

London Borough Of Islington
Adult Social Care
Accommodation Strategy
2024-2034





DRAFT

Contents

Foreword - Councillor Williamson	4
Executive Summary	4
Our vision	4
The purpose	4
Coproducing and co-delivering our strategy.....	5
Our priorities.....	5
What does “good” look like?.....	6
1. Our vision and ambitions	7
2. Our principles.....	8
3. National drivers for change.....	9
4. Islington’s Population.....	10
Who we support	11
5. What we provide	11
Preventing, Reducing and Delaying Care Needs.....	12
Providing care and support for residents in their own home.....	13
Accommodation-based care services	13
6. Challenges and Gaps in meeting demand.....	14
7. Our Priorities.....	17
8. Outcomes	20
What does “good” look like?.....	20
9. Implementation and Governance.....	21
10. Supporting Documents.....	22
Appendix One – Needs assessment.....	22
Appendix Two – Extra Care Needs Assessment.....	22

Foreword - Councillor Williamson

Our ambition for 2030 is to create a more equal future for Islington, where everyone who lives here can thrive. I am delighted to introduce the first Adult Social Care Accommodation Strategy which builds on Islington's vision and priorities to tackle inequality. This strategy sets out our long-term plan for accommodation-based care and support services that enable residents to live independent, healthy and safe lives.

Islington is a small borough with the second highest population density in London and property values are high. This limits opportunities for developing and delivering accommodation-based services in borough. In the current economic climate, we face challenges and difficult choices. We will make best use of the resources available, working together across council departments and with providers to find creative solutions to the challenges we face.

I am proud of Islington's diverse and vibrant community. The rich experience and creativity of our residents and their carers has shaped the vision for care in accommodation and our long-term plan to develop the range of services that are responsive to the needs of the people who use them. Residents and carers will continue to shape our services over the coming years to build an offer that gives residents fair access to the right support at the right time in the right place.

Executive Summary

Our vision

Our vision for Islington residents is to live healthy, fulfilling, and independent lives in a safe place they call home. We will support residents with care needs to remain as independent as possible in their own home, balancing the individuals wishes and best interests while making best use of the public purse. Where this is no longer possible, we aim to support residents in bespoke, high-quality accommodation-based care services, as close to home as possible, helping to maintain links with their communities and support networks.

The purpose

The purpose of this strategy is to develop a long term, innovative plan for provision of accommodation for people with care and support needs. The plan requires a whole council effort to keep residents as close to home as possible. The plan sets out the roles and responsibilities in delivering this critical strategy for some of our most vulnerable residents.

Islington provides a range of equipment, technology and care and support that help people to maintain independent at home. For those who are no longer able to manage at home, there are bespoke accommodation options to meet a range of needs and preferences, including supported living services, extra care housing and care homes.

However, we recognise that there are challenges to providing residents with the right accommodation-based support in the right place at the right time. We are a small, densely populated borough with high property prices, aging housing stock and limited opportunity for new developments. Islington is in the midst of a housing crisis. Our population is changing, and complex care needs are more prevalent. Meeting the increased demand is made more difficult by budgetary pressures on the council.

This strategy provides a long-term plan to respond to these challenges, maximising opportunities, wherever possible, that support residents to live as independently as possible in the place they prefer, as close to home as possible, maintaining links to family and support networks.

Coproducing and co-delivering our strategy

This strategy has been shaped by residents who draw on our services, their carers and the people who support them. They have shared what matters to them and this has shaped the principles underpinning the strategy.

The strategy aligns with the coproduced [“I statements”](#).

The strategy is a key component of the council’s Strategic Asset Management Plan. The strategy identifies four priorities, which require us to work as one council in partnership with housing and care providers and wider sub-regional networks. Each stakeholder has a role to play to achieve our commitments.

There will be an action plan, implementation of which will be overseen by the Estates and Adult Social Care steering group, which includes representation from Adult Social Care – Strategic Commissioning and Investment, Homes and Communities and Community Wealth Building (the department responsible for planning, new build and the maintenance and management of the council’s property assets).

We will continue to listen to the people who draw on care services to shape and improve our offer.

Our priorities

Promote strengths-based approaches to maximise independence and prevent need.

Our first priority is to support people to remain within their own homes and communities. To achieve this, we will:

- Support our communities to be resilient, inclusive and safe.
- Design homes with the changing care needs of our tenants in mind.
- Develop and promote innovative models of care and support to prevent use of more institutional forms of care.
- Enable residents to move between higher levels of support to greater independence at the right time for them.

Maximise use and potential of existing capacity

Islington provides a range of services. We must work together to ensure we are making best use of the resources we already have. We will:

- Implement effective processes and guidance for effective, creative, and fair use of resources.
- Identify opportunities to improve our existing building stock and embed technology to create enabling environments. This will include ensuring our day centres, supported living and care homes are fit for purpose and achieving the best results for our residents.
- Work with residents, providers of housing and care and multi-disciplinary partners to continuously improve and enrich the offer, developing our services to be more inclusive, safer, more responsive and enabling.

- We will provide clear information and advice to guide choices and reassure our residents.

Develop new capacity

Islington is underserved by a number of services. We are committed to:

- Work towards the completion of schemes which are currently under development.
- Develop processes which create opportunities to maximise use of our estates to meet need.
- Work creatively with housing and care providers and our North Central London network to develop services to meet residents' needs.
- Continue to give voice to residents and carers to shape the offer in line with principles of inclusivity and accessibility.

