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PUBLIC

To: Members of Cabinet Member meeting - Adult Care

Wednesday, 11 March 2020

Dear Councillor,

Please attend a meeting of the **Cabinet Member meeting - Adult Care** to be held at **10.00 am** on **Thursday, 19 March 2020** in Committee Room 4, County Hall, Matlock, DE4 3AG, the agenda for which is set out below.

Yours faithfully,

A handwritten signature in black ink, appearing to read 'S Hobbs', written over a light blue horizontal line.

Simon Hobbs
Director of Legal and Democratic Services

AGENDA

PART I - NON-EXEMPT ITEMS

1. Apologies for Absence
To receive apologies for absence (if any)
2. Declarations of Interest
To receive declarations of interest (if any)
3. Minutes (Pages 1 - 2)
To confirm the non-exempt minutes of the meeting of the Cabinet Member

– Adult Care held on 23 January 2020.

4. Working Age Accommodation and Support Strategy for Derbyshire 2020 - 2035 (Pages 3 - 42)
5. Exclusion of the Public

To move “That under Regulation 21 (1)(b) of the Local Authorities (Executive Arrangements) (Access to Information) (England) Regulations 2000, the public be excluded from the meeting for the following items of business on the grounds that they involve the likely disclosure of exempt information as defined in Paragraph(s)... of Part 1 of Schedule 12A to the Local Government Act 1972”

PART II - EXEMPT ITEMS

6. Declarations of Interest

To receive declarations of interest (if any)

7. Minutes (Pages 43 - 44)

To confirm the exempt minutes of the meeting of the Cabinet Member – Adult Care held on 23 January 2020.

PUBLIC

MINUTES of a meeting of the **CABINET MEMBER – ADULT CARE** held on 23 January 2020 at County Hall, Matlock.

PRESENT

Councillor J Wharmby (in the Chair)

Also in attendance was Councillor C Dale.

Apologies for absence were received on behalf of Councillor J Twigg.

01/20 **MINUTES RESOLVED** that the minutes of the meeting held on 21 November 2019 be confirmed as a correct record and signed by the Cabinet Member.

02/20 **BUDGET MONITORING 2019-20** The Cabinet Member was provided with an update on the Revenue Budget position of the Adult Care portfolio for 2019-20 up to the end of October (Period 7).

The net controllable budget for the Adult Care portfolio was £249.954m.

The Revenue Budget Monitoring Statement prepared at period 7 indicated that there was a projected year-end underspend of £1.667m. The significant areas which made up this projection were shown in the table below:

	Controllable Budget £m	Projected Actuals £m	Forecast Over/(Under) Spend £m
Purchased Services	185.330	188.291	2.961
Assistive Technology & Equipment	6.628	5.926	(0.702)
Social Care Activity	23.655	23.214	(0.441)
Information & Early Intervention	14.343	13.962	(0.381)
Commissioning & Service Delivery	17.853	16.894	(0.959)
Unallocated Budgets	2.145	0.000	(2.145)
Total	249.954	248.287	(1.667)

The Purchased Services overspend of £2.961m was mostly due to the increased costs for complex care packages and the reduction in Continuing Health Care funding.

The Budget Savings total target was 5.732m. The forecast to be achieved by the financial year end was 6.083m and the actual (shortfall)/additional savings target was 0.351m.

The portfolio received additional budget allocations in 2019-20 from the Adult Social Care Precept of £6.290m and from the Improved Better Care Fund of £6.149m. Both items were used to fund the £8.567m increase in independent sector fees and the £3.385m pay award, with the balance of £0.487m being used to partly address the equitable allocation of budgets across the eight districts.

Earmarked reserves totalling £30.033m were currently held to support future expenditure. Healthy Homes made up 0.033m of the total and the Older People's Housing Strategy completed the remaining 30.000m.

The profile of the debt raised, relating to income receivable by services within the Adult Social Care and Health department totalled 10.567m. In addition, at the end of October 2019 there had been a further £3.408m of debt relating to residential and co-funding charges that had not been invoiced.

In the 12 months up to the end of October 2019, the value of debt that had been written off totalled £0.764m.

RESOLVED that the Cabinet Member note the report.

03/20 **EXCLUSION OF THE PUBLIC** **RESOLVED** that the public be excluded from the meeting during the consideration of the remaining items on the agenda to avoid the disclosure of the kind of exempt information detailed in the following summary of proceedings:-

SUMMARY OF PROCEEDINGS CONDUCTED AFTER THE PUBLIC WERE EXCLUDED FROM THE MEETING

1. To confirm the exempt minutes of the meeting of the Cabinet Member for Adult Care held on 21 November 2019.
2. To consider the exempt report of the Executive Director of Adult Social care and health on the Group Manager Restructure.

Agenda item no: 4

DERBYSHIRE COUNTY COUNCIL

CABINET MEMBER

19 March 2020

**Report of the Executive Director for Adult Social Care and Health
WORKING AGE ACCOMMODATION AND SUPPORT STRATEGY FOR
DERBYSHIRE 2020 – 2035**

ADULT SOCIAL CARE AND HEALTH

1. Purpose of the Report

To seek Cabinet Member approval for the implementation of the Working-age Accommodation and Support Strategy for Derbyshire 2020 – 2035 and the associated initial delivery plan.

2. Information and Analysis

The Working-age Adults Housing, Accommodation and Support Strategy 2020-2035 will consider adults with care and support needs aged 18 to 64 years old. This strategy will complete Adult Social Care and Health's suite of housing, accommodation and support strategies, alongside the Specialist Housing, Accommodation and Support Strategy 2019-2024 and the Older People's Housing, Accommodation and Support Strategy 2018-2035.

Together, these will ensure that the housing, accommodation and support needs of all adults are considered from a strategic perspective. Our strategic aim is to maximise the number of people living independently and to reduce the number of people placed in residential and institutional care.

This strategy brings together learning and experiences across the areas of mental health, learning disability and/or autism, physical disability and acquired brain injury. It identifies how the Council and partners will promote the development of suitable housing, accommodation and support so that people have alternatives to residential or specialist accommodation and more opportunities to live independently in the community.

The working age population is diverse and includes people with life-long conditions or disabilities and those who develop care or support needs as adults. There are estimated to be 466,900 people aged 18-64 years in Derbyshire, of which 11% have a physical disability and 8% a learning

disability and/or who are autistic. In Derbyshire, a higher proportion of people aged 18-64 years live in residential care compared with the national rate and with statistical neighbours. In 2018/19, this was 28.9 per 100,000 population, compared with 16.8 for CIPFA statistical neighbours and 13.9 nationally (ASCOF 2A: long term support needs of younger adults (aged 18-64) met by admission to residential and nursing care, per 100,000 population).

The strategy recognises that living in safe, suitable and stable accommodation with access to appropriate care and support is linked to higher independence, improved wellbeing and better mental health. It outlines a range of actions that will enable people to:

- Be supported to live in their own homes in the community with support from local services
- Be supported to live independently and with the right support to meet their specific needs and preferred outcomes
- Be offered a choice of housing that is right for them and enable them to maintain contact with family and friends
- Have a choice about who they live with and the location and community in which they live
- Be able to remain in their home where possible, even if their care and support needs change.

Enabling care to take place closer to home and promoting greater independence supports the strategic aims of the Council Plan and the Joined-Up Care Derbyshire joint vision for health and social care.

The strategy identifies a number of commitments to support people to live independently. It describes our intentions to work with partners to deliver:

- Co-production arrangements that enable people to work with us to plan, design and deliver the accommodation, care and support arrangements that they want and need.
- Active partnerships with district and borough councils, health services, independent providers, and community and voluntary organisations - working together to develop a housing and support offer that is right for every locality.
- A range of suitable and accessible accommodation with access to community resources including health provision, employment and educational opportunities, leisure facilities, transport and family resources.
- 'Wrap around' and floating support from a range of agencies that will enable people of working age with care and support needs to live meaningful lives within their community.
- Support linked to the person, with continuity of support if accommodation arrangements change.
- Accommodation that meets design guidelines which can fit many different needs whilst still providing high quality housing choice.

- Proactive and preventative use of appropriate assistive technology to increase levels of independence within all accommodation options.
- Appropriate step-up and step-down accommodation and support.
- Support for young people to achieve maximum independence as they make the transition to adulthood.
- Information and advice to ensure those with care and support needs and their families, as well as professionals across health and social care, understand what is available locally, including:
 - accommodation options
 - home adaptations, equipment and repairs, including assistive technology
 - community resources
 - care and support options.

The strategy sets out details of a number of design standards and specialist accommodation requirements that are tailored to the needs of the varying cohorts of people of working age with care and support needs. We will also seek to engage more widely through district and borough councils to encourage planning teams to ensure that general needs housing is also built to appropriate standards that support individuals with less complex needs to live independently within the community. This could, for example, include encouraging developers to ensure houses are adapted to support the needs of someone in a wheelchair via level access and appropriate height switches, or alternatively designing houses that enable someone with a learning disability and/ or who are autistic to live within the local community.

