

# **Review of Accommodation, Housing and Housing-Related Support needs of People Experiencing Severe and Enduring Mental Health Problems**

**Report by the Mental Health  
Review Group - March 2005**

**For presentation to Social Care and  
Housing Scrutiny Committee 5th  
April, 2005**

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## APPENDICES

1. Scoping Terms of Reference
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## 1. Introduction

1.1 In January 2004, the Social Care and Strategic Housing Scrutiny Committee appointed three Task Groups to undertake scrutiny reviews within the service areas of Older People, Children and Mental Health. Cllr Mrs Josie Pemberton, Cllr Mr Bill Turpin, Cllr Mr Keith Grumbley and Cllr Marcelle Lloyd-Hayes were appointed to the review group charged with reviewing the Mental Health subject area.

1.2 Subsequently, acknowledging the implications of the Children Act 2004, the scope of the scrutiny exercise was reduced to encompass the two areas of Home Support Services for Older People and Supported Housing for people with Mental Health problems.

1.3 Terms of Reference were refined in the course of the Scoping Exercise to examine the accommodation, housing and housing-related support needs of people who experience severe and enduring mental health problems, and to establish current provision for this group and any gaps or blockages that exist.

1.4 An initial Scoping Exercise was held on 3<sup>rd</sup> August 2004, supported by officers from Strategic Housing and the Mental Health Service, at which the scoping group established a focused Terms of Reference for the review:

*To review the accommodation, housing and housing-related support needs of people who experience severe and enduring mental health problems*

and

*To establish current provision of this group and any gaps or blockages that exist.*

1.5 The review group also established a series of desired outcomes upon which to focus within the terms of reference:

- Ensure there is transparency and understanding between Housing and Mental Health Services e.g. support with applications, awareness of process and capacity
- Understand “pathways” into housing and protocols and establish good practice
- To establish demand and need for housing with appropriate support
- Creating opportunities for choice in housing tenure
- Consider best practice models for the provision of housing with appropriate support
- To create appropriate, safe and viable housing and support options for people with mental health problems

## 2. Methodology

2.1 A series of Engagement/Investigation Proposals were established through which the review group could explore the key issues (Appendix 2)

Proposal 1 – A visit to the Stonebow Unit including presentation and discussion

Proposal 2 – Exploring the User Perspective

Proposal 3 – Exploring the Provider Perspective

Proposal 4 – Developing supported housing and housing related support services

2.2 The outcomes were discussed at a summary and evaluation meeting on 25 January 05. Notes taken at each event can also be found in the attached Appendices. Presentations

referred to in the Appendices are not attached but are available from Richard Gabb, Head of Strategic Housing.

### **3. Proposal 1 – Visit to Stonebow**

3.1 Members received an overview of mental health services in Herefordshire and a summary of the current key issues facing the service. The review group also noted the high levels of mental health problems in society and were interested to note that one in five people suffer a mental health problem at some stage in their life. The majority of these cases would be seen outside hospital. It was identified that there were a range of common disorders and the services were described which currently provided to promote their recovery. However, people with serious and enduring mental illness accounted for the greatest challenge for providers and an appropriate focus for the review.

3.2 The review considered the “Pathway” of Referrals (Appendix 3) presented by Mark Hemming. This identified the pathways taken, ranging from early intervention, where possible, through to hospital admission and associated routes to treatment, care or support either within the own home or within dedicated accommodation. There were a number of causes and effects to mental illness with influences ranging from employment, through to personal relationships, influencing illness and recovery. The review group heard that there appeared to be increasing incidence, within Homelessness presentation/applications, of persons experiencing mental health problems associated with drug use.

3.3 A clear indication emerged through discussions that, wherever practicable, people with mental health problems were best supported in their own homes. Furthermore, in-patient care was expensive to provide. Specifically, the Stonebow unit provided a 24-hour service with an aim to prevent in-patient treatment where possible. There appeared to be no difficulties in facilitating an admission to the Stonebow Unit in an emergency, although difficulties were described in moving-on from the Stonebow. However, there were a limited number of beds within the Stonebow and short admissions were preferable.

3.4 The review group considered issues around accommodation and support for people with mental health problems. Mark Hemming, Service Manager, Mental Health Services, described accommodation and services currently available including facilities provided through a residential re-habilitation unit at Oak House, Barton Road, which offered Care services 24 hours, 7 days a week.