Develop our evidence base to support service development

Accurate information about our services and the residents who use them will continue to help us to develop services that are responsive to the needs of the population now and in the future. We will work to improve the reliability of our intelligence.

What does “good” look like?

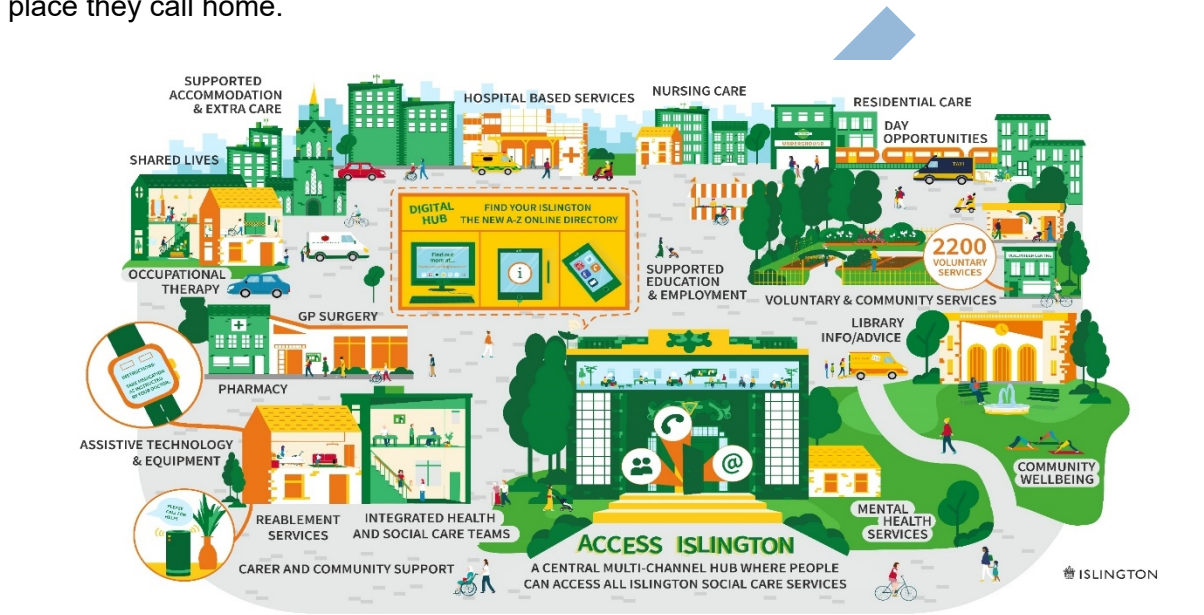
We will know we have achieved our vision if we:

- Reduce reliance on more institutional forms of care
- Help more residents with care needs to remain in their own homes
- More residents receive care closer to home
- Fewer residents will be delayed in hospital and other intensive support settings when they are ready for greater independence.
- More residents tell us they are receiving the right care and support for them.

1. Our vision and ambitions

This Adult Social Care Strategy is an integral part of the Council’s Strategic Asset Management Plan and requires a whole council effort to make best use of our resources and assets for the benefit of Islington residents.

The Islington Adult Social Care vision, in line with [Islington Together 2030](#), is for Islington to be a place made up of strong, inclusive, and connected communities, where regardless of background, people have fair and equal access to adult social care support that enables residents to live healthy, fulfilling, and independent lives. We want people to live in a safe place they call home.

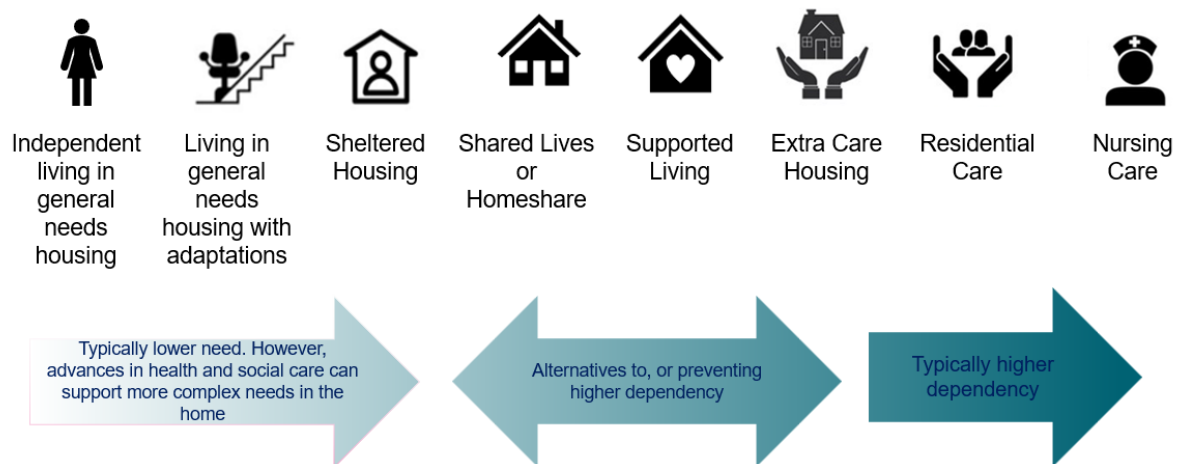


Islington Adult Social Care Offer – achieving better outcomes for residents



To do this, we will provide the right support at the right time in the right place. Wherever possible we want people with social care needs to be able to remain living independently in their own home, balancing the individual’s wishes and best interests while making best use of the public purse. When a person needs accommodation-based services, we will support them to remain as close to home as possible, helping to maintain links with their communities and support networks.