Implementation of the strategy

Appended to the main strategy document is a delivery plan which identifies actions to be taken to achieve the strategic aims and commitments identified above. This identifies where joint working will be undertaken with partner organisations. District and borough councils are key partners for the delivery of appropriate housing and accommodation; they have been involved in the development of this strategy, and in producing locality profiles and actions that form part of the strategy.

It is proposed that the delivery plan will be refreshed on an annual basis to ensure it remains relevant to the people who require our assistance. This will also enable progress of the delivery plan to be monitored and to also take advantage of any potential new opportunities, such as new funding streams. Throughout the strategy implementation, we will seek to maximise opportunities from external funding bodies to support a more commercially minded, enterprising and innovative approach to implementation of the recommendations.

The 'Summary of opportunities to work with us' on Page 28 of the strategy outlines the need for various types of accommodation for working-age adults and will form the basis on which we will seek to engage with the market to stimulate provision of the right type of accommodation and support. Some of this activity may involve re-shaping existing provision but also seeking to develop new high quality accommodation that meets modern design and quality standards. The delivery needs to be addressed through a mix of formal commissioned services and directly provided services, building local networks of support that link district and borough councils as well as health, independent providers and the voluntary sector.

If any future proposals require Cabinet or Cabinet Member approval, further reports will be presented for approval.

3. Financial Considerations

The strategy will be an enabler for the Better Lives Programme and as the strategy and the Programme are implemented, the Council will expect costs to reduce as it enables people to live more independently.

Whilst there are no direct financial implications identified in this strategy, further work will need to take place to produce business cases as required in relation to specific schemes that may be delivered by the Council and/or with Registered Social Landlords, and/or with collaboration with district and borough councils.

4. Legal Considerations

This new strategic approach aims to support people of working-age to be as independent as possible and to plan ahead for their accommodation needs.

The Care Act 2014 imposes a general duty on local authorities to promote an individual's well-being (s.1 Care Act 2014). 'Well-being' is a broad concept. The Care Act 2014 lists nine aspects of an individual's well-being, which comprise almost every aspect of an individual's life, including the individual's control over care and support, the way in which it is provided, and also the suitability of living accommodation. The Care and Support Statutory Guidance states that although 'independent living' is not mentioned specifically in the way that well-being is defined within the Care Act 2014, the concept is a core part of the well-being principle

The Care and Support Statutory Guidance is clear that well-being must include a focus on delaying and preventing care and support needs, and supporting people to live as independently as possible for as long as possible

Section 2 Care Act 2014 places a general duty on a local authority to provide a range of preventative services, which would prevent, delay or reduce individuals' needs for care and support, or the needs for support of carers. The Care and Support Statutory Guidance requires local authorities to identify and understand both the current and future demand for preventative support, and the supply in terms of services, facilities and other resources available.

The Care and Support Statutory Guidance is clear that developing a local approach to preventative support is wider than adult care alone, and should include the involvement of those responsible for housing services. Section 23 Care Act 2014 defines the boundary between social services responsibilities and responsibilities under the Housing Act 1996. Where a district or borough council is required to meet accommodation needs under housing legislation, then that authority must meet those needs. The distinction between the Council's care and support function and the district or borough councils' housing functions should be considered alongside the strategic vision. This does not prevent joint working and this is encouraged.

Most accommodation for people with mental health needs is provided in accordance with section 18 of the Care Act 2014 or section 117 of the Mental Health Act 1983. There is currently a Joint Section 117 policy in place across health and social care.

The Autism Act 2009 together with the autism strategy 'Fulfilling and rewarding lives' (March 2010) and 'Think Autism – Fulfilling and rewarding lives, the strategy for adults with autism in England: an update' (April 2014) states that the needs of adults who are autistic should be taken into account in local housing planning, design and allocation, in line with local priorities.

5. Other Considerations

This strategy meets the Council's responsibilities in relation to equality, diversity, community cohesion and human rights. In preparing this report the relevance of the following factors has been considered: equality of opportunity, health, environmental, social value, transport, property, human resources and crime and disorder considerations.

6. Background Papers

None

7. Key Decision

No

8. Is it required that the Call-in period be waived in respect of the decisions being proposed within this report?

No

9. Officer's Recommendation

Cabinet Member is asked to approve the implementation of the Working-age Adult Accommodation and Support Strategy for Derbyshire 2019 – 2035 and the associated initial delivery plan contained within it.

Helen Jones
Executive Director – Adult Social Care and Health
County Hall, MATLOCK



Working Age Adults Housing, Accommodation and Support Strategy 2020 – 2035

A Commissioning Strategy for Derbyshire

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About this strategy

We recognise that living in safe, suitable and stable accommodation is linked to overall wellbeing and improved mental health. Living with a disability or long-term condition should not be a barrier to living a full independent life in Derbyshire.

Our residents have a range of needs and priorities and we want to support them to live independently and ensure there is a range of accommodation to help people achieve this.

Page 1

Our vision is that by 2035 more people of working age in Derbyshire, with care and support needs, will have access to lifetime tenancies, supported housing and targeted community support to enable them to sustain their own home, and live independent and fulfilling lives.

We want to design and provide offers of support or services that enable this to happen in Derbyshire.

This commissioning strategy and delivery plan brings together learning and experiences across the areas of mental health, learning disability (including those with a profound and multiple learning disability), autism, physical disability and acquired brain injury. It outlines the increasing demand for suitable accommodation and support to meet the needs of working age adults with care and support needs, across the County.

We will work together with a range of strategic partners to drive forward work to ensure that Derbyshire has the right housing mix to effectively support people of working age, with care and support needs, to remain independent and in their own home, now and in the future.

This strategy outlines our intentions so that providers can come forward with proposals that enable us to support people of working age, with care and support needs, to live well.

Cllr Jean Wharmby, Cabinet Member for Adult Social Care



Policy context



The [Derbyshire County Council Plan 2019-2021](#) outlines a number of priorities to support residents including

- Value for money
- A prosperous Derbyshire
- Empowered and self-sufficient communities
- A focus on prevention and early intervention
- High performing council services

National Policy and Guidance

- Building the Right Support
- Building the Right Home
- Five Year Forward View for Mental Health
- Autism Act Statutory Guidance
- National accommodation standards, including Part M of the building regulations

The Derbyshire [Health and Wellbeing Strategy 2018-2023](#) contains several priorities which acknowledge the importance of good accommodation in relation to health and wellbeing. The strategy states:

Effective planning and healthy housing is key to preventing ill health and enabling people to live independently ... Poor condition housing is known to have a significant impact on health and wellbeing, particularly for people who spend a lot of time at home..”

Key Legislation

- The Care Act 2014
- The Autism Act 2009
- Homelessness Reduction Act 2017
- Children (Leaving Care) Act 2000
- Mental Health Act 2007
- The Equalities Act 2010
- Health and Social Care Act 2012



[Joined Up Care Derbyshire](#) outlines a model of integrated health and social care for Derbyshire. Our model of care defines a place based system. The Derbyshire system would aim to keep people:

- Safe & healthy – free from crisis and exacerbation.
 - At home – out of social and healthcare beds.
 - Independent – managing with minimum support
- ... founded on building strong, vibrant communities.*

Accommodation care and support for working age adults

Independent community living

- Own tenancy / owner occupier
- Living in family household
- Wrap-around support
- Primary Care
- Universal services

