







# Adult Social Care Accommodation Market Position Statement

2025 to 2035

















# Contents

Purpose3
Strategic context5
Strategic direction for commissioning adult accommodation in Kent 6
Accommodation position
present and future7
<ul> <li>Supporting people in their own home</li> <li>Supported living</li> <li>Extra care housing</li> <li>Residential</li> <li>Eligible children and young people transitioning to adult social care</li> </ul>
Summary of current position and future direction21
Technology and accommodation 24

Foreword ......2

This document is available in alternative formats and languages.

Please call: 03000 42 15 53 Text relay: 18001 03000 42 15 53 for details

Email: alternativeformats@kent.gov.uk

# Foreword

As Cabinet Member for Adult Social Care and Public Health, I am proud to introduce Kent County Council's Adult Social Care Accommodation Market Position Statement for 2025–2035.

This document sets out our shared vision for the future of housing and care in Kent - one where every adult who draws on social care has access to safe, inclusive and empowering accommodation that supports independence, dignity and wellbeing. It reflects our commitment to prevention-first approaches, person-centred care and strong partnerships across housing, health and the voluntary sector.

We know that the right accommodation can transform lives. Whether it's supporting people to remain in their own homes, expanding supported living or developing modern extra care housing, our goal is to ensure that Kent's care and housing markets are ready to meet the needs of our growing and diverse population.

This statement is not just a strategic document - it is a call to action. We invite providers, developers and partners to work with us to innovate, invest and co-produce solutions that will shape the future of adult social care in Kent.

Together, we can build a county where everyone has the opportunity to live well, in the place they call home.

Diane Morton

Cabinet Member for Adult Social Care and Public Health Kent County Council

# Purpose











We all want to live in the place we call home, with the people and things we love, in communities where we look out for one another, doing the things that matter to us.

This Market Position Statement sets out how Kent County Council and our partners will work with the housing and care accommodation market to make that vision a reality.

This Market Position Statement (MPS) sets out Kent County Council's (KCC) strategic direction for the future of housing and care for adults who draw on social care, whilst also recognising the needs of young people transitioning to adulthood and care leavers. It brings together the shared ambitions of Kent's district and borough councils, Kent County Council and wider partners, to ensure that accommodation supports people to live the lives they want in safe, inclusive communities.

The MPS focuses on accommodation-based care and support provided by KCC, but also recognises our wider system leadership role. We have a responsibility, alongside district and borough councils, the NHS, housing providers and the voluntary sector, to influence the development of housing and care markets so that people who fund their own care, as well as those supported by the council, have access to the right options at the right time.

Our priority is prevention: ensuring people can remain independent at home for as long as possible, supported by good quality housing, adaptations, technology and timely care. Where higher levels of support are required, KCC aims to ensure a diverse mix of supported living, extra care, residential and nursing provision, with services that are modern, inclusive and designed around people's needs and aspirations.

This document highlights the current state of housing and care provision across Kent, identifies gaps, sets out projected needs and provides clarity on where investment and innovation are required. It is designed to give the market confidence to plan, invest, and partner with us. In doing so, it will support district and borough councils, developers and providers to demonstrate how they will meet the diverse accommodation and support needs of Kent's population – not just for today, but for the future.

### The overarching objectives of this market position statement are to:

- Build a shared understanding of current and future accommodation needs across Kent, based on robust data and population projections.
- Signal commissioning priorities and investment opportunities so providers, developers, and partners can plan with confidence.
- Shape a diverse, sustainable market that offers high-quality, inclusive accommodation options across all adults that draw on care and support.
- Promote independence and prevention, ensuring accommodation supports people to live in the place they call home for as long as possible.
- Foster innovation and partnerships, working with providers, housing partners, health, and communities to develop new models of care and support.
- Strengthen workforce and financial sustainability, so Kent's care and accommodation market remains resilient and fit for the future.

We also need to consider the changes that the future will present, particularly in terms of local government review and the transition towards devolution. This document can be used to align our aims and support a smooth transition, ensuring that our shared objectives continue to be met as the local government landscape evolves.

We would like to thank all of our partners for their support in devising this statement, and we look forward to working with them to co-produce a delivery plan that will be essential in ensuring successful delivery.

# Strategic context











There are a number of strategies and frameworks that this market position statement will have links with:

The Care Act 2014 requires Kent County Council to produce a 'market position statement' to give direction to providers and developers on future commissioning. Local authorities have a duty to write a market position statement to let providers know that what they commission could change and what their commissioning intentions are. It is a key element of the commissioning cycle, as it will inform the subsequent planning and delivery of services for future years.

