people using Residential Care and the associated number of Residential Care beds required in Borough. This shift away from Residential Care requires considerable use and growth of alternatives.

3.34 The aim is to instead ensure people can be in their own homes or, if they need to move, to live in settings which afford rights of tenure and greater choice of support.

3.35 COVID highlighted the limitations as Care Homes nationally struggled to uphold resident freedoms, quality of life and their family relationships whilst needing to prioritise infection control.

3.36 **Delivery Plan**

3.37 The adoption of the Strategy will be followed by the development of a robust delivery plan which will incorporate an annually reviewed delivery plan.

3.38 The delivery plan will include a clear capital programme which sets out the different delivery options, including model, scheme ownership/management and all cost implications. As well as the impact of each option on the delivery of new social and affordable housing.

3.39 As present a monthly Housing with Care Strategy Delivery Group with membership from Adult Social Care, Housing Supply, Commissioning, Planning and Capital Programme and Asset Management has been established.

3.40 In addition, within the Local Plan there has been the identification and earmarking of 10 specific site locations within the Borough as being potentially suitable as affordable specialist housing. This does not prevent other sites being identified.

3.41 There is also ongoing work and sharing of intelligence with the North East London (NEL) Commissioning Network around joint opportunities for Housing with Care.

3.42 Finally work has already begun with potential sites and feasibility assessments for the development of a new Extra Care Housing development in the Borough as part of the Mayors Capital Project Priorities.

3.43 **Market Shaping**

- 3.44 As part of the delivery plan, there will be a need to review the status of any current individual Market Position Statement.
- 3.45 Officers will continue to explore as part of the delivery plan all development and investment opportunities for new Housing with Care developments.
- 3.46 **Co-Production:**
- 3.47 There is a need and for strategic co-production to ensure services are reviewed and planned with local people who use services now or who may do so in the future.
- 3.48 This approach will be developed with local people through existing coproduction structures and via resident-led groups and organisations such as REAL, a local Disabled People's Organisation (DPO).
- 3.49 In addition, there needs to be clear governance structures identified to ensure plans are properly coproduced.

#### **4 EQUALITIES IMPLICATIONS**

- 4.1 Consideration of the likely equalities impact of the recommended option indicates that there is no adverse impact on those with protected characteristics.
- 4.2 A range of stakeholders have been involved in the consultation of this strategy. This strategy can have a positive equality impact through the availability of high-quality housing with care options for some of the most vulnerable residents.
- 4.3 Evidence from residents in the six current extra care housing schemes has shown that people with physical disabilities, learning disabilities and mental health problems have all benefited from living in Extra-Care Housing.
- 4.4 New schemes will be inclusive and meet the cultural, ethnic and language needs of residents of Tower Hamlets.

#### **5 OTHER STATUTORY IMPLICATIONS**

- 5.1 The adoption and implementation of a local Housing with Care Strategy will allow Tower Hamlets to fulfil its statutory responsibilities set out in the Care Act 2014.
- 5.2 The Care Act 2014 requires local authorities to shape and facilitate the local market for adult social care and support, this includes providing housing options that promote choice and control for residents.

#### **6 COMMENTS OF THE CHIEF FINANCE OFFICER**

- 6.1 This report seeks for agreement to pursue a proposed strategy of providing a local Housing with Care model for the mix of Care settings to support the growth

in population size, and increase in complexity of needs, to meet the increase in demand for Adult Social Care, in line with Mayoral priorities. The next step will be to develop and agree an annual delivery plan aligning to the proposed strategy.

- 6.2 Alongside the recommendations sought within this report for approval for the Housing with Care Strategy, a capital growth bid in the amount of £20m has been submitted for 2024-25 to 2026-27 (£5m in 2024-25 and £15m in 2025-26) as part of the Mayor's Priority Investment for a culturally sensitive Extra Care Housing development. Costs will be confirmed when the site is confirmed, and the feasibility study commences. This scheme will provide 50 to 60 beds out of the requirement of an additional 240 beds by 2034.
- 6.3 To support this development, a revenue growth bid in the amount of £305k in 2026-27, to meet the initial costs of a new care and support provider, has been submitted. Any additional care and support costs for clients will be funded via Adult Social Care demographic growth and any accommodation costs will be met via the client or via Housing Benefit. The scheme will also qualify for the use of Disabled Facilities Grant Funding for any applicable adaptations.
- 6.4 Once plans are developed, funding requirements for all other developments associated with this strategy will need to be subject to financial appraisal and subject to approval as part of council's medium term financial planning process for future capital and revenue investment proposals (MTFS).

