UNICARE
COMPLEX CARE SPECIALIST



UNICARE SUPPORTED LIVING

Specialist supported living, respite and transition pathways for adults, children and young people with complex needs

UNICARECOMPLEX.CO.UK

Homes that feel real. Support that is structured. Outcomes that matter.

Unicare provides supported living and selected respite pathways for people with learning disabilities, autism, mental health needs, physical disabilities, complex health presentations and behaviours that challenge services. Our approach is built around matching the right person to the right environment, the right support team and the right level of oversight.

For commissioners and professionals

Clear referral pathways, realistic support models, responsive mobilisation and services that can manage complexity without losing sight of day-to-day quality.

For families and private clients

Warm, practical support in homes that are safe, respectful and built around each person's routine, interests and longer-term progress.

For the people we support

A place to settle, regain confidence, learn skills, enjoy meaningful activity and build a life with more independence.

Our service footprint

Our supported living portfolio includes services across Guildford Avenue, Oakview, Gate House, Goodwood, Goldstone and Wilbury, with flexible pathways for transition, stabilisation and longer-term living.

Homes that feel real. Support that is structured. Outcomes that matter.

Supported living should do more than place someone in accommodation with staff around them. It should create the conditions for stability, progress and a life that makes sense to the person living it. That is the standard we work to.

Unicare supports people whose needs are often too complex for generic provision. Some people are moving on from family breakdown, hospital, residential care or a failed placement. Some need a calmer home, a safer environment, a more structured daily routine or a provider that can hold risk without turning everyday life into an institution.

We build support around the person, not the other way round. That means starting with the individual's presentation, communication style, physical needs, sensory profile, emotional regulation, compatibility, risks, ambitions and what has or has not worked before.

What this looks like in practice

A real home, a carefully matched team, a support plan that people can actually follow, and leadership that stays close enough to prevent drift, avoidable incidents and placement breakdown.

Who we support

Learning disability and autism

Support built around predictable routines, communication adaptation, sensory awareness, skill building and community participation.

Mental health and emotional regulation

Structured supported living for people who may need calmer environments, consistent staffing, clear boundaries and support that understands trauma, distress and recovery.

Physical disability and complex health

Support with mobility, personal care, manual handling, medication, nutrition, therapy programmes, postural care and health monitoring where required.

Behaviours that challenge services

Teams trained to understand behaviour as communication, reduce triggers and use proactive support rather than reactive restriction.

Dual diagnosis and mixed presentations

People whose needs do not fit neatly into one label and require joined-up thinking across autism, mental health, physical health and risk.

How Unicare support is built

01 The right home

Chosen or shaped around sensory needs, mobility, privacy, compatibility and the support structure that will actually work.

02 The right staffing model

From 1:1 support through to enhanced staffing, sleep-ins and waking nights where required.

03 The right routines

Daily structures that are practical, calming and based on how the person functions best.

04 The right oversight

Operational leadership, case coordination, clinical input where needed and regular review so issues are picked up early.

05 The right goals

Practical outcomes such as safer routines, reduced incidents, stronger daily living skills and better community access.

The key principle

A placement works when the environment, people and support plan fit together. When one of those is wrong, the person usually carries the cost. Our job is to get that fit right from the beginning.

What support looks like day to day

Depending on the individual, our teams may support with personal care, medication, meal planning, budgeting, emotional reassurance, health appointments, mobility, community access, tenancy support, therapy programmes and structured routines.

We avoid vague promises. Good support is not just ' person-centred'; it is practical, reliable and consistent enough that the person feels safer, families feel reassured and professionals can see progress.



Daily living

Washing, dressing, cooking, shopping, cleaning, laundry, appointments, prompts and support to manage everyday routines.



Health and wellbeing

Medication, liaison with clinicians, observing changes, supporting nutrition, hydration, therapy goals and physical wellbeing.



Communication and engagement

Using clear language, visual prompts, adapted pacing, reassurance and meaningful activities that suit the person rather than a standard timetable.



Community life

Travel training, walks, local activities, education, volunteering, family time, faith, hobbies and building confidence outside the home.

