

Housing and supported accommodation need assessment

For Royal Borough of Kingston

November 2020

Housing Learning and Improvement Network

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About the Housing Learning & Improvement Network (LIN)

This report has been produced by Ian Copeman, Lois Beech and Darius Ghadiali from the Housing LIN.

The Housing LIN is the leading 'learning lab' for a growing network of housing, health and social care professionals in England, Wales and Scotland involved in planning, commissioning, designing, funding, building and managing housing, care and support services for older people and vulnerable adults with long-term conditions.

Previously responsible for managing the UK Government Department of Health's Extra Care Housing Fund, the Housing LIN is called upon by a wide range of statutory and other organisations to provide expert advice and support regarding the implementation of policy and good practice in the field of housing, care and support services.

Recognised by government and industry as a leading 'knowledge hub' on specialist housing, our online and regional networked activities:

- connect people, ideas and resources to inform and improve the range of housing choices that enable older and disabled people to live independently
- provide intelligence on latest funding, research, policy and practice developments, and
- raise the profile of specialist housing with developers, commissioners and providers to plan, design and deliver aspirational housing for an ageing population and other people with care and support needs.

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1. Introduction

- 1.01. This is a report from the Housing Learning & Improvement Network (Housing LIN).
- 1.02. Kingston council wants to understand the future need, over the next 10 years, for housing and supported accommodation for adults, children and their families who are living with disability and/or social care needs within Kingston. Kingston council wishes to use this evidence base to inform a 'development plan' for housing and supported accommodation and to identify the resources required to deliver this type of transformation programme.
- 1.03. This evidence base is intended to provide a 10 year forward view of housing need amongst adults, children and their families living with disability and/or social care/support need in Kingston. To develop this evidence base we have:
 - Reviewed current housing and supported accommodation provision for adults, children and families with a disability and/or social care/support needs.
 - Identified need for housing and supported accommodation over the next 10 years. The need assessment is disaggregated by 'client cohort', however it is intended to be used as part of taking a 'whole population' approach, i.e. for adults, children and families with a disability and/or social care/support needs, including demand for supported/specialist housing as well as housing that is better suited to ageing and disability, e.g. housing designed to Lifetimes Homes standards.
- 1.04. To develop this evidence base a range of data is used:
 - Elderly Accommodation Counsel data.¹
 - ONS population projections.²
 - Local commissioning plans and strategies that cover the identified population cohorts, e.g. supported living strategies, prevention strategies.
 - The latest market position statement covering the health and social care needs of the identified client cohorts.
 - The local Joint Strategic Needs Assessment (JSNA).
 - Local housing/homelessness strategies and strategic housing market assessments (SHMAs).
 - Local authority and NHS data returns that apply to the identified population cohorts, e.g. local authority SALT returns, NHS MHSDS information.
- 1.05. We have used these sources of data along with local intelligence from Council Officers and their partners and a range of qualitative evidence from citizens and community organisations.

¹ Elderly Accommodation Counsel housing data (Q4 2019)

² ONS: 2016-based subnational population projections for local authorities and higher administrative areas in England

2. People with a learning disability/autism

- 2.01. We have identified the size of the relevant cohorts and their accommodation status using a combination of:
- The Short- and Long-Term Support (SALT) returns³ for Kingston;
 - Local data from Kingston Council
- 2.02. The housing demand assessment model has the 'components' set out below.

Method

Component 1: Population baseline

- 2.03. The baseline population uses the current adult learning disability population who are eligible for local authority funded care. This has been established using SALT data.

Component 2: Current housing/accommodation status

- 2.04. The assessment model identifies the housing/accommodation status of the known current adult learning disability population, via SALT returns. This includes:
- Population of people (adults 18+) with learning disabilities disaggregated by:
 - o No./% living with family or other informal carers.
 - o No./% living in residential/nursing care.
 - o No./% living in supported housing (either in a shared or self-contained tenancy)
 - o No./% living in other forms of independent housing with a care package
 - o No./% living in Shared Lives.
- 2.05. The number of people with learning disabilities living in each of these types of accommodation/housing can be seen in Table 1.

Component 3: Projecting future population of people with learning disabilities taking account of relevant local and national factors

- 2.06. This uses secondary data from PANSI (this is data available to local authorities that provides estimates of population cohorts with social care needs) and assumptions based on previous Housing LIN studies in relation to projections of young people who are likely to 'transition' to adult services. These estimates of population growth take account of factors such as younger people with disabilities becoming adults (typically referred to as young people in 'transition') and an ageing population of people with learning disabilities. Based on data from PANSI and evidence from transitions data, projected population change based on PANSI for the borough plus 2.97% increase per annum to allow for young people in 'transition' is applied (based on figures provided by Kingston Council).

Component 4: Assumptions about the need for of different housing/accommodation types (i.e. the relative percentage of each housing/accommodation type) to be applied to the estimated population to 2030 to identify projected housing needs.

- 2.07. This is based on:
- Assumptions in relation to population growth factors in the need for housing (based on the estimated changes in the population cohorts shown in Component 3 above).

³

<https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections/social-care-collections#short-and-long-term-support-salt->

- Any evidence in relation to the current provision of housing and accommodation to identify potential gaps in provision and suggested over/under supply of housing/accommodation options.
- 2.08. Based on this evidence and evidence of the current pattern of accommodation/housing provision for people with learning disabilities, the following future likely trends have been identified and are used as assumptions for estimating future housing demand to 2030/31:
- Planned decrease in the use of residential care. It is assumed that there is intent to bring this down to at least the current English average of 17% (of adults with learning disabilities with eligible care needs) by 2030/31 (table 3).
 - A trend towards increasing supported housing provision. This is to meet need from those moving from residential care and a requirement to develop more cost-effective forms of supported housing.
 - A trend towards increasing supported housing that is designed to meet the housing needs of people with more complex needs, particularly:
 - People with learning disabilities who have complex needs related to autism, typically behavioural needs
 - People with learning disabilities who also have physical disabilities and may require fully wheelchair adapted properties.
 - Some ongoing requirements for access to mainstream housing with care/support packages; and offering more cost-effective supported housing where individuals are living alone with 24/7 care packages.
 - Potential growth in Shared Lives.
 - A trend towards a gradual decline in the population living with older family carers.

Component 5: Identifying estimated future housing and accommodation need for people with learning disabilities.

- 2.09. This identifies changes in net housing requirements to meet projected housing need and changes in the types of housing/accommodation required. This is based on applying the assumptions in component 4 to the current housing/accommodation provision in relation to components 1 and 2. This is then adjusted for identified population change over time from component 3, net of current housing/accommodation.
- 2.10. Based on this approach, the growth in the number of people with learning disabilities and a suggested split of these people across accommodation types is shown in table 1 and the estimated net additional demand (or shortfall) of supported accommodation/housing for people with learning disabilities in Kingston to 2030/31 is shown in Table 2.
- 2.11. Table 1 below shows estimated need for housing/accommodation for people with learning disabilities for Kingston to 2035/36. In summary, the assumptions applied based on the approach set out above are:
- Adult learning disability population change (+0.13% pa) based on localised PANSI population growth figures, and an average of 2.97% per annum due to young people in 'transition' – thus forming a total annual population growth rate of +3.1%.
 - The percentage in residential/nursing care has been reduced to 17% – in line with the England average.
 - The growth in population reflected in growth in need for supported housing.
 - There is a reduction in the use of shared housing and growth in the use of self-contained flats (in the context of Covid-19) to account for reduction in the use of residential care and people living with older carers.

- The growth in estimated need for supported housing is assumed to be for self-contained housing.

Table 1. Estimated need for supported housing/accommodation for people with learning disabilities in Kingston to 2030/31.

| | Data Source | Current provision and population (2020) | Current % use of housing & accom. types | Adult pop. and estimated need 2025 | Anticipated % use of housing & accom. types | Adult pop. and estimated need 2030 | Anticipated % use of housing & accom. types |
|--|-------------|---|---|------------------------------------|---|------------------------------------|---|
| Population | SALT | 370 | | 427 | | 485 | |
| Housing & accommodation types | | | | | | | |
| Residential/nursing care | SALT | 90 | 24 | 88 | 21 | 82 | 17 |
| Home ownership | SALT | 5 | 1 | 6 | 1 | 7 | 1 |
| Shared Lives | SALT | 6 | 2 | 9 | 2 | 10 | 2 |
| Supported housing (shared) | SALT | 87 | 24 | 97 | 23 | 107 | 22 |
| Supported housing (self contained) | SALT | 29 | 8 | 64 | 15 | 107 | 22 |
| Mainstream housing with care/support package | SALT | 80 | 22 | 92 | 22 | 105 | 22 |
| Living with family/informal carers | SALT | 73 | 20 | 71 | 17 | 68 | 14 |
| Totals | | 370 | 100 | 427 | 100 | 485 | 100 |
| Net additional housing & accommodation requirement (units) | | | | 61 | | 127 | |

Sources: RB Kingston SALT database (2018/19) & PANSI (2018)

2.17. Adult learning disability population growth is based on localised PANSI population growth rates⁴ (+0.13%) plus increase of 2.97% per annum due to young people 'transitions' – resulting in a total population growth rate of +3.1% per year.

Table 2. Net additional units of supported housing required for people with learning disabilities in Kingston borough to 2030/31, compared to 2025/26. In summary, 124 additional units will be required by 2030/31.

| | Net additional supported housing units required (2025/26) | Net additional supported housing units required (2030/31) |
|----------|---|---|
| Kingston | 61 | 127 |

⁴ Projecting Adult Needs and Service Information: People aged 18–64 predicted to have a learning disability, by age (2018)

Table 3. Comparison of residential and nursing care use between Kingston and its CIPFA comparators, ranked from highest to lowest proportion of residential care use relative to the LD population size.

Source: Short and Long-term Support database (2018/19)

| Authorities | Number of residential / nursing care placements | Total LD population | % of LD population in residential / nursing care |
|---------------------------|---|---------------------|--|
| England average | 22,195 | 133,575 | 16.6% |
| Comparator average | 121 | 559 | 21.8% |
| Kingston | 90 | 370 | 24.3% |
| Croydon | 230 | 815 | 28.2% |
| Wandsworth | 200 | 780 | 25.6% |
| Richmond upon Thames | 105 | 410 | 25.6% |
| Bexley | 115 | 460 | 25.0% |
| Merton | 105 | 420 | 25.0% |
| Harrow | 130 | 545 | 23.9% |
| Sutton | 120 | 530 | 22.6% |
| Hammersmith and Fulham | 60 | 275 | 21.8% |
| Hounslow | 90 | 425 | 21.2% |
| Havering | 110 | 520 | 21.2% |
| Ealing | 145 | 690 | 21.0% |
| Hillingdon | 120 | 610 | 19.7% |
| Bromley | 115 | 650 | 17.7% |
| Barnet | 135 | 825 | 16.4% |
| Redbridge | 60 | 620 | 9.7% |

- 2.18. Data from Kingston Council indicates that there are 68 individuals, aged 16–65, with a learning disability that are living in a residential care setting outside of the borough. Additionally, there are 2 individuals aged 16–20 that are with a learning disability, living out-of-borough, in a residential setting.

3. People with mental health related needs

3.01. We have identified the size of the relevant cohorts and their accommodation status using a combination of:

- The Mental Health Services Dataset (MHSDS) returns⁵ for Kingston.
- MHSDS monthly performance data.⁶
- Short and Long Term Support data.⁷
- Kingston Council’s data about supported housing provision.

3.02. The housing need assessment model has the ‘components’ set out below.

Method

Component 1: Population baseline

3.03. The baseline population uses the current adult population who have a mental health support need and are eligible for local authority funded support. This is identified as c.850 people, using MHSDS data for Kingston.