This strategy focuses on a range of bespoke accommodation services for when people can no longer remain living independently in their own home. The types of accommodation below are not an exhaustive list - we are committed to exploring innovative models of care and housing that may emerge over the coming years.

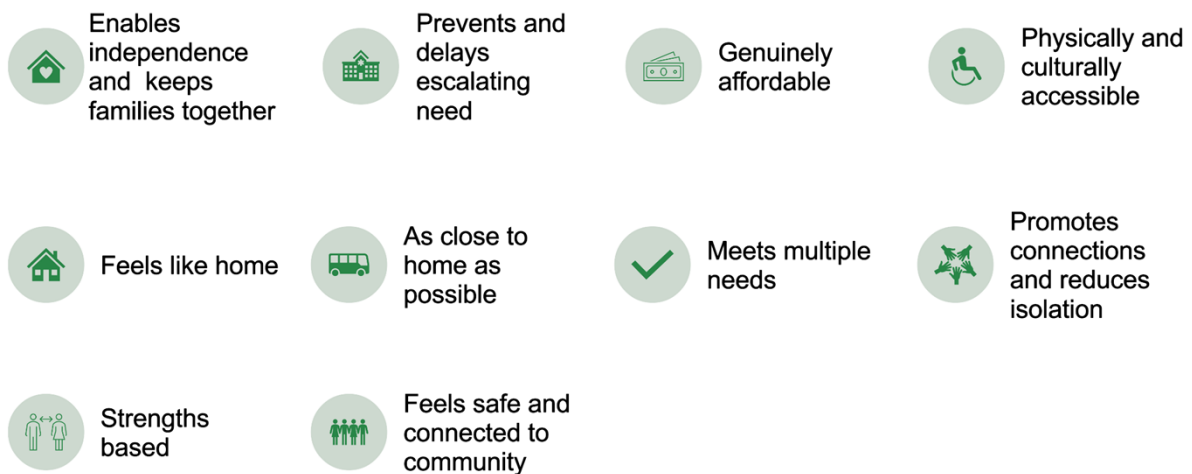


It would not be possible to achieve our vision and ambitions, without the commitment and support of colleagues within the Council and partners across the borough.

- We will work with Community Wealth Building (the department responsible for planning, new build and the maintenance and management of the council's property assets) to ensure that the housing and care needs of people in receipt of social care are at the forefront of decision-making about the development of the Council estate.
- We will work with Homes and Neighbourhoods to nurture community networks which support people to remain as independent as possible in their own home.
- We will work with partners in Health and the Voluntary and Community sector to identify unmet need and bridge gaps in provision.
- We will reach out to care and housing providers to foster a shared vision and a collaborative approach to meeting residents' needs.
- We have listened to the voice of residents and the people who support them to develop the guiding principles of this strategy. We will continue to involve them in the development of services.

2. Our principles

The eight principles guiding this strategy were developed over time, through listening to feedback from residents about our offer and speaking to the people who provide care and support to our residents. Between April and September 2023, we held seven focus groups involving over 100 residents, service users and carers to understand what was important to them.



To deliver accommodation and care services in line with the principles, it is critical to consider:

- Security of tenure
- Workforce development
- Planning processes
- Building quality
- Community networks and neighbourhoods
- Market responsiveness

3. National drivers for change

Several government policies and strategies provide the context for this strategy. However, it is underpinned by the ethos of the [Care Act 2014](#) which made it a statutory requirement to extend choice of accommodation for those with care and support needs and to provide services when transitioning from children's to adults' services to promote progress towards independence.

The government published the [People at the Heart of Care; Adult Social Care reform](#) in 2021, with ambitions to improve community connectedness, enabling independence in one's own home and having good choice of alternative housing and support options. [The national strategy for autistic children, young people and adults: 2021 to 2026](#) aims to tackle health and care inequalities and to build the right support in the community and supporting people in inpatient care.

[Building the Right Support 2015](#) supports NHS and local authority commissioners to reduce the number of people with a learning disability and autistic people in a mental health inpatient setting and to develop community alternatives to inpatient care. [Housing guidance – Building the right home](#) – has been developed jointly by NHS England, the Local Government Association and Association of Directors of Adult Social Services; to support local authority commissioners to expand the housing options available for this group of people who form part of the Transforming Care Programme. There are extreme pressures on affordable housing due to the unaffordability of private housing in Islington and the rest of London. In this context, planning is critical to ensure a good supply of affordable, high-quality accommodation for residents with care needs.

4. Islington's Population

Islington's population has changed in the last decade. The number of residents has increased by 5.1% since 2011, and this has been driven by a 12.6% increase in the number of people aged 65 years and over.¹

Increased life expectancy is contributing to our aging population. From 2001 to 2020, life expectancy for males and females in Islington has increased from 73.3 to 78 and 79.5 to 82.6 years respectively. Unfortunately, there has been no increase in years living in good health. Older adults are on average living with a disability for the last 16-18 years of their life, which will be driving increasing demand for social care.

Dementia prevalence is increasing in the population. As of May 2024, the NHS estimates that the number of people in Islington aged 65+ with dementia is 1,459². By 2030, the number is expected to reach 2,056³, although there is evidence that this is an underestimate⁴. There are 190 people under the age of 65 with a diagnosis.