3.5 However, there were extreme shortages of affordable long-term and temporary move-on accommodation in Herefordshire for those able to live either with no support or low-levels of support. Although the Council and its Home Point partners had facilitated greater priority within the new Allocations Policy for people seeking to move-on from supported accommodation, there was insufficient affordable housing for rent within the County. Furthermore, in view of the shortage, it had to be recognised that increasing the priority of one group impacted on other people awaiting housing.

3.6 The distinct lack of social-rented housing, made worse by continuing levels of Right To Buy purchases, was placing pressure on homelessness levels. Furthermore, the private rented sector in Herefordshire was not providing a real alternative access point to housing for homeless or vulnerable people. Those persons presenting as homeless were generally more vulnerable than some years ago and this presented a challenge for many RSL's in the provision and management of suitable tenancies. Some RSL's had experienced great difficulties coping with more vulnerable tenants and some instances where there was resistance to re-housing persons who they felt were not suitable for general needs tenancies, even with support. A proportion of homeless applicants and tenants would, by

implication, have drug-related problems and associated chaotic lifestyles with a potential for failure to pay rent etc. This led to resistance to re-house following homelessness unless there were assurances about care and support.

3.7 Capital sums had been invested by the Council in developing 'bricks and mortar' schemes providing accommodation with support for people with Mental Health problems. Additionally, revenue support for Housing-related support services via Supporting People grant had been invested at the launch of the Supporting People Programme. This funding also provided floating support services within people's own homes.

3.8 It was discussed that there still remained some confusion amongst service professionals and service users about what services were provided by and/or eligible for Supporting People funding and this had led to challenges in commissioner/provider relationships. This could be resolved through increased training and information for Mental Health services.

3.9 However, there was concern for service users for whom Supporting People-funded support had a role but where a higher level of support and intervention was also needed. Furthermore, there were issues surrounding services and accommodation for individuals who required care and support beyond that which could or should be provided through Supporting People funding.

3.10 Housing and resource shortages were the main issues affecting people with Mental Health problems and a specific challenge for Mental Health Services lay in adequately resourcing Care and Support Services to those for whom general tenancies with RSL's were not appropriate or viable or where extensive care services within the home were necessary. Mental Health Services considered that there was a gap in the range of housing available to suit a variety of needs with resultant 'blockages' in the system. The review considered this could be identified in the development of the proposed Mental Health Housing Plan but wished to see more detail from Mental Health Services on where blockages existed.

3.11 Housing-related support for people in their own homes was financed by Supporting People grant, whilst care in the home or in-patient treatment was funded by a pooled budget jointly financed by Social Care contributions and the Mental Health Service, managed by the PCT. Members considered that the PCT should make a greater investment in Mental Health Services in responding to the distinct challenges around more intensive levels of support and accommodation.

3.12 Members highlighted the need to improve communication between Registered Social Landlords (RSL) and Mental Health Services in order to improve understanding of the issues and support services available. It was considered that some RSLs might be reluctant to accept people with mental health problems although RSLs would be more willing to take service users if they had more confidence about the level of support available.

3.13 Recognition of a person's priority need, or the allocation of a Gold card, was no guarantee that a person would be housed due to the pressures within the housing stock. Within this environment, there was a potential for representations from other people who might be forced to wait longer for housing where additional priority was given to specific groups.

3.14 Mental Health Services were asked for a position statement on blockages in move-on accommodation. More specifically there was a need to evidence individuals stuck in specific establishments, e.g. numbers ready to move on who have been trying unsuccessfully to get re-housed, and the impact of the lack of affordable move-on accommodation.

3.15 The review group considered the impact of recent Supporting People Service Reviews carried out which had led to some challenges for existing accommodation-based support services linked to the Mental Health Service. Service reviews considered a range of factors, including those around strategic relevance, quality of services provided, and value for money, and undertook user and stakeholder consultation as part of that process. Decisions relating to the future of services reviewed under the process, were made by a Commissioning Body comprising representatives from the Council, The Primary Care Trust (PCT) and West Mercia Probation.

3.16 There was some evidence that there was a lack of ownership and engagement on the part of Mental Health Services with some recent Supporting People reviews linked to the service area, possibly due to capacity. This had contributed to tensions over review outcomes and commissioning decisions which had changed established services. It had also highlighted issues around the need for clarity over what sort of housing-related support services Mental Health Services both wanted and were able to complement through their own resources and services. Again, this appeared to be an issue that could be considered in light of any emerging Mental Health Housing Plan.

