

# Supported Housing Redesign

Market Engagement – May 2021

# Welcome to today's session

## **Purpose of Today:**

- Give providers an insight into the Council's early direction for transformation of Supported Housing as this becomes a priority for the organisation
- Start conversations about our priorities to test whether we have identified all the key issues
- Provide an outline of next steps including a timeframe

# SH Re-design – Key Principles (Draft)

The principles below reflect the vision of the LD Strategy which is currently being refreshed.

- ✓ A house is my home, not a placement
- ✓ People are able to live in and feel part of the community
- ✓ Right support that enables and maximises independence including employment opportunities and individuals to take control of living an ordinary life
- ✓ Solutions that are flexible and can accommodate people's individual needs that allow them to remain independent for as long as possible
- ✓ Reliable and safe care whilst ensuring value for money and good use of technology and digital solutions
- ✓ Solutions that offer choice, control and flexibility – type of housing, ability to move on
- ✓ Solutions that are financially sustainable for the Council and our Providers
- ✓ Managing expectations of what an ordinary life will mean

# Suffolk County Council and Supported Housing

## Definition:

- ✓ 2 or more people in a shared house with individual tenancy arrangements receiving care and support.
- ✓ A cluster of individual homes in proximity and supported by the same provider

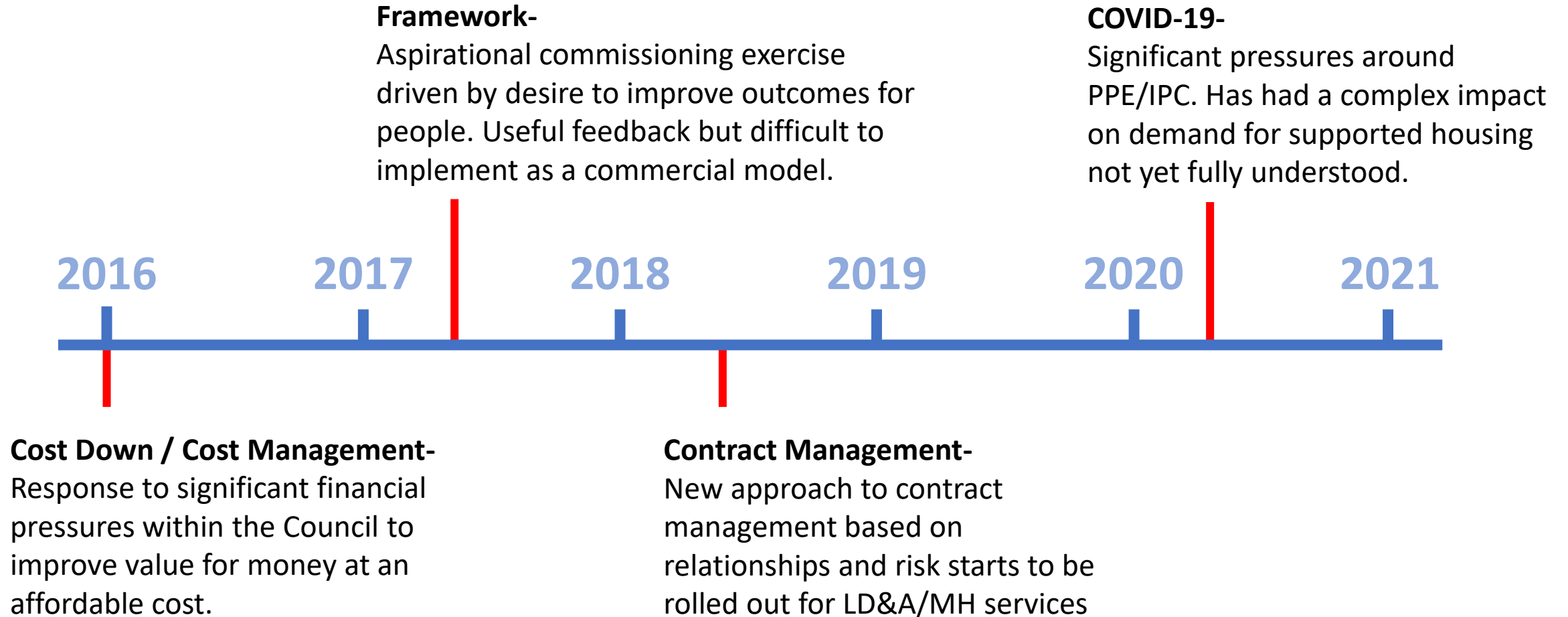
Includes services supporting individuals with Learning Disabilities, Autism, Physical Disabilities, Acquired Brain Injury, and some Mental Health Support needs.

Supported Housing Forecast  
Spend across ACS for  
2021/2022

> **£57,000,000**

(21% of ACS's overall  
budget)


# History



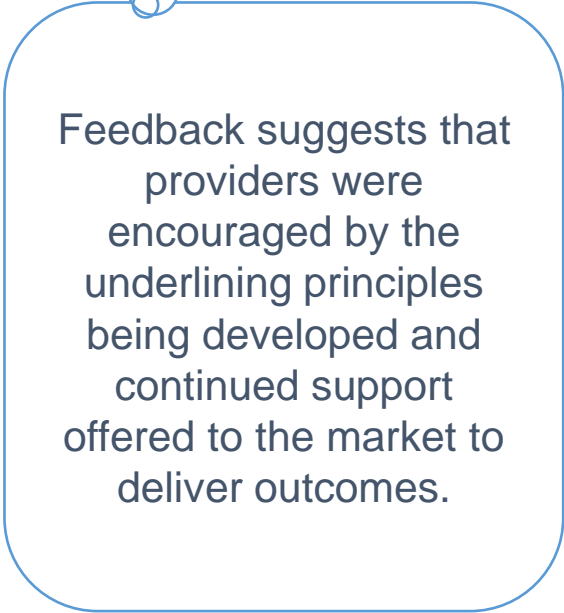
# Learning from the 2017 Framework: Market Engagement

Co-production was undertaken and welcomed within the provider and wider customer market with some key underlining principles.