Nationally, trends suggest that a growing number of people aged 50 years and over are ageing without children. Many people in the LGBTQ and disabled communities have no access to the informal care that offspring provide to help their parent to remain in their own home.⁵

In England, Islington has the third highest prevalence (about 3,886 people in 2022) of severe mental illness and the fifth highest prevalence (about 45,000 people in 2022) of common mental disorders. With population growth, there will be approximately 117 more people with severe mental illness by 2029.⁶

It is predicted that the number of people with a Learning Disability in the borough will rise from 4,447 in 2020 to 4608 in 2035.⁷ People with Learning Disabilities are living longer and are more likely to have early onset of comorbidities such as dementia.

The number of people with a diagnosis of Autism Spectrum Disorder is expected to increase from 1870 in 2023 to 1971 in 2035.⁸

During the pandemic, many residents experienced "deconditioning" during lockdowns due to inactivity and social isolation. Delayed access to care, support and health services resulted in more people experiencing complex health and social care needs.

The combined effects of the demographic changes and the legacy of COVID19 has, and will continue to, result in a growth in demand for services, including accommodation-based

¹ [Islington population change, Census 2021 – ONS](#)

² NHS Primary Care Dementia Data, May 2024.

³ [Alzheimer's Society. Local Dementia Profile Islington. London : Alzheimer's Society, 2021.](#)

⁴ [Number of dementia cases could be 42% higher than previously estimated by 2040. UCL Home. \[Online\] 27 10 2023.](#)

⁵ [OurVoices Layout1 Final ALL HR.PDF \(awwoc.org\)](#)

⁶ [Camden & Islington NHS Foundation Trust Report to Islington Council Health and Social Care Scrutiny Committee Oct 2022](#)

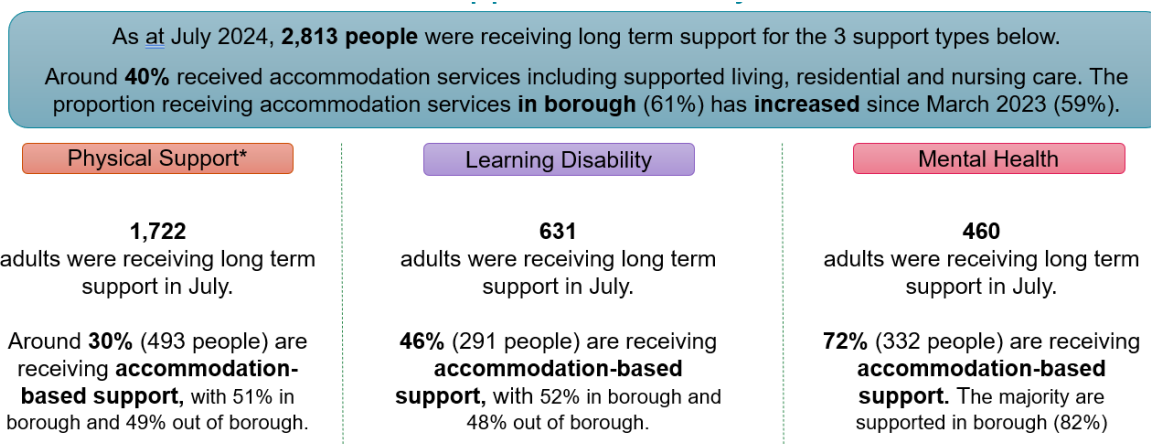
⁷ [Projecting Adult Needs and Service Information System \(pansi.org.uk\)](#)

⁸ [Projecting Adult Needs and Service Information System \(pansi.org.uk\)](#)

services but also a requirement for greater level of skill in the workforce to support people to with complex needs, maximise independence and sustain and improve wellbeing.

Who we support

Our Adult Social Care needs assessment helps us understand current and future demand for Adult Social Care services and shortfall of in-borough supply of accommodation. The full needs assessment is included in Appendix One.



Data Source: LTS001b, Internal data July 2024.

* *Physical Support* refers to residents with memory, cognition and physical support needs. This includes people with dementia. The vast majority are older people.

5. What we provide

Care and support services are provided in a range of settings that best meet the individual's needs. Residents are supported to maintain independence in their own home for as long as possible. Adult Social Care practitioners work with residents to identify their strengths and assets to prevent need according to the [Islington Adult Social Care Building Strengths for Better Lives Framework](#)⁹. Adult Social Care also works with partners in health in line with Principle Five of the NHS Reducing Length of Stay programme to encourage a "Home First" approach. This approach prevents lengthy stays in hospital and the over-prescription of care which leads to greater dependence.¹⁰

However, there is a range of bespoke accommodation-based services for when needs change.

Decisions about the package of care and setting take the individual's best interests into consideration. However, effective, and fair use of resources and value for money must also be considered. For example, the cost of different care homes can vary significantly. Services are means tested (except where the resident has been in hospital under the Mental Health Act). or where a person receives free care and support as part of Continuing Healthcare. However, residents, with their family or carers, can opt to pay additional third-party contributions if they opt for a service that is more costly than the service being offered.

