

ESSEX SUPPORTING PEOPLE

5-Year Strategy

2005-2010

Consultation Draft

Version 1

1 December 2004

TABLE OF CONTENTS

EXECUTIVE SUMMARY	7
SECTION 1: INTRODUCTION	15
1.1. Introduction.....	15
1.2. Essex Supporting People Vision	16
1.4. Progress towards achieving the priorities.....	17
SECTION 2: KEY ISSUES AND STRATEGIC PARTNERSHIP WORKING	19
2.1. Essex County Description	19
2.2: Strategic Partnership Working	21
2.3: Financial Projections	24
2.4. Key Issues and Recommendations.....	27
SECTION 3: INFORMATION ON NEEDS AND SERVICES.....	35
3.1 People who are Homeless	39
3.2 Chaotic Lifestyles.....	43
3.3 Vulnerable Young People	47
3.4 Older People With Support Needs	51
3.5 People with Long-Term Care / Support Needs.....	55
3.8 BME Issues.....	61
3.7 People with HIV / AIDS	63
3.8 People at Risk of Domestic Violence.....	65
3.9 Refugees	69
3.10 Travellers.....	70
SECTION 4: DELIVERY , COMMISSIONING AND TIMESCALES	73
4.1. Commissioning.....	73
4.2 Commissioning New Services: the SP Development Fund.....	74
4.3: Taking Part in the Consultation Process.....	75
4.4. Responding to the Consultation: Contact Details	77
SECTION 5: APPENDICES	78
Appendix 1: Outcome-Based Objectives for Supporting People..	79
Appendix 2: Feedback from Service Users.....	85
Appendix 3: Reports, Strategies and other Documents	93
Appendix 4: East of England Resional Cross-Authority Statement....	95

(Intentionally blank page)

Foreword by the Chairman of the Commissioning Body

The Supporting People 5-year Strategy for Essex is an important document. It will define the direction for Supporting People services for the next five years. As such, service developments planned and funded through the Strategy will have an impact much longer than that period.

I expect that the 5-year Strategy will act as the forerunner of a new way of planning and delivering services. The Commissioning Body has determined that one key theme of the Strategy will be the development of Strategic Commissioning, bringing together opportunities and developments across health, housing and social care agendas.

As part of this, all stakeholders, especially service users, are invited to engage, support and drive forward the Supporting People programme. In this way, Supporting People services in Essex will reach their full potential and truly provide support for vulnerable members of the community.

This document represents the current thinking about what Supporting People services are and what developments are needed across the County. However, it does not spell out which particular services need to be developed, and where. The Commissioning Body will decide the local priorities as a result of the consultation process and in the light of resources available. The consultation period closes on 4 February.

That is why it is important to comment on these proposals and participate in the consultation process. We invite you to help shape the local programme well into the future. Please take time to discuss this document with all appropriate stakeholders:

- Service users
- Their carers and advocates
- Staff who work in the services
- Staff who plan future developments in your organisation

The Supporting People Team will be involved in a series of presentations and meetings across the County. If you are not able to attend any of those, or if you want to make a more detailed contribution to the process, do take the effort to make your views known to the Supporting People Strategy Team.



Cllr Derek Robinson

Chairman of the Essex Supporting People Commissioning Body

(Intentionally blank page)

EXECUTIVE SUMMARY

Purpose

This consultation draft of the 5 year strategy presents a needs and supply gap analysis for service users, providers and other stakeholders to comment on how this may change the priorities for the Supporting People programme.

Therefore we invite partners, service users, providers and other people involved with Supporting People to

1. Comment on the priorities set out in the Consultation Draft;
2. Suggest key gaps in services that are not considered;
3. Highlight development opportunities that address the identified priorities.

The draft Strategy will be published in late November and the consultation period will last from early December until Friday, 4 February 2005.

Recommendations

The draft strategy sets out a number of recommendations on the way forward arising from the analysis of the supply gaps and the problems with current services. The consultees are asked to agree on the strategic direction for the SP 5-year strategy on the following key issues:

1. **Priority target groups** for new services as set out in Section 2.2. :
 - Homelessness
 - People with Chaotic life styles
 - Young People including Teenage parents in relevant districts
 - Frail Elderly People

The issue for Older People and People with a Learning Disability is to make better use of the existing level of investment.

2. **Move-on Accommodation:** Support Housing Authorities to commit to increased availability for vulnerable people through nominations to social housing including RSL stock and through innovative use of the private rented market where possible.
3. **More Floating Support** to move balance of service provision away from accommodation-based services; Propose to make move-on-related Floating Support **funding conditional to move-on arrangements**, i.e. evidence commitment to suitable accommodation in which a client can receive floating support.
4. **Chaotic lifestyles:**
 - (a) Target investment to develop imaginative and joined-up services;
 - (b) Work closely with the DAT Strategic Development worker, local core strategy groups and planning authorities to find pragmatic solutions to overcome the risk of failing planning applications;

- (c) Consider Acceptable Behaviour Contracts (ABCs) and Anti-Social Behaviour Orders (ASBOs) as a referral point to help effective future targeting of preventative support.
5. **Young People Leaving Care** service development of move-on and floating support to improve turnover of accommodation-based services. Acknowledge and promote Supporting People's role in the delivery of the County Council's PSA target and the new Children's Bill.
6. **Older people services:** Develop a more effective mix of Extra care, floating support and Careline services by
 - (a) Targeting frail elderly and the early onset of mental health problems and also provide community support services to older people outside sheltered housing.
 - (b) Improving targeting of support in existing sheltered housing to enable expansion of community-based support in surrounding neighbourhoods.
 - (c) Defining fit for purpose standards for sheltered housing to attract capital and revenue funding
7. **BME groups and People with HIV/Aids:** Use the consultation period to establish whether specialist services are needed.
8. **SP Development Fund:** Deliver additional savings from existing services to allow development in geographical and service areas with unmet need.

Vision and Objectives

The Essex Vision for Supporting People is that

"Supporting People will provide practical, housing-related support that helps vulnerable people to establish a life in which they are safe, can access services and meet their responsibilities.

As a result, people will have a better opportunity to sustain an independent life."

Within this vision lie four basic outcomes for users of our services, because Supporting People helps them to: -

- Sustain their current accommodation
- Attain independent accommodation (Move-on)
- Have access to specialist services
- Achieve a higher level of independence

The objectives for delivering Supporting People services are then to: -

- Ensure value for money from support services
- Respond to the differing needs of communities across the County
- Improve the quality of services
- Co-ordinate assessments and referrals to services
- Develop new 'spend to save' strategies.
-

In the Shadow Strategy (October 2002) the Commissioning Body further prioritised service developments to: -

- Reduce Homelessness
- Reduce Crime
- Reduce Delayed Hospital Discharges
- Promote longer independence and choice for Older People

The County Steer (June 2003) further emphasised the need for partnership working, particularly for hard-to-reach groups including vulnerable young people, ex-offenders and people at risk of self-harm or harming others.

Partnership Consultation and Needs-Supply Gap Analysis

The Supporting People Team has consulted the Commissioning Body, the Core Strategy Development Group and the local Core Strategy Groups as well as providers and key commissioning partners, and service users through a user consultation programme.

The consultation information has been used alongside a need-supply gap analysis that included

- **Benchmarking:** Supply gap analysis comparing Essex with equivalent SP authorities;
- **User Focus Groups** including non-users of Supporting People services within client groups.
- **Specific reviews** of existing services provision for client groups.
- **Performance Indicator Returns** from SP providers.

The needs data will be improved over the lifetime of the strategy by the implementation of the Supported Housing Index and the completion of a number of reviews of housing related support needs.

Financial Projections

The ODPM announcement in August 2004 confirmed that grant funding for 2005/6 will be £1.72 billion, a reduction of 4.7% nationwide. The SP Grant for the following two years will be £1.7 billion.

Essex is a low spending authority in a low spending region. The efficiency savings for the Essex SP budget are not expected to be amongst the high-end of SP authorities. ODPM have promised to announce the actual allocations for Essex in 2005-6 and an indicative allocation for 2006-7 and 2007-8 before the end of the consultation period.

Essex Supporting People is committed to continue to make funding available for key service developments that address priority issues. It proposes to do so through the establishment of an SP Development Fund to be financed from additional savings from within the current budget.

Key Issues and Recommendations

A number of key issues have emerged from the research and early consultation.

1. Move-on Accommodation

The lack of move-on accommodation is felt across most client groups, especially so for young people, people with chaotic lifestyles and people who are homeless. There are a number of actions that can address this issue:

1.1. Stock Increase. Increasing the amount of available accommodation addresses a fundamental cause of homelessness but it is a long-term issue that needs to be tackled through housing and planning strategies. Supporting People will help to assure that the specific needs of vulnerable people are included in housing needs assessments.

1.2. Access to Accommodation. Improving the access to existing social and private rented housing will have more impact in the short and medium term. Given the ongoing pressure on social housing stock, innovative solutions are sought from all housing partners, such as

- Better and joined-up use of existing and new rent deposit schemes;
- Changes to the priority weightings on housing waiting lists;
- Discussions on nominations rights for RSL stock
- Change of use of hard-to-let stock, e.g. for intermediate or transitional housing;

1.3. Supported Housing Index. The new Supported Housing Index will allow people to register their specific needs for housing and housing-related support. The index will help the allocation of stock, but also the planning of future development of services and accommodation.

2. More Floating Support

Across the SP service provision there is a relative shortage of different types of floating support:

2.1. Tenancy sustainment services can help both service users and accommodation-based specialist services through early intervention, before loss of accommodation may occur. However, it is dependent on effective referral arrangements. Supporting People is interested in exploring how tenancy sustainment services can benefit from

- Referrals triggered by rent or mortgage arrears;
- Referrals through Acceptable Behaviour Contracts (ABCs) or Anti-Social Behaviour Orders (ASBOs);
- Economies of scale e.g. through partnerships or cross-boundary services;
- Improved contracts that reflect the nature of Floating Support services.

2.2. Community-based support. The majority of vulnerable older people live outside sheltered housing, but over 80% of the total Supporting People funding for older people is tied up sheltered housing schemes. Service re-provision and increasing floating support services for older people can address this imbalance.

2.3. Move-on support. In parts of the County, the shortage of floating support is identified as the main cause for limited capacity for move-on. Move-on floating support is high on the list of priorities for new service development, because it can encourage landlords to make more accommodation available to hard to reach groups.

Supporting People proposes that funding for new Floating Support services could be directed towards and linked to a commitment to provide access to accommodation for people moving on towards independent living.

3. Priority target groups for new services

More often than not vulnerable people will have multiple or complex problems. This makes it difficult to establish which “client group” they belong to. Supporting People has identified four key sets of Client Groups that face similar problems and that should be given priority for the development of new services.

3.1. Homeless People. Direct Access and other homelessness hostels are well served by good referral arrangements with relevant agencies. An improvement in the turnover rate of clients requires improved access to move-on and move-on related floating support.

3.2. People with Chaotic life styles. In addition to the issues raised in 3.1 (above), this group experiences additional and often complex needs. Housing-related support needs to be delivered alongside specialist support. The low level of move-on and floating support is pertinent and there is little to no specialist provision of accommodation-based services. Key solutions may include

- Target investment to develop imaginative and joined-up services;
- Work closely with the DAT, Probation services, local core strategy groups and others to find pragmatic solutions to overcome the risk of failing planning applications;
- Consider Acceptable Behaviour Contracts or Anti-Social Behaviour Orders as a referral point to help effective future targeting of preventative support.
- Improve communication in the process of planning applications to increase the chance of success.

3.3. Vulnerable Young People.

Young People at Risk or Young People Leaving Care

Services for Young People at Risk or Young People Leaving Care are almost exclusively accommodation based. These services are not managing to achieve the expected level of turnover of clients.

Support to vulnerable young people to give them a good start to independent living has a high strategic relevance. Investment in young people has the potential to avoid a lifetime of problems for the young persons involved. It will also reduce the impact on their communities, support services and for the criminal justice system.

- **Development of move-on with adequate floating support**, both to help young people and assure landlords, is key to ensure that Young People services achieve their aims.
- **Public Service Agreement:** Acknowledge and promote Supporting People's role in delivery of the PSA target and the new Children's Bill.

Teenage Parents

Only 6 out of 12 districts provide specific housing-related support for Teenage Parents.

- **Development in areas of unmet need** can be addressed in cases by developing cross-boundary initiatives. Teenage parents have a high priority on housing waiting lists, but specialist move-on support is not always available.

3.4. **Frail Elderly People in Older People Services**

There is an estimated 50% under-provision of Extra Care services compared to Sheltered Housing. These services prevent frail elderly people from moving into more expensive and less independent residential care.

- **Extra Care:** the proportion of extra care within accommodation-based services for older people needs to increase through re-modelling and re-provision of existing sheltered housing support services.

The current pattern of older people services funded through Supporting People means that they are not available to the majority of older people, who live outside sheltered housing. Supporting People needs to develop a more effective mix of Extra care, floating support and Careline services by

- **Targeting investment on services for frail elderly and the early onset of mental health problems** and also provide community support services to older people outside sheltered housing.
- **Improving targeting of support in existing sheltered housing** to enable expansion of community-based support in surrounding neighbourhoods.
- **Defining fit for purpose standards** for sheltered housing to attract capital and revenue funding

- 3.5. **Other Service User Groups.** Service development outside the target groups, e.g. for older people with support needs, or people with long-term care or support needs (e.g. people with Learning Difficulties), is equally important to continually improve the effective use of Supporting People funding. Supporting People proposes that resources for these developments needs to come from re-modelling of services within current and future budgetary constraints and not from additional development.

4. **BME groups and People with HIV/AIDS**

People from minority ethnic communities make up a relatively small but increasing proportion of the total population in Essex; currently there is no specialist service provision in the county.

There are no specific HIV/AIDS housing-related services in Essex, however expert opinion appears to imply that these are provided under the banner of physical or sensory disability or mental health.

Supporting people should

- **Review:** Use the consultation period to establish to what extent BME or HIV/AIDS-specific services are needed and where;
- **Consult:** Establish in what cases an inclusive approach should be used and where there is a need for special BME services;
- **Gaps:** Pay particular attention to identified service gaps for BME elders and Asian women escaping domestic violence.

5. SP Development Fund

Supporting People needs a Development Fund if it is to commission and develop new key services that reflect the key priorities. If Supporting People is to generate a development fund, savings over and above the ODPM targets are required.

The setting of priorities for new developments will come from

- Priorities identified in this document;
- Priorities and development opportunities that will come out of the consultation process, and which will be used to develop the Strategy's Action Plan;
- The Expressions of Interest received from partner organisations.

Supporting People therefore has to

- **Deliver additional savings** from existing services to allow development in geographical and service areas with unmet need.
- **Conduct a bidding round** in 2005 related to the 2004 Expressions of Interest, including input from local core strategy groups, service user groups and interested provider organisations.

Consultation Period

Supporting People is planning four strands to the consultation process, which will run to Friday, 4 February 2005:

1) Review at Local Core Strategy Groups (LCSGs).

LCSGs are asked to discuss the consultation draft in light of local needs and priorities including local Community Plans.

2) Provider Consultation

A number of Forums are planned to consult providers on their views and suggestions for the priorities as proposed in the consultation draft, including a Providers Forum on 15 November 2004, the inclusive Forum to be held on 16 December 2004, and the presentation of the Commissioning Strategy on 15 January 2005. Providers are also encouraged to provide feedback through questionnaires that will be distributed at the start of the consultation process.

3) Focus Groups on key service development

For key service areas in each housing sub-region of Essex, focus groups will be initiated through the LCSGs and will include provider and user representation. Their remit is to discuss the: -

- (1) Linkage between the SP-Essex and local priorities;
- (2) Opportunities for development
- (3) Action plan for the sub-region for the coming 5 years.

4) Ongoing User Consultation

The user consultation process has been underway since May 2004 and is a continuous process of developing user forums in collaboration with key partners. The consultation draft will feed into this process as a priority for discussion.

SECTION 1: INTRODUCTION

1.1. Introduction

The Consultation Draft Strategy

This document provides information about Supporting People services in Essex. It describes how Supporting People proposes to further improve the match between the services it delivers and the specific issues for service user groups that it needs to address. The document details progress made in developing those services and identifies gaps in service provision and any potential threats.

The preparation of this document has included substantial consultation with partners including service user groups. The purpose of this document is to act as the focus of a two-month period of consultation. The results of the consultation will inform the Commissioning Body on service priorities in the county and help to establish an Action Plan for the next five years. The results will form the basis of the 5-year Strategy to be submitted to the Office of the Deputy Prime Minister at the end of March 2005.

The 5-year Strategy

The 5-Year Strategy for the Supporting People programme in Essex will include the long-term vision for supported housing services in the county as well as an Action Plan on commissioning services for the period 2005 – 2010.

The Commissioning Body is determined to consistently improve the quality of Supporting People services in Essex and so help a wide range of vulnerable people retain their tenancies and to remain independent in the community.

The 5-Year Strategy sets out the level and quality of services that will be achieved during this period. The Commissioning Body will reinforce these standards through a rigorous Monitoring and Review programme that assesses how services are delivered in Essex. Simultaneously, the Supporting People team is committed to continuously improve the efficiency and flexibility of its contracts and business management.

At the heart of the Supporting People programme is a partnership of service users, service providers and service commissioners. This partnership includes representatives from housing, health, probation and social care services. All these stakeholders have been involved in developing the 5-Year Strategy. A key theme underpinning the Strategy is to ensure that the partners work together at a strategic level to provide 'joined-up' services that are effective and better able to meet the multiple needs of service users.

1.2. Essex Supporting People Vision

The first County Shadow Supporting People strategy was developed in October 2002 and set out the vision for Supporting People in Essex. In a sentence, this vision is that

“Supporting People will provide practical, housing-related support that helps vulnerable people to establish a life in which they are safe, can access services and meet their responsibilities.

As a result, people will have a better opportunity to sustain an independent life.”

Outcomes for Service Users: Objectives for Supporting People

The Supporting People programme in Essex is based on a strong partnership between the County Council, the twelve Borough and District Councils, the eleven Primary Care Trusts, Essex Probation and local providers and service users.

During the development of this document, the Partnership identified four key outcomes for service users of Supporting People. These outcomes cut across most service user groups and are now used to define the key objectives for Supporting People.

