

Name of meeting: Cabinet

Date: 8 March 2022

Title of report: Kirklees Specialist Accommodation Strategy 2022 – 2030

Purpose of report: To approve the draft Specialist Accommodation Strategy 2022 -

2030.

Key Decision - Is it likely to result in spending or saving £250k or more, or to have a significant effect on two or more electoral wards?	Yes - impact on 2 or more wards
Key Decision - Is it in the Council's Forward Plan (key decisions and private reports)?	Key Decision - Yes Private Report/Private Appendix - No
The Decision - Is it eligible for call in by Scrutiny?	Yes
Date signed off by Strategic Director & name	David Shepherd – 22/2/2022
Is it also signed off by the Service Director for Finance?	Eamonn Croston – 28/02/2022
Is it also signed off by the Service Director for Legal Governance and Commissioning?	Julie Muscroft – 28/2/2022
Cabinet member portfolio	Councillor Cathy Scott Councillor Musarrat Khan Councillor Viv Kendrick

Electoral wards affected: All

Ward councillors consulted: none

At this point we are setting out our overall strategy around Specialist Accommodation in Kirklees. The outputs of work under the strategy will at that point involve ward councillors as specific sites and types of accommodation provision are identified at ward level.

Public or private: Public

Has GDPR been considered? A DPIA has been completed - Reference: - FS-Case-224404942

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1. Summary

- 1.1 On the 16 March 2021 Cabinet approved the Service Director for Homes and Neighbourhoods carrying out a non-statutory consultation on the proposed draft Specialist Accommodation Strategy 2022-30. This consultation is now complete a summary of the approach and findings are outlined below, the draft strategy now reflects the findings of this consultation.
- 1.2 The draft strategy aligns to our shared outcomes particularly "Well", "Independent", "Safe and cohesive" and "Efficient and Effective". The work of delivering the strategy also follows the We're Kirklees approach of working with people not doing to them, working with partners and Place-based working.
- 1.3 The draft strategy outlines the importance of quality housing and the impact it has on individuals and their wellbeing. It goes on to discuss the demographic, technological and consumer trends that are already impacting the market and are likely to continue to do so over the period of the strategy.
- 1.4 The draft strategy outlines how the shape of specialist accommodation will change over the next eight years and the key actions required to support these changes.
- 1.5 The draft strategy will form part of the Council's over-arching Housing Strategy 2018-23 which is part of the Policy Framework. The Kirklees Housing Strategy will be refreshed during 2022 and so will require full Council to approve and adopt it on recommendation from the Cabinet. Approval of the draft Kirklees Specialist Accommodation Strategy 2022-2030 is a matter solely for the cabinet to approve because it only supplements the Housing Strategy.

2. Information required to take a decision

- 2.1 The draft Kirklees Specialist Accommodation strategy forms part of the overall Kirklees Housing Strategy; and specifically covers people that the local authority and our health partners support in a home that has been designed to meet the needs of different people in their homes, so that they remain as independent as possible.
- 2.2 The draft strategy describes each specific cohort that touch specialist accommodation. Each cohort section describes a view of where that cohort will be in eight years' time, setting out this headline will help focus on what the fine detail is aiming at and the likely changes in provision across the period of the strategy. Each section then briefly outlines some key activities that are required and goes on to describe current supply and likely future accommodation demand.

2.3 The objectives of the strategy:

2.4 Our new approach to specialist accommodation is radical, but necessary. In the past we have taken small steps with regard to developing specialist accommodation locally, being more reactive than proactive. We also lacked a robust approach to the public estate and unpicking the barriers and delays to creating new developments.



- 2.5 We are clear that there are a series of **short-term issues** that need to be addressed to unblock or manage issues within specialist accommodation locally. This includes assessing the impact of COVID-19 on the accommodation market and understanding the impact upon future demand numbers.
- 2.6 We want accommodation to be **appropriate**, having and developing accommodation that means individuals are as independent as possible, for as long as possible. We are firmly committed to shaping accommodation requirements with individuals. This includes working with particular groups such as older BAME people living in Kirklees. We recognise that people's needs change, we also recognise that people sometimes need to move so their needs can be better met, this could be short term or longer term as needs change.
- 2.7 We want accommodation to be **local**, we are clear that placing people a distance away from Kirklees may not generate the best outcomes for individuals. We need to develop local capacity so the specific needs of people likely to be placed out of area can be met in Kirklees.
 - We want specialist supported accommodation to be **affordable**; we recognise that in the past we have placed people in care homes because it has been the only option. We have begun and will continue to develop in partnership with our provider market better value, better outcome models of care that are more flexible.
- 2.8 We want accommodation to be **sustainable**. Attitudes and models of care and support continue to evolve. We need accommodation that is more flexible and can change to meet the needs of either increased numbers of people or those with needs that are different to those that might have been foreseen when a development was started. This may include things like eco-friendly design approaches to accommodation and people with different care needs living in one development or one series of developments.