⁹ [Islington Adult Social Care Building Strengths for Better Lives Framework](#)

¹⁰ [NHS England » Principle 5: Encourage a supported 'Home First' approach](#)

Table 1 Current provision

Setting	Housing provision	Care and Support Provision	People
General needs housing	Council, registered housing provider or private housing	<ul style="list-style-type: none"> No onsite care provision. Care and support will often be provided by family, friends, or neighbours. Residents may also be in receipt of assistive technology, aids and adaptations, floating support, homecare, respite care or Homeshare. They have access to voluntary and community sector services for information, advice, and support. 	Residents aged 18+ who may have current or future Care Act eligible needs.
Older people's housing schemes (Sheltered, Retirement, LifeSmart)	Provided by Registered Housing Provider - Islington hold nomination rights for around 75% of lets Self-contained Provision of concierge type service or facilities management.	<ul style="list-style-type: none"> No onsite Care provision. Emergency call system Access to communal areas but no activities coordination Residents may be in receipt of assistive technology, aids and adaptations, floating support, and homecare. Residents can access voluntary and community sector services for information Shared Lives Carer provides long term, short term, overnight or respite care. 	Residents aged 55+ who may have current or future Care Act eligible needs
Shared Lives	Carer's accommodation	<ul style="list-style-type: none"> Tenancy sustainment Homelessness prevention support 	Residents aged 16+ with Care Act eligible needs
Supported Housing	Council or Registered Housing Provider housing Self-contained or shared accommodation Provision of security, facilities management, and tenancy support.	<ul style="list-style-type: none"> Onsite Care provision (personal, domestic care) Extensive communal facilities and activities Care Call system Assistive technology Aids and Adaptions 	Typically, younger adults aged 18-64 who have experienced multiple disadvantage including homelessness, substance misuse, and young people leaving care.
Supported Living	Council or Registered Housing Provider housing Self-contained or shared accommodation Provision of security, facilities management, and tenancy support.	<ul style="list-style-type: none"> Onsite Care provision (personal, domestic care) Extensive communal facilities and activities Care Call system Assistive technology Aids and Adaptions 	Typically, younger adults aged 18-64 with Learning disabilities or Mental Health needs. Residents may be supported until end of life.
Extra Care Housing	Council or Registered Housing Provider housing Self-contained units Provision of security, facilities management, and tenancy support.	<ul style="list-style-type: none"> Onsite Care provision (personal, domestic care) Extensive communal facilities and activities Care Call system Assistive technology Aids and Adaptions 	Typically, older people aged 55+ with care needs however there are examples of successful mixed aged Extra Care schemes.
Residential care	Private or shared ensuite rooms within a care facility.	<ul style="list-style-type: none"> 24-hour Onsite care (personal, domestic) Communal facilities 	Adults with care and support needs
Nursing Care	Private or shared ensuite rooms within a care facility.	<ul style="list-style-type: none"> 24-hour Onsite care (personal, domestic) Communal facilities 	Adults with nursing care needs



Preventing, Reducing and Delaying Care Needs

Early intervention and prevention are key to Islington’s approach to enabling people to live healthy and independent lives. We recognise the importance of community networks to wellbeing and safety. Social isolation is known to negatively affect mental health and physical wellbeing and is a risk factor for early mortality.¹

- Our estates house vibrant communities which are enhanced by community groups, forums, events, and opportunities for participation. The Estates’ caretakers, maintenance, and repairs teams are a valuable resource as they have daily contact with residents. Trained in Islington’s care values, they can identify residents who are vulnerable and signpost to social activities and services.
- Older people’s housing schemes (Sheltered and LiveSmart) are operated by several housing providers in Islington. Islington holds 100% nomination rights to 13 of these schemes and 50% nominations rights to 15 schemes. The schemes have a manager on site providing facilities management and residents can access an emergency call system. These schemes facilitate social interaction and mutual support networks. These schemes have been shown to help to prevent or delay the need for more institutional forms of care and help to reduce falls and hospital admissions.¹ There are a total of 673 units available to older people. Demand in Islington is high. In June 2024 there were 207 residents on the waiting list and wait times were 9 months for the most urgent cases and up to 12 months.
- Adult Social Care currently has nomination rights on fifteen units per annum to provide general needs housing to residents with Learning Disabilities. These are on a single tenancy-based option only.
- The Access Islington Hubs and Family Hubs are one-stop-shops, offering early intervention and prevention services for residents. These hubs deliver advice and support around work, money, food, home, family, wellbeing, and safety. They provide holistic support, ensuring residents get access to timely housing support when needed.
- The council also supports a vibrant and diverse voluntary and community sector through grant funding and commissioning.

Providing care and support for residents in their own home.

There are a range of options to help people to remain safe and independent in their own homes, prevent the need for more institutional forms of care and to step down to greater independence.

- The Community Equipment service provides equipment such as walking aids, specialist beds, hoists, and bathing equipment.
- The Assistive Technology Service provides residents with personal alarms and sensors that can be activated to alert a 24-hour support centre. Innovations in Assistive Technology are opening up new opportunities to maximise independence, increase safety, reduce social isolation, and prevent crisis.
- The council offers grants via the Disabilities Facilities Grant fund, for disabled homeowners and private or housing association tenants, to make home adaptations, helping improve accessibility and safety around the home, restore dignity and improve home comfort. Council tenants can access adaptations via the council.
- The council commissions a range of mental health and wellbeing community services that support people to remain well, and to live as independently as possible in their own homes, including reablement provision, floating support, housing support on estates, day opportunities and community groups, one to one support, volunteering and peer support opportunities.
- Islington commissions over 1200 packages of care provided to residents living in their own home.
- Respite services are offered to provide carers with a break from their caring responsibilities and help to sustain the caring relationship in the long term. Islington Council provides a 10-bed respite service which is accessed by around 50 residents with learning disabilities over the year. We also commission one residential care bed to provide respite to carers of residents aged 65 and over.
- Islington residents can also access Homeshare schemes. Homeshare services bring together older people and others who need support to stay in their homes (the householders), with young people and others (the home sharers), who provide companionship and ten hours per week of low-level practical support in return for an affordable place to live. Currently, only a handful of Islington residents access the Homeshare scheme. On average a match lasting nine months can avoid costs to statutory services of over £20,000.
- Islington's Resident Support Scheme provides support to residents facing severe financial hardship. One off payments can be offered to help with housing costs such as rent shortfall or rent deposits, or meet the costs of purchasing essential household items. This is valuable assistance to those who are stepping down from higher support settings into general needs housing.