The Objectives for Supporting People are to help Service Users to: -

- Sustain their current accommodation
- Attain independent accommodation (Move-on)
- Have access to specialist services
- Achieve a higher level of independence

These objectives are discussed in more detail in Section 2.3: Key Issues. A full description of the implications for service types is given in Appendix 1.

Delivery Objectives

In 2002, the Partnership agreed the five main objectives for the Supporting People programme in Essex.

The objectives for delivering Supporting People services are to: -

- Ensure value for money from support services
- Respond to the differing needs of communities across the County
- Improve the quality of services
- Co-ordinate assessments and referrals to services
- Develop new 'spend to save' strategies.

In the Shadow Strategy (October 2002) the Commissioning Body further prioritised service developments to: -

- Reduce Homelessness
- Reduce Crime
- Reduce Delayed Hospital Discharges
- Promote longer independence and choice for Older People

The County Steer (June 2003) further emphasised the need for partnership working, particularly for hard-to-reach groups including vulnerable young people, ex-offenders and people at risk of harm or harming.

1.4. Progress towards achieving the priorities

Since the submission of the Shadow Strategy in 2002 work has continued to develop services in line with the identified service priorities.

Research projects

We have commissioned a number of pieces of research to help us to improve our knowledge about local services in the County. These include

- A needs mapping report commissioned to identify existing indicators of need including data on housing need, homelessness, Indices of Deprivation, Health figures and others.
- A High-level review of the strategic context for developing the 5 year strategy in the County. This helped to set out and analyse the likely impact of growth areas and population trends on the future need for services.
- Contribution to a research project with the Essex Housing Officers Group (EHOG) in to Black Minority and Ethnic housing needs. This highlighted the housing and related needs of all BME communities resident in the County, the accessibility of services and ways to engage with BME communities.
- Involvement in the Supporting People Eastern Region Group research project in to the provision of services for Women Escaping Domestic Violence. This has helped to identify the need for domestic violence services and cross authority partnership working.
- A strategic review of Home Improvement Agencies in Essex to look at their structure, relevance and efficiency and to build up a profile of the services. This review provided important information about the demand for the services, the issues they face with funding and staffing.
- Vulnerable Young People Services Strategic Review, initiated by the Core Strategy Development Group. The ongoing review will include a study into the existing mix of services and identify key gaps.

New and proposed services

The services listed below have come in to operation since April 2003.

- Move on services for women fleeing domestic violence have been expanded in Basildon
- An extension to a sheltered housing scheme for Older People has been opened in Manningtree
- Two schemes for Young People Leaving Care have been opened in Colchester and Basildon
- Three supported housing schemes for people with a Learning Disability have been opened, two in Basildon and one in Castle Point
- A scheme for people with a Mental Health problem has been opened in Basildon
- A scheme for people with a Head Injury has opened in Castle Point.

The following services are due to open in the next 18 months:

- Three schemes for people with a Learning Disability will open in Epping Forest, Harlow and Rochford
- A Womens Refuge in Epping Forest
- A Womens Refuge in Castle Point & Rochford area
- A move on scheme for vulnerable young people in Colchester
- An extra care sheltered housing scheme for Older People in Braintree

SECTION 2: KEY ISSUES AND STRATEGIC PARTNERSHIP WORKING

2.1. Essex County Description

Essex is a very large and diverse County with a population of just over 1.3 million people of which some 2.5% are from ethnic minorities. To meet housing demand more than 5,000 new dwellings are being built every year helping to sustain the above average population growth in the County.

The County is a county of contrasts between the industrial Thames Gateway to the rural Districts of Uttlesford and Maldon. The county borders on London with many commuters making the daily journey to work in the capital.

There are a number of large towns such as Basildon, Chelmsford and Colchester with populations of around 100,000. Colchester is England's oldest town and home to a significant Army Garrison. By contrast Basildon and Harlow are New Towns.

There are high levels of owner occupation across the County, save in the New Towns. Essex is a relatively prosperous County. Yet there are wards in some Towns and Districts to rival inner city concentrations of poverty and social exclusion. The County has three of the ten most deprived wards in the Eastern Region. East Basildon is a Neighbourhood Management Pilot whilst Vange and Jaywick are Education Action Zones.

The population of older people is also rising faster than the national average and particularly in the New Town areas as well as the more traditional retirement areas such as Tendring. There are also pockets of high unemployment in places such as Tendring.

Consultation for preparing the Essex Community Plan has revealed that fear of crime remains high even though actual crime levels are below the national average.

Supporting People contributes to the aim in the Essex Approach to make Essex a better place in which to live and work. This requires clear objectives and the capacity to work through a range of partnerships. This ties in with the spirit of implementing Supporting People, which requires the 5-year strategy to link to the work of agencies delivering health and social care, housing and crime reduction.

(Intentionally blank page)

2.2: Strategic Partnership Working

Strategic Links

Cross Authority Statement for Supporting People in East of England Region (App. 4)

Essex Approach

District Community Strategies

Better Care Higher Standards 'Our Commitment to You'

Intermediate Care Strategies

Valuing People

Equal Lives

Age Matters

Community Safety Strategies

Supporting People Partnership Framework

Essex Partnerships

The 5-Year Strategy for Supporting People in Essex will contribute directly to the County Council's Strategic Objective of "making Essex a better place to live and work", and to the strategy for tackling Social Exclusion. We will do this by working with partners to support healthy independent lifestyles in the community for everyone and by making Essex a safer place to live through its Crime Reduction partnerships.

Local Partnerships

Supporting People by its focus on practical support for vulnerable people is a key element in our ability to contribute to the delivery of the objectives of Local Agencies.

Each of the District-based Supporting People position statements, which underpin this strategy and its Action Plan, are linked with the community planning processes within their authority.

The services that Supporting People delivers often support specific partner agencies that provide related support and care services, either increasing the effectiveness of their services or by preventing people's need for high-intensity care or support services. First, indicative figures from a national study seem to suggest that the benefit realisation of Supporting People services for its partners is close to a 100% of the Essex Supporting People budget (see Table).

Table: Indicative Benefit Realization (£, millions) of the Supporting People programme (Source: Matrix 2004¹)

Service Area	National Benefit Realization	Essex Benefit Realization*
Independent living	474	8.3
Health	267	7.2
Crime reduction	108	0.8
Homelessness	278	6.2
Social services care provision	210	5.6
Total	1,337	28.1

* Essex figures are modelled down by the Essex Supporting People team from the national figures, using relative distributions of service user groups.

Social Care & Health

The Supporting People programme for Essex is designed to fit with the major health and social care objectives, including the various National Service Frameworks, Better Care Higher Standards 'Our Commitment to You', Intermediate Care Strategies, Valuing People and local policies such as Equal Lives and Age Matters.

Considerable work has been undertaken with Social and Health Care Commissioning Managers to ensure that the Supporting People strategy is reflective of and reflected in priorities and objectives set out in these strategies and policies.

This document identifies the wide range of Supporting People services that enable people to live healthier lifestyles, prevent crises and reduce risk.

County Managers are party to discussions on how Supporting People can best help to offer more people the opportunity to achieve independent living with support; early and safe discharge from hospital; and prevent unnecessary or premature residential care or hospital admissions.

Housing Strategy

The Supporting People strategy and its priorities are directly linked to the twelve local housing strategies. Each District-based Supporting People Core Strategy Group, which includes the local housing departments, has produced and updated its own Supporting People position statement incorporating local level needs and supply analysis, and these groups will be asked to contribute to the Supporting People 5 year Strategy Action Plan.

¹ The value of Supporting People? At the crossroads – where next for Supporting People? Chris O'Leary, Matrix, presentation 10th September 2004, SPAN

Community Safety

The Supporting People programme for Essex is directly linked to the delivery of community safety strategies. These clearly identify the need for low level support services for individuals at risk of, or in fear of, violence from people within their home, and the need for a co-ordinated approach to tackle anti-social behaviour.

Anti-social behaviour and a fear of crime are significant concerns in many communities across the County. Members are concerned with support for the victims of crime but recognise that Supporting People is a targeted programme to help vulnerable people retain their housing. This is a vital step in breaking individuals' cycles of repeat offending or anti-social behaviour. They will stress the need for closer working with Police through the Crime and Disorder Reduction Partnerships and partners such as Probation, Youth Offending Teams, and Drug Intervention Programmes.

Regeneration & Renewal

As detailed above, the Supporting People strategy is directly linked to Community Planning at both County and District level.

Our strategy will contribute to the renewal strategies across the County by: -

- Providing a range of tenancy support services which contribute to reducing anti-social behaviour and improving community safety;
- Enabling those with support needs to access health, education and training opportunities.

Black & Minority Ethnic Issues

The black and minority ethnic population of Essex as a whole is relatively small in comparison to the overall population. The supported housing supply mapping exercise we have undertaken shows that there are no services that are specifically designed for, or are targeted at, people from black and minority ethnic communities.

However, as part of the dialogue with providers and the Service Review process we are discussing the approach that providers of existing and pipeline services take to meeting a wide range of cultural and religious needs.

Cross Authority Groups

Essex will strive to provide the services within the County so that local people do not have to leave the County to obtain the support they need unless it is a matter of their positive choice to do so.

Essex has three levels at which it is dealing with cross authority issues:

Links With Essex Unitary Authorities– Thurrock and Southend are unitary authorities with their own Supporting People strategies and structures. Essex meets on a regular basis to discuss cross-boundary issues including passporting

of accreditation and exchange of Service Review issues. The three Authorities make up the South Essex Thames Gateway housing sub-region and they are co-ordinating their input to this strategy.

The East of England Region – including the neighbouring counties Hertfordshire, Cambridgeshire and Suffolk. Essex is an active member of the Supporting People Executive Regional Group (SPERG, formerly the “RIG”). The activities of the Group have led to the development of the Cross-Authority Statement for Supporting People, with particular reference to service user groups with strong cross-authority links, including Travellers, People Escaping Domestic Violence and Ex-offenders (Appendix 4).

Essex is also part of the housing sub-regions of the London Commuter Belt (with Hertfordshire) and the Greater Haven Gateway (with Suffolk). The input from Supporting People into these strategies are also co-ordinated with the Supporting People teams concerned.

London – There is a perception that certain groups of people may actively seek services in the capital. Ignorance of local services might also conceivably play a part. All this suggests that Essex, together with other Home Counties authorities, will have to develop a stronger relationship with whatever commissioning arrangements eventually emerge in London.

2.3: Financial Projections

Strategic Links

Office of the Deputy Prime Minister Announcement of Funding Levels for the National Supporting People Programme, August 2004

Robson Rhodes Review of the Supporting People Programme, January 2004

Financial Projections

National Supporting People Budget 2005-2008

The Office of the Deputy Prime Minister (ODPM) announced funding levels for the national Supporting People programme for the next three financial years in August 2004. This confirmed that there will be an overall reduction of funding for 2005/6, amounting to 4.7% nationwide, but that level of funding was likely to be sustained for the following two years. However, there is no allowance for inflationary rise built in over the three-year period. However, ODPM have already said that the maximum level of efficiency savings will be capped at 7.5% for any authority.

Three-Year Budget for Essex

Because Essex is a low spending authority in a low spending region, the efficiency savings for the Essex Supporting People budget are expected to be substantially below the maximum cap; the ODPM was expected to announce the budget early November but this is still awaited.

The three-year settlement means that Supporting People funding will be a more secure source of revenue funding, allowing better planning by the Commissioning Body and service providers alike.

It is hoped that the low spending nature of Essex Supporting People means that the downward pressure on the Supporting People budget may well be compensated to an extent by the long promised "Distribution Formula", which will distribute the nationwide Supporting People budget by relative need. This need will be evidenced predominantly by population pressure and Indices of Deprivation¹ including factors identifying rural/urban factors of deprivation. The distribution of the national Supporting People budget using the Allocation formula will be phased in starting with the 2005-2006 financial year.

New Service Development

Essex Supporting People is committed to continue to make funding available for service developments that address the key issues that are identified in this document and by the consultation process between December and early February. Detailed proposals for such an SP Development Fund are pending the ODPM's budget announcement for Essex, but an outline is provided in paragraph 4.2.

¹ ODPM Indices of Multiple Deprivation 2004. www.odpm.gov.uk/indices

(Intentionally blank page)

2.4. Key Issues and Recommendations

Outcome-Based Objectives

Supporting People support forms a complex set of services. There are 17 different identified service user groups; 12 districts; and 15 service types that vary in intensity and nature with each service user group.

It is difficult to set priorities for this system, but in this document we have focused on achieving positive outcomes for Service Users. During the development process it was found that these outcomes for service users could be summarized into four main categories that cut across different service user groups, where Supporting People helps vulnerable people to: -

1. Sustain Current Accommodation

The risk of losing their current accommodation is an early indicator that vulnerable people may need support to retain their independence. This risk may be due to, amongst others, financial and budgeting problems, behavioural difficulties or deteriorating health that reduces mobility, social contact and safety in and around the home.

2. Attain Independent Accommodation (Move-on)

When people leave specialist support accommodation, such as homeless hostels, foyers, or specialist supported housing, they often have a need for support to help them to settle in and establish themselves in their new home. This need tails off over time as people obtain their independence, are able to access services and get support from formal or informal social networks.

3. Provide Access to Specialist Services

There are several reasons why people can not remain in their current accommodation. They may be forced out due to circumstance or ability to remain independent, or they may require intensive attention from specialist support services that is only provided in specialist accommodation.

A move from their own home into specialist accommodation gives people a safe and sheltered environment in which they can access both housing-related and specialist support that addresses their specific circumstance.

4. Achieve a Higher Level of Independence

A substantial number of vulnerable people are receiving continued care or support from other agencies, such as ECC Mental Health, Independent Living, Learning Disabilities, or through the Health Service. Supporting people can support them, either outside or within their current accommodation, in the process of increasing their own ability to attain an optimum level of independence and taking part in community life.

More detailed descriptions are given in Appendix 1.

Key Issues and Recommendations

On the basis of these client outcomes, a number of key issues have emerged from the research and early consultation. Several of these themes cut across most of the primary service user groups and have an important impact upon local services.

1. Move-on Accommodation

The lack of move-on accommodation is felt across most client groups, especially so for young people, people with chaotic lifestyles and people who are homeless. There are a number of actions that can address this issue:

1.1. Stock Increase. The physical shortage of social or appropriate rented accommodation is a root cause of homelessness and the shortage of move-on accommodation. However, addressing this is a long-term issue that needs to be tackled through housing and planning strategies on a district, sub-regional and regional level. Supporting People will help to assure that the specific needs of vulnerable people are included in housing needs assessments.

1.2. Access to Accommodation. An increase in the access to existing social and private stock will have more impact in the short and medium term. Given the ongoing pressure on social housing stock, innovative solutions are sought from districts, RSLs, private landlords and other partners to achieve improved access to move-on accommodation. Solutions that have been put forward include

- Better and joined-up use of existing and new rent deposit schemes;
- Changes to the priority weightings on housing waiting lists;
- Discussions on nominations rights for RSL stock
- Change of use of hard-to-let stock, e.g. for intermediate or transitional housing;

1.3. Supported Housing Index. The new Supported Housing Index allows people to register their needs for housing-related support as well as their specific housing needs. It also has the potential to improve the allocation of homes that are already adapted to match people's physical requirements. Information from the Index will help the planning of future development of services and accommodation.

2. More Floating Support

Across the Supporting People service provision there is a relative shortage of different types of floating support:

2.1. Tenancy sustainment services can help to reduce pressure on accommodation-based specialist services through early intervention, which in itself benefits the service user as well. An important element in the effectiveness of preventative services is the existence of effective referral arrangements.

Supporting People is interested to explore how tenancy sustainment services can benefit from

- Referrals triggered by rent or mortgage arrears;
- Referrals through Anti-social Behaviour Contracts (ABCs) or Anti-Social Behaviour Orders (ASBOs);
- Economies of scale e.g. through partnerships or cross-boundary services;
- Improved contracts that reflect the nature of Floating Support services.

2.2. Community-based support. The majority of vulnerable older people live outside sheltered housing, but over 80% of Supporting People funding is tied up in tenure-based support. Service re-provision and service types for older people will need to address this imbalance. Pilot projects have been established to study how increased levels of community-based support can be funded through re-modelling of existing support in sheltered housing schemes.

2.3. Move-on support. In parts of the County, the shortage of floating support is identified as the main cause for the limited move-on capacity. Move-on is a key area of unmet need for a large number of service user groups will have a direct effect on blocked-up specialist services. It is therefore high on the list of priorities for new service development.

However, given the shortage of move-on accommodation in parts of the County, effective service delivery needs to be ensured. Supporting People proposes that funding for new Floating Support services could be directed towards and linked to a commitment to provide access to accommodation for people moving on towards independent living.

3. Priority target groups for new services

Several service user groups have specific housing-related support needs that are not being met by Supporting People. There are cases where this refers to very specific groups, but more often than not vulnerable people will have multiple or complex problems, which makes it hard to make out what the primary angle of service delivery is.

Supporting people has identified four key groups that should be given priority for the development of new services.

Partners, service users and other people involved with Supporting People are invited

- (1) To comment on the priorities set in this section of the Consultation Draft;
- (2) To suggest key gaps in services that are not considered;
- (3) To highlight development opportunities that address the identified priorities.

3.5. Homelessness

Single and family homelessness

Direct Access and other homelessness hostels are well served by good referral arrangements with relevant agencies. An improvement in the turnover rate of clients, which appear too low, requires improved access to move-on and move-on related floating support.

3.6. People with Chaotic life styles

Ex-offenders, people with drug or alcohol problems, people with mental health problems.

The issues in this client group are closely related to homelessness, but with additional and often complex needs that require housing-related support that is delivered together with specialist support. The low level of move-on and floating is pertinent, while ex-offenders and people with drugs or alcohol misuse have no specialist provision of accommodation-based services by Supporting People, in cases due to problems with getting contentious schemes through planning. Key solutions to address these issues are

- Target investment to develop imaginative and joined-up services;
- Work closely with the DAT Strategic Development worker (who will be placed inside the Supporting People team), Probation services, local core strategy groups including YOTs and planning authorities to find pragmatic solutions to overcome the risk of failing planning applications;
- Consider ASBOs as a referral point to help effective future targeting of preventative support.
- Improve communication in the process of planning applications to improve the contribution that local Members and key partners can make to get scheme approval.