**Reforming Kent 2025-2028** sets out the vision for Kent and how we will work with partners and providers to deliver a sustainable, prevention-first adult social care system. It reflects national priorities for adult social care reform and provides reassurance that, whatever future governance arrangements emerge from the local government review, our direction remains clear: independence, prevention and partnership at the heart of commissioning.

<u>Making a difference every day; our strategy for adult social care, 2022 to 2027</u> is how the council aims to underpin all the services that are available to Kent residents. The three core principles are:



• Putting the person first - always starting our conversation with the voice of the person, focusing on what the person can do and keeping them at the heart of everything we do; developing working relationships people can trust and helping them to achieve outcomes that are important to them.



• Improving all the time - finding innovative ways to help people and make sure any support offer is tailored to the individual, learning from feedback from the people we support and building continuous improvements together.



• Measuring what matters - understanding how we are making a difference to the life of the person we support by working with them, our staff and partners.

Adult Social Care and Health Directorate Commissioning Intentions 2022 to 2027: sets out how the directorate plans to create person-centred and flexible care and support in Kent to address the challenges and opportunities in adult social care.

Adult Social Care Prevention Framework 2025 – 2035: sets out the Kent Adult Social Care ambition to help more people in Kent to live fulfilled, healthy and independent lives now and in the future.

<u>Kent and Medway Housing Strategy 2025-2035:</u> sets out the Kent and Medway-wide objectives to deliver more homes, with infrastructure alongside, to improve the availability of affordable housing, the quality of the housing stock, and to achieve knock-on benefits to the health and wellbeing of residents.

By linking Making a difference every day, the Prevention Framework, Commissioning Intentions and the Kent and Medway Housing Strategy, this market position statement ensures that services are personcentred, proactive and sustainable. It provides the clarity and guidance needed for partners to plan and deliver housing and care that meets the diverse needs of Kent's population, both now and in the years ahead.

This approach aligns with the NHS Long Term Plan, supporting integrated, community-based care that promotes independence and prevents unnecessary hospital admissions. The market position statement also emphasises neighbourhood health, ensuring people have access to local services, social opportunities, and support networks that maintain wellbeing.



"We all want to live in the place we call home, with the people and things that we love, in communities where we look out for one another, doing things that matter to us"\*



\* (Time to act: A roadmap for reforming care and support in England, ADASS, Association of Directors Adult Social Services. Anna Dixon and Kate Jopling 2023).

# Accommodation position: present and future

"I want to live independently in my own home with dignity"









A home is a place of belonging, comfort, and security. Home is often thought of as a place where individuals feel accepted, loved, and at ease, surrounded by familiar people, objects, and memories. For many, home is not just where they live, but where they feel most connected and at peace.

## Supporting people in their own home

Our aim: Kent County Council is committed to ensuring that home is where people live best.

We will support all adults to remain as safely and independently in their own homes and communities for as long as possible, providing the right care and support to maintain wellbeing, choice and connection to their communities.

#### How we will achieve this:

- Providing information, advice and support
- Adaptations funded by Disabled Facilities Grants
- Carer support
- Smart homes and assistive technology using connected devices, sensors and remote monitoring to help people live safely and independently while providing reassurance to carers and families
- The use of care within the right accommodation for the person
- The council will work with their district and borough council partners around the provision of housing across the county and we are clear that new properties need to meet the accessibility standards set out in part M4(2) of the Building Regulations wherever possible, with an appropriate proportion of new homes provided to M4(3) wheelchair accessible standard.

**Supporting evidence:** care and support provided in the home is the primary means of support provided by the council for most older people and adults with physical disabilities. The number of people supported in their own homes has increased over the last ten years. Significant population growth in the older age groups and moderate growth in the working age population will mean that more people need to be supported in their own homes over the next ten years. The projected figures are likely to be higher still if the council is successful in diverting people who would otherwise have been placed in residential care.

Pe	People receiving care and support in their own home					
	Older people	Working age adults with physical disabilities	People with mental health conditions	People with learning disabilities	People with sensory needs	
Current demand	3,480	760	100	80	60	
Projected demand in 2035 (based on population growth)	+710	+60	+10	+10	<0	

Source: Kent County Council caseload data; ONS sub-national population projections (2022 based). Figures rounded to nearest ten.

The council, working with partners and providers, will need to address the challenge of increasing the scale of the care workforce, focussing on the quality of care and the skills and retention of care workers. These challenges will not be able to be addressed by the council and its partners alone and support from central government will be sought where required.