2.9 Why is the strategy required?

- 2.10 Suitable housing can significantly improve people's lives, while unsuitable housing can be the source of multiple health and wellbeing issues and costs. Appropriately designed housing, that can adapt to people's changing needs as they age, has a number of benefits. These benefits include reducing demand on care and support services and enabling individuals to live independently and more flexibly in our communities.
- 2.11 As this draft strategy describes the current care and support estate has developed in a slightly disjointed way, we believe taking our current and potential future specialist accommodation tenants with us on a development journey will mean wishes, preferences and ultimately outcomes will be met.
- 2.12 We will work with people and organisations to develop different and innovative homes across all groups, that will enable people to have choice and means they can live as independently as possible.

- 2.13 There are likely to be models of care and support that have not been designed yet that we would want to commission or support during the life of this strategy. Homes that are adaptable, disability and dementia friendly will grow in significance locally.
- 2.14 The changes in the needs of people over the period of this draft strategy will drive development and demand for specialist accommodation based and other care support. How people currently or wish to live will also affect demand and types of accommodation required, more people are living alone that they were 20 years ago. As the population ages there are likely to be more people living with long term conditions that require support or home modifications so that they can remain independent.
- 2.15 There are legislative and policy drivers for some of the content of this draft strategy, but fundamentally we want to enable our population to live as independently as possible, for as long as possible, in safe places of their choosing, with a wide range of support that best delivers the outcomes they as individuals want to achieve.

3. Implications for the Council

3.1 Working with People

3.2 The people who currently or who in the future may live in specialist or supported accommodation are at the centre of this strategy, we want to ensure they remain as independent as possible and have a home that allows them to meet their own outcomes. A person's living environment extends beyond their home. Enabling people of all ages to live healthy and successful lives requires neighbourhoods with suitable physical, social, and community environments.

3.3 Working with Partners

3.4 The strategy has been shaped by a multi-agency board, we have also actively engaged external partners in the development of the strategy and the workplan that will deliver the aims of the strategy. The work delivering this strategy will build upon the partnerships already developed, and it is only with such working we will be able to deliver our ambitions following political endorsement.

3.5 Place Based Working

The right specialist or supported accommodation should be at the centre of each of current and new large community developments. We see the strategy delivering this through a number workstreams, we also see with robust engagement we can reflect local nuances in the building and makeup of new and existing developments.

3.6 Climate Change and Air Quality

- 3.7 A key objective of the strategy is around sustainability this is both economic sustainability but also environmental sustainability. We see the work of the strategy having multiple positive impacts on reducing emissions. New build or converted properties will have to meet current environmental regulatory requirements, there is also likely to be scope for new specialist accommodation to break the mould on sustainable building design and use, there are a range of accommodation developments nationally that have delivered such benefits.
- 3.8 We also see the potential for those looking to downsize and move to more specialist or supported accommodation will mean the current housing stock will be better utilised and under-occupation will be reduced which in itself can negatively affect the environment.

3.9 Although not explicit in the strategy we also see with a more dispersed mix of different accommodation that the staff who support individuals could be more locality based and not required to travel to larger buildings-based provision.

3.10 Improving outcomes for children

3.11 Our long-term plan around children and young people is to enabling families to stay together when safe, increasing local foster placements, and listening more to our looked after children. Our ultimate aim is to see less of our children and young people living outside Kirklees. Where children and young people do require residential accommodation, it will be in smaller homes that do not have the design style of institutional settings.