3.7. Vulnerable Young People:

Young people leaving care, at risk, but also teenage parents in districts without provision.

Young People at Risk or Leaving Care

Services for Young People at Risk or Leaving care are almost exclusively accommodation based and these services are not managing to achieve the expected level of turnover of clients.

- **Development of move-on with adequate floating support**, both to help young people and assure landlords, is key to ensure that Young People services achieve their aims.

There is a strong argument for support to vulnerable young people to give them a good start to independent living. A considerable link exists between vulnerable young people, drugs or alcohol misuse and anti-

social behaviour/offending. There is a considerable crossover between YPLC and clients of YOTs (Youth Offending Teams) across the County. Investment in young people has the potential to avoid a lifetime of problems, for the young persons involved, for their communities and for support services, as well as for the criminal justice system. This is acknowledged in the new Public Service Agreement (PSA) for Young People between Central Government and Essex County Council, and in the Central Government's new Children's Bill.

- **PSA:** Acknowledge and promote Supporting People's role in the delivery of the PSA target and the new Children's Bill.

Teenage Parents

For Teenage Parents the availability of housing-related support, including accommodation-based services, exists in parts of the County but is almost absent in others, with only 6 out of 12 districts providing specific housing-related support.

- **Teenage Parents: Development in areas of unmet need** can be addressed in cases by developing cross-boundary initiatives. Teenage parents have a high priority on housing waiting lists, but specialist move-on support is not always present.

3.8. Frail Elderly People in Older People Services

Within the Supporting People services for older people, there is an estimated 50% under-provision of Extra Care services (services that help frail elderly people) compared to Sheltered Housing. These services prevent frail elderly people from moving into residential care. This helps them to maintain a higher level of independence in a service that is less expensive to run.

- **Extra Care:** the proportion of extra care within accommodation-based services for older people needs to increase through re-modelling and re-provision of existing sheltered housing support.

The current pattern of older people services by Supporting People means that they are not available to the majority of older people who live outside sheltered housing. Supporting People needs to develop a more effective mix of Extra care, floating support and Careline services by

- **Targeting frail elderly and the early onset of mental health problems** and also provide community support services to older people outside sheltered housing.
- **Improving targeting of support in existing sheltered housing** to enable expansion of community-based support in surrounding neighbourhoods.
- **Defining fit for purpose standards** for sheltered housing to attract capital and revenue funding

3.5. Other Service User Groups

Service development outside the target groups, e.g. for older people with support needs, or people with long-term care or support needs (e.g. people with Learning Difficulties), is equally important to continually improve the effective use of Supporting People funding. This is currently addressed through service reviews, but also through the development of a Commissioning Strategy. However, the view of Supporting People is that resources for these developments will have to come from re-modelling of services within current and future budgetary constraints, rather than from additional development.

4. BME groups and People with HIV/AIDS

Equality and Diversity

People from minority ethnic communities make up a relatively small but increasing proportion of the total population in Essex. As a result there are no specialist service provisions in the county. A study on the housing-related needs of black and minority group in Essex¹ found a perceived lack of knowledge on the part of the BME communities concerning the range of services that were available, but also that a limited cultural sensitivity in service delivery could be potentially discriminatory by BME groups.

Supporting people should

- Use the consultation period to establish to what extent BME-specific services are needed and where;
- Consult on in what cases an inclusive approach should be used and where there is a need for special services;
- Pay particular attention to service gaps for BME elders and Asian women escaping domestic violence.

HIV/AIDS

In Essex there is no real provision specifically for people with HIV/AIDS. A number of key people in this area (i.e. specialist social workers) say that this condition is, and can be, provided for under the banner of physical or sensory disability or in a mental health scheme. This is because the actual condition is usually under control, but the housing needs are far more closely related to these primary client groups.

Furthermore, a large bulk of those who may require specialist housing and have HIV/AIDS are not going to be eligible due to their immigration status. A rough estimate by social workers is that this could be up to 70% of those in need. These people would be wary of contacting an authority for assistance.

- Supporting people should use the consultation period to establish the need for HIV/AIDS specific services and include these in its Action Plan as appropriate.

¹ "Facing the Facts" – Salford University, 2004

5. SP Development Fund

Supporting People needs a Development fund if it is to commission and develop new key services to develop a service portfolio that reflects its key priorities. If Supporting People is to generate a development fund, savings over and above the ODPM targets are required.

The setting of priorities for new developments will come from

- Priorities identified in this document;
- Priorities and development opportunities that will come out of the consultation process, and which will be used to develop the Strategy's Action Plan;
- The Expressions of Interest as received from partner organisations.

Supporting People therefore has to

- **Deliver additional savings** from existing services to allow development in geographical and service areas with unmet need.
- **Conduct a bidding round** in 2005 on the back of the 2004 expressions of interest, that includes input from local core strategy groups, service user groups and interested provider organisations.

(Intentionally blank page)

SECTION 3: INFORMATION ON NEEDS AND SERVICES

Needs Information

The need for housing-related support for different client groups is hard to quantify. For instance, hard data exists on the number of people receiving an intensive drug rehabilitation programme, but the link to housing-related support needs is not fully understood.

Benchmarking

The gap analysis is based in first instance on benchmarking Essex Supporting People services against Regional and CIPFA family¹ averages. An overview of the expected “benchmark” level of provision of Supporting People services in Essex is given in the table on the following page. The main gaps in Essex services appear for: -

- **Homelessness Services** for Homeless Families and Single Homeless. Young people constitute a large proportion of homeless people.
- **People with Chaotic life styles** including People with Drug, Alcohol or Mental Health problems, and Ex-Offenders.
- **Young People Leaving Care services** – Homeless provision for teenage parents is only available in half of the Districts.
- **Frail Elderly People** - Provision for older people with mental health problems is above average but is only available in two Districts.

There are small shortfalls in provision for Older People and People with a Learning Disability, which reflects the fact that Essex is a low spending authority in a low spending region².

Information and Consultation

The Benchmark analysis is complemented using other techniques and information sources. These other techniques include: -

- **User Consultation Groups** including non-users within client groups. Consultation meetings are organised to identify unmet need for specific

¹ CIPFA family of comparable local authorities: Essex, Kent, Hertfordshire, Hampshire, Surrey, Lancashire.

² The undersupply in service units is 24% compared to the population-weighted national average, with a relative budget shortfall of 30%.

services and potential for service improvement. Results from these meetings are listed in Appendix 2.

- **Specific reviews** of existing services provision for client groups and service types; a list is given in Appendix 3.
- **Performance Indicator Returns** from Supporting People providers, which are proving to be a useful tool in comparing the performance of services. The data in this document is based on the 2004-2005 Quarter 1 returns, but information for the 5-year strategy will be based on Quarters 1,2 and 3.

The data will be improved over the lifetime of the strategy by the implementation of the Supported Housing Index and the completion of reviews of housing related support needs by Probation, Mental health and Drug intervention Programme.

Table 1 Benchmark Analysis of Supporting People services against the East Region, Similar local authorities (the “CIPFA family”)¹ and the national average. The analysis is weighted by the size of the local populations.

		Supply	Expected Supply		Difference from Expected		Difference from Expected	
		(units)	based on average for		(units)		(% of Expected)	
		Essex County	East Region	CIPFA Family	East Region	CIPFA Family	East Region	CIPFA Family
Older people	Older people with support needs	13,295	13,622	14,299	(327)	(1,004)	(2%)	(7%)
	Frail elderly	322	485	410	(163)	(88)	(34%)	(22%)
	Older people with mental health problems/dementia	38	22	10	16	28	74%	288%
Homeless people	Single Homeless with Support Needs	937	1,317	726	(380)	211	(29%)	29%
	Rough Sleeper	-	3	12	(3)	(12)	(100%)	(100%)
	Homeless Families with Support Needs	243	1,111	830	(868)	(587)	(78%)	(71%)
Young people	Teenage Parents	97	60	49	37	48	61%	97%
	Young people leaving care	31	30	57	1	(26)	4%	(46%)
	Young people at risk	435	261	231	174	204	66%	89%
Others	Traveller	155	143	68	12	87	8%	128%
	Refugees	-	9	1	(9)	(1)	(100%)	(100%)
	Offenders or People at risk of Offending	4	51	166	(47)	(162)	(92%)	(98%)
	Mentally Disordered Offenders	-	3	8	(3)	(8)	(100%)	(100%)
	People with Mental Health Problems	475	653	622	(178)	(147)	(27%)	(24%)
	People with Learning Disabilities	905	779	995	126	(90)	16%	(9%)
	People with a Physical or Sensory Disability	69	196	165	(127)	(96)	(65%)	(58%)
	Women at Risk of Domestic Violence	238	143	139	95	99	66%	72%
	People with HIV / AIDS	-	-	-	-	-	-	-
	People with Alcohol Problems	7	15	23	(8)	(16)	(52%)	(69%)
People with Drug Problems	26	42	56	(16)	(30)	(39%)	(53%)	

¹ The CIPFA family of comparable local authorities consists of Essex, Kent, Hertfordshire, Hampshire, Surrey and Lancashire.

(Intentionally blank page)

3.1 People who are Homeless

Strategic Links

A Housing Strategy for the London Commuter Belt Sub-region 2005 - 2008

District Homelessness Strategies

Robson Rhodes Review of Supporting People Implementation

Cross-reference to other sections of this Strategy

Section 2.3: Key Issues

Section 3.2: Chaotic Life Styles

Section 3.3: Vulnerable Young People

Context

The Homelessness Act 2002 required that all Housing Authorities develop and publish a strategy detailing how homelessness would be tackled locally.

The process involved undertaking a fundamental review of homelessness in each area to inform the individual strategies. In Essex we received back strategies from all the districts and which also informed the local Supporting People assessments by the local Core Strategy Groups.

The contents of this section of the Supporting People Strategy are largely drawn from the individual strategies, but also from material concerning the important issues surrounding homelessness and stemming from the Homelessness Act.

In addition to requiring Housing Authorities to publish a Homelessness Strategy, the Homelessness Act widened the categories of priority need for local authorities to include:

- 16 and 17 years old
- Care leavers aged 18 to 20 years
- People who are vulnerable because of time spent in care, the armed forces, prison or in custody
- People who are vulnerable because of violence

Research has confirmed that homelessness is a growing problem across the County. Braintree District Council reported a 25% increase in homeless applications for assistance between 2001/02, 13% of which were accepted. Between 1999 and 2003, the number of eligible homeless households rose from 201 to 362. In Harlow, over the same period, the total number of homeless households rose from 254 to 350, a 27% rise. In Basildon, the total number of households in temporary accommodation was 907, compared to 503 in 1999.

Colchester is a Beacon council for Tackling Homelessness and has made exceptional inroads towards easing the problem of homelessness. Although the absolute number of homeless people is higher than in other Districts, Colchester

has seen a drop in homelessness applications in the period between 1998 and 2003, from 1,594 household applications to 1,453.

The London Commuter Belt housing strategy has as one of its principle aims the creation of affordable housing to aid those who are homeless or who are struggling to maintain their tenancies.

Homelessness services are one of the four priority service groups that the Robson Rhodes Review recommended should be the subject of a fundamental Strategic Review.

Information from Monitoring and Review Programme

Not all services have been reviewed yet. First indications from the Performance Indicator returns show a turnover of clients in Direct Access hostels that is to be expected, with an average projected length of stay that is between 1-3 months. However, several other accommodation-based services show an average length of stay between 2-5 years, which is longer than is expected given the nature of the services. A reason for these figures could be that these services are not effective. However, throughout the county agencies have indicated a lack of move-on accommodation and move-on support as being the fundamental cause of low turnover.

Identified Gaps in Service Provision

Supporting People services are now making a significant contribution to the provision for homelessness in the county. Supporting People is funding Direct Access hostels and homeless hostels in 3 and 4 out of 12 Districts, respectively. However, Foyers for Young People, which are addressing the focus on young homelessness in the Homelessness Act, are available in just 5 Districts. Four districts do not have accommodation-based services with Supporting People funding.

These figures compare well with other counties and with the East Region, although there is a relative Essex-wide under provision of support for Homeless Families. Furthermore, Rochford is without Supporting People Homelessness provision.

Key issues for service development for Homelessness include

- **Move-on Floating Support and Accommodation.** Move-on (floating) support from Supporting People stands at a ratio of 1 to 1 compared to accommodation-based services. This ties in with the observed low turnover of accommodation-based services. In some districts, the absence of Floating Support is cited as the main reason for the lack of services, while in others the physical shortage of suitable accommodation is the principal cause of restricted move-on capacity.
- **Tenancy Sustainment Schemes.** Tenancy Sustainment schemes are crucial preventative services that help reduce evictions and subsequent chronic homelessness problems. A key aspect in prevention is to address financial strain with lending, credit and debt increasing at a very high rate; young

people are particularly susceptible to this. Credit card lending has increased from 141 million in 1992 to 7,579 million in 2002, and is still rising. Young people seeking help for debt has increased ten fold in the last two years.¹ Tenancy Sustainment schemes have shown themselves to be very effective. We currently fund a scheme in Essex in the Basildon District, which is showing good results. Over the course of only two years it has decreased evictions and abandonment's within identified vulnerable households from 151 to 123. This shows a 19% decrease in evictions and abandonment's under a Tenancy Sustainment scheme.

- **Complex Needs.** Drugs, alcohol and mental health problems are inextricably linked with a large section of the homeless client group. Virtually the entire group has had one or more of these difficulties. However, provision for this in Essex is very limited and referral is difficult. Multiple needs and chaotic lifestyles are invariably more difficult to cater for, but there is undoubtedly large scope for increasing provision for this client group with the ultimate aim of providing greater stability, which should in turn aid in moving towards independent living.
- **Young People.** Young people are consistently highlighted across the county as the homeless group in priority need. Foyers are serving several but not all districts in the county and there is a shortage of move-on support (see Section 3.3: Vulnerable Young People)
- **Improved referral.** For this client group, clear referral routes are key. Current charities, such as Shelter, provide good information on what services there are and how to access them. But there should be a good variety of access points for service users. For example GP's or probation officers, which should be well defined and publicized. This is especially important for tenancy sustainment schemes, we need to look at the possibility of landlords/financial institutions alerting us to potential mortgage/rent arrears.

Services Being Developed

There are no homelessness services in the pipeline. However, a large number of homelessness services have expressed an interest in either extending their floating support services or adding a floating support service to complement existing schemes.

Key to the development of such services is an emphasis on clear referral routes and assurances for the availability of move-on accommodation in either the social or private rented sector. Innovative solutions are sought from the Supporting People partnership, including providers, social and private landlords and housing departments.

¹ Consumer Credit Counselling Service.

(Intentionally blank page)

3.2 Chaotic Lifestyles

Strategic Links

National Service Framework for Mental Health, 1999.

Mental Health and Social Exclusion. Social Exclusion Unit Report. ODPM, June 2004.

District Councils Homelessness Strategies.

Homelessness, Supporting People and Substance Misuse in Essex. Executive Summary and Recommendations. Consultants – Andy Horwood, Lynn Horwood and Helen Town.

East of England Resettlement Draft Strategy.

National Action Plan, Reducing Re-offending. National Offender Management Service (NOMS), 2004.

Reducing Re-Offending by Ex Prisoners, Report. Social Exclusion Unit, July 2002.

Cross Authority Statement for Supporting People in East of England Region (App. 4)

Cross-reference to other sections of this Strategy

Section 2.2: Strategic Partnership Working

Section 2.3: Key Themes

Section 3.1: People who are Homeless

Section 3.3: Vulnerable Young People

Context

There is an underlying theme of substance misuse and alcohol abuse that currently runs through a wide range of services, but which has not been directly addressed so far. There is a strong cross-linkage with general Homelessness services, because drugs, alcohol and mental health problems are inextricably linked with a large section of the homeless client group.

Despite quite clearly recognizing the scope and importance of the link of drugs, alcohol and mental health problems, there is very little provision for the first two areas, especially when compared to the regional average and to similar administering authorities.

Drugs and Alcohol misuse

Problems relating to substance misuse are a common secondary factor in a range of housing support services. The Regional Housing Strategy quotes recent research that found:

- 83% of homeless people had taken some form of drug (other than alcohol) in the previous month

- 66% of those surveyed said that drug or alcohol use had contributed to their becoming homeless
- 80% said that they had started using at least one new drug since becoming homeless
- There is a close relationship between drug and alcohol misuse and mental health problems

Mental Health problems

The National Service Framework for Mental Health sets out key objectives for the development of Mental Health Strategies. These include:

- Agreement between health, social services and housing that services for people with a mental illness are a priority in the medium and long-term;
- Development of a defined range of care, support and housing options to provide a wide spectrum of care and support within housing settings;
- Maximum use of floating support so that as wide a range of support as is practicable is available within the service user's own home.

The National Service Framework further comments: "Service users themselves believe that adequate housing and income, and assistance with the social and occupational aspects of daily living are among the most important aspects of care and reduce disability." More recent information published by the Social Exclusion Unit¹ states that: "One in four tenants with mental health problems have serious rent arrears and risks losing their home." This is confirmed by the Regional Housing Strategy which states: "A significant proportion of homeless people have a mental health problem." NACRO estimate that 25% of their intake is people with mental health problems. In particular, it is important to explore the use of co-coordinated placement in ordinary general needs housing stock as a way of creating conscious networks and communities of mutual support.

Ex-offenders

In common with a number of service sectors, support for ex-offenders is currently struggling because of a lack of move-on accommodation. All we currently have provision for in Essex is accommodation-based services for young people. All of which is provided by NACRO (see below 'Information from Monitoring and Review Program'), and does not appear to be comprehensive.

The DAAT research also demonstrated the widespread use of drugs amongst offenders. Some respondents obtained a drug habit in prison, but most misused substances prior to imprisonment. In many instances their offending behaviour was directly linked to their substance misuse. Furthermore the Social Exclusion Unit found that those who have already offended are three times more likely to re-offend. They also state that drugs and alcohol misuse and mental health problems, along with economic factors, are the main causes of offending.