Component 2: Current housing/accommodation status

3.04. The assessment model identifies the housing/accommodation status of the known current working age adult population, via MHSDS returns and MHSDS monthly performance data. This includes:

- The population of adults aged 18–69 on the Care Programme Approach⁸ in settled accommodation (categorised under adult mental health services)
- The population of adults 18–69 with a mental health support need disaggregated by a range of current accommodation categories including:
 - o No./% living with family or other informal carers.
 - o No./% living in registered care.
 - o No./% living in supported housing.
 - o No./% living in other forms of independent housing with a support package

Table 4. The proportion of adults aged 18–69 living in settled accommodation, for Kingston, in comparison with its clinical commissioning group – NHS South West London CCG

| Area | Number of adults aged 18–69 in settled accommodation | % of adults aged 18–69 in settled accommodation | Number of adults aged 18–69 in unsettled accommodation | % of adults aged 18–69 in unsettled accommodation |
|---------------------------|--|---|--|---|
| Kingston | 505 | 83.5% | 100 | 16.5% |
| NHS South West London CCG | 1,735 | 36.0% | 3,084 | 64.0% |

⁵

<https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-sets/mental-health-services-data-set>

⁶

<https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-services-monthly-statistics/performance-june-provisional-july-2020#resources>

⁷ NHS Digital: Short and Long Term Support – Adult Social Care Activity: England 2018–19

⁸

<https://www.nhs.uk/conditions/social-care-and-support-guide/help-from-social-services-and-charities/care-for-people-with-mental-health-problems-care-programme-approach/>

N.B. Data for Kingston was relevant for the single month of June 2020, and data for NHS South West London was relevant for April to June 2020. Therefore, the NHS South West London CCG figures have been divided by 3 to reflect a one-month average figure.

- 3.05. Additionally, data from Kingston Council indicates that there are 56 people living in 20 supported living schemes. Of the 56 people, 19 were placed in supported living accommodation in-area and 37 were placed out-of-area.
- 3.06. The proportions of people with a mental health support need living in each of these types of accommodation/housing can be seen in Table 5 below.

Table 5. Accommodation of adults 18-69 in Kingston with a mental health support need

| Housing & accommodation type | Number of people | Share of total (%) |
|-------------------------------------|------------------|--------------------|
| Mainstream housing (rented) | 315 | 36.9% |
| Mainstream housing (owner occupied) | 240 | 28.1% |
| Living with family/friends | 166 | 19.4% |
| Homeless/insecure housing | 19 | 2.2% |
| Supported housing (shared) | 37 | 4.3% |
| Supported housing (self-contained) | 37 | 4.3% |
| Registered care | 35 | 4.1% |
| In hospital/NHS setting | 5 | 0.6% |
| In criminal justice setting | 0 | 0.0% |
| TOTAL | 854 | 100% |

Source: MHSDS

N.B. the split of supported housing between the shared and self-contained categories is set at 50/50 until the true split can be obtained from Kingston.

- 3.07. Local NHS mental health services have confirmed that the typical figure for those living in Kingston with a mental health support need lies between c.850 individuals and c.900 individuals.
- 3.08. Data received directly from Kingston Council indicates that there are 56 council-funded people with a mental health condition living in 20 supported living schemes. Of the 56 with a mental health condition, 19 have been placed in-area (within Kingston Council's operating area) and 37 have been placed out-of-area.
- 3.09. Data supplied by Kingston Council shows that there are 8 individuals with Mental Health needs living out-of-borough in residential care settings.
- 3.10. Additional data shows that each year, c.5 cases are discharged from in-patient rehab into supported living in Kingston, and there are c.20 people discharged from hospital discharges accessing residential or supported living.

Component 3: Projecting future population of people with a mental health support need taking account of relevant local and national factors

- 3.11. This uses secondary data from PANSI (this is data available to local authorities that provides estimates of population cohorts with social care needs) and assumptions based on previous Housing LIN studies. These estimates of population growth take account of factors such as younger people with mental health support needs becoming

adults and an ageing population. Based on localised data from PANSI (per annum to 2035 for the English population with a common mental condition), a 2.04% increase per annum is assumed.

Component 4: Assumptions about the need for different housing/accommodation types (i.e. the relative percentage of each housing/accommodation type) to be applied the estimated population to 2035/36 to identify projected housing needs.

- 3.12. This is based on:
- Assumptions in relation to population growth factors in the need for housing (based on the estimated changes in the population cohorts shown in Component 3 above).
 - Any evidence in relation to the current provision of housing and accommodation to identify potential gaps in provision and suggested over/under supply of particular housing/accommodation options.
- 3.13. Based on this evidence and evidence of the current pattern of accommodation/housing provision for people a mental health support need, the following future likely trends have been identified and used as assumptions for estimating future housing need to 2030:
- Planned decrease in the use of registered care. It is assumed that there is intent to bring this down to 2% by 2030/31, as numbers are already low.
 - Trend towards increasing supported housing provision. This is to meet need from those moving from registered care, 'step down' from acute psychiatric beds and local intelligence about additional supported housing capacity requirements.
 - Increasing need for access to mainstream housing with support packages, particularly as 'move-on' accommodation from supported housing.
 - Slight decrease in those living with family/friends, countered by moves into supported or mainstream housing.

Component 5: Identifying estimated future housing and accommodation need for people with a mental health support need

- 3.14. This identifies changes in net housing requirements to meet projected housing need and changes in the types of housing/accommodation required. This is based on applying the assumptions in component 4 to the current housing/accommodation provision in relation to components 1 and 2. This is then adjusted for identified population change over time from component 3.
- 3.15. Based on this approach, the growth in the number of people with a mental health support need and a suggested split of these people across accommodation types is shown in table 5 and the estimated net additional need for supported accommodation/housing for people with a mental health support need in Kingston to 2030/31 is shown in Table 6.
- 3.16. Table 6 below shows estimated need for housing/accommodation for people with a mental health support need for Kingston 2030/31. In summary the assumptions applied based on the approach set out above are:
- Population change: an assumed increase of 1% per annum;
 - Any growth in the population of people with a mental health support need is assumed to be reflected in growth in need for mainstream housing for rent and supported housing;

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- The percentage of people who are homeless or in insecure housing to decrease to 0%, as they move into supported housing or mainstream housing;
- Decrease in the percentage of people in registered care to 2%.

Table 6. Estimated need for supported housing/accommodation for people with a mental health support need in Kingston to 2030/31.

| | Data Source | Current provision and population (2020) | Current % use of housing & accommodation types | Adult pop. and estimated need (2025) | Anticipated % need for housing & accommodation types | Adult pop. and estimated need (2030) | Anticipated % need for housing & accommodation types |
|---|-------------|---|--|--------------------------------------|--|--------------------------------------|--|
| Population | MHSDS | 854 | | 896 | | 1,028 | |
| Housing & accommodation types | | | | | | | |
| Mainstream housing (rented) | MHSDS | 315 | 37 | 394 | 44 | 504 | 49 |
| Mainstream housing (owner occupied) | MHSDS | 240 | 28 | 224 | 25 | 226 | 22 |
| Living with family/friends | MHSDS | 166 | 19 | 134 | 15 | 123 | 12 |
| Homeless/insecure housing | MHSDS | 19 | 2 | 10 | 1 | 0 | 0 |
| Supported housing (shared) | MHSDS | 37 | 4 | 45 | 5 | 62 | 6 |
| Supported housing (self-contained) | MHSDS | 37 | 4 | 54 | 6 | 82 | 8 |
| Registered care | MHSDS | 35 | 4 | 27 | 3 | 21 | 2 |
| In hospital/NHS setting | MHSDS | 5 | 1 | 7 | 1 | 10 | 1 |
| In criminal justice setting | MHSDS | 0 | 0 | 0 | 0 | 0 | 0 |
| Totals | | 854 | 100 | 896 | 100 | 1028 | 100 |
| Net additional supported housing & accommodation requirement (units) | | | | 25 | | 70 | |

Table 7. Net additional units of supported housing required for people with a mental health support need in Kingston to 2030/31, compared to 2020/21.

| | Net additional supported housing units required (2025/26) | Net additional supported housing units required (2030/31) |
|----------|---|---|
| Kingston | 25 | 70 |

4. People with a physical disability

- 4.01. People with physical disabilities, and particularly wheelchair users, may require adapted and/or accessible mainstream housing that can meet their accessibility requirements. In this context adapted and/or accessible housing is taken to mean:
- Fully wheelchair adapted dwellings i.e. similar to Part M(4) Category 3 broadly equivalent to the Wheelchair Housing Design standard.
 - Accessible and adaptable dwellings (not fully wheelchair adapted) i.e. similar to Part M(4) Category 2 broadly equivalent to the Lifetime Homes standard.
- 4.02. There is relatively limited data regarding the number of suitably adapted properties within the borough, for rent and for sale and the potential adaptability of the general housing stock of the borough.

Housing need amongst households/people with physical disabilities

- 4.03. There are few data sources available to generate an estimate of the housing need of people with physical disabilities who require a wheelchair accessible or adapted property. The census does not ask about wheelchair use and there is no other comprehensive source for this kind of information at a local level.
- 4.04. Local Strategic Housing Market Assessments rarely include an assessment of demand for wheelchair accessible and adapted housing. This is in part because there is no standardised approach to projecting demand for these types of housing.
- 4.05. Data on the use of NHS wheelchair services have been published quarterly from April 2019. The data from October to December 2019 show that there were 1,233 adults and 141 children currently registered with the service in Kingston CCG⁹. However, these data will not flag up those 'hidden' wheelchair users that do not interact with NHS wheelchair services.
- 4.06. An estimated 3.3% of households have one or more wheelchair users¹⁰. As there were approximately 67,230 households in Kingston in 2016¹¹, this would amount to 2,219 wheelchair user households.
- 4.07. In response to this intelligence deficit, two 'models' using secondary data have been used:
- An approach by Perry (2015)¹² to estimating the number of wheelchair users in a locality
 - An approach by Habinteg Housing Association for estimating demand for housing for wheelchair users¹³.
- 4.08. These approaches are used to estimate accommodation need, specifically accessible and adapted housing, amongst working age people with physical disabilities in Kingston.

Estimating the number of wheelchair user households

⁹ NHS England (2019). National Wheelchairs Collection Results – July to September.

¹⁰ Department for Communities and Local Government (2016). Guide to available disability data.

¹¹ Office for National Statistics (2019). Household projections for England.

¹² Perry, F.C. (2015). Stand up and be counted: An attempt to estimate the number of wheelchair users within the areas used by the 2011 census. Available at:

<https://fleurperry.files.wordpress.com/2015/11/stand-up-and-be-counted.pdf>

¹³ Habinteg. Mind the Step: An estimation of housing need among wheelchair users in England.

- 4.09. Habinteg developed this method based on data from the Survey of English Housing and analysis of that data to determine the total number of wheelchair user households in England and also the proportions that were ‘indoor’ wheelchair users and ‘outdoors only’ users.
- 4.10. When this model was developed there were around 607,200 wheelchair users in England, living in some 586,700 households, spread across all tenures. The estimate of wheelchair user households in England with unmet housing needs of 78,300, translates to 240 households in an ‘average’ local (housing) authority with a total of 68,064 households.
- 4.11. The model has the following underlying assumptions based on data from the Survey of English Housing:
- The majority (60%) of wheelchair users are age 65+.
 - The majority of wheelchair user households contain individuals who use wheelchairs ‘outdoors only’ (74% of households), with around a quarter using them indoors (26% of households, i.e. wheelchair users who it is assumed are most likely to require fully adapted properties).
- 4.12. The research identified for English regions, the percentage of all households that are wheelchair user households, this is typically 2–3%; and the percentage of wheelchair user households with unmet housing need; for London it is assumed to be 18% (where the national average is 13%).
- 4.13. The method for producing an indicative local authority estimate is to take the regional figure for the percentage of all households that are wheelchair user households and multiply this by the number of all households in the local authority. This gives an estimate for the number of wheelchair user households. This is then multiplied by the regional figure for the percentage of wheelchair user households with unmet housing need.

Table 8. Estimate of housing need amongst wheelchair user households in Kingston using the Habinteg Housing Association model.

| Area | Total No. Households (2020) | % Wheelchair Using | No. of Wheelchair User Households | % of Wheelchair User Households with Unmet Housing Needs | No. of Wheelchair User Households with Unmet Housing Needs |
|----------------------|-----------------------------|--------------------|-----------------------------------|--|--|
| Kingston upon Thames | 68,666 | 3 | 2,058 | 18 | 370 |
| England | 23,385,949 | 3 | 701,579 | 13 | 91,205 |

Data are from the Office for National Statistics’ Household projections for England (2018)¹⁴.

