

Your voices matter

Experiences of people in Supported Living

December 2025





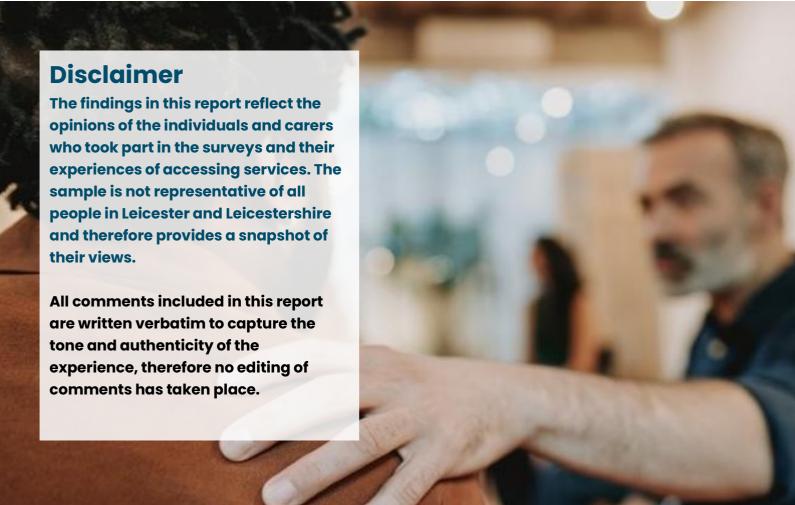
When it comes to accessing health and social care, your views count. Part of our role is to understand the experiences of people who are using these services and to give people an opportunity to speak up and have their voices heard.

This report focuses on engaging with people living in supported living accommodation and their carers to understand their experiences of local services and gather feedback.

Executive Summary

This report shares what we found from talking to people involved in Supported Living services. We spoke with individuals who live in supported housing, their carers and key organisations after discussions with our Healthwatch Advisory Board and local commissioners.

Because Supported Living providers are very different from one another, we focused on a small group so we could look closely at their experiences. This helped us understand what is working well and where things could be better.



What is supported living?

Supported living in Leicester City and Leicestershire refers to a housing option designed to support individuals with disabilities, mental health challenges, or other support needs to live as independently as possible within their community. It offers a person-centred approach that focuses on the individual's preferences and goals while providing necessary support and assistance.

In Leicester City and Leicestershire, various organisations and service providers' offer supported living services. These providers work closely with individuals, their families, and other support networks to develop personalised care plans. The goal is to promote independence, enhance social inclusion and improve overall quality of life.

Supported living arrangements typically involve individuals living in their own homes or shared accommodations, rather than in residential care facilities. The level of support provided varies depending on individual needs and can include assistance with daily living activities, such as personal care, household tasks, cooking and managing finances. Additionally, support may extend to accessing community resources, participating in recreational activities and maintaining social connections.

Service providers in Leicester City and Leicestershire often employ trained staff members who work directly with individuals in their homes. These staff members are trained to provide personalised support while respecting the individual's privacy and autonomy. They may work on a one-to-one basis or as part of a team, depending on the needs and preferences of the individual.

The specific services and resources available in supported living vary depending on the provider and the individual's needs. Overall, supported living in Leicester City and Leicestershire aims to empower individuals with support needs to live fulfilling lives in their community, promoting independence, choice and inclusion.

Find out more

Leicester City

www.leicester.gov.uk/health-and-social-care/adult-social-care/finding-places-to-live/supported-living

Leicestershire

www.leicestershire.gov.uk/education-and-children/special-educational-needs-and-disability/preparing-for-adulthood/supported-living

Introduction

The Supported Living project aims to amplify the voices of people with lived experience in supported living. Through interviews, surveys and visits, the project gathered insights into the strengths and challenges of current services. This report summarises those findings and offers recommendations for improvement.

The project aims:

- Develop an overarching understanding of what services are in place currently across Leicester and Leicestershire.
- Understand more about how individuals and carers view these services.
- Speak with individuals to find out what is important to them and if their needs are being met.