¹ Mental Health and Social Exclusion, June 2004

Joined-Up Services

Overall, there is a local need to ensure a whole system, joined-up approach to strategic commissioning in this difficult service area. Co-ordinating services between Connexions, where young people attend for advice and treatment programmes through the DAAT Team is beginning. Linking these developments with housing related support services and with health support would make a significant difference. Developing a countywide strategy with shared and consistent protocols should be the starting point, with a real focus on move on accommodation drawing people away from accommodation-based services in a way which can greatly decrease the likelihood of them re-entering such accommodation.

Information from Monitoring and Review Programme

Unfortunately specific information from the Service Review programme is not yet available, but we do have some information from our Performance Indicators. This information shows the make up of our provision in this area. There is no service for people with drug & alcohol problems or ex-offenders as the primary client group. The vast majority of support is for people with mental health problems, there is no provision for drug & alcohol client group as a primary client group, even as a secondary client group it only amounts for 31% of this client cluster. And finally, for offenders and ex-offenders, all of the provision is supplied by NACRO and linked directly with young people.

Potential Risks to Current Provision and Contingency Plans

- There is not sufficient focus on this service user group, with services attempting to 'manage' the issues that they raise in a vacuum. The overall cost to the community if these issues are not fully managed and coordinated could be significant.

Contingency Plan: Development of a countywide strategy, bringing together the key stakeholders and developing a strategic commissioning plan will ensure the problem of substance misuse is given appropriate attention

Identified Gaps in Service Provision

The problems of substance misuse, alcohol abuse, often in relation with mental health problems and/or offending are a common theme running through a range of housing support services. It has a significant impact on various parallel strategies including Homelessness Strategies and Crime and Disorder Reduction Partnerships. The Commissioning Body has highlighted this issue as a key area to focus upon and to develop a whole systems approach. Key elements in this approach that require attention include

- **Move-on accommodation and Support.** People with chaotic life styles are regularly mentioned as a secondary client group to homelessness services. The data show a lack of move-on support for this group. For example, people completing a short detention period do not receive support from probation

services, and unless they have an additional drugs problem, the Drugs Intervention Programme will not be involved either.

- **Anti-Social Behaviour.** This set of client groups is often linked with repeat anti-social or criminal behaviour, which is high on national and local agendas. It is crucial that support is provided in close collaboration with partnering agencies, which can bring in the expertise to address the underlying causes of clients' behaviour. Some imagination is needed to try to develop a proper strategic response that incorporates such links in a proper planned prevention programme. Anti-social Behaviour Contracts (ABCs) and Anti-Social Behaviour Orders (ASBOs) could be considered as potential referral points for prevention or early intervention services including tenancy sustainment.
- **Planning Issues.** There is a county-wide absence of provision for accommodation-based drugs and alcohol services. Experience to date shows that there can be serious opposition to new schemes at the detailed planning stage. More work needs to be done on how to overcome these issues at a practical level.
- **Specialist Provision.** Partly due to planning issues mentioned above, current specialist provision in Essex is very low, although a substantial number of services provide support to service users who misuse substances as part of their identified secondary service focus. There is a need to ensure these services have access to the specialist agencies, such as DAAT, to help them to undertake this role. Attention should be given for the potential to develop new services if local need requires it. A floating support model should be considered if this is the case.
- **Referral.** Due to the overlaps in provision that people with chaotic lifestyles will experience, it is important that they are with the right services for the right type of support. Certain needs for support in remaining independent may be better served by alternative services. Referral between the services, as well as externally from GP's, probation, PCT's, social services, advocacy groups etc, needs to be clearly defined and more fluid.
- **Partnership:** Closer working between health services and housing support providers is important. Consideration needs to be given to developing local detox facilities, as this is a frequently reported concern.

Closer working relationships between key stakeholder agencies, such as Connexions, and housing support providers would benefit both parties and enable multi-purpose services to develop

The development of a countywide strategy to provide a whole system approach to the management of alcohol and substance misuse could be the starting point for much of the above. Part of this process will include developing consistent policies and protocols across districts so that there is a more consistent approach.

Services Being Developed

None at present

3.3 Vulnerable Young People

Strategic Links

Teenage Pregnancy Strategy and Action Plan. Social Exclusion Unit, June 1999.

District Housing Strategies

District Homelessness Strategies

Children Leaving Care Act 2001.

Children's Bill

Cross-reference to other sections of this Strategy

Section 2.2: Strategic Partnership Working

Section 2.3: Key Themes

Section 3.2: People with Mental Health Problems

Section 3.4: People who are Homeless

Section 3.6: People who Misuse Substances

Section 3.8: Teenage Parents

Context

The situation for young people in Essex is a relatively mixed one. There are a lot of services across the districts covering young people, but these services are not well distributed in terms of client group or accommodation type. For example, the services in existence are almost entirely accommodation based. There is precious little move-on or floating support. Furthermore, whilst Young People at Risk and Teenage Parents are reasonably well provided for, young people leaving care are suffering a huge shortage in provision when compared to similar Administering Authorities (46% difference), or compared to the region as a whole.

There is therefore a need to increase non-accommodation based service provision. For example, most Teenage Parents leave their parental home and go straight into their own tenancy, or enter a specialist support scheme. For some young mothers either of these choices may be acceptable. However, there will be a significant number who need support but find specialist accommodation too oppressive. One of the main problems is the policy of these institutions towards the father. They do not allow them to stay together in the accommodation and do not include, if they do only minimally, the fathers in the support plans or structures they put in place. This will result in the alienation of the father, which is in no way desirable for a couple that wishes to raise the child together. Also, these specialist services do not cater for a parent on their second (or more) child. These are problems that could be simply and effectively overcome with non-accommodation based services.

In discussions with providers of YPLC services it became very clear that there is huge scope for increased provision in this area. In Essex it is customary for young people leaving the care system to enter straight into a system of floating support, predominantly a tenancy sustainment scheme. Those who leave care and enter into an accommodation-based service find that their chances of success in terms of continuing education, gaining employment and sustaining their tenancy are greatly increased (this is important, for example, the Department of Health found that only 70% of people who leave care do so with any GCSEs or GNVQs). This success could be built on if they then went on to some form of move-on accommodation.

The main problem cited by providers for those who have left care and who have entered into their own tenancy is anti-social behaviour. Typically this infers using their accommodation as a meeting area for their peer group, which in turn leads to the problems of drugs, alcohol and offending. Anti-social behaviour is a main cause of eviction for young people. This problem could be tackled using accommodation-based services or move-on services, for example a housing tenancy with a warden.

However, our accommodation-based provision for young people in general is very good in Essex. In total there are five foyers in Essex, providing 279 units of support. Foyers are particularly good at providing access to services available to young people at risk, or leaving care. For example, in Essex 63% of young people leaving care have no education at all, and 49% do not pursue any education or training once they have left. However, if they enter into a Foyer scheme then they have better access to education and training and the take up is much higher.

One particular characteristic of these client groups is the likelihood that users have multiple and complex problems. Typically, people in this group will be homeless, may misuse substances, may have mental health needs or low life skills bordering upon learning disability and may have been in care or have committed offences. This is an important factor to consider and all provision for young people should be based on 'joined-up' thinking.

Information from Monitoring and Review Programme

Not all provision has yet been reviewed. Of those that have, evidence shows that services are largely of a good standard and providing a valuable service.

From the performance indicator information we can see a 'bottleneck' in our system of provision. For example, if you consider Foyers for Young People as a group, you find the average length of stay in these services is 4.16 years. This shows the lack for move-on services to aid the throughput, and the lack of help for YPLC who will quite often find themselves in Foyer's rather than specialist accommodation.

These results have led to the establishment of a Strategic Review Group reporting to the Core Strategy Development Group, which will identify key gaps in the current mix of services. The outcomes of this review will be used in the development of the Action Plan for the 5-year strategy.

Identified Gaps in Service Provision

Young people services are almost **exclusively accommodation based**, with supported housing for YPLC and Foyers for Young People at Risk and Teenage Parents (see Table). These services are not managing to achieve the expected level of turnover of clients; for example the average projected length of stay in a Foyer was 3-4 years (April-June 2004 figures). It is clear that there is bed blocking occurring.

Table: Supporting People services for vulnerable young people by Type (Floating Support or Accommodation-based) (Source: Essex Supporting People October 2004).

Primary Client Group	Floating Support / Move-on	Acc-based	Grand Total
Teenage Parents	7	90	97
Young People at Risk		376	376
Young People Leaving Care	9	25	34
Grand Total	16	491	507

- **Move-on.** For Young People Supporting People has no dedicated move-on accommodation provision. As discussed in the Context section above, Teenage Parents and Young People Leaving Care in particular would benefit most from this form of support. Therefore, it is a priority for service development to increase move on and floating support services to improve the turnover of accommodation-based services. In this, Supporting People is promoting its role in the delivery of the County Council PSA target for young people and the new Children's Bill.

Development of services to give young people at risk a good start to independent living needs to address three main strategic issues:

- **Multiple Needs:** There is a considerable link between vulnerable young people, drugs or alcohol misuse and ASB/offending. For instance, figures for NE Essex show that 1 in 12 young people leaving care have an issue with taking class "A" drugs and a further 1 in 6 experiencing alcohol problems. There is also a considerable crossover between YPLC and clients of YOTs (Youth Offending Teams) across the County, with 1 in 5 having been involved with the Criminal Justice system.
- **District Variation:** The distribution of specific services for Teenage Parents across the county is inequitable, with only 6 out of 12 districts providing specific housing-related support.
- **Improved referral.** Referral in this area is vital and requires good communication and exchange of information between partner agencies. Investment in young people has the potential to avoid a lifetime of problems,

both for the young persons involved, for their communities and for support services. If potential clients do not get the right kind of service at the right level of independence then they stand a greater risk of entering the care cycle.

Young people leaving care are already “in the system” and referral for them is likely to involve the Leaving & Aftercare team of Essex County Council, whose task it is to identify the most suitable young people for their different support types and link with other services as appropriate. However, referral routes for other vulnerable young people are less clear-cut.

An effective point of referral could be when signing an Acceptable Behaviour Contract (ABC). This contract between the district council and a resident could include a commitment by the resident to accept Supporting People support. ABCs are designed to precede Anti-Social Behaviour Orders or ASBOs, which themselves are a potential referral route.

Other referral routes are through GPs, landlords, RSLs, councils, advocacy groups, social services, housing officers, Citizen’s Advice Bureau (CAB) and of course a simple route for young people to refer themselves.

Services Being Developed

Young People Leaving Care: 8 units, Harlow

A joint service development for a 4-8 unit Mother & Baby service is being prepared to serve Brentwood, Epping Forest and Uttlesford.

3.4 Older People With Support Needs

Strategic Links

The National Service Framework for Older People 'Quality and Choice for Older Peoples Housing'

Essex Approach

District and Sub-Regional Housing Strategies

Robson Rhodes Review of Supporting People Implementation

Cross-reference to other sections of this Strategy

Section 3.2: People with Mental Health Problems

Section 3.10: People with a Physical or Sensory Disability

Context

Local Context

Older People are, by far, the largest Supporting People service user group both nationally and in Essex. They currently make up more than 90% of service users in the county. However, their share of the Supporting People grant is only 31%

Furthermore, Essex has a higher than average, and growing, older population. ONS data show people aged 60 and over made up nearly 22% of the total population in the county in 2002 and projections show an expected increase to over 25% by 2011, i.e. at the end of the 5-year Strategy implementation period. Two more factors compound the stress that the ageing of Essex's population will put on services:

- Increase in the number of Frail Elderly people by 24%.
- Increase in age related mental health problems.

The Essex Approach, the County's corporate policy document, states the Older individuals want to live as independently as possible, which for most means staying in their own home, and this is crucial to their well-being. Giving older people the support they need to stay in their own homes is one of the document's five key pledges.

74% of older people in the county live in owner occupied accommodation (Census 2001 figures). Of the older people living in social rented housing (17% of total), just under a third live in sheltered housing.

Sheltered Housing across the county is a mixture of different types and ages of properties, including a proportion of 'bedsit' type dwellings. The need to address the re-provision or re-modelling of these hard-to-let properties is a key issue in local housing strategies.

In rural parts of the county, vulnerable older people live in communities with a poor social infrastructure, without shops or access to public transport. The cost of

providing support services in such areas is also more expensive as support workers need to travel significant distances to reach service users. In other parts of the County the tourist coastline attracts many older people in retirement.

Central Government Strategic Context

In response to the growing elderly population nationally, improved services for older people is a focus of central government strategy. The National Service Framework for Older People provides a clear structure to take forward health and social care services.

Other related strategic drives include:

- A key health and social care priority is the provision of local services to help in the 'management of chronic illness' which includes older people
- The Department of Health proposal to significantly increase the availability of Extra-care Sheltered Housing with extra funding available

Both the Office of the Deputy Prime Minister and the Department of Health are keen to see Home Improvement Agency services expand to provide national coverage by 2006

Robson Rhodes Review

The Robson Rhodes Review investigated the implementation of the Supporting People Programme. As part of a wide range of recommendations, the review recommended that Supporting People Administering Authorities should undertake high-level, strategic reviews of services in the four main service user groups, including older peoples' services

Sub-Regional Housing Strategies 2004 – 2010

The Greater Haven Gateway Housing Sub-region proposes the re-modelling of housing for older people, including sheltered, very sheltered and extra care housing both for rent and for lease. The London Commuter Belt region emphasizes the role of Home Improvement Agencies (HIAs) and states that "The long-term goal is a network of area-resourced HIAs based on Supporting People Administering Authority boundaries, combining a central management function with local delivery points."

Information from Monitoring and Review Programme

The reviews of older people services are ongoing, with the first outcome reports expected by the end of this month. HIA services were reviewed first and review experiences were fed into the HIA strategic review which was published earlier this year. The review proposed that economies of scale will benefit both their efficiency and the delivery of consistent services throughout the County. A HIA working group is now working on proposals for cross-boundary working and service standards.

Some Supporting People sheltered housing services are experiencing high void levels because the accommodation does not meet modern standards or rising user expectations.

Void levels of sheltered accommodation over April-June 2004 averaged: -

- 1 in 10 units for the Thames Gateway;
- 1 in 6 units for the London Commuter Belt;
- 1 in 5 units for the Greater Haven Gateway.

The implementation of Supporting People provides a real opportunity to rethink the nature of housing-related support provided to older people.

The separation of the accommodation from the support service under Supporting People allows a fundamental re-think of the way services are provided to ensure they are more in line with the needs and wishes of people using those services. In addition, it is likely to provide a more focussed and cost-effective response to people's needs whilst enabling a larger number of people to remain independent.

Potential Risks to Current Provision and Contingency Plans

- Some sheltered housing accommodation across the county will not meet Decent Homes Standard and/or will not meet the identified needs and requirements of current and future service users

Contingency Plan: Local Core Strategy groups will identify those properties most at risk

- There is a risk that Health services will not be appropriately engaged in the community support and prevention agendas

Contingency Plan: Identification of key linkages on a local level, e.g. through local core strategy groups, will better engage PCTs.

Identified Gaps in Service Provision

The current mix of Supporting People services is inadequate to deal with the variety of needs of Older People to remain independent. Supporting People aims to improve this situation over the coming

- **Community-based Support and Alarm Systems.** Over 80% of Supporting People funding for Older People is going towards sheltered housing, while 75% of all older people in social housing live outside sheltered housing schemes with limited access to services, particularly housing-related support, such as community alarms and community support. Acknowledging this gap, some RSL's have already begun to diversify their warden services.

Community alarms are a low-cost but effective service and there have been major advances in the effectiveness and availability of assistive technology, 'smart' products linked to Emergency Call Centres that potentially minimise the impact of crisis events such as falls and make the individual person feel more secure.

- **Home Improvement agencies.** Supporting People is co-funding Home Improvement Agencies. This service aims to improve the physical environment of people's homes, but it can also serve to get people in touch

with safe maintenance services, such as handyman or grass-cutting schemes, or signposting to community support services. Although these fall outside the remit of the Supporting People grant conditions, Supporting People services should establish linkages where possible. The HIA working group will be looking at improving the efficiency of HIAs through cross-border collaboration and homogenous service availability across the county.

- **Sheltered Housing.** Supporting People needs to improve the targeting of its housing-related support within existing sheltered housing. This will enable the expansion of community-based support in surrounding neighbourhoods.

Sheltered Housing also needs defined fit for purpose standards to attract capital and revenue funding.

- **Intensive Support:** Extra care schemes are seen to fill a void between low-support sheltered housing and high-intensity care in residential care. However, there is a sizeable gap in supply of extra care provision relative to the current and rapidly rising population of over 85 year olds. Compared to relative needs, the provision of Extra Care is 50% lower than the provision of Sheltered Housing.

Services Being Developed

Extra Care: 35 units scheme in Braintree

Extra Care: 30 units in Dobson's Close, Rochford, substituting a 45-unit traditional Sheltered Housing scheme.

3.5 People with Long-Term Care / Support Needs

Strategic Links

Valuing People: A New Strategy for Learning Disability for the 21st Century

National Service Framework for Mental Health, 1999

Essex Approach

Sub-Regional Housing Strategies

Robson Rhodes Review of Supporting People Implementation

Mental Health and Social Exclusion. Social Exclusion Unit Report, 2004.

Essex Learning Disability Partnership Board, Housing Strategy, 2004

Cross-reference to other sections of this Strategy

Section 2.2: Strategic Partnership Working

Section 2.3: Key Issues

Context

A substantial number of vulnerable people are receiving continued care or support from other agencies, such as ECC Mental Health, Independent Living, Learning Disabilities, or through the Health Service. Supporting people can support them, either outside or within their current accommodation, in the process of increasing their own ability to attain an optimum level of independence and taking part in community life.

The description of people within this chapter is split up between the different client groups. However, it needs to be recognized that this chapter only describes a limited section of each client group, i.e. the section with additional support needs beyond low-level housing-related support. For instance, of all people registered in TABBS as having a learning disability, 58% does not have an ECC-LD care assessment. In a high number of cases this will be because their support needs are not intensive enough to trigger ECC-LD's statutory duties; however, they may well be eligible to generic Supporting People support, for instance tenancy sustainment support or move-on support for vulnerable home leavers.