- 4.14. This model estimates that there are 370 wheelchair user households with unmet housing need in Kingston as shown in table 9 below.

¹⁴ Office for National Statistics (2018). Household projections for England. Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationprojections/datasets/householdprojectionsforengland>

Table 9. The Habinteg method applied to ONS household projections up to 2030.

| Year | Total No. Households | No. of Wheelchair User Households | No. of Wheelchair User Households with Unmet Housing Needs |
|------|----------------------|-----------------------------------|--|
| 2020 | 68,666 | 2,060 | 370 |
| 2025 | 71,180 | 2,135 | 384 |
| 2030 | 73,581 | 2,207 | 397 |

Summary of future housing requirements

- 4.15. Based on the Habinteg model, for 2020/21, it is estimated that there are 148 wheelchair user households of working age with unmet housing need and 222 wheelchair user households of people aged 65+ with unmet housing need:
- It is estimated that 38 (26%) of these working age households require **fully wheelchair adapted dwellings** (i.e. similar to Part M(4) Category 3 broadly equivalent to the Wheelchair Housing Design standard).
 - It is estimated that 110 (74%) of these working age households do not require fully wheelchair adapted dwellings but may require **accessible and adaptable dwellings** (i.e. similar to Part M(4) Category 2 broadly equivalent to the Lifetime Homes standard).
- 4.16. By 2030 it is estimated that there will be 397 households with unmet housing need: 159 wheelchair user households of working age with unmet housing need and 238 wheelchair user households of people aged 65+ with unmet housing need:
- It is estimated that 41 (26%) of these working age households require **fully wheelchair adapted dwellings** (i.e. similar to Part M(4) Category 3 broadly equivalent to the Wheelchair Housing Design standard); equivalent to a need for **c.4 fully adapted properties per annum**.
 - It is estimated that 118 (74%) of these working age households do not require fully wheelchair adapted dwellings but may require **accessible and adaptable dwellings** (i.e. similar to Part M(4) category 2); equivalent to a need for **c.12 accessible properties per annum**.
- 4.17. It should be noted that Part M Building Regulations, in this context, are different but equivalent to Lifetime Homes standards and wheelchair housing design standards.
- 4.18. It should be noted that these estimates don't take account of relets or resales of adapted or accessible properties. However, it would be prudent to treat these estimates as conservative and to seek to extend the use of compliance with Lifetime Homes Standards more generally for new build housing developments. This emphasises the importance of developing to Cat 2/Lifetime Homes standard to facilitate future adaptability and 'life events'.

5. Older people

- 5.01. It is estimated that, by 2030, there will be an increase of 46% in the over-65 population (from 23,100 to 32,900), an increase of 71% in the 80-84 population (up from 3,100 to 5,300), a 48% increase in the 85-89 population (up from 2,100 to 3,100) and an increase of 71% in the population aged 90 years and over¹⁵.
- 5.02. The Housing LIN's SHOP@¹⁶ model has been used to estimate future demand for specialist housing and accommodation for older people. We originally developed SHOP@ with the Association of Directors of Adult Social Services (ADASS) and Elderly Accommodation Counsel (EAC) for the Department of Health's Market Development Forum to support local authorities to forecast demand for older people's housing and accommodation.
- 5.03. Over the period 2015-35, the Kingston SHMA¹⁷ identified a need for around 1,426 additional specialist housing units for older people, which translates to 71 additional units needed per year for that period. This includes around 1,049 sheltered homes (829 for rent and 220 for lease/ownership) and 209 extra care homes. These estimates were made using 2016 SHOP@ national benchmarks. We have refined the SHOP@ housing need tool since that time so that our approach refines the previous use of national generic 'benchmarks' to better estimate future need at local authority level.
- 5.04. We produce a comparative analysis that compares the current supply or 'prevalence' of different types of housing and accommodation for older people (older people's housing for rent, older people's retirement housing for sale, extra care housing for rent and for sale) in Kingston with the Chartered Institute of Public Finance and Accountancy (CIPFA) 'Nearest Neighbour' comparator authorities¹⁸, along with the all England averages for supply of older people's housing and accommodation. This identifies how supply in Kingston compares to comparator authorities and across England generally.
- 5.05. To make this housing need assessment bespoke to Kingston we have reviewed local trends and factors that influence future need for housing and accommodation for older people and have discussed planning and development intentions with council Officers.
- 5.06. We have then produced quantitative estimates of future need of housing and accommodation for older people that uses:
 - Data showing the existing supply of older people's designated housing and accommodation in Kingston. We have this data from the Elderly Accommodation Counsel.
 - ONS population figures updated in March 2018¹⁹. SHOP@ focuses on estimates using the ONS population of older people up to 2035. The SHOP@ model typically uses the 75+ population as the average age benchmark for most likely use of specialist designated housing and accommodation for older people.
 - Current and potential prevalence rates (i.e. for older people's housing for social rent; private retirement housing and extra care housing) used as 'benchmarks' within SHOP@ are based on consideration of evidence in relation to local trends and local policy regarding the use of, for example registered care services and extra care

¹⁵ Royal Borough of Kingston - Joint Strategic Needs Assessment: Demographic Profile of Ten Key Population Groups.

¹⁶ www.housinglin.org.uk/SHOP

¹⁷ Kingston Council (2016). Strategic Housing Market Assessment

¹⁸ <https://www.cipfastats.net/resources/nearestneighbours/>

¹⁹ ONS: 2018-based subnational principal population projections for local authorities and higher administrative areas in England

housing, and how current provision in Kingston compares with 'nearest neighbour' authorities.

- Tenure status data in relation to older households in Kingston from the most recent census and the most recent ONS deprivation data is used to estimate housing need in terms of the mix of tenures (for sale and for social rent).

Method

5.07. The housing and accommodation services within this housing need assessment are defined as:

- **Housing for older people (HfOP):** social sector sheltered and age-designated housing and private sector retirement housing. This will include 'care ready' housing²⁰, for rent and for sale, with on-site staff support, those with locality-based support services and schemes with no associated support services.
- **Housing with care (HwC):** includes extra care housing schemes, for social rent, and housing with care or housing with care/'assisted living' in the private sector, for private sale, with 24/7 care available on-site.

²⁰ Care ready housing typically means that a home is capable of adaptation over time to meet changing needs including space for aids and adaptations. Through good design, homes can be built to be better suited to possible future requirements such as the need to have an overnight carer, storage for mobility scooters and space to retain independence.

Table 10. Units of Housing for Older People (HfOP), Housing with Care (HwC) in Kingston, in relation to its CIPFA comparator authorities²¹ and across England, split by tenure²².

| Area | HfOP (units) | | HwC (units) | |
|---------------------------|---------------------------|----------------|---------------------------|---------------|
| | For sale/shared ownership | For rent | For sale/shared ownership | For rent |
| Kingston | 319 | 1,200 | 0 | 0 |
| Barnet | 908 | 1,947 | 0 | 200 |
| Bexley | 1,005 | 1,363 | 50 | 74 |
| Bromley | 1,320 | 2,269 | 40 | 191 |
| Croydon | 884 | 2,092 | 0 | 348 |
| Ealing | 298 | 1,917 | 0 | 75 |
| Hammersmith and Fulham | 0 | 1,699 | 0 | 107 |
| Harrow | 726 | 1,024 | 48 | 47 |
| Havering | 738 | 960 | 0 | 195 |
| Hillingdon | 400 | 1,333 | 55 | 240 |
| Hounslow | 294 | 1,095 | 0 | 115 |
| Merton | 288 | 760 | 51 | 107 |
| Redbridge | 981 | 1,109 | 0 | 196 |
| Richmond upon Thames | 290 | 1,033 | 0 | 41 |
| Sutton | 637 | 1,409 | 57 | 112 |
| Wandsworth | 182 | 1,813 | 94 | 153 |
| Comparator average | 579 | 1,439 | 25 | 138 |
| England | 151,683 | 432,391 | 13,629 | 46,176 |

Source: Elderly Accommodation Counsel (2019).

²¹ <https://www.cipfa.org/services/data-to-drive-decisions/cipfastats/nearest-neighbour-model?crdm=0>

²² Elderly Accommodation Counsel (2019).

Table 11. Population count for over-75s, for Kingston and its CIPFA comparators, projected using 5-year intervals from 2020 to 2040 .

Source: ONS 2018 Population Projections

| Authority | 75+ population | | | |
|---------------------------|------------------|------------------|------------------|------------------|
| | 2020 | 2025 | 2030 | 2035 |
| Kingston | 11,587 | 13,656 | 15,030 | 16,705 |
| Barnet | 27,830 | 32,428 | 36,081 | 40,959 |
| Bexley | 20,563 | 22,596 | 23,505 | 25,708 |
| Bromley | 28,427 | 32,078 | 33,453 | 35,865 |
| Croydon | 24,740 | 28,218 | 31,482 | 36,064 |
| Ealing | 20,689 | 23,838 | 27,187 | 30,823 |
| Hammersmith & Fulham | 9,264 | 11,232 | 12,806 | 14,723 |
| Harrow | 19,209 | 21,696 | 24,084 | 27,120 |
| Havering | 23,117 | 25,397 | 26,335 | 28,405 |
| Hillingdon | 19,997 | 22,681 | 24,687 | 27,843 |
| Hounslow | 14,789 | 17,159 | 19,478 | 22,160 |
| Merton | 12,224 | 13,713 | 14,849 | 16,504 |
| Redbridge | 17,990 | 20,169 | 22,389 | 25,328 |
| Richmond upon Thames | 14,472 | 17,441 | 19,398 | 21,633 |
| Sutton | 14,975 | 17,017 | 18,239 | 19,961 |
| Wandsworth | 14,440 | 16,738 | 18,473 | 20,821 |
| Comparator Average | 18,475 | 21,388 | 23,775 | 26,906 |
| England | 4,781,800 | 5,836,600 | 6,437,400 | 7,138,800 |

| Authority | % changes in the 75+ population (measured in relation to the 2020 population) | | |
|---------------------------|---|--------------|--------------|
| | 2025 | 2030 | 2035 |
| Kingston | 17.9% | 29.7% | 44.2% |
| Barnet | 16.5% | 29.6% | 47.2% |
| Bexley | 9.9% | 14.3% | 25.0% |
| Bromley | 12.8% | 17.7% | 26.2% |
| Croydon | 14.1% | 27.3% | 45.8% |
| Ealing | 15.2% | 31.4% | 49.0% |
| Hammersmith & Fulham | 21.2% | 38.2% | 58.9% |
| Harrow | 12.9% | 25.4% | 41.2% |
| Havering | 9.9% | 13.9% | 22.9% |
| Hillingdon | 13.4% | 23.5% | 39.2% |
| Hounslow | 16.0% | 31.7% | 49.8% |
| Merton | 12.2% | 21.5% | 35.0% |
| Redbridge | 12.1% | 24.4% | 40.8% |
| Richmond upon Thames | 20.5% | 34.0% | 49.5% |
| Sutton | 13.6% | 21.8% | 33.3% |
| Wandsworth | 15.9% | 27.9% | 44.2% |
| Comparator Average | 14.2% | 24.9% | 39.5% |
| England | 22.1% | 34.6% | 49.3% |

Table 12. Percentage change in the 75+ population of Kingston, projected to 2035, in relation to its CIPFA comparators.