3.17 In considering the shortage of affordable housing and the impact this had on the outcomes for people with Mental Health Problems the review team felt a range of options would need to be considered, This could include exploring future options for e.g. shared ownership, sheltered housing schemes and considering ways of using them imaginatively to deal with more diverse client groups.

#### **4. Proposal 2 – Exploring the User Perspective**

4.1 The exploration of the Service User perspective in terms of housing and support for people with mental health problems was considered an important element of the process and review members found this particular session be a very positive and informative experience.

4.2 Service users and user representatives were invited to describe their experiences in support and housing terms in a session supported by the Involving People Co-Ordinator for Herefordshire PCT. Some key descriptions appeared either common to the experiences of people with mental health problems or were highlighted as important in terms of the impact on accessing or sustaining housing, support and recovery.

4.3 The early stages of a tenancy were when persons with mental health problems could be at their most vulnerable. This could be due to neighbour harassment or difficulties in accessing key landlord services such as repairs, which could upset an individual's stability. It was therefore important that agencies considered what opportunities existed to mitigate the risk of problems being encountered. Examples included the possibility that Registered Social Landlords might be encouraged to prioritise repairs for tenants who were vulnerable to mental health problems or provide more intensive housing management support at the early stages of a tenancy.

4.4 The shortage of affordable housing and housing options was frustrating for those who either needed to move on from supported accommodation or who were ready to secure employment but needed to move in order to do so. This impacted on the recovery pathway and hindered independence due to a continued reliance on support networks and benefits. However, there were simply insufficient financial resources and development land available to satisfy the need for affordable housing.

4.5 People wanted choices about where and how they lived. For some service users this might mean total independence in a tenancy or through owner-occupation and for others a form of community or shared living. The option of 'small group homes' was raised by a service user whereby individuals run a community home themselves, perhaps joining together for meals if they wished. Other service users were committed to seeking more independent solutions.

4.6 User groups and Issue-based Groups provide an important 'voice' and advocacy service for service users, especially when difficulties in dealing with key agencies were experienced. Examples were given when the intervention of these groups had resolved issues which could have challenged the sustainment of tenancies. Support from these groups had also proved useful for those experiencing homelessness or making homelessness applications and the Housing Options Team had provided extra support for mental health users seeking re-housing through Home Point.

4.7 Individuals required different levels of support and, for some, there will be more than one attempt at trying to successfully live independently. Therefore, a return to supported accommodation might be required for some people. On occasion, the support needs of some individuals were too great for tenancies to be sustainable. Where there were problems within the city, the Crisis Team could assist but this did not appear to be available in rural areas.

4.8 Due to the vulnerability of some people, there would be locations which could be unsuitable for some individuals to be housed within. As a result, it was important that support workers assisted vulnerable applicants through the Home Point bidding process. An advocacy role in that process should facilitate discussion with landlords over where bids might be appropriate. Furthermore, whilst Choice-Based Lettings had demonstrated huge benefits there was always a risk that vulnerable people might not be well placed to engage with such a system.

4.9 The review considered how the housing agenda had changed in recent history with a move towards being part of a strategic response to Health and Social Care agendas. Herefordshire had produced a Learning Disabilities Housing Plan which has assessed the problems and needs, considered the resources and models of response and planned a way forward in a real partnership with Housing and Learning Disabilities colleagues. The same approach was critical to developing housing responses for people with Mental Health problems. Joint ownership with Supporting People, Strategic Housing, Mental Health Services and service users was critical during the preparation of the Mental Health Housing Plan. General needs or supported housing was only part of the solution however. The review heard that there was a shortage of 24-hour nursing/residential care in Herefordshire with significant funding having to be spent out-of-county. Whilst there was a need for investment in Herefordshire for more general needs accommodation, investment was required for more specialist and intensive services/accommodation.

## **5. Proposal 3 – Exploring the Provider Perspective**

5.1 The exploration of the provider perspective offered the review members with an opportunity to explore services provided to support people with Mental Health problems through both accommodation-based services and floating support services. Andrew Strong, General Manager of Herefordshire MIND was invited to reflect on services and challenges faced in the current funding environment including a provider perspective on housing related support through the Supporting People Programme. MIND was not just involved in housing-related support but also provided counselling and psychotherapy services, a nursing home (The Shires, Aylestone Hill), transport services (to address rural isolation) and day services.