Accommodation-based care services

As at the start of 2024, we provide or commission the following accommodation services in-borough to residents with a range of support needs.

Shared Lives

The Shared Lives scheme matches individuals with care needs with carers who share their home, family, and community life, to give care and support to the individual either long term, or for respite - for day visits or overnight. In October 2023, the Islington scheme was supporting 30 residents aged 16+ all of whom have Learning Disabilities. Four also had mental health needs.

Supported Housing

Islington commissions 231 units of supported housing for people with complex and multiple needs. Some services have 24-hour support on site, whereas others have fewer staff hours or a visiting support offer. One service is female only. Services meet a range of needs within these services, including mental health and substance misuse. The services play an important role in the prevention of homelessness.

Supported Living

Islington commissions a number of supported living schemes in borough that have capacity for 137 residents with learning disabilities, 139 residents with complex mental health needs and 40 residents with mental health requiring lower level of support.

Extra Care

The Mildmay Extra Care scheme provides housing and care to up to 87 adults aged 55+ with a range of support needs including frailty, social support, learning disabilities and mental health needs.

Nursing and Residential Care

We commission 150 beds largely for adults aged 65 and over with nursing needs and dementia or mental health needs.

We provide and commission 24-hour residential care in a number of care homes including;

- 78 beds for residents aged 65 and over with frailty and/or dementia,
- 19 beds for people with a primary support reason of learning disabilities
- 24 beds for people who require specialist care for a primary support reason of mental health needs
- 15 residential care beds for older men with alcohol misuse and mental health care and support needs.

6. Challenges and Gaps in meeting demand

There are limited opportunities to develop sufficient, high quality and affordable housing and care services within our densely populated borough and with ever leaner budgets. The scarcity of in-borough services necessitates searches outside of Islington for care homes and supported living placements.

With limited financial resources, we need to constantly balance choice with value for money decisions. At times, difficult decisions must be made with regards to an individual's package of care. Managing the tension between our responsibility to make best use of the public purse and the wishes and best interests of our residents can be challenging.

Of over 2,800 residents who receive long term services, we support the majority, 60%, in their own home, with a range of community-based services. If the needs of the resident can no longer be met in their own home, they will be provided with care within a bespoke accommodation-based setting. In July 2024, approximately 61% of demand for accommodation-based services was met within Islington. This meant that 39% (around 440

people) were living in homes out of borough. The shortfall impacts on residents' journeys from hospital to rehabilitation to home, creating delayed discharges and step-downs.

There are inherent challenges to developing the capacity the borough needs and residents cannot always be placed in their location of choice. While every effort is made to source a placement close to support networks, disruption to family and community is at times unavoidable.

Furthermore, housing stock is aging, with associated issues around accessibility, homeliness and climate resilience. This poses challenges for residents with care needs wishing to remain in their own homes as well as for those needing to access accommodation-based services.

The cost-of-living crisis has had a negative impact on residents' ability to live well at home and to sustain their tenancies.

Despite the increased demand for social care provision, Central Government has cut its core funding to Islington Council by 70% since 2010.¹¹ There is pressure on the Housing Revenues Account and significant demand for council housing. It is crucial that new developments are financially viable, but housing must also be affordable for residents. This can only be achieved through rare grant funding opportunities or complex lease arrangements with registered housing providers.

A more nuanced understanding of local demand helps to identify the pressure points and gaps, particularly for more specialist or complex needs, outlined as follows:

- **Supported living / supported housing** – There is very limited supply of new/additional suitable and high-quality buildings in which to develop new schemes to meet unmet demand, offering either self-contained units or shared accommodation. New build developments have lengthy timelines and challenges around financial viability.
- **Extra Care** - Islington does not place residents into out of borough Extra Care Housing. However, taking into account the new Extra Care scheme due to open in 2026, Islington is estimated to have a shortfall of around 127 Extra Care units in the borough (see Appendix Two – Islington Extra Care Needs Assessment)
- **Care Homes** - Around 40% of residents receiving a care home service are living out of borough. Despite the ambition to move away from this more institutionalised model of care, there will remain a significant shortfall in capacity.
- **Behaviours of concern** - Since the pandemic, there has been an increase in the number of people with dementia, learning disabilities and mental health issues requiring more intensive care and one to one support due to their behaviour and associated risks.
- **Residential care for adults aged 18-64** - Islington has a very limited amount of in-borough provision for the relatively small number of younger adults (up to the age of 64) with Learning Disabilities, neuro-disabilities and physical support needs who would benefit from residential care.
- **Older people with learning disabilities** - People with learning disabilities are living longer, however the prevalence of dementia in this community is higher with onset occurring at a younger age compared to the rest of the population. Islington therefore anticipates a growth in demand for care services for older people with learning disabilities. There is a need to upskill the workforce in both the Learning Disabilities sector and the Older People and dementia care sector to meet this emerging need.