- Implement and embed the key priorities and deliverables within the LD Strategy.
- Everybody agreed to wanting to drive better quality and flexible services.
- Aim was to achieve stability of providers in the current market and not to recommission services or reduce or remove providers from the local market.
- To ensure a range of providers are available to individuals including those that provide more specialist services.
- Address the gaps in services across Suffolk localities for example, North of the County.
- To promote and increase Customer Choice, Personalisation and Progression into further independence whilst achieving best value.
- Aim to have greater, more structured engagement with the market to ensure consistency in terms of quality, the design and approach to services (e.g. greater personalisation) and price.



The Aspiration is still there. It is the method to fulfil those aspirations that we need to get right.



Feedback suggests that providers were encouraged by the underlining principles being developed and continued support offered to the market to deliver outcomes.

# Learning from the 2017 Framework: Procurement to Framework



**We didn't know enough about our market leading to:**

- An aspirational Procurement model and methodology was developed leading to a disproportionate number of Providers already delivering services in Suffolk not bidding or successfully gaining entry onto the Framework.
- Imbalance between quality and price.
- Inability to drive innovation and flexibility to deliver the support in a more efficient way allowing service offers to respond to changing needs throughout their lives.
- A Call Off process that did not incentivise providers to bid for new work with a lack of clarity on how to access new work.
- No understanding for Providers or Contracts on the role of the Call off process in relation to voids.
- One size fits all model with a lack of understanding on the range of needs between differing cohorts.

Overall Successful Bids	Lot 1: LD and / or Autism	Lot 2: Acquired Brain Injury	Lot 3: Physical Disabilities
43%	43%	30%	57%

# Learning from the 2017 Framework

## Contract Management & Performance Monitoring



- Little investment in contract management pre Procurement to understand gaps between the market and deliverables.
- Post Procurement. A lack of performance and quality monitoring tools within Framework Contracts
  - leaving providers unclear on expectations.
  - Leaving contracts staff unclear on expectations.
  - Inability to drive up quality through performance.
- A lack of defined support to enable move-on impacting on personal choice and hindering personal growth and development. How do we get this right?
- No developed or planned co-ordination with Districts and boroughs on strategic planning. Reprovision, decommission, voids management.
- Insufficient Void Management Programme leading to high levels of voids and greater micro-commissioning.