Homes and environments that support success

The environment matters. A person who is overstimulated, unsafe, inaccessible to services or poorly matched to others is less likely to settle and more likely to break down.

That is why Unicare looks beyond the building itself. We consider layout, accessibility, staffing visibility, sensory load, garden space, transport links, privacy, compatibility and how the home can support both independence and safety.

Our supported living settings

Our portfolio includes established and developing supported living environments linked to Guildford Avenue, Oakview, Gate House, Goodwood, Goldstone and Wilbury. Each setting is used with a different purpose in mind, from stabilisation and transition support to longer-term supported living.

Guildford Avenue

Community-based supported living for people who need a stable home and a tailored support structure that can grow or reduce over time.

Oakview

A pathway suited to transition, compatibility planning and developing confidence in a more settled living arrangement.

Gate House

Useful where a person needs a carefully managed move, a clearer support framework or a home that can support stabilisation before longer-term decisions are made.

Goodwood

A setting aligned with structured support, daily living development and a clear pathway towards a more settled and sustainable placement.

Goldstone

A supported living environment that can suit people who need consistent routines, community access and a provider able to balance support with autonomy.

Wilbury

A home within the wider portfolio that supports longer-term living, day-to-day stability and continuity of staffing.

Individual availability, compatibility and support models are always assessed case by case. We do not treat an empty room as a suitable placement simply because it exists.



Respite, short breaks and step-up / stepdown pathways

Not every person or family needs a permanent placement from the outset. Sometimes the right first step is a planned short break, a structured assessment stay or a period of respite that reduces pressure while longer-term decisions are made.

In selected homes, Unicare offers respite and short-break pathways that can support adults and, where appropriate through the wider Unicare model, children and young people who need a safe, well-managed and meaningful stay rather than simply a temporary bed.

When respite can help

Family pressure, carer fatigue, crisis prevention, transition planning, post-discharge bridging, trial stays or a structured opportunity to assess a future move.

What respite should include

Consistent staffing, good handover, personalised routines, calm environments, meaningful activity and clear communication with families and professionals.

How it links to long-term support

A short stay can build confidence in the environment, highlight what support level works and reduce the risk of a poorly planned permanent move.

Why selected homes matter

Not every environment suits respite. The best settings have the right staffing, layout, activity space and ability to absorb short-term transitions without unsettling everyone else.

Sensory rooms and indoor activity areas

Some people regulate better when they have access to a dedicated calm space and sensory-led activity area. For individuals with autism, profound and multiple disabilities, trauma, communication differences or high sensory needs, these spaces can make a practical difference to regulation, engagement and everyday wellbeing.

01 Calming and regulation

Low-stimulation seating, mats, weighted items, gentle lighting and sensory resources that help a person settle or recover after overload.

02 Interactive play and engagement

Activity tables, tactile panels, fibre optics, movement play and sensory resources that support attention, exploration and enjoyment.

03 Movement and body awareness

Where suitable, items such as sensory swings, soft play or balance equipment can support proprioceptive input, play and supervised regulation.

04 Safe use

These spaces work best when staff understand when to invite, when to reduce input and when the environment itself needs to be adapted for the individual.

Illustrative concept: a sensory room and activity area with spaces for calming, movement, tactile exploration and supervised play

Designated gardens and outdoor activity areassuccess

Outdoor space should not be an afterthought. For many people, a safe and well-designed garden gives room to regulate, move, play, take part in activity and enjoy fresh air without the pressure of a busy public setting.



Movement and play

Trampolines, swings, stepping elements, soft-surface zones and open space for safe movement, active play and supervised exercise.



Calm and sensory exploration

Raised planters, textured features, shaded seating, simple sensory objects and quieter corners for people who benefit from lower-demand outdoor time.



Structured activity

Table areas, visual games, chalk boards, outdoor tasks and activities that build routine, turn-taking, focus and enjoyment.



Safety and fit

Good outdoor areas need more than equipment. They need safe boundaries, the right surfacing, line of sight for staff and enough room to reduce friction and conflict.

Outdoor space should not be an afterthought. For many people, a safe and well-designed garden gives room to regulate, move, play, take part in activity and enjoy fresh air without the pressure of a busy public setting.