Source: ONS 2018 Population Projections

Table 13. The prevalence rates (i.e. the number of units per 1,000 people aged 75+) of HfOP and HwC in Kingston and its CIPFA comparators, and across England, split by tenure.

| Area | Prev HfOP (rent) | Prev HfOP (sale) | Prev HwC (rent) | Prev HwC (sale) | Prev HfOP TOTAL | Prev HwC TOTAL |
|---------------------------|------------------|------------------|-----------------|-----------------|-----------------|----------------|
| Kingston | 104 | 28 | 0 | 0 | 131 | 0 |
| Barnet | 70 | 33 | 7 | 0 | 103 | 7 |
| Bexley | 66 | 49 | 4 | 2 | 115 | 6 |
| Bromley | 80 | 46 | 7 | 1 | 126 | 8 |
| Croydon | 85 | 36 | 14 | 0 | 120 | 14 |
| Ealing | 93 | 14 | 4 | 0 | 107 | 4 |
| Hammersmith and Fulham | 183 | 0 | 12 | 0 | 183 | 12 |
| Harrow | 53 | 38 | 2 | 2 | 91 | 5 |
| Havering | 42 | 32 | 8 | 0 | 73 | 8 |
| Hillingdon | 67 | 20 | 12 | 3 | 87 | 15 |
| Hounslow | 74 | 20 | 8 | 0 | 94 | 8 |
| Merton | 62 | 24 | 9 | 4 | 86 | 13 |
| Redbridge | 62 | 55 | 11 | 0 | 116 | 11 |
| Richmond upon Thames | 71 | 20 | 3 | 0 | 91 | 3 |
| Sutton | 94 | 43 | 7 | 4 | 137 | 11 |
| Wandsworth | 126 | 13 | 11 | 7 | 138 | 17 |
| Comparator average | 83 | 29 | 7 | 1 | 112 | 9 |
| England | 90 | 32 | 10 | 3 | 122 | 13 |

Source: Elderly Accommodation Counsel (2019) & Office for National Statistics (2020)

N.B. Prev = Prevalence

5.08. The comparisons show that:

- For housing for older people (rent), Kingston is the third highest in prevalence in relation to its comparator authorities and the all-England prevalence.
- For housing for older people (private for sale), Kingston has a slightly lower prevalence than the comparator authority average and is below the English average.
- For housing with care (for rent and for sale), Kingston has a prevalence of 0 due to not having units in these categories. It is closer to the comparator authority average prevalence of 1 for HwC for sale than HwC for rent, where the comparator authority average is 7.

5.09. To make assumptions more bespoke to Kingston, we have used local authority documents along with factors that influence future need for older people's housing and accommodation including:

- Kingston Council Market Position Statement.
- Socio-economic indicators in relation to tenure amongst the older population.

5.10. At the most recent census, home ownership among over 65 households in Kingston was 79.8%²³. The average house price in the borough is £491,174 (all property types averaged), compared to £254,423 for England.²⁴ In the 2019 Indices of Multiple Deprivation, Kingston ranked 297th (where 1 is the most deprived local authority and 339 is the least deprived), meaning it has relatively low levels of deprivation relative to over

²³ Office for National Statistics (2013). Tenure by occupation by age - Household Reference Persons. Nomis Table DC4604EW.

²⁴ UK House Price Index (2019). <http://landregistry.data.gov.uk/app/ukhpi>

approximately 85% of English unitary authorities²⁵. Kingston’s Income Deprivation Affecting Older People Index (IDAOP) score is 11.7%, approximately half of the London borough average but below the English authority average (13.3%).

5.11. Kingston Council has stated, in their market position statement:

“From the activity data recorded, the need for residential placements for frail older people is likely to reduce as more people are supported in their own homes or take up sheltered housing options ... We do though expect that discharge and rehabilitation initiatives with the NHS will increase the proportion of short-stay nursing placements needed as more people recover from a period of ill-health in a nursing home setting prior to returning home.”²⁶

5.12. The Housing LIN’s recent qualitative research with older people in England indicates that:

- **Housing for older people:** there is interest in moving (‘downsizing’) to existing and new housing for older people, for rent and for sale, if it is sufficiently attractive.
- **Housing with care:** there is interest in moving to existing and new housing with care, for rent and for sale, if it is sufficiently attractive.

5.13. We have used this contextual evidence as a basis for reasoned assumptions in relation to estimating need for older people’s housing and accommodation in Kingston. These assumptions are summarised below in table 14.

Table 14. Evidence base for assumptions for estimating future specialist housing and accommodation need in Kingston to 2035.

| Housing/accommodation type | Evidence and assumptions |
|---------------------------------|---|
| Housing for Older People (HfOP) | <p>Current provision for rent is above most of its comparator authorities and the English average.</p> <p>Current provision for private sale is slightly below its comparator authority average and below the English average.</p> <p>The older population will increase substantially by 2035 (table 12).</p> <p>Research with older people indicates that there is interest in moving to existing and new housing for older people, for rent and for sale, if it is sufficiently attractive.</p> <p>It is assumed that:</p> <ul style="list-style-type: none"> ● The prevalence of HfOP will remain constant over the projected period. ● Future tenure split is affected by the current dominance of HfOP for social rent vs HfOP for private sale. The home ownership rate for Kingston is slightly above the English average. Kingston average house prices are above English average house prices and lower than average deprivation compared to other London Boroughs indicates likely growth in need for HfOP for sale. ● The future tenure split is assumed to be, in light of the above evidence, 50% for rent and 50% for sale (subject to localised factors) |

²⁵ Local Government Association (2019). <https://lginform.local.gov.uk/reports/lgastandard>

²⁶ Royal Borough of Kingston Adult Social Care Market Position Statement (2016-2017)

| | |
|-------------------------|--|
| Housing with Care (HwC) | <p>There is no provision of HwC for sale nor for rent in Kingston. The comparator average for prevalence is 1 (per 1,000 people over 75) and 7 (per thousand people over 75) for sale and rent respectively. Kingston's council policy is to encourage older people to opt for housing with care earlier on to delay/avoid the need to move into residential care.</p> <p>Research with older people indicates that there is interest in moving to existing and new housing with care for older people, for rent and for sale, if it is sufficiently attractive.</p> <p>It is assumed that:</p> <ul style="list-style-type: none"> • The need for HwC provision is likely to increase to 2035, reflecting older people's preference for housing-based options over residential care and the growth in the older population (table 12). • There will be demand for both rent and sale tenures, assumed to be a 50:50 rent / sale split (subject to localised factors) |
|-------------------------|--|

- 5.14. Based on these assumptions, we have produced quantitative estimates of future demand for specialist housing and accommodation for older people that uses:
- Data of the existing supply of older people's designated housing and accommodation in Kingston.
 - ONS population figures updated in March 2018. SHOP@ focuses on estimates using the ONS population of older people up to 2035. The SHOP@ model typically uses the 75+ population as the average age benchmark for most likely use of specialist designated housing and accommodation for older people. The projected populations aged 75+ for Kingston, CIPFA comparator authorities and England as a whole are shown in Table 12.
- 5.15. Current and estimated prevalence rates (i.e. for housing for older people for social rent; private retirement housing; extra care housing) used as 'benchmarks' within SHOP@ are based on a review of publicly available local authority policy in Kingston, how current provision in Kingston compares with comparator authorities and England average provision, and evidence from recent qualitative research with older people.
- 5.16. The assumptions based on this evidence, as set out in table 14, suggest prevalence rates for Kingston rising will remain the same housing for older people and will increase for housing with care. Estimated demand to 2035 is modelled based on these assumptions, suggesting that the prevalence rate for housing for older people will remain the same at 131 units per 1000 population 75+ and the prevalence rate for housing with care will increase to 15 units per 1000 population 75.

Estimated demand to 2035

- 5.17. The evidence from the assessment of need for specialist housing and accommodation for older people indicates in summary the following requirements in Kingston to 2035.²⁷

Table 16. Estimated need and prevalence rates for older people's housing and accommodation to 2035.

| Housing/accommodation type | 2020 current provision (units) | 2020 prevalence | 2035 estimated need | 2035 prevalence | Net need (units) |
|----------------------------|--------------------------------|-----------------|---------------------|-----------------|------------------|
| Housing for Older People | 1,519 | 131 | 2,189 | 131 | 670 |

²⁷ NB. Figures may not sum due to rounding.

| | | | | | |
|-------------------|---|---|-----|----|-----|
| Housing with Care | 0 | 0 | 250 | 15 | 250 |
|-------------------|---|---|-----|----|-----|

This is shown in more detail in relation to anticipated tenure breakdown in table 17.

Table 17. Estimated net need for older people's housing and accommodation to 2035, by tenure.

| | 2025 | 2030 | 2035 |
|----------------------------------|------|------|------|
| Housing for Older People (units) | 271 | 450 | 670 |
| <i>rent</i> | 135 | 225 | 335 |
| <i>sale</i> | 135 | 225 | 335 |
| Housing with Care (units) | 68 | 150 | 250 |
| <i>rent</i> | 34 | 75 | 125 |
| <i>sale</i> | 34 | 75 | 125 |

NB. Net need not cumulative

5.18. In summary this indicates that the estimated net requirements for Kingston to 2035 are:

- Housing for older people (social sector sheltered and age-designated housing and private sector retirement housing. This will include 'care ready' housing²⁸, for rent and for sale): c.670 units of which c.335 for rent and c.335 for sale.
- Housing with care (extra care housing schemes, for social rent, and housing with care or housing with care/'assisted living' in the private sector, for private sale, with 24/7 care available on-site): c.250 units of which c.125 for rent and c.125 for sale.

²⁸ Care ready housing typically means that a home is capable of adaptation over time to meet changing needs including space for aids and adaptations. Through good design, homes can be built to be better suited to possible future requirements such as the need to have an overnight carer, storage for mobility scooters and space to retain independence.

6. People at risk of homelessness

Method:

- 6.01. The estimation of need for supported accommodation for people who are homeless or are at risk of homelessness, is based on:
- i. The availability and usage of current supported accommodation for this cohort.
 - ii. The number of single people who are homeless/at risk of homelessness
 - iii. Local intelligence from Council Officers and partners.
 - iv. The Housing LIN's experience of modelling need for supported accommodation for people who are homeless or at risk of homelessness, based on data from working with other local authorities.
 - v. An estimate of likely need for supported accommodation based on the above factors.

Use of supported accommodation and population evidence

- 6.02. Kingston Council has, in response to the Government's Everyone In programme, accommodated c.115 – c.120 rough sleepers, beyond the typical cohort of known rough sleepers (pre Covid-19, c.30-35 rough sleepers) in Kingston. A large portion of this rough sleeper cohort have drug and alcohol and/or mental health issues. A smaller portion of the 115 have no recourse to public funds. The council is seeking to procure properties in Kingston via private landlords, with the eventual aim for a range of Houses in Multiple Occupation and self-contained units. At present, a number of rough sleepers are staying in hostels out of the Kingston borough, and a number staying in supported accommodation.
- 6.03. Cairn House supported accommodation has 16 self-contained units, and a maximum length of stay of 2 years. Support offered includes 24/7 waking cover, a keywork system with monthly meetings, action planning for those living there and local access to educational, sporting and arts activities.
- 6.04. Night shelters operating in Kingston include the Joel Community Night Shelter, which is for homeless people who would otherwise be rough sleeping or sofa surfing. KCAH provides a Winter Night Shelter with 30 spaces open from November until the end of winter. SPEAR provides 3 Houses of Multiple Occupancy, with spaces for 13 male rough sleepers on a short-term basis. YMCA in Surbiton, as of June 2020, provides support for 90 residents in hostel accommodation, and will continue to support 23 residents in move-on houses in Surbiton.
- 6.05. The council's Private Rented Sector (PRS) Access Programme provides help for those that are homeless, or at risk of homelessness, via use of PRS accommodation. This involves the council procurement of PRS properties and providing incentives to landlords to ensure tenancy sustainment.
- 6.06. From conversation with Kingston Council Officers, information on temporary accommodation for domestic abuse victims has been obtained. Kingston has 3 Refuge accommodations, run by the Refuge charity. It is important to note that Kingston residents are not typically offered a place in a Kingston-based refuge, for personal safety reasons, instead they will be offered a Refuge place outside the area. Across the 3 refuge centres there are 15 units in total – with the first centre consisting of 5 units, the second of 4 self-contained flats, and third of 6 units. The 6-unit refuge is a specialist South Asian refuge.

6.07. In 2018/19, Refuge accommodation in Kingston received a total of 43 referrals, and supported 24 women and 24 children. For 2019/20 the corresponding figures were 49 referrals, with 30 women and 27 children supported.

Vulnerable young people, including care leavers:

6.08. Alongside single homeless adults in Kingston, there is a cohort of vulnerable young people and care leavers living in the area.

