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Identifying the need

- **Assuring Transformation data** – nationally monitored
 - Total inpatients: 103 (of which 55 are in secure settings)
 - Adult Inpatients: 97
 - CYP Inpatients: 6
 - Clinically ready for discharge: 33
- **Dynamic Support Database** – tracking people at risk of admission
- **Inpatient tracking** – following the patient journey
- **Discharge planning** – care and treatment reviews
- **Children and Young People / Transition** – How many young people will need housing in adulthood
- **Campbell Tickell Report** - 1679 additional units of supported housing by 2032/ 33 for Cheshire and Merseyside
- **Cheshire & Merseyside Housing Strategy:** people with a learning disability and or Autism—developed in consultation with 9 Places - To achieve the best quality of life we can for people with learning disabilities and/or Autism to live independently, with personalised support and care.

Partnerships

- Self-advocates / Experts by Experience
- Local Authority and Health Commissioners
- Registered Providers / other housing providers
- Strategic Housing Teams
- Care and Support Providers
- Inpatient providers Cheshire and Wirral Partnership / Merseycare
- Community Infrastructure, Intensive Support Function , Specialist Community Forensic Team
- NHS England / Homes England
- Liverpool Combined Authority / Housing Options



Barriers to increasing the pipeline

- Small unit numbers – Building the right support - CQC
- High cost of specialist features and finishes
- Larger units and preference for single floor – land costs
- Capital funding level under Affordable Homes Programme 21 to 26
- National NHSE capital pot £13million
- Inconsistent HB and rents approvals
- SPs specialist and supported rates do not consider very specialist provision
- Viability for RP partners
- Reliance on REIT (Real Estate Investment Trusts) housing providers – filling a need within the market - higher costs to public purse for this model



Opportunities

- Utilising small sites often in RP or LA ownership – garage sites, small plots
- Conversion of redundant assets – sheltered schemes, day centres, residential schemes
- Own front door model as opposed to shared houses
- Tenancy based – more secure than residential
- Purchase and refurb an option under NHSE





Opportunities

- Exempt rent levels allowable in scheme that are NHSE funded
- Opportunity to influence and insert our needs into the new Affordable Homes Programme
- Could we open access to NHS, Homes England or Local Authority land on a preferential basis?
- Small number of specialist units on a larger general needs' sites
- HOLD scheme – image Ross in his home with L&Q bought with a HOLD mortgage

Benefits for the individual

- Improving lives and empowering independence, through good design
- Long term tenancies or shared ownership through HOLD– security for tenant and landlord
- Own front door schemes - where the home can be consistent if care provider changes
- Choice and control over housing options
- Bringing people back into homes within their own community
- Preventing unnecessary admissions and achieving faster discharge from inpatient settings
- Tackling hidden homelessness within the inpatient community



Benefits to the system and partners

- Increasing community assets and diversifying the housing landscape
- New purpose for redundant housing stock
- Utilising infill and small sites
- Enabling the use of inpatient beds for short term targeted clinical purposes – hospital is not a home
- Reducing the use of long-term residential care, where a tenancy could be an option
- Saving to the Integrated Care System - An ICS brings together the NHS organisations, councils, and wider partners in a defined geographical area to deliver more joined-up approaches to improving health and care outcomes.