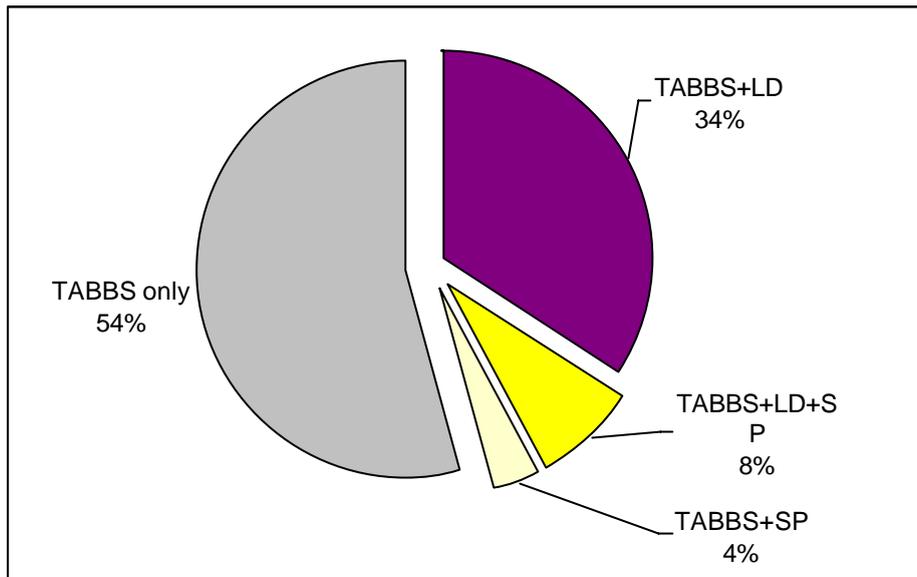


Figure: Estimated distribution of people with Learning Disabilities between two support and care providers, ECC Learning Disabilities Team ("LD") and Essex Supporting People ("SP"). TABBS is an Essex-wide voluntary database of people with Learning disabilities.

Each individual has different needs and aspirations, which vary over time and therefore requires different levels and ranges of support and care. In this document we are using the term "Care" when the main aim of the service is to help sustain an individual's level of independence, whereas the main aim of "Support" is to increase an individual's level of independence. These support needs are not static and will continually fluctuate throughout their lifetime especially so at a time of crisis or emotional distress. There is generally a need for high intensive support during the transition phase, for instance into more independent accommodation, to ensure as easy a transition as possible and the development of the necessary skills for more independent living.

In rural parts of the county, vulnerable people live in areas with a poor social infrastructure, without shops or access to public transport, resulting in isolation and dependency on others for lifts. The cost of providing support services in such areas is also more expensive as support workers need to travel significant distances to reach service users.

This set of services is currently receiving the highest level of spend per client, typically at £100 per client per week, but 46% of services cost over £250, the large majority of services comprising of Supported Housing for people with Learning Disabilities. Currently, over a third of the budget is spent on 8% of Supporting People's clients (Figure 1,2)¹.

¹ The capping of supporting people services at £350 per client per week (see section 4.2) is projected to decrease the proportion of spend from 36% down to 33%.

People with Physical and / or Sensory Disabilities

People with physical disabilities and sensory impairments should have choice in accessing housing and support services to meet their individual needs throughout their lifetime, through all tenures and usual routes into housing, within their own communities. The ability to attain an optimal level of independence requires that the environment and accommodation that they live in is conducive to this. To achieve this it is essential that people with physical and/or sensory disabilities are not seen as one homogenous group as has been the tendency in the past. The support and housing needs of an individual with a physical disability will be starkly different to an individual with a sensory, the same is also true for people with different types and ranges of disabilities within these groups.

People with Learning Difficulties

The style and approach to the provision of support to people with learning disabilities has changed radically over the last few years both nationally and within Essex.

The driving force nationally since 2001 has been Valuing People: "Expanding the range and choice of housing, care and support services is key to giving individuals more choice and control over their lives." People with a Learning disability want places to live which have security and which they can call their own. Family carers want to be able to plan and secure the long term living arrangements for their sons and daughters. The Listening to People consultations and the Listening to People evaluation of supported accommodation showed that this is one of the highest priorities for people with a learning disability.

The main Supporting People service for people with Learning Disabilities is Supported Housing. This ranges from group homes to individual flats. For a large number of people living in small numbers or individually with others with similar needs close by is the most desirable. Social interaction and support from others with similar needs in a community environment is extremely important to an individual's ability to cope and maintain their level of independence. Supporting People currently funds a whole spectrum of service size.

Table: National indication of where will people reside currently¹

Accommodation	Approx*
Adults living in the parental home.	50 %
In residential care homes	30 %
In supported housing shared and s/c	12 %
In adult placement	4 %
In NHS care	4 %
Total	100 %

* N.B. There is a recent trend towards supported living, although this is not quantified.

Supporting People provides support to 12% of Essex' population of people with Learning Difficulties, which is in line with the national average¹. Two-thirds of the 800 LD clients of Supporting People are receiving support or care from ECC-LD as well. Even after the push to moving people out of residential accommodation just under a third of people with Learning Difficulties are still in residential care and a half are living at home.

The current level of cost and intensity of Supporting People services for people with Learning Difficulties is recognized as being disproportionately high, partly due to the history of establishing THBS and Supporting People funding as well as the closure of LD hospitals, which meant a high level of need of people requiring assistance in establishing their new level of independent living. Both of these change processes are reaching steady state, which present a suitable opportunity to review costings and patterns of service delivery. The decline in the number of people with Learning Difficulties living in residential accommodation has not only benefited the individuals concerned but the reduction in the need for high levels and intensity of care has reduced the funding required by ECC-LD and Health. To reduce the number of people in residential accommodation further would mean that significant funding would need to be available.

People with Long-Term Mental Health problems

A stable and a decent home is key to sustaining an individuals ability to maintain their home and take part in community life. Adequate housing and income were key factors identified by Service Users as stated by The National Service Framework for Mental Health. For people with long-term mental health problems there needs to be ongoing and varying levels of support to ensure the individual can maintain their level of independence and not enter into a downward spiral.

Financial strain and the worry of ensuring that rent and bills are paid and isolation caused by relationships breaking down are major factors for an individual feeling that they are unable to cope. The Social Exclusion Unit states that: "One in four tenants with Mental Health problems have serious rent arrears and risk losing their home." Mental Health and Social Exclusion, June 2004. Financial advice and support to accessing local social support networks within the community are key factors in ensuring that an individuals mental health problems are not heightened.

The Robson Rhodes Review recommended Supporting People programmes should undertake fundamental Strategic Reviews of four main types of service including services for people with mental health problems. This documents proposes that review should not take place until 2006/7 to give chance for these new services to 'bed-in'.

¹ Valuing People/ODPM Supporting People Announcement; TABBS 2004

Potential Risks to Current Provision and Contingency Plans

- Review and assessment of current levels of funding for high cost services.

Contingency plan: Joined up working and joint commissioning of services between ECC-LD and Supporting People.

- Decommissioning of services

Contingency Plan: Assessment of impact of not funding the service.

Identified Gaps in Service Provision

Specialist services for people with Physical and or Sensory Disabilities Lack of specialist services has meant that people have either had to remain in the family home, enter residential care or enter services that cater primarily for Older People and people with Learning Difficulties when this may not be the need of the individual. In Essex there are only two services for people with only a physical and /or sensory disability, one in Colchester and one in Braintree. The lack of services has means that carers and service users are unable to plan for the future. The implementation of the Supported Housing index, which registers individual's support needs, is key to ensuring that the future development of services and accommodation can reflect these support and housing needs. It also has the potential to improve the allocation of homes that are already adapted to match people's physical requirements.

- **Home Improvement Agencies.** There is a continual need for HIA services from people with Physical and / or Sensory Disabilities. Improving the efficiency of HIA's will help maintain and increase an individuals independence through adaptations to their home and signposting to safe services, as mentioned in section 3.4 Older People with Support Needs. A delay in adaptations and risk assessments could result in accidents and ultimately hospital admittance, placing strain on Health.
- **Floating Support for people with Mental Health problems.** There is currently a lack of floating support provision in Essex for people with Mental Health problems. Accommodation based support tends to be higher intensity indicating that low intensity support is under supplied. Group homes and shared housing are not always desirable and can often exacerbate an individual's mental health problem as quite often people do not always want continual social contact or the stigma attached with the label of mental health.

Supporting People has further identified a number of key actions to address issues for people with LD and long-term care/support needs:

- **Joined-up working.** Supporting People with ECC-LD needs to establish how the cash limited Supporting People funding can best help to reduce support costs through decreasing clients needs for intensive care and support.
- **Service Review and Care Assessments.** Through the Supporting People service review programme and a coordinated care assessment review programme of the County's Learning Disabilities team, it is expected that

anomalies in the current funding patterns will be addressed, including the identification of double-funded services. Until these anomalies are addressed and a sustainable costing is established for Supporting People services for people with Learning Disabilities, Supporting People will focus on improving its management of current contracts and is unlikely to engage in further investments for this client group.

- **Joint Commissioning** To ensure a seamless service where the individuals needs and aspirations are met joined up working and joint commissioning of services between the Supporting People Team and the ECC-LD Team is essential. Discussions are focusing around contracts in which a percentage of the service will be funded by Supporting People and the rest of the service will be funded by the ECC-LD Team. The percentage split would depend on the agreed level need for Supporting People's low-level housing related support, as well as the budgetary constraints that Supporting People and partners would face.

The agreed "level of need" would be based on the average need across a number of service users and the contract time period. Outcomes from the joined-up service reviews and care assessments will provide good information for this discussion.

Services Being Developed

None using Supporting People funding at present. Undertaking a Strategic Review as recommended will provide more clarity about future likely needs

3.8 BME Issues

Strategic Links

Race Equality Strategy

Cross-Authority Statement of Supporting People in East of England Region

Cross-reference to other sections of this Strategy

Section 2.3: Key Themes

Section 3.11: Refugees

Section 3.13: Travellers

All Sections

Context

People from minority ethnic communities make up just 5.5% (2.9% non-white) of the total population in Essex – much lower than both the national (9%) and regional averages (In Luton it is as high as 35%). Furthermore, people from minority ethnic communities are dispersed throughout Essex. Although there are concentrations in the urban areas of Essex and those areas geographically close to London (i.e. Harlow 5.1%, Epping Forest 4.9% non-white). However, the black and minority ethnic (BME) population is growing, from 1% to 3% between 1991-2001, and the 5-year Strategy needs to focus particular attention on their service needs, especially those of BME elders.

A study has been carried out in 2004 by Salford University called 'Facing the Facts'. This study was commissioned by the Essex Housing Officers Group (EHOG), and informs the rest of this section.

During their research, Salford University were in contact with all of our service providers. Few of the service providers were able to comment in an informed way about the issue of access to services for BME groups, except to comment generally on the low-take up of services. This was seen to reflect a number of issues including:

- A perceived lack of knowledge on the part of the BME communities concerning the range of services that were available;
- The lack of culturally sensitive services which were subsequently seen as being potentially discriminatory by BME groups; and
- The lack of front-line staff from the BME community and the implication that the service was white dominated and white centred and as such 'unwelcoming' to BME people;

It was suggested that historically few BME people had used their services and it was felt that such community groups had had to rely on self-help.

None of the service providers had established specialist services catering specially for BME communities. Some of the organisations were, however,

supportive of such developments provided that sufficient demand for such services could be demonstrated. In contrast, others strongly opposed what they felt was a separatist approach, which further served to only marginalised BME communities. This latter group preferred an approach, which ensured that mainstream services were inclusive of all communities and were seen as such. Two of the housing associations held the middle ground position, that of developing specialist provision within a mainstream service, for example, employing outreach workers to work specifically with BME communities.

Information from Monitoring and Review Programme

BME issues are addressed as part of the service review programme. In addition, client record returns can provide an insight in the relative access of people with a BME background to Supporting People services, but the quality and rate of return is not yet sufficiently good to use this information.

Identified Gaps in Service Provision

The Salford University study found that amongst service providers there was limited recognition for the need for any specialist BME services in Essex. Nevertheless, over half of those interviewed did feel that there might be a need for specialist services for some groups including:

- Asian women and BME women generally fleeing domestic violence. This is also recognised and addressed in the cross authority statement.
- Older Asians, given the changing pattern of extended family living among this community which could result in older members of the household requiring independent accommodation. However, some of the service providers were not convinced of the need for separate accommodation for older people from each of the minority groups suggesting instead that a facility for older BME people would suffice.

" I think there might be a need for independent housing for older minority people. It would be good to mix the cultures"

- Young people with support needs.

However, there was a lack of clarity generally concerning the type of provision necessary, who should provide it and where it should be located.

- **Needs Assessment:** It is vital that during the consultation period we should firmly establish if specialist services are needed in this area, and to what extent BME-specific need can be addressed through improving access to existing services and increasing their sensitivity to BME issues.

Services Being Developed

None at present.

3.7 People with HIV / AIDS

Strategic Links

The National Strategy for Sexual Health and HIV Implementation Action Plan, Department of Health, 2001.

Cross-reference to other sections of this Strategy

Section 2.2 Strategic Partnership Working

Section 2.3 Key Themes

Context

In Essex there is no real provision specifically for people with HIV/AIDS. However, people with HIV/AIDS are an identified primary group under the ODPM Supporting People Programme. Supporting People has no schemes in Essex with this area as either their primary or secondary client group.

A number of key people in this area (i.e. specialist social workers) say that this condition is, and can be, provided for under the banner of physical or sensory disability or in a mental health scheme. This is because the actual condition is usually under control, but the housing needs are far more closely related to these primary client groups.

Furthermore, a large bulk of those who may require specialist housing and have HIV/AIDS are not going to be eligible due to their immigration status. A rough estimate by social workers is that this could be up to 70% of those in need. These people would be wary of contacting an authority for assistance.

Potential Risks to Current Provision and Contingency Plans

There is no housing support service currently operating in Essex, although there are people known to be suffering from the condition. Without a housing support service some of these people must be seen as vulnerable.

Identified Gaps in Service Provision

There are no services currently operating in Essex.

- It is vital that the consultation period should firmly establish if specialist services are needed in this area and if so, in what ways would they be referred into our services.

Services Being Developed

None at present

(Intentionally blank page)

3.8 People at Risk of Domestic Violence

Strategic Links

Cross-Authority Statement for Supporting People in the East region (Appendix 4)

Salford Study – Domestic Violence

Essex Against Domestic Violence. The plan of Action.

Cross-reference to other sections of this Strategy

Section 2.3: Key Themes

Section 3.1: People who are Homeless

Section 3.6: BME issues

Section 3.10: Travellers

Context

Domestic violence services respond to homelessness in a variety of ways. Refuges provide safe temporary accommodation by providing emergency support to those fleeing domestic violence, floating support provides support once someone has been re-housed. Domestic violence occurs across society, regardless of age, gender, race, sexuality, wealth and geography. 1 in 4 women as well as some men, will suffer domestic violence at some point in their lives¹. It is predominantly women who suffer. On average a woman will suffer serious abuse and assault around 35 times before she reports it to the police.

Supporting People is about providing the right services at the right time, but it is also about prevention. Early intervention can be key to ensuring peoples safety. In the longer term this can also prevent costs from falling on to other services and help aid the achievement of wider community plans. The development of floating support services has been a significant contribution of Supporting People to the provision of Domestic Violence services in the County.

Those seeking refuge may well seek that help outside of their local authority so there will inevitably be a cross over between authorities. With Supporting People authorities in the East of England region, Essex Supporting People has developed a common strategic approach to cross-authority issues. Through developing services any provision must take in to account natural boundaries and communities and aim to reflect local linkage where practical.

Service providers for this service user group identify the lack of 'move-on' accommodation as a significant problem. Service users become prevented from developing greater independence at the point when they are ready to move into less supported accommodation. Without any support they are likely to struggle and become more vulnerable. Move-on accommodation could be in the form of 'core and cluster' provision of transitional housing, or by

¹ ODPM Safety & Justice Proposals on Domestic Violence, 2003

developing floating support services that enable service users to move into general purpose housing whilst still accessing support.

Potential Risks to Current Provision and Contingency Plans

The provision of services for those people escaping domestic violence is relatively mixed across the County as shown in Table 1. The table includes Direct Access hostels because these can provide emergency access for people who can not stay in a women's refuge, e.g. men escaping DV, or women with complex needs.

Table 1. Supply: Locations of Supporting People Services in Essex Districts and Boroughs (number of service units)

ESSEX (Service units)	Thames Gateway South Essex		London Commuter Belt				Greater Haven Gateway			Grand Total
	Basil don	Rochford & Castle Point	Brent wood	Chelmsf ord	Epping Forest	Harlow	Braintree & Uttlesford	Colchester & Tendring	Mal don	
Direct Access Hostels	-	-	-	8	-	-	14	19	-	41
DV Floating Support	32	-	-	35	10	18	8	-	-	103
Women's Refuges	24	-	-	12	-	48	10	8	-	102
WEDV Accommodation with floating support	-	-	-	-	-	-	-	17	-	17
Grand Total	56	-	-	55	10	66	32	44	-	263

Roughly half of the service units that are funded by Supporting People consist of Women's Refuges that provide emergency access and intensive support. These are predominantly located in urbanized areas.

Development of floating support-type services help to reach into areas that are less densely populated.

Floating support services also offer support for victims in terms of prevention, early intervention and after-care, as well as providing a larger degree of flexibility to tailor service delivery to specific client needs.

Identified Gaps in Service Provision

Move on

One of the critical elements in delivering services along the "support pathway" is the limited availability of move-on accommodation and suitable housing for families with older children seeking refuge. The provision of women's refuge spaces in Essex will be on the Government's target of 1 bed space per 10,000 people by 2005/2006¹. Nevertheless, in the absence of sufficient move-on, service blocking still occurs. This is not directly evident from the turnover figures

¹ BVPI176, as reported to the Essex County Council Report

for the refuges, because of the high variation in nature and length of stay of individuals. The shortage of move-on accommodation is shared with other service user groups and is something that needs to be addressed with Supporting People partners in housing departments.

Refuges

The availability of safe secure accommodation for women, either as a respite or as a stepping stone to re-housing is critical and potentially life saving. Refuges across the county have an important role to play in the provision of safe accommodation at a time of crisis for women and their children.