## **6 COMMENTS OF LEGAL SERVICES**

- 6.3 Part 1 of the Care Act 2014 places wide-ranging general duties on local authorities in relation to the provision of care and support for adults whose care needs the local authority is addressing. In particular, section 1 requires a local authority to promote an individual's well-being; section 2 requires a local authority to provide or arrange for the provision of services, facilities or resources which will reduce the needs for care or support of adults in its area or prevent or delay the development of adults' needs for care and support; section 3 requires a local authority to promote integration of care and support with health services.
- 6.4 In performing these duties, a local authority must comply with the public sector equality duty set out at section 149 of the Equality Act 2010, which requires it to have regard to the need to eliminate discrimination and to advance equality of opportunity and foster good relations between people who share a protected characteristic and people who do not.
- 6.5 The matters set out in this report comply with the above legislation.

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**Linked Reports, Appendices and Background Documents**

**Linked Report**

- NONE.

**Appendices**

- Housing with Care Strategy 2024-34

**Background Documents – Local Authorities (Executive Arrangements) (Access to Information)(England) Regulations 2012**

- None

**Officer contact details for documents:**

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# Tower Hamlets Housing with Care Strategy 2024-2034



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# 1. The Purpose of this Strategy

## What is Housing with Care

Housing with care is accommodation which has been adapted or built to facilitate the care and support needs that a resident may have or develop in the future.

Housing with Care includes:

- Extra Care Housing
- Nursing Homes
- Shared Lives
- Supported Living
- Residential Care

Shared Lives is when someone who needs social care gets support from an approved carer in their local community, in the carer's home.

The housing with care models above provide differing levels of care and support to residents.

Tower Hamlets are in the process of transforming the delivery of Adult Social Care with the aim of ensuring better outcomes for residents. To achieve this, they have established a bold new vision and strategy – “Improving Care Together”.

This strategy is built in recognition of the importance of housing to social care. The primary aim of this strategy is to support people to remain within their own homes as far as possible and to ensure there is a range of high-quality housing with care options for people who need them.

A central objective is to depart from the current situation where too often residents are placed in a residential care setting, by

exploring the opportunities to substantially develop modern extra care housing units that offer greater choice whilst more effectively meeting the complex and evolving needs of a wider range of Tower Hamlet residents throughout their lifetime.

This Housing with Care strategy and annually reviewed delivery plan will serve as the foundation to support future procurement and the delivery of a range of housing with care options including Extra-Care Sheltered Housing, Supported Living and Shared Lives. Whilst this strategy forms the initial planning process for Housing with Care further detailed work on demand, co-production, care estate planning and procurement delivery is required.

Given the strategic nature of this work, a multi-stakeholder Steering Group was established to oversee the work. (The membership of this Group is included at Appendix 1.) This was to ensure broad “buy-in” to the strategy and give relevant stakeholders a clear voice. A Strategy development group has now been established that will now oversee the delivery of plan.

The approach to developing this strategy and roadmap involved work to:

- **Baseline provision and future demand**
  - needs analysis to gain a clear view of the baseline position and the future demand for Housing and Care;
- **Conduct a strategic analysis** - a strategic analysis of current housing and care provision by conducting a

political, economic, social, technical and environmental (PESTE) strategic analysis of current and possible future provision arrangements;

- **Set out aims, principles & future citizen journeys** - developing a range of principles that support the development of a Housing with Care strategy and plan;
- **A high-level Care Setting Strategy** – identifying the key actions, activities and developments required to deliver the right Housing with Care options to meet future demands in Tower Hamlets.