3.12 Other (e.g., Legal/Financial or Human Resources)

- 3.12.1 There is no legal requirement for the Council to have a Specialist Accommodation Strategy. However, it is best practice to do so.
- 3.12.2 Although the draft strategy relates to executive functions it will also form part of the Kirklees Housing Strategy 2018-23 which in turn is part of the Council's Policy Framework under Article 4 of the Constitution and was approved by full council on 12 September 2018. The draft strategy does not change the Housing Strategy and supplements it with further detail and so accordingly does not require full Council approval.
- 3.12.3 There are a number of legislative drivers including, but not limited to, the Care Act 2014, Mental Health Act 1983, Autism Act 2009 and the Children Act 1989. For example, section 1 of the Care Act 2014 imposes a general duty on the Council to promote an individual's wellbeing including by reference to their day-to-day life (including care and support provided and the way it is provided), and the suitability of living accommodation.
- 3.12.4 The statutory Care and Support Guidance (updated June 2020) states that local authorities should develop a clear local approach to preventative support to delay or reduce the need for support. It is wider than care and support alone and should include the involvement of those responsible for public health, leisure and housing services. (See para 2.23 of the guidance).
- 3.12.5 The Care Act 2014 is clear on the limits of responsibilities and relationship between care and support and housing legislation (see s.23 Care Act 2014). Where the Council is required to meet accommodation related needs under housing legislation it must do so under housing legislation.
- 3.12.6 Local Authorities must ensure integrated care and support including prevention with health and housing services. The guidance at para 3.5 also refers to improving advice and information on housing options and to support them to live independently which contributes to requirements under the Care Act. Most accommodation for people with mental health needs will be met under section 18 of the Care Act 2014.
- 3.12.7 The Autism Act 2009 requires the needs of adults with Autism should be taken into account in local housing planning, design and allocation in line with local priorities.
- 3.12.8 The strategy may need to be regularly reviewed in the light of emerging health legislation and the Government's approach to adult social care policy and its proposed green paper.
- 3.12.9 The legal implications for the delivery plan arrangements and individual

projects arising out of the strategy will need to be considered on a case-by-case basis to identify legal powers and associated risks as such initiatives progress through relevant internal council boards.

- 3.12.10 The Council has a duty to comply with its Financial Procedure Rules and Contract Procedure Rules and when procuring goods, works and services above certain thresholds must procure in accordance with the Public Contracts Regulations 2015 and new rules on Subsidy Control which replace the State Aid rules.
- 3.12.11 Certain land transactions may be exempt from competition.
- 3.12.12 Section 149 of the Equality Act 2010 sets out the public sector equality duty replacing the previous duties in relation to race, sex and disability and extending the duty to all the protected characteristics i.e., race, sex, disability, age, sexual orientation, religion or belief, pregnancy or maternity, marriage or civil partnership and gender reassignment.
- 3.12.13 The public sector equality duty requires public authorities to have due regard to the need to:
 - Eliminate unlawful discrimination, harassment, and victimisation and other conduct prohibited under that act
 - Advance equality of opportunity between persons who share a relevant protected characteristic and those who do not share it; and
 - Foster good relations between those who share a protected characteristic and those who do not share it, which involves having due regard, in particular, to the need to- (a) tackle prejudice, and (b) promote understanding.
- 3.12.14 Having due regard to the need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to
 - (a) remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic;
 - (b) take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it, including, in particular, steps to take account of disabled persons' disabilities.
 - (c) encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.
- 3.12.15 Compliance with the duties in section 149 of the Act may involve treating some persons more favourably than others; but that is not to be taken as permitting conduct that would otherwise be prohibited by or under the Act.

The Equality Duty must be complied with before and at the time that a particular policy is under consideration or decision is taken - that is, in the development of policy options, and in making a final decision. A public body cannot satisfy the Equality Duty by justifying a decision after it has been taken.

3.13 Financial implications

3.13.1 The strategy sets out our long-term shaping ambitions around specialist accommodation and market development locally. At this stage it does not commit to specific spending requirements.

3.13.2 It is highly likely that there will be there will be future capital spending requirements linked to the findings of activities covered in this strategy's workplan. These requirements will be outcomes of pieces of work within the strategy, and they will be built on a sound evidence base.

3.14 Do you need an Integrated Impact Assessment (IIA)?

- 3.14.1 We expect a positive impact on equality issues as the strategy begins to deliver. By the very nature of those living in, or likely to require specialist or supported accommodation some of the protected characteristic groups are embedded within the objectives.
- 3.14.2 A Stage 1 Integrated Impact Assessment has been completed.

4. Consultees and their opinions

4.1 The consultation methodology and key findings:

Effective delivery of draft Specialist Accommodation Strategy relies upon collaboration between stakeholders from Health, Housing, Local Authority, and private sector providers working in an integrated way.

The consultation followed a two-phase approach.

PHASE 1. August 2021 - January 2022. Involvement of professional stakeholders in shaping high level strategic aims and objectives subsequently working with these stakeholders to meaningfully connect with people and communities in phase 2.

The involvement of partners in shaping our strategy followed a number of our stated key principles of partnership working and delivered against our statutory duties relating to consultation.

Key aspects of the strategy i.e., the aims and objectives and the full strategy were shared in advance with key stakeholders at their own existing meetings. Typically, hour long discussions were facilitated by Kirklees Council Integrated Commissioning and associated Service Involvement Managers. Members of the Specialist Accommodation Board were invited to join the meetings to hear directly from stakeholders.