# Current Support to Individuals across Suffolk

> over 800 Individuals Supported

by

> more than 40 Providers

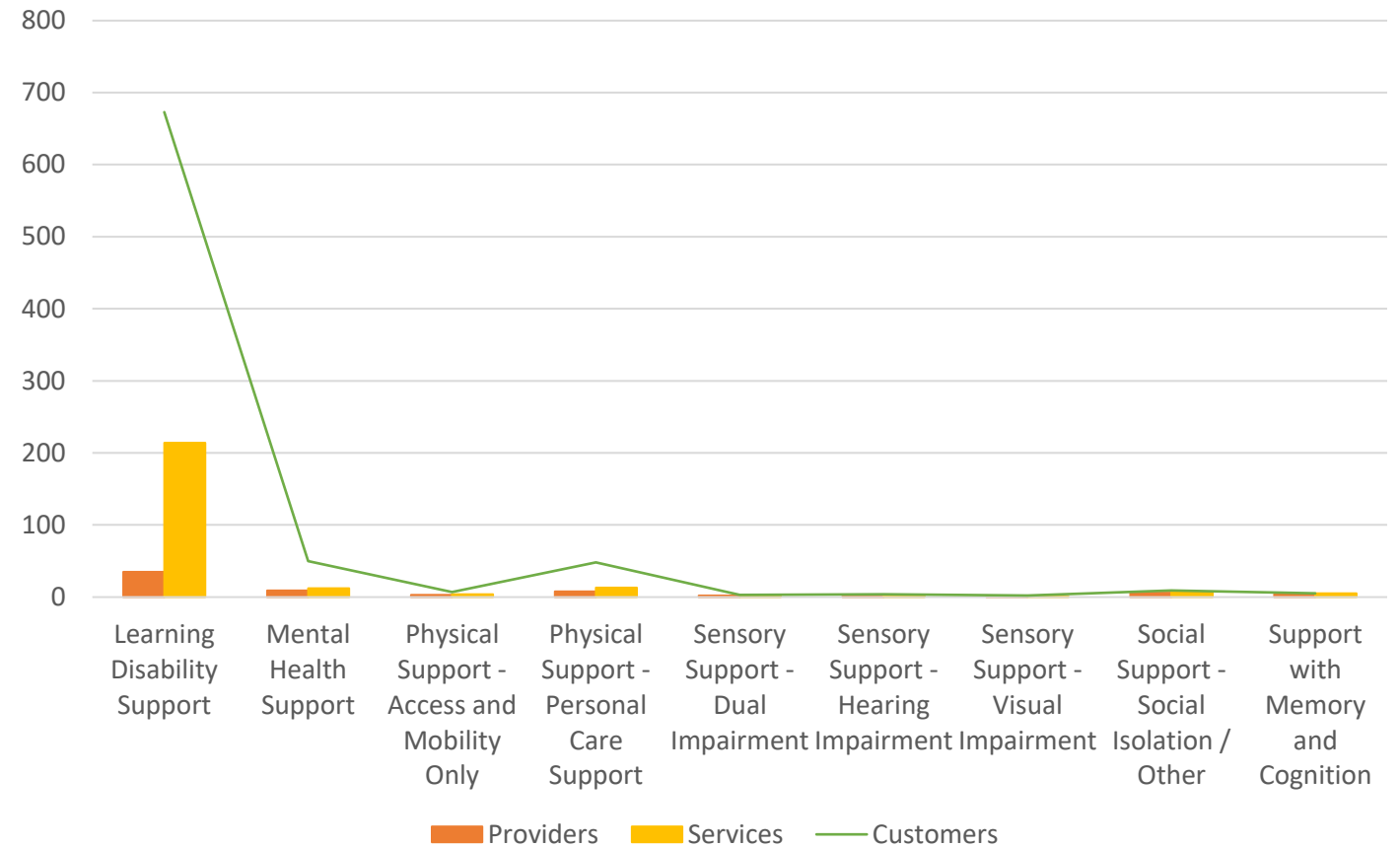
within

> over 220 Supported Housing settings

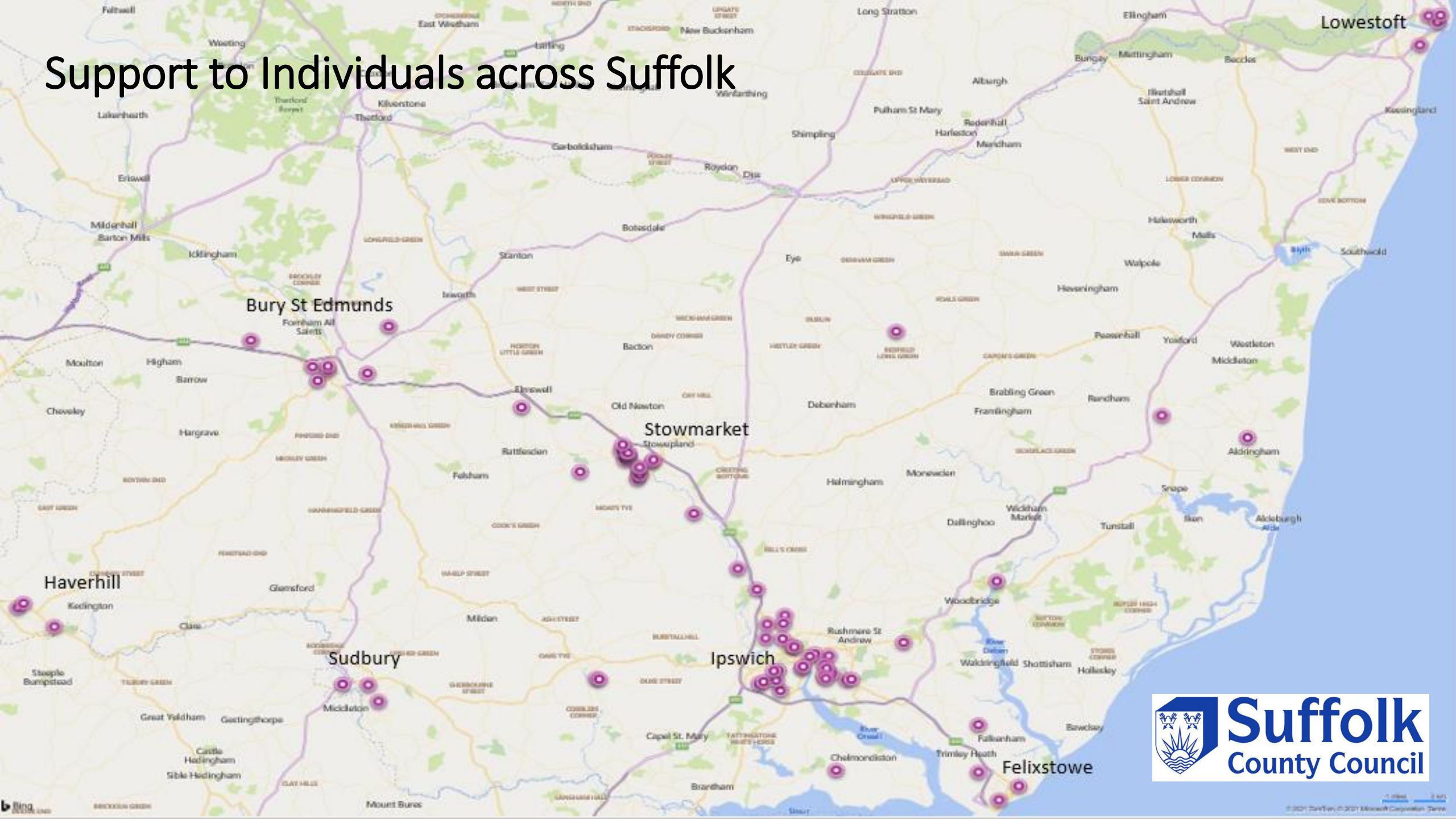
across

## 9 Primary Support Reasons

Individuals Supported Across PSR, Providers and Services

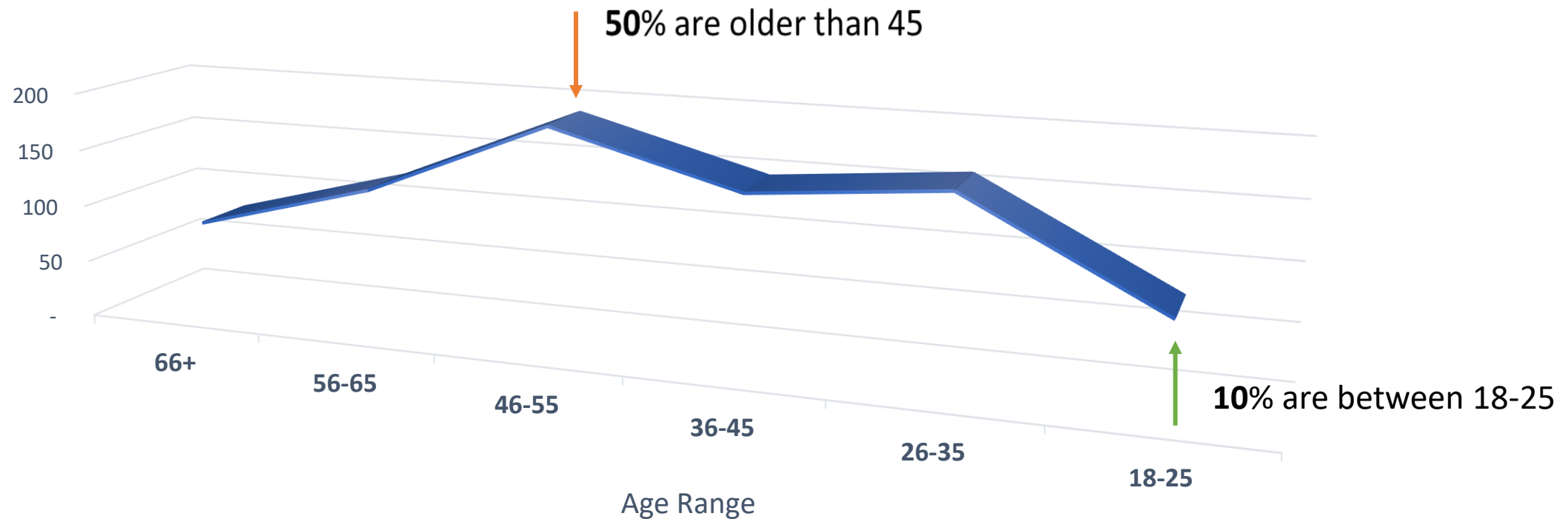