## 2. Background

### National Context

The Social Care Reform White Paper recognises that people's homes are crucial to their well-being. There is a greater emphasis on co-ordinated planning, with the ultimate intention to make 'every decision about care also a decision about housing'.

It is recognised that residents and their families/carers often face multiple challenges at the same time, by taking a holistic approach it is possible to address both their housing needs and their care and support needs.

The report of the **Commission on the Role of Housing in the Future of Care and Support** *A place we can call home: A vision and a roadmap for providing more options for housing with care and support for older people* calls on local authorities to build partnerships and plans to embed housing as part of the local health and care system, to extend choice, and to make it easier for everyone to adapt their home to enable them to live independently and safely.

They set out recommendations to...

- do as much as is feasible enable people to live in their own homes if they choose to;
- develop a diverse range of different housing with care and support options for older people, broadening choice at all levels of affordability;
- create local partnerships to produce a single co-produced plan for improving housing for older (and Disabled) people within a local place;

- ensure plans include a long-term strategy for shifting investment into innovative, preventative models of housing with care and support;
- include the Housing our Ageing Population Panel (HAPPI) design principles along with building accessibility regulations in design;
- establish and resource local co-production forums to influence planning, commissioning and design of housing;

Individual Service Funds (ISFs) allow for a care and support provider or organisation to manage an individual's personal budget on their behalf. Expanding the use of ISFs would help many more people to access innovative forms of supported living;

develop local information, advice and advocacy hubs that have skills in housing;

address the challenges in adopting the use of new technologies.

These recommendations should help to address the specific needs of diverse communities who often find it more difficult than others to access high-quality housing that facilitates their care and support.

## Tower Hamlets: Current Position

### Current Use of Beds

As seen in the tables below there is a heavy reliance on Residential Care especially for the 65+ population.

Residents 18-64	Nursing	Residential	Extra Care	Supported Living	Shared Lives
Learning Disability	0%	43%	13%	42%	2%
Mental Health	2%	22%	5%	71%	0%

Residents 65+	Nursing	Residential	Extra Care	Supported Living	Shared Lives
Learning Disability	4%	64%	18%	14%	2%
Mental Health	13%	46%	29%	12%	0%
Elderly	28%	44%	27%	1%	0%

In addition, there is also a high reliance on out of Borough placements to support Residential and Nursing Care and Supported Living arrangements whereas in Borough capacity is better matched for other care settings.

This is directly in contradiction to the vision and other objectives set out in the in the Adult Social Care Vision and Strategy, 2021 “Improving Care Together” which commits to outcome-based support for people to live well at home and to increase the choice and quality of housing and care for people who need it.

### Strengths

We conducted meetings and interviews with over 30 key stakeholders and residents. This showed that Tower Hamlets has some positive work underway and there are some

strong foundations on which to build. These include:

- Many care and housing arrangements are working well – there is a lot to be proud about!
- There is enthusiasm amongst many Council Officers and across the system for change and improvement;
- There were a number of examples where Officers demonstrated great local and understanding of the forward agenda;
- A number of stakeholders recognised the need for the development of a clearer strategy for Housing with Care and a more developed forward plan;

- Many stakeholders interviewed during the review welcomed this work and felt it would be valuable to help frame further thinking about the Housing with Care Estate;
- There is a Shared Lives scheme in place, that whilst small in scale, is delivering great outcomes. A Shared Lives business case & and growth modelling for adults with learning disabilities has been completed;
- During the review we noted a number of examples of good practice...
  - Mental Health service enabling people to move back to Tower Hamlets from out of borough;
  - Co-ordinated support and interventions for people with Mental Health support needs to sustain tenancies, avoid crisis and achieve positive outcomes;
  - Learning Disability needs analysis and some recent capital developments. There are also plans to introduce individual service funds (ISFs) to increase individual choice and control in supported living arrangements.
- more significantly in the 65+ population by 54% by 2033;
- A rise in demand will mean a significant increase in demand for Adult Social Care over the coming years.
- Services must be able to appropriately meet the needs of a culturally diverse community. There are changing expectations and practice within some communities. For instance, more women being the main wage earners and sustaining careers, so not able to sustain full-time caring of relatives, plus more acceptance of services were noted as factors resulting in greater demand for housing with care services;
- There is a lack of evidence of individual outcomes and impact of support;
- There are funding challenges related to cost pressures in services and these will be further exacerbated by the Fair Cost of Care developments to introduce a more sustainable market rates for services;
- There are limited cross-service relationships (for example with Housing; Planning; Capital developments);