Methodology

We engaged with individuals, including service users, carers and professionals through direct outreach, visits to supported living settings and online surveys. Feedback was collected through conversations, written responses and structured questionnaires.

We heard from 50 people - 31 individuals and 19 carers.



Key themes and findings

Staffing

Individuals and carers highlighted constant staff changes, inconsistent support and the need for continuity of staff training as people's needs change. The lack of continuity of care was a concern with many people expressing the importance of familiar and reliable staff.

Housing

People told us they were worried about whether their housing was safe and suitable. Some said their homes did not meet their needs or give them enough privacy or independence. Others needed more help with taking their medication.

Many people felt lonely. Some found it hard to cope with noise from neighbours who had more complex needs. One person said their roof leaked for months, flooding their home, but no repairs were made. Overall, the biggest concerns for people in homeless supported living were noise and lack of privacy.

Communication

There were mixed experiences with communication. While some people felt heard and involved, others reported a lack of transparency and difficulty accessing information.

Support planning

People told us their support plans were not always made for their personal needs. They also said they felt that plans were not checked often enough. Many people felt left out of decisions about their care. They said support plan reviews were usually done between case workers, without asking them for their views.

Positive experiences

Despite challenges, many people shared positive stories of dedicated staff and supportive environments that enabled independence and personal growth.

Survey findings - Individuals



responses

How long have you been using supported living services?

Less than 6 months	6 months to 1 year	1-2 years	2-5 years	5+ years
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How good would you say your support is?

Good	23
Bad	3
Neither Good nor Bad	1
Sometimes good sometimes bad	4

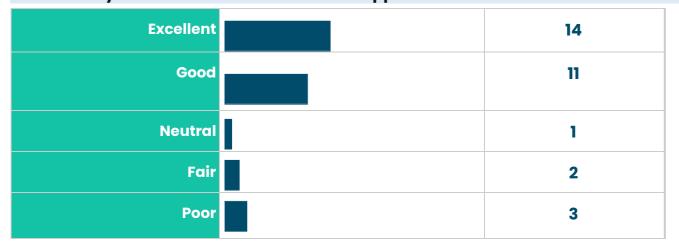
What parts of supported living do you like the most? (Tick all that apply)





People shared that they liked going to the gym, swimming, badminton, tai chi and boxing. People were engaged in their local communities at singing groups, going to the pub, shopping and market and town outings.

How would you rate communication with support staff?



We asked people to share any areas where local support services could be better.

- Individuals expressed a need for more staff support at GP appointments. Several people mentioned that 24-hour care would help those with epilepsy, especially to feel safer going out.
- Some people reported poor experiences with past providers. A few noted that support depends heavily on which staff are working, with variable communication and attentiveness.
- People want more group activities, trips, holidays and exercise opportunities. Gardening and sports (e.g. swimming, building a garden track) were also mentioned.
- There was a request for more face-to-face mental health support, rather than phone-based help. People expressed feelings of loneliness, particularly at night or for those living alone.
- Some people expressed a desire for greater involvement in the wider community. Volunteering and social clubs were valued, but not always accessible to everyone.
- Some people expressed that they want more independence or are ready for their own place.
- Several concerns were raised around high costs and poor value. Some people said more funding is needed to allow individuals with high support needs to engage more in their local community.

Quotes

"I would like my support staff to help with medication as I am doing it on my own and sometimes, I get mixed up."

"The previous care group would just call and for 2 months I saw no one – which was risky."

"More holidays would be nice."

"Would like more exercise and wellbeing."

"Feels lonely at night as in a bungalow on my own."

"Engaging with the community more would help reduce the gap. You can feel isolated and not part of the community."

"Everything is awful, need new management – it's run as a business" and "I feel I am in the wrong place for what I need. I feel I could be in my own flat. I feel I am paying a lot for not a lot."

How would you rate communication with support staff?