¹¹ [Issue - items at meetings - Budget Proposals 2019/20 - Comments of the Policy and Performance Scrutiny Committee | Democracy in Islington](#)

- **Autistic People** - Islington lacks services which can make reasonable adjustments, and specialist accommodation services, to meet the growing demand for autistic residents including supported living and residential care.
- **Complex and multiple needs in younger adults** - Residents who are placed in mental health services are presenting with increasingly complex and multiple needs, which can be difficult to manage within existing supported living provision. These include people with comorbid chronic substance misuse and mental health, and women with very complex mental health needs, requiring a trauma-informed approach, who fall between the gaps of long-term high dependency rehabilitation and residential care or supported living.
- **Step down options** - There are currently insufficient options to enable residents to step-down from hospital, supported living / supported housing to Council tenancies when they meet their goals of independence. The lack of affordable capacity creates blockages along the hospital discharge, mental health and learning disabilities pathways and the available options are restrictive and life limiting.
- **Respite care** - There is increasing demand for respite services to support carers and the people they care for to maintain wellbeing and sustain the caring relationship. Demand for residential and nursing care respite in 2022-23 was on average 3 beds at any one time. We have also seen an increase in need for respite for carers of residents with Learning Disabilities.

DRAFT

7. Our Priorities

Priority One: Promote strengths-based approaches to maximising independence and preventing need.

Adult Social Care, Housing and New Build teams will work together to shape the general needs housing offer to promote strengths-based approaches and reduce social isolation. The aim will be to enable residents to live in their own home for as long as possible and reduce reliance on institutional forms of care.

- Strengthen relationships between housing and social care officers including;
 - facilitation of a programme of joint workshops
 - dissemination of referral and escalation routes
 - alignment in locality-based working between the two departments.
- Adult Social Care will seek opportunities to influence health trusts to provide re-abling support to patients to prevent deconditioning during hospital stays, which can create greater care requirements upon discharge.
- Ensure new build design principles and standards are in line with best practice to ensure that general needs housing and social care accommodation enables independence and adapts to changing need. This includes standards around dementia, learning disability and neurodivergent friendly design, wheelchair access and technology enabling design.
- Shape Disabled Facilities Grants policy according to best practice and promote innovative use of the grants to support people to maintain independence in their home.
- Expand Shared Lives to meet dementia and mental health needs.
- Promote Homeshare to residents who would benefit from low level preventative support.
- Explore opportunities for intergenerational schemes and activities within estates and care settings.
- There are currently arrangements in place to allocate general needs housing to residents who are stepping down from hospital into the community.
 - There are 15 allocations for people with learning disabilities. Adult Social Care will maximise use of these.
 - Adult Social Care will formalise the arrangements with Housing regarding allocations for residents with mental health needs.

Priority Two: Maximising use and potential of existing capacity

- Adult Social Care will review our void management processes and systems to utilise available capacity in the borough and achieve best value for money. We review care plans annually or as needed, in partnership with care providers to proactively identify residents who;
 - Wish to move back to Islington and whose needs can be met in a local service.
 - Are ready for step down or move on. This will ensure that residents are receiving the right support to maximise their independence and to free up accommodation within the Learning Disabilities and Mental Health pathways.
- We will raise awareness about the Resident Support Scheme and improve processes to expedite decision making for those stepping down to accommodation in the community.
- Adult Social Care will work with Supported Housing services and explore creative contracting opportunities to support the development of more enabling approaches, which promote progression to greater independence.
- When deciding on the best package of care, social care practitioners must balance an individual's wishes and best interests while making best use of the public purse. Adult Social Care will develop an Affordable Care policy to provide a framework to guide these decisions.
- Capital Delivery and Adult Social Care will work together to identify capital funding opportunities to update council owned buildings to be enabling and climate resilient.
- Adult Social Care will seek funding opportunities to embed assistive technology in accommodation-based care services.
- Housing and Adult Social Care will provide accessible information and advice regarding accommodation options and reassure residents about the quality of services.
- Adult Social Care will work with the Islington Housing Association Partnership to garner commitment to the strategy's principles. We will maintain open dialogue to share insights and feedback, identifying what works well and how the partners support each other to improve the accommodation offer.
- Community Wealth Building will implement best practice in general needs and specialist housing design to enable residents to maintain independence for as long as possible and remain in their home until end of life.
- Adult Social Care, Housing, other social housing providers and care providers will work together to develop creative approaches to allow flexible use of housing to accommodate a resident in situ as their care needs change.
- Adult Social Care commissioners will review the configuration of beds in Islington's commissioned care homes to ensure that we are responsive to the increasingly complex needs of the population and respite needs of carers.
- Adult Social Care will work jointly with health colleagues to ensure continued provision of multidisciplinary support for our care homes and Extra Care Housing services to enhance the care and wellbeing of our residents.
- Adult Social Care commissioners will support care providers to develop new skills in their workforce to support more complex needs, manage behaviours arising from unmet need and older people with learning disabilities.
- Adult Social Care will work with housing and care providers to implement strategies, ensuring services are climate resilient and able to operate in and provide a safe environment for residents receiving care during the more extreme weather conditions we are likely to experience over the coming years.
- Adult Social Care will consult with service users and carers to ensure services are led by principles of inclusivity and accessibility with regards to disability, LGBTQ, and cultural requirements.

Priority Three: Develop new capacity.

Work is underway to build three new schemes.