Supported housing

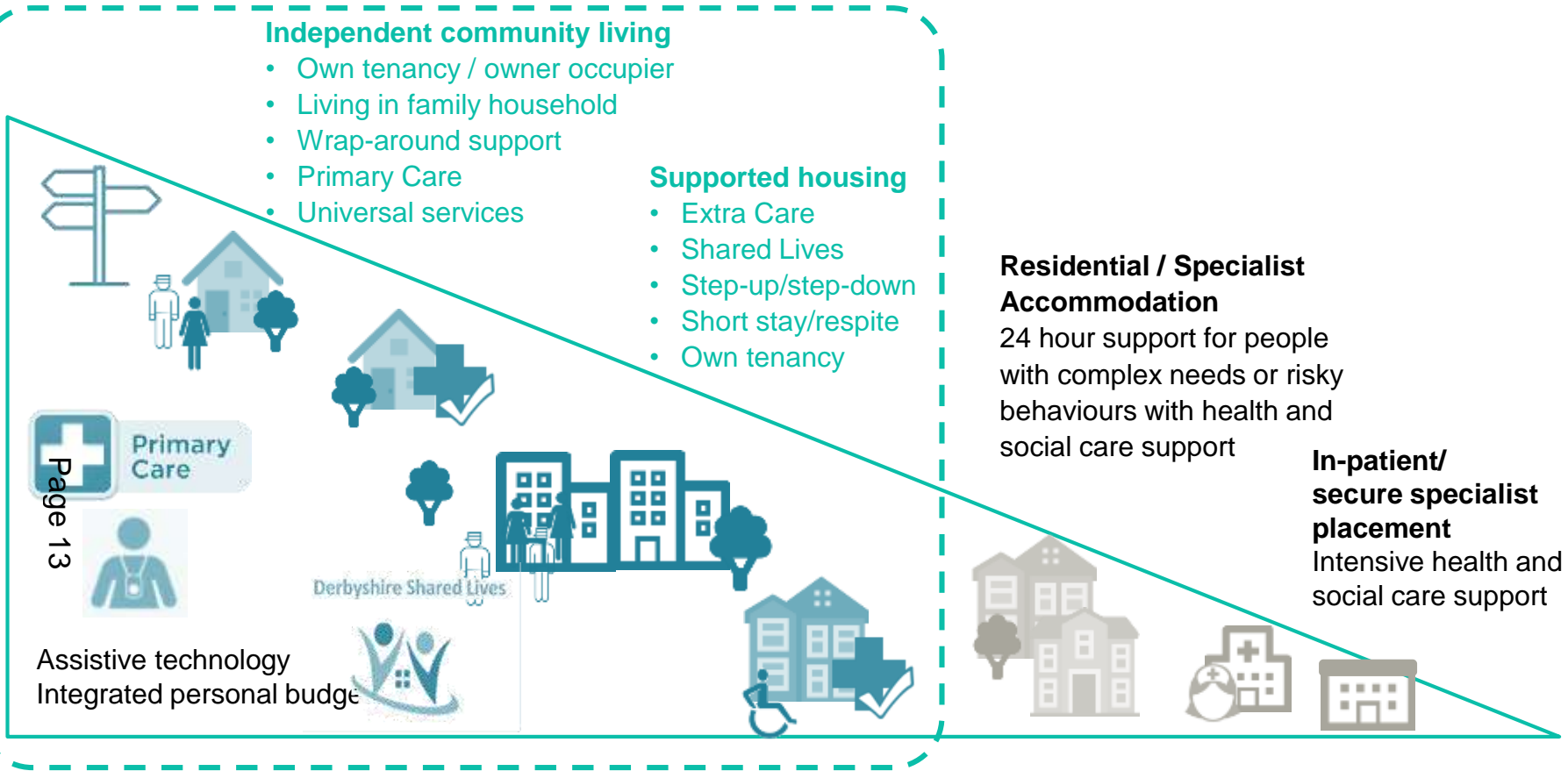
- Extra Care
- Shared Lives
- Step-up/step-down
- Short stay/respite
- Own tenancy

Residential / Specialist Accommodation

24 hour support for people with complex needs or risky behaviours with health and social care support

In-patient/ secure specialist placement

Intensive health and social care support



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Assistive technology
Integrated personal budget

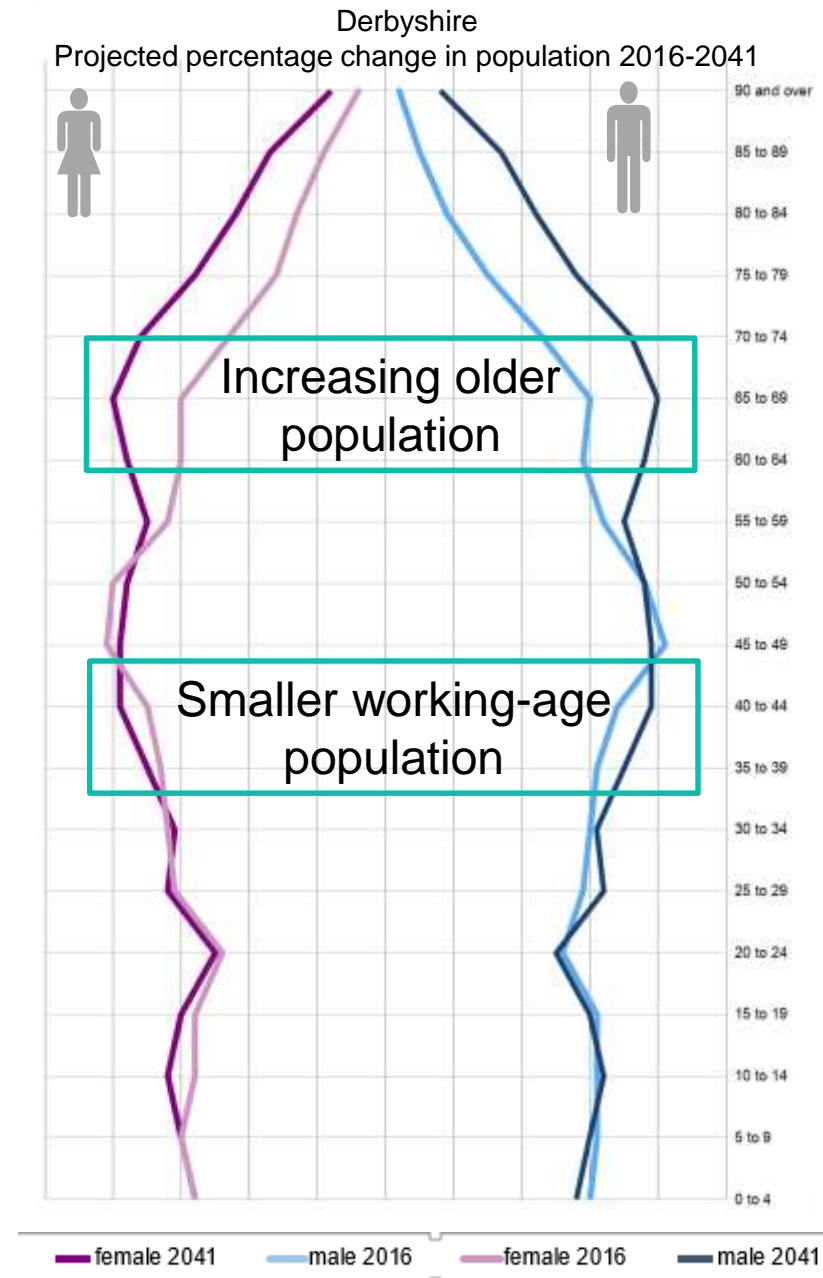
Derbyshire Shared Lives

Increasing independence

This strategy focuses on those aged 18-64 years who live in supported housing or independently in the community. It connects with the [Specialist Accommodation and Support Strategy](#) and the [Older People's Housing, Accommodation and Support Strategy](#). All the accommodation strategies promote independence – identifying how we will support people to move from residential care to more independent living, or how we will support people to stay in their own homes for longer. If working age adults have the right accommodation and support, they will be able to maintain more independent lives as they grow older.

The working age population

- For this Strategy, working age adults are considered to be aged 18-64 years, although we recognise that people may work into their late sixties and beyond.
- This is a large and diverse population, including young adults establishing themselves in life, people who may be in employment or undertaking voluntary activities, or who may be parents, as well as those who may be preparing for retirement. We recognise that people's circumstances, aspirations and needs will be different, and that accommodation and support provision should consider these.
- Some adults with care and support needs may have lifelong conditions or disabilities, and for these people lifetime planning is important, including managing the transition from children's to adult's services. Others may develop care and support needs during their adult lives, due to illness or injuries. People of older working age are more likely to develop health conditions that mean that they require care and support, or more accessible accommodation. Some people with complex conditions and disabilities may need specialist or residential care. However, many can live independently if they have the right accommodation with access to care and support.
- Derbyshire's population is expected to increase by 8% by 2039 and is older in profile than the national average, with fewer young adults. A large proportion of the working population is aged over 45 years. Within the next twenty years these people will be in the 65+ years age group and may have increasing care and support needs.
- Derbyshire is a large county, with a varied population. It includes urban and rural areas, with differing access to housing, transport or community resources. The age profile and projected population growth differs across the county, with some rural areas having a much higher proportion of older adults.
- Some adults may face homelessness, including those experiencing mental ill health, and we will work with partners to reduce homelessness and to support those at risk of losing their homes.



Accommodation, care and support in Derbyshire for working age adults



11% of the working age population have a physical disability.

Derbyshire has a population of 798,100 people
466,900 are aged 18-64 years.

In Derbyshire there are:
15 extra care housing schemes for working-age adults
117 Shared Lives arrangements for working age adults with disabilities.
5 respite/living skills units for people with learning disabilities and/or people who are autistic.


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It is estimated that by 2030 there will be **9,740** people in Derbyshire who have a learning disability or who are autistic, an increase of **8%** from 2017.



The Council fund services such as assistive technology, independent living services, short-term enablement services, community based initiatives and home care to support people of working age to live in their own homes.

By 2035, it's estimated **145,913** people in Derbyshire will have a diagnosed mental health condition.

In Derbyshire there are **200+** Supported Living placements, supporting over **500** people with a learning disability.



Affordable provision of accommodation and support in some parts of the county is an ongoing area of focus.



In Derbyshire, a higher proportion of people aged 18-64 years are living in residential care compared with the national rate and with statistical neighbours.



In Derbyshire, **51,143** people aged 18-64 years have some degree of hearing impairment, with **2998** living with full hearing loss. **303** people have a serious visual impairment.

Our Strategic vision

Together with our partners and various stakeholders, we will work to develop a coordinated approach to accommodation and support across the county for people of working age with care and support needs.

Our strategic vision acknowledges the emergence of place based approaches to health, wellbeing, care and support that will present new opportunities to enable people to live well and independently in their own home for longer.