#### Our shared aims:

- Home is best: We are committed to supporting people to live safely, independently and well in their own homes and communities for as long as possible.
- Flexible, person-centred support: Providers must deliver care that adapts to a person's routines, preferences, and goals, rather than imposing rigid schedules. Care should empower people to maintain independence, participate in their communities and make choices about when, how and by whom their care is delivered.
- Expand and strengthen care at home: We will work with providers to expand high-quality care and support delivered in people's homes, ensuring services are person-centred, flexible and built around individual needs, outcomes, and aspirations. Providers must be equipped to deliver care that adapts to changing needs and promotes independence.
- Sustainability and diversity in provision: We seek a balanced market that includes a mix of small, medium, and larger providers, ensuring resilience to change and which promotes stability across Kent. Services must be financially sustainable, adaptable, and able to respond effectively to population needs.
- **Digital and assistive technologies:** We will commission innovative digital solutions and assistive technologies that promote safety, independence and connection. This includes the use of remote monitoring and virtual visits where appropriate, helping people to stay well at home while ensuring timely support when their needs change. We will work with providers who can integrate technology into personalised care, improving outcomes for individuals and supporting carers and professionals to deliver responsive, high-quality services.
- New build standards: All new build homes are to be built to M4(2) accessible and adaptable homes standards with an appropriate proportion provided as M4(3) wheelchair accessible as evidenced by district and borough needs assessments.
- **Disabled Facility Grants:** Work with district and borough council partners to ensure people are able to access Disabled Facilities Grants for adaptations as efficiently as possible.
- New homes delivery programmes: Engage and support the Maintaining Independence Through Housing (MITH) project to deliver more homes for older people that help maintain independence for longer.
- **In-house and partnership options:** Where market capacity is limited, we will explore in-house or partnership delivery options to ensure the continuity of care and equity of access across Kent.

# **Supported living**

"I want to live in a place that feels like home and suits me"



Supported living refers to schemes that provide personal care and or support to people as part of the support that they need to live in their own home. The personal care/support is provided under a separate contractual arrangement to those for the person's housing.

Accommodation can be for one person or shared with others and may be provided by private or social landlords. Support can range from a few hours a week to 25 hours care, delivered on a one-to-one basis. Support levels are flexible and can increase or decrease as a person's needs change, helping people to build skills, confidence and independence over time.

**Our aim:** To have a flexible range of supported living options available to people in the area that they want to live in. We want to transform supported living across Kent so that people can live independently in homes of their choice, with flexible, person-centred support that adapts as their needs change. Our ambition is to ensure everyone can access high-quality, sustainable options that promote independence, wellbeing, and connection to their community.

#### How we will achieve this:

- Collaborate with district and borough partners to shape inclusive housing strategies that increase access to suitable social housing and enable people to remain in their chosen communities.
- Co-design new supported living models with providers, people with lived experience and families expanding provision for those with complex needs and ensuring options reflect diverse aspirations.
- Recommission supported living contracts to embed flexibility, person-centred outcomes and innovation including blended support models, technology-enabled care, and sustainable pricing.
- Encourage investment and partnerships that stimulate growth in under-served areas and promote quality, stability, and long-term sustainability across the market.

Supporting evidence: Supported living is the primary accommodation or service for people with learning disabilities and mental health needs in Kent. The number of people accommodated in supported living has increased over the last ten years. Modest growth in the need for supported living placements for working age people is expected over the next ten years due to population growth. However, the aim to reduce reliance on residential care over time will increase demand for supported living further as people are placed in more independent settings. There is some uncertainty over the projected demand from people with mental health conditions in particular, with recent pressures suggesting that future need may be higher than population projections would suggest. In children's services, the focus is to maximise children's independence so that when they turn 18, where eligible, they will be suitable for supported living – this will also increase demand on services.

We do not currently have access to data specifically around the needs of neurodivergent people. We are working closely with district and borough councils to support understanding of the specific accommodation need of neurodivergent people who draw on care and support.



# **Current supply**

897 supported living schemes
Accommodation for 2785 people
For all people who draw on care and support but the largest number available for those with learning disabilities.