- An 11-bed supported living scheme for people with a primary support need of learning disabilities, due to open in 2024. The scheme will support people with a range of needs including physical, complex and behaviours that challenge.
- A 17-bed 24hr supported living scheme will be opening in 2025. The service will provide long term support for adults with complex mental health needs.
- The construction of a 60-unit Extra Care scheme is underway on the Holloway prison site and is due to open in the autumn of 2027.
- Adult Social Care and Capital Delivery will work together through the Adult Social Care and Estates Steering Group to ensure that decisions about redevelopment of estates consider Adult Social Care need wherever possible, to maximise limited resources to build capacity in borough.
- Adult Social Care and Capital Delivery will work together to identify capital funding opportunities to support new developments.
- Adult Social Care will influence planning principles and ensure we use our section 106 powers. This will help to maximise potential of building developments to grow our in-borough capacity for Extra Care Housing and Supported Living accommodation.
- Community Wealth Building and Adult Social Care will develop governance processes to ensure that Adult Social Care are consulted on developments at planning pre-application stage and are involved in decisions about nominations rights on new developments.
- Adult Social Care will harness opportunities within the framework of the Islington Housing Partnership to; build relationships with housing providers, promote the Adult Social Care vision, and agree shared principles for accommodation in Islington.
- Adult Social Care, Housing will explore opportunities with housing and care providers for joint working to coproduce bespoke housing solutions to meet social care needs.
- Adult Social Care will work in partnership with North Central London local authorities to identify sub-regional opportunities to;
 - increase capacity in for complex and specialist health and social care needs including nursing care, complex mental health, autism and multiple disadvantage.
 - Develop a common approach to market management strategies for effective use of resources.
 - Share best practice in the development of Extra Care, Supported Living, and care homes.
- Adult Social Care will involve residents and particularly service users and carers in the development of accommodation services, which will meet the care needs of the population. Service design will be led by principles of inclusivity and accessibility with regards to disability, LGBTQ, and cultural requirements.
- Housing and Adult Social Care will identify opportunities to support people who are discharged from hospital and are unable to return home in the short term, to prevent placements into temporary accommodation or placements into residential care which can lead to increased reliance.

Priority Four: Develop our evidence base to support service development.

Community Wealth Building will use section 106 powers to ensure new buildings are designed with climate change in mind, ensuring residents' safety and service continuity during extreme weather events.

Accurate information about our services and the residents who use them will continue to help us to develop services that are responsive to the needs of the population now and in the future.

- Adult Social Care will improve processes to support better data quality.
- Intelligence from brokers will be harnessed to better understand demand and availability in the local market.
- Adult Social Care will work with Children's services to forecast demand for services arising from children transitioning to adulthood, and particularly those young people who have profound and multiple learning disabilities and those with severe mental illness, who are likely to have accommodation needs into adulthood as the capacity of families to support them living at home diminishes.

8. Outcomes

Our vision is that residents in receipt of social care are enabled to live healthy, fulfilling, and independent lives. We want people to live in a safe place they call home.

What does "good" look like?

We will know we have achieved our vision if we:

- Reduce reliance on more institutional forms of care.
- Help more residents with care needs to remain in their own homes.
- More residents receive care closer to home.
- Fewer residents will be delayed in hospital and other intensive support settings when they are ready for greater independence.
- More residents tell us they are receiving the right care and support for them.

We will measure our success as follows.



Residents are supported to maximise independence in their own home.

We will know if this is happening if the proportion of long-term service users living in residential care homes decreases and the proportion supported to remain in their own home increases.

In Nov 2023, 14% of long-term services users were living in residential care, while 77% were receiving care services in their own home.



Residents receive care and support closer to home and their support networks.

We expect to see a reduction in the percentage of residents living in out of borough placements. The average distance from home will decrease.

In November 2023, of the 634 residents placed in accommodation services, 64% were placed out of borough. 19% (of total) were living within another North Central London (NCL) borough, 24% lived in a London borough outside of NCL and 20% lived outside of London.



Residents are receiving the right care in the right place.

We will know this is happening if

- the proportion of patients delayed in hospital is reduced. We are working with the Integrated Care Board to collect borough level information regarding the number of people who are delayed in hospital due to lack of care home availability.
- The proportion of residents who tell us in their care and support plan review that their accommodation is suitable to help meet their needs and outcomes increases.

9. Implementation and Governance

The Estates and Adult Social Care steering group includes representation from Adult Social Care – Strategic Commissioning and Investment, Homes and Communities and Community Wealth Building (the department responsible for planning, new build and the maintenance and management of the council’s property assets). The aims of the group are;

- To ensure joint working across Council departments to enable timely strategic planning to meet the accommodation needs of those who draw on care and support in Islington.
- To be able to identify those new developments or redevelopments on the horizon, ensuring that the right people are engaged and being clear about what the needs are to aid planning together.
- To maintain relationships across all the relevant departments and ensure constructive dialogue.

- To oversee the implementation of the ASC Accommodation strategy, acting as a first point of sign off for projects to ensure there is strategic oversight that supports us to achieve the ambitions set out in the strategy.

Key decisions will be agreed by the senior leadership teams of Housing, Adult Social Care and Community Wealth Building and through the governance arrangements for the Strategic Asset Management Plan.

10. Supporting Documents

- 2023 ASC Accommodation Needs Assessment (Appendix One)
- Extra Care Needs Assessment (Appendix Two)
- [Housing Strategy 2021-2026: A Home for All \(islington.gov.uk\)](https://www.islington.gov.uk)
- [Adult Social Care Market Position Statement](#)
- [Islington's Housing Providers' Partnership](#)

Appendix One – Needs assessment.

Appendix Two – Extra Care Needs Assessment

DRAFT