# Support to Individuals across Suffolk



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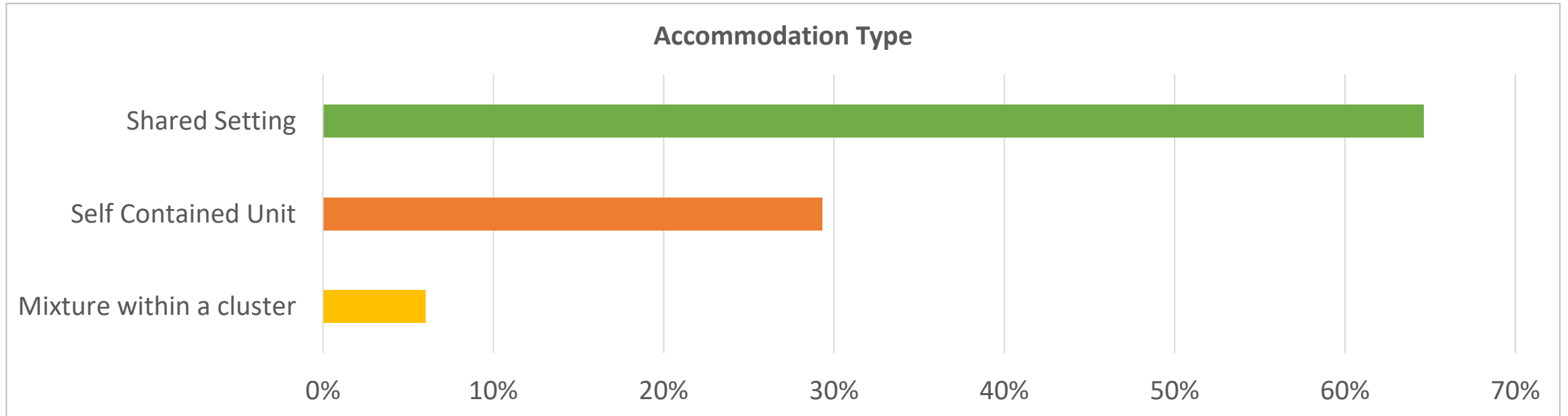
The age range of individuals living in Supported Housing settings is 18 – 80.



Is the support offer for individuals in younger age groups the same as the service offer for those in the older age groups? Should these cohorts be mixed?