6.09. Data has been collected from the following sources:

- Department for Education: Children looked after in England, including adoption: 2018 to 2019
- Achieving for Children Officers

Table 18. Care leavers aged 19, 20 and 21, by suitability of accommodation

| Area | All care leavers aged 19, 20 and 21 | Care leavers in suitable accommodation | Percentage of those in suitable accommodation | Care leavers in unsuitable accommodation | Percentage of those in unsuitable accommodation |
|----------------------|-------------------------------------|--|---|--|---|
| Kingston | 72 | 58 | 80.6% | 16 | 19.4% |
| Merton | 126 | 111 | 88.1% | 8 | 11.9% |
| Richmond upon Thames | 87 | 81 | 93.1% | 6 | 6.9% |
| Redbridge | 152 | 120 | 78.9% | 10 | 21.1% |
| London total | 6,460 | 5,390 | 83.4% | 400 | 16.6% |
| England total | 29,480 | 25,050 | 85.0% | 1,880 | 15.0% |

Source: DfE: Children looked after in England including adoption: 2018 to 2019

Table 19. Care leavers aged 17 and 18, by suitability of accommodation

| Area | All care leavers aged 17 and 18 | Care leavers in suitable accommodation | Percentage of those in suitable accommodation | Care leavers in unsuitable accommodation | Percentage of those in unsuitable accommodation |
|----------------------|---------------------------------|--|---|--|---|
| Kingston | 31 | 25 | 80.6% | 6 | 19.4% |
| Merton | 33 | 29 | 88.1% | 4 | 11.9% |
| Richmond upon Thames | 29 | 27 | 93.1% | 2 | 6.9% |
| Redbridge | 51 | 40 | 78.9% | 11 | 21.1% |

| | | | | | |
|---------------|--------|-------|-------|-------|-------|
| London total | 2,460 | 2,052 | 83.4% | 408 | 16.6% |
| England total | 11,200 | 9,520 | 85.0% | 1,680 | 15.0% |

Source: DfE: Children looked after in England including adoption: 2018 to 2019

Table 20. Ongoing placements for care leavers in supported accommodation in Kingston

| Area | Type of placement | Support received | Number of placements |
|----------|-----------------------------------|------------------|----------------------|
| Kingston | Semi-independent (self-contained) | 1:1 support | 1 |
| | Semi-independent (self-contained) | 2:1 support | 2 |
| | Semi-independent (block) | General support | 1 |
| | Semi-independent (shared) | General support | 59 |
| | Semi-independent (standalone) | General support | 29 |
| | Semi-independent | Outreach support | 3 |
| | Total | | |

Source: Achieving for Children

N.B. The category 'General support' contains placements with CHT support and others that were initially unassigned a specified support category.

Estimating the demand for supported accommodation for people at risk of homelessness

- 6.10. The following level of need for supported accommodation for single homeless people is estimated to be required, by 2025.
- 6.11. Hostel and supported accommodation. The short-term need for accommodation, based on the number of rough sleepers accommodated under the Everyone In programme in response to Covid-19 is currently estimated to be c.70 units. Cairn House currently has 16 units (anticipated to be recommissioned to provide 18 units).The average number of single homeless people, specifically rough sleepers, pre-Covid-19 is estimated to be typically c.35 people, the estimated net need for supported housing is that **c.20** units. This supported accommodation is likely to need to cater for people with drug/alcohol misuse related needs.
- 6.12. The need for an initial Housing First programme is estimated to be **c.10** units (*tbc with John Evans*).
- 6.13. The number of care leavers aged 19–21 living in unsuitable accommodation is 16, and for 17–18–year olds it is 6. This indicates that **c.22** additional units of supported accommodation are needed, on top of the 95 units currently provided.
- 6.14. In Kingston there are 15 refuge units dedicated to providing accommodation to people experiencing domestic abuse, the average number of referrals has been 46 per annum. Assuming that there is full occupancy over the year and limited throughput, this suggests that the need for additional Refuge/sanctuary accommodation is **c.30** units.

7. Children with a disability and their families

Context:

- 7.01. This section aims to estimate the housing needs for children with a disability and their families, where children with disabilities are categorised as Children in Need in national data. The estimation in this section provides a figure for the number of households with a child living with a disability and the number of these households that are estimated to have unmet housing needs.
- 7.02. For contextual purposes, a child in need has been legally defined²⁹ as a child that has one of the following characteristics:
- i. Unlikely to achieve or maintain, or have the opportunity of achieving or maintaining a reasonable standard of health or development without the provision of services by a local authority.
 - ii. That has their health or development being likely to significantly impaired, or further impaired without the provision for of services by a local authority.
 - iii. That has a disability.

Evidence base

- 7.03. Data has been collected from the following sources:
- Department for Education – Characteristics of children in need: 2018 to 2019
 - Kingston Council

²⁹ Children and Young People's Needs Assessment (2017/18)

Table 21. Children in Need in Kingston, and three outer London comparator authorities, by type of disability³⁰

| Area | Number of children in need | Number of Children in Need with a recorded disability | Percentage of Children in Need with a recorded disability | Children with a mobility disability (as a % of Children in Need with a disability) | Children with Autism/Asperger Syndrome (as a % of the total Children in Need with a disability) | Children with a Learning disability (as a % of the total Children in Need with a disability) |
|----------------------|----------------------------|---|---|--|---|--|
| Kingston | 907 | 62 | 6.8% | 19.4% | 48.4% | 24.2% |
| Merton | 1,360 | 167 | 12.3% | 15.6% | 42.5% | 39.5% |
| Richmond upon Thames | 794 | 76 | 9.6% | 14.5% | 32.9% | 48.7% |
| Redbridge | 2,082 | 507 | 24.4% | 14.5% | 32.9% | 39.6% |
| London total | 70,920 | 9,100 | 12.8% | 15.5% | 41.2% | 40.2% |
| England total | 399,510 | 49,630 | 12.4% | 17.4% | 34.5% | 43.2% |

Source: Characteristics of children in need – 2018 to 2019 (DfE)

7.04. Within Kingston, there is lower proportion of Children in Need with a recorded disability (6.8%) than in London (12.8%) and England (12.4%).

Table 22. Disabled Facilities Grant applications and approvals in Kingston

| Year | No. of DFG applications in relation to children | No. of approved DFG applications in relation to children | % of applications for children that needed adaptations for their homes (post-approval) |
|---------|---|--|--|
| 2019/20 | 8 | 8 | 100% |
| 2018/19 | 10 | 10 | 100% |

7.05. Table 22 above displays the number of Disabled Facilities Grant³¹ applications and approvals related to children with a disability. Of the approved applications, all of them for both the periods 2019/20 and 2018/19 were regarding home adaptations for children with disabilities.

7.06. To understand the net need for adapted housing, the following method has been applied:

1. Calculate the average number of successful DFG applications across the two-year period.
2. Apply the proportion of children with a mobility disability to the total children with a disability to the average, to produce an estimate of the number of households with a child needing an adapted property.
3. Calculate the difference between the children with need for an adapted property and the average number of successful DFGs – to produce an estimate an annual average for the number of households with a disabled child with unmet housing needs.

7.07. The average for the number of successful DFG applications in relation to children was 9 over the period 2018–2020. The proportion of children in 2018/19 that had a mobility

³⁰ Department for Education – Characteristics of children in need: 2018 to 2019

³¹ <https://www-foundations-uk-com/dfg-adaptations/dfg-regulations/disabled-facilities-grant-dfg/>

need was 19.4%, which represented approximately **13** children with a need for adapted housing. This suggests that at least **4** households per year have unmet needs for an adapted home.

8. Qualitative Evidence

- 8.1. The purpose of the qualitative research was to gain insights into the views and aspirations of people living with a disability, social care need and/or support need in relation to the current range of provision and the nature of future specialist and other housing provision required.
- 8.2. To better understand these views, the approach was three-fold.
- 8.3. We drew on other qualitative evidence about housing preferences amongst people with support/social care needs that the Housing LIN has developed for other local authorities and housing providers.
- 8.4. We drew on qualitative evidence that RBK already has in relation to the housing and support preferences of these groups. Such as:
 - Re-commissioning of Home Care Services Engagement work.
 - Engagement work from the Cambridge Road Estate.
 - Future Home Care Provision in Kingston: Community Engagement Report Feb 2018 (Healthwatch report).
- 8.5. We undertook local qualitative evidence by speaking with a sample of stakeholders, including, community groups that represent people with a disability, social care and/or support need, relevant RBK staff and people living with, or caring for, someone with a disability, social care and/or support need.
- 8.6. For the purpose of this research we identified 8 key client groups to speak with although we understand that these 'categories' overlap and in reality housing provision can be multi-purpose and many people with care/support needs do not necessarily need 'specialist' forms of housing.
- 8.7. Community groups that took part included, Kingston Mencap, Involve Peer Advocates, Kingston Mind, Stay Well, Kingston Centre for Independent Living, Achieving for Children, and Kingston Carers Network.
- 8.8. RBK staff that took part included, John Evans, Independent Housing Consultant, Kavitha Ramakrishnan, Domestic and Sexual Violence Reduction Policy Officer.
- 8.9. The tables on the following pages gives a summary of the key messages gleaned from the above approach . The first column provides information from 1 and 2 listed above, the second column are key messages from the local qualitative research. This is followed by key messages overall and the implications for RBK.

| Key Messages from wider qualitative research | Key message from Kingston qualitative research |
|---|--|
| <ul style="list-style-type: none"> ● The majority of people with a learning disability are seeking accommodation that enables them to live independently, either by themselves or with friends. ● People are seeking a housing arrangement that meets both their accommodation and support needs. ● Many parents whose children still live with them would like them to have an opportunity to leave home and live more independently. ● People want more choice about who they live with and where they live. ● Most people are seeking supported living arrangements as an alternative to residential care. ● The most common barriers to independent living are a lack of information, advice and advocacy. ● Another barrier to independent living is the lack of available housing for people with a learning disability which means that people are living in residential care homes, or people remain living with families. | <ul style="list-style-type: none"> ● “Supported Living” means different things to different people. ● There is a need for a wider range of more affordable social housing that reflects diversity of housing preferences and supports people to live independently. ● People with a learning disability need to be at the centre of decision making around where and who they live with. ● The people we spoke to that were living in supported accommodation in the PRS found it challenging as there is limited security of tenure and the relationships with landlords can vary. ● A number of parents we spoke with that have a daughter/son with a learning disability still living at home are looking for accommodation that would enable their child to live independently from them. This is a particular concern as parents get older. ● Where people are contemplating a move, people are seeking support with this as change can be difficult for someone with a learning disability. ● People are seeking a council that effectively builds and maintains relationships with communities and better understands their needs. People are interested in ‘coproducing’ services and future housing options. |

1. Table 23. Adults with a learning disability and/or autism, including people with complex needs, and young people with a disability

2. Table 24. Adults with mental health needs.

| Key Messages from wider qualitative research | Key message from Kingston qualitative research |
|---|--|
| <ul style="list-style-type: none"> ● Good-quality, affordable and safe housing is a vital component to good mental health. ● The experience of mental ill health is different for each individual, and mental health problems can occur at any point in our lives. As a consequence of these diverse needs, housing solutions for people with mental health problems must be equally diverse. ● The majority of people living with serious mental health conditions do not need supported housing but mental health needs can be met by a range of supported accommodation. Individuals need the right support in the right setting. ● Supported housing options range from visiting support to 24/7 accommodation. ● Housing support is an essential element of looking after someone's mental wellbeing. | <ul style="list-style-type: none"> ● People living with a low-level mental health need are unlikely to require specialist housing, however there is a widespread need for appropriate housing. ● Appropriate housing refers to good-quality, affordable and safe accommodation that enables people to have a greater level of independence. ● It is necessary that people with a low-level mental health need have good access to support services. People are seeking a range of support services, that enable them to stay in their homes, access employment, financial planning and emotional support. |