Excellent	14
Good	11
Neutral	1
Fair	2
Poor	3

Positive feedback **Suggestions for improvement** "They have helped me move on and get my own "Agency staff during weekend, not place." knowing personalised plans, consistency of staff, don't get to go out much on "I'm quite happy with the support." weekends." "Key worker is very involved however, but day to "Handover time between care workers day staff not as consistent" not a quick 5 minutes." "You get a good relationship with your worker. "Care workers are trained for their You get to understand more about yourself. You particular service user but should be feel safe - there is confidentiality." more focused. E.g. I look after a diabetic "Carers talk and listen better. Resolving patient so only trained in their patients disagreements with friends." care." "The support workers are lovely people. They are "Mental health support - face to face good listeners and give good advice. The rather than over the phone." supported living service is excellent." "Every week there is a support session and they follow up. Thank God for Falcon. I am now at stage 2 and have an apartment with my partner - they helped me with that."

How involved do you feel in decisions about your care and support?

Very involved	12
Somewhat involved	8
Neutral	5
Somewhat not involved	3
Not involved at all	3

Most people **(20)** feel 'very involved' or 'somewhat involved' in the decisions about their care and support.

Survey findings - Carers



How long has the service user been receiving supported living services?

Less than 6 months	6 months - 1 year	1-2 years	2-5 years	5+ years
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On a scale of 1-10 how satisfied are you with the overall quality of supported living services?

(1 being extremely dissatisfied, 10 being extremely satisfied)

1 2 3 4 5 6 7 8 9 10

Extremely dissatisfied

Extremely satisfied

Most people rated the service received as a '6'.

What parts of supported living do you like the most? (Tick all that apply)

Personalised care plans	10
Help with Independence	10
Engaging with the community	9
Social activities	8
Support for health and wellbeing	7
Other (please specify):	7

Carers and relatives also shared that they found day to day support, support plans and dedicated social workers beneficial.

How would you rate communication with support staff?

Excellent	3
Good	5
Neutral	6
Fair	2
Poor	3

Are there specific areas where you believe our local support services could be improved?

Carers and relatives shared that the high staff turnover and lack of continuity of care were major concerns. Carers commented that undertrained staff are expected to perform management roles and a lack of consistency leads to missed support hours and poor routines. Support workers were praised, but management practices criticised:

"The people who give the support, on the ground level, are not who we have problems with. It's the management."

"Support staff are excellent, but the management are awful and do not listen to my concerns."

"The support workers are lovely, they are good listeners and give good advice, it is excellent."

"The information from management is very limited."

"There should be a liaison staff member to give links to other services."

"If it weren't for the great carers, I would've taken him out."

"The carers are amazing - but the company is in it for the money."

"I personally think Assisted Living Facilities with care and support available 24/7 are a beneficial way to bridge the gap between unsupported living and care homes."

"One house rarely has a manager in place due to staff high turnaround, so the remaining support staff have to oversee the managerial duties without the correct training and

leadership skills. The service users are not supported to carry out their morning routines effectively and are therefore often late to their day service and unprepared, most of the time not having had breakfast. Parents and carers of the service users regularly inform us that they do not get the 1:1 hours that they pay for. We have reported numerous safeguarding concerns which we feel get brushed under the carpet."

Concerns shared about neglect and poor daily support

"Yes, please do something about the terrible care and extortionate prices."

"I have raised my concerns, but social services must ask them for a response and it's all a pack of lies so nothing changes whilst they rake it in perhaps when somebody dies something will happen."

"Supportive and warm, but the support for daily chores is not particularly good."

"Each day the staff handover takes place at 8am which is a tough time to handover, as residents need to be woken and helped to get ready on time to be collected for their daily activities. This means that mornings are rushed and that often, residents leave the house with toast in their hands and the wrong clothing, e.g. no winter coat."

Families shared that they often feel out of the loop and there is a need for better connections between care and other services.

"Management giving staff information about my daughter would be needed."