5.2 Experience showed that comprehensive assessment of a person's capabilities and support needs was an essential part of tenancy sustainment. This was just as important for supported housing schemes where a robust sound referral criteria was essential to ensure the appropriateness of the person being referred, and the safety of other residents and the individual themselves.

5.3 There were particular difficulties for accommodation-based providers in managing high-density accommodation based in one building with multiple-occupancy. Such accommodation would only be suitable as transitional accommodation, however, there was a shortage of move-on accommodation for single people which challenged the facilitation of move-on.

5.4 The review heard that a real threat had emerged to the long-term sustainability of the currently wide-ranging Supporting People Programme in Herefordshire following the announcement of a proposed re-distribution formula. This presented challenges to housing-support provider's stability within the County. Provider and service continuity would also be challenged by the ongoing inability of the Council, as administering authority under the programme, to issue longer-term Supporting People contracts in such an environment.

5.5 In contrast to 'accommodation-based' support, 'floating' support followed the person and was not aligned to any particular accommodation. It provided an opportunity to sustain people within their own community. This assisted independence and was more cost-effective.

5.6 However, challenges and difficulties had been experienced in relation to managing the expectations of professionals providing care with the role and purpose of professionals providing housing-related support services. Partnership working and a two-way learning process were identified as being essential to overcoming these challenges in delivering care and support services to people experiencing mental health difficulties.

5.7 Reference was further noted in relation to pressures on capacity within the Stonebow Unit and the difficulties in onward referral to Oak House where some people were remaining due to a lack of move-on accommodation. This appeared to suggest that a lack of move-on accommodation impacted backwards to in-patient facilities at the Stonebow. The majority of people being admitted to the Stonebow Unit currently returned to their own home, however, for some this was not a possibility because of a lack of appropriate support. The review considered that the extent or existence of this as an issue would emerge from the requested information on blockages in the system. However, the review group considered it would also welcome a comparison between the costs of hospitalisation and the costs of providing care or support in the home or within supported accommodation options.

5.8 A theme repeated from the user perspective was that the voluntary sector, and organisations providing advocacy services for users, appeared to have a strong role and real benefits in the support of people experiencing mental health difficulties. However, it was also evident that budget shortages had impacted on such services.

## **6. Proposal 4 – Developing Supported Housing & Housing Related Support Services**

6.1 Through this final event in the programme, the review group explored the role and scope of the Supporting People Programme in Herefordshire and considered the process under which a high quality accommodation based scheme had been commissioned and developed in partnership between the Council, a Registered Social Landlord, Herefordshire MIND and Mental Health Services within the Primary Care Trust (PCT).



6.2 The Supporting People programme was highlighted as promoting the independence and social inclusion of vulnerable and disabled people through the provision of housing-related support services that enabled people to maintain and sustain their tenure. In working to an agenda around seeking to develop independence, prevent homelessness and sustain tenancies, the aim in relation to people experiencing mental health problems therefore can be described as attempting to prevent people requiring mental health services. The aims of Supporting People are consistent with the Mental Health National Service Framework.

6.3 In Herefordshire, over 250 people with mental health problems currently receive support from Supporting People funded services and prior to the implementation of the programme nationally, supported housing had been delivered on an ad hoc basis with little or no reference to strategic relevance, quality checks or controls.

6.4 The review noted that the Supporting People Programme does not deliver a solution to the shortage of housing within Herefordshire but it does have a role to play in making, e.g. social housing, more accessible to people with mental health problems. More specifically, general needs housing could be suitable for someone requiring low level housing-related support, where formerly a landlord might have resisted an applicant with no support services available.

6.5 Within Herefordshire, a nominal cap of 10 hours support per week for each individual reflects a need to demonstrate an equitable distribution of funding to meet identified needs within the programme and further illustrates the distinct role of the programme in promoting independence. An outcome for support provided under the programme is that support could be reduced as service users gained in confidence and independence.

6.6 The review was informed of a number of services provided under the Supporting People Programme which illustrated the effectiveness of the programme in helping people, who are experiencing mental health difficulties, stay in their own homes. This included a scheme operated by Carr Gomm who were working with the Assertive Outreach Team in skilled and challenging work to support 15 people with multiple and complex needs in their own homes.