## Challenges

There are some significant challenges that this strategy and future plans will need to address. These include:

- Significant population growth and ageing is projected in the next 10 years and beyond. The population in Tower Hamlets is forecasted to grow significantly over the next 10 years, with an increase in the 18- 64 population by 15% and even
- There are significant number of “Out of Borough” placements and conversely there are people from other boroughs using care settings in Tower Hamlets which places pressure on local health services and Safeguarding teams ;
- There is limited focus on future market planning;

### 3. Vision

This Housing with Care Strategy intends to ensure that residents have a home that promotes their independence, aids their health and wellbeing and enhances their quality of life.

Currently, it is too often the case that residents are placed into residential care due to a lack of alternative options available. As a result, more than half of all residential placements are outside of the borough. This is not unique to the London Borough of Tower Hamlets with local authorities across London experiencing the same residential bed shortages. However, what this does mean for residents is being away from their homes, their family and friends and wider community.

Research and evidence have shown that Extra Care Housing positively impacts the lives of residents by increasing their autonomy, reducing loneliness and depression. The result of this is higher perceived levels of mental health and quality of life. Overall, Extra Care Housing provides better outcomes for residents through promoting and maintaining their independence within a supportive environment whilst receiving care and support tailored to them.

This strategy seeks to depart from the current situation where a high number of residents with care and support needs are placed in a residential care setting due to a lack of supply of other housing with care options, by exploring the opportunities to substantially develop modern Extra Care Housing and Supported Living that offers real choice by effectively meeting the evolving and increasingly complex needs of residents throughout their lifetime.

Through the development of purpose-built Extra Care Housing the London Borough of Tower Hamlets can make its residents a long term and sustainable offer of accommodation with the right care and support they need, preventing the situation where residents need to move more than once as their needs change and/or increase. This is in line with the Council's community-based approach whereby support and services are delivered within the resident's home as far as possible.

The aim of the Strategy is to increase the amount of Extra Care Housing and Supported Living available and in turn significantly reduce the need for residential care and consequently improve outcomes for residents. By doing this, the offer can be extended to a wider range of vulnerable adults including people with Learning Disabilities and Mental Health.

To achieve this there is an opportunity to "change the shape" of future demand and move to a more sustainable position.

Delivering the required changes will need a cross-service transformation effort within and beyond Adult Social Care. This will involve closer working with the Housing, Planning and Capital Development services in Tower Hamlets and with Providers and other Partners. It will also require effective joint working with other neighbouring local authorities to manage and mitigate the risks in the development of different Council owned Housing with Care settings.

The Council is committed to co-production so that services are designed and improved with residents, making sure services are valued by and relevant to local people.

The Strategy is set in the context of the Council's core commitment to valuing diversity and promoting equality, therefore recognising the Borough's diversity as one of its greatest strengths and assets.



## 4. Where are we now?

### Extra Care Housing

There are currently 6 extra care schemes providing affordable accommodation in the borough which offer 214 beds, with 4 of these being step down units primarily for those discharged from hospital settings.

Residents have self-contained flats and hold an assured tenancy – it's their home. They have shared facilities including laundry rooms, communal living areas, guest rooms and gardens. There is a choice of planned activities on a regular basis.

There is currently one provider that is responsible for all 6 schemes, care and support is provided as part of the tenure, 24 hours, 7 days a week with a minimum of 3 hours of care per week.

### Nursing care homes

There are 75 nursing beds in Tower Hamlets at the moment. There are two nursing care homes where residents receive nursing healthcare, as well as personal and emotional support over 24 hours, 7 days a week. Residents also receive catered meals, laundry and cleaning services and are able to take part in leisure activities.