A vertical slice of the health and social care system was involved and included front line workers as well as strategic groups, i.e.:

- **Health Partners**; CCG practice managers reference group, mental health rehabilitation and recovery group, Mental Health partnership group, CCG Clinical Strategy Group.
- Kirklees Council services including housing; Inhouse provision managers group, Housing Solutions professional teams working with - care leavers, 16 & 17 year olds, Hospital discharge, Domestic Violence, Rough Sleepers, chaotic families and physical disabilities. Children and Young People sufficiency colleagues. Hospital Discharge Social Worker team.
- **Provider Groups:** Mental Health and Learning Disability provider forums. Kirklees Care Association.

People were asked three key questions with regards strategy.

- 1. "What's already working well?"
- 2. "Are there any important amendments to this strategy?"
- 3. "Will you continue to be involved, supporting strategy and delivery going forward?"

Through two-way conversations with facilitators, suggestions and amendments were discussed and captured and follow up was offered. This information was shared with the Specialist Accommodation board in the form of a report and subsequently included in the specialist accommodation strategy. The revised strategy will be shared back with original stakeholders. The strategy covers an eight-year period and will considered live, being revisited and open for further shaping with stakeholders approximately biannually.

4.2 Key findings:

- "There must be no shocks and surprises" with regards accommodation development and
 wider relevant stakeholders in the system. The strategy delivery plan must describe the need
 for collaboration, especially around planning and work force.
- Alongside other delivery plans there must be a communication plan.

What's already working well?

- "Shared Lives".
- "Home First" as the default.
- The right blend of support and accommodation. E.g., "Independent living with intensive support".
- "Supported Accommodation", "Mainstream housing with packages of support". "Dispersed accommodation with floating support".
- Extra Care/ Housing with Care.
- Tactical approaches to working with the community who might be resistance to developments.
- Male only accommodation.

Important Amendments

- Sufficiency related to the following groups need to be carefully considered:
 - Carers Women Those fleeing domestic abuse Very specialist needs e.g.,
 Hearing loss and deaf Early onset dementia Care leavers (16-21) including those who are pregnant or are young parents People suffering from mental distress
- Accommodation is only as good as the wrap around support; Need strong links between accommodation planning and workforce planning.
- Understanding people's own outcomes. Accommodation is able to meet a range of outcomes desired by people living there.
- **Relationship based** (accommodation to enable maintenance of existing positive relationships) e.g., "staying close" model of housing for care leavers.
- **Accommodation must be enabling,** e.g., Need more opportunities for people to experience living away from home.
- Sustainability and resilience of the market; We must learn lessons from Covid.
- **Governance**: ICS, CCG and PCN's need to be involved in governance and development of delivery plans.
- Clarification of specialist accommodation; individual, affordable suitable accommodation with floating support and specialist accommodation can get confused.

PHASE 2 Engagement – Ongoing involvement of people and communities in the delivery elements of the work needed to meet our collective ambitions.

4.3 Ongoing involvement

All the stakeholder groups involved expressed a strong commitment for ongoing involvement, working co-productively on refresh of this strategy and the delivery of any associated action plans.

5. Next steps and timelines

5.1 The draft strategy has been revised taking into account consultation responses and submitted to Cabinet for approval as part of the Kirklees housing Strategy 2018-2023.

6 Officer recommendations and reasons

That Cabinet:

6.1 Note the findings of the consultation and approve the amended draft of the Specialist Accommodation Strategy 2022-30. This will allow services and partners to build on the strong foundations outlined and being delivered under the Kirklees Housing Strategy and better support the specific groups of people covered in the draft Specialist Accommodation Strategy. It also covers a timeframe that allows the provider market to effectively engage and developed the mixtures of accommodation and support outlined in the draft strategy.

7 Cabinet Portfolio Holder's recommendations

7.1 Portfolio Holder Cllr Cathy Scott recommends that Cabinet note the findings of the consultation, and the work of the wide range of contributors to the development of the strategy and approve the amended draft of the Specialist Accommodation Strategy for adoption.

8 Contact officer(s)

Chris Porter

Service Development Manager (chris.porter@kirklees.gov.uk)

Contact No: 71115

Donna Harkins

Housing Strategy & Partnership Manager (donna.harkins@kirklees.gov.uk)

Contact No: 73205

9 Background Papers and History of Decisions

- 9.1 Draft Kirklees Council Specialist Accommodation Strategy 2022 2030
- 9.2 Cabinet report dated 16 March 2021
- 9.3 2018 2023 Housing Strategy approved by Council on 12 September 2018

10 Service Director responsible:

Joanne Bartholomew – Growth & Regeneration <u>Joanne.Bartholomew@kirklees.gov.uk</u>