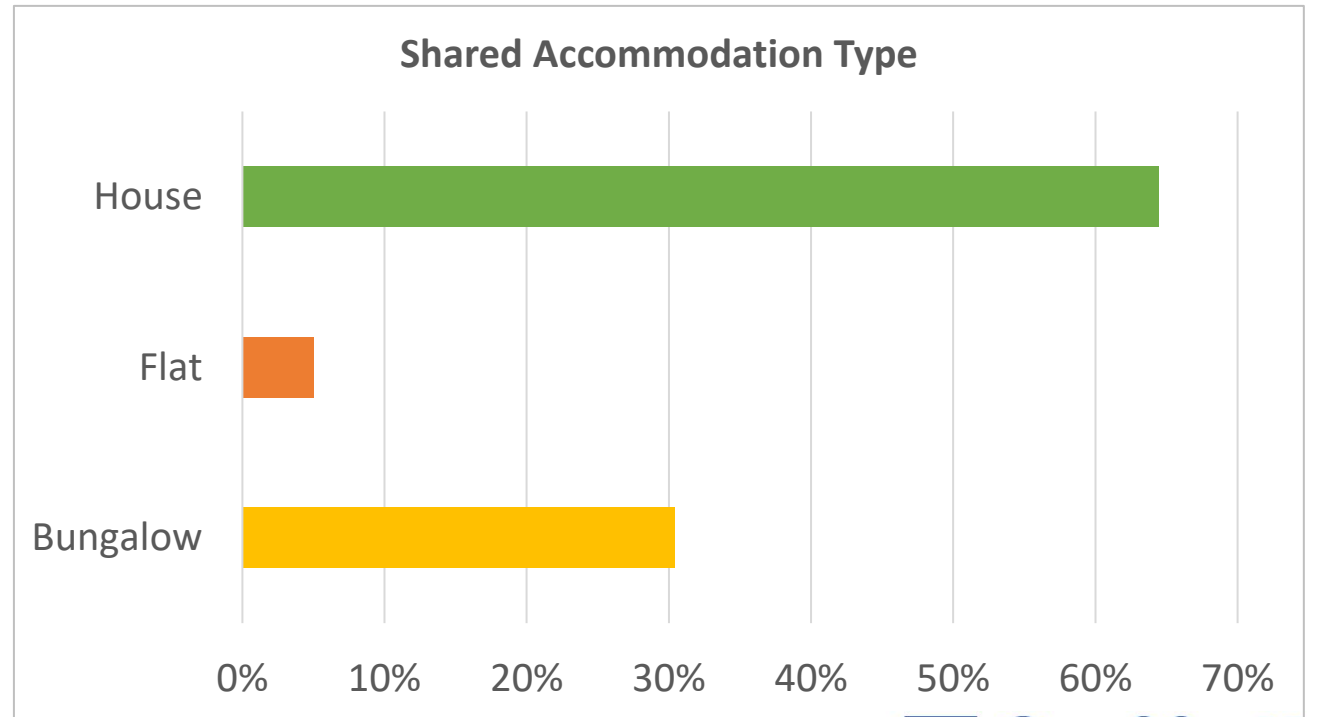
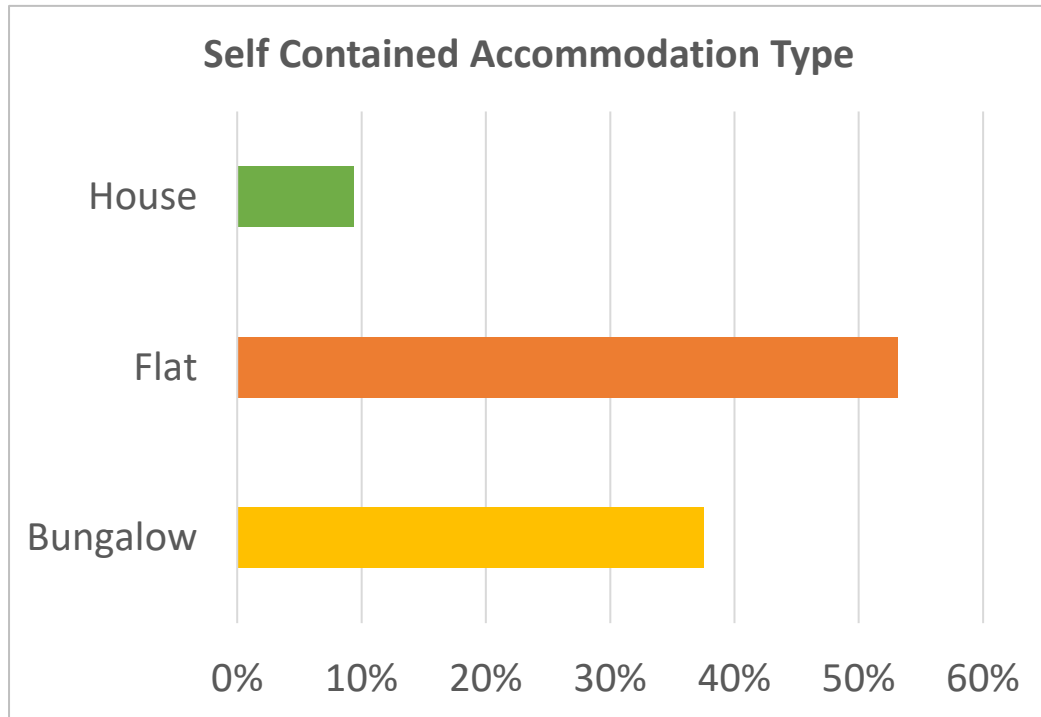
# Supported Housing Accommodation

The current Supported Housing portfolio is made up of shared, self contained and a mixture of both types of accommodation. The most common being the traditional shared accommodation model.



# Supported Housing Accommodation

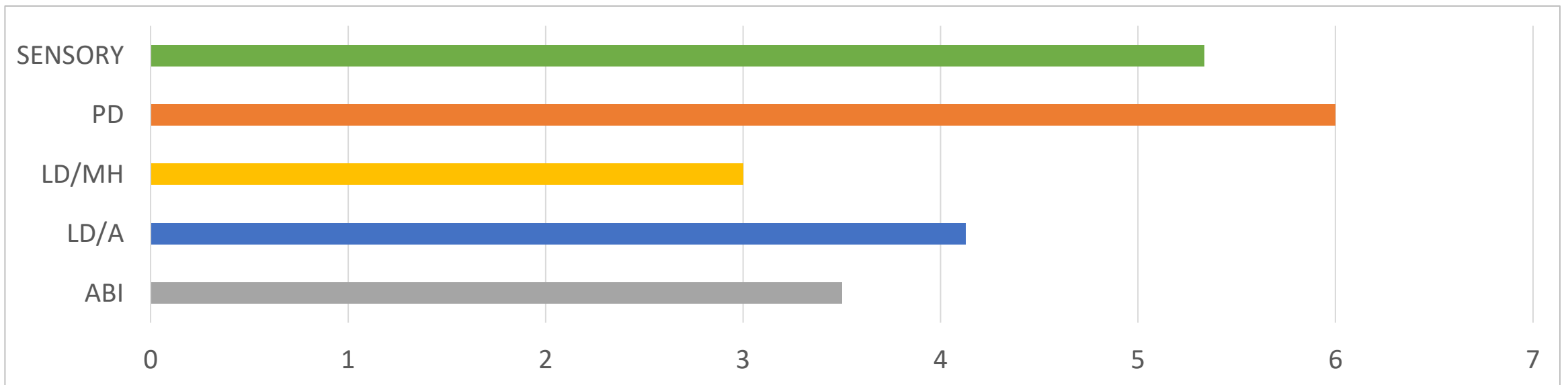
We know that Self Contained accommodation services are, by majority, Flat and Bungalows. Traditional Shared Accommodation services are typically supported within a house.



# Supported Housing Accommodation

**Physical Disabilities** and **Sensory** Services tend to deliver shared care and support within **larger building** complexes such as **flats** or **Bungalows**. There are generally more individuals supported within that cluster under one service.

**LD/A** tends to deliver support in a **shared housing** environment to a **lesser number** of individuals in a **single service**.