The NHS contributes the Free Nursing Care Contribution (FNC) element to Nursing Care placements. Despite this, there should still be options for people with Nursing needs to live in other settings or in their own homes.

### Shared Lives

In a shared lives arrangement, a person

with care and support needs is matched to live with a vetted shared lives carer as part of the Carer's household. The scheme is currently small scale, focusing on people with Learning Disabilities and has just four live in arrangements.

### Supported Living

We currently have 7 commissioned supported accommodation services, 1 residential respite service and 9 non-commissioned supported accommodation services in Tower Hamlets. There are pipeline schemes for several new units/ beds for people with a Learning Disabilities, but expansion of capacity is needed to extend choice, divert people from residential care and address options for people currently Out of Borough.

### Residential care homes

This is a 24 hours, 7 days a week placement where residents receive personal and emotional support. Residents also receive catered meals, laundry and cleaning services and can take part in leisure activities.

COVID highlighted the limitations of residential homes nationally to uphold resident freedoms, family relationships, quality of life whilst prioritising infection control.

There are currently nearly 45% of adults with Learning Disabilities and over 20% of adults with Mental Health support needs aged between 18 to 64 in Housing with Care settings in residential care.

# 5. Where do we want to be?

There will continue to be increased demand and complexity of needs over the coming decade, this will result in an unsustainable position and runs contrary to the Adult Social Care Strategy going forward if nothing is done.

Instead, this Strategy sets out an alternative path which offers a viable model of Housing with Care, that empowers residents to remain as independent as possible by keeping their own front door and arranging the care and support they require to do so around them.

The Strategy puts forward a local plan that will see Tower Hamlets leading the way with substantial development of specialist housing through partnership working with local developers and investors in designing and developing transformative accommodation for residents with care and support needs. These plans will involve the continued use of assisted technology to create safer environments, assist independence, offer more choice and support the maintenance of social connections for residents.

## Why Extra Care Housing

Extra Care offers residents greater choice of support and the ability to maintain connections as part of their community whilst having rights of tenure.

It provides a better outcome focused approach which includes support and approaches to:

- Enabling people to gain and maintain skills including maintaining their tenancy;

- Enabling people to move on to more independent arrangements where appropriate and providing holistic support to ensure the success of this (building on existing models in Tower Hamlets Mental Health service);
- Support to build and maintain relationships and community connections, share support;
- Support for people with substance misuse needs;
- Provide appropriate support around anxiety and hoarding;
- Improve the voice of residents via co-production, tenant forums and peer support.

Research for the Extra Care Charitable Trust and for Southampton City Council identified the positive impact particularly for healthcare partners, with an estimated financial benefit of approximately £2,000 per person per annum for each person living in a housing with care setting resulting from:

- Reductions in the number of GP visits;
- Reductions in the number of community health nurse visits;
- Reductions in the number of non-elective admissions to hospital;
- Reductions in the length of stay and delayed discharges from hospital;
- Reductions in ambulance call outs, typically linked to reduced incidence of falls

The Housing with Care strategy identifies a need for an additional **240 Extra Care units** by 2033. The borough has an overprovision of residential care beds, this coupled with the changing demography and level of care and support needs of Tower Hamlets residents a reduction in residential care should be managed with a corresponding incremental increase in Extra Care Housing units.

This would likely equate to 2 to 4 additional schemes consisting of 60 to 120 units each.

Currently, significant numbers of people with Learning Disabilities and Mental Health tend to have considerable additional packages of one-to-one support compared to the core Extra-Care offer. This could be more efficiently arranged and managed within Extra Care Housing schemes utilising more opportunities for shared support around shared interests.

Enhancing skills and training in supporting people with Dementia, Learning Disabilities or Mental Health needs, along with health services could have a substantial impact on resident experiences. It would also reduce the scale of additional individual support that is purchased in addition to the core Extra Care support.

Increasing the provision of Extra Care Housing would also provide an opportunity to reduce the proportion of 18-64 year olds being placed in residential care to 10% over 10 years.