Our strategic vision is that people will:

- Be supported to live in their own homes in the community with support from local services.
- Be supported to live independently and with the right support to meet their specific needs and preferred outcomes.
- Be offered a choice of housing that is right for them and enable them to maintain contact with family and friends.
- Have a choice about who they live with and the location and community in which they live.
- Be able to remain in their home where possible, even if their care and support needs change.

This strategy will inform our plans in terms of where we target our resources to support people in Derbyshire of working age, who have care and support needs.

The provision of good quality accommodation and support is fundamental to enabling people with care and support needs to live as independently as possible in the community.

This strategy is aimed at working age adults who may have care and support needs that may include people with physical or sensory disabilities, mental health conditions, learning disabilities and / or people who are autistic.

It also considers the wider population and how housing and communities can be developed to promote independent living for those with disabilities or health conditions.

One of our key ambitions is to significantly increase housing options for people to enable them to access the right home and support at the right time.



Our commitments to support people to live independently

We will work with partners to deliver:

- Co-production arrangements that enable people to work with us to plan, design and deliver the accommodation, care and support arrangements that they want and need.
- Active partnerships with district and borough councils, health services, independent providers, and community and voluntary organisations - working together to develop a housing and support offer that is right for every locality.
- A range of suitable and accessible accommodation with access to community resources including health provision, employment and educational opportunities, leisure facilities, transport and family resources.
- 'Wrap around' and floating support from a range of agencies that will enable people of working age with care and support needs to live meaningful lives within their community.
- Support linked to the person, with continuity of support if accommodation arrangements change.
- Accommodation that meets design guidelines which can fit many different needs whilst still providing high quality housing choice.
- Proactive and preventative use of appropriate assistive technology to increase levels of independence within all accommodation options.
- Appropriate step-up and step-down accommodation and support.
- Information and advice to ensure those with care and support needs and their families, as well as professionals across health and social care, understand what is available locally, including:
 - accommodation options
 - home adaptations, equipment and repairs, including assistive technology
 - community resources
 - care and support options.
- Support for young people to achieve maximum independence as they make the transition to adulthood.

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Our values underpinning this strategy are accommodation and support solutions that provide personalised care, locally based services and support arrangements that facilitate choice, maximise individual opportunities and enable people to report an improved quality of life.

We know that services and support offers are not currently as co-ordinated or as joined up as we would like. We will work to deliver solutions ranging from formal commissioned services to building local networks of support that link to health, independent providers and the voluntary sector, as this is key in delivering this strategy.

Enabling people to live independently

We will work to achieve these outcomes:

- More people of working age with care and support needs living independently.
- Fewer people of working age with care and support needs living in residential homes, hospitals or other non-independent settings.
- Fewer people of working age with care and support needs being admitted to hospital/residential care.
- Reduction in the average length of stay in acute / hospital / secure settings / residential care.

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We want people in Derbyshire who have care and support needs to say:

- I can get the right information and advice that helps me think about and plan my life, particularly in relation to housing choices and options.
- I know what my rights are and can get information and advice on options for my health, care and housing.
- I have care and support that enables me to live as I want to, seeing me as a unique person with skills, strengths and personal goals.
- I have the opportunity to be involved in designing the services that I use.
- I am supported to plan ahead for important changes in life that I can anticipate.
- I feel safe in my own home.
- I have an improved sense of wellbeing.

We will monitor our progress using these measures:

Adult Social Care Outcomes Framework (ASCOF):

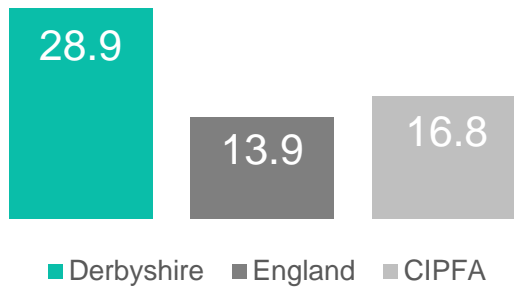
- Long-term support needs of younger adults (aged 18-64 years) met by admission to residential and nursing care, per 100,000 population (ASCOF 2A - Lower is Better)
- The proportion of adults in contact with secondary mental health services living independently, with or without support (%) (ASCOF- 1H - Higher is Better)
- The proportion of adults with a learning disability who live in their own home or with their family (%) (ASCOF 1G: Higher is better)

Accommodation, care and support in Derbyshire

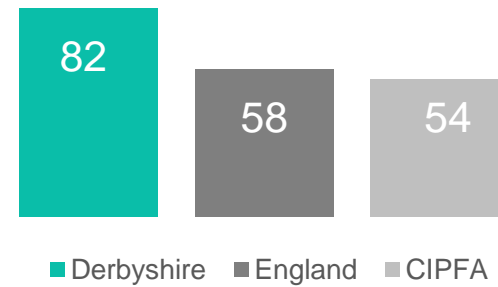
There is potential to work alongside partners to develop accommodation, care and support arrangements that enable more people in Derbyshire to live independently.

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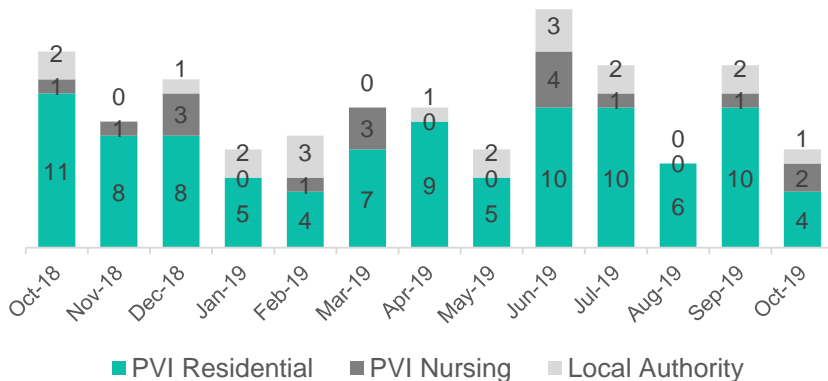
Long term support needs of younger adults (aged 18-64) met by admission to residential and nursing care, per 100,000 population (ASCOF 2A - Lower is Better) 2018-2019



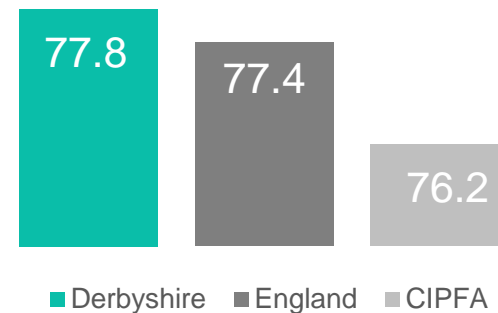
The proportion of adults in contact with secondary mental health services living independently, with or without support (%) (ASCOF- 1H - Higher is Better) 2018-2019



Permanent admissions by area per 100k population aged 18-64



The proportion of adults with a learning disability who live in their own home or with their family (%) (ASCOF- 1G - Higher is Better) 2018-2019



Strengths based approach to support in the community

We are working with partners including health, borough and district councils, the voluntary sector and commissioned providers to adopt a joined-up model of care and support which has a strengths based, community focus.

A strengths based approach focuses on the positive attributes in people's lives and tries to utilise these strengths to provide the support they need. This could mean working to maximise a person's personal, social and community networks as well as putting them in touch with lower level / universal services.

The approach sees a focus on community based services including peer support, befriending, volunteering, social groups, tenancy support, assistive technology, equipment, information and advice services.

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Enabling people to stay independent, healthy and well for longer is a joint priority for health and social care nationally

Strengths based approach

- Guided conversation: person & volunteer
- Family & friends
- Community networks & wrap around support
- Integrated health & social care support
- Specialist support

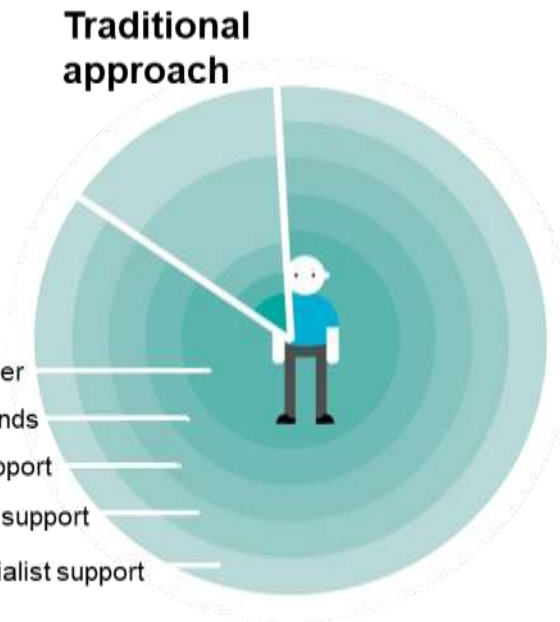


Diagram adapted from '[Living Well](#)' - Pioneer for Cornwall and the Isles of Scilly.

Place based care and support

There are [eight Place Alliances](#) across Derbyshire. 'Place' involves commissioners, community services providers, local authorities, primary care, the voluntary and community sector, and the public working together to meet the needs of local people. Developing 'Place' is all about the promotion of healthy choices, healthy environments and resilient communities and empowering people to live a healthy life for as long as possible through joining up health, care and community support as close to home as possible.