Refuge provision is neither the only, nor the main source of accommodation for homeless women and their families. In March 1999 in England there were over 7,000 households living in temporary accommodation who were homeless because of domestic violence¹. While there was considerable variation at a regional level, only 15% were in refuges. The rest were living in other forms of temporary accommodation - 25% were staying with friends and relatives; 30% were in temporary council or housing association properties; 13% were in hostels and 6% were in Bed and Breakfast hotels.

A small number of additional units will therefore be very useful. In particular, any new refuge provision should be sensitive to the needs of travellers in particular. It has been found that this group do use refuges, most commonly as a respite to recover from physical abuse, but do not tend to go on to permanent housing.

Cross-Boundary

Of the different service types for people escaping domestic violence women's refuges have the largest cross-boundary component, because many who suffer domestic violence wish to find refuge away from home. Women's refuges therefore have an established national network that places people in appropriate locations.

For the East Region, initial returns suggest that about a third of women escaping domestic violence accepted into Supporting People-funded refuges come from outside each of the Supporting People areas², although the majority is still referred from within the Region.

Essex has a relatively low percentage of black and ethnic minority population, however the cross-boundary nature of refuge services means that these need to be accessible for a relatively high proportion of people with a black or minority ethnic background. Anecdotal evidence suggests that there is a shortage in accessible services for women from an Asian background.

³ ODPM: The Provision of accommodation & support for households experiencing domestic violence in England (2002)

² SP Client record returns 2003-2004

Floating Support

Crime statistics show reported incidents of domestic violence are on the increase in recent years. However, little information is available to estimate the hidden need for preventative, floating or accommodation-based support. There are also certain to be underestimates as to the true extent of domestic violence due to under reporting of incidents.

Floating support for survivors of Domestic Violence can deliver support to those

- who can not be accommodated in women's refuges, because of their complex needs, their potentially disruptive behaviour, or because they are a large family, or because they have older children;
- who are staying with friends or relatives, in general needs housing or other temporary accommodation.

Some areas of outreach work not delivered under support plans are not funded by Supporting People. However, these 'holistic' floating support options are necessary because they respond to victims changing needs and circumstances, and the dangers they may face at different times.

Services Being Developed

There are currently two pipeline schemes being developed in Essex, which will receive Supporting People funding. The first is Colchester and Tendring Women's Refuge, which will have 12 units, and the second is Castle Point & Rochford Women's Refuge, which will have 5 units.

3.9 Refugees

Strategic Links

- Race Equality Strategy

Cross-reference to other sections of this Strategy

Section 2.3: Key Themes Section 3.14: BME Issues

Section 3.7: People with HIV/AIDS

Context

There is little information available for the Essex area and there are no services or provision for this client group at present. We are awaiting a regional study by commissioned by EERA that aims to: -

- Identify the housing needs and aspirations of refugees;
- Evaluate access to housing for refugees;
- Assess the impact of refugees on the demand for housing;
- Develop a model for predicting future needs in the region.

A progress report is expected by the end of January 2005.

According to 2001 census data, those who migrated to Essex from outside of the UK numbered only 0.5% of the overall population. The East of England region as a whole only had 0.7% of its population as migrants from outside the UK. This is a very small group and so far has not been provided for.

However, a large number of those inside this client group may be here illegally and there is certainly going to be a 'hidden' element. Even though they would not qualify for Supporting People help per se, they may have an effect on our services. For example, as mentioned in the next section, a number of people with HIV/AIDS are going to be illegal immigrants.

Potential Risks to Current Provision and Contingency Plans

We have no current provision or contingency plans.

Identified Gaps in Service Provision

None at present. Much depends upon future Government policy and the influx of service users.

Services Being Developed

None at present

3.10 Travellers

Strategic Links

Cross-Authority Statement for Supporting People in the East of England Region (App 4)

Cross-reference to other sections of this Strategy

Section 2.3 Key Themes

Section 3.8: People at Risk of Domestic Violence

Context

A number of districts in Essex have recently faced increasing numbers of gypsies and travellers settling within their administrative area. This has resulted in a number of unauthorized sites being developed, followed by enforcement action and, in certain cases, eviction. The increasing evidence of unauthorized sites indicates that the number of permanent sites is inadequate, and that there may be a requirement for additional sites.

There have been a number of recent planning appeal decisions in Essex and nationally concerning sites occupied by gypsies and travellers. Recently, the ODPM declared that they would not be forcing councils to provide legal sites for gypsies and travellers, despite a report by an ODPM select committee, which finds that local councils are unwilling to provide legal sites voluntarily. Instead the government is going to adjust the Housing Bill to require local authorities to carry out needs assessments for travellers and to include them in their housing strategies. This is currently being debated in the Lords.

Potential Risks to Current Provision and Contingency Plans

The issue of qualification for Housing Benefit still applies if a service were to be developed to provide support to existing sites. Because potential services to this relatively stable population would be long-term, tenants not eligible for Housing Benefit would have to be charged whilst others would be exempt. There is the potential to create major difficulties and resentment on sites.

Identified Gaps in Service Provision

Work is ongoing on a Regional level as expressed in the cross-authority statement (Appendix 4). A regional practitioners' workshop on Supporting People services for Travellers will be held this year, which aims to identify potential for harmonization of services across the county and best practice.

It is known that travellers use women's refuges quite frequently. Usually just as a place for respite, it will rarely lead onto permanent housing. But this is an area in which future provision should include provision for female travellers.

We are currently awaiting the completion of research into gypsy and travellers' housing needs that was commissioned by Essex County Council, Thurrock Borough Council, Southend-on-Sea Borough Council and the Essex District

Councils. A questionnaire has been recently circulated to all districts requesting details of current authorised and unauthorised sites within each district, together with details of any current planning applications and appeals. Responses have been requested by 6 September 2004, and will be made available to the consultant, the results of which will help determine our policy in this area.

Issues that have been identified are:

- Emphasis on sharing good practice on service provision.
- Literacy support, especially for older people
- Advice on and access to welfare services.
- Health and Safety and environmental issues
- Access to housing registers
- DIY and relationship counselling
- Racial harassment and neighbour nuisance

Services Being Developed

None at present

(Intentionally Blank Page)

SECTION 4: DELIVERY , COMMISSIONING AND TIMESCALES

4.1. Commissioning

To repeat a message from the introduction section of this document, the consultation process is an important one. The Commissioning Body will take a lead from the consultation to shape and define which services in which areas should be given priority. Those decisions will affect Supporting People services Essex for years to come.

The 5-year Strategy will include a detailed description of the agreed commissioning priorities for the next five years. It will also describe the identified risks to current services and contingency plans to meet those risks.

The Strategy will identify the commissioning priorities and opportunities for the next five years based upon the results of the consultation process. This will include a statement of the financial projections to underpin the Action Plan.

The Strategy will also refer to the Supporting People Commissioning Strategy, which will address

➤ **The Commissioning Process:**

- Use of different commissioning formats, such as joint commissioning, partnering and tendering;
- Developing the provider market (including the range and mix of providers);
- Developing a system of risk assessment so there is not an over-reliance on particular providers;
- Using technology to increase efficiency.

➤ **Contract specifications, including**

- Contract stability (3-5 years);
- Contract arrangements which reflect the range of providers and potential service users;
- Clear, agreed standards and evidence of continuous improvement;
- Flexibility of contracts that reflects the nature of partnership working and referrals.

➤ **Contract implementation:**

- A transparent system of monitoring;
- Regular and timely payments;
- A support and advice service to smaller providers.

The consultation process will help identify the priorities for the Action Plan and influence the Strategy. Section 4.3. lists the different strands of the consultation process. We will ask local partners and users to propose local opportunities for development to be included in the Essex Supporting People Action Plan, especially through the Local Core Strategy Groups and Focus Groups.

Section 4.4, at the end of the document provides contact details to enable you to contribute to the process; further details will also be posted on the Essex Supporting People website:

<http://supportingpeople.essexcc.gov.uk>

4.2 Commissioning New Services: the SP Development Fund

Supporting People needs a Development Fund if it is to commission new key services that help to build a service portfolio that reflects our key priorities. If Supporting People is to generate a development fund, savings over and above the ODPM targets are required. Based on the savings required and feedback from the Consultation period the Commissioning Body will propose the size and format of the Development Fund.

Supporting People invited providers and commissioning agencies to submit Expressions of Interest for service developments. These are compared with Supporting People's strategic aims and have helped us to identify which key priorities are identified by providers; how these match the needs that were identified through other sources; where there are opportunities for service development.

A summary of the returns is given in the Table below. The returns show that partners are identifying opportunities for development in key service and regional areas. The largest group of development proposals being aimed at young people and chaotic life styles, and at floating support and move-on services across most client groups.

Table: Expressions of interest for Supporting People funding by client group and housing sub-regions: Annual Contract Value as provided (£) and number of service units. The number between brackets indicates the number of bids received.

Sub-Region	Home less ness	Chaotic Life Styles	Young People	Long-Term Dependency	Older People	Other	Grand Total
Greater Haven Gateway	£269,919 38 (2)	£62,080 36 (4)	£227,592 16 (2)	£143,517 18 (3)	£163,761 101 (2)		£866,869 209 (13)
London Commuter Belt	6 (1)	£538,313 52 (5)	£590,267 56 (6)	£320,161 37 (4)	10 (1)	£669,417 14 (1)	£2,118,158 175 (18)
Thames Gateway South Essex		£21,520 20 (2)	£647,346 30 (3)	£256,475 40 (5)		£37,268 35 (3)	£962,609 125 (13)
Total Cost	£269,919	£621,913	£1,465,205	£720,153	£163,761	£706,685	£3,947,636
Total Units	44	108	102	95	111	49	509
Total Bids	(3)	(11)	(11)	(12)	(3)	(4)	(44)

4.3: Taking Part in the Consultation Process

Progress So Far

The development of this consultation document has in fact been part of the consultation process itself.

Internal Consultation

Progress has been discussed in local Core Strategy Groups, the Essex Core Strategy Development Group (which includes representation from partners on a Senior Officer level) and the Commissioning Body (representation on Member level). These meetings produced valuable steer and highlighted key issues that were incorporated in the Consultation Draft.

Partner Consultation

Contents of the document as it developed have also been discussed with leaders and forums of other associated strategy developments, such as sub-regional Housing Strategies; the Essex Local Strategic Partnership; the SHA and PCTs, Supporting People Cross-authority Groups; Essex Housing Officers Group and their BME Action Group; the Essex Drug Action Team and others.

Providers have contributed to the development through the provider workshop in May, but also through their response to the invitation for Expressions of Interest and ensuing discussions.

User Consultation

Finally, the document has benefited greatly from contributions from the Supporting People user participation programme. A list of key issues raised is listed in Appendix 1.

Future Consultation

This document forms the focus of consultation to inform the contents of the 5-year Strategy. It was launched in November and the consultation period is across December, January and into the first week of February. The intention is to ensure that the process of developing the Supporting People Strategy remains transparent, inclusive and open to local debate.

There are four strands to the consultation process, which will run to the first week of February:

Review at Local Core Strategy Groups (LCSGs).

Local Core Strategy Groups are part of the Supporting People strategic decision tree and in this role they are asked to discuss the consultation draft and compare it with their local action plans. The local scrutiny of is important to compare the strategy with local Supporting People-related activities that are a priority for, amongst others, the Local Strategic Partnership.

Provider Consultation

A number of Forums are planned to consult providers on their views and suggestions for the priorities as proposed in the consultation draft. This includes a Providers Forum on 15 November, the Inclusive Forum mid-December, and the presentation of the Commissioning Strategy on 15 January. Providers are also encouraged to provide feedback through questionnaires that will be distributed at the start of the consultation process.

Focus Groups on key service development

The Consultation Draft proposes key service developments for services for people with chaotic life styles, vulnerable young people and homelessness, but predominantly on an Essex-wide scale. The opportunities and constraints for re-modelling Older People services will be location-specific and the 5-year Strategy Action Plan will need to address this.

For key service areas in each housing sub-region of Essex, focus groups will be initiated through the LCSGs and will include provider and user representation. Their remit is to discuss

- (1) Linkage between the Supporting People-Essex and local priorities;
- (2) Opportunities for development
- (3) Action plan for the sub-region for the coming 5 years.

Ongoing User Consultation

The user consultation process has been on its way since May this year and is a continuous process of developing user forums in collaboration with key partners from Supporting People, as well as distributing leaflets and questionnaires, and regular contact with user representative organizations. The consultation draft will feed into this process as a priority for discussion.

User participation is ongoing and will be further encouraged to identify key service developments on a sub-regional and local level. The User Participation Officer in the team will take this forward to ensure that as many stakeholders as possible are able to comment on the identified proposals.

During the consultation period there will also be presentations to appropriate forums and meetings with key stakeholders. It is the intention of the Commissioning Body to bring the Consultation Draft to the notice of as many appropriate forums as possible and to give an opportunity for comment on the proposals and to help shape the local Strategy. People are invited to bring other discussion opportunities to the attention of the Supporting People team.

The Consultation Draft Strategy will also be posted on the local Supporting People website with an opportunity for any interested party to comment .

Section 4.4 contains full details of how to comment on this document

Following this period of consultation, the Strategy will be revised in the light of the comments received. The Core Strategy Development Group will formally discuss the revised document and the final draft will be forwarded to the Commissioning Body, which includes Member or Chief Executive representation from all key partner organisations. This process will take place in February and early March. The final approved document will be submitted to the Office of the Deputy Prime Minister by the end of March 2005.

4.4. Responding to the Consultation: Contact Details

We welcome your comments on this document, its contents and the recommendations made.

To make a comment:

- **www:** Through the local Supporting People local website at <http://supportingpeople.essexcc.gov.uk>
Details of how to respond to us are posted on the website.
- **Email:** You can Email the Supporting People Team at Supporting.People@essexcc.gov.uk
- **Email:** You can Email the Strategy Manager of Supporting People at bauke.vandermeer@essexcc.gov.uk
- **Write:** You can write to:
Bauke van der Meer
Supporting People
Essex County Council
PO Box 11
County Hall
Chelmsford CM1 1LX
Marking your letter 'Consultation Feedback'
- **Phone:** Or you can phone us on:
01245 240172 Until 16th December 2004
01245 437857 From 17th December 2004

We look forward to receiving your comments

SECTION 5: APPENDICES

Appendix 1: Outcome-Based Objectives for Supporting People

Outcomes for Service Users.

Supporting People support helps service users to:

1. Sustain Current Accommodation

Key client groups

Homelessness; Chaotic Life Styles; Vulnerable Older People

At the low end of housing related support needs, the risk of losing their current accommodation is an early indicator that vulnerable people may need support to retain their independence. This risk may be due to, amongst others, financial and budgeting problems, behavioural difficulties or deteriorating health that reduces mobility, social contact and safety in and around the home.

Support to help people to solve their accommodation-related issues is an effective inroad to break the cycle of deterioration at an early stage. Practical support that reduces the worries over their accommodation provides people with a level of stability from which they can address other or underlying problems, especially if they are encouraged to do so and are signposted in the direction of the appropriate support services.

The role of signposting is particularly important for BME-groups, as a survey has shown that for this group, awareness and therefore access to support and benefit services is often limited. For older people, signposting to social and practical activities can often have the effect of reducing isolation.

Services aimed at sustaining people in independent accommodation are listed in the Table overleaf. A distinction is made between short-term services, which are aimed at vulnerable people that require support over a finite time period, and long-term services, predominantly for older people, which are designed to retain an optimal level of independence at any stage of the ageing process.

2. Attain Independent Accommodation: Move-on

When people leave specialist support accommodation they often still have a need for support to help them to settle in and establish themselves in their new home. This need tails off over time as people obtain their independence, are able to access services and get support from formal or informal social networks.

The provision of move-on accommodation and support is pivotal in assuring that more intensive support and care services, that are accommodation-based, are not getting blocked by people unable to leave or returning. Without move-on support, people who are ready to leave may not have a suitable place to go to. This reduces services' effectiveness because they can't take on new clients. On the other hand, if people do leave into unsuitable accommodation or don't receive appropriate levels of (floating) support during their settling in process, this can lead to relapses and a revolving-door pattern of support.

Services Delivery and Available Accommodation

Housing-related support during the settling process helps people to “move on” from specialist accommodation into the community. Support during this transitional period tends to be floating support, with support workers visiting people at their new home. Because of people’s background of staying in specialist accommodation, support during move-on (or “resettlement”) differs from prevention and early intervention support on a few points:

- (a) Because clients come from specialist accommodation, there are fewer issues around referral arrangements.
- (b) Joint-up working with specialist partner agencies is key to avoid repeat problems or disruptive behaviour of some clients once they are placed in general needs-type accommodation. A substantial proportion of clients will have had multiple or complex issues that are best dealt with in close collaboration with agencies that were involved at an earlier stage.
- (c) People leaving specialist accommodation require a place to stay. The shortage of places for people to move on is generally accepted to cause blockage of specialist services and to restrict people’s development towards independence.

Table. “Sustaining Accommodation” services in order of increasing support intensity

Early Intervention Services		Older People Services	
<i>short-term</i>	(Client Groups)*	<i>long-term</i>	(Client Groups)*
Floating Support	All client groups, particularly MH, PSD, HMLS-single/families, D&A, Ex-Off, LD, YP@R/LC, Travellers	Community Alarms	OP
		Home Improvement Agencies	OP
		Floating Support - Peripatetic Warden	OP
Home Improvement Agencies	PSD, TeenP	Floating Support - Other	OP
		Supported Housing	OP, OP-MH
		Sheltered Housing	OP
		Very Sheltered Housing	OP, OP-MH
		Extra Care	OP-MH, OP-FE

* Client Groups:

MH	= People with mental health problems	YP@R	= Young people at risk
PSD	= People with a Physical or Sensory disability	YPLC	= Young people leaving care
HMLS	= Homeless; either single people or families	TeenP	= Teenage parents
D&A	= Drugs and/or alcohol related problems	OP	= Older people with support needs
Ex-Off	= Ex-offenders and people at risk of re-offending	OP-MH	= Older people with mental health problems, including dementia
LD	= People with Learning disabilities	OP-FE	= Frail elderly people

2-stage Move-on

The physical accommodation at which Supporting People delivers Move-on support varies and the move-on process can be split in two.

In the first type of move on, people leave specialist accommodation into designated units with short-term let (typically 6 months – 2 years) where they receive tailing off levels of support. This is also called “transitional housing”.