# Voids within Supported Housing

**There will always be an expectation that services will carry voids throughout the duration of their life cycle.**

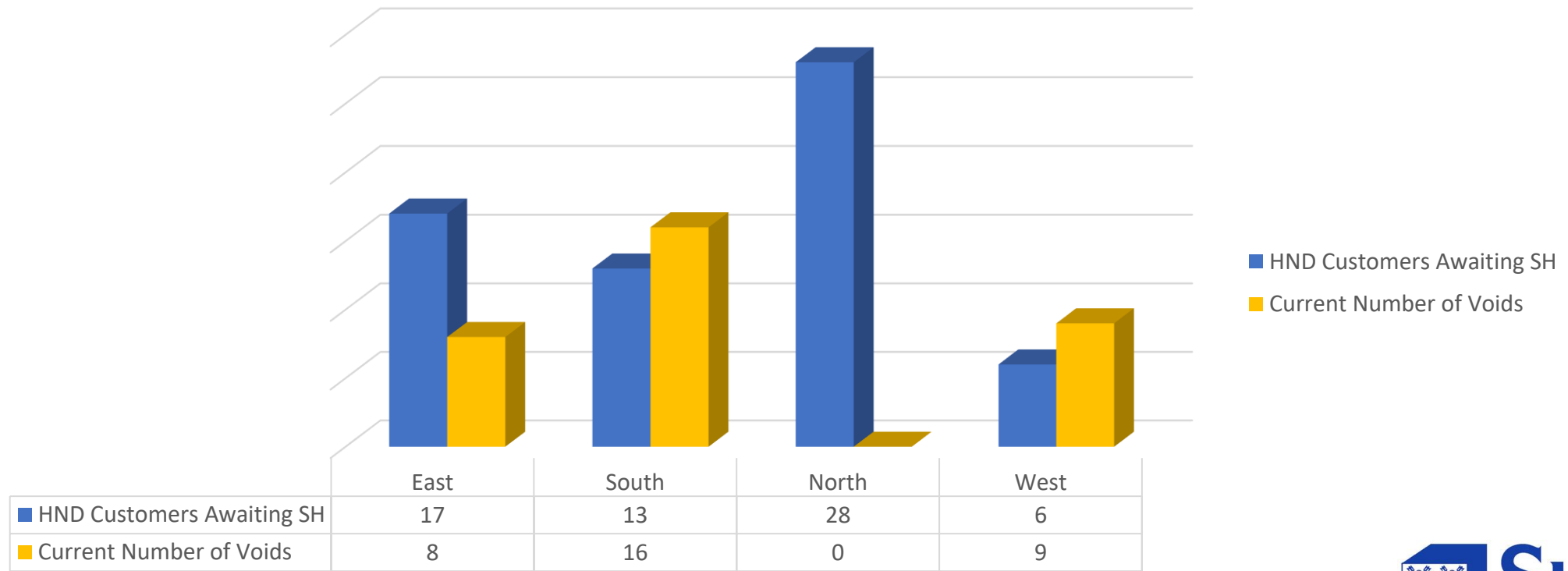
Voids within our services should be key to the throughput of demand. But some areas are not seeing this leading to more individual and bespoke services being commissioned.

## **Key Data on current voids across Suffolk.**

- 15% of Commissioned Supported Housing services currently hold a void.
- 97% of voids are within Shared Accommodation.
- 55% of the voids support individuals who are between 40 – 80.
- 20% of the voids support individuals who are +65.
- 12% of the voids, at present, solely support individuals under the age of 40.
- 3% of long term voids are due to staffing and recruitment issues.

# Voids and Demand for Supported Housing

Our Housing needs data confirms a demand for Supported Housing **however** our void levels and periods remain high. This is suggesting that there is a mismatch between the supply and demand for Supported Housing.





# What we think based on scoping and engagement so far.

- There is still a demand to live in or close to towns with good transport links and access to community and retail services, day services and voluntary and paid employment opportunities.
- Some provision is necessary in more rural areas as it is important for keep close to networks and families and, still embrace personal choice.
- Supported Housing accommodation available is not always suitable to support the needs and aspirations of the people waiting for Supported Housing.
  - The void levels is telling us that the market is saturated with supported housing services of 3-4 bed/general needs housing stock.
    - *Excluding Waveney who needs all types of support and accommodation available.*
  - There is a need to pursue alternative models of housing e.g. hub and spoke.
  - Understanding the implications and impact on existing housing models due to increased life expectancy.

## Our initial lines of enquiry

- Is two models enough to support the cohorts we are commissioning services for?
- What are the constraints enabling move on and what should it look like?
- Are services flexible enough to meet the changing needs of the customers?

# Supported Housing Accommodation

## Current Services

The accommodation portfolio is made up of Private and Housing Association / Registered Social Landlords.

Private sector rental has become a more prominent feature in Supported Housing settings over the last 10 years. It has played an increasingly important role in filling the gaps in demand.

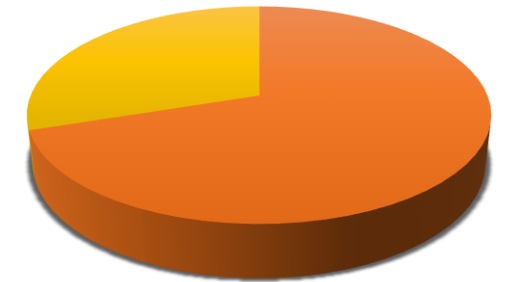
## Contractual statement between landlord and support provider is separate

- CQC Regulatory Requirement for regulated services.
- Provides security of tenure where there may be a breakdown in support.

## Working with Landlords

- Ensure rents are affordable, allows the option to move into paid employment
- Security of tenure.
- Understand the relationship between Support Provider and Landlord.
- Increase suitable accommodation offers to meet local demand.
- Redesign, Reprovision, Decommission services that do no longer meet the demand.
- Engage in Digital solutions alongside service providers.