To be able to reverse the historical over reliance on Residential Care within the Borough it is critical to get the Extra Care

model right to achieve this. Achieving the development of new Extra Care Housing facilities and delivering them within the context of a new, better and more flexible Extra Care Housing model is the key solution to deliver on the new ASC strategy – Improving Care Together.

## Shared Lives

The Tower Hamlets Adult Social Care Strategy cites the ambition to grow the existing Shared Lives scheme. Shared Lives arrangements are the highest rated form of care by CQC and can deliver great outcomes for individuals as well as their host Carers.

Given this, the aim would be to have 10% of residents aged 18-64 and 5% of residents over 65 who need housing with care making use of Shared Lives. This aim is ambitious and for this to be possible modelling has indicated that an additional 110 Shared Lives arrangements are need by 2033.

## Nursing Homes

Population increases and the complexity of people's needs, and healthcare requirements means that more nursing beds are required.

Modelling suggests that by 2033 there will need to be an additional 20 to 25 new nursing beds.

New Nursing Homes tend to be very high specification and usually charge a significant premium. Therefore, use of any new capacity needs to be closely planned with providers and neighbouring Boroughs



to avoid an imbalance of 'importing' people from other placing authorities.

## Shared Lives

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Given this, the aim would be to have 10% of residents aged 18-64 and 5% of residents over 65 who need housing with care making use of Shared Lives. This aim is ambitious and for this to be possible modelling has indicated that an additional 110 Shared Lives arrangements are need by 2033.

## Supported Living

There needs to be a marginal increase of 25 supported living units to meet demand over the next 10 years.

Although there are several new schemes for people with Learning Disabilities underway, there does need to be an expansion of the capacity to extend choice away from residential care and address options for people currently "Out of Borough".

Mental Health services have invested in Supported Living capacity, and this has helped the return of people from "Out of Borough".



## 6. Financial Considerations and opportunities

It is important that the Council now adopts a strategic and structured approach to addressing the increase in population and complexity of needs of Tower Hamlets residents.

It is imperative that going forward the strategy is driven by tackling the current pattern of Care arrangements to effectively meet future demand.

Analysis suggests that there are significant cost saving opportunities available through further development of the different Council owned Housing with Care settings. There are likely to be significant benefits arising from this development, including:

- more choice and control for individuals receiving Care;
- increased independence; and
- better value for money.

It is important to note that Adult Social Care pays for the care and support but NOT the accommodation costs resulting in significant savings for Tower Hamlets.



# 7. Recommendations

The growth statistics suggest there is a “window of opportunity” over the next 3 years to make these investment choices before the demand increases forecasted start to have a significant impact.

There are a number of recommendations proposed by this Strategy, comprising of the following:

- Develop and “Super-Charge” the Support at Home offer by better streamlining preventative and early intervention support to have a more clearly defined, designed and promoted Support at Home offer. This Support at Home Offer would enable people to live independently and/ or with low levels of support at home for as long as possible therefore preventing, reducing and/or delaying Care needs and “dampening” the future demand arising from projected population increases.
- Develop approaches in ASC to ensure that housing considerations are fully integrated with care and support functions and so are properly addressed through assessments, support plans and reviews;
- Develop a clear plan for how to embed reablement and enablement approaches across all the services – so that gaining or maintaining skills and function is integral to the support in all care settings;
- Agree the supporting Governance arrangements that will lead, support and oversee the delivery of the Housing with Care strategy;
- Continue to enhance and develop a complete and consistent data set for bed-based care to enable performance tracking and to aid decision making; needs and “dampening” the future demand arising from projected population increases;
- Complete additional modelling and analysis to demonstrate qualitative and quantitative benefits that will be available as new developments are delivered;
- Further develop strategic plans for each different population cohort – to enable better Care Setting planning for the future (building on the good work already completed for Learning Disabilities and Mental Health populations);
- Develop the Adult Social Care Operating Model to ensure the potential for greater integration between ASC Care decisions and the Commissioning forward strategy;
- Develop closer working relationships with Housing and Planning Services both operationally and strategically to inform the Local Plan and Capital Programme;

# 8. Delivery Plan

To be able to implement the Housing with Care Strategy and successfully “change the shape” of future demand and move to a more sustainable position, the following key areas of work have been identified:

## 1. Market Position Statement (MPS) for Housing with Care

- Reviewing the status of any current individual MPS
- Establishing a task and finish group to develop MPS client groups
- Updating/validating Public Health data

## 2. Market Investment Plan

- Officers will continue to explore as part of the delivery plan all development and investment opportunities for new Housing with Care developments.