Each Place Alliance is working out what people and local communities need to stay well and what already works. Once this is established we will then focus on making sure we use the resources we have to support people's wellbeing and use this knowledge to inform future service planning on a local level.

Co-producing our approach

Co-producing services is a key principle at the heart of this strategy.

In developing our strategies for specialist accommodation and accommodation for older people, we undertook engagement and consultation with people with care and support needs and their families. This identified the importance that people place on staying within their own homes and maintaining independence.

Ongoing engagement and co-production with people of working-age with care and support needs is required to gain a comprehensive and up to date picture of what housing, accommodation and support should look like, now and in the future.

We also want to engage with younger people who may have just begun, or will shortly access adult social care services to understand more about what they need from a range of housing and accommodation provision.

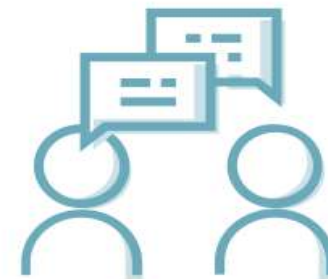
We also want to encourage and facilitate the co-production and co-design of services that support people to live independently.

We will also need to seek the views of other professionals working in the housing, care and health sectors as part of a partnership approach to provide operational and technical insight to inform our long term planning.

The learning and insight from these discussions will be used to inform local policies and our commissioning intentions. This is particularly important where partners across Derbyshire are seeking to explore and develop innovative solutions to accommodation and support needs for people of working age and for younger adults. We will need to make sure that we work with partners to ensure the solutions created complement the needs and aspirations of the people who will use them, and are available where needed.

As partners or providers come forward with specific housing development opportunities, more detailed work will take place with people who live and work nearby to ensure that any new developments meet the needs of local people.

We will begin to engage and co-produce the priorities identified within this strategy, and to build an evidence base that continues to shape our approaches to accommodation and support for working age adults and younger adults with care and support needs.



Design standards and innovative practice



We want to encourage the following design standards to be achieved across a range of accommodation:

Independent community living

- Own tenancy / owner occupier
- In the family household
- Access to a Disabled Facilities Grant (DFG) if required for essential housing adaptations to support people to remain in their own home
- Wrap-around support
- Easy access to Primary Care
- Universal Services available



Supported Living, a combination of housing and support services

All supported housing should be regarded and feel like the person's own home, reflecting [REACH Standards](#) in Supported Living:

- Self contained properties with on site support (known as the core and cluster model)
- Accessible, one bedroom flats, bungalows or houses
- Proximity to local amenities and networks
- Accessible garden or outdoor space
- Wheelchair adapted
- Utilises assistive technology i.e. 'smart' heating/lighting/door controls; security systems
- People should have access to a range of tenancy opportunities
- Mobility car parking
- Emergency call facilities



Extra Care for vulnerable adults

- Self contained homes that are built with vulnerable people in mind.
- Modern building standards and energy efficient design to help keep energy costs as low as possible.
- Equipment, signage, internal décor and landscaping that enable people who have physical, sensory or cognitive impairments to be as independent as possible.
- Fully accessible landscaped outside space that is stimulating.
- Communal facilities to give residents opportunities to socialise.
- Located close to local amenities in order to enhance the opportunities for residents to take part in the life of the local community.

Shared Lives arrangements

- Accommodation and support within approved family homes for people over the age of 18 with a physical or learning disability and/or who are autistic or experiencing mental ill health.
- Share the daily life of the shared lives carer and live in an ordinary domestic situation.
- Offers people an alternative to residential care
- Helps people maintain and develop their independence and life skills.



Housing and accommodation schemes

Listed below are some examples of how different supported housing and accommodation schemes can be arranged that would then present a range of opportunities to people, families and social care staff across Derbyshire.

Multi-generational schemes

The development is designed to offer affordable, fully accessible, high-quality, multigenerational, sustainable one and two-bedroom homes for people of all ages. The apartments allow single people, couples and families to be housed within one community with door widths and circulation spaces also allowing wheelchair access. Built to replace low-demand bedsit accommodation for older people.



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Purpose built supported living schemes for people with complex needs

There are different types of specialist housing designed to meet the diverse needs of people with complex needs, which can include settled accommodation and short-term accommodation. In purpose built supported living schemes, people will have their own tenancies and usually live alone in purpose built, clean environment houses/flats that includes personalised, specialist care and support services through an onsite care agency registered through the Care Quality Commission (CQC).

Step-down supported housing for people with mental health needs

Short term (usually up to 3 years) supported housing for people with mental health needs who have been in specialist hospital rehabilitation or specialist residential care and are then supported to continue their recovery within the community. People in this cohort have often spent a considerably long time institutionalised, are de-skilled and have a range of support needs (daily living skills; reminders; lack of motivation; periods of psychosis) and need access to staff support 24 hours a day.



Accommodation for younger adults with care needs

This type of housing usually consists of purpose-built or adapted flats with 24 hour access to support services and staff. There are often communal areas such as space to socialise and outside areas. The intention is for residents to benefit from varying level of care as time progresses and may be referred to as Extra Care Schemes for younger adults with care needs.

Supporting independence with assistive technology

Assistive technology (AT) is an enabler for independent living and we have identified the following opportunities in Derbyshire:

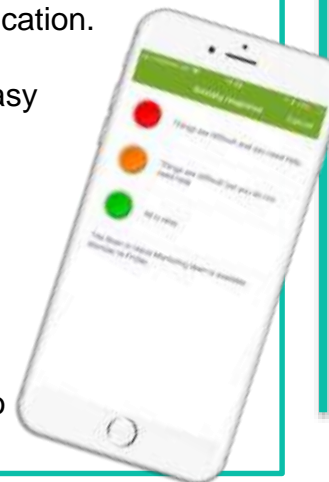
- **Supported living (shared night support):** incorporating AT solutions focusing on prompts and reminders, sequencing of activities to increase independence in activities of daily living and enabling staff to respond when needed during the night, rather than being present 'just in case'.
- **Day opportunities:** incorporating AT solutions designed to support safety and independence whilst travelling and in the community, so people can be enabled to undertake more activities.
- **Mental health:** enabling management of anxieties and risks in the community, utilising app-based prompts and solutions on individuals' own devices.
- **Autism:** accommodating the preferences of some clients' need for reduced intrusion, whilst enabling safe care and support at a lower cost.
- **Sensory:** simple AT solutions such as smoke alarms for people with hearing loss and flashing, sounding and/or vibrating alarms can support people with sensory needs to live safely and independently.
- **Carers support:** AT can be linked to a carer pager unit, allowing carers to take time out and spend time in other areas of the home with the comfort of knowing they would be alerted to an emergency. For example, an epilepsy sensor can alert a carer, via the pager, that the person they support is experiencing a seizure.

Derbyshire is running a 12 month pilot in 2019-20 of the **Brain in Hand** application.

Brain in Hand is an app and professional support system that gives people easy access to personalised digital self-management coping tools.

The app is suitable for people with a range of learning disabilities and mental health difficulties. From the app, users can see their diary, receive reminders and prompts and quickly find their best coping strategies.

Brain in Hand can support a working age adult to live more independently, improving their confidence and enabling them to cope with anxiety. It can also reduce demand on carers and formal support services.



Our front line practitioners have told us that:

We need to explore and embrace new technology and look at how it can be used to enhance the lives of our clients and deliver better outcomes for them.

Technology needs to be more integrated into the care planning process to ensure that clients and social workers are aware of the opportunities available to support people to safely live at home independently.

AT could be used as a more cost effective way of providing night time support in supported living environments.

Case studies

Sylvia – Shared Lives



Sylvia, 45 years, has a learning disability and used to live at home with her parents in the Chesterfield area. Sylvia's behaviour could be challenging at times and her parents found this increasingly difficult to manage especially as they became older and had their own health issues.

Sylvia wanted more independence and the ability to do more, have more choice in her life and socialise with others. Her social worker arranged some periods of respite in a residential home but these were not successful as Sylvia could not get used to this environment.

Accommodation:

Sylvia was introduced to the Shared Lives scheme and a couple, Sandra and Roger agreed to have her to stay for periods of respite. Sandra and Roger were patient with Sylvia, giving her time to adjust to their home and local community and participate more as they got to know her. This new understanding meant that Sylvia developed new skills and increased independence and was happy to share her life with Sandra and Roger on a permanent basis.

Outcomes:

- Improved skills and independence developed.
- New social relationships developed and participation in local community along with more choice in day to day activities.
- Improved family relationships.

Robert – Supported Living



Robert, 26 years, is autistic, and used to live at home with his family in the High Peak area. He is physically able, but struggles with social communication. Robert has potential to become more independent and wanted to live away from home. However, he is suspicious of other's intentions towards him and has heard voices, which he feels are others talking negatively about him.

Accommodation:

Robert needed support available at all times due to fluctuations in his mental health, but he also needed his own space due to his difficulties with social communication and relationships with others.