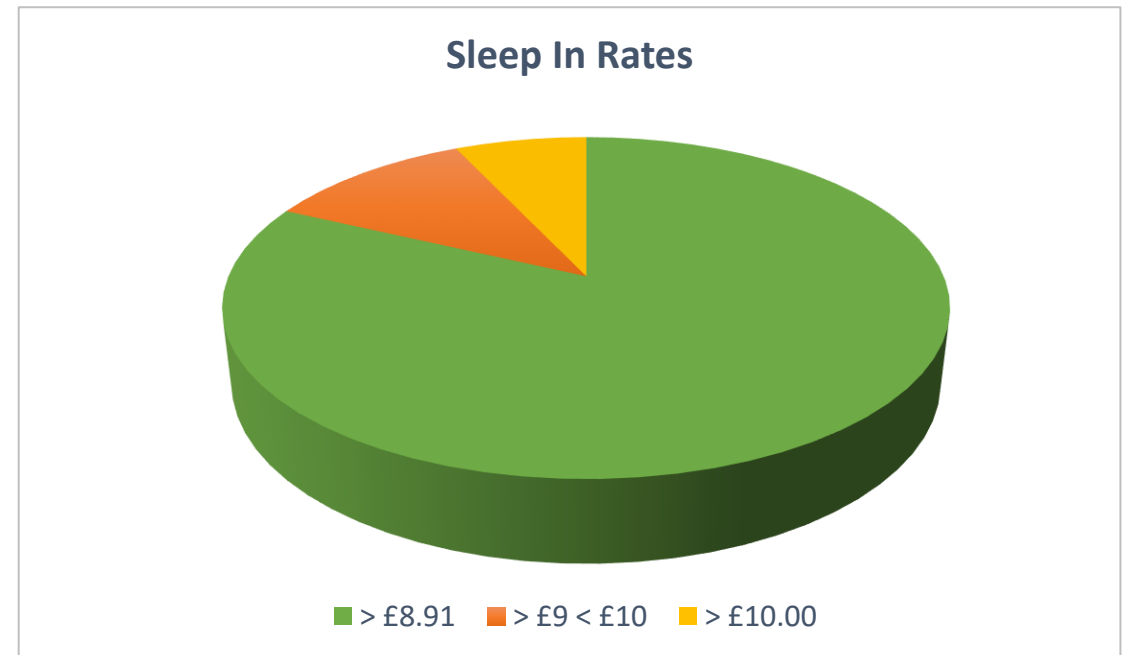
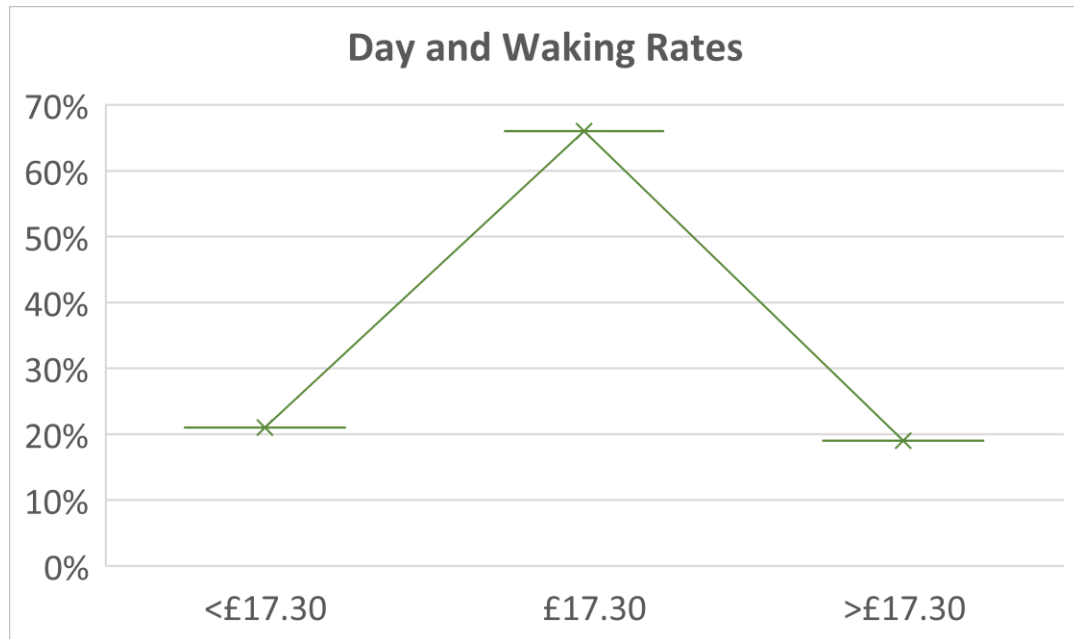
**This will require buy in, investment and time.**



- Housing Association
- Private Landlord

# Financial Sustainability

Both the Council and Providers have faced significant financial pressures for a number of years. Post Cost Down and following subsequent Inflationary increases the commissioned rates for Supported Housing have become standardised resulting in a **Flat Rate Pricing Model**. This has led to less flexibility in support available within services, interest / acceptance of new support packages and sustainability pressures within the market whilst expectations still rise.



Do we need a more diverse pricing model to reflect differing needs? Does this include other factors outside of support? What would this look like?

# Financial Sustainability

## **Rate Differences between Home Care and Supported Housing.**

It is clear, and has been for some time, that the rates between Home Care and Supported Housing have become much wider over the last few years.

Some of you will also know that the Locality + tender is out and offers higher rates that you may feel are comparable to Supported Housing services. Particularly around Sleep In.

**Rationale** behind the higher rates for Locality+ is that those services will be carried out by a single member of staff, as a single package of care. Travel and NLW implications are factored into those rates.

- **Home Care** has its own model. Through the framework it is understood what is being commissioned.
- **Supported Housing** is not so clear. There are multiple staff teams and shift patterns. Some will work a day and night shift so are already on site, some will not. There is no one size fits all model. Many anomalies that we need to work through to understand.

# Recruitment and Retention

## Cause for Concern.

We understand that there are huge pressures across all sectors of the Care and Support market in Recruiting and Retaining Staff .