3. Table 25. Adults with a physical disability

| Key Messages from wider qualitative research | Key message from Kingston qualitative research |
|---|--|
| <ul style="list-style-type: none"> ● Disabled people report a severe shortage of accessible homes across all tenures. ● People with a physical disability would like to live independently in their own homes. ● People with a physical disability are seeking homes that have been adapted to, or preferably designed to, suit their needs. ● There is a need to improve the installation of home adaptations. People need more accessible information and processes that are easier to understand. There is a particular issue around uptake of adaptations in the PRS. This is due to a reluctance to ask landlords for adaptations, a lack of knowledge on both sides and confusion around funding. ● Access to advice, support and advocacy plays an important role in enabling disabled people to live independently in their own homes. | <ul style="list-style-type: none"> ● There needs to be a wider range of accessible housing options. ● The majority of people with a disability are seeking purpose-designed accommodation that suits their accessibility needs. ● <i>'Adults with a physical disability shouldn't have to adapt to their home, their home should be adapted to their needs.'</i> ● People are seeking better understanding from the council about their accessibility needs and how it affects where they live and their wellbeing. ● Where purpose-built is not available, people need better access to information about how to adapt their homes. ● It is important for people with a disability to live within communities that care and look out for one another. |

4. Table 26. Older people

| Key Messages from wider qualitative research | Key message from Kingston qualitative research |
|--|--|
| <ul style="list-style-type: none"> ● Older people are seeking housing options that enable them to live independently for as long as possible. ● Older people are a diverse cohort with different views and aspirations about housing and support services they may need in later life. Therefore, there is interest in a mix of housing types and tenures that widen choice. ● Some older people are interested in and willing to rightsize/downsize provided that an alternative home meets their requirements. ● Other older people would like to be supported to remain living independently in their current homes by: <ul style="list-style-type: none"> ○ Adapting their current home to make it more accessible. ○ Improving connections to the local community. ● Sheltered/extra care housing has the potential to be attractive to more people if it is marketed as ‘lifestyle choice’ rather than a ‘care offer’. ● There is considerable scope to provide more personalised information and advice aimed at older people about different housing options. | <ul style="list-style-type: none"> ● A large number of older people are living in older housing stock that will not be suitable for changing needs in later life. ● People are seeking a range of housing options that will facilitate independence, in some cases this will be a move to alternative accommodation, for others this is about adapting their current home or bringing in care/support. ● More information, support and advice is needed in order to contemplate/carry out a move, adapt a property and or find suitable care options. ● People are seeking a range of tenure options in relation to future housing. ● Existing sheltered housing in the borough is not seen as aspirational/attractive or suitable for people with physical disabilities. This prevents people considering a move to housing for older people. ● Older people would like to live in places that encourage inter-generational communities. ● A majority of people are seeking ‘a home for life’. |

5. Table 27. People at risk of homelessness or rough sleeping

| Key Messages from wider qualitative research | Key message from Kingston qualitative research |
|--|---|
| <ul style="list-style-type: none"> ● Hostels/immediate access supported accommodation can play in meeting people’s immediate need for accommodation as part of a wider range of housing and support options and pathways. ● ‘Move on’ from homeless supported housing has been an increasing challenge due, in the main, to the shortage of available affordable accommodation. ● Move on is about moving to accommodation that better suits an individual’s needs and circumstances and can support recovery. ● Improved resettlement support can help prevent repeat homelessness. ● Housing First has shown positive outcomes in tenancy sustainment. It is shown to work best for a particular cohort of clients with more complex needs. | <ul style="list-style-type: none"> ● People at risk of homelessness or who are rough sleeping are seeking more permanent places to live that they can call home and that enable them to stay within the Borough of Kingston. ● Hostels are important for meeting immediate need however the future priority should be on ensuring people have access to more permanent forms of housing. ● There is an urgent need for more general needs social housing to enable people to move on from temporary accommodation. The greatest need is for family-sized accommodation as there are 800 families in temporary accommodation. ● There is appetite to develop a Housing First Model, comprised of 6/7 self-contained units dispersed throughout Kingston with wrap around support. In the short term this could be in partnership with an RP or the PRS, longer term Kingston could look to develop its small sites and increase its number of assets. ● A range of additional supported accommodation (approx. 20-30 units) is needed that reflects varying levels of need. ● The majority of these units need to support people with a low-level support need with floating support. ● There is a need for 7 of these units to be very supported accommodation for people with high mental health needs that would have 24/7 staff support. This provision is currently being explored through the Joel Project with KCAH. |

| | |
|--|--|
| | <ul style="list-style-type: none">● As a result of COVID-19, future supported accommodation should be designed as self-contained units in order to reduce the risk of infection. Some shared facilities such as a communal lounge could be introduced.● The aim of supported accommodation is to provide people with good accommodation then gets them ready to move on and be tenancy ready. |
|--|--|

6. Table 28. Children with a disability and their families.

| Key Messages from wider qualitative research | Key message from Kingston qualitative research |
|--|--|
| <ul style="list-style-type: none"> ● Families with a disabled child experience far greater problems with their housing than families with non-disabled children. ● Inside the home, the lack of space: space for play, for privacy or 'time out', for equipment use and storage, and for carrying out therapies are the main issues. Other common problems related to house condition and access. ● Location of the home can be a problem, either because it was an unsafe place for the child or because of difficulties with neighbours. ● Only a minority of families had received assistance from statutory agencies in order to address their housing needs. ● Improvements in families' housing situation can lead to increased independence, more confidence and greater self-reliance among disabled children. ● Home-owners are more likely to consider adapting their current homes than renters who would rather move to more suitable accommodation. | <ul style="list-style-type: none"> ● Families are seeking properties that enable their child/children to live as independently as possible. ● There is a need for more choice in relation to accessible housing. At present a number of families are having to move out of borough due to a lack of suitable housing. ● A number of families are living in overcrowded properties, there is a need for more 'family-sized' homes (3/4/5 bedroom) that suit the needs of families with a child/children with a disability. ● Families are seeking more support from the council in relation to finding suitable housing types or adapting their current homes. ● The process of adapting the home needs to be quicker and more accessible. ● People are seeking homes that are located close to support services and hospitals. |

7. Table 29. Vulnerable young people, including care leavers.

| Key Messages from wider qualitative research | Key message from Kingston qualitative research |
|--|--|
| <ul style="list-style-type: none"> ● Providing decent affordable homes to vulnerable young people can act as a springboard to achieving a high quality of life. ● Emergency accommodation such as short-term accommodation and non-specialised emergency centres should be used only as a last resort. Investing in social housing is vital for housing accessibility. ● VYP are seeking a range of available housing options, which ideally should be interconnected and complementary. ● The lack of affordable housing delays move on from supported accommodation. Young people are increasingly relying on the PRS due to the shortage of social housing. High rents and changes to housing benefit will make it necessary for growing numbers of young people to share this accommodation. People are seeking support to access the PRS. ● Where it is safe to do so, young people require support to live with their family, including returning home from care. ● Vulnerable young people are seeking housing options that enable them to access training and employment. Employment cannot succeed without prior access to stable, secure and suitable housing. ● Young people, their families and those who work with them are seeking better information and guidance to understand housing options and plan when and how young people will leave the family home or leave care. | <ul style="list-style-type: none"> ● People are seeking housing options that enable them to transition into adulthood and live more independently. ● Where someone lives needs to support them to be engaged in education/employment/training. |

8. Table 30. People experiencing domestic abuse.

| Key Messages from wider qualitative research | Key message from Kingston qualitative research |
|--|---|
| <ul style="list-style-type: none"> ● Safe and stable housing is a core need for survivors and yet it can be the most difficult need to meet. ● Refuge services are lifesaving for survivors and, for this reason, are at the centre of the WHA as they underpin crisis responses to domestic abuse. ● Refuge services and other 'sanctuary' housing models can be part of a range of housing options. ● It is sometimes felt that council housing services over rely on refuge services to rehouse victim/survivors who ask them for support. ● There is a need to increase supply of genuinely affordable accommodation and move on options from refuge services, supported accommodation and any other type of temporary accommodation. | <ul style="list-style-type: none"> ● Refuge services are vital for victims/survivors of domestic violence. It is essential that this accommodation feels like home and enables people to feel safe. ● There is a need for a more diverse range of refuge accommodation. The biggest gaps are accommodation for women with more than 2 children or sons aged 14+. ● Refuge's cater to a varying level of needs, victims/survivors need to be able to access the right support services. ● Survivors with more complex needs are seeking a wider range of Supported Accommodation that enables them to transition to independent living. This could involve a mixture of shared accommodation and self-contained units. Central to this is the provision of 24/7 specialist support staff. ● Developing a Housing First model for those with complex needs should be a priority. This would involve a support worker providing intensive wrap around support to a small number of people that live in either independent or supported accommodation. ● Victims/survivors with no recourse to public funds are excluded from accessing refuge's and support services. ● People are seeking more permanent forms of housing once they leave refuge services. Temporary accommodation is over-used, and people often stay for lengthy periods of time. There is a need for more social housing to accommodate this. ● The quality of temporary accommodation needs to be improved; people are often living in unclean, poor quality accommodation. ● Housing officers need to be compassionate and trained in communicating with victims/survivors of domestic abuse. |

Key messages: Overall

- 8.10. People with a disability and/or social care/support need are looking for housing and accommodation that enables them to live independently for as long as possible; a wide range of housing options is needed to reflect this.
- 8.11. People are seeking clearer information and more support in relation to their existing and future housing and support options.
- 8.12. There is an appetite amongst people living with a disability and/or social care/support need and their support networks to work with the council to co-produce housing and support solutions. People want to be involved in decision making.

Implications for Royal Borough of Kingston

- 8.13. The housing needs of people living with a disability and/or social care/support needs are diverse. The implication of this for developing housing is that there needs to be a mix of housing types that better meet the needs of people with a disability and/or social care/support need.
- 8.14. People want to be involved in decision making. The implication of this is that there is scope to build relationships with communities to better understand their experiences and co-produce housing options with citizens.
- 8.15. A significant number of respondents would prefer to rent from a social landlord (a housing association or council); there is a need for more social rented housing.
- 8.16. Across all cohorts a minority felt well-informed about their housing and support options. Therefore, there is considerable scope for providing comprehensive and accessible information about housing and support options so that people can make informed choices about where they live and the support they receive.

9. Supported housing sector trends and good practice

- 9.10. This is intended to provide part of the evidence base to inform Kingston's future approach to developing housing and supported accommodation, i.e. examples of contemporary housing practice that Kingston can draw on.
- 9.11. We have provided a concise but comprehensive summary of current housing and supported accommodation sector trends and good practice. This is intended to provide a guide for reviewing Kingston's current housing and supported housing service offers and to inform its future options and strategy.

Context and trends: Housing and accommodation suited to the needs of an ageing population

- 9.12. As highlighted in the MHCLG Select Committee report into housing for older people³², *'Housing our Ageing Population: Panel for Innovation'* (or HAPPI³³) has been an important 'unofficial' policy driver affecting the future of older people's housing and associated services. If housing for older people, including sheltered housing and extra care housing, is to reflect the needs and expectations of current and future older people in England the development and adoption of a more aspirational standard for all forms of housing for older people is necessary, reflecting the HAPPI principles. HAPPI focused on assessing how to improve the quality of life for older people; change perceptions around mainstream and specialist housing for this demographic; and raise aspirations for higher quality homes and spread awareness of the range of options available
- 9.13. Whilst not a design standard – such as those relating to Lifetime Homes³⁴ or wheelchair accessibility – as recognised by the Select Committee, HAPPI is increasingly recognised as an attractive design addition by those developing more lifestyle, aspirational orientated sheltered/retirement housing and extra care housing for rent and sale.
- 9.14. There is also a large volume of research and guidance produced about the value and role of older people's housing^{35,36}, including sheltered and extra care housing.
- 9.15. The government's 2018 Memorandum of Understanding³⁷ between health and housing policy makers, trade and professional bodies seeks to maximise opportunities to embed the role of housing in joined up action on improving health and social care services. Alongside this greater partnership approach beginning to be adopted in health and social care economies, there is a growing interest amongst both housing association and private sector operators in developing housing and associated customer offers that are intended to attract 'downsizing', both from general needs social housing and by owner occupiers.
- 9.16. Examples of new build mixed-tenure housing include AnchorHanover's offer aimed at a 'downsizer' market (below left). These are homes for those aged over 55 set in locations in London and the south east. They are designed to appeal to both homeowners and renters who want to 'downsize'.
- 9.17. They have minimal services and relatively low service charges. Viridian Housing's (now Optivo) Halton Court (below right) is a 170-unit purpose-built housing scheme for

³² <https://publications.parliament.uk/pa/cm201719/cmselect/cmcomloc/370/370.pdf>

³³ <https://www.housinglin.org.uk/Topics/browse/Design-building/HAPPI/>

³⁴ <http://www.lifetimehomes.org.uk/>

³⁵ The social value of sheltered housing. Demos. 2017. Commissioned by Anchor, Hanover and Housing & Care 21

³⁶ The Value of Sheltered Housing. NHF. 2017.