"She wasn't consulted on the change of provider... this was difficult for her."

"Links with integrated services like Adult Social Care are needed."



"Annual reviews don't lead to revised care plans."

"None of the young people have a social worker – this survey is the first communication from anyone in a long time. A point of contact with Leicestershire would be good."

Some carers and relatives felt that there was limited choice and inflexible commissioning

"I was surprised to find when I was looking for care package providers that, because of Leics' preferred provider' approach, I basically only had a choice of two for this specific location.

There should either be competition, or the 'framework' financial approach should be loosened to give us choice that way."

"What will happen to my son when we're not around?"

"I worry that when I'm older, she won't be receiving all the help she needs."

"We miss our family and due to distance, it is not as easy to see them."

"I would love to move in with my girlfriend who has Down's syndrome, but she needs more care than me."

What additional services or activities would you like to see implemented?

- There was a strong desire for care to reflect people's individual histories, personalities and needs.
- Carers and relatives would like to see a consistent delivery and expressed repeated frustration over missed 1-2-1 support.
- People shared that they would like more engaging activities.
- Carers and relatives felt there was a need for more social interaction outside care relationships.
- Suggestions were made for sensory-based environments and therapies.
- People want to be able to engage with management services and were frustrated with a lack of response to concerns or complaints:
- There were calls for more supported living places locally and help with housing issues.
- People feel abandoned or left without representation and want to be able to contact services for support.

Quotes

"It would be nice if the people supporting her had a historic background of her, who she is and what she's been through."

"The service users should get the 1:1 hours that they require in order to meet their support needs".

"More quality time – not just presence, but engagement."

"Outdoor sports events like cricket and volleyball."

"Games night with therapeutic benefits."

"BBQs, themed nights, quizzes, garden games afternoons."

"Some kind of befriending service for service users to engage with their peers and where connections can be forged outside of group events."

"More shared social activities for carers, families and visiting carers."

"Local groups to attend as they can sometimes be limited to late evenings depending on the area."

"Expansion of sensory care in integrated environments."

"Daily 30-minute outdoor walk."

"Motivation and planned progress therapies."

"Accountability and investigation of complaints."

"Support staff need to understand policies and finances."

"When new staff members are employed, they should be properly introduced."

"Improvements needed to communication."

"Access to a service to advise how to approach housing associations for repairs."

"Social services to interact more – they don't at all."

"Someone to call when the situation gets tough."

"Personalised care - they are real human beings who have a life and history and yet there seems no time in the system to take this into consideration. The system is failing our young people."

"I'd like social services to interact more with this type of facility; in my experience they don't at all. How people manage without a relative or friend to do the "paperwork" required, the fact that I don't think they do manage concerns me. I strongly suspect people in need could fall into an unnecessary gap. I appreciate that it really is all about who pays for the required care/support, but I honestly think that while this is being agreed (and in my experience it takes at least 6/8weeks) the service receiver suffers."

Recommendations

Based on these findings, we propose the following recommendations:

- 1. Access to further ongoing specialist training tailored to specific individual needs i.e. epilepsy care etc
- 2. Strengthen handover practice to ensure continuity of care, especially during shift changes.
- **3.** Actively involve individuals and carers in decisions, especially provider changes and care plan updates.
- **4.** Ensure care plans reflect individual histories, preferences and needs.
- 5. Introduce regular feedback channels to act on concerns and suggestions from service users, carers and relatives.
- **6.** Expand activities and trips, including exercise and wellbeing sessions.
- 7. Look to create befriending schemes to reduce loneliness and encourage peer connections.
- **8.** Facilitate access to local clubs and volunteering opportunities to promote community inclusion.
- **9.** Review housing arrangements to ensure they meet individual needs for safety and independence.
- **10.** Strengthen mental health and emotional support by providing access to existing resources and signposting information.
- 11. Assign a dedicated contact for people without a family advocate, so their needs are supported and their voice is heard.
- **12.** Providers to monitor the delivery of 1:1 support hours to ensure they are consistently provided.