Within Supported Housing specifically we are told that issues arise from:

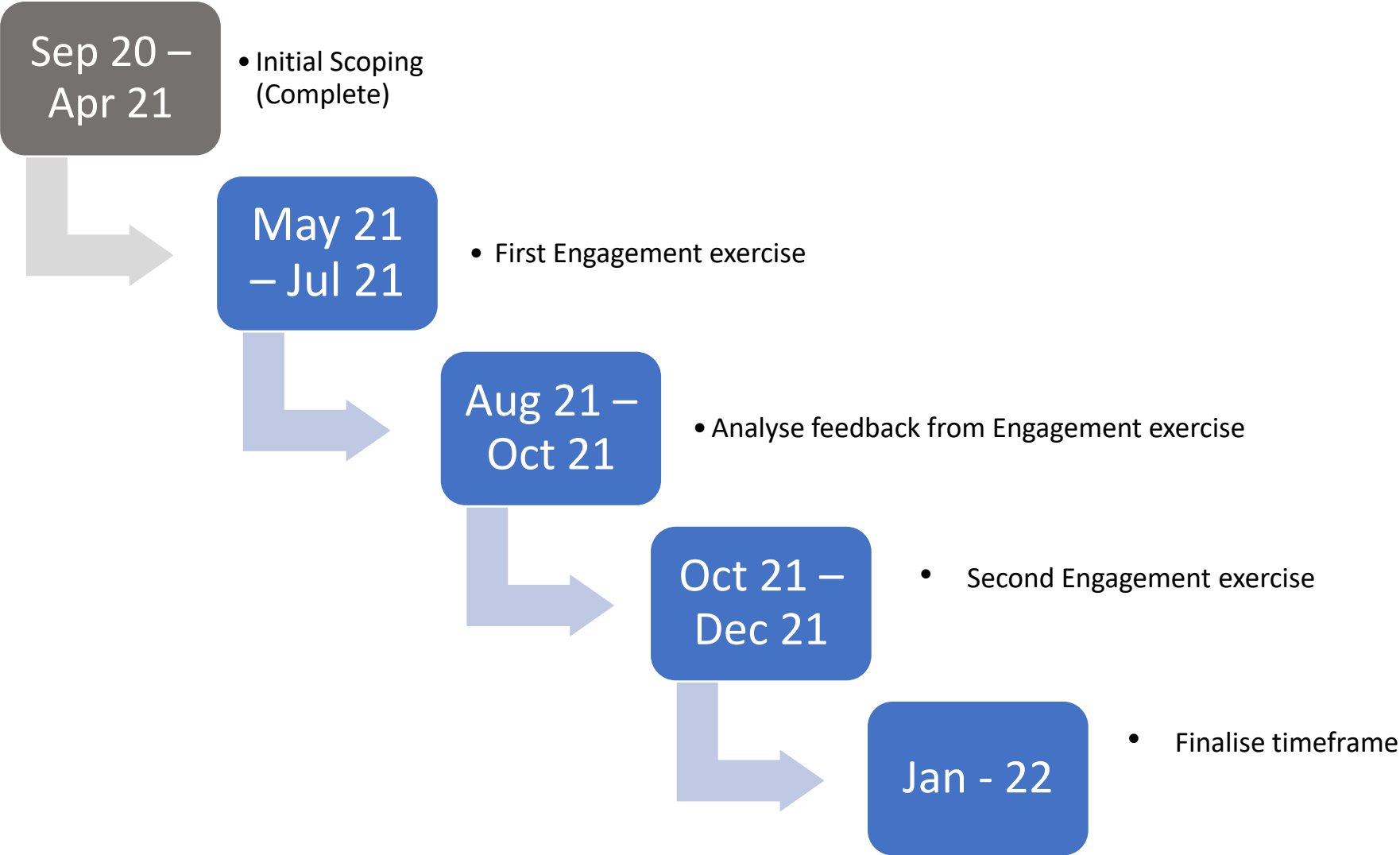
- Competition from other sectors – e.g. retail.
- Rates of Staff Pay are not comparative with the challenges support workers face within some services.
- Geographical location of services requires support workers to be able to drive to work. There are little or no public transport links for some.
- Requirement to support individuals out and about in the community requires support workers to hold a driving licence to drive customer mobility cars or service vehicles.
- Rates paid by the Council are not reflective of the need to cover a higher wages or support costs for bespoke training required to support some individuals in services.

Previously collated data in 2020/21 from 43% of our providers tells us that the average wage paid in Supported Housing is £9.47. With the reflective cost (including additional staff costs to the provider) of an average £12.89.

# What are we going to do differently?

- **KEY:** We are interested in doing it right. We cannot do this alone!
- This is your chance to tell us something in addition to what we know. It may be something that we may not have covered or you think we do not know?
- Recognise that it is more than just Procurement. Reflect on the Learning.
- We want to ensure the market understands a new Framework is considered as a firm foundation of how we want to work with you. This will include Pricing models, Quality and Performance, Contract Management and future Service Development.
- We want to manage expectations and tell you from the outset that the Framework is not a platform to increase the volume of 'new' business. Although there will be opportunity, it is a platform to reshape and continually improve the supported housing services in situ to ensure outcomes for current and new customers.
- We acknowledge there will be a need to support customers with higher complexities and challenging behaviours and this requires a differing model of cost and support. We want to work with stakeholders to understand cost pressures, support and service modelling and additional requirements such as training moving forward.
- We know there is a need to understand the geographical implications and placement of Supported Housing taking into consideration recruitment and staff retention and the impacts of location on leading an ordinary life.

# Proposed Timeframe (Subject to change)



# The work going forward

- We will send you a link to the presentation on our website
- Continued engagement – questionnaires/ meet individual providers and stakeholders
- Contract Officers will be contacting you
- Collate and analyse feedback
- Present findings to next Market Engagement.
- Formal communications around the procurement will be available via Suffolk sourcing



# Who else are we communicating with?

- Customers and their Families via ACE and SPCN
- Health and Alliance Partners
- Internal Operational Teams
- Districts and Boroughs
- The Wider Care Market
- Landlords and Housing Providers

# Questions