Transition planning that reduces the risk of breakdown

The earliest stage of a placement often determines what happens next. Rushed moves, poor communication and unrealistic assumptions create avoidable pressure for the person, the family and the staff team.

01 **Referral review and practical suitability screening**

02 **Assessment of presentation, routine, risks, compatibility and environment fit**

03 **Meet and greets, visits or phased introductions where appropriate**

04 **Transition planning with family, professionals and the support team**

05 **Increased oversight in the early weeks so concerns are picked up quickly**

Our approach to moves

A move should feel planned, not imposed. Where possible, we use phased introductions, clear handovers, visible routines and staffing continuity to help the person settle with less distress.

Positive Behaviour Support and reducing crisis

When people are distressed, overwhelmed or not understood, that distress often shows up in behaviour before it shows up in words. We work from the principle that behaviour has meaning and that good support reduces the conditions that make distress more likely.



Understand the pattern

What usually happens before, during and after distress? What is the person communicating or struggling to manage?



Change what can be changed

Reduce triggers, adapt routines, improve communication, lower sensory load and increase predictability where this helps.



Train the team properly

Staff need more than theory. They need practical guidance on pacing, boundaries, reassurance, observation and de-escalation.



Review and refine

The support plan should keep improving as the team learns more about what helps and what escalates risk.

Working well with families, Local Authorities, ICBs and professionals

The best placements are usually the ones where communication stays clear, expectations are realistic and concerns are dealt with early. We work with commissioners, social workers, case managers, clinicians, schools, families and advocates in a way that is open, respectful and accountable.

Clear information about the support model, staffing structure and what the environment can and cannot safely offer.

Responsive communication during assessment, transition and early placement stages.

Practical updates that focus on what is happening, not vague reassurance.

A willingness to challenge plans that look good on paper but are unlikely to work in real life.



Outcomes that people can actually recognise

We measure success in ways that matter to the person and to the people around them. That may include reduced incidents, greater stability, improved routines, stronger daily living skills, safer community access, better health follow-through, more engagement and a placement that holds.

For the individual

More confidence, more stability, more choice and a better day-today experience.

For families

Reassurance that their relative is safe, known and supported by a team that notices the details.

For professionals

A service that can describe what is working, what is not and what needs to change without hiding behind jargon.

For the system

Better placement sustainability and fewer avoidable disruptions, crises and emergency moves.

Why Unicare

01 **We do not oversell.**
If a placement is not right, we would rather say that early than create a predictable breakdown later.

02 **We understand complexity.**
Our service model can respond to the overlap between autism, learning disability, mental health, physical disability and behaviours that challenge services.

03 **We use real environments.**
Homes should feel like places to live, not mini-institutions with domestic wallpaper.

04 **We are practical.**
Commissioners, social workers and families need providers that can move from discussion to workable action without losing sight of detail.

05 **We stay focused on fit.**
The right environment, the right staffing and the right plan are more important than generic claims about quality.

06 **We aim for sustainability.**
Our goal is not just to start a placement, but to help it last for the right reasons.

Talk to Unicare about a referral, transition or respite enquiry

We welcome discussions from Local Authorities, ICBs, social workers, case managers, families and private clients.

Whether you are considering a planned move, a short-break arrangement, a transition pathway or a more complex placement that has already challenged other services, we are happy to talk through the case in practical terms.

Suitable referral conversations include

- SUPPORTED LIVING
- TRANSITION PLANNING
- COMPLEX PLACEMENTS
- RESPITE AND SHORT BREAKS
- AUTISM AND LEARNING DISABILITY
- MENTAL HEALTH
- PHYSICAL DISABILITY
- CHILDREN AND YOUNG PEOPLE THROUGH APPROPRIATE PATHWAYS
- STABILISATION AND STEP-DOWN SUPPORT

Unicare Complex Care Specialist Ltd

WWW.UNICARECOMPLEX.CO.UK

A supported living provider focused on fit, structure and outcomes that can be seen in everyday life.

UNICARE

COMPLEX CARE SPECIALIST