³⁷ <https://www.gov.uk/government/publications/improving-health-and-care-through-the-home-mou>

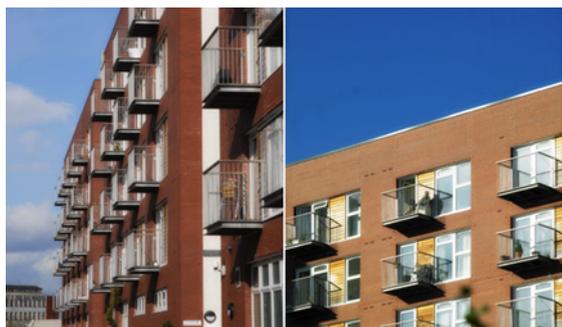
people 55 years and over. Located in Kidbrooke Village on the site of the former Ferrier Estate in the Royal Borough of Greenwich. Whilst Halton Court has extensive communal facilities, it is not an extra care housing scheme, but a quality, 'care ready'³⁸ housing led development targeting older people wishing to downsize regardless of care needs.



9.18. Examples of new build developments involving reusing sites of former sheltered housing schemes are St Monica Trust's Monica Wills House scheme in Bristol (below left) and Ocean Housing's Prince Charles house in St Austell, Cornwall (below right). These schemes vary in scale, Monica Wills House has 121 mixed tenure apartments and is an urban retirement village, whilst Price Charles House has 31 apartments for rent. Both schemes have the following common features:

- Designed to 'care ready' HAPPI principles
- Aspirational housing in mainly urban or suburban settings;
- Extensive use of assistive and/or digital technology to support lifestyle and enable planned or self-managed support/care needs
- Promote health and wellbeing through design and provision of communal space and/or activity to create a more 'resilient' community

³⁸ 'Care ready' housing typically means that a home is capable of adaptation over time to meet changing needs including space for aids and adaptations. Through good design homes can be built to be better suited to possible future requirements such as the need to have an over-night carer, storage for mobility scooters and space to retain independence.



- 9.19. Intergenerational housing communities – whereby older people live alongside families, school age children, young adults, within their communities – has been shown to provide many benefits to those living there. The positives of living in an intergenerational community are stronger peer companionship, mitigating loneliness and isolation – and enrichment of the lives of those living there through learning across different generations and strengthening of communities.
- 9.20. An example of an intergenerational housing community is Marmalade Lane (below bottom), in Cambridge, a cohousing development comprising of 42 homes, a mix of 2- to 5-bedroom terraced houses and 1- and 2- bedroom apartments. It is home to a multigenerational mix of families with young children, retired couples, single person households of different ages and young professional couples. As a custom-build development, each household were able to select one of five ‘shell’ house or flat types and could then configure their home using a selection of standard floorplans, kitchen and bathroom fittings, and one of four external brick specifications. Homes are thus tailored to individual requirements without the risks or complexity of self-build. The scheme is built to Passivhaus standards.
- 9.21. Derwenthorpe (below) in York is a development of 483 properties of varying sizes and tenures (26% social rent). It is intended to be a sustainable, low carbon community with homes appropriate for all ages – allowing for older people to live alongside families and younger people. The distribution of different sizes of house, all of which are built to Lifetime Homes standard, helps to bring together residents at different life stages. Pedestrian and cycling routes, and leisure spaces, accessible to all enables residents to feel a sense of ownership over the whole development.
- 9.22. There are ponds, a children’s play park and green space around the site which enhance quality of life and community interaction. Hot water and heating are provided by communal biomass boilers in the village’s centrally located Super Sustainability Centre (SSC). There is also a Derwenthorpe Community Fund which pays for activities for all ages that involve working with schools, local agencies and community organisations.



- 9.23. Cobham Park in the Olympic Park, London is modelled on London's traditional family neighbourhoods. A variety of housing typologies are on offer, including traditional terraced homes, mews, multigenerational homes, three and four storey townhouses (with on-plot parking and a sundeck) and apartment buildings. The multi-generational home is a connected flexible home for extended families who want to live together, while retaining a degree of mutual independence. They are three-storey, three-bed homes each with a self-contained studio annexe. The flexibility of the layout allows for various arrangements – the annexe could be used for a grandparent or a returning child; it could be used as a home office; or it could be rented out.



- 9.24. Limelight, located at Old Trafford, is a development that integrates 81 extra-care apartments with a GP surgery and community facilities, including a café, event space, library and nursery. Offices for council services and social enterprises are also provided. Limelight is one of the first integrated hubs to be delivered in the UK, and is a model for future age friendly developments. A total of 81 one and two-bed apartments comprising 21 two-bed extra care apartments offered on an Older People's Shared Ownership basis and 60 one and two-bed properties available to rent.



- 9.25. There will be some incidence of dementia in any housing development for older people and the design should consider good practice in terms of the physical design and operational management for dementia. The Alzheimer's Society has worked with the sector a produced useful dementia-friendly housing charter³⁹. While Guinness Care & Support has adopted an organisation wide approach to improving support for people living with dementia whether they live in older people's housing or general needs housing⁴⁰. There are several different approaches to accommodating older people with mild to moderate levels of dementia in extra care housing. These range from small, dedicated units or wings specifically for this group, to clusters of flats with shared communal facilities, to a pepper-potted approach where individual care needs are simply catered for within their flats.
- 9.26. Belong (a charity) at Atherton has 26 self-contained apartments for independent living and six supported 'households' with modern en-suite bedrooms and open plan lounge and kitchen areas. Belong households represent an alternative to conventional care homes. They operate with a higher-than-average staffing ratio and a maximum of 12 residents per household, offering a family atmosphere. It is described as a 'care village' with independent living apartments which do not form part of the registered care home service, but are central to the care village and its design. There is a range of one or two bedroom apartments, available for market rent or purchase, for individuals or couples.

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https://www.alzheimers.org.uk/info/20116/making_organisations_more_dementia-friendly/1021/dementia-friendly_home_services

40

<http://www.guinnesspartnership.com/care-services/community/becoming-dementia-friendly-organisation/>



- 9.27. Bruyn's Court in Thurrock features 25 flats, all of which are flexibly designed to adapt to meet the changing needs of residents as they grow older. The scheme does not provide care and support services, but the aim of the scheme is to radically improve the standard of living for older people in Thurrock, taking account of their social and physical needs, and encouraging social interaction and mutual support. The development has also been designed to help revitalise the town centre, modernising the local built environment while adding further commercial viability to the town centre shops. It has been designed to HAPPI standard, lifetime homes and Sustainable Code Level 4.



- 9.28. Birmingham City Council has developed its own unique specification for a housing model suited to a range of people including older people, people with physical disabilities and families with a disabled child. Feedback from older people identified a

desire for bungalow accommodation, of which there was a very limited supply, but this needed to incorporate design features that provided maximum flexibility as well as making it a build model that could make the most efficient use of available development site opportunities. The housing solution in response to this is a two-bedroom 'dormer style bungalows', each with a ground floor bedroom and shower room, a lounge and kitchen and also a second bedroom and bathroom upstairs. The design is in summary:

- Based on HAPPI principles.
- Dormer style bungalow – Category 1 on ground floor with 2nd bedroom and bathroom upstairs. Equivalent to former Code for Sustainable Homes Level 4.
- Bespoke design with good space standards including the ability to dry clothes in vented spaces or outside.
- Lifetime Homes standard enabling adaptation as needs change.
- Smaller gardens or balconies provide manageable outside space



Context and trends: housing and supported accommodation for people with longer term support needs

- 9.29. National policy in relation to long term supported housing has focussed almost exclusively on people with learning disabilities/autism with the most complex needs (following the Winterbourne View abuse case). This is led by the Department of Health and is referred to as the Transforming Care Programme (TCP). The TCP requires that local authorities and NHS CCGs identify and develop credible housing plans to support people currently in hospital settings (NHS and independent sector) to be rehoused in the community (in mainstream or supported housing) with appropriate care packages.
- 9.30. This strategy is based on the principles of recent guidance "*Building the right support*⁴¹" (2015) and "*Build the right home*⁴²" (2015). *Building the Right Support* and the National Service Model state that people should have choice about where they live and who

⁴¹ <https://www.england.nhs.uk/wp-content/uploads/2015/10/ld-nat-imp-plan-oct15.pdf>

⁴² <https://www.england.nhs.uk/learningdisabilities/wp-content/uploads/sites/34/2015/11/building-right-home-guidance-housing.pdf>

they live with. Inappropriate accommodation and a lack of robust support arrangements could potentially lead to placement breakdown and may result in an admission or readmission to hospital.

- 9.31. Increasing housing options for people with a learning disability, autism, or both is intended to enable access to the right accommodation with personalised care and support provided to offer sustainable solutions.
- 9.32. There has also been development of new supported housing by 'mainstream' housing associations particularly in relation to developing small-scale 'clusters' of flats with modest communal space of between 8-16 1-bed flats in the same building, typically a 'micro' version of extra care housing, with local authorities funding the 24/7 care costs.
- 9.33. In relation to housing for people with mental health needs there has been more limited development of supported housing as funding from local authority Supporting People programmes has declined or been withdrawn and fewer people are eligible for social care funding. There has been some growth in supported housing that offers a 'step-down' model to enable people to be discharged in a timely and successful way from acute mental health NHS hospital beds into a good quality housing offer with support available. These supported housing models are more likely to be funded by NHS commissioners (to cover care/support costs and rent) than by local authorities.
- 9.34. With respect to long-term supported housing with care for disabled people under 65, Lawrence Road in South Norwood, London, is an example of a scheme which uses integrated and mobile assistive technology to support the residents to live independently. The service has been developed and designed in line with the principles and values that underpin Registering the Right Support⁴³ and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.
- 9.35. An example of new build clusters for people with learning disabilities is a scheme in Worcester developed by Sanctuary HA⁴⁴. It is a block of 14 flats with an additional flat used as communal space (with loss of rental income offset by a capital contribution from the local authority). This supported housing scheme has 24/7 care on site and is aimed at disabled people with a range of care needs.



⁴³ https://www.cqc.org.uk/sites/default/files/20170612_registering_the_right_support_final.pdf

⁴⁴ <https://www.sanctuary-supported-living.co.uk/hazel-court>

- 9.36. In relation to the TCP cohort an example of a bespoke supported housing scheme has been developed by MCCH⁴⁵. This is an example of a supported housing scheme, including 5 self-contained units with staff facilities, designed for people with complex needs related to 'challenging behaviours', e.g. including features such as curved (and removable) internal walls, soft impact finishes to floors and walls.



- 9.37. Oxfordshire County Council has commissioned two purpose-built supported living schemes for people with complex needs. Each scheme has 6 self-contained units for people with autism related needs. The service is designed for people with an autism diagnosis or a similar condition or similar presentations who require specialist support and accommodation. They also have complex needs that mean they find it difficult to share support or accommodation.