Robert moved to a supported living arrangement run by a provider that was able to support his needs. He has his own flat and support is available 24 hours a day. The service has enabled Robert to develop new skills and focus on his longer term needs around socialisation.

Outcomes:

- Improved mental wellbeing and quality of life.
- Growing independence and new relationship developed in a safe setting.
- Improved family relationships.

Case studies

Daniel – Private Tenancy



Daniel, 19 years, is autistic, and as a child he lived in the care of the local authority.

Daniel needed accommodation urgently when he turned 18 years old. He was assessed as having good potential to learn new skills and eventually be independent. However, there were some concerns around risks which had previously presented in his foster care placements, including sexualised behaviour and theft. This behaviour had reduced more recently and it was felt that this related to attachment issues Daniel experienced as a child.

Accommodation:

Daniel moved into supported living with support available 24 hours to monitor his presentation and areas of risk. However, Daniel was also allowed to foster independence and develop new life skills. A year on from the move, Daniel is ready to move into his own tenancy. Some risks have presented in the time he was in supported living, but the provider has found ways to work positively with Daniel around these.

Outcomes:

- Growing independence and life skills developed.
- Positive approaches developed to managing risk.
- Daniel has shown that he is ready for further independence and to move into his own tenancy.

Carers and housing

There are over 93,000 unpaid, family carers providing care and support across Derbyshire.

Suitable housing and related services offering strong support solutions are crucial in ensuring that the carer's role is manageable, safe and sustainable, whilst preserving their own health.

Carers have told us it is important for them to:

- Find clear information and know where to go for help on housing issues, equipment, adaptations and repairs.
- Receive respect and recognition of their role from the professionals with whom they are in contact.
- Have a range of local options available for when the person they care for wants to move from the family home or when the carer can no longer provide care
- Continue living with or supporting the person they care for, as their own health needs, or those of the person they care for, change

See our [Derbyshire carers strategy](#) for more information or look at the [Carers in Derbyshire](#) website.



Amber Valley



Key priorities for Amber Valley in relation to housing and accommodation which supports working-age adults with care and support needs to live well and independently:

- There were 17 people who are part of the pathway to adult hood in 2018/19 and these people are likely to have significant support needs.
- Partners working across health and social care want to support working age adults to live independently with appropriate care and support in their own home and are focusing on supporting positive mental health and wellbeing.
- Amber Valley is exploring the innovative use of funding to enable independent living via simple solutions, and if appropriate, use it to develop bespoke housing for people with more complex needs or disabilities.
- Amber Valley wants to increase the availability of adapted homes and ensure there is a range of affordable housing provision in place for working-age adults.
- Amber Valley will work in partnership with a range of organisations to help prevent homelessness and secure accommodation for people at risk of losing their home; if appropriate, this will also include a consideration of any care and support requirements.

Character: The borough of Amber Valley is mainly rural but contains the four market towns of Alfreton, Heanor, Ripley and Belper.

Population: From a total population of 126,100 the number of people of working age between 18 and 64 is currently 74,000 (59%). This is projected to decrease to 70,700 by 2035.

Deprivation: In Amber Valley 10% of areas fall within the most deprived 20% nationally.

In Amber Valley people aged 18-64 years old have the following care and support needs:

Independent community living:



160 home care packages

Supported Housing:



25 schemes with 60 tenancies

Shared Lives:



32 people live in a Shared Lives placement

Extra Care:



10 people living in Extra Care. There is one Extra Care facility in the area

Nursing and Specialist:



176 people are in residential or nursing care placements. There are 16 homes in the area with a focus on adults aged 18-64 years

Find out more about Amber Valley on the [Derbyshire Observatory](#)

Key documents available online [Amber Valley Housing Strategy](#)

Bolsover



Key priorities for Bolsover in relation to housing and accommodation which supports working-age adults with care and support needs to live well and independently:

- There were seven people who are part of the pathway to adult hood in 2018/19 and these people are likely to have significant support needs.
- Work to increase the number of Shared Lives placements within the area for working-age adults.
- There is an under provision of supported living schemes in Bolsover for working age adults with more complex needs and partners will work together to identify solutions
- Bolsover wants to consider its preventative housing offer and promote a cross tenure focus
- Properties offering affordable rents are an area of focus as shared ownership is less attractive due to low equity values of properties in the area.
- Smaller supported living or extra care schemes in local communities are important in this area so innovative solutions may be appropriate to explore, e.g. co-housing and intergenerational housing options.

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In Bolsover people aged 18-64 years old have the following care and support needs:

Independent community living:



102 home care packages

Supported Housing:



13 schemes with 34 tenancies

Shared Lives:



Four people live in a Shared Lives placement

Extra Care:



51 people living in Extra Care. There are currently three Extra Care facilities in Bolsover

Nursing and Specialist:



137 people are in residential or nursing care placements. There are 12 homes in the area with a primary focus on adults aged 18-64

Character: The district of Bolsover is mainly rural but contains the four market towns of Clowne, Bolsover, Shirebrook and South Normanton and there are a number of smaller communities scattered throughout the district.

Population: From a total population of 79,300 the number of people of working age between 18 and 64 is currently 47,400 (60%). This is projected to decrease to 46,400 by 2035.

Deprivation: In Bolsover 23% of areas fall within the most deprived 20% nationally.

Find out more about Bolsover on the [Derbyshire Observatory](#)

Key documents available online [Bolsover Housing Strategies](#)

Chesterfield



Key priorities in Chesterfield in relation to housing and accommodation which supports working-age adults with care and support needs to live well and independently:

- There were 25 people who are part of the pathway to adulthood in 2018/19 and these people are likely to have significant support needs.
- Chesterfield wants to encourage new housing provision to be built to M4 (2) building regulation standards to promote independent living
- Focus on enabling adapted and accessible homes suitable for people with a physical disability
- Include development of specialist or adapted housing as part of regeneration schemes
- As Chesterfield is one of the key urban centres in Derbyshire there is a higher proportion of supported living schemes and more specialist provision than other areas. This may help individuals to live independently, access employment, training or other day opportunities utilising accessible public transport.
- Provision of residential care is good across the area and therefore is not a strategic priority
- There are opportunities for joint working between County Council and Chesterfield Borough Council to understand unmet needs and to invest to meet these needs through the Housing Investment programme

In Chesterfield people aged 18-64 years old have the following care and support needs:

Independent community living:



212 home care packages

Supported Housing:



68 schemes with 186 tenancies

Shared Lives:



16 people live in a Shared Lives placement

Extra Care:



16 people living in Extra Care. There is one extra facility in the area

Nursing and Specialist:



236 people are in residential or nursing care placements. There are 25 homes in the area with a primary focus on adults aged 18-64 years

Character: The borough of Chesterfield is mainly urban, containing the market towns of Staveley and Chesterfield (the largest town in Derbyshire).

Population: From a total population of 104,900 the number of people of working age between 18 and 64 is currently 62,700 (60%). This is projected to decrease to 59,000 by 2035.

Deprivation: In Chesterfield 29% of areas fall within the most deprived 20% nationally.

Find out more about Chesterfield on the [Derbyshire Observatory](#)

Key documents available online [Chesterfield Housing Strategy](#)

Derbyshire Dales



Key priorities for Derbyshire Dales in relation to housing and accommodation which supports working-age adults with care and support needs to live well and independently :

- There were six people who are part of the pathway to adulthood in 2018/19 and these people are likely to have significant support needs.
- Rural communities in Derbyshire Dales have fewer Shared Lives arrangements in place when compared to other parts of the county. Therefore promoting and signing up carers to this scheme is a strategic priority.
- Recruitment and retention of workers to provide home care is challenging across the area. Developing effective place based approaches to care and support will enable people of a working age with care and support needs to live independently.
- There is an undersupply of affordable extra care provision for working age adults in the area.
- Housing and accommodation developments will need to take into account the development restrictions associated with the Peak Park, therefore smaller and more innovative approaches may be required.
- Derbyshire Dales wants to focus on the delivery of a range of adapted housing, working with developers through the Section 106 planning process and to consider alternative models such as 'Housing First' (person is supported to main their tenancy) <https://hfe.homeless.org.uk/> as well as the support provided by charities and voluntary groups

In Derbyshire Dales people aged 18-64 years old have the following care and support needs:

Independent community living:



60 home care packages

Supported Housing:



12 schemes with 39 tenancies

Shared Lives:



10 people live in a Shared Lives placement

Extra Care:



0 people are living in Extra Care. There are no Extra Care facilities in the area

Nursing and Specialist:



89 people are in residential or nursing care placements. There are three homes in the area with a primary focus on adults aged 18-64 years

Character: The district of Derbyshire Dales is mainly rural with around 80% of its population living in rural settlements. The district contains the market towns of Ashbourne, Bakewell, Matlock Town and Wirksworth.

Population: From a total population of 71,500 the number of people of working age between 18 and 64 is currently 39,400 (55%). This is projected to decrease to 35,400 by 2035.

Deprivation: In Derbyshire Dales 2% of areas fall within the most deprived 20% nationally.