In the second type, people move on to general needs or private rented accommodation, either directly from specialist accommodation or from transitional housing, where they would be able to receive low-level floating support. The long-term nature of the housing provision means that new, appropriate accommodation has to be found or created (e.g. HIA, OTs) as the need arises.

Move-on Needs and Client Groups

The type of move-on accommodation and accompanying floating support that is needed depends on the history of the client and their specific support needs. In discussing move-on accommodation, a distinction can be made between: -

People leaving Home and Long Term Care. There are a number of reasons why young people leave their parental home or care establishment. Those who have been in a care environment may find they need to leave due to reaching adult age, similarly someone in a family home may be asked to leave. There may also be domestic problems, ranging from emotional distress through to physical/sexual abuse. Someone may be forced to leave home for financial reasons, culminating in eviction. Other reasons why someone has to leave their home may include offending or unplanned pregnancy. The young person in question may also have a drug and/or alcohol related problem.

Complex needs. Quite often these factors do not occur in isolation, it can be a combination of difficulties which lead to a young person leaving their home. Any effective provision of support needs to understand the individual factors which have put the person in need of support in that position.

PSD and LD. Asides from those who leave home for the reasons addressed above, there are a number of vulnerable young people, for instance with physical or sensory problems or learning difficulties, who may need help to address this on top of the normal problems associated with leaving home, such as difficulties of finance and stability. People with PSD may need additional help accessing specialist support networks, grants and accommodation. Those with learning disabilities, PSD, or a mental health problem may experience problems with unpredictable behaviour, high susceptibility to negative influences, less life skills and so on. This group is not necessarily going to include just young people either, it could effect a whole age range of people who are in need of some form of care.

People leaving Specialist Services. People leaving specialist services are quite likely to have been affected by one of the factors in the paragraphs above. But by

this point these adults have already entered some form of care/supported housing, and thus have different reasons for moving on.

Foyers

Reasons for moving on from a Foyer for Young People could be that they have reached the end of their tenancy, or the young person in question may feel they have gained sufficient life skills and training to enable them to go onto independent living. Alternatively the person in question may have found the experience of being in a foyer stifling, or found that they did not gain the qualifications or support they required from the foyer. Those who enter the scheme with a drugs/alcohol problem may well leave it with the problem still in existence. They have the problems they entered the scheme with and then leave with a new set of priorities, sometimes positive, sometimes negative. In both instances they will still require support.

Women's refuges

Women leaving refuges have a particular set of circumstances exclusive to them. This includes the need to remain anonymous, re-training, provision for any dependants, counselling, security, financial planning, gaining accommodation and so on. This necessitates a need for strong and consistent resettlement service for at least six months after they leave the refuge.

Other

Other examples include people leaving direct access services, drugs and alcohol services, services for offenders etc. All of these services have their own peculiarities in terms of service users needs, particularly when someone's needs incorporate more than one 'client group' (i.e. those with chaotic lifestyles).

People leaving Hospitals. Upon leaving hospital a number of people may find there are difficulties in maintaining independent living. Someone may have been in institutional care for a mental health problem or a learning disability. People leaving institutional care often need a sheltered environment to attain their independence. Transitional housing can be in the form an alarm, or alterations to an existing house. It could be financial or emotional support for someone who is in alien conditions as a result of their time in hospital, or it could be a sheltered housing scheme.

Lack of this type of support can be a direct reason why they are in hospital for longer than they need, or in some cases why people are in hospital in the first place. Enabling people to move with ease from hospital to independent living is a key task for supported housing, that requires flexibility in transitional and move-on arrangements to suit individuals own pace in regaining independence.

3. Providing Access to Specialist Services

There are several cases in which people can not stay in their current accommodation, either because they are forced out due to circumstance or ability to remain independent, or because they require intensive attention from specialist support services, which is only provided in specialist accommodation.

The move from their own home into specialist accommodation provides people with a safe and sheltered environment, in which they can access

- (1) Housing-related support, both to help them to solve their problems and prepare them for maintaining their independence in the future;
- (2) Specialist Support and/or care that address the root cause(s) of their housing-related problems. This support tends not to be provided by Supporting People, because it is not directly addressing housing-related issues.

The provision of Specialist support, although not directly in the Supporting People remit, is crucial to avoid recurring problems and loss of independence, expressed in a "revolving door" pattern of service users. Therefore, the partnership with agencies and their relevant funding streams is pivotal to ensure that the causes of housing related problems are addressed, and that people are prepared for their move back into independent accommodation. In many cases, therefore, partner agencies will in fact take a leading role in the funding of these services and the provision of specialist support.

4. Achieve a Higher Level of Independence

Key Client Groups

People with Learning Difficulties, People with long term Mental Health Needs, People with Physical and / or Sensory Disabilities.

Many vulnerable people to achieve and maintain their optimal level of independence will need continual long-term support in where they are living. Support needs will fluctuate throughout an individual's lifetime depending on individual needs and life experiences. There will generally be a need for high intensive support during the transition phase from leaving hospital, the family home or higher levels of care into more independent accommodation to ensure that the move is as easier a transition as possible and the individual develops the necessary skills for more independent living.

Isolation and loneliness are key factors that can severely impede independence and an individual's ability to cope. Accommodation that is close to transport routes is essential as many people do not have access to a car, are not mobile enough to drive or if on medication are unable to drive. Without easy access to transport routes people are either dependent on others for lifts or are isolated this can result in loneliness and people being unable to access the doctor and other essential services or go about their day to day life.

The age of an individual can alter their ability and desire to reach a higher level of independence. Younger people often have completely different aspirations and needs to older people. Younger people are generally more willing to move into supported accommodation and are more able to cope with the transition. This is partly due to an increase in expectations of both children and parents and the fact that there is now the chance to achieve this higher level of independence with the increase in services and support to be able to do this.

Appendix 2: Feedback from Service Users and Service User Representative Meetings

Consultation Stage One: Open discussion on support needs

List of cross-referenced statements of need that were expressed at user consultation meetings on Supporting People services in Essex, June-October 2004. Comments marked **in bold** have been directly addressed in the development of the Consultation Draft.

Older People, Frail Elderly, Older people with Mental Health problems.

- **When in sheltered accommodation, do not always want or need a warden. Often enter into sheltered accommodation purely for the social aspect or as an early precaution before they actually need to.**
- **Increase floating support to people in their own home, will reduce the number of older people moving into sheltered accommodation, but can still benefit from the support of a community alarm or a support worker.**
- **Most elderly people want to stay in their home for longer but many need that extra little bit of support.** Advice on personal safety and security and where to access reputable services that can be trusted. BUT must take into account that many people do want to enter sheltered accommodation, especially if the elderly person is living alone.
- Older people who do enter into sheltered accommodation want to maintain their independence as much as possible. Activities to help keep them busy and active such as a swimming pool, access to physiotherapist. BUT also want to go on day trips - and 'not just bingo!'
- **Reduction in mobility around the home also makes people worried about trips and falls, if living on their own fear that will not be found or helped.**
- **Maintenance and repair work, changing light bulbs etc are all difficult etc. Can not climb ladders or lift heavy items such as pots and pans – reduced strength and arthritis makes these daily tasks a lot more difficult.**
- Gardening - often unable to carry out the work themselves and garden gets left undone, unsafe and worried that thieves will recognise that there is an elderly person living there because of the unkempt garden.
- **Social contact is another main reason for people feeling unable to cope – isolation and loneliness. Need links and access to social activities and support groups.**
- Lack of continuity of support workers – continually changing so having to continually tell the support worker of their needs and situation and develop trust. Support workers spend less and less time with you, over stretched and because they have to rush you feel like you are a burden. Often not given a specific time when the support worker will call round so can spend the whole day waiting – very frustrating. Need to be more flexible and arrange a time that will suit the individual.

Young People at risk, Young People Leaving Care, Teenage Parents

- Peer pressure to have parties in their home. People kicked out for playing loud music and annoying the neighbours.
- **Budgeting and managing money and learning how to cook are the main areas where support is needed, especially when you get to 18, receive Housing Benefit and you have access to credit cards and loans, very easy to spiral into debt.**
- Once they have a house many young people once are not bothered about receiving support and are often not in when the support worker comes round –do not stick to the conditions of their tenancy and eventually get thrown out and may end up homeless - revolving door situation.
- Appointments are needed and Support Worker needs to be more proactive in meeting with young people.
- Quite often young people will say they are fine and that they are coping when really they are not.
- Structure of support – support plan, need to set goals that must be achieved.
- There are many stages of maturity – **quite often the young person has not developed these or previously has not been given the opportunity to develop these or has not had a family environment where life skills can be developed.**
- When first move into accommodation often just get the shell of the building with no furnishings and home comforts. Makes the transition to living independently extremely difficult. Help over time with buying furniture and saving money to buy household items before they move into their accommodation, helping to increase ability to save and budget. Then when move on can take the furniture with them.
- **Main reason for leaving the family home – arguments and fighting with family members, eventually leave on own accord or thrown out.**
- **Family mediation and prevention of people leaving home or family break ups – if it is possible.**
- Bedsits are not desirable if they do not have a high level of security and support workers around - people feel vulnerable and isolated, gangs and groups of people – can be intimidating and often it is the gangs in the bedsits that the young people are trying to avoid.
- **Prefer one-bedroom flats to bed sits, more personal space. BUT in the initial stage of living in the bed-sit first and then an individual flat is better as slowly increase your level of independence and have the security of others close by and sharing facilities – but eventually becomes too much.**
- **Like others nearby who have been or are in similar situations, can talk about worries and concerns and help each other. Supportive environment.**
- Lack of affordable accommodation – barrier to moving on.
- Concerns about lack of choice; if re-housed where would you be placed. Enemies and areas where they would not feel safe enough to live in and would feel vulnerable. High crime and vandalism etc
- Very difficult to consider going to university and furthering your education, hard to get your head around the amount of debt that you would accumulate.

Physical and/or Sensory Disabilities

- Have the same needs and aspirations as people without a disability.
- Rehabilitation, help move into own home and arrange adaptations.
- HIA - minor adaptations, signposting to organisations that can carry out adaptations to the home and where to get equipment to make day-to-day tasks easier and more manageable. Safety of home and environment.
- People leaving home need help adjusting – signposting to groups and organisations to provide support and advice – share experiences.
- Knowledge of what is available and choice enables parents and children to plan for housing and support and the future. Children and young people housing and support needs, need to be identified early so that services can be developed in a planned way.
- Need an up to date list of adapted homes – reduce waiting list times and the stress and expense of having these adaptations carried out.
- Range of accessible accommodation to cater for a range of needs.
- Waiting times to enter accommodation is increased due to lack of accessible accommodation.
- Different range of needs depending on level of disability, physical or sensory. Recognising that needs and preferences change and services need to be flexible.
- Tools to communicate with service users, reduce the feeling of isolation and loneliness – Basic Sign Language etc.

People with Mental Health Problems

- Majority of people experience mental health problems from an early age.
- Need help with finances and budgeting – this can often be the main problem and worry about living independently and the main reason for being unable to cope.
- Waiting to move into accommodation and the short amount of time given to decide over property is extremely stressful and can decrease the persons ability to cope.
- Referral is not easy – the doctor is the first point of contact and is the person best placed to advice and refer people.
- Early referral is the key – If mental illness is recognised early on and the relevant support provided this would decrease the likelihood of the mental illness from decreasing and reduce the need for people to enter into hospital or receive higher levels of care.
- Accessing services – little information and knowledge – very difficult especially when at lowest point and in need of help the most. Often do not have the confidence to be able to ring up different organisations and talk to lots of people. Do not want to ask for help.
- Leaving hospital no support provided – feel very isolated and alone, often do not know where to turn need help getting life back on track and readjusting to day to day tasks.
- Doctors, Support Workers, health advisers change too often, there is a high turnover of staff, this means there is not the continuity that is needed.

- Isolation and loneliness, friends and family often do not understand. Need to know where to access support groups and services. Help and advice and support each other, regain confidence and skills to actively participate in society.
- Weekends are the worst as no one comes to see them and makes people feel very isolated and alone.
- Often do not want to talk or speak to anyone.
- Often only need the support worker to call occasionally – but able to call them up if and when needed.
- Forgetful – leave oven on, door open etc.
- **Would rather live in their own accommodation – often do not want to be close to other people with mental health problems or near to mental health services – do not want the attached stigma and do not want their mental health to take over their whole life.**
- Can turn to alcohol and drugs as a way to try and help forget.

Learning Disabilities

- Increasing independence is a positive thing but it is often completely new and people need help to achieve this.
- Children wanting to leave home, sometimes parents are not as keen – worried about the ability of their child to cope. Parents want to make sure that their children get the right level of support and can also feel guilty about their child moving out.
- **BUT some children who are living at home do not want to leave, resistant to change, this resistance increases the older the person is. It is hard to get the message across that parents will not be around forever.**
- It might be possible to encourage children that they would enjoy living away from home if the child could stay somewhere for a trial period a couple of nights a week to begin with. Rather than completely moving into supported housing have the opportunity for a slow transition.
- **Like living with others with similar needs around and in small numbers, help support and advice each other. But do not want to live in larger group homes.**
- **Given the choice would want to live with people that they know. Even if they prefer to live on their own still like the support of others nearby. Need interaction and people who care about them around them, share problems and to meet up with people.**
- **Suitable support when leave home/care – high level to begin with. Transition is extremely stressful and need the comfort of someone to support and advice them.**
- **Move to somewhere near their family and friends (within their support network), otherwise feel completely isolated.**
- **Need someone to talk to about their worries, to help them access services and with the day to day running of their home.**

Domestic Violence

- Promote self esteem, provide support so that people do not go back to their partners because they do not feel that they can cope on their own.
- Children – childcare is a major problem and can lead to people feeling unable to cope.
- Children – boys over age of 16 not allowed in refuge.
- Women with multiple needs – can not always be accommodated for in refuges – their needs would not be met and could be disruptive to others in the refuge. Possibly receive floating support.
- Lack of awareness and knowledge of where to access refuges and what they are like. May leave partners or home earlier if there was more available information.
- Domestic violence includes mental, emotional and sexual abuse and is not only physical abuse.
- Move across counties. Main reasons for this are:
 - Wanting to get away from their past and partner.
 - Close to support networks – friends and family near by.
 - Refuges continually full. Waiting times, if able to wait – will wait for a space in a specific refuge, if not will be placed in a refuge across the country that has space – then can move when there is room in their chosen refuge – very disruptive and can be distressing, especially if have children and they have to keep changing schools.
- Refuge place to think and assess situation. Supportive environment, everyone in similar situation, can support each other and help and advice. Especially in evenings and weekends when support workers are not there.
- Help with benefit forms, finding children a school, emotional support, help with any queries or concerns, purchasing products and household items, changing mailing details, changing telephone numbers. Means that there is less stress and less to think about and can develop skills for the future. Gaining confidence to live independently.
- CCTV cameras everywhere – security, not having to continually look over your shoulder, reassuring.
- Move on stage – self contained flats – close to refuge – keep support networks and means can keep job if have one and means that children do not have to move schools – less disruptive for them.
- When move out into independent accommodation - choice of receiving floating support – help to ease the transition into independent accommodation – less stressful and still have someone to help with accessing services, filling in forms etc. Help moving personal items into the house and purchasing furniture.

People with Drug and/or Alcohol problems

- If have children often do not want to approach services – fear that their children will be taken away.
- **Can not always access services if they say have a drug or alcohol problem as landlords are very unwilling to take people on with a drug or alcohol**

addiction. BUT then you do not get help if you do not declare that you have a drug or alcohol dependency so you do not get the support that you need to maintain your tenancy. If there could be a link with support workers before entering a tenancy this might give the landlords reassurance that they will be suitable tenants. This means that the tenant gets the support that they need to be able to maintain their tenancy.

- Rent deposit schemes – are another way to reassure landlords.
- Weekends are the worst time, support workers do not come to see them. If you are not in contact with family and relatives then this makes it worse as this would normally be the time that you would spend with your family. More likely to relapse as friends and colleagues go out, so either go out with them or stay in and drink.
- Many people started taking drugs at an early age, stunts your ability to develop social skills and many hardly have any form of education – little chance of getting a job and breaking the cycle – revolving door syndrome.

Homelessness

- Need support when they leave the hostel, otherwise find the transition to their own home difficult – move on accommodation needed. Help with transition – prevent revolving door situation from occurring.
- People often do not want to be highlighted or people know that they are in a support service.
- Can be on the housing waiting list for years – move from area to area – means that if need to get medication from your doctor or if prescribed methadone etc– can be extremely disruptive and expensive to continually travel back and may lead to relapsing.
- Lack of affordable accommodation – never going to be able to get enough money together – even if renting need to put a lot of money down to begin with, almost impossible to save that amount of money.
- Rent deposit scheme is a good idea, otherwise landlords will not take people with benefits on – need that reassurance of the money up front.
- Bed sits and B&Bs are not desirable, the rooms are small. Violence, safety and security issues – women can be subject to violence and assault by men, if sharing a room or facilities with someone else. Very worrying. Do not experience this so much in the night shelters as there is more supervision and individual rooms. Bed sits often have people with drug and alcohol problems.
- In emergency accommodation and night shelters people can often only stay for 28 days and this is not long enough to get sorted out with work and get enough money together to put down a deposit. People often end up homeless again and the cycle continues.
- Night shelters are seen as safer, with own room.
- Need for more temporary housing available with more stability than B&B and night shelters as it is easier to develop skills and sort yourself out.
- Basic furniture especially kitchen appliances should be included or a scheme. Would like to buy furniture cheaply and be able to store it while waiting to get a house so can buy bits over time. Otherwise very off putting living

without any furniture and do not have the money to buy anything to begin with.

- Need support finding accommodation. Its very disheartening and off putting having to ring around lots of estate agents and landlords and getting lots of knock backs. Help moving into accommodation and while in their accommodation. Feel unable to cope with filling in all the forms and connecting to services, access to support networks, budgeting – need someone to talk to about worries and concerns. Can be difficult to adjust to responsibilities of living in a house.
- Anyone can become homeless. Do not realise that you are about to be homeless until it happens, then it is very hard to get back into society and get out of debt.
- However one of the main reasons is substance misuse. This can start from an early age, and restricts your ability to mature. Many do not have a high level of education and have never had a job, or not for sometime. This means it is extremely difficult to reintegrate yourself into society and many do not want to.
- Nowhere to go during the day and this is especially a problem at the weekends. People end up hanging in pubs and on the streets, especially if not working.
- No one seems to want to help or have the time to help. People feel they are a burden and not valued as a person – decreases confidence.
- If rehoused normally in an area where no one else wants to be, drugs crime and violence are often prevalent. People do not want to live in this kind of area, do not feel safe and secure.