Current supply - location of supported living schemes				
Cluster	Number of schemes			
Ashford	46			
Borough Green and Wrotham	17			
Canterbury and Coastal	69			
Canterbury and Rural	25			
Cranbrook	1			
Dartford, Gravesham and Swanley East	61			
Dartford, Gravesham And Swanley West	22			
Edenbridge	2			
Elham	8			
Maidstone West	97			
Maidstone West (Medway)	121			
Paddock Wood	14			
Sevenoaks	4			
Sheppey	17			
Shepway	105			
South Kent Coast	107			
Swale and Canterbury	19			

Thanet and Coastal	109
Tonbridge	19
Tunbridge Wells and Langton Green	34
Total	897

People in a supported living service (excludes Shared Lives placements)					
	Older People	Working Age Adults with Physical Disabilities	People with Mental Health Conditions	People with Learning Disabilities	People with Sensory Needs
Current demand 2025	190	510	920	1,660	60
Projected demand 2035 (based on population growth)	+40	+40	+70	+120	<0

Source: Kent County Council caseload data: ONS Sub-national population projections (2022 based ) figures rounded to the nearest 10.

#### Our shared aims:

- **Expand supported living across Kent:** We are committed to ensuring that as many people as possible can live in their own homes within the communities of their choice.
- **Flexible, person-centred support:** We want to commission support packages that enable individuals to build skills, grow in independence, and live as independently as possible.
- Tailored housing solutions: Working with district and borough partners, we will support people to live where appropriate in general needs housing with tailored support that meets their assessed needs and aspirations. We want supported living to be affordable and within communities rather than campus style provision.
- Innovative support for complex needs: We want to collaborate with providers to create services for people with complex needs, including drug and alcohol dependencies and people with a forensic history. These providers will use trauma-informed, recovery-focused, and outcome-driven approaches.
- Short-term support for hospital discharges: We are creating short-term supported living for people leaving hospital under mental health sections. These services will give intensive, tailored support to help people regain independence and move confidently into their own homes, working closely with local partners to make sure housing options are available.
- **Technology-enhanced support:** Providers will work with the Council to utilise technology to enhance the support offered within supported living.
- Support for young people and care leavers: We will ensure supported living is available for young people and care leavers, co-designed with children's services to offer safe, stable environments that help build independence and readiness for adulthood.

# Extra care housing

"I feel safe, I can live the life I want and I am supported to manage any risks"







Extra care housing provides people with the opportunity to live in their own purpose built self-contained home while accessing care, meals and community spaces or site. This can enable people to live independently for longer. Emergency response is available 24-hours-a-day with individual care and support delivered as required.

**Our aim:** To make extra care housing a preferred, mainstream option across Kent, enabling people to live independently with the support they need. We want extra care to be flexible, innovative and outcome-focused preventing crisis, enhancing quality of life and providing a sustainable alternative to residential care.

#### How we will achieve this:

- Actively promote extra care to residents, families, and professionals, highlighting it as a first-choice alternative to residential care.
- Enable early moves into extra care, with wrap-around services that maintain independence and prevent unnecessary hospital or residential placements.
- Identify and address barriers to take up of extra care housing e.g. moving costs/arrangements.
- Work with providers to co-design inter-generational, tech-enabled, and flexible extra care models that meet diverse needs and lifestyles.
- Identify underused land, outdated care homes, or other assets with public sector partners to deliver high-quality, sustainable extra care housing.
- Engage in planning processes to ensure the need for extra care (for rent and sale) is reflected in policy where appropriate.
- Encourage providers to integrate technology and data-driven approaches to improve independence, safety, well-being and service sustainability.

**Supporting evidence:** Various research studies have confirmed the benefits of extra care in terms of wellbeing for residents and potentially cost savings in care<sup>1</sup>.

Extra care is now an established form of independent living accommodation within Kent. Kent has 834 homes for older people commissioned directly by the council. There are a further four schemes comprising a total of 250 homes which are not commissioned directly by the council. There are a further 433 homes in private extra care schemes, primarily for leasehold owners and a further 313 expected to be completed 2026.

There is large scale potential demand for this accommodation with projections suggesting a need for almost 500 additional social/affordable rented extra care homes by 2035, not including any current shortfall in provision. Current schemes are designed for older people and typically are restricted to those aged 55 and over although the model is likely to benefit some younger people with care needs.

There is a particular need on the Isle of Sheppey, Canterbury and Thanet where there is either no provision or schemes are full with long waiting lists.



## **Current Supply**

- 18 Extra Care Schemes focused on affordable rented provision
- 834 Flats in the 18 contracted schemes (just over half are one bedroom with the remainder being two bedroom)
- 90% are social rented homes, with 10% for shared ownership

There is a wider market of extra care schemes for older people includes 11 further schemes totalling 683 units (250 for social/ affordable rent) with the remainder 433 primarily for leasehold sale.