6.7 In housing terms, there appeared to be a desire from mental Health Services to see a broad spectrum of accommodation with appropriate support to meet the wide range of needs of service users. This would range from general needs housing with support when required to group home provision for others and 24 hour nursing residential care. However, the role and appropriateness of Supporting People funded support was to provide enabling support services in general needs and supported housing environment.

6.8 The review considered a presentation on the development of a transitional supported housing scheme at Etnam Street, Leominster, developed for people with mental health problems in partnership between the Council and a range of other agencies. Achieved through the conversion of existing domestic residential accommodation into high quality self-contained accommodation, occupants have tenancies for up to two years during which time they are supported to move on to general needs housing. Each person receives floating support as a condition of their tenancy, provided for up to six hours per week by Herefordshire MIND.

6.9 Denise Shuker (Director St John Kemble Housing Association) outlined that the scheme had evidenced how it was possible to work collaboratively and in partnership to overcome difficulties. Residents were delighted to be living there independently and support workers from MIND had reported how much clients had improved in confidence. The review considered this as being a good example of partnership working.

6.10 In closing the session, the review group heard evidence of the increasing affordable housing shortage in Herefordshire. Specifically, house prices rising faster than salaries was continuing to make owner-occupation unaffordable for Herefordshire residents. This problem was exacerbated by inward migration of older, more affluent households to the County, and continuing losses of Registered Social Landlord property for rent due to Right to Buy. Furthermore, Herefordshire had a lower proportion of social rented property by comparison to the rest of the West Midlands.

6.11 As a result of this lack of affordable housing, more people were attempting to access the social rented sector which had caused an increase in the applications for housing and increasing levels of homelessness.

6.12 In terms of the impact on the subject of the review, it was evident that the shortage of affordable housing was impacting on the housing opportunities of people experiencing mental health problems.

## **7. Recommendations**

**7.1 The review considers the completion of a Mental Health Housing Plan to be an essential requirement to the identification and development of appropriate housing responses necessary to meeting the needs of people experiencing mental health problems.**

**7.2 The recent invitation from Mental Health Services to Strategic Housing Services to participate in the development of a Mental Health Housing Plan is noted and welcomed. Mental Health Services should seek the widest possible partnerships in developing and implementing the strategy and funding responsibilities should be firmly established.**

**7.3 Once there is clarity over the provision of Mental Health services required, the Primary Care Trust should commit the necessary resources to enable the funding of Mental Health Services which will contribute to supporting the outcomes of the Mental Health Housing Plan. The individual accountabilities and contributions of each partner should be agreed.**

**7.4 Transitional supported housing is an essential element in a spectrum of accommodation and housing options for people with mental health problems. However, it may not be appropriate for some people with complex and enduring mental health problems. Services for these people are outside the scope of the SP programme as their needs cannot adequately be met through the provision of low level housing related support. These services should be funded appropriately by the PCT. Additional investment should be made by the PCT to provide accommodation and support services to those whose needs should not be met through Supporting People funding.**

**7.5 That a review of existing accommodation-based schemes should be undertaken to establish an accurate picture of blockages in the system due to the perceived lack of move-on accommodation for those who are ready to do so.**

**7.6 That Mental Health Services should ensure close engagement with reviews undertaken under the Supporting People Review Programme to ensure shared and robust ownership of review recommendations.**

**7.7 That the Supporting People Team, in partnership with Mental Health Services, should explore opportunities to provide clarity to partners and providers over the role and expectations of professionals providing clinical and therapeutic interventions and professionals providing housing-related support.**

**7.8 That Mental Health Services should closely engage in any opportunities to contribute to the development of related strategies, including the Supporting People Strategy 2005 – 2010 and annual review.**

**7.9 That Registered Social Landlords should be approached with a view to exploring what opportunities existed for enhanced responses to the needs of tenants with mental health problems e.g. through enhanced responses to repair requests at the early stages of a tenancy.**

**7.10 That options for funding an Advocacy role to assist vulnerable applicants or their support workers with accessing the Home Point system be explored with a view to ensuring engagement in the choice-based lettings process.**

**7.11 That the beneficial role of user groups in enabling service users to have a voice should be noted and that the Council and Primary Care Trust should consider how to re-energise this important sector.**