## 3. Provider Quality & Performance

- A quality assurance framework
- Contract monitoring Key Performance Indicators (KPI)s for commissioned services
- Outcomes Monitoring Framework

- Share good practice, training and staff development opportunities

## 4. Capital Programme Development

- Developing high level briefs for required schemes
- Identifying potential sites
- Developing PID inc. Financial costings & contingency
- Engaging with a consultant to conduct Feasibility studies
- Tender Build contract
- Commence Build
- Develop service model
- Commission support services

## 5. Sub-regional Accommodation & Support Strategy

- Map current sector meetings
- Explore opportunities e.g. Extra Care, Residential Care at Sub-regional North East London (NEL) joint work

## 6. Business Intelligence

- Census interactive maps
- Power BI function to update demographic changes, enable forecast
- demand and needs by cohort

## 7. 'Shared Lives'

- Developing Business Case for investment into current 'shared Lives' offer
- Financial analysis
- Developing carers networks, recruitment and support

A detailed delivery plan for this strategy will be completed and agreed by all stakeholders.

This plan will then be reviewed annually.



# Appendices

## Appendix 1. Membership of the Housing and Care Steering Group

The project has reported to the Adult Social Care Transformation Board submitting monthly highlight reports and presenting updates at the Board meetings. The Steering Group included representatives from the following teams...

- Commissioning;
- Adult Social Care;
- Brokerage;
- Finance; Performance/Business Intelligence;
- Strategy, Transformation; Housing; Health
  - East London Foundation Trust

## Appendix 2. Who we saw

### **Co-production / Engagement with Services**

- Beaumont Court Care Home Residents
- Tower Hamlets Carers Forum
- Adam Butler – Older People’s Reference Group
- Mike Smith – REAL (Disabled People’s Organisation)
- Extra Care Schemes & Silk Court residents
- Mahip Singh, Service Director, Extra Care Services

### **Operations**

- Christine Oates – Adult Social Care
- Mary Marcus – Adult Social Care
- Brendan Dove – Adult Social Care
- Busayo Olokode – Adult Social Care
- Helen Sims – Adult Social Care
- Maryam Rouf – ASC, Shared Lives
- Rachel Irvine - Safeguarding
- James Wakefield – Safeguarding
- Natasha Hack – Reablement - Independent Living Hub
- Anastasia Boulis – Reablement
- Georgina Birch – ELFT
- Shaun Last – Mental Health
- Emma Robinson – Community Health Teams – scheduled
- Mental Health Neighbourhood teams – scheduled

### **Commissioning / Brokerage**

- Carrie Kilpatrick - Commissioning
- Ben Gladstone - Commissioning
- Eleea Islam – Learning Disabilities
- Dawn Clarke – Mental Health
- Sophia-Maria Andreas – Mental health
- Nasim Ahmed – Brokerage

### **Strategic Commissioning (including front door, carers and equipment) & Telecare**

- Akbal Ahmed – Strategic Commissioning
- Jamie Bird – Strategic Commissioning –
- Shohidul Islam – Strategic Commissioning
- Parvez Hussein – Telecare manager

### **Housing**

- John Harkin – Housing Options
- Rafiqul Hoque – Housing
- Riad Akbar - Housing

### **Strategic Housing, Capital and Planning**

- Jane Abraham – Capital Delivery
- Rupert Brandon – Housing & Regeneration
- Jennifer Peters - Planning and Building Control