Service provider response

Response from Leicester City Council

Firstly, thanks to Healthwatch for speaking to people who live in supported living across the City and County about their experiences and for capturing the voices of their carers to.

The report provides some invaluable insight and learning which will help support us in conversations with colleagues within adult social care and providers of supported living.

In the City we are currently looking at our supported living services and again the information, thoughts and views of people is incredibly helpful to help us shape the services going forward and support further conversations with people in supported living.

Leicestershire County Council was invited to comment on the report before publication, but we did not receive a response.



Equality monitoring – Individuals

Where do you live?

Blaby	1
Charnwood	12
Leicester City	9
Harborough	1
Melton	3
Oadby and Wigston	4
Rutland	1

What is your age group?

16-17 years	0
18-24 years	1
25-49 years	12
50-64 years	14
65-79 years	1
80 years or older	2

How do you identify your sexual orientation?

Straight / Heterosexual	17
Prefer not to say	14

What is your current gender identity?

Female	7
Male	24
Non-binary	0
Prefer to self-identify	0
Prefer not to say	0

Is your current gender identity the same as the sex you were assigned at birth?

Yes	30
No	0
Prefer not to say	1

What is your ethnicity?

Asian/Asian British: Indian	3
White: British/English/Northern Irish/Scottish/Welsh	26
White: Any other White background	1
Prefer not to say	1

Do you have a disability?

Yes	22
No	5
Prefer not to say	4

Do you have a long-term condition?

Yes	21
No	3
Prefer not to say	7

How much money do you have?

I have plenty to spend on things I need, and plenty left for extras I want	2
I have enough to spend on things I need, and a small amount for extras I want	12
I have enough to spend on things I need, and not much else	4
I don't have enough for things I need and sometimes run out of money	5
I don't know	2
Prefer not to say	6

Equality monitoring – Carers/relatives

Where do you live?

Blaby	3
Charnwood	2
Leicester City	1
Hinckley and Bosworth	3
Melton	4
North West Leicestershire	1
Oadby and Wigston	1
Out of area	3
Prefer not to say	1

What is your age group?

25-49 years	9
50-64 years	5
65-79 years	4
Prefer not to say	1

Do you have a disability?

Yes	8
No	5
Prefer not to say	6

What is your gender or sex?

Female	11
Male	6
Non-binary	0
Prefer to self-identify	0
Prefer not to say	2

What is your ethnicity?

Black/ Black British: African	1
Black/ Black British: Caribbean	2
White: British/English/Northern Irish/Scottish/Welsh	11
White: Any other White background	1
Prefer not to say	4

Do you have a long-term condition?

Yes	12
No	4
Prefer not to say	3

Appendix A: Organisations engaged with as part of the project

Organisations		
Leicester City Council (Supported Living Forum)	15. Well Being Champions	29. Creative Support
2. Leicestershire County Council (Supported Living Forum)	16. Skelton Court	30. Burns Road Loughborough
3. Pathfinders	17. Affinity House	31. Chairman House Supported Living
4. Norton housing and support	18. Sanctuary - Sycamore court	32. Duncan House
5. Rehability UK	19. Values Project	33. Fictor Avenue
6. Lifeways	20. Wellys Workplace	34. Homeshare
7. Voluntary Action LeicesterShire (VAL)	21. Falcon Support Services	35. IBC Boy Centre- Health Care
8. Voluntary Action South Leicestershire (VASL)	22. Ivolve	36. Netherend Cottage - Aspirations
9. Trinity Care	23. Aspirations Care	37. Oakham
10. Apple House	24. Woodleigh Healthcare	38. The Chantry Leicester
11. Chartwell Trust	25. Life Wava	39. Thurnby Lodge
12. Sanctuary Support Living	26. Herioc Care	
13. Voyage Care	27. East Midlands Housing (EMH)	
14. Guti Mirror Health care	28. POhWER Advocacy	

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