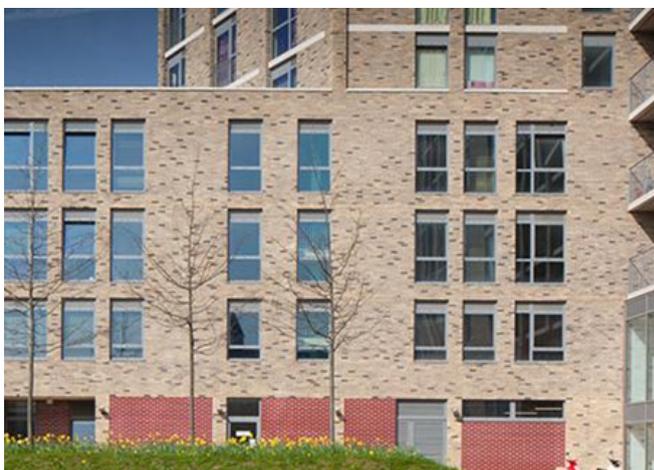
- 9.38. Other examples of contemporary housing for people with learning disabilities and sensory impairments include a housing scheme by Advance Housing developed in

⁴⁵ <http://www.mcch.org.uk/our-services/housing-services/index.aspx>

Cornwall. This includes a small new build block of flats with design features specifically suited to people with learning disabilities living with dementia and refurbishment of an existing building to provide housing for people with lower level support needs.



- 9.39. In relation to people with mental health needs, an example of a supported housing 'step down' resource is One Group's scheme at Tile House in London. Tile House⁴⁶ provides 15 high quality, self-contained supported housing units. Each customer has their own flat that is designed to the same specification as One Housing's private sale housing. The care and support arrangements are delivered through a partnership with Camden and Islington NHS Foundation Trust. The scheme is designed to deliver an integrated approach to supported housing and recovery for people with complex mental health needs.



⁴⁶

<https://www.onehousing.co.uk/sites/default/files/onehousing-tile-house-integrationthatworks-report.pdf>

Context and trends: Housing and supported accommodation for people with shorter term support needs

- 9.40. The previous Government policy proposal (pre 2018/19) to cap all supported housing to LHA rates, significantly reduced the development of shorter term supported housing. Nevertheless, some refurbishments and expansions of existing schemes have been taking place. The YMCA Western Gateway in West Bromwich completed its refurbishment in 2017 and includes a café, coffee bar, five enterprise starter units, a fitness and well-being centre, learning centre, youth zone and chapel as well as 96 studio apartments and a range of office accommodation for social businesses.



- 9.41. Almshouses for homeless people have been effective in providing housing for people that have become or are at risk of becoming homeless. Sir Thomas White Court in Worcester, comprises of 10 apartments, 4 of which were converted from a former office building and a further 6 which were created in a new block on the redundant car park. It includes a mix of apartment layouts, with both of the two-storey blocks separated by a private courtyard which provides an external drying area and a social space for the tenants. A particular feature on the new building are the oriel windows, some of which include obscured glazing, and these were used to restrict direct views and minimise overlooking, something which presented a particular challenge in the densely developed urban location in which the site is set.



- 9.42. Hopkinson House in Westminster is a Look Ahead 24-hour supported accommodation designated for people that have become homeless. The support offered can range from help with cooking meals, to managing rent, mediation, and support for substance abuse. Linked with the accommodation is a nurse from a local GP practice, on site, 3 days per week, and a psychologist holding complex trauma 1:1 sessions once per week. A recent addition to the services offered has been horticultural therapy, where the residents can help maintain a greenhouse and take care of the garden in the courtyard. The maximum stay for this scheme is 18 months.



- 9.43. For 16-17-year olds that have been made homeless, Teresa House (below) in Enfield – run by Christian Action Housing – is a supported accommodation scheme that accommodates 13 young people for up to 6 months. Each resident has their own bedroom in 2-3-bedroom flats. The accommodation has a communal lounge, leisure facilities and IT/learning suites. Whilst at the project the young person’s housing and support needs are continually assessed to enable them to move onto appropriate accommodation. The client’s views are central in developing their own support plan to enable them to sustain and achieve their full potential.



- 9.44. Heather Court Foyer, in Romford, run by Swan Care and Support provides supported accommodation for single young people aged 16 to 25 who are in housing need and require support to acquire the skills to live independently. The scheme consists of 15 one-bedroom flats, of which one flat is adapted to meet disability needs. All the flats are fully furnished with access to a communal lounge. The scheme is staffed 7 days/nights per week 24 hours a day. Each resident has a dedicated support worker. Heather Court offers a range of support, including: advocacy on advice on welfare/housing benefits, budgeting and maximising income, independent living skills, health and wellbeing issues, motivation and confidence building, move on and resettlement services.



10. Summary

Assessment of need for housing and supported accommodation

A comprehensive evidence base of the need for housing and supported accommodation has been developed. A summary of future need is shown in table 31 below.

The assessment of need for housing and supported accommodation is based on:

- Identification and analysis of the current supply of housing and supported accommodation.
- Intelligence from the Council plans and documents.
- Intelligence from Council Officers and their local partners.
- Qualitative evidence from local people with care/support needs and community organisations that support them.

This evidence has been used to inform reasoned assumptions to produce quantitative assessments of future need for housing and supported accommodation. Table 31 shows:

- The estimated need for each client 'cohort'.
- How this estimated need is expected to change (where there is sufficient evidence) in the medium term (by 2025/26) and in the longer term (from 2030/31)

The assessment of future need indicates that additional housing and supported accommodation is required in Kingston to meet identified need. Whilst the assessment is shown in relation to 'client cohorts', it is recognised that people's needs are often complex and that innovative approaches to housing and support that go beyond these 'cohort' definitions will be required and indeed desirable:

- An assumption that mainstream housing suitably designed and/or adapted will be appropriate for many people with care and/or support needs.
- Opportunities for inter-generational living will form part of the required housing solutions.
- Housing solutions may be multi-functional, e.g. providing a mix of mainstream housing, supported housing and potentially other facilities.
- All housing and supported accommodation for people with care and/or support needs should assist and facilitate inclusion in community life.

Table 31. Summary of estimated need for housing and supported accommodation (units)

| | Housing and supported accommodation needs (Need estimates are not cumulative) | 2025/26 (additional units) | 2030/31 (additional units) |
|----------|--|-------------------------------|-------------------------------|
| A | Older people | | |
| 1 | Housing for older people <ul style="list-style-type: none"> for social rent/affordable rent (units) for sale/shared equity (units) Total | 135 135 270 | 225 225 450 |
| 2 | Housing with care: <ul style="list-style-type: none"> for social rent/affordable rent (units) for sale/shared equity (units) Total | 34 34 68 | 75 75 150 |
| B | People with mental health related needs⁴⁷ | 25 | 70 |
| C | People with learning disabilities/autism (including young people in 'transition' and <i>Transforming Care cohort</i>) | 60 | 125 |
| D | Adults with physical disabilities <ul style="list-style-type: none"> Fully adapted Accessible | 20 60 | 40 120 |
| E | Families with a child with a disability | 20 | 40 |
| F | Single people at risk of homelessness⁴⁸ | 20 | _ ⁴⁹ |
| G | Vulnerable young people⁵⁰ | 22 | _ ⁵¹ |
| H | People experiencing domestic abuse | 30 | _ ⁵² |

11. Recommendations

⁴⁷ Refers to people with severe/enduring mental health problems known to/supported by NHS secondary mental health services

⁴⁸ Includes people with a range of support needs which may result in 'chaotic' lifestyles including alcohol/drug misuse related needs and mental health needs (where an individual may not necessarily be known to/supported by NHS secondary mental health services).

⁴⁹ To be confirmed in 2025/26

⁵⁰ Teenage parents, care leavers, 16-17 year olds presenting as homeless and young unaccompanied asylum seekers

⁵¹ To be confirmed in 2025/26

⁵² To be confirmed in 2025/26

Housing and supported accommodation delivery prospectus

An outline housing and supported accommodation delivery programme based on the needs assessment is included at Annexe 3.

It is recommended that the Council uses the needs assessment and outline delivery plan to develop a market facing 'prospectus' that includes:

- The Council's commissioning intentions for its *Having the right place to live* (housing and supported accommodation) programme based on the evidence of need for housing and supported accommodation; this should be consistent with the relevant components of the Council's housing strategy, homelessness strategy, social care market position statement and children's service sufficiency plans.
- How the Council will engage with the supported accommodation market.
- The Kingston 'offer' to investors in this market and stimulus to the market including approach to land, sites, use of S106 agreements etc.

Market engagement

It is recommended that the Council:

- Once agreed, launches its commissioning prospectus to set out its supported housing and accommodation requirements to the market with the potential to engage with new entrants as well as established housing partners.
- Uses its housing and supported accommodation prospectus to manage closely the supported accommodation that is developed in order to avoid more speculative, provider-led supported housing development.
- Identifies sites in its ownership that can be used to meet identified housing and supported accommodation requirements and select appropriate housing partners to deliver these requirements on these sites.

Funding considerations

It is recommended that the Council:

- Utilises the needs assessment evidence base to facilitate engagement with the Greater London Authority (GLA) in order to determine the extent to which the Council can attract GLA grant funding.
- Works with Registered Providers that can maximise access to GLA grant funding.
- Explores opportunities to benefit from OPE programmes.
- Directly develops/funds supported accommodation in circumstances where:
 - Other housing providers are unwilling to do so.
 - The Council wishes to secure a particular type of supply of supported housing (or other housing) to meet a key customer need and/or it judges that other providers are not sufficiently well suited or appropriate to meet these needs.
 - The Council wishes to have greater certainty in meeting key financial savings targets.

Ensuring quality and managing the supported accommodation market

It is recommended that the Council:

- Establishes a set of quality standards and requirements that are expected of all providers of supported housing operating in the borough.
- Develops an approach to determining value for money offered by supported housing providers, including in relation to rents and service charges.
- Establishes a supported accommodation 'provider framework' that any supported housing provider would need to be registered on in order to deliver supported housing in the borough. This would promote transparency amongst providers and help to manage and avoid 'non-commissioned' supported housing.

Planning policy

It is recommended that the Council uses planning policy to promote the development of appropriate housing and supported accommodation that reflects identified needs:

- Setting targets for the delivery of housing that is adapted and accessible for wheelchair users.
- Directly encouraging the provision of housing suited to the needs of an ageing population and for people with disability, such as requiring a proportion of new housing to be built to Lifetime-Homes standards.
- Consider developing a Supplementary Planning Document covering housing for older people and supported accommodation for other cohorts.

Resource implications

The delivery of the Council's housing and supported accommodation requirements and alignment with the Council's wider priorities, will require a significant commissioning and transformation programme over the next 5 years.

Such a programme requires coordinated management of supported housing commissioning, local market management, discussion and negotiation with housing and accommodation providers, funding arrangements, and oversight of quality and value for money.

It is **recommended** that the Council

- Establishes a single role that has responsibility for and oversight of all commissioning of housing and supported accommodation for people with care and support needs.
- Establishes a single role that has responsibility for coordination of the operational functioning of all supported housing in the borough, for example in relation to allocations, referrals, voids.

Annexe 1: Brief

- 11.10. Kingston council is looking for the following housing needs assessment to be completed across all ages to support maximising independence and reducing inequalities for adults, children and their families who are living with disability and/or social care needs within Kingston. The brief will include consideration of the needs of rough sleepers, those with substance misuse and other specialist housing areas that are currently under the responsibility of ASC commissioning. ASC Care Homes are excluded from this brief.
- Collation and refresh of data and high-level analysis of current known housing provision for adults, children and their families with a disability and/or social care needs within Kingston
 - Using a variety of data sources, including focus groups, and other qualitative methodologies produce a 10 year forward view of housing demand related to adults, children and their families living with disability and/or social care. This should include a variety of tenures and take into account known best practice and exemplars from other areas that support people to live as independently as possible, and be part of inclusive communities
 - In conjunction with commissioning plans, and housing development plans including small sites develop a suggested high-level development route map for Kingston to consider.
 - Provide a set of recommendations about the skills, capacity and leadership to implement an integrated 'Having the right place to live' transformation programme at pace which will form part of the corporate transformation programme
 -

Annexe 2. Number of under 18s living in a residential setting outside of Kingston

Table 32. Number of under-18s living in a residential setting outside of Kingston

| Type of Placement | Number of Placements |
|--------------------------------------|----------------------|
| Residential without Education | 1 |
| Residential with Education | 4 |
| Residential with Education & Therapy | 1 |
| Residential Solo /2:1 | 1 |
| Residential Solo /1:1 | 0 |
| Total | 7 |

Source: Achieving for Children