(Ex) Offenders

- Need for accommodation to be available when leave prison with the appropriate support. Otherwise come out of prison with nothing and if nowhere to go re-offend again, or take a drug over dose with the money they are given when they leave prison. Many become homeless or enter in the B&B, bedsit or night shelter accommodation. Need to stop this cycle.
- Many people are clean when they come out of prison then they do not have anywhere to go, either become homeless or get put in a B&B or bedsit – many start taking drugs again or drinking. Can take a lot of will power not to especially if they have nowhere to go and no one to help them. They go back to the life they know and the people that they were with before.
- Need a lot of help when first get out of prison not to undo all the good work that has been done in prison. Need a lot of help not to relapse and to get life on track.
- People often overdose when they get out of prison – not always intentional – if they have been clean in prison do not realise their tolerance levels have decreased so much.
- When leave prison and have no friends or family to stay with and the threat of having no where to go people often re-offend to get put back in prison. They then at least have a place to stay and can access services and receive education.

HIV/AIDS

- Need for support would not be in relation to their HIV but more likely due to other issues such as mental health, physical impairment, learning disability etc.
- Many service users fall outside of Supporting People due to immigration status (no recourse to public funds) although accommodation is often needed under the National Assistance Act 1948. About 70% of their clients would not be eligible for Supporting People funding – Afro Caribbean and immigration status is unclear. For this reason they are very wary of talking to people in authority

Overlapping

- Accommodation that people move into is often just an empty shell – this is not conducive to helping people to maintain their tenancy.
- Lack of support workers and high turn over of support workers – lack of support and consistency.
- Lack of trained support workers to cater for individuals needs.
- Lack of affordable housing and lack of choice.
- Referrals – suitable needs assessment. Flow from one service to the next rather than gaps in support and service, falling through the system and blocking of services.
- Accessing housing and support services is difficult and there is not enough information on what services are available.
- Mobility and accessing amenities and services, lack of available transport and in a remote area can lead to isolation.
- Lack of move on accommodation results in blocking of services

Appendix 3: Reports, Strategies and other Documents related to the Supporting People Consultation Draft.

Client Group	Service User Groups and Client Representative Organisations	Reports and Documents
Older People - Mental Health - Frail Elderly	- Age Concern, Local Pensioners Action Groups	- The National Service Framework for Older People 'Quality and Choice for Older People Housing'. Department of Health, 2001. - Older People Review of Sheltered Housing. - From Welfare to well being – Planning an Ageing Society. JRF. October 2004. - Needs and Aspirations of Older People Living In General Housing. JRF. November 2004.
People with Learning Disabilities	-Local Self Advocacy Groups	- 'Valuing People'. A new Strategy for Learning Disability for the 21 st Century, Department of Health, 2001. - Essex Learning Disability Partnership Board, Housing Strategy. January 2004. - 'When and If' Housing information and support for people with Learning Disabilities and their older Carers. Findings and recommendations. February 2004.
People with Mental Health Problems	- NEST, - InterAct, - Rethink	- Steering Group -Review of Mental Health residential placements, rehabilitation and supported housing. Key contact-Caroline Robinson - Mental Health and Social Exclusion. Social Exclusion Unit Report. ODPM, June 2004. - National Service Framework for Mental Health . 1999.
People fleeing Domestic Violence	- Women's Refuges	- Salford Study – Domestic Violence. - Safety and Justice: The governments Proposal on Domestic Violence, ODPM, 2003 - The provision of accommodation and Support for Households experiencing Domestic Violence in England, ODPM, 2002.
Homeless People - Single People - Families - Rough Sleepers	- Homeless Hostels - Matrix Community Enterprise, Colchester - NACRO	- District Councils Homelessness Strategies. - Homelessness, Supporting People and Substance Misuse in Essex. Executive Summary and Recommendations. Consultants – Andy Horwood, Lynn Horwood and Helen Town. - Poverty and social exclusion in rural East of England: Observatories Social Exclusion Partnership Report 2004. - At the crossroads: Where next for Supporting People and Homelessness? A providers perspective. Rebecca Pritchard. - Single homeless people in London, Crane & Warnes, 2001 - Homelessness and Loneliness: The want of conviviality, Crisis, Lemos Gerard 2000
BME groups - Refugees - Travellers		- Race Equality Strategy. - Traveller Encampments in Suffolk, A Strategy. 2003. - 'Facing the Facts' – Salford University Study, Commissioned by Essex Housing Officers Group (EHOG). -The Survey and Assessment of Gypsy and Traveller Accommodation Needs in Essex – Consultancy Brief, September 2004. - Addressing the Housing Needs of Black and Minority Ethnic People. DTLR - Experiencing Ethnic Discrimination and Service Provision, Joseph Rowntree Federation, 2004.

<p>Offenders/Prisoners Mentally Disordered offenders</p>	<ul style="list-style-type: none"> - NACRO - The Clockwise Centre 	<ul style="list-style-type: none"> - East of England Resettlement Draft Strategy. - National Action Plan, Reducing Re-offending. National Offender Management Service (NOMS), 2004. - Reducing Re-Offending by Ex Prisoners, Report. Social Exclusion Unit, July 2002.
<p>People with Physical and Sensory Disabilities.</p>	<ul style="list-style-type: none"> - Local Support and Social Groups - Essex Coalition of Disabled People 	<ul style="list-style-type: none"> - Respite and Housing and Support Deaf/Blind needs Survey. Tricia Garwood, October 2004. - Services for People with Physical Impairments and Mental Health Support Needs. JRF. May 2004. - Disabled Young Adults and the Parental Home. JRF. September 2003. - Improving the life chances of disabled people. Prime Ministers Strategy Unit.
<p>People with Drug or Alcohol misuse problems</p>	<ul style="list-style-type: none"> - Open Road - %Proof, Colchester - Service User Group organised by DAT. 	<ul style="list-style-type: none"> - Homelessness, Supporting People and Substance Misuse in Essex. Executive Summary and Recommendations. Consultants – Andy Horwood, Lynn Horwood and Helen Town.
<p>People with HIV/AIDS</p>	<ul style="list-style-type: none"> - Terrence Higgins Trust - Specialist Social Workers. 	<ul style="list-style-type: none"> - The National Strategy for Sexual Health and HIV Implementation Action Plan, Department of Health, 2001
<p>Young People</p> <ul style="list-style-type: none"> - Care Leavers - Young Offender - Teen Parents - Other 	<ul style="list-style-type: none"> - ECC Leaving and Aftercare Team - Connexions - Foyers - NACRO 	<ul style="list-style-type: none"> - Teenage Pregnancy Strategy and Action Plan. Social Exclusion Unit, June 1999. - Children's Bill - Children Leaving Care Act, 2001 - Factors that influence young people leaving care, JRF, October 2003. - Population and Household Change Research. Economic and Social Research Council. - The outcome and costs of home start support for young families under stress, JRF, 2004.
<p>All Client Groups</p>		<ul style="list-style-type: none"> - District Councils Housing Strategies. - District Councils Supporting People Strategy/Position statement. - Essex Supporting People County Steer, 2004-2008. - Essex Supporting People Shadow Strategy, 2003-2004. - 'Shaping the future of Essex', Essex Community Strategy, Essex Partnership, 2004-2024 - Regional Housing Strategy - Sub Regional Housing Strategies - Essex Approach - Essex Local Delivery Plan, Essex Strategic Health Authority, June 2003. - Robson Rhodes Review of Supporting People Implementation, January 2004. - Office of National Statistics - Census, 2001

Appendix 4: East of England Regional Cross-Authority Statement

Background

The Office of the Deputy Prime Minister requires all Supporting People Strategies to include a statement about how planning for cross authority services is being carried out. In East Anglia the regional working group for Supporting People Lead Officers (Supporting People Eastern Regional Group or SPERG) has agreed this statement to be included in all strategies in the Region. Cross authority working is coordinated by a Cross Authority Group reporting to SPERG.

The need for cross authority working

Some Supporting People services provide for people who live outside the immediate area or indeed come from a wide area of the region or county. This may be because they are mobile/rootless, have been in an out of area institution, require accommodation away from their normal area for personal or family security reasons, or have had to move out of the area to receive specialist services which can not be economically provided unless they draw users from a wide area.

Work will initially concentrate on services for

- People affected by domestic violence;
- Offenders and ex-offenders;
- Gypsies and travellers.

Other users for whom cross authority provision is most important are single homeless people, people who misuse substances, people with a physical or sensory disability, and people using culturally specific services.

In 2003-4 across the region over a third (37%) of people newly receiving services for people affected by domestic violence in the East Anglia came from outside the Administering Authority (AA) where the service was located - a total of 735 people. 601 people moved in the opposite direction e.g. out of AA's to services elsewhere. For offenders 42 people - 18.6% of new referrals for the client group - moved in and 48 people moved out, and for travellers services, 15 people (18.5% of new referrals) moved in and 7 out.

The proportion of people moving elsewhere to receive SP services is variable across the region - the highest figures are in Cambridgeshire and Peterborough, the lowest in Norfolk and Thurrock.

The aims of cross authority working

- to protect services with a high proportion of out of area users which might not be seen as a local priority
- to coordinate forward planning for such services, in particular for those services which are near the borders of each Supporting People Administering Authority area.

- to inform the Regional Housing Strategy
- to monitor how services are operating

Action Plan for Cross Authority Working – for SPERG, Regional Cross Authority Group and Administering Authorities

Activity	Deadline
Agree structure for cross authority working	September 2004
Agree initial cross authority statements	September 2004
Develop regional client group strategies	July 2005
Develop protocols for sharing local development plans/ review outcomes	March 2005
Develop procedures for joint commissioning of new cross authority services	April 2005
Share experience of reviews	April 2005
Consider forward programme for other client groups <ul style="list-style-type: none"> Single homeless People who misuse substances Culturally specific services 	June 2005

People Affected by Domestic Violence

Introduction

Domestic violence services help to prevent homelessness by providing support to those fleeing domestic violence. Domestic violence occurs across society, 1 in 4 women and 1 in 6 men will suffer domestic violence at some point in their lives¹. Especially women may suffer serious abuse before reporting to the police.

Those seeking refuge often seek that help outside of their local authority so there will inevitably be a cross over between authorities.

Strategic Links

Cross authority planning for domestic violence services intersect with several regional and local strategies, the key ones being national Domestic Violence Policy, (Sub) regional housing strategies and County and District Homelessness Strategies. Linkages with other strategies take place through, amongst others, the County SP Partnerships and Crime & Disorder Reduction Partnerships.

¹ ODPM Safety & Justice Proposals on Domestic Violence, 2003

Objectives for Domestic Violence services

The main aim for cross authority collaboration is to ensure that administrative borders do not impede a range of outcome-based objectives, including:

- Provision of immediate access to good quality safe emergency housing and support.
- Access to good quality childcare that enables victims to maintain or take up work if appropriate.
- Easy access to mainstream health, social care and educational services.
- Provision of suitable move-on accommodation and support following emergency accommodation as soon as practicable.

To achieve these objectives, the SP partnerships need to:

- Move to a situation where all cross authority domestic violence services fully meet the national standards framework for such services promoted by ODPM.
- Work with other statutory agencies to ensure not just joined up thinking but joined up action, including referral arrangements, support delivery and service development.

Supply and Needs Gap Analysis

Roughly half of the Region's SP funded service units for Domestic Violence consist of Women's Refuges. This is the service type for this client group with the largest cross border component, because it receives nationwide referrals. Nevertheless, two-thirds of referrals are from within the East region.

Yet, most victims escaping domestic violence do not stay in refuges; in 1999 only 15% of victims in England did so.¹ Floating support can offer support in other (temporary) accommodation types and intervention points (prevention, early intervention, after-care), however its cross border element is relatively small.

Across service types, key supply shortages have been identified for:

- **Move-on accommodation**, leading to service blocking of specialist accommodation services, especially women's refuges.
- **Suitable housing for families with older children seeking refuge**. This leads to similar service blocking as described above.
- **Support for people/families with complex needs and chaotic lifestyles** who can not always be supported in refuges. They may need floating support on a regular long-term basis to maintain a stable life and to retain their accommodation.

² SP Client record returns 2003-2004

Delivery Objectives

Diversity and Service Planning The SP teams in the region are committed to use a region-wide population profile to plan women's refuges to address the likely demographic and cultural profile of their clients. Service development or re-modelling needs to be based on liaison with neighbouring authorities and a clear information exchange protocol, e.g. outcomes of service reviews and gap analysis.

Charging Counties with a high level of service provision run the risk of receiving a disproportionate number of cross-border placements. Cross-border provision of refuge places continues to be based on relative reciprocity of service provision, i.e. with all counties striving to have equal levels of refuge provision as a proportion of its population (e.g. by using Best Value Performance Indicator BV176).

The relative availability of refuge places is compromised when service blocking occurs. Throughput analysis is needed to identify priority issues, e.g. using quarterly returns by SP providers of the ODPM's performance indicator of throughput (SPI4).

Availability of services to all Victims with (large) families or with older male children are not easily placed. The relative provision of safe accommodation for these groups should follow the same principles of reciprocity as for Women's refuges.

Cross authority Actions

Service Development:

- Sustain and jointly develop a network of needs-based cross authority services. Encourage providers to extend access criteria where possible and appropriate.
- Improve quality and range of safe accommodation and support for victims with or without (large) families, with specific cultural needs or with complex needs.
- Expand floating support and related services for moved-on people. Encourage contracting floating support through support staff in existing refuge provision.

Information Exchange and Partnership Working:

- Regional workshop to ensure input from partner agencies.
- Monitor existing provision, share information about services, track cross authority movement and referral patterns.
- Regional throughput analysis to assess need for move on accommodation.
- Research to improve the picture of regional domestic violence needs where supporting information is required from regional colleagues.

Travellers

There is no dear national policy for accommodating Gypsies and Travellers. Only 30% of local authorities nationally have a written Gypsy/Traveller accommodation policy. This reflects the lack of a specific duty to consider Gypsy/Traveller needs and the tendency to equate Gypsy/Traveller accommodation with site provision only. The transient nature of this client group means that when they do access services, they are unlikely to experience a consistent approach from county to county.

“Local Authority Gypsy/Traveller Sites in England”¹ suggests that compared to the total population Gypsy caravans are disproportionately numerous in the Eastern region. This is reflected in provision of SP services nationally. However, through comparing services across the Eastern Region, there is no consistency of approach to supporting travellers.”

The following aims and issues were identified at a regional workshop that considered how the region could progress and develop services for travellers as a partnership.

- Emphasis on sharing good practice on service provision. Common quality standards.
- Literacy support - especially for older people.
- Advice on and access to welfare services (including health).
- Health and Safety and Environmental Health Issues.
- Access to Housing Registers.
- DV and relationship counselling.
- Site availability networking and movement monitoring.

The Cross Authority Sub-Group will progress some of these issues by holding a practitioner workshop for the Eastern Region in 2005. This will enable AA's to share their knowledge from service reviews, and to look at the variety of provision across the region. In addition the sub group will:

- Analyse available data on sites, current services and migration
- Look at ways to ensure that housing support is available for all Travellers whether living on authorised sites, unauthorised sites, on private land or in permanent housing
- Ensure that the housing support needs of Travellers are looked at in an holistic way by challenging stereotypes and assumptions about the lifestyles of travellers

¹ Centre for Urban and Regional Studies, University of Birmingham, July 2003

The East of England Development Agency (EEDA), as part of their 'Investing in Communities' initiative are about to commission some regional research looking at issues for travellers. Supporting People will contribute to the brief for this research and use the outcome to inform future development across the region.

Offenders and those at Risk of Offending

The role of housing related support services for offenders and those at risk of offending is to assist in Crime Reduction by

- a) providing safety and security for offenders leaving prison, or those at risk of offending
- b) providing safety and security for the community and the offender where it is in the interest of both parties to be housed away from their home locality
- c) providing the opportunity to acquire independent living skills to reduce the risk of re offending

These priorities will be echoed in national and local strategies for Housing, Homelessness and Crime Reduction. However, generally, the needs of offenders in relation to accommodation and support are not well represented. The National Probation Service is currently developing local strategies to plan for the housing and support needs of offenders.

Further work is required if these are to be coordinated into the Regional and local Supporting People strategies, and the regional plans of the Probation Service. Only then can an appropriate response can be made across the region.

Key issues for support services for offenders across the region are

- There is a lack of information on the number of offenders seeking accommodation across the boundaries
- The number of referrals to housing projects identified as focussing on support for offenders, outstrips supply
- Services offering support immediately prior to, and post release are in short supply, and do not act across the administering authorities boundaries
- Offenders present with a range of complex support needs,
- The transfer of PAGS funding to the SP budget leaves the Probation Service with no direct link to ensure access for offenders to accommodation
- Move on accommodation from shared supported housing provision remains a critical issue for this client group, and again can be seen as a cross boundary issue.

Action Plan for Offenders for the Eastern Region

Given the lack of information concerning the number of offenders seeking accommodation outside their home location further work is required to

- a) examine the supply of specific accommodation within the region for offenders
- b) examine the extent to which referrals are made across boundaries within the region
- c) compare the referral and allocation policies across the regions to identify opportunities to improve the access routes into housing with support and removing structural blockages to offenders accessing housing
- d) hold a regional workshop in early 2005 to bring together the practitioners in the field to examine the issues in increasing the supply of supported housing for offenders.

By this time the National Probation Service will have produced their own Strategies concerning the housing and support needs of offenders and this will be used to inform any ongoing work.

Essex Supporting People

**To make a comment,
or to request this document in a different format,
please contact us:**

By Email:

Supporting.People@essexcc.gov.uk

By Post:

Essex Supporting People
Essex County Council
PO Box 11
County Hall
Chelmsford CM1 1LX

By Telephone:

01245 240172 Until 16th December 2004

01245 437857 From 17th December 2004

Further Contact details on page 77

This document is also available on our website:

<http://supportingpeople.essexcc.gov.uk>