Current demand and potential growth in demand 2025-2035				
	People living in Extra Care 2025	HLIN 'ideal'** rate of provision 2025	Shortfall based on HLIN 'ideal' rate of provision 2025	Growth in demand 2025- 2035 (excl shortfall)
Older people in extra care (The council's placements)	830	2,640	1,560	+490
Older people in other extra care (social rented but not funded by the council)	250			
Older people in other extra care (private, primarily leasehold)	430*	5,290	4,850	+970

<sup>\*</sup>Approximate figures as exact tenure mix and occupancy rate in private schemes not published.

<sup>\*\*</sup> HLIN tool sets ideal rate of provision at 15 units per 1,000 people aged 75+ for rent; 30 units per 1,000 people aged 75 and over for sale. In practice, this is not achieved in any authority area in England but is an aspirational prevalence rate included in the model. If this rate was achieved it would involve greater number of moves from other accommodation types including mainstream housing and diversion of those who may otherwise be placed in residential care. Figures rounded to nearest ten.

#### Our shared aims:

- **Expand extra care housing across Kent:** We are committed to ensuring that as many people as possible can live in their own homes within the communities of their choice.
- Alternative to residential care: Extra care is to be positioned as a modern, flexible, and sustainable alternative to traditional residential care, addressing gaps in provision and supporting independence.
- Innovative, needs-led approach: New extra care schemes will be designed around individual needs rather than age, supporting intergenerational living and flexible care packages.
- Connected to communities: Extra care should be fully integrated into local communities, promoting and encouraging social inclusion, access to local services, and opportunities for residents to actively participate and contribute.
- Modern, sustainable homes: Providers will deliver fit-for-purpose, cost-effective schemes with viable business models. Technology will be used to enhance independence, safety, and overall outcomes for residents.
- **Expanding care-ready schemes:** We will collaborate with district and borough councils to increase the provision of "care-ready" schemes that can transition into full extra care when the need arises for example, Farrow Court in Ashford.

# **Residential and Nursing Care Homes**

"I feel safe and supported in my residential home, and I am treated with dignity and respect by staff who understand my needs"









Residential care homes provide accommodation, personal care and support for people who need extra support in their daily lives, which cannot be delivered in their own homes.

Nursing care homes offer a higher level of personal care and will have a qualified nurse on duty at all times. The council commissions nursing care placements for people who require nursing care in instances where their social care needs are greater than their health care need.

**Our aim:** To enable those individuals that require a residential or nursing home to have access to good quality provision that holds residents central to decisions with a caring, compassionate and competent workforce. Residential and Nursing Care will only be considered when community-based support is not possible.

We are committed to delivering good quality, person-centred care in a sustainable and cost-effective way, supported by a skilled, compassionate and competent workforce.

#### How we will achieve this:

- Communicate clearly with the market around gaps in provision.
- The council will recommission its older persons residential and nursing care services to address a range of strategic, financial and operational challenges.
- We will work with district and borough planning teams and explore in-house options to ensure that all new or expanded care home provision meets the needs of residents and aligns with the council's strategic priorities.
- We will engage with providers to ensure services are delivered by a competent, compassionate and sustainable workforce.

Supporting evidence: there are 4,386 people placed by the council in residential care homes and 1,213 people placed in nursing care homes. Most of those placed are older people with limited provision for other people who draw on care and support with other needs, particularly for nursing care. The number of older people placed in residential care has stabilised over recent years as more people are being supported in their own homes or extra care housing. The projected need for residential care, driven by population growth, could be diverted to these independent settings in the future. Reduced reliance on residential care for working age people is also expected, with the projected growth in demand due to population growth instead being met by supported living placements. Growth in demand for nursing care is expected over the next ten years because of the complex needs associated with an ageing population. Whilst strong growth in demand is not expected from working age groups, there are some current shortfalls in provision making it hard to find placements.

Current su	Current supply residential care home total number of beds in Kent						
Authority	Learning disabilities	Mental health	Mental health and older people	Older people	People with physical disabilities	Not known	All
Ashford	159	15		196			370
Dartford	203	103		1,074	68		1,448
Dover							
Folkestone and Hythe Canterbury	250	29		600	52		931
Gravesham	53	14	247				314
Maidstone	83	16		534	21		654
Sevenoaks	41			444	24		509
Swale	155			486	64	5	710
Thanet	122	8	100	848			1078

Tonbridge and Malling	21			206	38		255
Tunbridge Wells	77	17		252	30		376
Kent total	1431	234	100	5754	297		7822
Medway							15
Unknown						1	1
Total	1446	234	100	5754	297	6	7837