## Appendix 3. References and documents reviewed

### Tower Hamlets Strategies

- Improving care together - Our vision and strategy for adult social care in Tower Hamlets, 2021
- LIVING WELL IN TOWER HAMLETS – The Adult Learning Disability Strategy 2017-2020
- Adult Mental Health Strategy 2019 – 2024 - Working together to improve the mental health and wellbeing of Tower Hamlets residents
- Tower Hamlets Partnership Substance Misuse Strategy 2020-2025
- Tower Hamlets Together Outcomes Framework – Outcomes Statements, 2018
- Health and Wellbeing Strategy 2021-25
- Tower Hamlets 2016 – 2021 Housing Strategy
- Tower Hamlets Council Strategic Plan 2022 –2026

### National reports / policy documents

- A place we can call home: A vision and a roadmap for providing more options for housing with care and support for older people. Report of The Commission on the Role of Housing in the Future of Care and Support (2021).
- <https://www.scie.org.uk/housing/role-of-housing/place-we-can-call-home>
- Design Principles for Extra Care Housing (3rd edition), Housing LIN, 2020
- [https://www.housinglin.org.uk/\\_assets/Resources/Housing/Support\\_materials/Factsheets/Design-Principles-For-Extra-CareHousing-3rdEdition.pdf](https://www.housinglin.org.uk/_assets/Resources/Housing/Support_materials/Factsheets/Design-Principles-For-Extra-CareHousing-3rdEdition.pdf)
- HAPPI - Housing Our Ageing Population Panel for Innovation, Housing LIN
- <https://www.housinglin.org.uk/Topics/browse/Design-building/HAPPI/>
- TAPPI- Technology for our Ageing Population: Panel for Innovation, Housing LIN
- <https://www.housinglin.org.uk/Topics/browse/Design-building/tappi/>



## Potential Savings/or Cost Avoided over 10 years.

			Nursing	Residential	Extra-Care	Supported Living	Shared lives	Total
LD	18-64	2033 (Do Nothing)	£-	£8,934,120	£ 918,528	£4,855,760	£138,736	£14,847,144
		2033	£-	£2,029,108	£2,164,381	£5,720,956	£653,824	£10,568,269
	"Saving"			£6,905,012	<b>-£1,245,853</b>	<b>-£865,196</b>	<b>-£515,088</b>	£4,278,875
	65+	2033 (Do Nothing)	£46,280	£2,591,222	£255,923	£324,703	£-	£3,218,128
		2033	£96,164	£972,448	£553,215	£438,682	£125,338	£2,185,847
	"Saving"		<b>-£49,884</b>	£1,618,774	<b>-£297,292</b>	<b>-£113,979</b>	<b>-£125,338</b>	£1,032,281
MH	18-64	2033 (Do Nothing)	£221,260	£4,401,998	£602,784	£10,885,992	£-	£16,112,034
		2033		£3,904,480	£2,287,143	£7,555,740	£1,184,413	£14,931,777
	"Saving"		£221,260	£497,518	<b>-£1,684,359</b>	<b>£3,330,252</b>	<b>-£1,184,413</b>	£1,180,257
	65+	2033 (Do Nothing)	£1,183,645	£5,275,537	£1,925,822	£1,065,280	£-	£9,450,284
		2033		£2,766,846	£2,917,344	£1,713,360	£671,452	£8,069,002
	"Saving"		£1,183,645	£2,508,691	<b>-£991,522</b>	<b>-£648,080</b>	<b>-£671,452</b>	£1,381,282
Older People	65+	2033 (Do Nothing)	£6,070,178	£8,053,583	£2,599,220	£179,946	£193,050	£17,095,978
		2033	£6,188,936	£2,672,495	£4,219,729	£703,288	£543,876	£14,328,324
	"Saving"		<b>-£118,758</b>	£5,381,088	<b>-£1,620,509</b>	<b>-£523,342</b>	<b>-£350,826</b>	£2,767,654
<b>Total "Saving"</b>			<b>£1,236,263</b>	<b>£16,911,083</b>	<b>-£5,839,535</b>	<b>£1,179,654</b>	<b>-£2,847,117</b>	<b>£10,640,349</b>

The table above shows the savings or avoided costs (at today's prices) in 2033 compared with a do-nothing scenario over the same period.

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