Find out more about the Derbyshire Dales on the [Derbyshire Observatory](#)

Key documents available online: Derbyshire Dales (draft) [Housing Delivery Action Plan](#) and [Peak National Park planning policies](#)

Erewash



Key priorities for Erewash in relation to housing and accommodation which supports working-age adults with care and support needs to live well and independently:

- There were 12 people who are part of the pathway to adulthood in 2018/19 and these people are likely to have significant support needs.
- Development of complex supported living schemes in Erewash
- Erewash is working with East Midlands Homes via the Disabilities Facilities Grant to develop and adapt homes to help people with disabilities live independently in their community
- Promote intergenerational and mixed tenure housing that supports all age groups.
- Develop suitable homes and specialist accommodation, where possible, through the planning system with specific appeal to the Council's adopted Core Strategy (Local Plan) Policy H7 Special Needs Housing, which states that *in developments of 25 dwellings or more or on sites in excess of 1 hectare and where there is clear evidence of need, the Borough Council will negotiate with developers to provide a proportion of dwellings that are designed to special needs standards, particularly on level sites that are well served by shops, community services and public transport*".

In Erewash people aged 18-64 years old have the following care and support needs:

Independent community living:



175 home care packages

Supported Housing:



21 schemes with 34 tenancies

Shared Lives:



10 people live in a Shared Lives placement

Extra Care:



0 people are living in Extra Care. There are no Extra Care facilities in the area

Nursing and Specialist:



170` people are in residential or nursing care placements. There are 13 homes in the area with a primary focus on adults aged 18-64 years

Character: The borough of Erewash is mainly urban, containing the market towns of Ilkeston and Long Eaton. There are also a number of scattered settlements across the more rural parts of the borough.

Population: From a total population of 116,700 the number of people of working age between 18 and 64 is currently 69,300 (59%). This is projected to decrease to 68,100 by 2035.

Deprivation: In Erewash 15% of areas fall within the most deprived 20% nationally.

Find out more about Erewash on the [Derbyshire Observatory](#)

Key documents available online: [Erewash Housing Strategy](#)

High Peak



Key priorities for High Peak in relation to housing and accommodation which supports working-age adults with care and support needs to live well and independently:

- There were nine people who are part of the pathway to adulthood in 2018/19 and these people are likely to have significant support needs.
- Recruitment and retention of workers to provide home care is challenging across the area.
- Housing and accommodation development needs to take into account the development restrictions associated with the Peak Park, therefore smaller and more innovative approaches may be required as well as making best use of existing housing stock
- High Peak are promoting building regulations which promote accessibility/ greater space dimensions to make sure new builds meet accessibility standards as set out in M4 (2) of Part M of the building regulations.
- High Peak have delivered a range of pre-adapted housing to support people with a disability.
- work in partnership with a range of organisations to help prevent homelessness and secure accommodation for people at risk of losing their home, if appropriate this will also include a consideration of any care and support requirements'

In High Peak people aged 18-64 years old have the following care and support needs:

Independent community living:



119 home care packages

Supported Housing:



37 schemes with 11 tenancies

Shared Lives:



11 people live in a Shared Lives placement

Extra Care:



16 people are living in Extra Care. There is one Extra Care facility in the area

Nursing and Specialist:



121 people are in residential or nursing care placements. There are five homes in the area with a primary focus on adults aged 18-64 years

Character: The east of High Peak largely comprises the Peak District National Park. To the west, there are five market towns including Glossop, New Mills, Whaley Bridge, Chapel-en-le-Frith and Buxton where the majority of the population is concentrated.

Population: From a total population of 92,100 the number of people of working age between 18 and 64 is currently 54,900 (59%). This is projected to decrease to 50,300 by 2035.

Deprivation: In High Peak 7% of areas fall within the most deprived 20% nationally.

Find out more about High Peak on the [Derbyshire Observatory](#)

Key documents available online: [High Peak Housing Strategies](#)

[Peak National Park planning policies](#)

North East Derbyshire



Key priorities for North East Derbyshire in relation to housing and accommodation which supports working-age adults with care and support needs to live well and independently:

- There were 12 people who are part of the pathway to adulthood in 2018/19 and these people are likely to have significant support needs.
- There is limited supply of extra care affordable provision in the north of the district near Dronfield; however there is a good supply of supported living accommodation in the south of the district.
- Working-age accommodation is a priority for the district and North East Derbyshire want to work in partnership with health and social care partners to develop a range of projects that support people with care and support needs to live independently.

Character: The district of North East Derbyshire is rural in nature and contains the market towns of Dronfield, Clay Cross, Killamarsh and Eckington. Elsewhere, the district is sparsely populated by scattered villages.

Population: From a total population of 101,200 the number of people of working age between 18 and 64 is currently 57,500 (57%). This is projected to decrease to 54,200 by 2035.

Deprivation: In North East Derbyshire 10% of areas fall within the most deprived 20% nationally.

Find out more about North East Derbyshire on the [Derbyshire Observatory](#)

Key documents available online: [North East Derbyshire Planning Policy and Local Plan](#)

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In North East Derbyshire people aged 18-64 years old have the following care and support needs:

Independent community living:



121 home care packages

Supported Housing:



21 schemes with 75 tenancies

Shared Lives:



13 people live in a Shared Lives placement

Extra Care:



0 people are living in Extra Care. There are no Extra Care facilities in the area

Nursing and Specialist:



148 people are in residential or nursing care placements. There are two homes in the area with a primary focus on adults aged 18-64 years

South Derbyshire



Key priorities for South Derbyshire in relation to housing and accommodation which supports working-age adults with care and support needs to live well and independently are:

- Assisting the people who are part of the pathway to adulthood in 2018/19 who may have significant support needs, into more independent accommodation
- Implementing the recently published Private Sector Housing Assistance Policy which outlines preventative schemes that avoid crisis, enables independent living and promotes opportunities for improved health and wellbeing, (i.e. Mental Health Homelessness Coach which supports residents to sustain their accommodation, Healthy Homes Programme to tackle health conditions in conjunction with fuel poverty).
- Expanding and improving the Council's in-house mandatory DFG service
- Working in partnership to regenerate and remodel existing schemes to meet the needs of people who require specialist supported housing
- Addressing the undersupply of affordable extra care provision for working-age adults
- Promoting the use of M4(2) building regulations to facilitate the development of accessible and adaptable housing, and ensure that between 5-10% of all new homes delivered in the district are built to M4(3) wheelchair accessible standard
- Enabling development of affordable supported and extra care housing provision, particularly on large strategic sites.

Character: The district of South Derbyshire is largely rural containing the market towns of Swadlincote, Melbourne and the town of Hilton. Elsewhere, the district is sparsely populated. The district is parished with the exception of Swadlincote.

Population: From a total population of 103,100 the number of people of working age between 18 and 64 is currently 62,000 (60%). This is projected to increase to 63,600 by 2035.

Deprivation: In South Derbyshire 5% of areas fall within the most deprived 20% nationally.

Find out more about South Derbyshire on the [Derbyshire Observatory](#)

Key documents available online:

- [South Derbyshire Planning Policy and Local Plan](#)
- Strategic Housing Market Assessment 2020

In South Derbyshire people aged 18-64 years old have the following care and support needs:

Independent community living:



88 home care packages

Supported Housing:



12 schemes with 43 tenancies

Shared Lives:



12 have a Shared Lives placement

Extra Care:



0 people living in Extra Care

Nursing and Specialist:



120 people in residential or nursing care. There are 8 homes in the area with a primary focus on 18-64 years

Summary of opportunities to work with us

<p>Across all tenures</p>	<ul style="list-style-type: none"> • Appropriate support for people to live independently where they choose to – a range of commissioned services and support. The council publishes various market position statements which highlight these, alongside the opportunities outlined in this strategy.
<p>Independent Community Living</p>	<ul style="list-style-type: none"> • As more people with learning disabilities, people who autistic and people experiencing mental ill health choose to live independently and prefer to be supported in their own home, there is a growing demand for this type of provision in Derbyshire. • Develop accessible apartments and bungalows that maximise the use of technology and promote health and wellbeing through design and provision of communal spaces.
<p>Supported Housing</p>	<ul style="list-style-type: none"> • Consider new build developments involving reusing sites or re-modelling existing provision. • Develop partnerships between developers, Registered Social Landlords (RSLs) and other housing providers to respond in a timely manner to development requests.
<p>Extra care housing for younger people</p>	<ul style="list-style-type: none"> • Explore opportunities to use Derbyshire County Council assets to provide housing options. • Develop housing and accommodation that can support vulnerable people with complex needs. • Develop affordable provision in this sector by working with district and borough councils and registered providers as well as supporting open market provision.
<p>Shared Lives</p>	<ul style="list-style-type: none"> • Work to increase the number of Shared Lives Arrangements and carers skilled in supporting this cohort of people across Derbyshire.
<p>Residential Care and Specialist accommodation</p>	<ul style="list-style-type: none"> • Residential and nursing care home placements will only be considered for this group of people, when it has been identified that their accommodation and support needs can only be met within a 24 hour staffed setting. A Dynamic Purchasing System (DPS) for the procurement of specialist residential care and nursing home placements for clients under 65 years is proposed from 2020 and will replace the existing contracting arrangements for all new specialist care/nursing home placements. It will include these categories of client groups: Mental Health, Learning Disabilities / Autism Spectrum Condition / Physical Disabilities / Sensory Impairment, and an enhanced service for those clients with unpredictable levels of behaviour that challenge services.