Source: Kent County Council Adult Social Care and Health directorate

# Residential care home total number of beds in Kent

Nursing care	home accommod	lation (beds) ir	ı Kent		
Authority	Learning disability	Mental health	Older people	Physical disability	All
Ashford	0	0	619	32	651
Canterbury	9	0	542	55	606
Dartford	0	0	561	0	561
Dover	40	0	357	0	397
Folkestone and Hythe	0	0	547	39	586
Faversham	0	0	289	0	289
Maidstone	0	23	762	0	785
Sevenoaks	0	0	533	0	533
Swale	0	0	243	0	243
Thanet	0	0	510	0	510
Tonbridge and Malling	0	0	722	0	722
Tunbridge Wells	0	0	830	0	830
Unknown	0	0	36	0	36
Kent total	49	23	6551	126	6749

	nd for residen d outside cour				ents and
	Older people	Working age adults with physical disabilities		People with learning disabilities	People with sensory needs
Current demand 2025	2,890	300	370	820	40
Projected demand 2035	+580	+20	+30	+60	<10

Source: Kent County Council caseload data; ONS Sub-National Population Projections (2022 based). Figures rounded to the nearest 10.

## **Key note\***

The number of older people and working age adults placed in residential care has stabilised over recent years as more people are being supported in their own home, supported living or extra care housing.

Kent County Council's strategies mean that not all projected demand will be met by residential homes. People who draw on care and support with more complex needs will continue to require residential placements, but alternative models are expected to reduce the projected demand for residential placements.

This approach supports independence, aligns with people's preferences and ensures residential care is focused on those with the highest and most complex needs.

Current Dema	and Nursing Ca	re funded by h	Cent County Co	ouncil	
	Older People	Working age adults with physical disabilities	People with mental health conditions	People with learning disabilities	People with sensory needs
Current demand 2025	1,110	60	20	<10	20
Projected demand 2035	+230	Current placement pressures but limited growth long term	Current placement pressures but limited growth long term	Current placement pressures but limited growth long term	Stable

Source: Kent County Council caseload data; ONS Sub-National Population Projections (2022 based). Figures rounded to the nearest ten.

#### Our shared aims:

- **Independence first:** We are reducing reliance on residential care wherever possible, supporting people to live independently in the community.
- Stable and targeted demand: Overall demand for older people's residential care has stabilised. Where possible, alternative support options are offered before residential placement.
- Specialist and inclusive services: Increasing need for nursing and residential services that support bariatric needs, physical disabilities, mental health and dual diagnoses, including drug and alcohol dependency.
- **Fit-for-purpose and sustainable homes:** We want modern, safe, and accessible homes that support independence and well-being. Providers must demonstrate viable business models to ensure long-term sustainability small, substandard, or unviable homes will not meet the council's requirements.
- **Digital and innovative approaches:** We are looking for providers who use digital technologies to enhance independence, monitor outcomes, improve safety, and increase efficiency, while keeping care personal and responsive.
- **Supporting hospital discharge:** We need residential and nursing providers who can support people leaving hospital, including short-term and step-down placements, to ensure safe, timely transitions back to the community or to longer-term care.
- Intensive support for independence: Step-down services should provide intensive, tailored support that enables people to regain independence, reduce readmissions, and move confidently to more independent accommodation where possible.
- Sustainable and affordable: All provision must be cost-effective and financially sustainable. Providers should understand local authority care rates and ensure services remain viable as private funding changes
- Connected to communities: Residential provision is embedded within communities as opposed to being a campus provision (a group of homes clustered together on the same site sharing staff and facilities).

# Eligible children and young people transitioning to adult social care

"I am supported to be as independent as I can, doing things I like in my local community and I have a choice about my future."









Not all children in care or those known to children social services will require adult social care accommodation services. Children's services start talking to children at the age of 14 about what their ambitions are for adulthood, where they might need services from adult social care and their future accommodation options. Over time, the intelligence and forecasting will become better and feed into the transition plans and future accommodation needs.

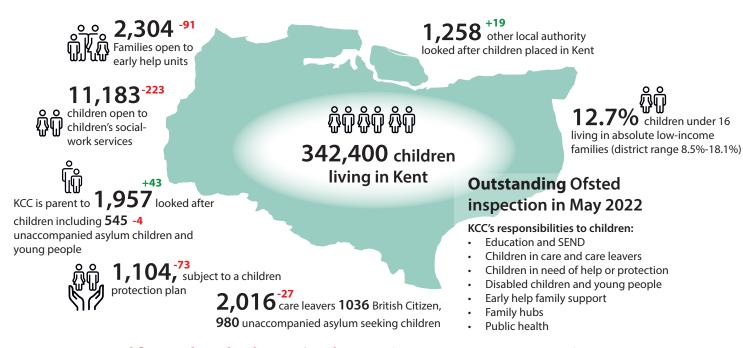
**Our aim:** is for young people to achieve their ambitions and fulfil their aspirations as they prepare for adulthood. We want to make sure, where eligible, their transition to adult social care is seamless, they are living in high-quality accommodation that they can call home and once they have gained independent living skills, they feel confident and ready to move on to their own independent accommodation.

#### How we will achieve this:

- As a children's service, we will be flexible in making sure that our young people continue to be
  accommodated with good support provided from the age of 16, to develop their independence
  skills.
- Focus on early intervention, early help and prevention. We recognise the importance of earlier,
  preventative action to support children and families so that fewer children become looked after by
  targeting services to those who are on the edge of care and are embracing the aims of the Families
  First Programme.
- To fulfil our duty to support the most vulnerable children and families in our county, ensuring
  joined up safeguarding and effective corporate parenting arrangements, the Children, Young
  People and Education Directorate fully acknowledge that this means planning, with the Adult
  Social Care and Health Directorate, to make sure that those children who will become eligible for
  adult social care, have their needs assessed, the voices heard and have a say in where and how they
  want to live as adults.
- To ensure that both the Children, Young People and the Education Directorate, Adult Social Care and Health Directorate work collectively to make sure that transition between the two statutory responsibilities is a seamless experience with least disruption.

Accommo	dation pathway
Age	Accommodation
0-18	<ul> <li>Foster Care (in a family home - DFG applications may be required for those accommodating disabled children)</li> <li>Children's residential homes (usually accommodating four children in an adapted large family home) - The council buys this service in from the provider market and is developing its own in-house provision. District councils welcomed the early discussions and are supporting the council in this new direction.</li> </ul>
16/17	<ul> <li>Kent supported homes - host provision, in a family home</li> <li>Supported accommodation – shared accommodation with access to at least five hours' support per week - must be registered with Ofsted</li> <li>Supported accommodation - larger homes or purpose-built shared accommodation with access to up-to ten hours' support per week' must be registered with Ofsted.</li> </ul>
18 plus care leavers	<ul> <li>Shared accommodation up to the age of 19</li> <li>Some legacy accommodation up to the age of 21 (intention to cease this by March 2026).</li> </ul>

## Introducing Kent's children and young adults



#### Red figures show the change since last year (31 Dec 2024 vs 31 Dec 2023)

#### Our shared aims

- Innovative, flexible services for young people: We are developing flexible services to accommodate young people from age 16 who require tailored support. These services are designed for those who previously would have needed significant mental health support or detention through Youth Justice services.
- Partnership working with housing partners: The council continues to work closely with district and borough housing partners to review joint protocols. This focuses on supporting homeless 16 and 17 year olds, as well as providing transitional support for care leavers moving into independent or supported living accommodation.

# Summary of current position and future direction

	Current position	Future direction
Older people including dementia	<ul> <li>Increase in the number of older people being supported in their own homes</li> <li>Over-provision of standard residential care</li> <li>Under-provision of dementia nursing care</li> <li>Under-provision of extra care</li> <li>Inefficient rehabilitation and enablement model for intermediate care</li> </ul>	<ul> <li>Increase provision of extra care housing</li> <li>Increase mainstream housing supply that enables people to live in their own home for as long as possible</li> <li>Aim for all new build housing to be built to M4 (2) accessible and adaptable standards and % of M4 (3) wheelchair accessible housing</li> <li>Any increase in provision should be for nursing and dementia care homes that cater for complex needs</li> <li>Increase fit-for-purpose modern care homes and as a result reduce older housing stock</li> <li>Greater use of tele-technologies across all provision</li> </ul>
Learning disability	<ul> <li>Varying availability of supported accommodation</li> <li>Lack of supported living that encourages people to live as independently as possible. People become 'trapped' in support linked to accommodation for financial viability purposes</li> <li>Lack of social housing opportunities for people with an learning disability to live with support in their communities</li> <li>Lack of provision for people with an learning disability and complex needs - more placements are made outside of Kent because of this.</li> <li>Lack of provision for people with an learning disability and forensic history</li> </ul>	<ul> <li>Residential provision to be reserved for people with complex needs</li> <li>Increase in supported living provision within Kent for people with an learning disability and complex needs</li> <li>Greater use of tele-technologies across all provision</li> <li>Extra care housing to be needs led rather than age-led to open the option of extra care housing for people with an learning disability to access where appropriate</li> </ul>