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Draft Delivery Plan

Priority	Organisational Lead	Timescale
<p>PRIORITY 1: Engage and co-produce projects and development opportunities with working age adults with care and support needs and with key stakeholders.</p>	<p>DCC Adult Social Care Commissioning and Contract Managers, commissioning managers in partner organisations, including health (CCG), District and Borough Councils.</p>	<p>2020/2021 to commence activity on an ongoing basis.</p>
<p>PRIORITY 2: Work in partnership with all districts and boroughs to ensure that local housing strategies and plans reflect the Working Age Adults Housing, Accommodation and Support Strategy, and to secure and increase the supply of suitable, well-designed accommodation and support referencing national work including the Housing LIN's Design guidelines for inclusive, enabling environments for adults with complex needs.</p>	<p>DCC Adult Social Care Commissioning and Contract Managers, DCC Property, District and Borough Councils.</p>	<p>Ongoing to 2035 in line with local timescales for strategy renewal.</p>
<p>PRIORITY 3: Work in partnership to understand need County-wide and at a district and borough level, using County intelligence about projected needs for care and support, and identify land and properties for the development of suitable provision.</p>	<p>DCC Adult Social Care Commissioning and Contract Managers, DCC Property, District and Borough Councils.</p>	<p>Ongoing to 2035 in line with local timescales for strategy renewal.</p>
<p>PRIORITY 4: Commission care and support provision that is aligned with housing and health services, and complements place-based development through Joined Up Care Derbyshire. This may include:</p> <ul style="list-style-type: none"> • the provision of direct care • assistive technology, • support to enable people to remain living in their own homes or to move from residential or specialist accommodation to living independently. 	<p>DCC Adult Social Care Commissioning and Contract Managers, commissioning managers in partner organisations, including health (CCG), District and Borough Councils.</p>	<p>From 2020//2021 onwards.</p>

Draft Delivery Plan

Priority	Organisational Lead	Timescale
<p>PRIORITY 5: Work with stakeholders and partner agencies, including voluntary organisations, to develop community opportunities that enable people to be active and involved and to access local networks of informal support.</p>	<p>DCC Adult Social Care Commissioning Team, commissioning managers in partner organisations, including health (CCG), and District and Borough Councils.</p>	<p>From 2020/2021 onwards.</p>
<p>PRIORITY 6: Work with stakeholders and partner agencies to develop new accommodation and support provision in relation to the specific gaps and needs identified in this strategy and associated locality based analysis.</p>	<p>DCC Adult Social Care Commissioning and Contracts Team, DCC Property, District and Borough Councils.</p>	<p>Ongoing from 2020/2021.</p>
<p>PRIORITY 7: Undertake activities to develop the market in care and support provision, promoting high quality accommodation, care and support that is available where it is needed, to include publishing up-to-date Market Position Statements for Learning Disability, Mental Health and Autism.</p>	<p>DCC Adult Social Care, Commissioning and Contracts Teams.</p>	<p>To be initially completed in 2020/2021. Market Position Statement to be published in 2020.</p>
<p>PRIORITY 8: Actively monitor the quality and suitability of accommodation with support, and take action together with partners to ensure that provision is safe and meets the needs of those using it, to include reviewing the Supported Living Framework.</p>	<p>DCC Adult Social Care Commissioning and Contracts Teams, DCC Children and Younger Adults, commissioning managers in partner organisations, including health (CCG), and District and Borough Councils.</p>	<p>Focus of activity for 2020/2021.</p>

Draft Delivery Plan

Priority	Organisational Lead	Timescale
<p>PRIORITY 9: Undertake a strategic review of the current Shared Lives offer to ensure we are maximising opportunities to increase the availability of these arrangements across the County, including for those with more complex needs.</p>	<p>Adult Social Care, Commissioning Team and Transformation Teams.</p>	<p>Focus of activity for 2020/2021.</p>
<p>PRIORITY 10: Develop plans for the smarter utilisation of assistive technology and adaptations to support and enable people to live more independently and for longer in their own homes.</p>	<p>Adult Social Care Commissioning and Contracts Teams.</p>	<p>Ongoing to 2021.</p>
<p>PRIORITY 11: Develop and implement robust procedures for:</p> <ul style="list-style-type: none"> the early identification of individual accommodation and support needs, to include transition planning for young people moving into adulthood ongoing review and planning to meet individuals' needs throughout their lives. 	<p>DCC Adult Social Care and Children and Younger Adults Teams, working with partner organisations including health and housing (District and Borough Councils).</p>	<p>Ongoing.</p>
<p>PRIORITY 12: Provide up-to-date information and advice through a variety of channels to enable those with care and support needs, and their families or carers, to make informed decisions about accommodation, care and support. Ensure that professionals in social care are aware of the range of options available, so that assessment and support planning promotes maximum independence.</p>	<p>DCC Adult Social Care Commissioning Team DCC Communication Team DCC Training Team, District and Borough Councils.</p>	<p>Ongoing.</p>

Glossary of Key Terms

Care Quality Commission (CQC): This is the national regulatory body which monitors and inspects registered care services.

Co-production: An approach to design which actively involves all stakeholders, especially clients, to ensure the results meets the needs of the end users.

Extra Care Housing: Housing schemes with access to 24/7 on site support, designed for people to have their own rooms along with communal spaces.

Market Position Statement: A document which summarises supply and demand in a local authority area or sub-region and signals business opportunities within the care market in that area.

Place Based Approaches to Health and Social Care: 'Place Alliances' involves commissioners, community services providers, local authorities, primary care, the voluntary and community sector and the public working together to meet the needs of local people.

Outcomes: The effect or result of a commissioning process, service delivery or intervention/treatment/support.

Personalised care: empowering people to have greater choice and control over the way their health and care is delivered.

Commissioner: This is whoever is leading on the purchasing of a service; either the Local Authority or Health Body.

Building Regulations (Part M): *Access to and use of buildings: Approved Document M:* building regulations in England to ensure that people are able to access and use buildings and their facilities. There are three categories of dwellings: Category 1: visitable dwellings; Category 2: accessible and adaptable dwellings; Category 3: wheelchair user dwellings.

Residential Care: Residential accommodation with personal care that is registered with the Care Quality Commission. Usually residents have their own rooms and share communal activities.

Severe Mental Illness: Refers to people with psychological problems that are often so debilitating that their ability to engage in functional and operational activities is severely impaired (schizophrenia and bipolar disorder are often referred to as severe mental illness).

Supported Living: Supported housing developed in partnership with local authorities or the health service that offers a high level of support for clients, from a regulated home care provider, for whom the only acceptable alternative would be residential or inpatient care.

Building the Right Support: This is a national programme to improve health and care services so that more people with a learning disability and/or people who are autistic can live in the community, with the right support, and close to home. This means that fewer people will need to go into hospital for their care.

Strength Based Approach to Care and Support: All partners should identify the individual's strengths – personal, community and social networks – and maximise those strengths to enable them to achieve their desired outcomes, thereby meeting their needs and improving or maintaining their wellbeing.

Contact us

This document is designed to outline the need for various types of accommodation, housing and support for people of working age, with care and support needs, to live as independently as possible.

This strategy will assist with continued discussion with individuals, organisations, families and carers interested in delivering suitable accommodation and support for people of working age with care and support needs - including people with a learning disability, autism, mental health, physical disability or sensory impairment.

Derbyshire County Council and its partners own a significant amount of land which, through the One Public Estate Programme we are seeking to utilise for maximum impact. We would be happy to have conversations in relation to how this land can be utilised or released to support development opportunities.

By working in partnership we may be able to collectively secure external investment or funding to support certain projects or development opportunities. We would be happy to discuss and explore these further.

If you would like further information or have a proposal you wish to discuss with us, please contact:
asch.ac-commissioning@derbyshire.gov.uk.

Data sources

This document has referenced numerous statistics and a summary of the sources and where to find more information are included below:

Adult Social Care & Health Management Information: (internal DCC resource) has provided much of the information about the current market.

Population Estimates and Projections– Office of National Statistics: further information about population estimates and projections for Derbyshire can be found on the <https://observatory.derbyshire.gov.uk/>

PANSI Statistics: provide a range of information about adult needs and services. Further information can be found on <https://www.pansi.org.uk/> (registration and log-in required).

Housing tenure: Further information is available at <https://observatory.derbyshire.gov.uk/housing-tenure/>

Adult Social Care Outcomes Framework (ASCOF) – a summary for Derbyshire can be accessed via [LG Inform](#).

Index of Multiple Deprivation (2019) – information about deprivation in Derbyshire can be found at <https://observatory.derbyshire.gov.uk/deprivation/>

Updating and reviewing this document

This document will be reviewed and updated on a regular basis to reflect completed actions and any additional actions that arise from a changing policy landscape and the latest demographic trend modelling.

Progress and achievements will be noted and summarised so that ongoing market gaps can be identified and future plans focused accordingly.

For further information please contact:

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County Hall

Smedley Street

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