# Physical disability

- Lack of suitable mainstream housing and supported living to enable people with a physical disability to live independently
- People with a physical disability end up in unsuitable placements due to lack of adapted housing
- Varying waiting lists for disabled facility grants across the county
- Increase mainstream housing supply that enables people to live in their own home for as long as possible
- Aim for all new builds to meet M4 (2) accessible and adaptable standards and for % of new builds to meet M4 (3) wheelchair accessible standards
- Extra care housing to be needs led rather than age-led to open the option of extra care housing for people with a physical disability where appropriate
- Promote use of tele-technologies across all provision

## Mental health

- Lack of suitable provision for people with mental health needs across the county
- People leaving hospital need a more intensive support that can then reduce and there is a lack of this type of provision
- Lack of suitable supported living placements that allow flexibility in support packages to allow increase or reduction in support as people's mental health improves or declines
- The market needs clarity around the type of support available and how this can work with different types of accommodation options

- Develop more supported accommodation specifically to meet the needs of people who draw on care and support with mental health needs
- Develop a model that allows flexibility of support for people that increases or decreases as their mental health improves or declines
- Replicate models across the county for "step down" accommodation for individuals occupying acute psychiatric beds who are clinically ready for discharge
- Ensure health, housing and social care partners have a coordinated response to the need for more accommodation options for people with mental health conditions
- Provide some services specifically for women only with mental health needs

## Children and young people supported in their own home supported living/extra care

- Other local authorities placing in Kent feed the provider market to expand with KCC buying only 21% of the Children's Home placements in Kent
- Due to affordable access to these placements, KCC is buying 50% of placements for Kent children outside of Kent
- Be clear where young people are able to hold tenancies, or have others sign for them
- Improve the experience of those eligible young people transitioning to adult social care

## Autistic people without a learning disability

- Limited availability of specialist providers and accommodation
- Lack of specialist provision that can support with co-occurring conditions e.g.: diabetes management, British Sign Language trained staff (this is an issue in learning disability too)
- Limited availability of sensoryfriendly environments
- Inconsistent inclusion of autistic voices in commissioning
- Limited flexibility in support models, such as the application of Positive Behaviour Support (PBS), which may not fully accommodate the diverse needs and preferences of autistic adults
- Limited commissioning of autism specific assistive technology

- Increase provision of autism-specific supported living and residential services, including sensory-friendly environments
- Develop flexible support models that accommodate fluctuating needs and communication preferences and needs
- Embed co-production with autistic adults in commissioning and service design
- Expand local provision for autistic people with complex needs to reduce out-of-county and inappropriate placements
- Promote and expand the commissioning of assistive technology tailored to autistic individuals (e.g. communication aids, sensory regulation tools)
- Joint commissioning with health and
- Explore crisis accommodation to prevent admission and "step down" provision to support discharge
- Autism training for all social care and housing providers

# Technology and accommodation



Technology Enhanced Lives (TELS) is Kent County Council's dedicated assistive technology service for adult social care. This service was co-produced and harnesses innovative digital solutions tailored to each individual, empowering people to live with greater independence, dignity, and safety in the place they call home through an outcomes-based approach.

Assistive technology plays a vital role in enhancing the efficiency of care and support and helps with the growing requests for support. TELS offers a forward-thinking, technology-first approach. The service includes multiple pathways:

- TELS Long-term support for individuals with Care Act eligible needs
- TELS Short-term support for hospital discharge, enablement, and respite
- TELS Private pay options for self-funders and sign-posting
- TELS Digital skills support to build confidence in using technology

The success of TELS is built on collaborative partnerships between Kent County Council and the wider care industry. By adopting a technology-first mindset, TELS is helping to deliver personalised, sustainable care and support solutions that also alleviate capacity pressures across the sector.

Between November 2023 and August 2025, TELS has supported over **3,000 Kent residents** with technology to manage their care and support needs. Solutions have included monitored equipment and sensors linked to a 24/7 monitoring centre, pager-connected devices, fall sensors, standalone devices, GPS-enabled devices, and Al-driven systems that help understand daily living patterns.

TELS is delivered in partnership with the **PA Consulting** - **led Argenti consortium**, with technology assessments and installations provided by **Red Alert**, and a 24/7 response service for monitored equipment delivered by **Appello**.

